

Cyfarfod Bwrdd Iechyd a Gofal Digidol Cymru - Cyhoeddus

Thu 28 September 2023, 10:00 - 13:30

Zoom

Agenda

10:00 - 10:05 1. MATERION RHAGARWEINIOL 5 min

1.1. Croeso a Chyflwyniadau

I'w Nodi Cadeirydd

1.2. Ymddiheuriadau am Absenoldeb

I'w Nodi Cadeirydd

1.3. Datganiad o Fuddiannau

I'w Nodi Cadeirydd

10:05 - 10:10 2. AGENDA GYDSYNIO 5 min

2.1. Cofnodion heb eu cadarnhau o Gyfarfod Bwrdd 27 Gorffennaf 2023

I'w Cymeradwyo Cadeirydd

📄 2.1 DHCW SHA Board Meeting Minutes 20230727 V1-en-cy-C.pdf (15 pages)

2.1.1. Materion yn Codi

2.2. Cofnodion Cryno Heb eu Cadarnhau o Gyfarfod Bwrdd Preifat a gynhaliwyd 27 Gorffennaf 2023

I'w Cymeradwyo Cadeirydd

📄 2.2 DHCW SHA Private ABRIDGED Board Meeting Minutes 20230727 V1-en-cy-C.pdf (4 pages)

2.2.1. Materion yn Codi

2.3. Cofnodion Cryno Heb eu Cadarnhau o Gyfarfod Bwrdd Preifat a gynhaliwyd 10 Awst 2023

I'w Cymeradwyo Cadeirydd

📄 2.3 DHCW SHA Board PRIVATE ABRIDGED Meeting Minutes 20230810 V1-en-cy-C.pdf (4 pages)

2.3.1. i. Materion yn Codi

2.4. Cofnodion Gweithredu

I'w Nodi Cadeirydd

📄 2.4 Action Log.pdf (1 pages)

Richards, Cerys
21/09/2023 10:29:11

2.5. Blaengynllun Gwaith

I'w Nodi *Ysgrifennydd y Bwrdd*

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

2.6. Ffurflen Datgarboneiddio Llywodraeth Cymru

I'w Cymeradwyo *Ysgrifennydd y Bwrdd*

- 2.6i DHCW Decarbonisation Return 2022-23 Annual Emissions.pdf (7 pages)
- 2.6ii DHCW Decarbonisation Return (DCR) JA - Q1 2023-24.pdf (5 pages)

2.7. Ymateb Iechyd a Gofal Digidol Cymru i Graffu Pwyllgor Iechyd a Gofal Cymdeithasol Senedd Cymru a Phwyllgor Cyfrifon Cyhoeddus a Gweinyddiaeth Gyhoeddus ar Adroddiad Iechyd a Gofal Digidol Cymru

I'w Nodi *Ysgrifennydd y Bwrdd*

- 2.7 DHCW Response to PAPAC.pdf (5 pages)

2.8. Diwygiadau i Reolau Sefydlog, Cyfarwyddiadau Ariannol Sefydlog a'r Cynllun Dirprwyo

I'w Cymeradwyo *Ysgrifennydd y Bwrdd*

- 2.8 Amendments to Standing Orders, Standing Financial Instructions & Scheme of Delegation.pdf (5 pages)

2.9. Ymchwiliad COVID-19

I'w nodi *Ysgrifennydd y Bwrdd*

- 2.9 Covid 19 Update-v2.0.pdf (6 pages)

10:10 - 10:40 3. PRIF AGENDA

30 min

3.1. Cyflwyniad Gwrando a Dysgu a Rennir – Dangosfwrdd Diwedd Oes

I'w Dra fod *Cyfarwyddwr Meddygol Gweithredol*

- 3.1 Shared Listening Learning_Last Year of Life.pdf (3 pages)
- 3.1i Shared Listening & Learning Presentation - Creative collaboration presentation DHCW Public Board.pdf (17 pages)

10:40 - 10:55 4. I'W ADOLYGU

15 min

4.1. Adroddiad y Cadeirydd a'r Is-Gadeirydd

I'w Dra fod *Cadeirydd*

- 4.1 Chair and Vice Chair Report Sept 23v1.pdf (7 pages)

4.2. Adroddiad y Prif Swyddog Gweithredol

I'w Dra fod *Prif Swyddog Gweithredol*

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

10:55 - 12:00 5. EITEMAU STRATEGOL

65 min

Richards Cerys
21/09/2023 10:29:15

5.1. Adroddiad Cyllid

I'w trafod *Cyfarwyddwr Gweithredol Cyllid*

- 5.1 TEM-DHCW - SHA Board Finance Report Cover Period 5 Final Ver F-01 new template.pdf (8 pages)
- 5.1i PRES-DHCW SHA Board Finance Briefing Report September 2023 Final F-01 sent 18.9.2023.pdf (21 pages)

5.2. Diweddariad ar y Cynllun Ymgysylltu â Rhanddeiliaid

I'w Nodi *Cyfarwyddwr Gweithredol Strategaeth*

- 5.2 DHCW Board Stakeholder Engagement Strategy Update Sept 2023.pdf (7 pages)

5.3. Strategaeth Gyfathrebu

I'w Cymeradwyo *Ysgrifennydd y Bwrdd*

- 5.3 Communications strategy paper for DHCW SHA Board.pdf (6 pages)
- 5.3i DHCW-Communications-Strategy-2023-2026-English.pdf (34 pages)

5.4. Diweddariad ar Gynllun Gweithredu Strategaeth Datblygu Pobl a Sefydliadol

I'w nodi *Cyfarwyddwr Pobl a Datblygu Sefydliadol*

- 5.4 SHA Board 28.09.2023 POD STRATEGY UPDATE PAPER finalV3finalSJT.pdf (9 pages)
- 5.4i POD STRATEGY UPDATE SLIDES FOR SHA BOARD SEPTEMBER28TH SJT1609FSJT.pdf (6 pages)

Egwyl Cinio

12:00 - 13:25
85 min

6. LLYWODRAETHU, RISG, PERFFORMIAD A SICRWYDD

6.1. Trefniadau Llywodraethu Rhaglen a newidiadau i gyfansoddiad y Bwrdd/Pwyllgor

I'w nodi *Ysgrifennydd y Bwrdd*

- 6.1 Programme Governance - September 2023.pdf (6 pages)

6.2. Adroddiad Perfformiad Sefydliadol Integredig

I'w Dra fod *Cyfarwyddwr Gweithredol Strategaeth*

- 6.2 REP-DHCW IOPR Cover Sheet May-August 2023.pdf (5 pages)
- 6.2i REP-DHCW SHA Board Report 2308-AUGUST2023 v2.pdf (37 pages)

6.3. Adroddiad y Gofrestr Risgiau Corfforaethol

I'w trafod *Ysgrifennydd y Bwrdd*

- 6.3 Risk Management Report.pdf (7 pages)
- 6.3ii Appendix B DHCW Corporate Risk Register.pdf (14 pages)

6.4. Diweddariad ar Gydraddoldeb, Amrywiaeth a Chynhwysiant

I'w nodi *Cyfarwyddwr Pobl a Datblygu Sefydliadol*

- 6.4 SHA Board 28.09.2023 SEP UPDATE PAPER vfinal5SJT.pdf (11 pages)
- 6.4i SEP UPDATE SLIDES FOR SHA BOARD SEPTEMBER28TH SJT1609 no notes version to be used for SHA Board .pdf (6 pages)

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

I'w Nodi *Cadeirydd y Pwyllgor*

- 6.5 DG&S Chair's Report for Board 3 August 2023.pdf (4 pages)

Richards Carys
21/09/2023 10:19:16

13:25 - 13:25
0 min

7. MATERION I GLOI

7.1. Unrhyw Faterion Brys Eraill

I'w Draford *Cadeirydd*

7.2. Dyddiad y Cyfarfod Nesaf

I'w Nodi *Cadeirydd*

Dydd Iau 30 Tachwedd 2023

Richards Carys
21/09/2023 10:29:15

Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal

Cofnodion cyfarfod Bwrdd Awdurdod Iechyd Arbennig (SHA) Iechyd a Gofal Digidol Cymru (DHCW) a gynhaliwyd ddydd Iau 27 Gorffennaf 2023 fel cyfarfod rhithiol a ddarllledwyd yn fyw drwy Zoom.

 10:00 tan 14:30

 27 Gorffennaf 2023

Aelodau'n Bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Simon Jones	SJ	Cadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru (DHCW)
Ruth Glazzard	RG	Is-gadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru (DHCW)
Marilyn Bryan Jones	MBJ	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (DHCW)
Ifan Evans	IE	Cyfarwyddwr Gweithredol Strategaeth	Iechyd a Gofal Digidol Cymru (DHCW)
Andrew Fletcher	AF	Aelod Cyswllt o'r Bwrdd – Undeb Llafur	Iechyd a Gofal Digidol Cymru (DHCW)
Rowan Gardner	RoG	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (DHCW)
Sam Lloyd	SL	Cyfarwyddwr Gweithredol Gweithrediadau	Iechyd a Gofal Digidol Cymru (DHCW)
Clare Osmundsen-Little	COL	Dirprwy Brif Swyddog Gweithredol / Cyfarwyddwr Gweithredol Cyllid	Iechyd a Gofal Digidol Cymru (DHCW)
David Selway	DS	Aelod Annibynnol	Iechyd a Gofal

1Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a

Gofal Digidol Cymru 20230727

			Digidol Cymru (DHCW)
Helen Thomas	HT	Prif Swyddog Gweithredol	Iechyd a Gofal Digidol Cymru (DHCW)
Marian Wyn Jones	MWJ	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (DHCW)

Yn bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Chris Darling	CD	Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru (DHCW)
Joanna Dundon	JD	Arweinydd Digidol Cenedlaethol – Ymgysylltu â'r Cyhoedd (ar gyfer eitem 3.1 yn unig)	Iechyd a Gofal Digidol Cymru (DHCW)
Sam Hall	SH	Cyfarwyddwr Gwasanaethau Digidol Gofal Sylfaenol, Cymunedol ac Iechyd Meddwl	Iechyd a Gofal Digidol Cymru (DHCW)
Nerys Hurford	NH	Cyfieithydd	Gwasanaethau Cyfieithu Nerys Hurford
Michelle Sell	MS	Cyfarwyddwr Cynllunio a Pherfformiad / Prif Swyddog Masnachol (ar gyfer eitem 4.1 yn unig)	Iechyd a Gofal Digidol Cymru (DHCW)
Laura Tolley	LT	Pennaeth Llywodraethu Corfforaethol (Ysgrifenyddiaeth)	Iechyd a Gofal Digidol Cymru (DHCW)
Sara Woollatt	SW	Cydlynnydd Datblygu Partneriaeth (ar gyfer eitem 3.1 yn unig)	Cwmpas

Ymddiheuriadau	Teitl	Sefydliad
Rhidian Hurle	Cyfarwyddwr Meddygol Gweithredol	Iechyd a Gofal Digidol Cymru (DHCW)

Alistair Klaas Neill	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (DHCW)
Sarah-Jane Taylor	Cyfarwyddwr Pobl a Datblygu Sefydliadol	Iechyd a Gofal Digidol Cymru (DHCW)

Acronymau			
Iechyd a Gofal Digidol Cymru (DHCW)	Iechyd a Gofal Digidol Cymru	SHA	Awdurdod Iechyd Arbennig
CEO	Prif Swyddog Gweithredol	DPIF	Cronfa Buddsoddi Blaenoriaethau Digidol
IM	Aelod Annibynnol	IMTP	Cynllun Tymor Canolig Integredig
IOPR	Adroddiad Perfformiad Sefydliadol Integredig	DIAW	Cynghrair Cynhwysiant Digidol Cymru
Caerdydd a'r Fro (CAV)	Bwrdd Iechyd Prifysgol Caerdydd a'r Fro	LIC	Llywodraeth Cymru
LINC	Rhwydwaith Gwybodaeth Labordai Cymru	RISP	Caffael System Gwybodaeth Radioleg
NDR	Adnodd Data Cenedlaethol		

Rhif yr Eitem	Manylion yr Eitem	Canlyniad	Cam gweithred u
MATERION RHAGARWEINIOL			
1.1	<p>Croeso ac Ymddiheuriadau</p> <p>Croesawodd y Cadeirydd bawb yn ddwyieithog i gyfarfod Bwrdd Awdurdod Iechyd Arbennig (SHA) Iechyd a Gofal Digidol Cymru (DHCW).</p> <p>Cadarnhaodd y Cadeirydd fod y cyfarfod yn cael ei ddarlledu'n fyw drwy Zoom. Yn ogystal, byddai'r recordiad ar gael drwy wefan Iechyd a Gofal Digidol Cymru ar gyfer unrhyw un nad oedd yn gallu cael mynediad i'r cyfarfod yn fyw. Roedd platfform Zoom yn cael ei ddefnyddio er mwyn caniatáu i aelodau fod yn weladwy trwy gydol y cyfarfod ac i gyfieithu ar y pryd ddigwydd, gan ganiatáu i aelodau gymryd rhan yn y cyfarfod yn Gymraeg</p>	Nodwyd	Dim i'w nodi

3Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a

	neu Saesneg. Darparodd y Cadeirydd hysbysiadau trefniadaeth ynghylch agweddau technegol ffrydio byw'r cyfarfod, y seibiannau a gynlluniwyd, a'r defnydd o'r agenda gydsynio ar gyfer eitemau 2.1 i 2.8.		
1.2	Ymddiheuriadau am Absenoldeb Nodwyd ymddiheuriadau am absenoldeb gan: <ul style="list-style-type: none"> • Rhidian Hurle – Cyfarwyddwr Meddygol Gweithredol • Alistair Klaas Neill – Aelod Annibynnol • Sarah-Jane Taylor – Cyfarwyddwr Pobl a Datblygu Sefydliadol 	Nodwyd	Dim i'w nodi
1.3	Datganiadau o Fuddiannau Nid oedd unrhyw ddatganiadau o fuddiannau.	Nodwyd	Dim i'w nodi
AGENDA GYDSYNIO — I'W CHYMERADWYO A'I NODI			
2.1	Cofnodion Cyfarfod y Bwrdd 25 Mai 2023 heb eu cadarnhau Penderfynodd y Bwrdd: CYMERADWYO cofnodion cyfarfod y Bwrdd a gynhaliwyd ar 25 Mai 2023.	Cymeradwyd	Dim i'w nodi
2.2	Cofnodion Cryno Heb eu Cadarnhau o Gyfarfod Bwrdd Preifat a gynhaliwyd 25 Mai 2023 Penderfynodd y Bwrdd: CYMERADWYO cofnodion cryno preifat sydd heb eu cadarnhau o gyfarfod bwrdd 25 Mai 2023.	Cymeradwyd	Dim i'w nodi
2.3	Cofnodion heb eu cadarnhau o Gyfarfod Bwrdd Eithriadol a gynhaliwyd 22 Mehefin 2023 Penderfynodd y Bwrdd: CYMERADWYO cofnodion cyfarfod eithriadol y Bwrdd a gynhaliwyd ar 22 Mehefin 2023.	Cymeradwyd	Dim i'w nodi
2.4	Log Gweithredu Penderfynodd y Bwrdd: NODI'R log gweithredu.	Nodwyd	Dim i'w nodi
2.5	Blaengynllun Gwaith Penderfynodd y Bwrdd: NODI cynnwys y Blaengynllun.	Nodwyd	Dim i'w nodi
2.6	Ffurflen Economi Sylfaenol Penderfynodd y Bwrdd: NODI cynnwys y Blaengynllun.	Nodwyd	Dim i'w nodi
2.7	Diweddariad ar yr Ymchwiliad i COVID-19 Penderfynodd y Bwrdd:	Nodwyd	Dim i'w nodi

	NODI'R Adroddiad Diweddarau ar yr Ymchwiliad i COVID-19		
2.8	<p>Adroddiad Crynhoi Cynnydd Rhwydwaith Digidol Aelodau Annibynnol</p> <p>Penderfynodd y Bwrdd:</p> <p>NODI'R Adroddiad Crynhoi Cynnydd Rhwydwaith Digidol Aelodau Annibynnol</p>	Nodwyd	Dim i'w nodi
PRIF AGENDA			
RHAN 3 – I'W DRAFOD			
3.1	Cyflwyniad Gwrando a Dysgu a Rennir		
	<p>Cyflwynodd Helen Thomas, Prif Weithredwr yr eitem a dywedodd fod Cynhwysiant Digidol yn bwnc a drafodwyd ac yn faes ffocws i'r Bwrdd.</p> <p>Rhannodd Joanna Dundon, Arweinydd Digidol Cenedlaethol – Ymgysylltu â'r Cyhoedd a Sara Woolatt, Cydlynnydd Datblygu Partneriaeth, Cwmpas y cyflwyniad a thynnu sylw at y canlynol:</p> <ul style="list-style-type: none"> • Mae lefel yr allgáu digidol yng Nghymru yn uwch nag yn y DU, ac nid yw cynifer â 7% o'r boblogaeth, (16 a hŷn), neu 180,000 o bobl, yn defnyddio'r rhyngwrdd. • Darparwyd trosolwg o Gyngheir Cynhwysiant Digidol Cymru (DIAW) ynghyd â'u Siarter a chwe blaenoriaeth; • Ers i DHCW lofnodi'r Siarter Cynhwysiant Digidol, cynhaliwyd cyfarfodydd gyda DIAW i ddatblygu cynllun gweithredu drafft; • Nodwyd bod Gweithgor Cynhwysiant Digidol DHCW yn cael ei sefydlu a byddai datganiadau o ddiddordeb yn cael eu cyhoeddi i staff yn fuan; • Roedd Hyrwyddwyr Digidol DHCW yn cael eu datblygu drwy Cymunedau Digidol Cymru; • Cafodd Arolygon Cynhwysiant Digidol eu lansio a byddent yn cael eu dadansoddi; • Bydd cyfleoedd partneriaeth gyda'r GIG a sefydliadau masnachol yn cael eu harchwilio; • Bwriad DHCW oedd cyflwyno Achrediad Siarter Cynhwysiant Digidol i Gymunedau Digidol Cymru. <p>Gwnaed yr arsylwadau a'r sylwadau a ganlyn:</p> <ul style="list-style-type: none"> • Roedd y dulliau Digidol yn ychwanegol at ddulliau analog i sicrhau mynediad rhwydd i bawb; • Roedd sicrhau bod pawb yn gallu cyrchu gwasanaethau gyda'r argyfwng costau byw presennol yn her, fodd bynnag roedd sganio'r gorwel a dysgu o bob rhan o'r byd yn cael ei archwilio; • Byddai'r Fenter Gymunedol yn gweithio gyda sefydliadau rhanddeiliaid, sefydliadau trydydd sector a staff i sicrhau bod dull cydweithredol yn cael ei fabwysiadu; 	Derbyniwyd a Thrafodwyd	<p>A01- Cynhwysiant Digidol i'w gynnwys ar Flaengynllun Gwaith Bwrdd yr Awdurdod Iechyd Arbennig</p> <p>A02 – Cynhwysiant Digidol i'w rannu gyda grwpiau cyfoedion perthnasol</p>

Richards Cerys
21/09/2023 10:29:15

	<ul style="list-style-type: none"> Roedd Cynhwysiant Digidol yn symud i gyfeiriad cadarnhaol ar draws GIG Cymru. <p>CAM GWEITHREDU 20230727- A01 Cytunwyd y byddai diweddariad ar Gynhwysiant Digidol yn cael ei gyflwyno i'r Bwrdd bob chwe mis.</p> <p>CAM GWEITHREDU 20230727- A02 Cynhwysiant Digidol i'w rannu â grwpiau cymheiriaid perthnasol megis Cyfarwyddwyr Digidol, Grŵp Cyfoedion Is-Gadeiryddion, Grŵp Cyfoedion Cadeiryddion a Rhwydwaith Digidol Aelodau Annibynnol.</p> <p>Penderfynodd y Bwrdd:</p> <p>DDERBYN A THRAFOD y Cyflwyniad Gwrando a Dysgu a Rennir.</p>		
RHAN 4 - I'W HADOLYGU			
3.1	<p>Adroddiad y Cadeirydd a'r Is-Gadeirydd</p> <p>Amlinellodd y Cadeirydd yr uchafbwyntiau canlynol o'r adroddiad:</p> <ul style="list-style-type: none"> Arfarniad Cadeirydd GIG DHCW 2022/23 gyda'r Gweinidog dros Iechyd a Gwasanaethau Cymdeithasol - Dywedodd y Cadeirydd fod ei arfarniad blynyddol gyda'r Gweinidog Iechyd a Gwasanaethau Cymdeithasol yn edrych yn ôl ar amcanion 2022/23 wedi'u cynnal, yn ogystal, yn ystod y cyfarfod trafodwyd cyflawniadau a heriau DHCW. Roedd y pynciau a gafodd sylw yn y drafodaeth yn cynnwys: <ul style="list-style-type: none"> Model ariannu cynaliadwy ar gyfer buddsoddi digidol mewn iechyd a gofal yng Nghymru Seiberddiogelwch Ap GIG Cymru Sefyllfa Ariannol Iechyd a Gofal Digidol Cymru Rheoli risg Deallusrwydd Artiffisial (AI) Trefniadau Llywodraethu Rhaglen - yn dilyn yr adolygiad annibynnol a gynhaliwyd gan Mr Steve Combe, Cynghorydd Llywodraethu Annibynnol, cynhaliwyd cyfarfod adeiladol iawn gyda Phrif Swyddog Gweithredol DHCW, Prif Swyddog Digidol, Llywodraeth Cymru a'r Gweinidog dros Iechyd a Gwasanaethau Gofal Cymdeithasol i gytuno ar y ffordd ymlaen. Mae DHCW bellach yn gweithio gyda Llywodraeth Cymru i ffurfioli, a gweithredu'r newidiadau y cytunwyd arnynt, sy'n debygol o gynnwys adolygiad i drefniadau llywodraethu DHCW. Dywedodd y Cadeirydd y byddai papur ffurfiol yn cael ei gyflwyno i gyfarfod Bwrdd SHA mis Medi yn nodi'r trefniadau diwygiedig y cytunwyd arnynt dros dro gyda Llywodraeth Cymru i'w gweithredu'n llawn erbyn diwedd mis Mawrth 2024. <p>Penderfynodd y Bwrdd:</p> <p>DERBYN cynnwys adroddiad y Cadeirydd a'r Is-Gadeirydd a CHYMERADWYO'R defnydd o'r Sêl Gyffredin.</p>	Derbyniwyd a Chymeradwywyd	Dim i'w nodi
3.2	<p>Adroddiad y Prif Swyddog Gweithredol</p> <p>Darparodd Helen Thomas (HT), Prif Swyddog Gweithredol, yr uchafbwyntiau</p>	Derbyniwyd a	Dim i'w nodi

	<p>canlynol o'r adroddiad:</p> <ul style="list-style-type: none"> • Cydadolygiad y Pwyllgor Iechyd a Gofal Cymdeithasol a Gweinyddiaeth Gyhoeddus a Chyfrifon Cyhoeddus i Gyhoeddiad Adroddiad DHCW - Dywedodd HT fod Pwyllgor Iechyd a Gofal Cymdeithasol a Phwyllgor Cyfrifon Cyhoeddus a Gweinyddiaeth Gyhoeddus y Senedd wedi cyhoeddi eu hadroddiad ar 5 Gorffennaf 2023 ar eu hymchwiliad, Craffu ar DHCW. Roedd yr adroddiad yn cynnwys asesiad o ddatblygiad DHCW fel sefydliad ac mae'n tynnu sylw at y cynnydd a'r heriau hyd yn hyn, gan gynnwys 16 argymhelliad ar gyfer Llywodraeth Cymru a DHCW. <p>Croesawodd DHCW y cyfle i ymateb i'r adroddiad a bydd yn gwneud hynny erbyn 16 Awst 2023.</p> <ul style="list-style-type: none"> • Diweddariad ar Ymholiad COVID-19 – Hysbysodd HT y Bwrdd ar 17 Mai 2023, y derbyniwyd hysbysiad gan Gyfreithwyr Tîm Yr Ymchwiliad i COVID-19 a oedd yn cynnwys cais am ddatganiad o dan Reol 9 o Reolau Yr Ymchwiliad 2006. Drafftiodd DHCW ddatganiad ar y cyd ag arbenigwyr pwnc eraill. Adolygwyd hwn gan gyfreithwyr DHCW a chafodd ei gyflwyno i gyfreithwyr yr Ymchwiliad ar 28 Mehefin 2023. Ychwanegodd HT fod DHCW yn rhagweld y byddant yn gofyn am ragor o wybodaeth fanwl fel rhan o Fodiwl 3 yr Ymchwiliad ac y byddai'r Bwrdd yn cael gwybod am ddatblygiadau. • Cyfarfod Tîm Gweithredol ar y Cyd (JET) - Cynhaliwyd cyfarfod gyda'r Tîm Gweithredol ar y Cyd yn Llywodraeth Cymru ar 23 Mehefin 2023 lle bu Tîm Gweithredol DHCW yn rhannu cyflawniadau 2022-23, gan roi trosolwg o'r sefyllfa bresennol gan gynnwys ein prosiectau a'n rhaglenni allweddol, yr heriau a'r risgiau allweddol i'r sefydliad a darparwyd rhagolwg o ran cynlluniau ariannol y sefydliad ar gyfer 2023-24. Roedd yr adborth o'r cyfarfod yn gadarnhaol. • Graddio Llysgenhadon Newid Cymru Gyfan – esboniodd HT ei bod wedi cael y pleser o fynychu Seremoni Raddio gyntaf Llysgenhadon Newid Cymru Gyfan ar 5 Gorffennaf 2023, lle'r oedd yn falch o siarad am bwysigrwydd y rhaglen o ran cefnogi trawsnewid yng Nghymru a sut mae'r cwrs Llysgenhadon Newid wedi cael ei nodi fel enghraifft o newid ymddygiad oherwydd ei ddull wedi'i deilwra o ddysgu a datblygu yn y gofod hwn. <p>Penderfynodd y Bwrdd:</p> <p>DDERBYN a THRAFOD cynnwys adroddiad y Prif Weithredwr.</p>	Thrafodwyd	
RHAN 5 – EITEMAU STRATEGOL			
4.1	<p>Adroddiad Caffael Strategol</p> <p>Iwan Evans (IE), Cyfarwyddwr Gweithredol Strategaeth</p> <p>Rhododd Michelle Sell, Cyfarwyddwr Cynllunio a Pherfformiad / Prif</p>	Cymeradwyd	Dim i'w nodi

	<p>Swyddog Masnachol drosolwg o'r contractau a gyflwynwyd i'w cymeradwyo:</p> <p>(i) P843 NetBackup a BackupExec</p> <p>Contractwr: Computacenter (UK) Ltd</p> <p>Cyfnod: 31 Gorffennaf 2023 – 30 Gorffennaf 2026 heb unrhyw opsiynau ymestyn</p> <p>Gwerth: £1,122,900.24 heb gynnwys TAW</p> <p>Cais am Gymeradwyaeth: Dyfarnu Contract</p> <p>Penderfynodd y Bwrdd:</p> <p>CYMERADWYO'R Adroddiad Caffael Strategol</p>		
4.2	<p>Diweddariad Dull Cynnyrch</p> <p>Cyflwynodd Sam Lloyd, Cyfarwyddwr Gweithredol Gweithrediadau, ddiweddariad ar y Dull Cynnyrch ac eglurodd y canlynol:</p> <p>Cynigiodd y model gweithredu sy'n canolbwyntio ar gynnyrch newidiadau mewn nifer o feysydd allweddol:</p> <ul style="list-style-type: none"> - Diffinio a mesur gwerth - Methodoleg datblygu meddalwedd - Pensaernïaeth dechnegol - Gweithlu a strwythur sefydliadol <ul style="list-style-type: none"> • Roedd newidiadau strwythurol ar lefel uwch arweinwyr o fewn y gyfarwyddiaeth Gweithrediadau, a fyddai'n gosod y sylfeini ar gyfer y newid i ddull sy'n canolbwyntio ar gynnyrch; • Amlygwyd y risgiau canlynol: <ul style="list-style-type: none"> - Adnoddau – bu newid cymhleth a gymerodd lawer o amser a oedd angen adnoddau sefydliadol i'w gyflawni. - Buddsoddiad – byddai'r trawsnewid yn gofyn am fuddsoddiad mewn gweithgaredd newid, hyfforddiant a phensaernïaeth technoleg i'w gyflawni, byddai hyn yn heriol i'w sicrhau yn yr hinsawdd ariannol bresennol. - Model ariannu – roedd y model gweithredu sy'n canolbwyntio ar gynnyrch yn seiliedig ar y newid o fuddsoddiad rhaglen gyfalaf â chyfyngiad amser i ffrydiau referniw cynaliadwy i gefnogi datblygiad a gwelliant parhaus cynhyrchion. Byddai angen trafod hyn a chytuno arno gyda rhanddeiliaid allanol gan gynnwys Llywodraeth Cymru a'r Byrddau Iechyd. - Amhariad – gallai newid ar raddfa fawr fod yn aflonyddgar a byddai angen ei drin yn sensitif. <p>Gwnaed y sylwadau a'r arsylwadau a ganlyn:</p> <ul style="list-style-type: none"> • Byddai pennu man cychwyn o ran pensaernïaeth yn ymarfer ar wahân gyda sgysrsiau parhaus yn cael eu cynnal gyda phartneriaid allanol 	Nodi	Dim i'w nodi

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	<p>ynghylch hyn;</p> <ul style="list-style-type: none"> Roedd angen diffinio a mesur gwerth symud i ddull cynnyrch. <p>Penderfynodd y Bwrdd:</p> <p>NODI'R Diweddariad Dull Cynnyrch</p>		
4.3	<p>Adroddiad Adolygiad Blynyddol Gwrando a Dysgu a Rennir</p> <p>Dywedodd Chris Darling, Ysgrifennydd y Bwrdd (CD) ei fod yn cyflwyno'r adroddiad ar ran Rhidian Hurle, y Cyfarwyddwr Meddygol Gweithredol a oedd yn Arweinydd Gweithredol ar gyfer eitemau Gwrando a Dysgu a Rennir a roddodd ystyriaeth sylweddol i sut rydym yn sicrhau bod y Bwrdd yn clywed straeon sy'ndod ag effaith DHCW yn fyw a sut mae'n effeithio ar staff clinigol ac yn helpu i wella darpariaeth gofal cleifion.</p> <p>Dywedodd CD fod yr adroddiad yn nodi'r straeon gwrando a dysgu a gyflwynwyd i'r Bwrdd yn ystod 2022/23 gyda'r themâu dysgu canlynol wedi'u hamlygu:</p> <ul style="list-style-type: none"> Cydweithio Arweinyddiaeth Glinigol Cyd-ddylunio systemau a nodwyd fel galluogwr allweddol i lwyddiant cyflwyno system Gwerthuso ac ymgysylltu yn gynnar Cyllid cynaliadwy Dibyniaeth gwasanaeth ar Systemau Digidol DHCW <p>Eglurodd CD, lle bo'n bosibl ac yn briodol, bod Cyflwyniadau Gwrando a Dysgu a Rennir yn cynnwys presenoldeb gan gyrrff partner gan gydnabod ffordd gydweithredol DHCW o weithio a darparu. Fodd bynnag, fel corff GIG sy'n darparu cyfran fach iawn o wasanaethau ar gyfer cleifion/dinasyddion ar hyn o bryd, mae cael straeon gwrando a dysgu gan gleifion/dinasyddion ar gyfer Bwrdd yr Awdurdod Iechyd Arbennig wedi bod, ac yn parhau i fod yn her.</p> <p>Roedd hwn yn faes a fydd yn cael ei gadw o dan adolygiad agos, gyda sefydlu Llais (Corff Llais y Dinesydd dros Iechyd a Gofal Cymdeithasol yng Nghymru) ar 1 Ebrill 2023, a DHCW yn datblygu mwy o wasanaethau ar gyfer dinasyddion yn y dyfodol.</p> <p>Ychwanegodd CD fod dull y Bwrdd o Wrando a Dysgu a Rennir yn bwydo i mewn i ddull gweithio ac ymgysylltu DHCW, sydd wedi'i drafod a'i ystyried fel rhan o waith Datblygu'r Bwrdd sy'n cael ei wneud mewn partneriaeth â Deloitte.</p> <p>Gall partneriaid a rhanddeiliaid allanol fynychu cyfarfodydd Bwrdd SHA DHCW trwy wahoddiad, a gall unrhyw aelod o Fwrdd DHCW drwy Gadeirydd neu Ysgrifennydd y Bwrdd awgrymu i bartneriaid a rhanddeiliaid allanol fynychu</p>	Cymeradwy wyd	Dim i'w nodi

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	<p>trwy'r Cadeirydd neu Ysgrifennydd y Bwrdd.</p> <p>Os bydd partner neu randdeiliad allanol yn mynychu cyfarfod Bwrdd SHA DHCW ar gais, gwneir hyn gan weithio gyda'r tîm Llywodraethu Corfforaethol i sicrhau y bydd y partner neu randdeiliad yn ymwybodol o'r ffaith bod cyfarfod Bwrdd SHA, pan fydd yn bosibl, yn cael ei gynnal yn gyhoeddus, a bod gan y mynychwr Noddwr Gweithredol DHCW.</p> <p>Penderfynodd y Bwrdd:</p> <p>NODI cynnwys yr adroddiad a CHYMERADWYO'R trefniadau a amlinellir yn adran 3.6 o'r adroddiad.</p>		
Egwyl - 10 munud			

RHAN 6 – LLYWODRAETHU, RISG, PERFFORMIAD A SICRWYDD

6.1	<p>Adroddiad Perfformiad Sefydliadol Integredig</p> <p>Cyflwynodd Ifan Evans, Cyfarwyddwr Gweithredol Strategaeth yr adroddiad ar berfformiad sefydliadol integredig hyd at ddiwedd Mehefin 2023 a thynnwyd sylw at y meysydd a ganlyn:</p> <ul style="list-style-type: none"> • Roedd cyflawniadau'n cynnwys System Gweinyddu Cleifion Cymru (WelshPAS) yn mynd yn fyw ar draws Bwrdd Iechyd Prifysgol Betsi Cadwaladr; • Lansiad meddal fersiwn beta Ap GIG Cymru gyda dros 5000 o ddefnyddwyr wedi'i lawrlwytho hyd yma; • LINC a RISP – Cynlluniau a etifeddwyd gan Gydweithredfa'r GIG gyda gwaith dwys yn cael ei wneud arnynt; • Gofal Llygaid – Cynhaliwyd Adolygiad Porth a thynnwyd sylw at bryderon, felly roedd gwaith yn mynd rhagddo gyda CAV a LIC; • Roedd Argaeledd Gwasanaeth TG hyd yma yn 99.989%. Mae hyn wedi bod yn gyson uchel dros y 3 blynedd diwethaf; • Mae Digwyddiadau Mawr yn gostwng, a oedd yn gadarnhaol ac mae pob digwyddiad yn cael ei adolygu trwy Grŵp Dysgu ac Adolygu Digwyddiadau DHCW. <p>Gwnaed yr arsylwadau a'r sylwadau a ganlyn:</p> <ul style="list-style-type: none"> • Roedd cynnydd NDR yn gadarnhaol ac roedd cadarnhad ffurfiol o'r cyllid bellach wedi'i dderbyn; • Roedd yn braf gweld y cynnydd gydag Ap GIG Cymru, a'r nod oedd cael hanner yr holl Bractisiau Meddygon Teulu EMIS a Segedim yn rhan o'r cynllun erbyn diwedd hydref 2023. • Byddai'r trefniadau llywodraethu newydd yn ei gwneud hi'n haws i'r Bwrdd gael sicrwydd cynharach ar gyflawni rhaglenni mawr. 	Derbyniwyd a Thrafodwyd	Dim i'w nodi
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	<p>Penderfynodd y Bwrdd:</p> <p>DDERBYN a THRAFOD yr Adroddiad Perfformiad Sefydliadol Integredig</p>		
6.2	<p>Y Gofrestr Risg Gorfforaethol</p> <p>Cyflwynodd CD yr adroddiad a dywedodd fod gan y Gofrestr Risg Gorfforaethol 28 o risgiau ar y gofrestr ar hyn o bryd. Roedd 12 o risgiau preifat (mae deg ohonynt yn cael eu hystyried ym mhob Pwyllgor Llywodraethu a Diogelwch Digidol a dau yn cael eu hystyried yn y Pwyllgor Archwilio a Sicrwydd).</p> <p>Ers y cyfarfod diwethaf, ychwanegwyd chwe risg newydd:</p> <ul style="list-style-type: none"> - DHCW0320 – Ymddiriedaeth dinasyddion a rhanddeiliaid yn y defnydd o ddata Iechyd a Gofal Cymdeithasol - DHCW0321 – Cyllid cynaliadwy ar gyfer WASPI - DHCW0322 – Cyllid NDR Cam 3 - DHCW0323 – Costau trosglwyddo i Ap GIG Cymru a phlatform o wasanaethau a chymorth gweithredol iddynt/eu datblygiad parhaus <p>Eglurodd IE fod Ap y GIG yn cael ei ariannu gan raglen ar hyn o bryd ac yn cael ei ddarparu drwy drydydd parti a bod angen trosglwyddo hwn i weithrediadau DHCW.</p> <ul style="list-style-type: none"> - DHCW0324 – Argaeledd Adnoddau i Gefnogi Rhaglen WICIS - DHCW0325 - **Preifat** <p>Roedd wyth risg wedi'u tynnu oddi ar y gofrestr. Manylwyd ar y rhain yn yr adroddiad a newidiwyd sgôr tair ohonynt</p> <ul style="list-style-type: none"> - DHCW0259 – Swyddi Gwag – Mwy o debygolrwydd - DHCW0269 – Gwasanaeth Newid – Warws Data – Gostyngiad o ran tebygolrwydd - DHCW0313 – Pwysau Cost Digidol – Gostyngiad o ran tebygolrwydd <p>Gwnaed yr arsylwadau a'r sylwadau a ganlyn:</p> <ul style="list-style-type: none"> • Byddai'r effaith ar raglenni gwaith oherwydd y risg o swyddi gweigion yn cael ei ddeall yn ystod hanner blwyddyn pan fyddai gwerthusiadau'n cael eu cynnal; • Byddai'r effaith ar staff presennol pe na ellid llenwi swyddi gwag yn cael ei drafod yn fanwl yn ystod y Fforwm Partneriaeth Lleol. <p>Penderfynodd y Bwrdd:</p> <p>DDERBYN a THRAFOD y Gofrestr Risg Gorfforaethol</p>		
6.3	<p>Adroddiad Cyllid</p> <p>Cyflwynodd Claire Osmundsen-Little, Cyfarwyddwr Gweithredol Cyllid yr adroddiad cyllid ar gyfer y cyfnod a ddaeth i ben a thynnodd sylw at y canlynol:</p> <ul style="list-style-type: none"> • Perfformiad refeniw: Mae DHCW yn adrodd am danwariant refeniw o £0.081 miliwn am y cyfnod hyd at 30 Mehefin; • Perfformiad cyfalaf: y gwariant hyd yma oedd £2.086 miliwn o 	Derbyniwyd a Thrafodwyd	Dim i'w nodi

	<p>gyfanswm y Terfyn Adnoddau Cyfalaf o £13.047 miliwn. Mae hyn yn cynrychioli tanwariant o £0.032 miliwn yn erbyn y cynllun cyfnod;</p> <ul style="list-style-type: none"> • Rhagorwyd ar darged Polisi Talu'r Sector Cyhoeddus (PSPP) o 95% gyda 98% o anfonebau nad ydynt yn ymwneud â'r GIG yn cael eu talu o fewn 30 niwrnod; • Arbedion: Mae'r targed arbedion cychwynnol o £2.4 miliwn wedi'i ategu gan ofyniad pellach o £1.9 miliwn i gefnogi sefyllfa adennill costau'r sefydliad gyda gor-gyflawniad o £0.210 miliwn yn erbyn y cynllun ar gyfer y cyfnod; • Sefyllfa Rhagolwg Diwedd Blwyddyn: Roedd Iechyd a Gofal Digidol Cymru yn rhagweld sefyllfa adennill costau ar gyfer refeniw ac adennill costau ar gyfer cyfalaf; • Rheoli Arian - Roedd balansau arian yn £5.7 miliwn ddiwedd Mehefin. Byddai mis Gorffennaf yn gweld y taliad sylweddol Microsoft a byddai angen rheoli hyn yn ofalus; • Cronfa Buddsoddi â Blaenoriaeth Ddigidol: Cyllid refeniw o £38.4 miliwn a chyllid cyfalaf o £10.433 miliwn. • Rhannwyd trosolwg o risgiau a chyfluoedd. <p>Penderfynodd y Bwrdd: DDERBYN a THRAFOD yr Adroddiad Cyllid.</p>		
6.4	<p>Adroddiad Blynyddol Uwch-berchennog Risg Gwybodaeth</p> <p>Cyflwynodd SL Adroddiad Blynyddol yr Uwch Berchennog Risg Gwybodaeth ac eglurodd yr adroddiad fel a ganlyn:</p> <ul style="list-style-type: none"> • Trosolwg o'r Dull Rheoli Risg Gwybodaeth o fewn DHCW; • Crynodeb o ddatblygiadau allweddol yn ymwneud â gwella Rheoli Risg Gwybodaeth yn y flwyddyn ariannol 2022-23; • Gwybodaeth am archwiliadau perthnasol sy'n rhoi sicrwydd yn ymwneud â Rheoli Risg Gwybodaeth • Gwybodaeth a data sy'n ymwneud â Rheoli Risg Gwybodaeth <p>Ychwanegodd SL fod yr adroddiad hefyd yn cynnwys blaengynllun o weithgareddau gyda'r nod o sicrhau gwelliannau pellach mewn Rheoli Risg Gwybodaeth.</p> <p>Penderfynodd y Bwrdd: CYMERADWYO Adroddiad Blynyddol Uwch-berchennog Risg Gwybodaeth</p>	Cymeradwy wyd	Dim i'w nodi
6.5	<p>Adborth gan Gadeirydd y Pwyllgor Archwilio a Sicrwydd – Ar lafar</p> <p>Dywedodd Marian Wyn Jones, Aelod Annibynnol a Chadeirydd y Pwyllgor Archwilio a Sicrwydd (MWJ) fod y Pwyllgor Archwilio a Sicrwydd wedi cynnal cyfarfod arbennig ar 4 Mai i fynd drwy gyfrifon drafft ac adroddiad blynyddol 2022/23 yn fanwl ac wedi hynny cynhaliodd cyfarfod cyhoeddus eithriadol ar 18 Gorffennaf 2023 i gymeradwyo cyfrifon terfynol ac adroddiad blynyddol 2022/23. Yn ogystal â hyn, adolygodd holl aelodau'r Bwrdd y cyfrifon drafft yn fanwl ddechrau mis Mai.</p> <p>Eglurodd MWJ fod y Pwyllgor wedi derbyn y cyfrifon terfynol a'r adroddiad blynyddol ar 18 Gorffennaf a'i fod wedi cael adborth a sylwadau gan Archwilio</p>	Nodwyd	Dim i'w nodi

	<p>Cymru ac Archwilio Mewnol.</p> <p>Eglurodd MWJ ei bod yn amlwg bod cryn gydweithio wedi digwydd ar draws DHCW a gyda'n partneriaid rheoleiddio i gynhyrchu'r dogfennau terfynol. Cadarnhaodd MWJ fod y Pwyllgor wedi cymeradwyo cyfrifon terfynol 2022/23 a bod yr adroddiad blynyddol i'w gyflwyno i'r Bwrdd heddiw wedi annog hyrwyddo'r dogfennau yn y Cyfarfod Cyffredinol Blynyddol ym mis Medi.</p> <p>Penderfynodd y Bwrdd:</p> <p>NODI'R Adborth gan Gadeirydd y Pwyllgor Archwilio a Sicrwydd.</p>		
6.6	<p>Cyfrifon Blynyddol 2022/23</p> <p>Mynegodd COL bleser wrth gyflwyno Cyfrifon Blynyddol 2022/23 gan nodi ei bod wedi bod yn flwyddyn heriol oherwydd amserlenni Archwilio a gofynion ISA260 newydd. Tynnodd COL sylw at y canlynol:</p> <p>Mae Archwilio Cymru yn bwriadu cyhoeddi barn archwilio ddiamod ar gyfrifon 2022-23 a oedd yn gyflawniad sylweddol i'r sefydliad a mynegodd COL ddiolch diffuant i'r tîm Cyllid yn DHCW am eu gwaith caled a'u hymroddiad yn ystod cyfnod heriol.</p> <p>Cadarnhaodd COL y byddai Ymarferiad Gwersi a Ddysgwyd 2022-23 yn cael ei gynnal gyda chydweithwyr allweddol ac Archwilio Cymru, a byddai canfyddiadau'r gwaith hwn yn cael eu rhannu â'r Pwyllgor Archwilio a Sicrwydd ym mis Hydref 2023.</p> <p>Llongyfarchodd y Bwrdd y tîm Cyllid am y cyflawniad.</p> <p>Penderfynodd y Bwrdd:</p> <p>CYMERADWYO Cyfrifon Blynyddol 2022/23.</p>	Cymeradwy wyd	Dim i'w nodi
6.7	<p>Adroddiad Blynyddol 2022/23</p> <p>Dywedodd CD fod [Adroddiad] 2022/23 wedi'i gyflwyno i'r Bwrdd i'w gymeradwyo ac mae'r Llawlyfr Cyfrifon yn nodi ei bod yn ofynnol i bob sefydliad GIG gyhoeddi Adroddiad Blynyddol tair rhan a Chyfrifon fel un ddogfen unedig, sy'n cynnwys:</p> <ul style="list-style-type: none"> • Yr Adroddiad Perfformiad • Yr Adroddiad Atebolrwydd • Y Datganiadau Ariannol <p>Ychwanegodd CD fod gofyniad cyffredinol i'r adroddiad blynyddol a chyfrifon fod yn deg, yn gytbwys ac yn ddealladwy.</p> <p>Roedd adborth gan Lywodraeth Cymru, Archwilio Cymru ac Archwilio Mewnol ar yr Adroddiad Blynyddol a Chyfrifon drafft 2022-23 wedi'i dderbyn ac ymdriniwyd â'r holl sylwadau ac adborth yn Adroddiad Blynyddol terfynol 2022-23. Ac fe'i cymeradwywyd gan y Pwyllgor Archwilio a Sicrwydd ar 18 Gorffennaf.</p> <p>Yn unol â chanllawiau Pennod 3 a gyhoeddwyd gan Lywodraeth Cymru, mae'r Adroddiad Blynyddol wedi'i gynhyrchu fel un ddogfen unedig ar ffurf PDF. Fodd bynnag, er mwyn caniatáu mwy o hygyrchedd ac fel sefydliad Digidol, mae DHCW hefyd wedi cynhyrchu'r Adroddiad Blynyddol ar ffurf HTML, unwaith y bydd yr Adroddiad Blynyddol wedi'i osod gerbron y Senedd, bydd</p>	Cymeradwy wyd	Dim i'w nodi

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	<p>hwn yn cael ei gyhoeddi a'i hyrwyddo.</p> <p>Esboniodd CD fod y Cyfarfod Cyffredinol Blynyddol wedi'i drefnu ar gyfer dydd Iau 28 Medi 2023. Mae dyddiad y Cyfarfod Cyffredinol Blynyddol wedi'i ohirio o fis Gorffennaf 2023 i fis Medi 2023 oherwydd bod Adroddiadau Blynyddol holl Gyrrff y GIG yn cael eu gosod gerbron y Senedd gan Archwilio Cymru ar 31 Gorffennaf 2023.</p> <p>Mynegodd CD ddiolch i bawb a fu'n ymwneud â chynhyrchu Adroddiad Blynyddol 2022-23.</p> <p>Penderfynodd y Bwrdd:</p> <p>CYMERADWYO Adroddiad Blynyddol 2022/23.</p>		
5.5	<p>Adroddiad ar Brif Bwyntiau'r Pwyllgor Archwilio a Sicrwydd</p> <p>Darparodd MWJ ddiweddariad o gyfarfod diwethaf y Pwyllgor a gynhaliwyd ar 3 Gorffennaf 2023 a nododd yn benodol bod y Pwyllgor wedi derbyn Archwiliad Dwfn o Fframwaith Sicrwydd y Bwrdd i Ddarparu Cenhadaeth Strategol 5 ac roedd yn falch o nodi bod y cynllun ar y trywydd iawn.</p> <p>Penderfynodd y Bwrdd:</p> <p>NODI'R Adroddiad ar Brif Bwyntiau'r Pwyllgor Archwilio a Sicrwydd</p>	Nodwyd	Dim i'w nodi
5.6	<p>Adroddiad Crynhoi Cynnydd y Pwyllgor Taliadau a Thelerau Gwasanaeth</p> <p>Rhoddodd y Cadeirydd ddiweddariad o gyfarfod y Pwyllgor ar 22 Mehefin 2023 a dywedodd fod y Pwyllgor wedi cael yr wybodaeth ddiweddaraf ar lafar am Daliadau Goramser Staff Uwch hefyd, adolygwyd a thrafodwyd perfformiad aelod o'r tîm Gweithredol ac amcanion ar gyfer 2022/23 a 2023/24.</p> <p>Penderfynodd y Bwrdd:</p> <p>NODI Adroddiad Crynhoi Cynnydd y Pwyllgor Llywodraethu a Diogelwch Digidol</p>	Nodwyd	Dim i'w nodi
5.8	<p>Adroddiad Crynhoi Cynnydd Pwyllgor Fforwm Partneriaeth Leol</p> <p>Rhoddodd Andrew Fletcher, Cyd-Gadeirydd y Grŵp Cyngori (AF) ddiweddariad o'r cyfarfod a gynhaliwyd ar 6 Mehefin 2023 a oedd yn cynnwys diweddariadau gan yr undebau llafur.</p> <p>Penderfynodd y Bwrdd:</p> <p>NODI'R Adroddiad ar Brif Bwyntiau'r Fforwm Partneriaeth Lleol</p>	Nodwyd	Dim i'w nodi
RHAN 6 - MATERION I GLOI			
6.1	<p>Unrhyw Faterion Brys Eraill</p> <p>Ni chodwyd unrhyw fater brys arall.</p>	Trafodwyd	Dim i'w nodi
	<p>Dyddiad ac Amser y Cyfarfod Nesaf</p> <ul style="list-style-type: none"> Dydd Iau 29 Medi 2023 <p>Daeth y cyfarfod i ben am 14:30</p>	Nodwyd	Dim i'w nodi

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Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal

Cofnodion cyfarfod Bwrdd Awdurdod Iechyd Arbennig (SHA) Iechyd a Gofal Digidol Cymru (DHCW) a gynhaliwyd ddydd Iau 27 Gorffennaf 2023 yn rhithwir trwy MS Teams.

 14:45 i 16:30

 27 Gorffennaf 2023

Aelodau'n Bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Simon Jones	SJ	Cadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Ruth Glazzard	RG	Is-gadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Marilyn Bryan Jones	MBJ	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
Ifan Evans	IE	Cyfarwyddwr Gweithredol Strategaeth	Iechyd a Gofal Digidol Cymru
Andrew Fletcher	AF	Aelod Cyswllt o'r Bwrdd – Undeb Llafur	Iechyd a Gofal Digidol Cymru
Rowan Gardner	RoG	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
Sam Lloyd	SL	Cyfarwyddwr Gweithredol Gweithrediadau	Iechyd a Gofal Digidol Cymru
Claire Osmundsen-Little	COL	Dirprwy Brif Swyddog Gweithredol / Cyfarwyddwr Gweithredol Cyllid	Iechyd a Gofal Digidol Cymru
David Selway	DS	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
Helen Thomas	HT	Prif Swyddog Gweithredol	Iechyd a Gofal Digidol Cymru
Marian Wyn Jones	MWJ	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru

1Cyfarfod Bwrdd Preifat Awdurdod Iechyd Arbennig

Iechyd a Gofal Digidol Cymru 20230727

Yn bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Chris Darling	CD	Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Alison Maguire	AM	Cyfarwyddwr Rhaglen (ar gyfer 3.1 yn unig)	Iechyd a Gofal Digidol Cymru
Sam Hall	SH	Cyfarwyddwr Gwasanaethau Digidol Gofal Sylfaenol, Cymunedol ac Iechyd Meddwl.	Iechyd a Gofal Digidol Cymru
Michelle Sell	MS	Cyfarwyddwr Cynllunio a Pherfformiad / Prif Swyddog Masnachol (ar gyfer eitem 3.1 yn unig)	Iechyd a Gofal Digidol Cymru
Laura Tolley	LT	Pennaeth Llywodraethu Corfforaethol (Ysgrifenyddiaeth)	Iechyd a Gofal Digidol Cymru

Ymddiheuriadau	Teitl	Sefydliad
Rhidian Hurle	Cyfarwyddwr Meddygol Gweithredol	Iechyd a Gofal Digidol Cymru
Alistair Klaas Neill	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
Sarah-Jane Taylor	Cyfarwyddwr Pobl a Datblygu Sefydliadol	Iechyd a Gofal Digidol Cymru

Acronymau			
Iechyd a Gofal Digidol Cymru	Iechyd a Gofal Digidol Cymru	SHA	Awdurdod Iechyd Arbennig
LINC	Rhwydwaith Gwybodaeth Labordai Cymru	RISP	Caffael System Gwybodaeth Radioleg

Rhif yr Eitem	Manylion yr Eitem	Canlyniad	Cam gweithredu
MATERION RHAGARWEINIOL			
1.1	Croeso ac Ymddiheuriadau	Nodwyd	Dim i'w

	Croesawodd y Cadeirydd bawb i gyfarfod preifat y Bwrdd.		nodi
1.2	<p>Ymddiheuriadau am Absenoldeb</p> <p>Nodwyd ymddiheuriadau am absenoldeb gan:</p> <ul style="list-style-type: none"> • Rhidian Hurle – Cyfarwyddwr Meddygol Gweithredol • Alistair Klaas Neill – Aelod Annibynnol • Sarah-Jane Taylor - Cyfarwyddwr Pobl a Datblygu Sefydliadol 	Nodwyd	Dim i'w nodi
1.3	<p>Datganiadau o Fuddiannau</p> <p>Nid oedd unrhyw ddatganiadau o fuddiannau.</p>	Nodwyd	Dim i'w nodi
AGENDA GYDSYNIO — I'W CHYMERADWYO A'I NODI			
2.1	<p>Cofnodion heb eu cadarnhau o Gyfarfod y Bwrdd Preifat a gynhaliwyd ar 25 Mai 2023</p> <p>Penderfynodd y Bwrdd y canlynol:</p> <p>CYMERADWYO cofnodion y cyfarfod Bwrdd Preifat diwethaf a gynhaliwyd ar 25 Mai 2023.</p>	Cymeradwywyd	Dim i'w nodi
2.2	<p>Cofnod Gweithredu</p> <p>Penderfynodd y Bwrdd y canlynol:</p> <p>NODI nad oedd unrhyw gamau gweithredu ar y cofnod gweithredu.</p>	Nodwyd	Dim i'w nodi
PRIF AGENDA			
RHAN 3 – I'W DRAFOD			
3.1	Adroddiad Caffael Strategol		
	<p>Rhoddodd Ifan Evans, Cyfarwyddwr Gweithredol Strategaeth (IE), ynghyd â Michelle Sell, Cyfarwyddwr Cynllunio a Pherfformiad / Prif Swyddog Masnachol drosolwg o'r contract a gyflwynwyd i'w gymeradwyo:</p> <p>(i) P136 System Rheoli Gwybodaeth Labordy - Estyniad i Gynyddu Gwerth a Chyfnod trwy Ddyfarniad Uniongyrchol o dan Reoliad 32 o PCR2015</p> <p>Penderfynodd y Bwrdd y canlynol:</p> <p>CYMERADWYO'R Adroddiad Caffael Strategol a NODWYD y diweddariadau.</p>	Cymeradwywyd a Nodwyd	Dim i'w nodi
3.2	<p>Sefyllfa Ariannol GIG Cymru</p> <p>Bydd y Cadeirydd a'r Prif Weithredwr yn rhoi'r wybodaeth ddiweddaraf i aelodau'r Bwrdd am Sefyllfa Ariannol GIG Cymru yn dilyn cyfarfod brys a alwyd gan y Gweinidog dros Iechyd a Gwasanaethau Gofal Cymdeithasol gyda holl Gadeiryddion a Phrif Weithredwyr GIG Cymru ddydd Iau 20 Gorffennaf 2023.</p>	Nodwyd	Dim i'w nodi

	<p>Dyweddodd COL fod angen cyflwyno cynlluniau arbedion i Lywodraeth Cymru erbyn 11 Awst 2023 er mwyn cynnal asesiad cychwynnol.</p> <p>Roedd DHCW wedi edrych ar wariant heb ei ymrwymo. Yn ogystal, roedd DHCW wedi edrych yn allanol fel sefydliad lle'r oedd blaenoriaethau'n gysylltiedig â Byrddau Iechyd i weld lle gallai DHCW eu cefnogi gyda'u heriau.</p> <p>Cydnabu'r Bwrdd yr heriau ariannol sylweddol a chytunwyd y byddai hyn yn cael ei gadw dan adolygiad manwl dros y misoedd nesaf.</p> <p>Penderfynodd y Bwrdd y canlynol:</p> <p>NODI sefyllfa ariannol GIG Cymru</p>		
RHAN 4 - MATERION I GLOI			
4.1	<p>Unrhyw Faterion Brys Eraill</p> <p>Ni chodwyd unrhyw fater brys arall.</p>	Trafodwyd	Dim i'w nodi
4.2	<p>Dyddiad ac Amser y Cyfarfod Nesaf</p> <p>I'w gadarnhau</p>	Nodwyd	Dim i'w nodi

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Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal

Cofnodion cyfarfod Eithriadol Preifat Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd ddydd Iau 10 Awst 2023 fel cyfarfod rhithwir trwy MS Teams a ddarllledwyd yn fyw drwy Zoom.

 10:00-11:30

 10 Awst 2023

Aelodau'n Bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Simon Jones	SJ	Cadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru (DHCW)
Ruth Glazzard	RG	Is-gadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru (DHCW)
Marilyn Bryan Jones	MBJ	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (DHCW)
Ifan Evans	IE	Cyfarwyddwr Gweithredol Strategaeth	Iechyd a Gofal Digidol Cymru (DHCW)
Rowan Gardner	RoG	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (DHCW)
Rhidian Hurle	RH	Cyfarwyddwr Meddygol Gweithredol	Iechyd a Gofal Digidol Cymru (DHCW)
Sam Lloyd	SL	Cyfarwyddwr Gweithredol Gweithrediadau	Iechyd a Gofal Digidol Cymru (DHCW)
Marian Wyn Jones	MWJ	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (DHCW)

1Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a

Gofal Digidol Cymru 20230810

Claire Osmundsen-Little	COL	Cyfarwyddwr Gweithredol Cyllid	Iechyd a Gofal Digidol Cymru (DHCW)
David Selway	DS	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (DHCW)
Helen Thomas	HT	Prif Swyddog Gweithredol	Iechyd a Gofal Digidol Cymru (DHCW)

Yn bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Chris Darling	CD	Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru (DHCW)
Laura Tolley	LT	Pennaeth Llywodraethu Corfforaethol (Ysgrifenyddiaeth)	Iechyd a Gofal Digidol Cymru (DHCW)
Sam Hall	SH	Cyfarwyddwr Gwasanaethau Digidol Gofal Sylfaenol, Cymunedol ac Iechyd Meddwl.	Iechyd a Gofal Digidol Cymru (DHCW)

Ymddiheuriadau	Teitl	Sefydliad
Andrew Fletcher	Aelod Cyswllt o'r Bwrdd – Undeb Llafur	Iechyd a Gofal Digidol Cymru (DHCW)
Alistair Klaas Neill	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (DHCW)
Sarah-Jane Taylor	Cyfarwyddwr Pobl a Datblygu Sefydliadol	Iechyd a Gofal Digidol Cymru (DHCW)

Acronymau			
Iechyd a Gofal Digidol Cymru	Iechyd a Gofal Digidol Cymru	SHA	Awdurdod Iechyd Arbennig

(DHCW)			
CEO	Prif Swyddog Gweithredol	DPIF	Cronfa Fuddsoddi Blaenoriaethau Digidol
DMTP	Portffolio Trawsnewid Gweinyddu Meddyginiaethau'n Ddigidol	NDR	Adnodd Data Cenedlaethol

Rhif yr Eitem	Manylion yr Eitem	Canlyniad	Cam gweithredu
MATERION RHAGARWEINIOL			
1.1	Croeso ac Ymddiheuriadau Croesawodd y Cadeirydd bawb i gyfarfod eithriadol Bwrdd Preifat Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru.	Nodwyd	Dim i'w nodi
1.2	Ymddiheuriadau am Absenoldeb Nodwyd ymddiheuriadau am absenoldeb gan: <ul style="list-style-type: none"> Andrew Fletcher - Aelod Bwrdd Cysylltiol - Undeb Llafur Alistair Klaas Neill – Aelod Annibynnol Sarah-Jane Taylor, Cyfarwyddwr Pobl a Datblygu Sefydliadol 	Nodwyd	Dim i'w nodi
1.3	Datganiadau o Fuddiannau Ni dderbyniwyd unrhyw ddatganiadau o fuddiannau mewn perthynas â'r agenda.	Nodwyd	Dim i'w nodi
PRIF AGENDA			
RHAN 2 – I'W GYMERADWYO			
2.1	Arbedion Ychwanegol DHCW	Cymeradwywyd	Dim i'w nodi
	<p>Dywedodd y Cadeirydd y bu cyfarfodydd Cadeiryddion, Is-Gadeiryddion a Phrif Swyddogion Gweithredol Cymru Gyfan ynghylch yr heriau ariannol presennol. Amlygwyd y pwyntiau canlynol:</p> <p>Roedd angen dod â sefyllfa ariannol GIG Cymru i'r cynllun gwreiddiol a hefyd adnabod cynlluniau arbedion ychwanegol o 10%, 20% a 30%.</p> <p>Cyfarfu Cadeiryddion, Is-Gadeiryddion a Phrif Weithredwyr ar</p>		

	<p>draws GIG Cymru yn eu cyfarfodydd grŵp cymheiriaid priodol i drafod y sefyllfa.</p> <p>Rhannwyd cynllun arbedion DHCW gyda'r Bwrdd, gan nodi bod gan DHCW darged arbed costau sylweddol eisoes ar gyfer 2022/23.</p> <p>Penderfynodd y Bwrdd:</p> <p>CYMERADWYO Arbedion Ychwanegol DHCW mewn ymateb i gais LIC, a NODI'R asesiadau effaith a gynhaliwyd i nodi'r arbedion ychwanegol.</p>		
2.2	Ymateb Drafft DHCW i Argymhellion o Adroddiad HSC PAPAC	Trafodwyd	Dim i'w nodi
	<p>Aeth Chris Darling, Ysgrifennydd y Bwrdd drwy ymateb drafft DHCW i argymhellion o Adroddiad y Pwyllgor Iechyd a Gofal Cymdeithasol ac Adroddiad y Pwyllgor Gweinyddu Cyhoeddus Cyfrifon Cyhoeddus.</p> <p>Penderfynodd y Bwrdd:</p> <p>NODI Ymateb Drafft DHCW i'r Argymhellion o Adroddiad y Pwyllgor Iechyd a Gofal Cymdeithasol ac Adroddiad y Pwyllgor Gweinyddu Cyhoeddus Cyfrifon Cyhoeddus.</p>		
RHAN 3 - MATERION I GLOI			
3.1	Unrhyw faterion brys eraill Ni chodwyd unrhyw fater brys arall.	Trafodwyd	Dim i'w nodi
3.2	Dyddiad ac Amser y Cyfarfod Nesaf I'w gadarnhau	Nodwyd	Dim i'w nodi

Richards, Carys
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Title	Date of Meeting	Business Area	Action/Decision Narrative	Action Lead	Due Date	Status/Outcome Narrative	Status
20230525-A01	25/05/2023	People and OD	Welsh Language to be incorporated into the strategic workforce planning, rather than being a separate item.	Sarah-Jane Taylor (DHCW - People & OD)	28/09/2023	Complete - Welsh Language incorporated into Workforce Planning and will be included at the next scheduled Workforce Planning Board update	Complete
20230525-A02	25/05/2023	People and OD	Strategic Workforce Planning be added to the annual cycle of business	Sarah-Jane Taylor (DHCW - People & OD)	27/07/2023	Complete - Added to forward workplan	Complete
27072023-A01	27/07/2023	Corporate Governance	Digital Inclusion to be included on the SHA Board Forward Workplan	Chris Darling (DHCW - Board Secretary)	28/09/2023	Complete - Built into Forward Workplan	Complete
27072023-A02	27/07/2023	Corporate Governance	Digital Inclusion to be shared with relevant peer groups	Chris Darling (DHCW - Board Secretary)	28/09/2023	Complete - Digital Inclusion scheduled to shared with various groups	Complete

Richards Carys
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DIGITAL HEALTH AND CARE WALES FORWARD WORKPLAN REPORT

Agenda Item	2.5
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Name of Meeting	SHA Board
Date of Meeting	28 September 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.	

Richards Carys
21/09/2023 10:29:15

1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	Development of the new Digital Organisation
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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

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

HEALTH CARE STANDARD	Governance, leadership and accountability
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	

[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.
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 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

2 SITUATION/BACKGROUND

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

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 28 September 2023

- DHCW Response to Welsh Parliament Health and Social Care Committee and Public Accounts and Public Administration Committee Scrutiny of Digital Health and Care Wales Report
- COVID-19 Inquiry Update
- Amendments to Standing Orders & Standing Financial Instructions
- Eyecare Transition Update (via CEO report)

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

- Clinical Directorate Strategies (Information Governance, Information and Analytics, Clinical Informatics and Business Change)
- Primary Care Strategy

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 Several activities are underway to address the requirement to horizon scan both internally and across the system to inform the forward workplan for the Board.

4.2 The updated Workplan can be found as 2.5i 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	September 2023	APPROVED

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SHA Board Forward Workplan 2023-24



Standing Items	Lead	Type	Detail	28-Sep-23	30-Nov-23	26-Jan-24	28-Mar-24
Welcome and Introductions	Chair	Preliminary Matters					
Declarations of Interest	Chair	Preliminary Matters					
Minutes	Board Secretary	Consent					
Action log	Board Secretary	Consent					
Forward Work Plan	Board Secretary	Consent					
Shared Listening and Learning	Executive Medical Director	Main					
Chair & Vice Chair Report	Board Secretary	Main					
Chief Executive Report	Chief Executive Officer	Main					
Integrated Organisational Performance Report including Annual Plan Progress Updates	Executive Director of Strategy	Main					
Committee & Advisory Group Highlight Reports	Board Secretary	Main					
Corporate Risk Register Report	Board Secretary	Main					
Strategic Procurement Report	Executive Director of Strategy	Main					
Finance Report	Executive Director of Finance	Main					
Additional Items	Executive Lead	Type	Route in & detail	28-Sep-23	30-Nov-23	26-Jan-24	28-Mar-24
Stakeholder Engagement Plan Update	Executive Director of Strategy	Main	Cycle of Business	✓			✓
Equality, Diversity and Inclusion Update	Director of People & Organisational Development	Main	People and Organisational Development	✓			✓
Welsh Government Decarbonisation Return	Executive Director of Finance	Consent	Cycle of Business	✓			
People and Organisational Development Strategy Action Plan Update	Director of People & Organisational Development	Main	Cycle of Business - to inc DHCW Staff Survey outcome	✓			
Communications Strategy	Board Secretary	Main	Cycle of Business	✓			
Information Governance Strategy	Executive Medical Director	Main	Cycle of Business	✓			
Primary Care Strategy	Director of Primary, Community and Mental Health Digital Services	Main	Cycle of Business		✓		
DHCW Response to Welsh Parliament Health and Social Care Committee and Public Accounts and Public Adminis	Board Secretary	Consent	August MB Agenda Setting	✓			
COVID-19 Inquiry Update	Board Secretary	Consent	Board Secretary	✓			
Amendments to Standing Orders, Standing Financial Instructions & Scheme of Delegation	Board Secretary	Main	Board Secretary	✓			
Programme Governance and changes to DHCW governance arrangements	Board Secretary	main	Board Secretary	✓			
Eyecare Transition Update	Director of Primary, Community and Mental Health Digital Services		Chief Executive Officer	✓			
Board Assurance Framework Report	Board Secretary	Main	Cycle of Business		✓		
Cyber Implementation of the 3-Year Plan	Executive Director of Operations	Main	Cycle of Business - PRIVATE		✓		
Shared Listening & Learning Annual Review (inc Urgent Care Power BI Dashboard)	Executive Medical Director	Main	Cycle of Business		✓		
Corporate Risk Trending Analysis	Board Secretary	Main	Cycle of Business		✓		
Half Year Performance Against Plan	Executive Director of Strategy	Main	Cycle of Business		✓		
DHCW Long Term Strategy	Executive Director of Strategy	Main	Cycle of Business		✓		
Clinical Directorate Strategies (Information Governance, Information and Analytics, Clinical Informatics and Business Change)	Executive Medical Director		DG&S Agenda setting August - RH		✓		
Integrated Medium Term Plan – Approval	Executive Director of Strategy	Main	Cycle of Business			✓	✓
Strategic Workforce Planning Update	Director of People & Organisational Development	Main	Previous Board Action			✓	
End of Year Reporting Approach	Board Secretary	Consent	Cycle of Business			✓	
Board Champion Annual Report	Board Secretary	Consent	Cycle of Business			✓	
Digital Inclusion Update	Chief Executive Officer		Board action to receive 6 monthly updates			✓	
JET Actions	Board Secretary		JET - To be included via IOPR			✓	
SHA Board Cycle of Business	Board Secretary	Consent	Cycle of Business				✓
Annual Review of Standing Orders	Board Secretary	Main	Cycle of Business				✓
Standing Orders Approval	Board Secretary	Main	Cycle of Business				✓
Board & Committee Self-Effectiveness	Board Secretary	Consent	Cycle of Business				✓
Committee & Advisory Groups Annual Reports	Board Secretary	Consent	Cycle of Business				✓
Gender Pay Gap Annual Report	Director of People & Organisational Development	Consent	Cycle of Business				✓
Emergency Planning Annual Report	Executive Director of Strategy	Consent	Cycle of Business				✓
Performance Management Framework	Executive Director of Strategy	Main	Cycle of Business				✓
Adoption of Corporate Policies	Board Secretary	Consent	Cycle of Business. As Required				✓

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DIGITAL HEALTH AND CARE WALES

DECARBONISATION

ANNUAL EMISSIONS RETURN 2022-23

Agenda Item	2.6i
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

Executive Sponsor	Chris Darling, Board Secretary
Prepared By	Julie Ash, Head of Corporate Services
Presented By	Chris Darling, Board Secretary

Purpose of the Report	For Approval
Recommendation	
The Board is being asked to: APPROVE the 2022-23 Emissions Return report	

Richards Carys
21/09/2023 10:29:15

1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply
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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A Globally Responsible Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	ISO 14001
If more than one standard applies, please list below:	

HEALTH CARE STANDARD	Governance, leadership and accountability
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: EQIA not required	

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below Compliance with Welsh Government Decarbonisation Targets issued via a Welsh Health Circular
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	Yes, please detail below Social impacts on health are embedded in the broader environment and shaped by complex relationships between economic systems and social structures.

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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
NWSSP	NHS Wales Shared Services Partnership	DCR	Decarbonisation Reporting Team
TaP	Transport and Procurement		

2 SITUATION/BACKGROUND

- 2.1 This report provides an update on decarbonisation activity within Digital Health and Care Wales during the period April 2022 to March 2023 and provides a summary of the emissions return submitted to Welsh Government.
- 2.2 Digital Health & Care Wales form part of the Welsh Government Community of Experts on Climate Change and attend regular meetings of this forum. DHCW are also active members on other All Wales forums focused on Climate Change, such as Transport & Procurement Project Board, the Approach to Healthcare Project Board, Welsh Health Estates Forum and other sub-groups within this structure.
- 2.3 Regular reports are required by Welsh Government at varying frequencies. This, the annual emissions return, is due every year at the beginning of September. We submit narrative progress reports to Welsh Government every 6 months and a new reporting regime now requires quarterly reports showing progress against each initiative in the NHS Wales Decarbonisation Action Plan.
- 2.4 Digital Health & Care Wales (DHCW) has a number of Groups in place which manage activities covered within this report:
 - Decarbonisation Working Group
 - Environmental Awareness Group
 - Safety, Health and Environmental (SHE) Group
 - Water Safety Group

Richards, Carys
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3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1 The full DHCW Annual Emissions return for 2022-23 can be made available on request.

3.2 There has been progress against actions identified in our Decarbonisation roadmap including:

Type	Action from DHCW Decarbonisation Action Plan & Progress Overview
Buildings	<p>Implement actions to improve carbon footprint methodologies.</p> <ul style="list-style-type: none"> Monthly electricity usage data from both data centres was received and collated. DHCW confirmed the Power Usage Efficiency ratings (PUE) at both data centres. The use of estimates to measure electricity usage at our buildings was investigated; it was found that the use of estimates is the most suitable method.
	<p>Liaise with all landlords with regards to the BMS capabilities, LED lighting coverage and REGO certification.</p> <ul style="list-style-type: none"> Meetings were carried out with landlord representatives to establish their respective environmental aims and plans (LED lighting included). Current Building Management Systems (BMS) at Ty Glan-yr-Afon were confirmed to be suitable.
	<p>Recommence roll-out of LED lighting.</p> <ul style="list-style-type: none"> Full LED lighting upgrades were carried out at Ty Glan-yr-Afon and Technium 2.
	<p>Improve building management to allow 1% year-on-year reductions in emissions related to natural gas consumption.</p> <ul style="list-style-type: none"> Usage was recorded as well as ensuring best practices were in place to achieve this.
	<p>Implement priority 'TM44' energy survey recommendations.</p> <ul style="list-style-type: none"> Efficiency and best practice measures were implemented across four sites. DHCW also ensured that our air conditioning systems were mechanically up to date.
	<p>Explore option for shared accommodation to enable notice to be given on small site.</p> <ul style="list-style-type: none"> As a result of our Estates Plan options appraisal, the decision was made to close one of our sites.
	<p>Ensure we are achieving best practice performance within our data centres.</p> <ul style="list-style-type: none"> A move out from a less efficient data centre to a more efficient cloud-based data centre was completed. DHCW conducted visits to both data centres which provided assurance that best practice procedures are being followed in both locations. Quarterly recording of usage data from our data centres enabled us to track efficiency improvements.
Transport	<p>Implement actions to improve carbon footprint methodologies.</p> <ul style="list-style-type: none"> A Travel Survey was conducted and communicated to staff; this enabled us to capture emissions arising more accurately from commuting.

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	<p>Two EV vans to be trialled. Liaison with lease vehicle companies to understand opportunities.</p> <ul style="list-style-type: none"> Two electric vans were leased, bringing the electric fleet total to three.
	<p>Liaise with landlords with regards to increasing the number of EV charging points.</p> <ul style="list-style-type: none"> Landlords at three of our sites informed us that they had or were planning to install EV chargers available for staff to use at their respective sites.
	<p>Staff travel survey to be undertaken.</p> <ul style="list-style-type: none"> Completed as planned. This was communicated to all staff, with a response rate of 66%.
	<p>Developing Travel Plan and practical measures (cycle storage and showers, EV charging etc.) to (with the aid of national measures) reduce carbon intensity of commuting by 5% by 22/23.</p> <ul style="list-style-type: none"> The updated DHCW Travel Plan was published which detailed current travel arrangements for staff, improvement opportunities and raising sustainable travel awareness.
	<p>Working smarter to enable a 10% year-on-year reduction in business mileage (on 2019 baseline).</p> <ul style="list-style-type: none"> Quarterly measurement of business mileage data enabled us to track progression through the year; achieving a 92% reduction compared to baseline.
Procurement	<p>Implement actions to improve carbon footprint methodologies including thorough review of spending to remove double-counting and wrongly allocated spending. Devise procurement methodology not wholly dependent on spend and emission factors.</p> <ul style="list-style-type: none"> Better understanding of emissions categories enabled us to improve methodologies in this area and remove double counting.
	<p>Work with NWSSP to develop a strategy for low-carbon ICT procurement, including (e.g.) building carbon reduction requirements into invitations to tender; developing (or adopting) low carbon standards for ICT equipment, as part of NWSSP's Sustainable Procurement Code of Practice.</p> <ul style="list-style-type: none"> DHCW collaborated fully with NWSSP, including offering support to NWSSP and attending groups. DHCW will continue to provide support and work in a collaborative way with NWSSP throughout 2023/24.
	<p>Datacentre carbon working group to work with providers and use Best Practice Guidance of the EU Code of Conduct on Data Centre Energy Efficiency for monitoring of datacentre performance.</p> <ul style="list-style-type: none"> DHCW confirmed with both DC's that sufficient methods are in place for sustainability and that we will be updated of any changes/developments.
Approach to Healthcare	<p>Implement actions to improve carbon footprint methodologies.</p> <ul style="list-style-type: none"> After confirming the methodology in an expert workstream meeting, with Welsh Government, DHCW made the switch to using the most accurate method.
	<p>Evaluate the best operational model for DHCW with regards to working remotely post pandemic & maintain a minimum 30% working remotely strategy.</p> <ul style="list-style-type: none"> Regular monitor of site attendance data. Approx 87% of our employees worked remotely during 2022-2023.
	<p>Promote home working energy efficiency measures to staff.</p>

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	<ul style="list-style-type: none"> A Home Working energy efficiency measures communication was sent to all staff.
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3.3 The table below sets out DHCW's operational emissions for 2022-23 demonstrating a 39% reduction from our baseline year:

Broad Category	Category	Scope	2019/2020 Emissions (tCO ₂ e)	19/20 %	2022/2023 Emissions (tCO ₂ e)	22/23 %
Building Use	Building Gas	1 & 3	92		49 (-47%)	
	Building Electricity	2 & 3	400		274 (-31%)	
	Water	3	5		1 (-80%)	
	Waste	3	5		2(-80%)	
	Datacentre Electricity	2 & 3	1,215		458 (-62%)	
	F-Gas	1	N/A		169 (+169%)	
	Subtotal			1,717	62%	953 (-44%)
Transport	Business Travel	3	138		32 (-77%)	
	Fleet	1 & 3	21		25 (+19%)	
	Subtotal		159	6%	57 (-64%)	3%
Staff	Commuting	3	872		84 (-90%)	
	Homeworking	3	9		582 (+98%)	
	Subtotal		881	32%	666 (-24%)	40%
Total			2,757	100%	1,676 (-39%)	100%

3.4 The table below provides a summary of DHCW's Supply Chain Emissions targets and performance against our baseline year of 2019/20:

Target and Actual Performance	Emissions (tCO ₂ e) (actual and target)	Percentage Reduction vs 2019/20	Cumulative Savings tCO ₂ e
2019/2020 (Baseline)	17,207	-	-
2020/2021	15,490	-10%	-1,717
2021/2022	12,399	-28%	-4,808
2022/2023	5,327	-69%	-11,880
2025 (Target)	14,454	-16%	-2,753
2030 (Target)	11,357	-34%	-5,850

Targets are shown in grey cells (table excludes Operational Emissions data).

Supply Chain (Procurement) Emissions, which account for the largest proportion of DHCW's carbon footprint (76%), have reduced by 69% (a substantial reduction of 11,880 Tonnes CO₂e). Improved data gathering and an enhanced carbon footprint methodology (Tier 2) have enabled us to make these reductions.

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3.5 The following table provides a summary of DHCW's Gross emissions for 2022-23 - targets and performance vs 2019/2020. Emissions for 2022-23 are calculated to be 7,033 tCO₂e, an overall reduction from the baseline year of 65%, substantially ahead of target.

DHCW Target and actual performance	Emissions (tCO ₂ e)	Percentage reduction vs 2019/20	Cumulative Savings tCO ₂ e
2019/2020 (Baseline)	19,964	-	-
2020/2021	17,501	-12%	-2,463
2021/2022	13,978	-30%	-5,986
2022/2023	7,003	-65%	-12,961
2025 (Target)	16,770	-16%	-3,194
2030 (Target)	13,176	-34%	-6,788

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

4.1 DHCW are required to report our 2022-23 emissions performance to Welsh Government via an agreed template which is summarised in this report for approval. All actions identified within our Decarbonisation Plan have been completed on time and others are ongoing and due to be achieved by the target date.

4.2 DHCW have achieved a 65% reduction in emissions during 2022-23 compared to our baseline year 2019-20.

5 RECOMMENDATION

5.1 The Board is being asked to APPROVE the 2022-23 Emissions return.

6 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Weekly Executive Directors	23 August 2023	Approved
Management Board	14 September 2023	Approved

Richards Carys
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DIGITAL HEALTH AND CARE WALES

DECARBONISATION CO-ORDINATION REPORT (DCR) – TRANSPORT AND PROCUREMENT

Agenda Item	2.6ii
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

Executive Sponsor	Chris Darling, Board Secretary
Prepared By	Julie Ash, Head of Corporate Services
Presented By	Chris Darling, Board Secretary

Purpose of the Report	For Approval
Recommendation	
The Board is being asked to: APPROVE the content of the report	

Richards Carys
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1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply
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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A Globally Responsible Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	ISO 14001
If more than one standard applies, please list below:	

HEALTH CARE STANDARD	Governance, leadership and accountability
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: EQIA not required	

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below Compliance with Welsh Government Decarbonisation Targets issued via a Welsh Health Circular
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	Yes, please detail below Social impacts on health are embedded in the broader environment and shaped by complex relationships between

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	economic systems and social structures.
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
NWSSP	NHS Wales Shared Services Partnership	DCR	Decarbonisation Reporting Team
TaP	Transport and Procurement		

2 SITUATION/BACKGROUND

- 2.1 A new Decarbonisation Reporting regime has been launched. The new NHS Wales Decarbonisation Reporting process has been discussed within the following meetings:
- 14th April 2023 - Directors of Planning Meeting
 - 17th April 2023 - Health and Social Care Climate Emergency Transport and Procurement National Project Board
 - 24th April 2023 - Health and Social Care Climate Emergency Programme Board
- 2.2 The discussions proposed launching the reporting process with a pilot, covering only Transport and Procurement (TaP) Initiatives progress for Q4 2022 for each NHS Organisation, against the Strategic Delivery Plan. This was submitted on time with positive feedback provided.
- 2.3 On 25th July 2023, DHCW (in line with other organisations) received a request from the Decarbonisation Reporting (DCR) Team within NHS Wales Shared Services Partnership for our 2023/24 Quarter 1 Return which would cover all initiatives and was required to be submitted by 31st August 2023 following approval via local governance processes. The DCR team were pleased to enclose the new template for all workstreams, which following on from the feedback provided by reporting leads has seen a number of improvements. Key developments include:
- Removal of the requirement for individual Highlight Reports to reduce the burden of reporting
 - Additional RAG status, including grey for exempt and blue for 100% completed
 - Delivery confidence (action / initiative overall)
 - Formatting delays have now been alleviated

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3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 3.1 The DHCW Highlight Report and full supporting details can be made available on request.
- 3.2 There are 46 initiatives split across six areas as laid out in the NHS Wales Decarbonisation Action Plan:
- Carbon Management
 - Buildings, Estates and Planning
 - Transport
 - Procurement
 - Land Use
 - Approach to Healthcare
- 3.3 The table below sets out the methodology for assessing confidence of delivery against each initiative:

Delivery Confidence Key:

Confidence of Delivery	
Highly Likely	Successful delivery of the action/initiative to cost and quality appears highly likely and there are no major outstanding issues that at this stage appear to threaten delivery.
Probable	Successful delivery appears probable. However, constant attention will be needed to ensure risks do not materialise into major issues threatening delivery.
Feasible	Successful delivery appears feasible but significant risks and issues already exist requiring management attention. These appear resolvable at this stage and, if addressed promptly.
In Doubt	Successful delivery of the action/initiative is in doubt with major risks or issues apparent in a number of key areas. Urgent action is needed to ensure these are addressed, and establish whether resolution is feasible.
Unfeasible	Successful delivery of the action/initiative appears to be unachievable. There are major issues which at this stage do not appear to be manageable or resolvable. The action/initiative may need rebaselining and/or overall viability reassessed.
Complete	Successful delivery of initiative/action. There is no further input required.

Focus Area	Initiatives applicable to DHCW	Delivery Confidence
Carbon Management	1	
	2	
	3	
Buildings, Estates & Planning	4	
	5	
	7	
	9	
	10	
	12	
	14	
	15	
Transport	17	
	18	
	19	
	21	

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Procurement	None applicable	Not applicable
Land Use	33	
Approach to Healthcare	37	
	38	
	39	
	45	

- 3.4 Areas that will require focus (those with a delivery status of Yellow – probable or Amber – feasible) and actions over the coming months include:
- Initiative 2 – Review the Active Travel for Wales
 - Initiative 4 - All future lease and refurbishment plans will include requirements for energy efficient upgrades (buildings and data centres)
 - Initiative 7 – Continued engagement with Landlords to seek low carbon heat alternatives. DHCW will carry out heat studies at applicable sites.
 - Initiative 9 – Engagement with landlords around low carbon Building Management Systems (BMS) and expand use of timers to improve efficiencies where possible
 - Initiative 18 – Consider use of telematics in business vehicles or other form of monitoring driver behaviour
 - Initiative 19 – Increase EV Fleet and encourage use of electric vehicles for private use
 - Initiative 38 – Use of digital technology to improve patient care i.e. NHS Wales app
 - Initiative 45 – Participate and contribute to all strategies delivering reduction of single use plastics and packaging waste

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 Progress against actions identified as a result of Q1 2023-24 Decarbonisation Reporting will be monitored by the DHCW Decarbonisation Working Group and updates provided in future reporting rounds.

5 RECOMMENDATION

- 5.1 The Board is being asked to APPROVE the content 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
Weekly Executive Directors	23 August 2023	Approved
Management Board	14 September 2023	Approved

Richards Carys
21/09/2023 10:29:15

DIGITAL HEALTH AND CARE WALES

DHCW RESPONSE TO WELSH PARLIAMENT HEALTH AND SOCIAL CARE COMMITTEE AND PUBLIC ACCOUNTS AND PUBLIC ADMINISTRATION COMMITTEE SCRUTINY INTO DHCW REPORT

Agenda Item	2.7
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

Executive Sponsor	Chris Darling, Board Secretary
Prepared By	Julie Ash, Head of Corporate Services
Presented By	Chris Darling, Board Secretary

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

Richards Carys
21/09/2023 10:29:15

1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply
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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A Resilient 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 STANDARD	Governance, leadership and accountability
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 for this report	

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.

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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

2 SITUATION/BACKGROUND

- 2.1 During July 2022, the Senedd announced a joint scrutiny of Digital Health and Care Wales (DHCW) by the Health and Social Care Committee and the Public Accounts and Public Administration Committee. In particular, the Committees were to consider:
- The process of establishing DCHW and progress in the first year, progress achieved and outstanding challenges.
 - Progress on recommendation of the Fifth Senedd Public Accounts Committee reports.
 - Prioritisation and manageability of the work programme and change agenda, including workforce, skills issues, cyber security and any other areas of particular pressure of concern.
 - Relationship with local health boards, NHS trusts, local authorities, social services providers, and other key stakeholders including patients and patient groups.
 - Workforce and skills capacity within other health and care bodies, whether they have sufficient capacity to engage and potential impact on delivery of DHCW priorities.
 - Assessing the impact of DHCW's work and whether it's achieving its objectives.
 - Data transparency, accessibility, quality, and compatibility with health and social care data and key performance indicators across the UK.
- 2.2 The closing date for written submissions to the Call for Evidence was 23 September 2022, a total of 20 responses were received.
- 2.3 On 26 October 2022, the Committees held a concurrent meeting to take oral evidence from DHCW.
- 2.4 On 5 July 2023 the Public Accounts and Public Administration Committee and the Health and Social Care Committee published their report. The Committees requested written responses from the Welsh Government and Digital Health and Care Wales by 16 August 2023.

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 3.1 [DHCW's response](#) replied to 16 recommendations across 7 thematic areas which were as

follows:

- Transition from NWIS to DHCW
- Welsh Community Care Information System (WCCIS)
- Patient access to records
- Social Care
- Workforce
- Transformation Agenda
- Collaboration

3.2 The focus of each area is outlined briefly below.

Transition from NWIS to DHCW: Recommendation 1 related to the respective roles of Welsh Government and DHCW in determining DHCW's priorities and delivering major projects.

Welsh Community Care Information System (WCCIS): Recommendations 2 to 4 considered responsibilities for leadership of the WCCIS Programme, the requirements for regular progress updates and the outcome of the WCCIS contracting strategy review.

Patient Access to Records: Recommendations 5 to 8 focused on the NHS Wales App, the timeline for roll-out, the development of a communication strategy, how digital exclusion would be taken into account and governance and data security arrangement to support roll-out and operation of the App.

Social Care: Recommendation 9 was in relation to the availability of a plan for increasing engagement with the social care sector, including public, third and private sector providers, Regional Partnership Boards and the Social Partnership Council.

Workforce: Recommendations 10, 11 and 12 focused on recruitment and retention of specialist skills, vacancy management, the Welsh Institute of Digital Information (WIDI) Digital Degree Apprenticeship Scheme and finally how DHCW are sharing good cyber security practices with other public organisations.

Transformation Agenda: Recommendations 13 and 14 focused on funding and other resources required to deliver digital transformation.

Collaboration: Recommendations 15 and 16 identified a need to evaluate existing approaches to collaboration and cross-border accessibility of NHS services.

Richards, Carys
21/09/2023 10:29:15

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 The Committees have asked for regular updates on a number of the recommendations going forward.

5 RECOMMENDATION

- 5.1 The Board are asked to **NOTE** 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
Management Board	17 th August 2023	Noted

Richards Carys
21/09/2023 10:29:15

DIGITAL HEALTH AND CARE WALES

AMENDMENTS TO STANDING ORDERS, STANDING FINANCIAL INSTRUCTIONS & SCHEME OF DELEGATION

Agenda Item	2.8
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

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

Purpose of the Report	For Approval
Recommendation	SHA Board is being asked to
APPROVE the amendments to DHCW Standing Orders and Standing Financial Instructions.	

Richards Carys
21/09/2023 10:29:15

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

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions apply
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CORPORATE RISK (ref if appropriate)	
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	N/A
If more than one standard applies, please list below:	

<u>DUTY OF QUALITY ENABLER</u>	Leadership
<u>DOMAIN OF QUALITY</u>	Effective
If more than one enabler / domain applies, please list below:	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: March 2021
Yes, applicable	Outcome: Positive
Statement: The EQIA was undertaken by the Welsh Government and assessed as Positive.	

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below The SOs are a key foundation of DHCW's governance and accountability framework. A robust governance and accountability framework is more likely to impact favourably on the safety and experience of patients and staff.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below The SOs are designed to translate the statutory requirements for DHCW set out in legislation into day-to-day operating practice.
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.

Section 2:

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

2 APPROVAL / SCRUTINY ROUTE

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

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
SOs	Standing Orders	SFI	Standing Financial Instructions
WHSSC	Welsh Health Specialised Services Committee	EASC	Emergency Ambulance Services Committee

Richards Carys
21/09/2023 10:29:15

3 SITUATION/BACKGROUND

- 3.1 Standing Orders are designed to translate the statutory requirements set out in legislation into day-to-day operating practice. The Standing Orders include the Scheme of Decisions reserved to the Board; a Scheme of Delegations to officers and others; and Standing Financial Instructions. The SOs provide the regulatory framework for the business conduct of DHCW.
- 3.2 Whilst DHCW has the authority to amend the Model Standing Orders any amendment or variation must not contravene directions issued by Welsh Ministers or statutory requirements. The following provisions cannot be varied without the consent of Welsh Ministers:
- Section A – Introduction – The role of the Board Secretary
 - Non-officer Members – Paragraph 1.1.4
 - Associate Members – May include the Chief Digital Officer for NHS Wales – Paragraph 1.1.7
 - Tenure of Board Members – Paragraph 1.3
 - Committees Established by DHCW – Paragraph 3.4.1
 - Advisory Groups – as a minimum to include the Local Partnership Forum (LPF)
 - Arrangements relating to meetings, with particular emphasis on timescales and the quorum
 - Matters reserved for the Board where the full Board is required to retain responsibility or is in accordance with statutory requirements.
 - Removal of requirements of the Committee model terms of reference, although these can be added to.
- 3.3 In July 2023, a letter from the Minister was received advising of amendments and updates to the Model Standing Orders and Model Standing Financial Instructions for Local Health Boards, Trusts, Special Health Authorities and WHSSC. The Model Standing Financial Instructions for EASC have also been updated.
- 3.4 In addition, DHCW are in the process of establishing a new sub-committee of the SHA Board therefore, the Scheme of Delegation within the Standing Orders has been updated to reflect the new governance arrangements. The Terms of Reference once discussed and agreed by the Committee will be included in a future iteration of the Standing Orders.

Richards Carys
21/09/2023 10:29:15

Section 4: two boxes available in this section (1/2), use an appendix where necessary

4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 4.1 The SHA Board are asked to note the following changes to the [Standing Orders – Appendix A](#) via tracked changes. Below summarises the changes:
- Page 5 & 6 – Reference to the Health and Social Care (Quality & Engagement) (Wales) Act 2020
 - Page 24 – Reference to the Citizen Voice Body for Health and Social Care, Wales (known as Llais)
 - Page 26 – Reference to the change of Annual General Meeting date for 2022/23
 - Page 55 – Reference to change in Executive team portfolios
 - Page 68 – [Appendix C – Digital, Governance & Safety Terms of Reference](#) update to reflect the removal of oversight for DHCW Major Programmes and Projects, in addition to increased Independent Member membership.
- 4.2 SHA Board are asked to note the following changes to the [Standing Financial Instructions – Appendix B](#) in red. Below summarises the changes:
- Page 16 – Reference to the amended Counter Fraud Measures 2005
 - Page 25 - Reference to the CEO responsibility for signing the Performance Report, Accountability Report, Statement of Financial Position and the Governance Statement
 - Page 40 – Reference to Special Health Authorities must provide a contract summary to Welsh Government for contracts between £500,000 and £1 million prior to the contract being let
 - Page 40 – Reference to the requirement that do not require further Ministerial notifications or consent, in addition to further exceptions.

Section 5: two boxes available in this section (1/2), use an appendix where necessary

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 5.1 The Terms of Reference for the new Committee meeting will come to a future meeting for approval.

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

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
APPROVE the amendments to DHCW Standing Orders and Standing Financial Instructions.	

Richards Cerlys
21/09/2023 10:29:15

DIGITAL HEALTH AND CARE WALES COVID-19 INQUIRY UPDATE

Agenda Item	2.9
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

Executive Sponsor	Chris Darling, Board Secretary
Prepared By	Julie Ash, Head of Corporate Services
Presented By	Chris Darling, Board Secretary

Purpose of the Report	For Noting
Recommendation	
The Board is being asked to: NOTE the latest position on the UK inquiry into Covid-19, including providing an update on actions relating to Inactive Mailbox Deletion.	

Richards Carys
21/09/2023 10:29:15

1 IMPACT ASSESSMENT

<u>STRATEGIC OBJECTIVE</u>	All Objectives apply
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CORPORATE RISK (ref if appropriate)	
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Resilient Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	ISO 27001
If more than one standard applies, please list below:	

<u>HEALTH CARE STANDARD</u>	Governance, leadership and accountability
If more than one standard applies, please list below:	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: EQIA not required for this update	

[Workforce EQIA page](#)

IMPACT ASSESSMENT	
<u>QUALITY AND SAFETY</u> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<u>LEGAL</u> IMPLICATIONS/IMPACT	Yes, please see detail below Respondents are required by law to answer Rule 9 Requests. There is a possibility that due to events that occurred, individuals may have to source information from alternative means.
<u>FINANCIAL</u> IMPLICATION/IMPACT	No, there are no specific financial implication related to the activity outlined in this report
<u>WORKFORCE</u> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<u>SOCIO ECONOMIC</u> IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

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

Acronyms			
NWSSP	NHS Wales Shared Services Partnership	DHCW	Digital Health and Care Wales
SHA	Special Health Authority	NWSSP	NHS Wales Shared Services
O365	Office 365		

2 SITUATION/BACKGROUND

- 2.1 The then Prime Minister, Boris Johnson, announced an independent public inquiry into the UK Government's handling of the COVID-19 pandemic would take place in Spring 2022. The Inquiry will play a key role in examining the UK's pandemic response and ensuring that we learn the right lessons for the future.
- 2.2 The Welsh Government has agreed to establish a Senedd Covid-19 Inquiry Special Purpose Committee, co-chaired by Joyce Watson and Tom Gifford. The remit and full implications are not yet known but it is anticipated that the Committee will consider any issues arising from the UK Covid-19 Inquiry that require further examination in Wales.
- 2.3 DHCW along with other Health Bodies in NHS Wales have engaged with NWSSP Legal and Risk Services to prepare for the inquiry. DHCW have instructed NWSSP Legal and Risk Services to represent DHCW and have held a number of meetings with the solicitor allocated to DCHW to review progress to date and agree specific next steps. DHCW have also now instructed external counsel.

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 3.1 The Covid-19 Inquiry Team Solicitors requested a statement/evidence under Rule 9 of the Inquiry Rules 2006 for Module 2B which is looking at the Welsh Governments' core political and administrative decision making in relation to the Covid-19 pandemic. The response was reviewed by DHCW's solicitor and external counsel prior to approval by our Chief Executive. The response was submitted by our solicitor to the Inquiry Team on 28 June 2023. The Inquiry Team have acknowledged our submission and advised that they will be in touch to confirm next steps

Richards Cerys
21/09/2023 10:29:15

in due course.

- 3.2 We anticipate potentially being asked for more detailed information as part of Module 3 which focuses on activities/decisions undertaken by NHS organisations.
- 3.3 On 16 February 2023, the DHCW Microsoft 365 Team uncovered an issue with email retention within the NHS Wales Microsoft 365 email service. This has resulted in the email mailbox contents not being retained for users when the Microsoft 365 licence was removed (i.e., mailboxes for people who have left an NHS Organisation or who have left an NHS Organisation to join another NHS Organisation within NHS Wales). All content stored in the affected mailboxes (email, calendar, contacts, notes) will have been deleted, unless organisations implemented additional controls to retain the data. Some organisations had implemented additional controls (a 'Hold') which provides further overriding email retention capabilities, namely: Litigation Hold and InPlace Hold. Accounts which had these additional capabilities were not affected by this issue (i.e. they have not been deleted). Two NHS Organisations have advised that they hold a separate backup/archive of all email accounts and therefore should not be affected by this issue.
- 3.4 Email retention policies are in place in the NHS Wales Microsoft 365 service, to ensure that email is kept for a 7-year period. This is for use in investigations, inquiries, etc. If a user deletes email that they have sent or received, a copy is kept in the system which can be retrieved by undertaking an e-compliance search. Whilst the policy was protecting such emails in active mailboxes (i.e. those with an assigned Microsoft 365 license), an incorrect configuration resulted in this policy not applying to inactive (unlicensed) mailboxes.
- 3.5 DHCW submitted an Early Warning Notification to Welsh Government on 22 February 2023 advising of the issue with Microsoft O365 relating to email retention within the NHS Wales Microsoft 365 email service. A work around was put in place on 20th February 2023 (to prevent further deletions) and a permanent fix implemented at the end of March 2023. We are liaising with the affected Health Boards and Trusts on a workaround for recovering the deleted emails by searching other mailboxes for information which was sent to or from the affected user's mailbox, which will allow organisations to assist with any investigation or inquiry.
- 3.6 The Microsoft 365 Service through which the mailboxes are provided is coordinated by DHCW with the administration of individual mailboxes managed by the employing organisations. The service is managed through a Service Management Board including representatives from the Health Boards, Trusts and Special Health Authorities. These organisations were made aware of this issue through the Microsoft 365 Service Management Board on the 17th February 2023 and at the National Service Management Board on 24th March 2023. Health Boards, Trusts and other affected organisations were also formally written to on 2 June 2023 to advise them of progress and actions taken to date.
- 3.7 DHCW advised the Covid-19 Inquiry Team of the event and actions taken on 2 August 2023 noting the potential impact of mailboxes being unavailable affecting responses to Rule 9

requests. We have since received a request from the Inquiry team for further information relating to this issue which was provided on 25th August 2023.

- 3.8 A further communication was sent to the Early Warning Notification Team at Welsh Government on 3 August 2023 confirming that the Covid-19 Inquiry Team had been notified of the issue.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 The primary risk associated with these mailbox deletions is an organisation's ability to respond to a search request associated with an investigation or enquiry (e.g. the Covid 19 inquiry). However, key documentation is stored in document repositories and not solely in mailboxes. We have identified mechanisms to enable the majority of the emails to be retrieved.

5 RECOMMENDATION

- 5.1 The Board are being asked to **NOTE** the latest position on the UK inquiry into Covid-19, including providing an update on actions relating to Inactive Mailbox Deletion.

Richards, Carys
21/09/2023 10:29:15

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	17 August 2023	Noted

Richards Carys
21/09/2023 10:29:15

DIGITAL HEALTH AND CARE WALES

SHARED LISTENING AND LEARNING PRESENTATION – 'LAST YEAR OF LIFE' POPULATION DASHBOARD

Agenda Item	3.1
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

Executive Sponsor	Rhidian Hurle, Executive Medical Director
Prepared By	Gareth John, Head of Information Delivery Digital Health & Care Wales (DHCW)
Presented By	Anthony Byrne, Palliative Medicine Consultant Cardiff & Vale University Health Board / Gareth John, Head of Information Delivery (DHCW)

Purpose of the Report	For Discussion/Review
Recommendation	
The Board is being asked to: DISCUSS the Shared Listening and Learning Presentation	

Richards Carys
21/09/2023 10:29:15

1 IMPACT ASSESSMENT

<u>STRATEGIC OBJECTIVE</u>	Expanding the content, availability and functionality of the Digital Health and Care Record
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CORPORATE RISK (ref if appropriate)	N/A
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

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

<u>HEALTH CARE STANDARD</u>	Timely Care
If more than one standard applies, please list below:	

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

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

Riches
21/09/2015 10:29:15

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
EoLC	End of Life Care		

2 SITUATION/BACKGROUND

- 2.1 The availability of Health and Care Services impact the quality of life of patients (adults and children) and their families who are facing problems in the last year of life. Maintaining quality of living for as long as possible in the last year of life is key to patient satisfaction.

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 3.1 The Board are asked to consider its understanding of the demands on acute (unscheduled care) services in the last year of life and if they add value to the individual.
- 3.2 The Board are asked to consider if services could be improved by using data.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 One third of healthcare costs occur in the last year of life. There is an opportunity to reduce service costs and improve the patient's experience by further understanding what happens in the last year of life.

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, Executive Medical Director	18/09/2023	Approved

Richards, Carys
21/09/2023 10:29:15

Creative collaboration

From hackathon to a

"Last Year of Life" population dashboard



GIG
CYMRU
NHS
WALES | Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

Gareth John

Head of Information Delivery

Digital Health & Care Wales (DHCW)

Anthony Byrne

Palliative Medicine Consultant

Cardiff & Vale University Health Board

Richard's Cards
21/09/2025 10:29:15

Context of the data hackathon

WHO defines palliative care as:

‘an *approach* that improves the quality of life of patients (adults and children) and their families who are facing problems associated with life-threatening illness or serious health-related suffering. It includes, but is not limited to, end-of life care. It is not the “last resort”, but should be *integrated early* in the care of people affected by a life-threatening condition’.

Richards, Carys
21/09/2023 10:29:15

Palliative Care

- Palliative care approach should be:
 - Person and problem centric – not service provider centric
 - Accessible and equitable
 - Less about timing – more about timeliness
- Complexity challenge:
 - Multiple disease states
 - Rapidly changing symptomatology and care needs
 - Multiple care teams involved in care provision
 - Care provided across multiple care settings

Richards, Carys
21/09/2023 10:29:15

Clinical context

- One third of healthcare costs occur in last year of life
- Background of A Healthier Wales, Value based Healthcare and National Clinical Framework
- Consider quality domains: efficiency, safety, effectiveness, experience
- Requirement to understand how systems of care currently interact
- The approach to tackling complexity and what's needed to underpin it

Richards, Carys
21/09/2023 10:49:43

Opportunities with data of whole population

- Understand pathway flows more predictably
- Understand service pinch point impact on systems efficacy
- Identify triggers for intervention and optimal duration of responses:
e.g. of hospice at home or social care packages
- Evidence to innovate and evaluate new ways of working

Richard's Carys
21/09/2023 10:29:15

Wider context – integrated projects

Multi- perspective programme

Effectiveness data/PROs

Experience and ‘environmental’
impacts

Safety and quality of care:
systems interactions

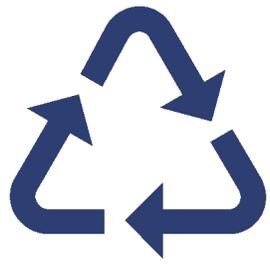
Value in Health

Richards Carys
21/09/2023 10:29:15

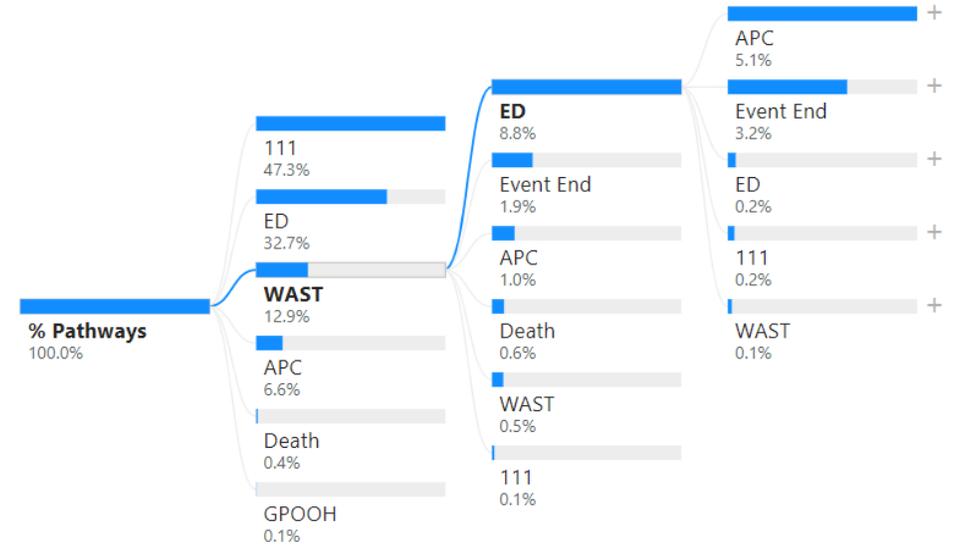
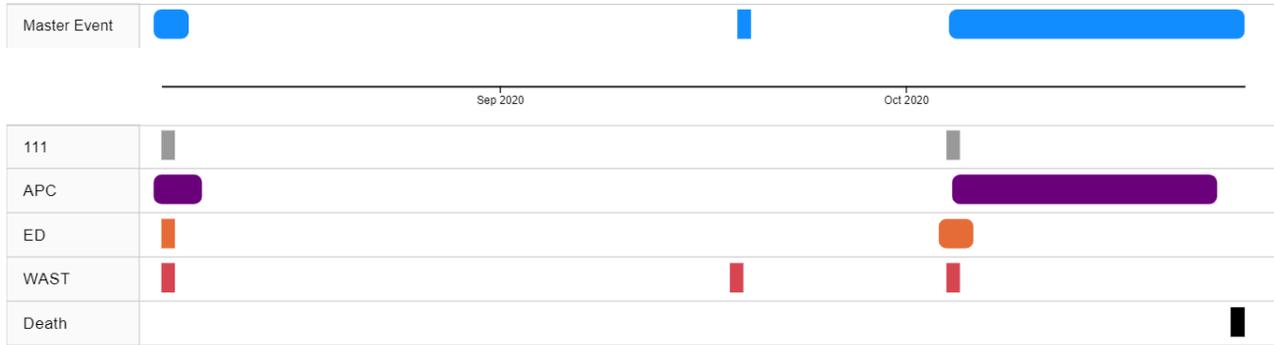
Hackathon: problem ownership

- What services do people interact with in the last year of life?
- Start by understanding what deviations from ideal pathway may look like in last year
- Unscheduled care interactions as proxies for deviations from ideal pathway
- What might be feasible: couple of conditions...short time period..

Richards, Carys
21/09/2023 10:29:45



Reuse - Recycle



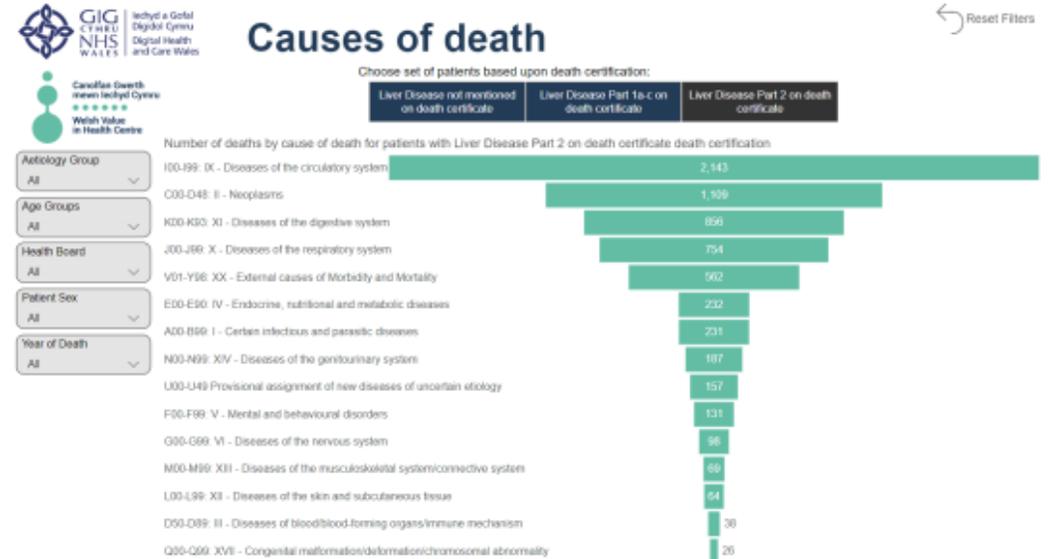
National Liver Disease Dashboard - Live

lechyd a Gofal Digidol Cymru Digital Health and Care Wales

Canolfan Gwerth mewn lechyd Cymru Welsh Value in Health Centre

This document has been produced by DHGCV. For any queries please contact: vh@wales.nhs.uk

National Liver Disease Dashboard



The Challenge

- Create cohort: “Individuals who died in the calendar year of 2021”
- Bring together all available data relating to these individuals for their last year of life (focused on unscheduled care interactions)
- Analyse and visualise data in an understandable and engaging way

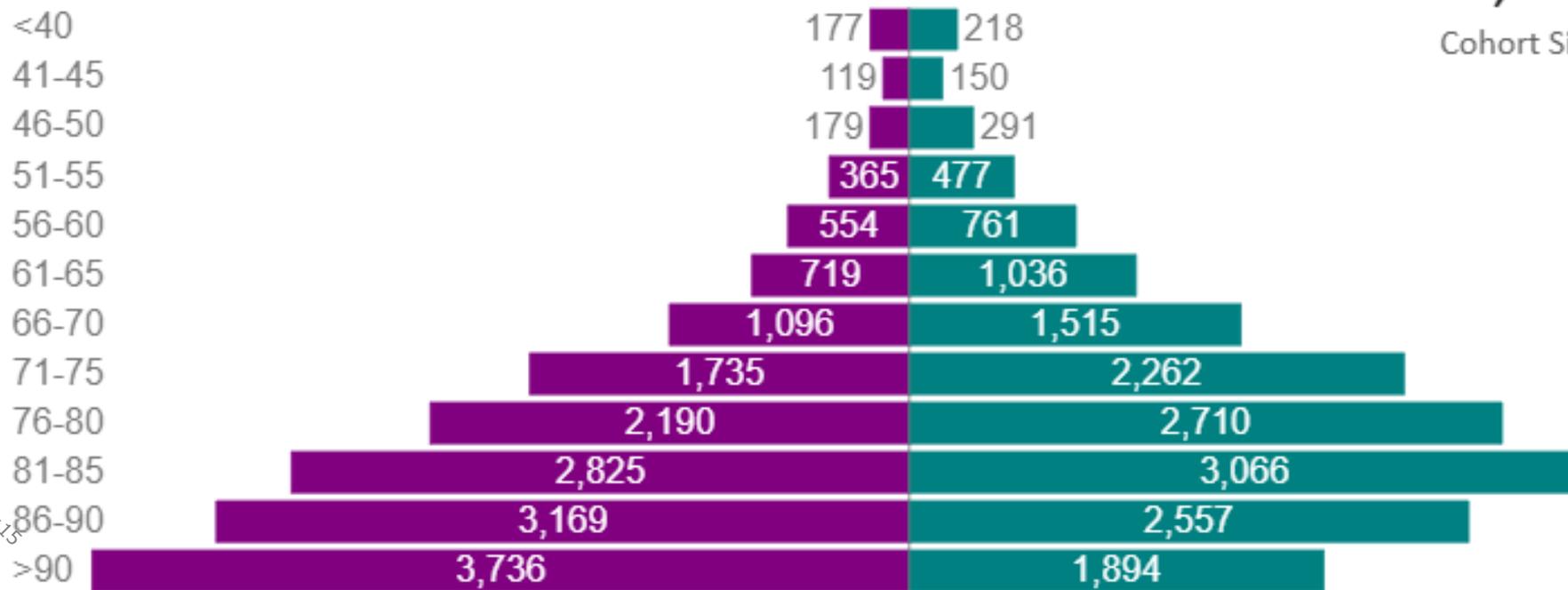


Hackathon analysis – creating the cohort

Cohort derived from death registrations data (source: Office for National Statistics), with deaths due to external causes (e.g. accidents, suicides) excluded

Patients by Age and Sex

● Female ● Male



33,801
Cohort Size

Richards Carys
21/09/2023 10:29:15

Hackathon analysis – healthcare interaction data



es Welsh Ambulance Service Trust (WAST) – Emergency (999) calls



Emergency Department attendances (ED)



Admitted Patient Care (APC)



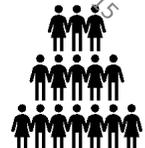
GP Out of Hours (GPOOH)



111 Service (Non emergency calls)



Specialist Palliative Care (SPC) contacts



Welsh Demographic Service (National patient register)

Richardus Canys
21/09/2023 10:29:15



Power BI

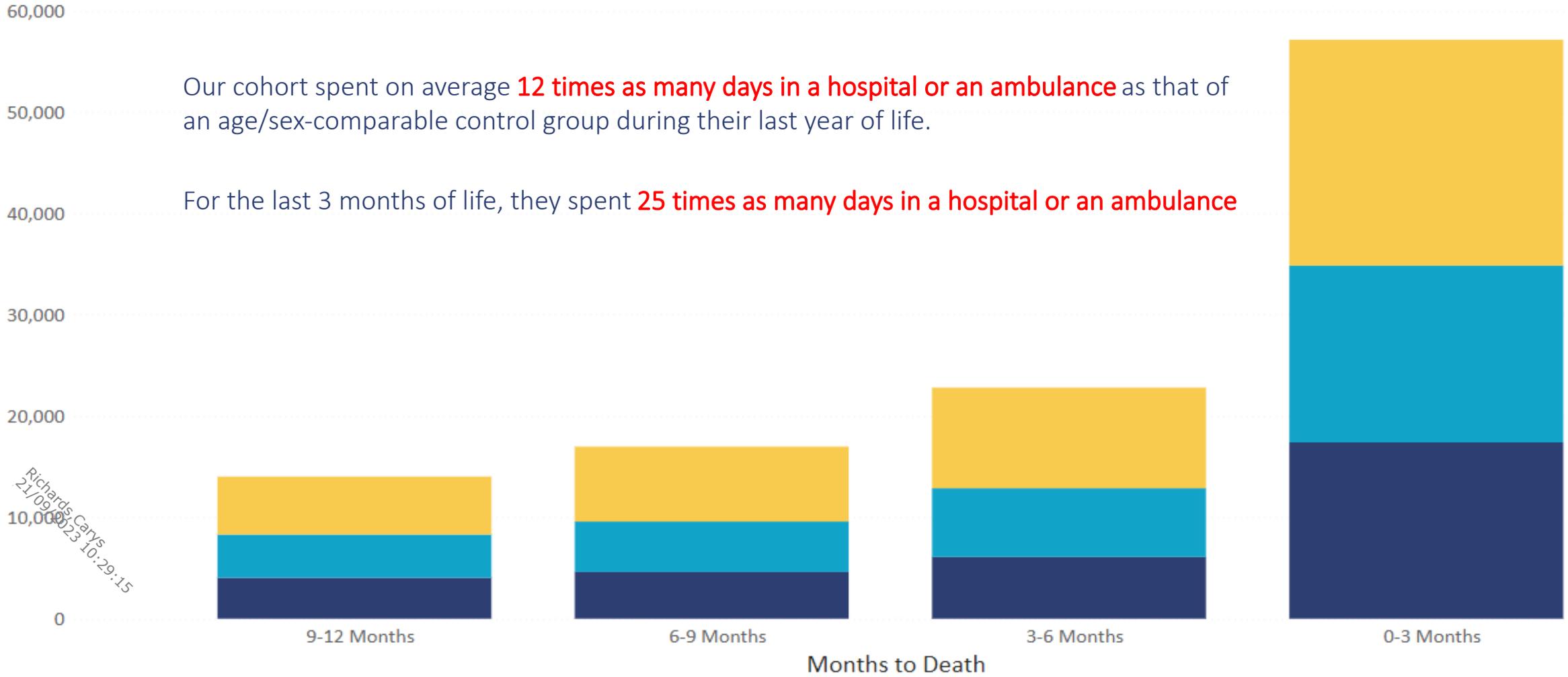
- Existing skills ✓
- Existing templates ✓
- Interactivity for users ✓
- Already licensed to publish dashboards ✓

Richards, Carys
21/09/2023 11:29:15

Totals days that our cohort spent in a hospital or an ambulance

Patients with Stays by Months to Death and Service Type

Service Type ● WAST ● ED ● APC



Our cohort spent on average **12 times as many days in a hospital or an ambulance** as that of an age/sex-comparable control group during their last year of life.

For the last 3 months of life, they spent **25 times as many days in a hospital or an ambulance**

Richards Carys
21/09/2023 10:29:15

Hackathon reflections: the information specialists

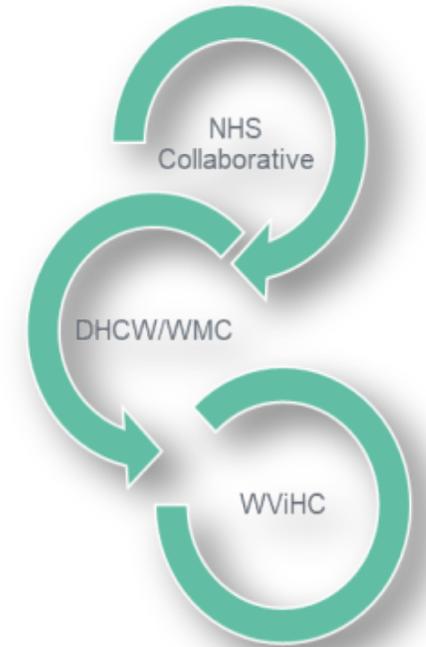
- Pleased with what we were able to achieve in just 2 days
- Lots of enthusiasm and engagement from both the information and clinical side
- Felt as though we were equal partners in the creative process
- A nice template for how to successfully collaborate with healthcare professionals



Richards, Carys
21/09/2023 10:29:15

Hackathon impacts: the clinicians

- Sustainable collaborations: data – clinical – policy – academia
- Clear positioning within wider demonstration of value
- Underpinning of strategic planning and policy implementation
- Identification of gaps in data access and power of data integration



Richards, Carys
21/09/2023 10:29:15

Routes to impact:

- Directly informing NHS Wales Executive strategic approaches to EoLC provision
- Innovation and evaluation:
 - WAST – palliative care paramedic projects
 - Palliative Care ‘Front Door A&E projects
 - EoLC needs of those with mental health conditions
 - Six goals of care project
 - Detailed close to practice projects on ‘how’ and ‘why’ of service delivery

Richards Carys
21/09/2023 10:29:15

DIGITAL HEALTH AND CARE WALES

CHAIR AND VICE CHAIR REPORT

Agenda Item	4.1
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

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

Purpose of the Report	For Discussion/Review
Recommendation	
The SHA Board is being asked to RECEIVE and DISCUSS the report and APPROVE the proposed revised DHCW Committee membership.	

Richards Carys
21/09/2023 10:29:15

IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply
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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

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

HEALTH CARE STANDARD	Governance, leadership and accountability
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 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 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
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
HEIW	Health Education and Improvement Wales	IM	Independent Member

2. SITUATION/BACKGROUND

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

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

Chair:

3.1 Meeting with the Future Generations Act Commissioner 3 August 2023

I along with Helen Thomas met with the Future Generations Act Commissioner, Derek Walker on the 3 August. Derek has recently taken up the position of Future Generations Act Commissioner, and with DHCW preparing to formally come under the Act from the 1 April 2024 we had lots to discuss about how DHCW can impact the seven well-being goals for Wales. It was positive to hear of the collaborative work the Future Generations Office has been undertaking, across all sectors, gathering views, feedback and ideas to inform the Future Focus over the next seven years. We spent a lot of time discussing the importance of equality of access and the digital inclusion agenda.

3.2 Extraordinary All Wales Chair Peer Group Meeting 8 August 2023

I attended the All-Wales Chair Peer Group meeting on the 8 August which focused on the NHS Wales financial position, and the approach being taken at an organisational level as well as a broader system level, in response to the NHS Wales financial deficit and need to identify

significant savings across all NHS Bodies. The discussion was helpful in informing the DHCW Board meeting on the 10 August to consider the additional DHCW savings schemes for 2023/24.

3.3 DHCW Extraordinary Board Meeting 10 August 2023

An extra-ordinary Board meeting was held on the 10 August to consider the Welsh Government request for all NHS Bodies with balanced plans to identify additional savings opportunities to help bridge the NHS Wales deficit position. The Board had a long discussion, considering various savings opportunities identified by DHCW directorates, and approved the proposed savings schemes which was subsequently submitted formally to Welsh Government by the deadline of the 11 August.

In addition, the Board reviewed the final draft [DHCW response to the recommendations included in the Health and Social Care and Public Administration and Public Accounts Committee Joint Review into DHCW](#).

As the committee recognises, DHCW is still a new organisation and we are pleased [the report](#) highlights areas of progress around our structure and some of our systems and processes whilst recognising that we face a number of significant challenges.

3.4 End of Year Review Meeting of DHCW CEO with NHS Wales Chief Executive 10 August

On the 10 August myself and Judith Paget, NHS Wales Chief Executive and Director General for Health and Social Care Services met with Helen Thomas to undertake her end of year review for 2022/23. The review meeting provided an excellent opportunity to reflect on the work Helen and the organisation more broadly have achieved to-date, the areas of focus moving forward, challenges and opportunities.

3.5 All Wales Chair Peer Group Meeting 29 August 2023

The All-Wales Chair Peer Group meeting held on the 29 August considered a number of items, starting with the implications of the recent distressing events that have taken place in the Countess of Chester Hospital, in the context of ensuring Boards are assured that quality, safety and governance systems are functioning as intended, and the potential for the regulation of senior NHS managers. We also had a presentation from Public Health Wales on the vaccination programmes in Wales, and were joined by the NHS Wales Chief Executive / Director General for Health and Social Care in Welsh Government who discussed the need to address the NHS Wales in year deficit position.

3.6 Meeting Llais Cymru Chair and Chief Executive 4 September 2023 with Medwin Hughes

Richards, C
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On the 4 September I had a very informative discussion with Medwin Hughes, the Llais Cymru Chair and Alyson Thomas Chief Executive. I have arranged regular catch up's with [Llais Cymru](#) as a key partner, who formally established on 1 April 2023. We had helpful conversations about the NHS Wales App and how we can work in partnership to ensure the citizen voice is at the forefront of all future developments relating to the NHS Wales App. In addition, we discussed future Board to Board engagement, working with HEIW on training and development in digital, partnership working, the Office 365 Centre of Excellence and governance arrangements. I look forward to future discussions with partners from Llais Cymru.

3.7 DHCW Independent Member Six Monthly Review of Objectives

I undertook a number of discussions with DHCW Independent Members on their half year progress against objectives, including reflections on progress and challenges faced and future DHCW governance changes and implications. I have further discussions planned over forthcoming months with the Independent Members I've not yet had reviews with yet.

3.8 Programme Governance and Committee Membership

I have kept the Board updated through this Chair Report on the outcome of the report from the work undertaken by Mr Steve Combe, Independent Governance Advisor, on DHCW hosted programme governance arrangements. In July I met with the Minister for Health and Social Services, the Chief Digital Officer for NHS Wales and Helen Thomas to consider the outcome of the report. We agreed at this meeting to progress with the recommendations included within the report to move the accountability for delivering these DHCW hosted programmes from external SROs to the DHCW Accountable Officer – Helen Thomas. We are currently working through these changes with Welsh Government, but in anticipation for the changes required to the internal DHCW governance arrangements I have been discussing with Independent Members membership of the proposed newly established DHC Sub-Committee of the Board to oversee major programmes and their delivery. It is proposed that the membership of this Committee will be made up of:

- Simon Jones, Chair of the Committee
- Ruth Glazzard, Vice Chair of the Committee
- Rowan Gardner, Member of the Committee
- David Selway, Member of the Committee
- Marian Wyn Jones, Member of the Committee

In addition, in considering Independent Member workloads and Committee membership I have taken the opportunity to add an additional member to the Digital Governance and Safety Committee, ensuring all Committees have a minimum of four Independent Members to improve resilience, with the proposed membership as below:

Richards Carys
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Digital Governance & Safety Committee	Audit and Assurance Committee	Remuneration and Terms of Service Committee	Programmes Delivery Committee
<ul style="list-style-type: none"> Rowan Gardner (Chair) David Selway (Vice Chair) Marilyn Bryn Jones Alistair Klass Neill 	<ul style="list-style-type: none"> Marian Wyn Jones (Chair) Alistair Klass Neill (Vice Chair) Ruth Glazzard Marilyn Bryn Jones 	<ul style="list-style-type: none"> Simon Jones (Chair) Ruth Glazzard (Vice Chair) Marilyn Bryn Jones Marian Wyn Jones David Selway Rowan Gardner Alistair Klass Neill 	<ul style="list-style-type: none"> Simon Jones (Chair) Ruth Glazzard (Vice Chair) David Selway Rowan Gardner Marian Wyn Jones

The Board are asked to endorse the proposed Committee membership, and the first planned Programmes Delivery Committee is planned for November 2023, where the draft Terms of Reference will be considered, after which point, they will be brought back to the Board for formal approval.

Vice Chair:

3.9 Vice Chair Peer Group Meeting 9 August 2023 and 20 September 2023

The Vice Chair Peer Group met on the 9 August and 20 September 2023, which like the Chair Peer Group focused on the NHS Wales response to the financial pressures faced and in particular how to best manage demand for services, any areas of collaboration and joint working to address the financial pressures. In addition, the Peer Group also considered the prevention agenda and the role the NHS Wales App plays in this agenda. A feature of the 20 September discussions was the work on accelerated cluster development.

3.10 Board Development 21 September 2023

Since the last Public Board meeting, DHCW have held one Board Development Day on the 21 September 2023. The day was chaired by Ruth Glazzard and covered the DHCW long term strategy development, the DHCW Primary Care strategy, an update from Welsh Government on the recently published [digital and data strategy for health and social care in Wales](#). The afternoon was facilitated by Deloitte on the skill mix of the Board and what it means for DHCW.

Richards Carys
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4. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 The new DHCW Committee being established is subject to confirming arrangements with Welsh Government.

5. RECOMMENDATION

- 5.1 The SHA Board is being asked to RECEIVE and DISCUSS the report, and APPROVE the proposed revised DHCW Committee membership.

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 and Vice Chair	Sept 2023	Approved

Richards Carys
21/09/2023 10:29:15

DIGITAL HEALTH AND CARE WALES

CHIEF EXECUTIVE OFFICER REPORT

Agenda Item	4.2
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

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

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

Richards Carys
21/09/2023 10:29:15

1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply
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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

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

HEALTH CARE STANDARD	Governance, leadership and accountability
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 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 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
CEO	Chief Executive Officer	PADR	Personal Appraisal Development Review
HIMMS	Healthcare Information and Management Systems Society	EMRAM	Electronic Medical Record Adoption Model

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 since the last meeting.

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1 Digital Maturity

NHS Wales has been undertaking a significant national assessment of digital maturity and over the last year DHCW has facilitated and financially supported the completion of two assessments with HIMSS and KLAS. The Healthcare Information and Management Systems Society (HIMSS) has supported NHS Wales organisations in undertaking the Electronic Medical Record Adoption Model (EMRAM) assessment, as agreed and in collaboration with Directors of Digital.

The outputs of the HIMSS and KLAS reports were agreed by Directors of Digital to be considered a collective starting point for health boards and Trusts on our NHS Wales joint national digital maturity journey. A Digital Maturity Steering Group has been established to drive forward the HIMSS and KLAS work to-date, with its membership expanded to include colleagues from across other organisations. The Group will consider the recently published Digital and Data Strategy for Health and Social Care in Wales principles and confirm the priority gaps to be filled as highlighted in the assessments around digital foundations and system features. It will confirm which areas of good practice to adopt and propose a programme

Richard Spence
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approach to delivery of improvements, as well as highlighting any national financial implications.

I look forward to seeing this work progress and develop over the coming months and will keep the Board updated as appropriate.

3.2 Staff Briefing

Since the last Board meeting we have held two staff briefings during August and September which saw over 500 staff joining for both briefings to hear our latest organisational updates. During the sessions I updated staff on the NHS Wales Financial Position and our response to support this, discussed the refreshed Welsh Government Digital & Data Strategy for Health and Social Care, in addition to providing a number of updates on key major programmes and sharing DHCW's new Programme Governance arrangements as they are developing.

I also discussed the great work of the Equality, Diversity & Inclusion Network and encouraged staff to complete the NHS Wales Staff Survey.

Lastly, during the August briefing it was a pleasure to formally announce the winner of the Health & Wellbeing Photography Competition and the launch of DHCW's Community Projects Initiative.

My thanks to all those who joined in and engaged during the sessions.

3.3 Health Board / Special Health Authority Engagement Sessions

The DHCW Executive Team have held six strategic sessions since the last Board meeting.

- Cardiff & Vale University Health Board
- NHS Wales Shared Services Partnership
- Health Education Improvement Wales
- Aneurin Bevan University Health Board
- Cwm Taf Morgannwg University Health Board
- Velindre University NHS Trust

All sessions were attended by members from the Health Boards, Special Health Authorities and DHCW Executive and Senior Leadership teams. The sessions provided several positive outcomes with discussions around joint approach to workforce development and cyber resilience, and the sharing of learning and intelligence around procurement and the Duty of Quality. There was also a commitment to supporting regional working through the establishment of a digital stream within the South East Wales region.

All sessions provided the opportunity to discuss collaboratively the collective challenges across NHS Wales and outline how digital can best support these at local, regional and national levels.

Richards, Catherine
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In addition to the strategic sessions, we held workshops with Hywel Dda University Health Board to explore how we could support their digital transformation agenda, and with Aneurin Bevan University Health Board where we looked at how we can enhance our collaborative working.

As ever, we look forward to continuing to work closely together with our NHS Partners over the coming months.

3.4 Welsh Language Commissioner Meeting

It was a pleasure to meet with Efa Gruffudd Jones, Welsh Language Commissioner at the end of July 2023. Our Executive Board Champion for Welsh Language provided an overview of DHCW's role across NHS Wales in addition to discussing sharing best practice and encouraging the use of the Welsh Language in the workplace. As a bilingual organisation, I'm looking forward to working collaboratively with the Commissioner to drive this agenda forward.

3.5 NHS Leadership Board

The NHS Leadership Board met on the 22 August 2023 where topics discussed included the Maternity & Neonatal Safety Support Programme, the implementation of the Duty of Quality along with routine performance overviews and financial updates.

3.6 Directors of Digital Peer Group

The Directors of Digital Peer group have also met twice since the last Board meeting where we collectively discussed National Programme Delivery across NHS Wales and held a productive and collaborative workshop on digital Strategy.

3.7 Four Nations Meeting

On 18 and 19 September 2023, we hosted a two day Four Nations Meeting with the Digital Health and Care leaders from England, Ireland and Scotland. It was great to discuss UK collaboration on Artificial Intelligence, Standards and Interoperability, Supplier eco-system and Commercial Strategies in addition to progress on areas including Staff Identity, Workforce Development, Digital Maturity, NHS App, Virtual Wards and working with our Partners in Social Care and Local Government.

3.8 Quarterly Meeting with John Quinn, Chief Information Officer, NHS England

On 7 August 2023, I had my regular quarterly meeting with John Quinn, as ever the meeting was very productive. We discussed structures and the ongoing re-organisation work within NHS England to support the transformation and delivery agenda. We also discussed progress on the Electronic Prescribing Service Programme and NHS Login.

3.9 Eyecare Programme Transition Update

The Board will be aware that the Digital Eyecare Programme, transferred from Cardiff & Vale University Health Board to DHCW on 1 June 2023. Welsh Government at the request of DHCW, wrote to all Local Health Boards stating that the Programme would pause for up to 3 months to enable a period of discovery and due diligence and to develop a re-baselined Programme plan, together with a resource and financial plan for submission to Welsh Government by the end of September 2023.

Welsh Government have agreed in principle to increase the programme funding, however formal confirmation of this has not been received. In addition, a number of Service Level Agreements from Health Boards need to be secured.

To date, only Cardiff & Vale University Health Board and Cwm Taf Morgannwg University Health Board have gone live with the programme. In order to implement the priority sub – specialties’ by March 2025 and for Optometry Electronic referrals to be deployed successfully, implementation needs to commence at the beginning of January 2024.

DHCW are responsible for delivering a number of major dependencies before any new Local Health Boards or Users can be implemented, therefore DHCW are working to address the major dependencies internally as a matter of urgency to commence implementation at the beginning of January 2024. I will keep the Board updated on the programme as appropriate.

3.10 Radiology Information System Procurement Programme

I have spent a lot of time over the past few months working closely with DHCW colleagues and wider NHS Partners to ensure partners across NHS Wales have been kept up to date with the latest position with regard to the Programme and I am pleased to update the Board that the Master Services Agreement and the All Wales Deployment Order has now been signed by DHCW all relevant Health bodies.

3.11 Joint Escalation and Intervention Arrangements

I am pleased to report that on the 11 September 2023, I received a letter from Judith Paget, Director General Health & Social Services / NHS Chief Executive, Health and Social Services Group confirming that DHCW Joint Escalation and Intervention Arrangement is ‘routine monitoring,’ which is very positive.

3.12 DHCW Staff Survey

DHCW Staff Survey was launched on 6 July 2023 for a four week period. The survey was used to assess the morale, achievement and overall employee satisfaction using four key headings:

- Hybrid & Flexible Working
- Health & Wellbeing
- Value & Behaviours
- Appraisals & PADR

A total of 747 responses were received equating to 64% of the DHCW workforce. The feedback from this survey is in the process of being analysed by People and OD and the outcome and actions as a result of this feedback will be reported at a future meeting.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 There is a risk of delay in the implementation of the Eyecare Programme due to complexities and dependencies within the programme.

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
Chris Darling, Board Secretary	September 2023	Reviewed and Approved
Helen Thomas, Chief Executive Officer	September 2023	Approved

Richards Carys
21/09/2023 10:29:15

DIGITAL HEALTH AND CARE WALES

FINANCIAL REPORT FOR THE PERIOD ENDED 31st AUGUST 2023

Agenda Item	5.1
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Name of Meeting	SHA Board
Date of Meeting	28/9/2023

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

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

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

Richards Carys
21/09/2023 10:29:15

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

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions apply
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CORPORATE RISK (ref if appropriate)	N/A
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	N/A
If more than one standard applies, please list below:	

<u>DUTY OF QUALITY ENABLER</u>	Whole Systems Approach
<u>DOMAIN OF QUALITY</u>	Efficient
If more than one enabler / domain applies, please list below:	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: Individual Quality Impact Assessments will be carried out as part of the Financial Improvement exercise as appropriate.	

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

Section 2:

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

2 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Claire Osmundsen-Little	September 2023	Approved

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
SLA	Service Level Agreement	PSPP	Public Sector Payment Policy
DSPP	Digital Services for Patients & Public	NDR	National Data Resource
VAT	Value Added Tax	HMRC	His Majesty's Revenue & Customs
IM&T	Information Management & Technology	LIMS	Laboratory Information Management Solution
RISP	Radiology Informatics System Procurement	NIIAS	National Intelligent Integrated Audit Solution
DC2T	Data Centre 2 transfer		

Richards Carys
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3 SITUATION/BACKGROUND

3.1 Financial Performance

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

DHCW receives funding to support 3 main activities:

- Ongoing provision of core services via Welsh Government & NHS organisation's (which is delegated to directorate budgets).
- COVID-19 Response systems & activity (supported as agreed with Welsh Government) and
- Welsh Government Digital Priority Investment Fund allocations to support discrete development and implementation programmes & projects.

DHCW is required by statutory provision not to breach its financial duty (to secure that its expenditure does not exceed the aggregate of its resource allocations and income received). This duty applies to both capital and revenue resource allocations. In terms of key Organisational financial performance indicators, they can be brigaded as follows:

The two key statutory financial duties are:

- To remain within its Revenue Resource Limit
- To remain within its Capital Resource Limit

Additional financial targets are:

- **Public Sector Payment Policy (PSPP):** The objective for the organisation All NHS Wales bodies are required to pay their non-NHS creditors in accordance with HM Treasury's public sector payment compliance target. This target is to pay 95% of non-NHS creditors within 30 days of receipt of goods or a valid invoice (whichever is the later) unless other payment terms have been agreed with the supplier.
- **Cash:** Manage residual year end balances to a maximum of £2m.

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4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

4.1 Response to NHS Wales Deficit

NHS Wales is facing significant financial challenges in 2023/24. These challenges are driven by significant underlying service pressures, significant workforce growth since 2019/20, legacy costs of COVID-19 yet to be mitigated, demand and inflationary growth presenting significant financial pressures systemwide.

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

It was made clear that no options are “off the table” and all identified choices should be actionable and improve the position in this financial year, consequently, ring fenced allocations have also been included within the scope of this exercise.

DHCW Executive team considered all non-committed spend for the rest of the year and presented to the Board on 10th August the items considered to further improve the financial position.

The outcome of the exercise identified £2.488m of cost savings/avoidance as candidates for Welsh Government consideration after an impact assessment has been carried out.

It is within this context that the DHCW’s financial plan has been amended to support the financial improvement exercise with an additional £0.726m savings target deployed to enable a contributory offset of these NHS wide challenges whilst performing the appropriate internal impact assessments. The residual balance is to be considered by the appropriate governance groups for approval.

Richards Carys
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4.2

2023/24 Financial Performance Overview

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

2023/24 Period to August 31st Financial Performance

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

1. **Revenue:** DHCW is reporting a revenue underspend of breakeven £0.152m for the period to August 31st.
2. **Capital:** Spend to August 31st totals is £2.588m of the total CRL of £18.868m (presenting an underspend of £0.069m against period plan) leaving £16.280m (86% of the allocation) currently to be spent.
3. **PSPP:** The target Public Sector Payment Policy (PSPP) target has been exceeded with 98% of non NHS invoices being paid within 30 days
4. **Cash:** Cash balance of £5.655m as at August 31st.

Other Material Spend details:

- Covid-19 DHCW received £8.350m funding and the spend to date is £1.872m. The forecast is subject to the outcome of the Financial Improvement exercise and any subsequent recovery of funding.
- Digital Priority Investment Fund: £36.7m (including central pay award funding) with spend of £13.482m.

Richards Carys
21/09/2023 10:29:15

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

5.1

Key Issues

- Financial Improvement Exercise:** After the initial exercise and DHCW submission, a further request was made by Chief Digital Officer (Health and Care) | Director of Digital, Technology and Innovation on 11/9/23 for DHCW to target DPIF cost reductions of “£3m to £3.5m” in 2023/24 and “£3.5m to £4m” in 24/25. DHCW will coordinate with Programme leads in order to produce an impact assessed consolidated response.
- Core Operations:** DHCW is reporting a revenue underspend of £0.152m for the period to August 31st with the savings plan currently being exceeded reflecting a lag in recruitment and the procurement of supplementary third-party resource. The position is inclusive of a provision for core contribution to the NHS Financial Improvement exercise.
- Core Vacancy Factor:** The vacancy factor target for the year has been exceeded by £0.713m (against a target of £1.443m). Whilst pay continues to track behind profiled spend due to recruitment lag, this is significantly offset by increases in non-pay spend as DHCW continues to secure capacity via third party suppliers, initiation of accelerated programmes (such as Cloud Readiness activity) and the bridging financial support of datacentre migration activity costs.
- DPIF Schemes:** The current expected revenue funding position for 2023-2024 amounts to £36.668m with £13.482 being spent to August 31st with £23.18m (63%) remaining to be spent prior to year-end (subject to the outcome of the latest budget challenge round).
- Laboratory Information Management Solution (LIMS) 2:** The contract extension with the current supplier has been agreed with funding approved by Welsh Government and local organisations. Formal funding letters have now been signed with an additional £5.6m capital funding added to the DHCW CRL during August. The discovery phase to define and agree the scope has concluded. The supplier has produced a solution design document which is under review by all Health Boards alongside a high-level plan and a more detailed 3-month plan.
- Radiology Information System Procurement (RISP):** The Master Services Agreement was signed on the 6th September with the new supplier working with all Health Boards to complete their Local Deployment Orders. This is reliant on Philips providing a combined project plan to the Health Boards. The All-Wales Deployment Order has also been fully signed in parallel. In terms of next steps and the All-Wales Deployment Order, DHCW will be raising the order to cover the All Wales Licence fee of circa £3m. This will be supported by All Wales capital funding with each organisation being allocated asset shares in line with the established agreement.

Richard's Carys
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- **Digital Eyecare Programme Transition:** Discussion with Cardiff & Vale Health Board continues with DHCW awaiting additional documents to support the financial transfer and completion of the Statement of current and non-current assets & liabilities.
A key concern remains the future costs of the service after all technical assessments have been completed and a fully resourced plan attained. The lack of formal Service Level Agreements and the surety of Health Board funding commitments requires resolution. DHCW will meet with Welsh Government to establish clarity and ensure that the service has a sustainable funding model.
- **Datacentre Migration:** This non recurrent activity to move datacentre as a consequence of the current lease expiring remains subject formal Welsh Government Approval. As funding is still not agreed a risk reflecting the potential exposure has now been entered within the financial returns. DHCW will continue to work with Welsh Government to identify mitigating actions and possible funding sources for this scheme.
- **Cyber Security Investment Plan:** Discussions are continuing to source recurrent funding to support the deliverables identified within the approved Cyber Security Investment Plan.
- **Financial Risks:**
 - General Digital Inflation - The underlying digital price changes continue to be identified, quantified and managed.
 - The System Wide Financial Challenges – The requirement to achieve any further spend reductions may impact the scope of delivery for the organisation or have consequential challenges with agreeing NHS SLA’s for new services.
- **Opportunities** – The Microsoft VAT recovery exercise continues. At present there has been no further communication from HMRC. During September, DHCW will liaise with our VAT subject matter experts prior to engaging with HMRC regarding the proposed resolution date.

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

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
6.1	The SHA Board is being asked to RECEIVE and DISCUSS the contents of the financial report for August 31 st , the forecast achievement of financial targets and the deployment of the Core Financial Improvement Exercise.

Richards Carys
21/09/2023 10:29:15

SHA Board Briefing Financial Performance Report: Period to August 31st 2023

Claire Osmundsen-Little
September 2023

Richards, Carys
21/09/2023 10:29:15



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DHCW Response to the NHS Wales Financial Challenge 2023/24

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FINANCIAL CHALLENGE | AIMS

The NHS in Wales Latest view is a significant deficit for 2023-2024 and Chair and CEO ask to attend a meeting with other CEO/Chairs from NHS Wales with the Health Minister. The underlying financial position is unsustainable;

The ask :

- Make only essential spend, recovery plans need to be deliverable and everything is on the table.
- All Organisations with a deficit have been asked to prepare by 11th August actionable plans to reduce the deficit by 10%,20% and 30%.
- ***All organisation that are financially balanced are asked to prepare by 11th August plans to improve their overall financial position.***

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FINANCIAL CHALLENGE | PROCESS

- Weekly Executives initially assessed all non committed spend by spend type (pay and non pay) and by Directorate together with the current savings target. Action for each director to assess the what is essential spend and consequential further reductions can be made.
- Directors of Digital discussion on 1st August to review digital pipeline and the areas digital to support in the forthcoming year.
- Weekly Executive Team meeting 2nd August to review further spend reductions and agree actions by Directorate but also spend risks.
- Board presentation and discussion on the approach and actions DHCW propose to undertake 10th August.
- Submission of plan to Welsh Government 11th August.

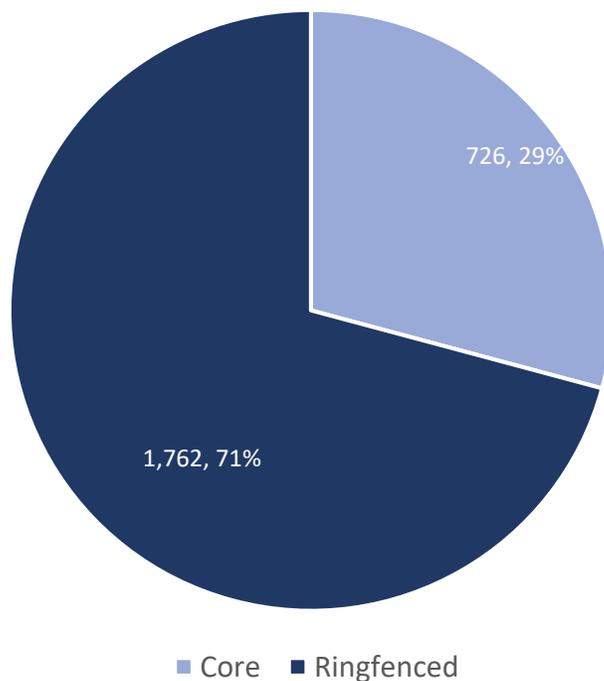
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FINANCIAL CHALLENGE | DHCW FINANCIAL IMPROVEMENT PROPOSAL

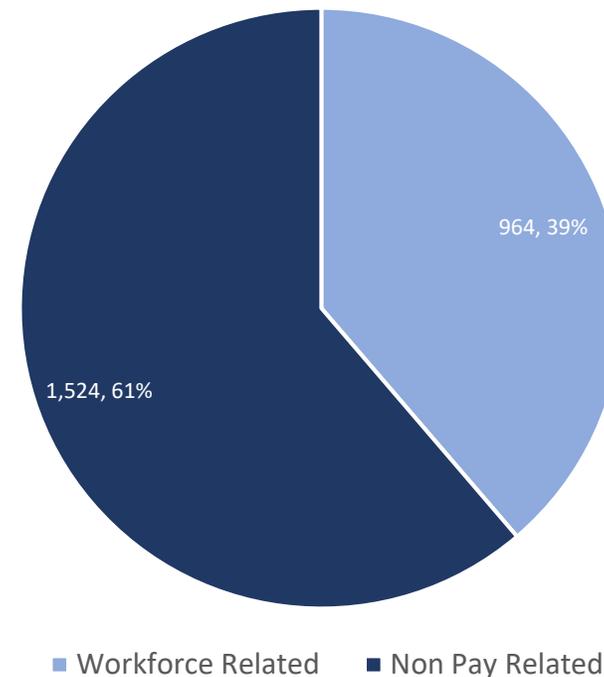
The current proposal is to nominate £2.5m (non recurrent) of DHCW funding for return to Welsh Government to support the NHS Wales position, this is reflective of 29%/71% core/ring fenced budge split. Presenting a total savings target for the organisation of £6.8m.

All actions are considered to have a high degree of confidence in terms of achievement with low or zero reliance upon external dependencies (excluding governance groups).

Proposal Core/Ring fenced Split £000's



Proposal by Spend Type £000's



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It was made clear that no options are “off the table” and all identified choices should be actionable and improve the position in this financial year, consequently ring fenced allocations have also been included within the scope of this exercise.

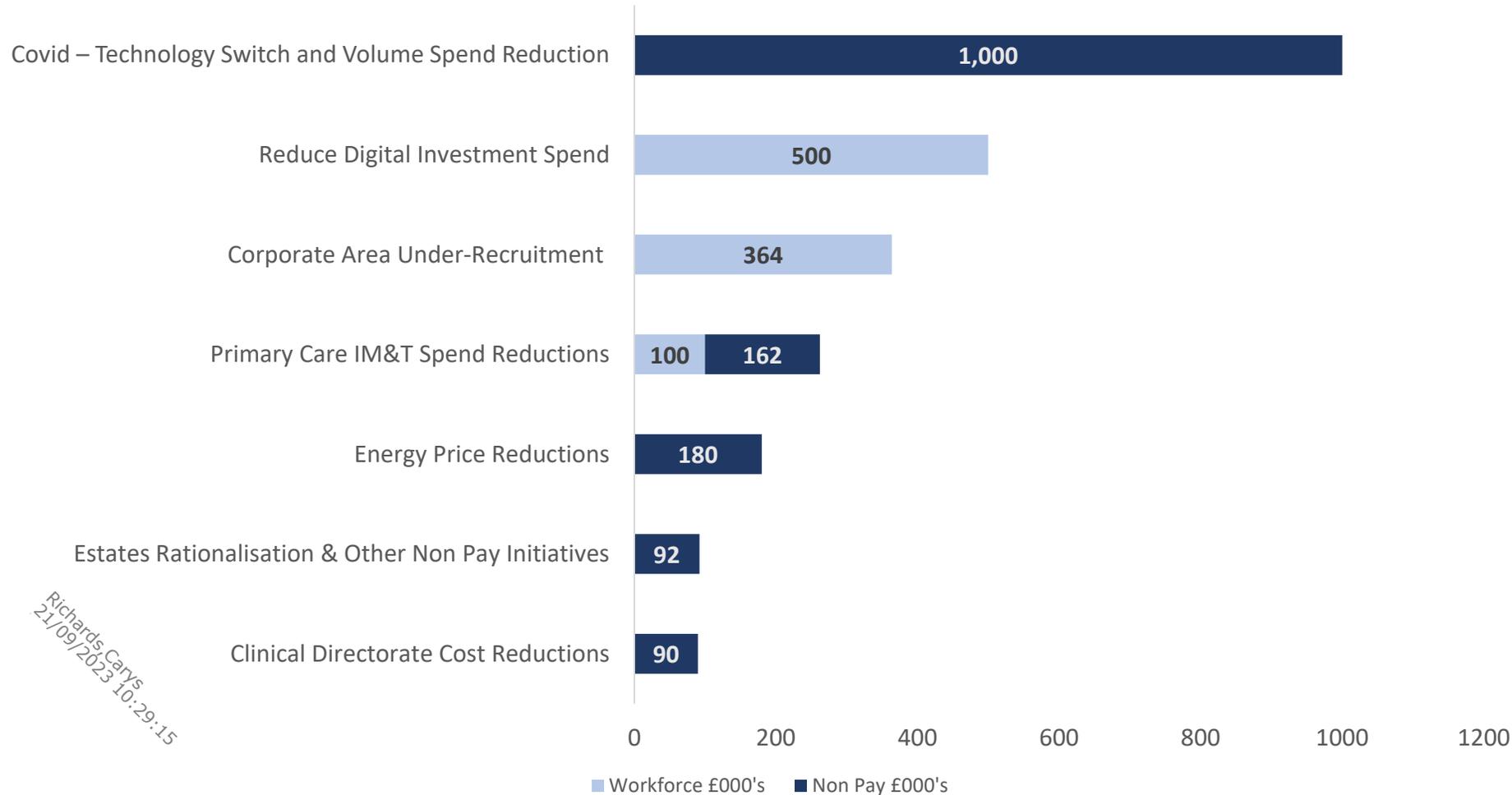
In terms of resource impact for the year there is an effective proposed reduction of 6.1 wte in core, 8.3wte in DPIF and 1.6wte in Primary Care IM&T .

FINANCIAL CHALLENGE | DHCW FINANCIAL IMPROVEMENT PROPOSAL



The proposals have been submitted by directorate/business area for consideration

Finance Opportunity By Action Area £'000



For the purposes of the template return each proposal was subject to an impact assessment to reflect :

1. In year 2023/24 financial impact.
2. 2024/25 financial impact
3. Key Dependencies/Enablers.
4. Consequence of Choice - Internal to NHS Wales e.g. Health Board and patient impact.
5. Consequence of Choice - External to NHS Wales e.g. Population and Other public sector orgs.

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After submission the following actions were agreed:

1. **Core Initiatives** – All items (amounting to £0.726m) to be actioned as part of the revised savings/cost reduction target.
2. **COVID Initiatives** : Subject to approval by Welsh Government and Governance Forums.
3. **Primary Care IM&T Initiatives** : Subject to approval by Welsh Government and Governance Forums.
4. **Digital Priority Investment Fund** : The latest exercise initiated by Welsh Government will supersede this proposal.

Quality Impact Assessments have been carried out for proposed initiatives 2-3 with further impact assessments currently underway for item 4.

SHA Board Briefing

Financial Performance: Period to August 31st 2023



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Claire Osmundsen-Little

September 2023

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21/09/2023 10:29:15

FINANCIAL UPDATE | OVERVIEW

The purpose of this report is to present DHCWs financial position to date and assess the key financial projections, risks and opportunities for the financial year. The report advises the Board of Financial Performance and issues of the current financial year to August 2023.

- The report sets out the financial position as at the end of August 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.

Richards, Carys
21/09/2023 10:29:15

FINANCIAL UPDATE | FINANCIAL CONTEXT

NHS Wales is facing significant financial challenges in 2023/24. These challenges are driven by significant underlying service pressures, significant workforce growth since 2019/20, legacy costs of COVID-19 yet to be mitigated, demand and inflationary growth exceeding available funding, and pay pressures.

In order to support the NHS Wales position a Financial Improvement Exercise was initiated with organisations requested to identify opportunities to improve the financial position and submit to Welsh Government by August 11th.

As an organisation forecasting breakeven DHCW was tasked with “overachieving” its balanced year end position and create a surplus thus having balances available to be recovered by Welsh Government.

DHCW had identified £2.488m of targeted reductions across core and ring fenced budget allocations. Whilst the core target (amounting to £0.726m) has been actioned and now forms part of the organisations savings plan.

A further request was issued on September 11th to identify options for cost reductions within the DPIF portfolio amounting to approximately 10% of the project funding allocation (the range requested is indicatively £3m- £3.5m).

DHCW will now look to undertake a review and engage with the appropriate governance forums whilst also continuing to identify further opportunities throughout the year to manage not only internal but also the national context.

Richards, Caryl S
21/09/2023 10:29:15

FINANCE UPDATE | EXECUTIVE SUMMARY

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

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

Savings delivery: The revised Core savings target now totals £4.978m (inclusive of the recent £0.726m identified as part of the core contribution to the NHS Financial Improvement exercise) with the vacancy target being overachieved by £0.713m to period plan, offsetting non pay spend in securing 3rd party capacity (managed via our Strategic Resourcing Group) and the acceleration of key strategic deliverables (such as Cloud transition) and bridging support of the datacentre migration activity . All schemes are now RAG rated “Green” (high degree of confidence of delivery) with £2.4m being recurrent and available to offset the underlying position and emerging pressures.

Underlying Position: At the time of writing, DHCW brought forward an underlying deficit of £1.3m into its IMTP, a mid year review of the position incorporating the impact of recurrent savings and any changes in cost base/pressures will form part of the assessment and inform financial sustainability discussions.

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

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

Richard
21/09/2015 10:29:15

INDICATORS

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

Achieved

Indicator	Cumulative Performance	Forecast Outlook	Comment
Revenue Breakeven (To secure that the organisations expenditure does not exceed aggregated income)	£0.152m underspend, £0.022m increase  Movement	£0.0m Breakeven  Movement	Small period operational underspend of £0.152m has been recorded to the end of August. 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)	£0.069m Underspend, £0.065m increase.  Movement	Breakeven  Movement	The current capital funding envelope is £18.868m, DHCW is reporting a £2.588m capital spend to date.
Public Sector Payment Policy (To pay a minimum of all non NHS creditors within 30 days of receipt of a valid invoice)	98% change by 1%  Movement	95%  Movement	PSPP target achieved. Target – 95%, Actual 98%.
Cash Balances Appropriate balances to meet creditor requirements	£5.6m increase of £4.4m  Movement	Positive Cash Balance <£2m  Movement	Cash balance increased in month. Balances will continue to be managed down to the end of year target of £2m.

SUMMARY:

- The revised savings requirement including the additional identified target of £0.726m has now been deployed to Directorates for delivery.
- DHCW will continue to monitor cash balances in order to achieve the year end recommended balance.
- Pay underspend continues to exceed the planned vacancy factor, supplemental third party capacity will be addressed via the strategic resourcing group.
- Subject to meeting the required savings target the forecast is for the organisation to breakeven.
- Capital is underspent by £0.069m in Core and Digital.

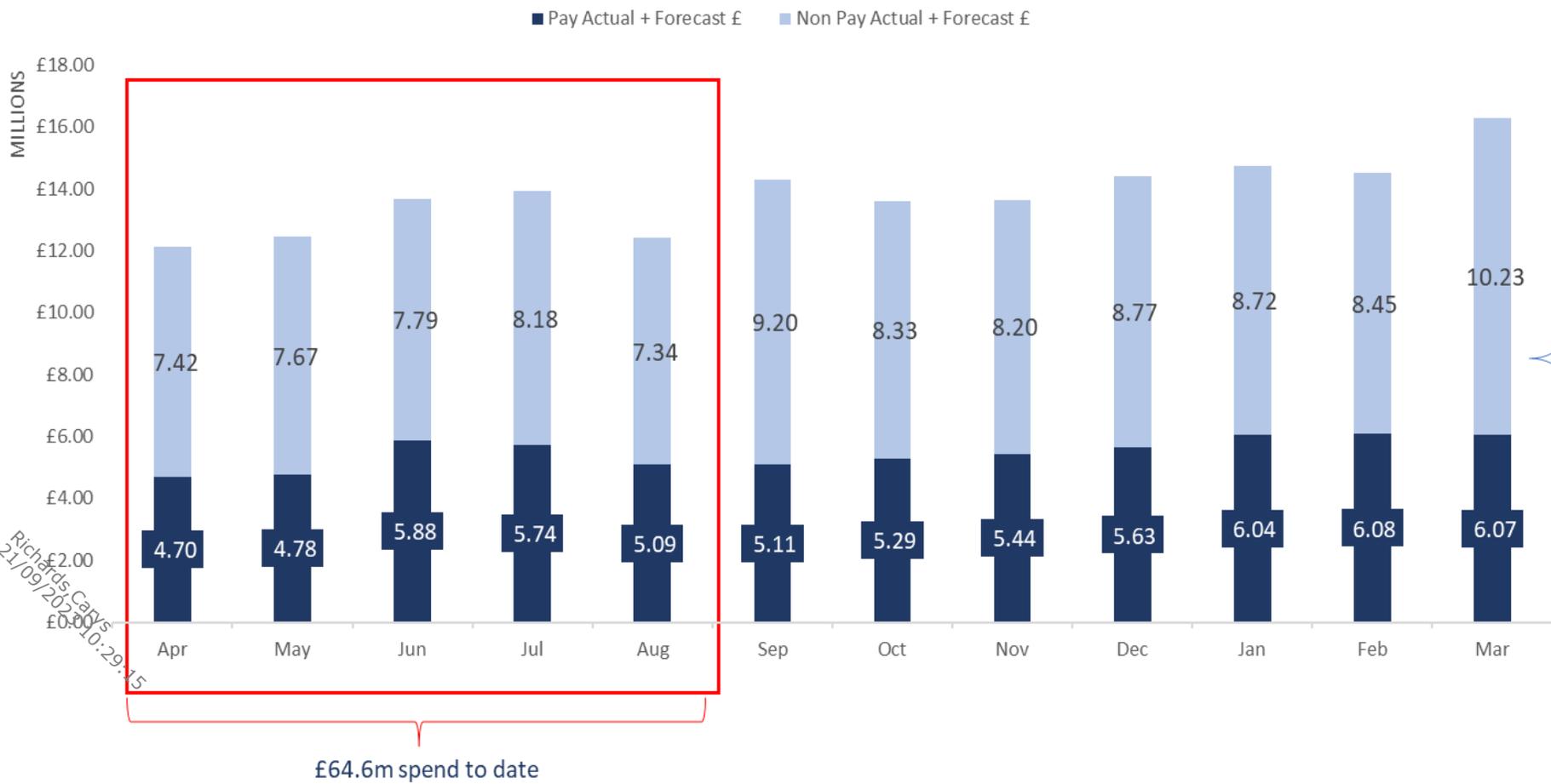
Digital Health and Care Wales

Richards, Cerys
21/09/2023 10:29:21

FINANCE UPDATE | REVENUE RUN RATE

The organisational run rate is given below showing the run rate for £165.9m of expenditure. To date DHCW has spent £26.19m on pay and £38.4m on non pay. The increase in pay is reflecting the increase of WTE in Digital schemes by the end of the year.

Organisational Expenditure Run Rate



Material impactors upon run rate

- Increase in May**
WCCIS disbursements to Local Authorities £0.5m.
- Increase in June**
Back pay £1.1m from 2022-23.
- Increase in July**
DMTP deliverables with third party suppliers.
- Increase July onwards**
 - DSPP £1.6m WP7 ends 3rd July.
 - New messaging contract in Operations increase £0.1 m a month.
 - Datacentre increase £0.15m.
 - 0365 licences increase £0.15m a month.
 - Pay award 5% paid in July – funded Welsh Government.

- Increase in September**
 - Covid use of third party suppliers.
 - DSPP £0.5m Work Package 8 and DMTP £0.5m patient access.

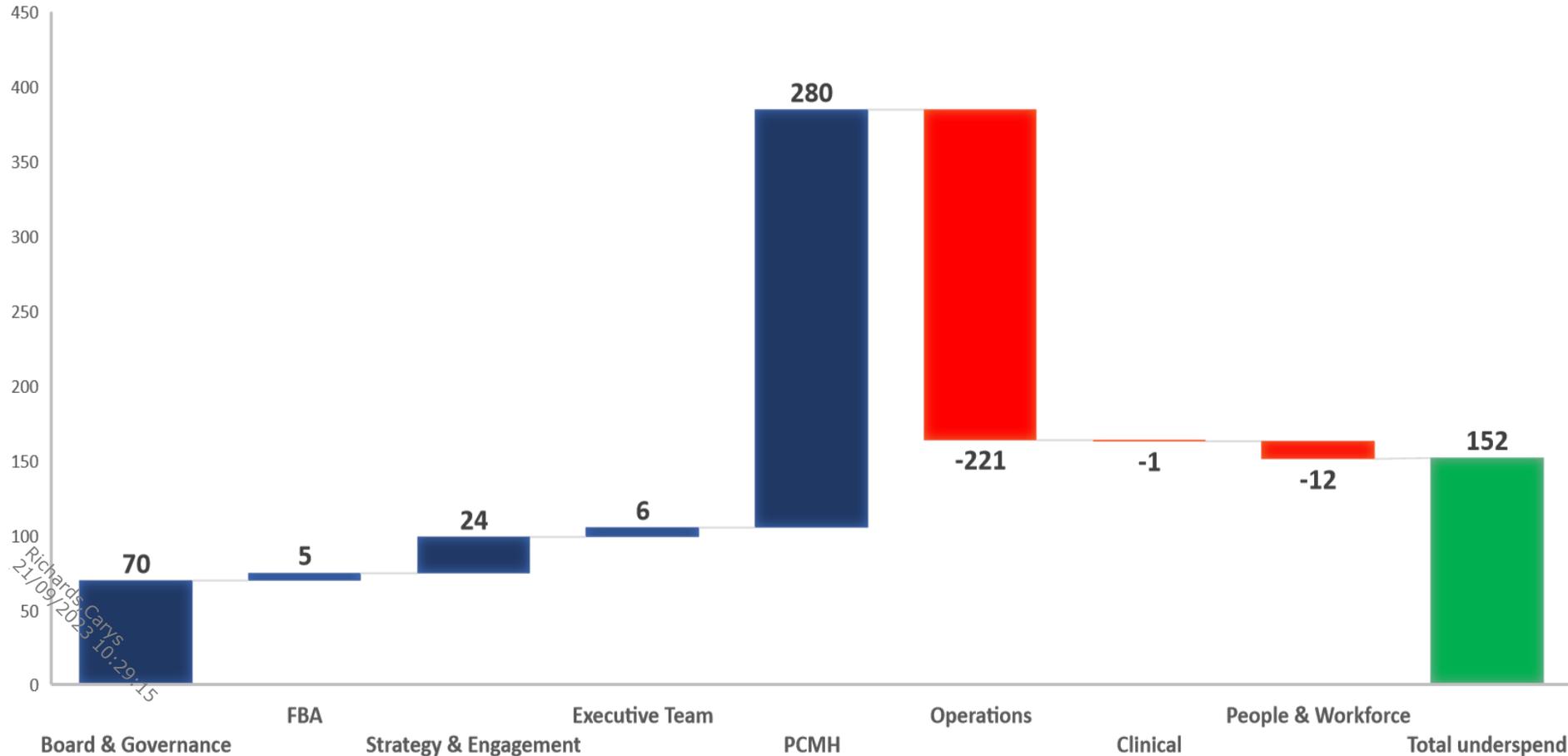
- Increase March**
 - Maternity and Prescribing activity.
 - £1m hand back for Covid.
 - £0.5m hand back for NDR.

Richard's Carrys
21/09/2023 10:29:15

FINANCIAL UPDATE | CORE REVENUE PERFORMANCE

In August, DHCW is reporting a small revenue underspend of £0.152m. The continued recruitment lag is currently supporting increased non pay spend, securing third party resource, accelerating cloud transition preparation and Datacentre migration costs.

DIRECTORATE CONTRIBUTIONS TO AUGUST ORGANISATIONAL EXPENDITURE £000'S



Material Directorate Variances:

Operations- The directorate is reporting an overspend of £0.221m. This is driven by continuing pressures in the ICT directorate (including bridging funding of datacentre migration activity), however mitigating actions have been identified to address the continued achievements of the savings target for the year and recovery of the financial position to support an organisational balanced position.

Primary Care & Mental Health – Current underspend relates to vacancies within the Directorate. PCMH are currently finalising their strategy paper and have now onboarded key roles which will impact on the pace of recruitment in the final 2 quarters.

FINANCE UPDATE | DPIF REVENUE PERFORMANCE

The organisation has recorded £13.482m revenue spend against DPIF schemes to August out of total funding of £36.7m (including pay award allocation). As part of the NHS Wales Financial Improvement exercise a request was made by Welsh Government, Department of Digital, Technology and Innovation on 11/9/23 for DHCW to target spend reductions of “£3m to £3.5m” in 23/24 & “£3.5m to £4m” in 24/25. DHCW will coordinate with Programme leads in order to produce an impact assessed consolidated response.

Scheme	Total Annual Plan £000's	Period Actual Spend £000's	Residual Spend £000's	Residual Spend %
Approved (Direct)				
National Data Resource	7,947	2,512	5,435	68%
Digital Medicines Transformation Programme	7,135	2,056	5,079	71%
Digital Services For Patients & Public	5,409	2,516	2,893	53%
WCCIS - Priority Investment	3,841	2,409	1,432	37%
WPAS Standardisation	2,478	1,009	1,469	59%
Cancer - Clinical Functionality	2,060	845	1,215	59%
Digital Maternity Cymru	1,903	441	1,462	77%
Laboratory Information Mangement System 2	919	167	752	82%
Digitalisation of Nursing Records	991	305	686	69%
Radiology Informatics System Procurement Programme	507	60	447	88%
Digital Business Change Network	525	116	409	78%
Business Change network and Benefits Realisation	412	172	240	58%
MSC Digital Skills for Health and Care Professions	234	0	234	100%
Total Approved (Direct)	34,361	12,608	21,753	63%
Approved (Indirect via NHS Wales)				
National Data Resource	34	14	20	59%
Laboratory Information Management System 2	953	397	556	58%
Radiology Informatics System Procurement Programme	453	189	264	58%
Cross Border Pathways	294	96	198	67%
Digital Intensive Care Unit	573	178	395	69%
Total Approved (Indirect and Direct)	36,668	13,482	23,186	63%

A residual funding total of £23.2m (63% of plan) remains to be spent prior to year.

The period performance presents an underspend of £1.3m (9%) against spend plans with a number of material variances.

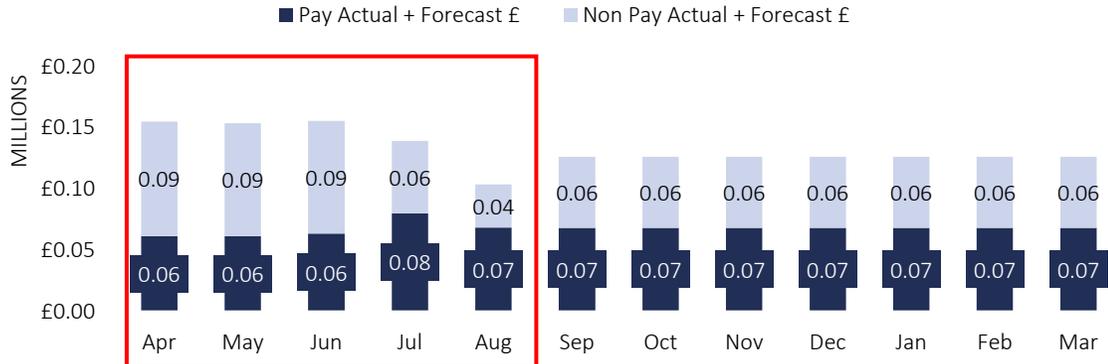
Notes on variances of note:

- NDR - £0.2m underspend:** Material driver of underspend being recruitment lag (identified as an opportunity to support the NHS financial improvement exercise).
- DMTP - £0.9m underspend:** Material drivers being supplier activity delay.
- WCCIS Priority-£0.177m overspend:** Local Authority Quarter 2 charges impacting profile. Overspend is a result of extension of three contractors.
- LINC - £0.2m underspend:** Delay in getting funding letter, resulting in recruitment slippage.
- Digital Maternity £0.3m under:** Reflective of legal and commercial costs now expected late in the year.
- Cancer Informatics Solution -£0.03m overspend:** Slight overspend, forecast breakeven for year end.

FINANCE UPDATE | COVID RUN RATE

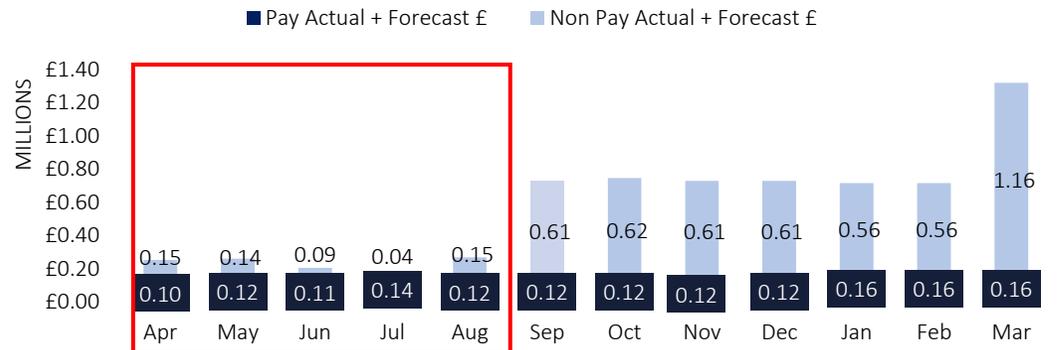
The organisational run rate is given below for TTP and Vaccines. The decrease in licences, renewed with a coverage of 300 users has caused the drop in non pay in TTP. In Vaccines the National immunisation framework £0.350m main discovery has taken place and will conclude in December. The use of contractors and third party is increasing the run rate from august onwards, offsetting the vacancies within COVID. The vaccines scheduling text/letter volumes are the lowest spend to date and there is £1m profiled to month 12 to hand back to Welsh Government.

COVID TTP Run Rate £million



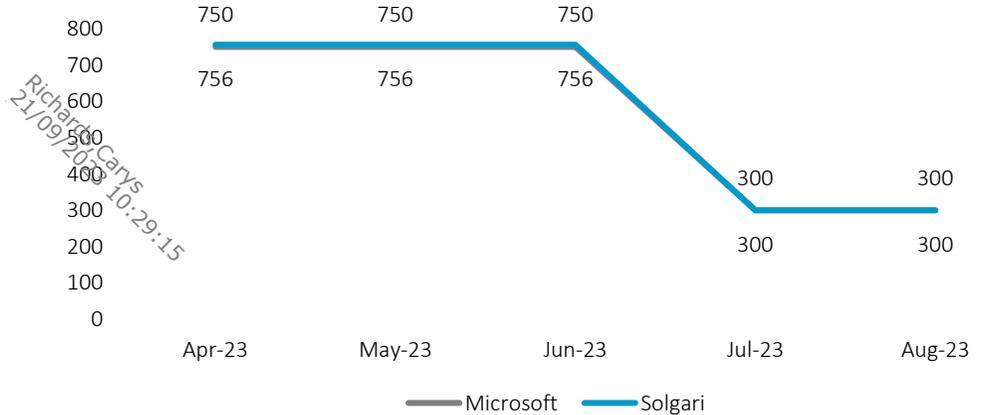
£0.7m spend to date against an annual budget £1.5m

COVID Vaccine Run Rate £million

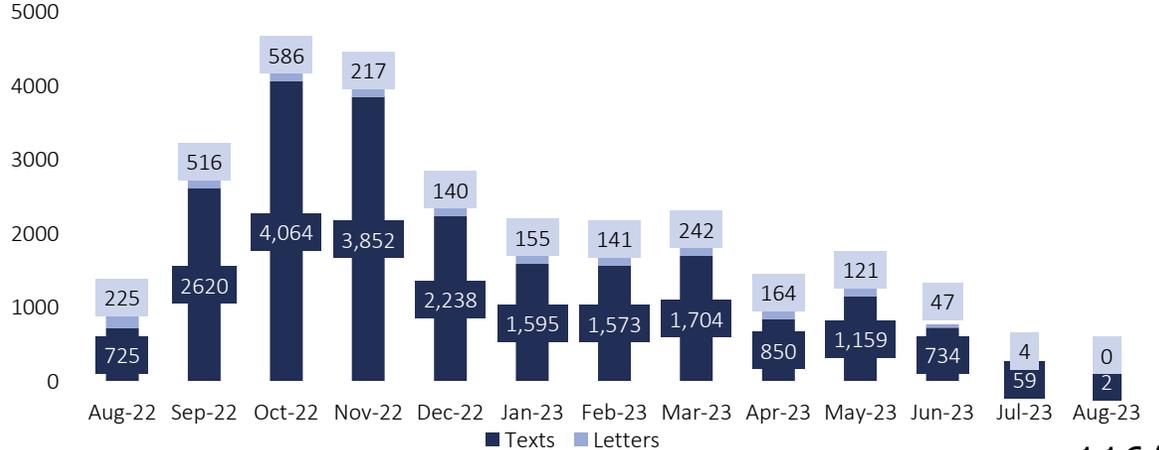


£1.1m spend to date against an annual budget of £6.85m

User Licence Volumes



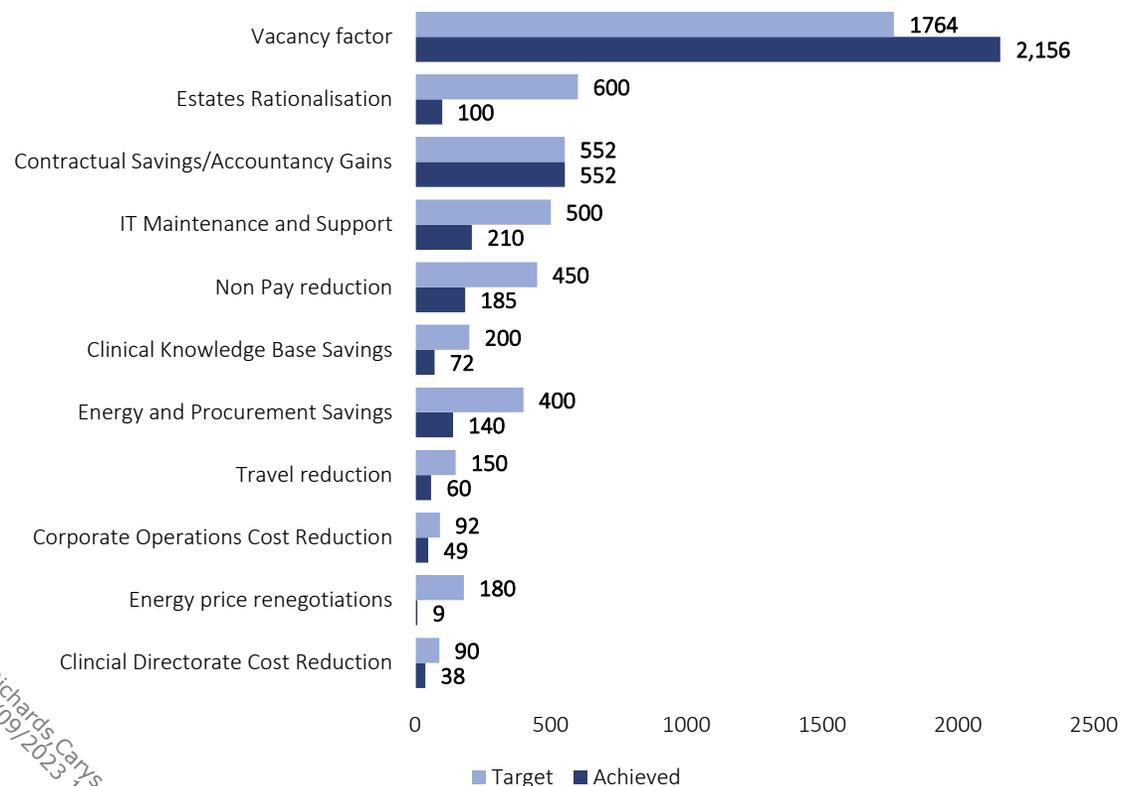
Aug 2022 - Aug 2023 Text/Letter Volumes (000's)



FINANCIAL UPDATE | SAVINGS PLAN PERFORMANCE

The savings performance target below is now £4.978m which includes the original £4.252m and £0.726m additional requirement for a reduction in costs as part of the NHS financial improvement exercise.

Savings Target Achieved against Plan August 23-24 £000's



Scheme	Annual Amount £000'	Period Plan £000'	Period Actual £000's	Var (Over/- Underachievement) £000'	Residual Requirement £000'
Vacancy Factor	1,764	1,443	2,156	713	321
Estates Rationalisation	600	0	100	100	500
Contractual Savings/Accountancy Gains	552	552	552	0	0
IT maintenance and support	500	210	210	0	290
Non Pay reduction	450	185	185	0	265
Additional Energy and Procurement Savings	400	140	140	0	260
Clinical Knowledge Base Savings	200	72	72	0	128
Energy Price Renegotiations	180	9	9	0	171
Travel reductions	150	60	60	0	90
Corporate Operations Cost Reduction	92	49	49	0	43
Clinical Directorate Cost Reduction	90	38	38	0	52
Total	4,978	2,758	3,571	813	2,120

The organisational vacancy factor target for the year totals £1.764m, increased by £0.464m from the financial challenges exercise. This has been overachieved by £0.713m to date. Recruitment lag continues to contribute to plan overachievement should this continue without Directorate mitigating spend plans the end of year position could present a significant underspend. As part of the mid year review Capital and Non Pay Group will collate all proposed non pay plans for Executive Director consideration and approval.

Richards Carys
21/09/2023 10:29:11

FINANCE UPDATE | CAPITAL SPEND PERFORMANCE



At the end of August, DHCW had a Capital Spend of £2.588m against the Annual Capital Resource Limit of £18.868m. Work Package 7 is completed and work package 8 is now underway which is attributing to the total spend in DSPP. LIMS funding has been increased with an additional £5.658m, and funding of £0.163m added for Eyecare programme.

Scheme	CRL	Period Plan £000's	Period Actual £000's	Under/- Overspend £000's	Residual Spend £000's
Discretionary					
Infrastructure Communications Technology	2,414	1,069	1,069	0	1,345
Estates & Facilities	200	69	34	35	166
Total Discretionary	2,614	1,138	1,103	35	1,511
Digital Priority Investment					
Laboratory Information Management System	7,705	640	618	22	7,087
Digital Intensive Care Unit	4,707	167	167	0	4,540
RISP	2,136	82	70	12	2,066
Digital Services for Patients & Public	980	630	630	0	350
WPAS	264	0	0	0	264
Digital Maternity	240	0	0	0	240
Digital - Eyecare	163	0	0	0	163
Digital Medicines Transformation Portfolio	59	0	0	0	59
Total Digital Priority Investment	16,254	1,519	1,485	34	14,769
Total Capital Plan	18,868	2,657	2,588	69	16,280

Area	Annual Plan £000's	April Spend £000's	May Spend £000's	June Spend £000's	July Spend £000's	August Spend £000's	Total Spend £000's
Discretionary Capital Profile							
DC2T	1,218	380	139	382	86	62	1,049
Client Services	320	0	0	0	0	0	0
NIIAS	319	0	0	20	0	0	20
ADS Software Licences	299	0	0	0	0	0	0
Core ICT	259	0	0	0	0	0	0
Facilities	200	69	0	0	0	-35	34
Total Discretionary Capital Spend	2,614	449	139	402	86	27	1103

At the end the end of August, spend against discretionary capital schemes is to plan with substantial activity recorded to support the datacentre migration (DCT2) project. The remaining element of the DCT2 project and ADS licences are expected in Quarter 3.

Successful VAT recovery discussions has led to credits of -£50K in August.

There will be a mid year review of Capital schemes progress with candidates for repurposing being collated and submitted to Directors for approval.

Richard Canys
21/08/2023 14:29:15

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.

Financial Challenge: The current NHS wide financial challenges may pose funding risks when agreeing SLA's for new services.

Financial Opportunities:

Microsoft VAT Recovery: Discussions continue with our VAT advisors and HMRC are ongoing.

Vacancy Management: Further opportunities in Pay if planned recruitment doesn't materialise.

Richards Carys
21/09/2023 10:29:15

FINANCE UPDATE | RECOMMENDATIONS

DHCW Board are requested to:

- Note the position to August 31st 2023 and forecast achievement of financial targets.
- Note the status of the NHS Financial Improvement exercise.

Richards, Carys
21/09/2023 10:29:15

DIGITAL HEALTH AND CARE WALES STAKEHOLDER ENGAGEMENT IMPLEMENTATION PLAN UPDATE

Agenda Item	5.2
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Name of Meeting	SHA Board
Date of Meeting	28 September 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 and Strategic Partnerships
Presented By	Ifan Evans, Executive Director of Strategy

Purpose of the Report	For Noting
Recommendation	SHA Board is being asked to
NOTE the report.	

Richards Carys
21/09/2023 10:29:15

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

1 IMPACT ASSESSMENT

STRATEGIC MISSION	Be the trusted strategic partner and a high quality, inclusive and ambitious organisation
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CORPORATE RISK (ref if appropriate)	
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

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

<u>DUTY OF QUALITY ENABLER</u>	Leadership
<u>DOMAIN OF QUALITY</u>	Effective
If more than one enabler / domain applies, please list below:	

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

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	Yes, please see detail below The action plan includes building capacity within the Engagement and Strategic Partnership team, which is underway.
SOCIO-ECONOMIC IMPLICATION/IMPACT	Yes, please detail below The report includes an update on our Digital Inclusion plans,

Section 2:

	amongst other measures, to ensure holistic and representative engagement across our services.
RESEARCH AND INNOVATION IMPLICATION/IMPACT	Yes, please see detail below A number of activities within the Engagement Plan support the research and innovation ambitions of DHCW including the development of research and innovation partnerships, opportunities for projects and shared learning, and highlighting the value case for digital and our role as a system leader.

2 APPROVAL / SCRUTINY ROUTE

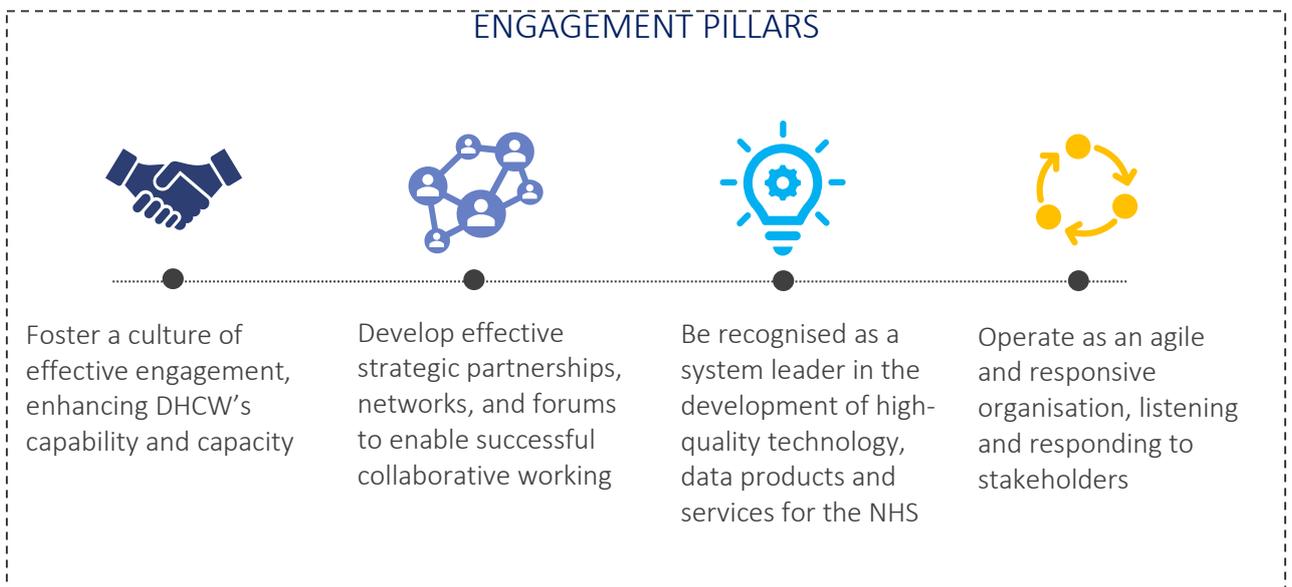
Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Michelle Sell	5 September 2023	Agreed.
Ifan Evans	6 September 2023	Agreed
Management Board	14 September 2023	Noted

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
WG	Welsh Government	NDR	National Data Resource
LSHW	Life Science Hub Wales	CDPS	Centre for Digital Public Services
CDO	Chief Digital Officer	ABUHB	Aneurin Bevan University Health Board
HDUHB	Hywel Dda University Health Board	SPPC	Strategic Programme for Primary Care
H&SS	Health & Social Services Group		

Richards Carys
21/09/2023 10:29:15

3 SITUATION/BACKGROUND

- 3.1 The purpose of this report is to provide a progress update on delivery of the Digital Health and Care Wales Engagement Strategy and associated Action Plan.
- 3.2 The Engagement Strategy was approved by the DHCW Board in Sept 2021 with a vision to establish DHCW as the trusted strategic partner. 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.
- 3.3 Following the appointment of a Head of Engagement in October 2022, a refined action plan was developed and approved by the Board in May 2023. This focused around four interlinked pillars (shown below) with specific measurable actions to achieve these priorities.



- 3.4 As a new function within DHCW, good progress has been made against the engagement agenda. There has been concerted effort to focus the current limited resource to deliver the underpinning processes and platforms needed for DHCW. The resource requirements for a small central team to deliver the work have been outlined and the restructuring of resource within the Directorate has been agreed to support this. This includes the regrading of an existing employee to fulfill the National Digital Lead - Public Engagement function.
- 3.5 The new team will be known as the Engagement and Strategic Partnerships Team reflecting the nature of DHCW activity, our commitment to engaging with stakeholders, including the public, and fostering strong and mutually beneficial relationships with a range of partners. It is anticipated the team will be in place by January 2024.
- 3.6 This report provides a progress update against the engagement pillars from 1 January 2023 to 31 August 2023.

Richards Cerys
21/09/2023 10:29:15

4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

4.1 Achievements are shown below against the four pillars.

Achievements	Impact
PILLAR 1: Foster a culture of effective engagement, enhancing DHCW's capability and capacity.	
<ul style="list-style-type: none"> Established the DHCW Professional Network for Engagement and Communications, with 80+ members and bi-monthly meetings. Created initial content for engagement toolkit and intranet site to support staff to engage effectively. Undertaken workshops and planning with three DHCW programmes to embed targeted, consistent, and resourced approach to engagement. Agreed trial of Stakeholder Relationship Management (SRM) system with six external facing DHCW teams. Implementation plan to be developed through working group. Outlined central team structure, created, and approved job descriptions and recruitment underway with interviews planned for September for two of the three core posts. Developed an NDR engagement strategy and plan for approval by NDR Board and Welsh Government; recruiting an NDR Engagement Manager to sit centrally as an exemplar model for programme engagement. 	<ul style="list-style-type: none"> Supporting coordinated approach to stakeholder engagement across programmes and departments. Creating a consistent engagement experience for our stakeholders. Enabling and supporting our staff to engage effectively. Sharing best practice and learning.
PILLAR 2: Develop effective strategic partnerships, forums and networks to enable successful collaborative working	
<ul style="list-style-type: none"> Established bi-annual NHS Partner exec to exec sessions, with 13 undertaken this period, and bi-monthly digital team catch ups to discuss partnership and review progress against joint plans. All Wales Digital Leads Forum established which meets quarterly with representation from all NHS Wales partners. Strategic meetings agreed with NHS Executive with first planned for October. Partnership agreement in place with CDPS and Social Care Wales, with agreed programmes of joint work and regular meetings. Partnership agreements with LSHW, TEC Cymru and SPPC in development, with first DHCW LSHW partnership board planned for October. Mapping of governance boards for all programmes, projects and services underway to ensure appropriate representation. Regular meetings established with WG team and CDO H&SS, including establishment of Digital Health & Care Commissioning Board which meets bi-monthly and includes representation from WG and DHCW. Continuing to develop strong partnerships with third sector and patient representative groups to promote, support and evaluate the design and development of the NHS Wales App. 	<ul style="list-style-type: none"> Supporting more effective partnership working with NHS Wales partners, with efforts ongoing to further improve. Raising awareness of DHCW plans and ambitions and identified opportunities to collaborate through joint plans with other national bodies and organisations. Supporting new WG CDO H&SS into role and working with wider WG team to align plans and identify opportunities to support.

Achievements	Impact
<p>PILLAR 3: Be recognised as a system leader in the development of high-quality technology, data products and services for the NHS.</p>	
<ul style="list-style-type: none"> ● Refined DHCW Engagement Strategy and Action Plan approved by SHA Board in May 2023. ● DHCW showcase and engagement series in planning to deliver joint sessions with each NHS partner with focus on digital and clinical teams. ● Thought leadership series in development with LSHW and other partners, with first session planned for November 2023. ● Four nations session 18th and 19th September to bring together DHCW, WG and respective digital leads from across UK to share insight, best practice, and learning. ● Significant work progressed on digital inclusion agenda and DHCW's leadership role including action plan to achieve digital inclusion accreditation; undertaken DHCW Executives and Board sessions with Cwmpas; and created expressions of interest process for establishment of DHCW Digital Inclusion Working Group. ● Working with Digital Communities Wales provided training sessions for 120 out of potential 880 Digital Champions to cascade using the NHS Wales App and good digital skills. Over 60 DHCW staff have had training to date. 	<ul style="list-style-type: none"> ➤ Raising awareness of work of DHCW in Wales, UK and beyond and opportunities for learning and collaboration. ➤ Contributing to a thought leadership series and supporting value case for digital. ➤ Highlighting importance of digital inclusion and DHCW's commitment and leadership role and working with others to reduce digital exclusion.
<p>PILLAR 4: Operate as an agile and responsive organisation, listening and responding to stakeholders.</p>	
<ul style="list-style-type: none"> ● Workshops underway with digital teams from NHS Wales partners to look at improved ways of working, ABUHB scheduled for September. ● Strategic workshop with DHCW and HDUHB held in July to outline support for HDUHB digital transformation plans. ● Supported undertaking of Wales wide survey to assess usability of digital systems with clinical users. ● Scoped annual stakeholder review to include interviews and survey across all stakeholder groups. ● Survey launched across DHCW to map current mechanism of feedback with different stakeholder groups to improve sharing of intelligence and introducing more co-ordinated approach. ● Creation of two digital inclusion surveys, with first completed with patients and the public through Digital Inclusion Survey Working Group. 	<ul style="list-style-type: none"> ➤ Increasing our understanding of our NHS Wales stakeholders, their views of the partnership with DHCW and how to improve collaborative working. ➤ Consolidating data and Intelligence on engagement to inform actions and decision making. ➤ Introducing regular feedback mechanisms for delivery and other partners.

Richards Carys
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Section 5: two boxes available in this section (1/2), use an appendix where necessary

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

5.1	The strategy and action plan confirms our commitment to being the trusted strategic partner and outlines how we will engage and work collaboratively with the complex ecosystems of stakeholders. This report shows considerable progress has been made against the plan to support the development of the underpinning processes, resources, and tools in which we can realise the value from both our current and future engagement efforts.
5.2	To ensure we deliver on the actions in the timescales identified it is essential we recruit to the posts created from the restructuring of resource within the Directorate. This work is underway, and every effort has been made to promote these widely and create job descriptions that reflect the engagement ambitions targeting the right talent. It will be difficult to progress some of this work without the resource in place.
5.3	Understanding our stakeholders and their views of DHCW is essential and a key action within the plan is the establishment of an annual stakeholder review. We are keen to undertake a range of objective measures, including a full survey and a series of interviews, and will be considering options to achieve this in the most cost-effective way.

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

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
NOTE the report.	

Richards, Carys
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DIGITAL HEALTH AND CARE WALES COMMUNICATIONS STRATEGY

Agenda Item	5.3
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

Executive Sponsor	Chris Darling, Board Secretary
Prepared By	Julia Sumner, Assistant Director of Communications
Presented By	Chris Darling, Board Secretary

Purpose of the Report	For Approval
Recommendation	SHA Board is being asked to APPROVE the Communications Strategy.

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

1 IMPACT ASSESSMENT

STRATEGIC MISSION	Be the trusted strategic partner and a high quality, inclusive and ambitious organisation
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CORPORATE RISK (ref if appropriate)	N/A
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	N/A
If more than one standard applies, please list below:	

<u>DUTY OF QUALITY ENABLER</u>	Culture
<u>DOMAIN OF QUALITY</u>	Person Centred
If more than one enabler / domain applies, please list below:	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: No equality impact assessment required however EDI network will be consulted as part of the strategy's engagement	

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

Section 2:

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

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Board Secretary	29.05.23	For review
Weekly Executive Directors' meeting	14.06.23	For input
Board Development	29.06.23	For input
Communications Team	06.07.23	For input
Communications and Engagement and Network	06.07.23	For input
Management Board	13.07.23	For endorsement
Equality Diversity and Inclusion network	24.07.23	For input
People and Organisational Development Senior Leadership Team	20.07.23	For input
All DHCW staff consultation	31.07.23	For input
Local Partnership Forum	05.09.23	For input
Management Board	14.09.23	For approval

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority

Richards Carys
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3 SITUATION/BACKGROUND

- 3.1 As a national NHS organisation, it is vital that DHCW delivers strong and proactive communications to raise the profile of its work and build its role as a trusted strategic partner with a reputation as a system leader for digital health and care services.
- 3.2 Communications in DHCW, and its predecessor organisations, have historically focused on several areas, including building strong internal communications, events, awards submissions, website development and social media.
- 3.3 More recently, there has been a shift towards taking a more proactive approach and an increased focus on external communications, including digital communications, stakeholder communications, media, partnership working and crisis communications handling. Work has also taken place to build on our internal communications; allowing staff to be more involved and to ensure communications support and expertise is offered across the organisation.
- 3.4 Significant engagement work has taken place over the past six months to inform the development of the communications strategy, including engagement with staff, Board members, stakeholders and partners on communications for DHCW. Using this feedback, a new communications strategy has been developed. The draft strategy has been widely engaged and consulted on with DHCW staff and Board Members, whose feedback has helped to develop and shape the final strategy. This final strategy is now being shared with the DHCW SHA Board for approval.

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4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 4.1 The new three-year DHCW communications strategy aims to put in place a clear vision, approach and strategic aims to ensure the delivery of modern, proactive and people focused communications for the organisation.
- 4.2 The principles defining the communications approach within the strategy are:
- Be proactive and forward thinking
 - Be open and transparent
 - Be timely and consistent
 - Take a tailored approach which meets people's needs
 - Be inclusive and accessible
 - Promote and encourage use of the Welsh language and support DHCW to become a bilingual organisation
 - Establish a DHCW voice and brand
 - Put people at the heart.
- 4.3 The strategic aims within the strategy are:
- To **establish** DHCW's reputation as a trusted strategic partner
 - To **build** on our internal communications - supporting staff to feel informed and empowered, making DHCW a great place to work and a high quality and ambitious organisation
 - To **develop** our stakeholder communications – building relationships to work in partnership
 - To **grow** our public communications – building understanding of DHCW's role and how digital and data will help the NHS in Wales work better, what DHCW is doing to address digital inclusion and encouraging people to work for us
 - To **enhance** our digital communications – delivering high quality digital communications which reflect our purpose and ambition as a digital organisation.
- 4.4 The intended outcomes of the strategy are:
- Staff and stakeholders feel collaborated with and well informed about and engaged with our work and have opportunities to have input via a range of mechanisms
 - DHCW's voice and brand is established and recognised by those in the health and digital sectors
 - We are considered by our key partners as a trusted strategic partner with high levels of confidence in what we do and what we say
 - We have a culture which supports open and honest conversations with staff and stakeholders with effective methods for communications so views, ideas and feedback are heard and responded to in appropriate ways
 - We learn from best practice to become an exemplar for communications
 - Staff have opportunities to develop their communications skills so they feel empowered and supported to deliver strong communications for DHCW in their day-to-day work.

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Section 4: two boxes available in this section (2/2), use an appendix where necessary

- 4.5 Changes which have been made to the strategy through the engagement process include:
- Moving the strategy to a three-year strategy with annual action plans to reflect the level of ambition
 - Strengthening the focus on the Welsh language and how communications can support DHCW to become a bilingual organisation
 - Strengthening the focus on communicating the challenges that we face in a transparent way which also reflects how we are working to address them
 - Updates to the list of stakeholders
 - More clarity about what communications is and how everyone has a role to play in this area
 - Increased focus on 'collaboration', particularly with staff and stakeholders
 - Strengthening the aspects on staff having a role in supporting the delivery of corporate messaging
 - Additional focus on how we build trust, including communicating how we have learnt when things have not gone well and the use of external validation to build this trust
 - Greater emphasis on the need to have the right message for the right audience at the right time.

Section 5: two boxes available in this section (1/2), use an appendix where necessary

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

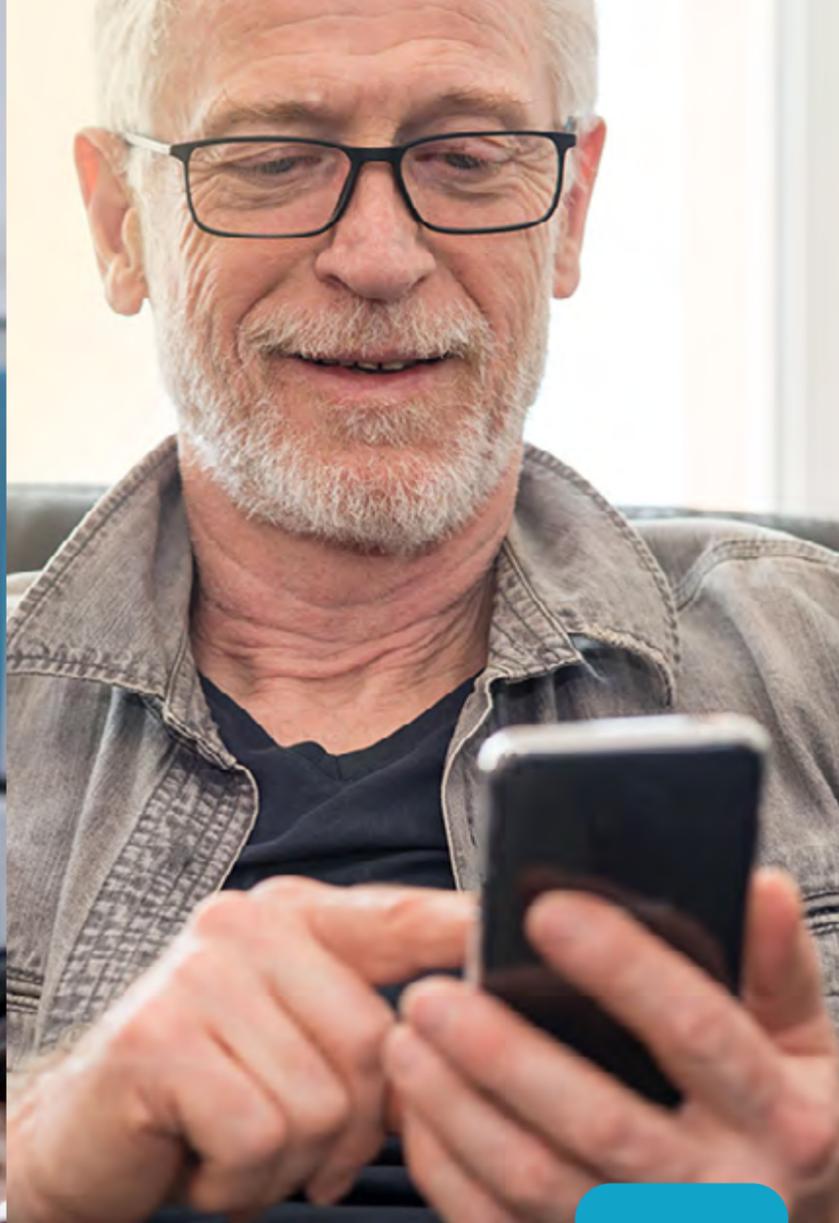
- 5.1 The need to make the best use of the communication team's resources to have maximum impact and delivery of the strategy.
- 5.2 The need to align programme communications to deliver a DHCW-wide approach to communications.

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

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
APPROVE the Communications Strategy.	

Richards, Carys
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Digital Health and Care Wales Communications Strategy 2023-2026

BACKGROUND AND PURPOSE

Digital Health and Care Wales (DHCW) is an expert national body and part of NHS Wales, delivering digital and data services for our partners.

The organisation runs or integrates with more than 100 services and delivers major national digital transformation programmes.

It is a young and ambitious organisation with a vision to provide world leading digital services, empowering people to live healthier lives.

Communications can be defined as the act of giving, receiving or exchanging information and everyone has a role to play in supporting the way an organisation communicates. As a national NHS organisation, it is vital that DHCW delivers strong and proactive communications to raise the profile of its work and build its role as a trusted strategic partner with a reputation as a system leader for digital health services.

Effective communication is essential to share progress, ensure a mechanism for two-way feedback and inform audiences of the key role for digital and data in health and care. It can also support the creation of an open and transparent culture within our organisation, help with recruitment and staff morale and engage and involve partners in the work of DHCW.



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NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

Richards Carys
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STRENGTHS, WEAKNESSES AND OPPORTUNITIES

Communications in DHCW, and its predecessor organisations, have historically focused on several areas, including building strong internal communications, events, awards submissions, website development and social media. Strengths include the quality and level of engagement of internal communications, success around award submissions and the level of involvement in events with key stakeholders.

However, current weaknesses are around taking a reactive approach to communications, the need to develop a stronger approach to external communications and gaining a better understanding of our stakeholders and their communication needs.

Recently, there has been a shift towards taking a more proactive approach and an increased focus on external communications, including digital communications, stakeholder communications, media, partnership working and crisis communications handling.

Work has also taken place to build on our internal communications; allowing staff to be more involved, and to ensure communications support and expertise is offered across the organisation. There are many positive opportunities to continue to develop and expand in these areas.

Developing a communications strategy which supports the delivery of open and proactive communications and outlines the priorities and direction of travel will help to create consistency in our approach and focus resources; ensuring an agreed set of aims for how we communicate.

This three-year strategy is designed to build on our to work date, identify the areas of focus for DHCW's communications in coming years and provide a clear pathway for achieving our strategic communications objectives. The ambition for this communications strategy is to ensure there is effective communication from DHCW to staff, stakeholders and the public about who we are, what we do and the impact that we have, as well as facilitating feedback, input and collaboration from these key groups.

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VISION

Having a vision is key to understanding the direction of travel and what we are seeking to achieve.

Our vision for communications is to deliver multi-channel, transparent and proactive communications which put people at the heart and support DHCW to be a trusted strategic partner.



Richards Marys
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APPROACH

This strategy aims to establish an approach to communications for DHCW which will see our communications becoming more proactive and people focused.

Our communications will be open about the role that DHCW plays and the opportunities this presents, while being balanced within the context of the challenges faced by DHCW and the wider health and care system in Wales.

In our communications with staff and stakeholders, we will talk proactively and transparently about challenges to our organisation while also putting an emphasis on communicating the ways in which we are seeking to address these.

We will collaborate with our partners to understand the challenges they face and communicate honestly with them about the role DHCW could play in addressing these.

We will work towards several key communications principles which define our approach:

- Be proactive and forward thinking
- Be open, honest and transparent
- Be timely and consistent
- Take a tailored approach which meets people’s needs
- Be inclusive and accessible
- Promote and encourage use of the Welsh language and support DHCW to become a bilingual organisation
- Establish a DHCW voice and brand
- Put people at the heart



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WHO WE WANT TO COMMUNICATE WITH

DHCW plays a unique role in the NHS Wales family. We are the NHS organisation delivering national digital and data services to our partners.

Our audiences include:

Community services and social care	Social care sector, mental health services, allied health professionals, community services
Digital and data	Digital and data leads in NHS Wales (Board level Directors responsible for digital, Chief Digital Officers, Chief Clinical Informatics Officers, performance, and information), senior staff, digital and data staff
Media	Broadcast, print, online, social media, public relations and marketing
NHS Wales – Health Boards, Trusts, SHAs and other NHS Wales organisations	Board (Chairs, Independent Members, Executives), clinicians, digital leads, senior staff, frontline users of systems (non-clinical), communications leads
Wider NHS	NHS England, NHS Northern Ireland, NHS Scotland
Patients and public	Patients and the wider public
Political / local government	Political and government (elected representatives) and local government (members and officers)
Primary care	GPs, dentists, pharmacists, optometrists, prison healthcare staff

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WHO WE WANT TO COMMUNICATE WITH

Our audiences include:

Representative bodies	Professional, statutory, and regulatory organisations including trade unions (Wales and UK), the Welsh Language Commissioner, Welsh NHS Confederation and Centre for Digital Public Services Wales
Research Education and Innovation	Research, innovation, and education (including Industry, digital and information technologies)
Suppliers and contractors	Commercial service procurement and contracts to support the organisation – systems, services software, consultancy, agency, contractors
Third sector	Third sector / voluntary, Patient / Public representative organisations / condition specific
Welsh Government	Minister for Health and Social Services, Chief Executive NHS Wales, Chief Officers, Digital and Data Directors, national clinical and policy leads
Our future workforce	Digital professionals, health professionals, students, trainees, apprentices, schools and universities

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STRATEGIC AIMS

To deliver our vision, we will place our focus on five key strategic aims.

These are:

ONE To **establish** DHCW's reputation as a trusted strategic partner

TWO To **build** on our internal communications - supporting staff to feel informed and empowered, making DHCW a great place to work and a high quality and ambitious organisation

THREE To **develop** our stakeholder communications - building relationships to work in partnership

FOUR To **grow** our public communications - building understanding of DHCW's role and how digital and data will help the NHS in Wales work better, what DHCW is doing to address digital inclusion and encouraging people to work for us

FIVE To **enhance** our digital communications - delivering high quality digital communications which reflect our purpose and ambition as a digital organisation

ESTABLISH

BUILD

DEVELOP

GROW

ENHANCE

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**STRATEGIC AIM ONE:
TO ESTABLISH
DHCW'S REPUTATION
AS A TRUSTED
STRATEGIC
PARTNER**

ESTABLISH

WHERE DO WE WANT TO BE?

- Have a clearly communicated vision and purpose so people understand who we are, what we do and why
- Be a recognised voice and brand in the health and digital sectors
- Be seen as a trusted strategic partner and recognised as an open, honest and learning organisation
- Have a reputation for delivering high quality products and services
- Ensure that there is a greater interest in working for us, and with us, by demonstrating an improved awareness of our role and our reputation

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**STRATEGIC AIM ONE:
TO ESTABLISH
DHCW'S REPUTATION
AS A TRUSTED
STRATEGIC
PARTNER**

ESTABLISH

HOW WILL WE DO IT?

- Develop a DHCW voice that is used consistently
- Develop a consistent set of key messages which outline who we are, what we do and the impact we have
- Ensure the right message is given to the right audiences at the right time
- Be honest about the challenges that we face and communicate the ways in which we are working to address them
- Build the DHCW brand identity and align programmes to this
- Raise our profile as system leaders through a focused, targeted and proactive approach to external communications and thought leadership
- Have greater involvement in NHS Wales and national networks
- Communicate proactively and honestly about our learning when things have not gone well
- Continually communicate the impact that our work has had to date and any external validation to help establish trust in what we say and what we do

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STRATEGIC AIM TWO:

**TO BUILD ON
OUR INTERNAL
COMMUNICATIONS -
SUPPORTING STAFF
TO FEEL INFORMED
AND EMPOWERED IN
THEIR WORK, MAKING
DHCW A GREAT
PLACE TO WORK AND
A HIGH QUALITY
AND AMBITIOUS
ORGANISATION**

BUILD**WHERE DO WE WANT TO BE?**

- We work collaboratively with staff to ensure their communication needs are being met and they feel well informed about the organisation, with a range of opportunities for two-way dialogue and feedback
- Staff feel empowered to communicate what the organisation does, our vision and purpose and can support the delivery of organisational messaging
- We are recognised as a high quality, inclusive and ambitious organisation, retaining and attracting the best people to work for us
- Staff have a range of mechanisms and opportunities to collaborate in our communications work and share information, feedback and ideas with each other and senior leaders
- Staff are placed at the heart of our internal communications as we take a people-centred approach
- The use of the Welsh language across DHCW is actively supported, encouraged and delivered through our communications, helping the organisation to become a bilingual organisation
- Staff have opportunities to develop their own communication skills to support the delivery of effective communications in their day-to-day work

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STRATEGIC AIM TWO:

TO **BUILD ON**
OUR INTERNAL
COMMUNICATIONS -
SUPPORTING STAFF
TO FEEL INFORMED
AND EMPOWERED IN
THEIR WORK, MAKING
DHCW A GREAT
PLACE TO WORK AND
A HIGH QUALITY
AND AMBITIOUS
ORGANISATION

BUILD

HOW WILL WE DO IT?

- Use a range of channels to provide staff with timely and relevant information
- Develop a proactive internal events programme that allows staff to collaborate and have two-way conversations, including with senior leaders
- Put staff at the heart of our communications, celebrating their work and achievements and the impact they have to help inspire others
- Work closely with People and Organisational Development to collaborate with staff to ensure they feel informed and engaged and part of an inclusive, supportive organisation
- Undertake regular evaluation of engagement and benchmark against other organisations who have successful internal communications and ensure we are meeting the needs of the organisation
- Collaborate with staff to support them to be ambassadors for the organisation reflecting DHCW's values and behaviours
- Work with Welsh language leads to ensure we effectively promote and encourage the use of Welsh across the organisation and ensure our communications are available bilingually
- Develop toolkits and guidance for staff to improve their communication skills so they feel empowered in this area

Richards Carys
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**STRATEGIC AIM THREE:
TO DEVELOP OUR
STAKEHOLDER
COMMUNICATIONS
- BUILDING
RELATIONSHIPS TO
WORK IN PARTNERSHIP**

DEVELOP

WHERE DO WE WANT TO BE?

- Seen as a trusted strategic partner in delivering digital health and care services
- Have positive and collaborative relationships with stakeholders who understand the role we play and value what we do
- Have a co-ordinated and defined approach to communications and engagement based on understanding stakeholders' needs
- Be consistent in our communications to stakeholders; providing them with timely and relevant information and allowing opportunities for them to communicate with us
- Seen as the experts in the field of digital health services
- Create opportunities for collaboration and partnership-working in our communications
- The use of the Welsh language with our key stakeholders is actively supported, encouraged and delivered through our communications

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**STRATEGIC AIM THREE:
TO DEVELOP OUR
STAKEHOLDER
COMMUNICATIONS
- BUILDING
RELATIONSHIPS TO
WORK IN PARTNERSHIP**

DEVELOP

HOW WILL WE DO IT?

- Be proactive, targeted and relevant with our stakeholder communications, providing information in a timely, consistent and appropriate manner, including, where necessary, timely crisis communications
- Be honest in our communications about the challenges that DHCW faces and how we are working with partners to address them
- Joint working between Communications and Engagement to undertake stakeholder mapping to understand our stakeholders and their needs and put in place communications channels which meet these
- Develop the DHCW Communications and Engagement professional network to establish a defined approach to stakeholders across DHCW and regular sharing of intelligence and information about key stakeholders
- Develop an events strategy which supports joint working and raises awareness of DHCW among stakeholders
- Use our expertise in digital and data to deliver information, briefings and events to partners to support them in their work
- Develop tools for DHCW staff to build their skills in this area and support them with their engagement work to ensure consistency in messaging and approach
- Build relationships and collaborate with our NHS Wales communications colleagues and wider partners to proactively seek opportunities for joint working
- Proactively identify opportunities with trade media to improve our reach with stakeholder audiences
- Work with Welsh language leads to ensure we effectively promote and encourage the use of Welsh with our stakeholders and ensure our communications are available bilingually

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STRATEGIC AIM FOUR:

TO GROW OUR PUBLIC COMMUNICATIONS – BUILDING UNDERSTANDING OF DHCW’S ROLE AND HOW DIGITAL AND DATA WILL HELP THE NHS IN WALES WORK BETTER, WHAT DHCW IS DOING TO ADDRESS DIGITAL INCLUSION AND ENCOURAGING PEOPLE TO WORK FOR US

GROW

WHERE DO WE WANT TO BE?

- There is an awareness of the role DHCW plays and how our services and products help support the delivery and quality of care received or support the public to stay well
- Seen as a trusted strategic partner and part of the health and care family
- The public are aware and engage with digital services and products they can use to improve their health and wellbeing
- Seen as the experts in the field of digital health services
- Ensure that there is a greater interest in working for us, and with us, by an improved awareness of our role and our reputation

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**STRATEGIC AIM FOUR:
TO GROW OUR PUBLIC
COMMUNICATIONS
– BUILDING
UNDERSTANDING OF
DHCW'S ROLE AND
HOW DIGITAL AND
DATA WILL HELP THE
NHS IN WALES WORK
BETTER, WHAT DHCW
IS DOING TO ADDRESS
DIGITAL INCLUSION
AND ENCOURAGING
PEOPLE TO WORK FOR
US**

GROW

HOW WILL WE DO IT?

- Ensure our public communications channels follow best practice and are engaging and relevant to our audiences
- Tailor our communications and identify opportunities for proactive communications which highlight what DHCW does and show how our services are helping improve care for the public
- Promote our key services and products which the public can use to improve their care
- Develop an events strategy to ensure we have a presence at relevant public events to raise awareness of DHCW
- Engage with mainstream press and Welsh language media and identify opportunities to promote our work to a wide public audience
- Work with POD to develop communications and attend relevant events which target our future workforce and encourage both English and Welsh speakers to work for DHCW
- Work collaboratively with NHS Wales communications teams and key partners to undertake joint communications which promotes our work and the impact it has to their audiences

Richards Carys
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STRATEGIC AIM FIVE:

**TO ENHANCE
OUR DIGITAL
COMMUNICATIONS
- DELIVERING HIGH
QUALITY DIGITAL
COMMUNICATIONS
WHICH REFLECT
OUR AMBITIONS
AS A DIGITAL
ORGANISATION**

ENHANCE

WHERE DO WE WANT TO BE?

- Leading the way in digital communications; representing the high-quality digital services we provide
- Ensure there are opportunities for two-way communications
- Be professional, proactive and engaging with our content creation
- Meet the needs of our staff, stakeholders and the public
- Leading the way in providing digital communications that are inclusive and support the use of the Welsh language
- Responsive to emerging trends to keep abreast of a fast-moving environment

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STRATEGIC AIM FIVE:

**TO ENHANCE
OUR DIGITAL
COMMUNICATIONS
- DELIVERING HIGH
QUALITY DIGITAL
COMMUNICATIONS
WHICH REFLECT
OUR AMBITIONS
AS A DIGITAL
ORGANISATION**

ENHANCE**HOW WILL WE DO IT?**

- Team upskilling in digital communications
- Horizon-scan for emerging trends and ensure we deliver best practice
- Bring more digital content creation in-house
- Identify where we can use digital communications to deliver the best results and be as inclusive as possible
- Ensure we take a bilingual approach to our digital communications, offering content in both languages and promoting DHCW as a bilingual organisation
- Take a more people-focused approach
- Undertake regular evaluation with key performance metrics for our digital communication tools

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OUTCOMES

This strategy is aimed at establishing a new, open and proactive focus to DHCW's communications.

The outcomes for this work are:

- Staff and stakeholders feel collaborated with, well informed about and engaged with our work and have opportunities to have input via a range of mechanisms
- DHCW's voice and brand is established and recognised by those in the health and digital sectors
- We are considered by our key partners as a trusted strategic partner with high levels of confidence in what we do and what we say
- We have a culture which supports open and honest conversations with staff and stakeholders with effective methods for communications so views, ideas and feedback are heard and responded to in appropriate ways
- We learn from best practice to become an exemplar for communications
- Staff have opportunities to develop their communications skills so they feel empowered and supported to deliver strong communications for DHCW in their day-to-day work



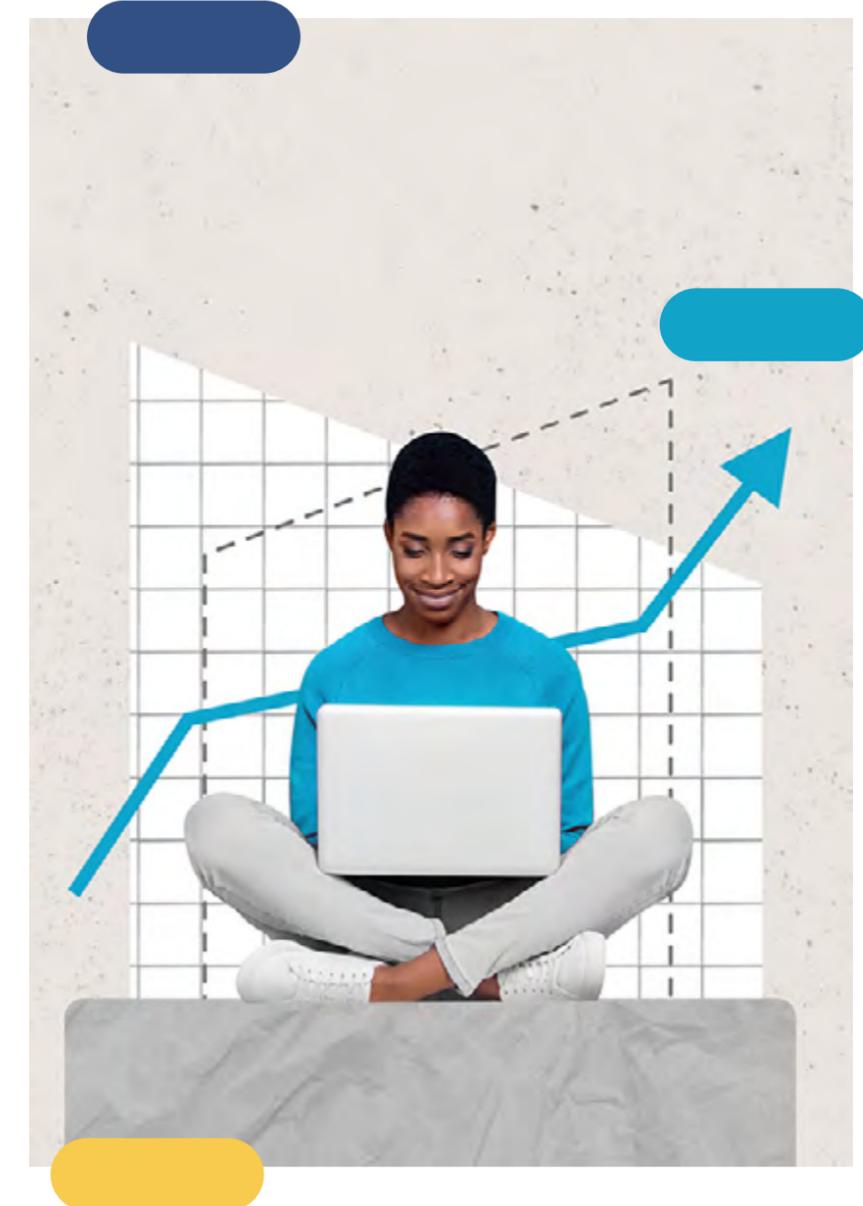
EVALUATION AND MEASUREMENT

We will evaluate and measure this work in a variety of ways, including:

- Engagement and feedback from stakeholders and validation from them
- Feedback from our staff about our communication and engagement work
- Media coverage and proactive news stories
- Staff survey participation and results
- Readership of key communications materials
- Engagement with our social media and website
- The number of events hosted, attendance and feedback from these events
- DHCW presence at key partner events and related feedback

As this strategy involves a new approach for the organisation, we will be carefully reviewing and monitoring the delivery plan and the above measures to ensure they are effective, appropriate and delivering our strategic aims.

Our approach will also be regularly reviewed and adapted to respond to any changing needs and ensure learning and continual improvements are made to deliver best practice.



APPENDIX 1

Engagement for this strategy included:

- Internal communications survey
- Engagement strategy, action plan and work by the Consultation Institute
- DHCW Board survey
- Induction meetings with ADOC (Assistant Director of Communications) - both with staff and stakeholders
- Communications team away day strategy planning session
- Regular meetings with Head of Engagement
- Engagement with Head of Strategy
- DHCW Executive Team session
- Board development session
- Management Board
- Communications team strategy delivery workshop
- DHCW Communications and Engagement professional network
- People and Organisational Development Directorate Senior Leadership Team
- Equality Diversity and Inclusivity group

APPENDIX 2

Communications delivery plan 2023-2024

Strategic aim	How we will do it	Delivery actions	Date
To establish DHCW's reputation as a trusted strategic partner	We will develop a DHCW voice that is used consistently in all our communications	Develop a tone and style of writing for all DHCW communications	November
		Put processes in place within the comms team to ensure this is used in our communications work	December
		Develop a style guide for writing with this tone of voice to provide guidance for all DHCW staff	January
	Develop a consistent set of key messages which outline who are, what we do and the impact we have	Develop and agree key messages which cover who DHCW are, what we do and the impact we have	October
		Develop guidance for staff to ensure consistency in messaging	October
		Update our key corporate communications materials and channels to ensure this messaging is used	September
	Ensure the right message is given to the right audiences at the right time	Undertake stakeholder mapping to understand stakeholders' needs	October
		Undertake messaging workshop to establish messages for stakeholders	September
		Put in place stakeholder communications mechanisms to ensure regular communications on key issues	January

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Strategic aim	How we will do it	Delivery actions	Date
To establish DHCW's reputation as a trusted strategic partner (cont)	Be honest about the challenges that we face and communicate the ways in which we are working to address them	Ensure we acknowledge challenges in our communications work and provide context	August onwards
		Develop case studies of how we are working to address these challenges	September onwards
		Undertake staff and stakeholder events which cover the challenges we face and how we're working to address them	October onwards
Build the DHCW brand identity and align programmes to this		Communicate with staff about the new branding for programmes and products to ensure alignment with one corporate DHCW brand approach	September
		Work with the graphics team to develop branding guidelines and toolkits	July
		Update existing comms materials where old branding is used	July
		Ensure all materials for programmes and products use the new branding	Phased in from September onwards
Raise our profile as system leaders through a focused, targeted, proactive and transparent approach to external communications		Proactively identify opportunities for pitching to media and publications relevant thought pieces	October
		Build an events planner to allow for better strategic planning for events and be assured the right people are speaking about the right things to the right audiences	June
		Undertake a review of our website and implement any recommendations to ensure it is delivering best practice and is fit for purpose	Ongoing

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Strategic aim	How we will do it	Delivery actions	Date
To establish DHCW's reputation as a trusted strategic partner (cont)	Raise our profile as system leaders through a focused, targeted, proactive and transparent approach to external communications	Focus efforts on growing our social media communications to promote our work and profile our leaders and the impact of digital in health and care	Ongoing
		Make use of social media scanning tools to identify key trends and discussion points in digital health and ensure, where appropriate, we are part of the conversation	October
	Communicate proactively and honestly about our learning when things have not gone well	Have a communications presence in the learning and incident management group Develop communications about the work the group does Develop communications about the learning we have taken from incidents and events and what has changed as a result and share this information with staff and stakeholders Develop events which talk about this learning for staff and stakeholders	Ongoing August October November
Continually communicate the impact that our work has had to date and any external validation to help establish trust in what we say and what we do		Develop case studies which show the impact our work is having	Ongoing
		Host and attend events where we showcase our work and the impact it is having	Ongoing
		Develop thought leadership pieces to establish ourselves as a system leader and raise our profile	November onwards
		Use external validation and take a partnership approach to communications	Ongoing

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Strategic aim	How we will do it	Delivery actions	Date
To establish DHCW's reputation as a trusted strategic partner (cont)	Have greater involvement in NHS Wales and national digital networks	Join the Welsh Government weekly Heads of Comms group	Ongoing
		Join the Welsh NHS Confederation's Heads of Comms peer group	Ongoing
		Join the CDPS' communications group and relevant peer groups	Ongoing
To build on our internal communications - supporting staff to feel empowered in their work, making DHCW a great place to work and a high quality, and ambitious organisation	Use a range of channels to provide staff with timely and relevant information	Evaluate current internal channels to ensure they are being used effectively	January
		Put in place internal comms tools based on internal comms survey	September
		Continue to develop SharePoint as 'one stop shop' for staff information	Ongoing
		Continue to use successful internal comms channels, including staff briefing and staff message	Ongoing
	Develop a proactive internal events programme that allows staff to collaborate and have two-way conversations, including with senior leaders	Develop a programme of Exec engagement with staff	September
		Change the staff briefings to webinars to ensure two-way conversations	Ongoing
		Support Execs with developing their own comms mechanisms for their directorates	Ongoing
		Develop an events planner which ensures a range of internal staff engagement events are put in place throughout the year	June

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Strategic aim	How we will do it	Delivery actions	Date
To build on our internal communications - supporting staff to feel empowered in their work, making DHCW a great place to work and a high quality and ambitious organisation (cont)	Put staff at the heart of our communications, celebrating their work and achievements and the impact they have to help inspire others	Ensure all our comms takes a person-centred approach	Ongoing
		Continue with directorate comms support to gain insight and develop stories about team achievements and involving them in our comms work	Ongoing
	Work closely with People and Organisational Development to collaborate with staff to ensure they feel informed and engaged and part of an inclusive, supportive organisation	Continue with the communications directorate support to POD to communicate key staff information	Ongoing
		Regular meetings in place between POD and Comms team to ensure joint working on internal comms and staff support	Ongoing
		Put in place strong evaluation methods for our internal comms to ensure they are meeting the needs of staff	October
		Put in place two-way communications / methods such as staff briefings so staff have the chance to feedback on key issues	Ongoing
	Undertake regular evaluation and engagement and benchmark against other organisations and ensure we are meeting the needs of the organisation	Undertake regular audits and reviews of our internal communications and monitor against other organisations	October
		Horizon-scan for best practice and consider how DHCW might adopt new approaches	January
Bring new ideas to forward planning and team away days		January	

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APPENDICES

Strategic aim	How we will do it	Delivery actions	Date
To build on our internal communications - supporting staff to feel empowered in their work, making DHCW a great place to work and a high quality and ambitious organisation (cont)	Collaborate with staff to support them to be ambassadors for the organisation reflecting DHCW's values and behaviours	Put call outs to staff to become ambassadors	November
		Develop case studies of staff to promote on our channels and recruitment events	January
		Develop key messages around DHCW recruitment that staff can use	January
		Develop a staff toolkit to support them to promote the organisation, including with key messages and relevant information	February
	Work with Welsh language leads to ensure we effectively promote and encourage the use of Welsh across the organisation and ensure our communications are available bilingually	Engage with Welsh language leads and network across DHCW	August
		Deliver strong promotion of Welsh resources and support for staff	August
		Ensure communications are delivered bilingually	Ongoing
		Look at content creation with Welsh speakers within the communications team	September
	Develop toolkits and guidance for staff to improve their communication skills so they feel empowered in this area	Develop a staff communications skills toolkit	October
Put in place staff training sessions in communications via our internal communications methods		From December	

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APPENDICES

Strategic aim	How we will do it	Delivery actions	Date
To develop our stakeholder communications - building relationships to work in partnership	Be proactive, targeted and relevant with our stakeholder communications, providing information in a timely, consistent and appropriate manner	Put in place regular communications forward planning meetings which involve programme comms leads to share information and undertake a shared approach to stakeholder communications	Ongoing
		Update stakeholder contacts list	August
		Make use of a stakeholder database which demonstrates who is communicating with whom and how	January
		Conduct an evaluation and review of current approaches to stakeholder communications across DHCW to establish what existing channels there are and how to better co-ordinate this	October
		Put in place mechanisms that support proactive communications with stakeholders, for example newsletters, briefings	January
	Be honest in our communications about the challenges that DHCW faces and how we are working with partners to address them	Ensure we acknowledge challenges in our communications work and provide context	August onward
		Develop case studies of how we are working to address these challenges	September onward
		Develop communications about the learning we have taken from incidents and events and what has changed as a result and share this information with staff and stakeholders	October
		Develop events which talk about this learning for staff and stakeholders	November

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APPENDICES

Strategic aim	How we will do it	Delivery actions	Date
To develop our stakeholder communications - building relationships to work in partnership (cont)	Joint working between Communications and Engagement to undertake stakeholder mapping to understand our stakeholders and their needs and put in place communications channels which meet these needs	Work with Head of Engagement to undertake stakeholder mapping for DHCW	October
		Work with other comms and engagement leads across DHCW to understand their stakeholders and their needs	October
		Put in place stakeholder channels that will meet these needs	January
		Ensure regular evaluation of these channels to ensure needs continue to be met	January
Develop the DHCW Communications and Engagement professional network to establish a defined approach to stakeholders across DHCW	Work with the Head of Engagement to continue to establish and grow the comms and engagement network	Share information and agree a structured and joined up approach to stakeholder communications and engagement	Ongoing
			Ongoing
Develop an events strategy which supports joint working and raises awareness of DHCW among stakeholders	Develop an events planner	Regular meetings with the events team to ensure we are working in partnership with the right stakeholders and reaching the right audience with our attendance and involvement with events	June
			Ongoing
Use our expertise in digital and data to deliver information, briefings and events to partners to support them in their work	Develop a repository of spokespeople for key areas of expertise	Deliver events to stakeholders on areas of expertise that will support them in their work	December
			January onwards
		Ensure we attend relevant events using the right spokespeople to promote our work and expertise to audiences	Ongoing

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APPENDICES

Strategic aim	How we will do it	Delivery actions	Date
To develop our stakeholder communications - building relationships to work in partnership (cont)	Develop tools for DHCW staff to support them with their engagement work to ensure consistency in messaging and approach	Develop a stakeholder toolkit with key messages and information to support staff with their engagement with stakeholders	October
	Build relationships and collaborate with our NHS Wales communications colleagues and wider partners to proactively seek opportunities for joint working	Join the Welsh Government weekly Heads of Comms calls	Ongoing
		Join the Welsh NHS Confederation’s Heads of Comms peer group	Ongoing
Join CDPS’ comms groups and relevant peer groups		Ongoing	
Proactively identify opportunities with trade media to improve our reach with stakeholder audiences		Put in place Team SOPs for media bidding and handling	Ongoing
		Undertake team training in media work	Ongoing
		Update media contact lists so we know who to pitch to	November
		Contact relevant journalists to build relationships and identify their needs for pitching	November
		Bring proactive news stories to the comms team meeting to discuss ideas of how to pitch and who to	Ongoing

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APPENDICES

Strategic aim	How we will do it	Delivery actions	Date
To develop our stakeholder communications - building relationships to work in partnership with stakeholders (cont)	Work with Welsh language leads to ensure we effectively promote and encourage the use of Welsh with our stakeholders and ensure our communications are available bilingually	Engage with Welsh language leads and network across DHCW	August
		Deliver strong promotion of Welsh resources and support for staff	August
		Ensure communications are delivered bilingually	Ongoing
		Look at content creation with Welsh speakers within the communications team	September
To grow our public communications - building understanding of DHCW's role and how digital and data will help the NHS in Wales work better, what DHCW is doing to address digital inclusion and encouraging people to work for us	Ensure our public communications channels follow best practice and are engaging and relevant to our audiences	Undertake a review of our website and consider recommendations	Ongoing
		Ensure we have appropriate specialist skills within the team to develop our website	Ongoing
		Continue to develop and grow our social media channels	Ongoing
		Regularly evaluate the performance of our website and social media to understand usage and engagement levels	July
Tailor our communications and identify opportunities for proactive communications which highlight what DHCW does and show how our services are helping improve care for the public	Ensure our communications are people-focused and relatable to members of the public by demonstrating the impact they have on people's care		June onwards

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Strategic aim	How we will do it	Delivery actions	Date
To grow our public communications – building understanding of DHCW’s role and how digital and data will help the NHS in Wales work better, what DHCW is doing to address digital inclusion and encouraging people to work for us (cont)	Promote our key services and products which the public can use to improve their care	Promote NHS Wales app and other public-facing products across our DHCW communications channels	September
	Promote our key services and products which the public can use to improve their care	Promote NHS Wales app and other public-facing products across our DHCW communications channels	September
	Develop an events strategy to ensure we have a presence at relevant public events to raise awareness of DHCW	Develop an events planner Regular meetings with the events team to ensure we are attending or showcasing at relevant events to meet our strategic objectives	June Ongoing
	Engage with mainstream press and Welsh media and identify opportunities to promote our work to a wide public audience	Put in place Team SOPs for media bidding and handling Undertake team training in media work Update media contact lists so we know who to pitch to Bring proactive news stories to the comms team meeting to discuss ideas of how to pitch and who to Contact relevant journalists to build relationships and identify their needs for pitching	Ongoing Ongoing November Ongoing November

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APPENDICES

Strategic aim	How we will do it	Delivery actions	Date
To grow our public communications – building understanding of DHCW’s role and how digital and data will help the NHS in Wales work better, what DHCW is doing to address digital inclusion and encouraging people to work for us (cont)	Work with POD to develop communications and attend relevant events which target our future workforce and encourage both English and Welsh speakers to work for DHCW	Provide comms directorate support to build relationships and share planning between comms and POD	Ongoing
		Horizon-scan for relevant recruitment events as part of our events strategy and ensure we attend events which will be impactful for recruitment	January
	Work collaboratively with NHS Wales communications teams and key partners to undertake joint communications which promotes our work and the impact it has to their audiences	Join the Welsh Government weekly Heads of Comms calls and identify areas for joint working	Ongoing
		Join the Welsh NHS Confederation’s Heads of Comms peer group and identify areas for joint working	Ongoing
To enhance our digital communications – delivering high quality digital communications which reflect our ambitions as a leading digital organisation	Team upskilling in digital communications	Ensure communications are developed in partnership with Health Board and Trust teams and shared across channels	July onwards
		Join CDPS’ comms groups and relevant peer groups	Ongoing
	Horizon-scan for emerging trends and ensure we deliver best practice	Team CPD programme to be developed and implemented, covering digital communications	January
Undertake research on a quarterly basis on digital communications and identify any key trends or changes		January	
		Identify leaders in the field and regular monitor their work to understand what best practice looks like and apply this to our channels	January

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APPENDICES

Strategic aim	How we will do it	Delivery actions	Date
To enhance our digital communications - delivering high quality digital communications which reflect our ambitions as a leading digital organisation (cont)	Bring more digital content creation in-house	Purchase filming equipment	July
		Team upskilling (as per above action)	August
	Identify where we can use digital communications to deliver the best results and be as inclusive as possible	Ensure the communications team have knowledge of equality and accessibility and that our digital channels meet these standards	July
		Undertake regular audits and reviews of our internal communications and monitor against other organisations	September
		Horizon-scan for best practice and consider how DHCW might adopt new approaches	March
	Take a more people focused approach	Ensure our digital communications content, particularly our social media posts, centres around people	Ongoing
	Undertake regular evaluation with key performance metrics for our digital communication tools	Monthly evaluation of our digital channels to be put in place and discussed at team meetings	August
		Reporting of digital communications performance to monthly management board	July onward
	Ensure we take a bilingual approach to our digital communications, offering content in both languages and promoting DHCW as a bilingual organisation	Ensure all digital communications are bilingual	Ongoing
		Research best practice for digital bilingual communications	February
Promote use of Welsh via our digital channels		Ongoing	
Work with Welsh speaking team members to draft content bilingually		September	

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DIGITAL HEALTH AND CARE WALES

PEOPLE AND ORGANISATIONAL DEVELOPMENT

STRATEGY – UPDATE REPORT

Agenda Item	5.4
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

Executive Sponsor	Sarah-Jane Taylor, Director of People and Organisational Development
Prepared By	Sarah Brooks OD and Engagement Lead, Joanne Jamieson Head of Business Partnering (People Team), SJ Taylor, Director of POD
Presented By	Sarah-Jane Taylor, Director of People and Organisational Development

Purpose of the Report	For Noting
Recommendation	
The SHA Board is being asked to NOTE the report	

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1. IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	Development of the new Digital Organisation
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CORPORATE RISK (ref if appropriate)	Not applicable
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WELL-BEING OF FUTURE GENERATIONS ACT	A More Equal Wales
If more than one standard applies, please list below:	
<ul style="list-style-type: none"> • A Resilient Wales • A Wales of cohesive Communities • A Wales of Vibrant Culture and Thriving Welsh Language 	

DHCW QUALITY STANDARDS	BS 76000:2015
If more than one standard applies, please list below:	
<ul style="list-style-type: none"> • BS 76005 • ISO 30415 (replacing BS 76005) 	

HEALTH CARE STANDARD	Staying Healthy
If more than one standard applies, please list below:	

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

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below That resources to support the strategic equality plan commitments are permanent and that there is an on-going commitment to these each financial year.
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below The activities and work undertaken to support the commitments of the People and Organisational Development Strategy is intended to have wide ranging implications that

	have positive impacts for the organisation’s workforce, its stakeholders and key partners. There should be benefits felt in the attraction and retention of talent, greater innovation, and creativity and the realising of a positive and inclusive culture and high performing organisation through a variety of development features.
SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below <ul style="list-style-type: none"> • The activities and work undertaken around the strategic commitments impacts the diverse communities within which DHCW operates. • Completion of equality impact assessments supports diversity and inclusion in the work undertaken by DHCW throughout its communities.
RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

Acronyms			
HEIW	Health Education and Improvement Wales	SHA	Special Health Authority
SEP	Strategic Equality Plan	ESR	Electronic Staff Record
WG	The Welsh Government	ONS	Office of National Statistics
NWSSP	NHS Wales Shared Service Partnership	BS	British Standard
ISO	International Standards Organisation	EDI	Equality, Diversity and Inclusion
EIA	Equality Impact Assessment	POD	People and Organisational Development

2. SITUATION/BACKGROUND

2.1 The purpose of this report is to provide the SHA Board a progress update on the Digital Health and Care Wales (DHCW) People and Organisation Development Strategy signed off at the SHA Board on the 29th of September 2022.

The People and Organisation Development (POD) Strategy, covers a three-year period from 2022 to 2025. It has a vision to celebrate DHCW as a ‘great place to work, where our people are fully engaged, developed, and supported, high performing and embody the organisation’s values.

The POD Strategy identified the workforce priorities required to support the delivery of Digital Health and Care Wales strategic ambitions, vision and priorities ensuring that the newly developed values which formed an integral part of the new strategy are embedded throughout the organisation.

The Strategy features six key themes which were broken down into high level people priorities, these are provided in the table below and detail the specific measurable actions to achieve these priorities.

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The DHCW People and Organisational Strategy commitments are:

Key Themes	People Priorities
Extraordinary Leadership	Leadership Development Training and Development Talent Management- at all levels Succession Planning
Great Organisation to Work	Culture and Organisation Development Diversity/Equality/Inclusion/Welsh Language Values and Behaviours Thriving Research and Innovation agenda
Strategic Workforce Planning	Resourcing - Recruitment & Retention Shaping the Workforce – current and future workforce Workforce Review – career pathways across digital profession*
Grow Our Own	Growing our own talent Career pathways – all workforce* *(linked commitments) Partnership and Collaborative Working
Wellbeing & Engagement	Wellbeing and Engagement
New Ways of Working	Technology and New Ways of Working

An overarching commitment integral of the People and Organisational Development Strategy was to formulate the DHCW Strategic Equality Plan. This plan was developed in partnership and presented to the DHCW SHA Board in March 2023 and was endorsed by the Board to take forward the commitments. An additional update report for the SHA Board has been prepared this month which provides Board members specific update to the Strategic Equality Plan progress, and as such, these areas are not included in this report.

There has been substantial progress made to date in the first year of the strategies life and progress under each of the key themes are detailed in Section 3 of this report.

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

3.1 Leadership and Talent Management, incorporating Succession Planning and Grow-Your-Own

- I. Leadership and Talent Management is being supported at most levels across the organisation following the endorsement of the People and OD strategy in September 2022, by the end of the 2023-24 reporting year this will be extended to all grades as part of our planned development and roll-out.
- II. The SHA Board members are working closely with Deloitte, and the executive team are within this cohort. Executive team members are also supported by coaching, buddy arrangements and Gartner.
- III. Aspects of the Deloitte approach which have been utilised as part of the Board Development programme is being rolled out for the direct reports of the executive. The launch of the 360s commenced in September 2023 as a development feature to the senior leaders within this group.
- IV. The organisation fully supports all Wales approach to developing talent and has endorsed several members of our workforce to join various national talent schemes and development programmes

over the last year.

- V. For the next tier of leadership under the executive team, there has been keen focus over the last year. The first in-person Senior Leaders Event (8C grades and above) was developed in-house by the Director of People and OD and team and held in 2022. The second Event for the same cohort was developed in-house and held in March 2023. There was attendance of c95 leaders at both Events. These were led by the Chief Executive with good support of all the Executive Directors, who led specific sessions, presentations and break out groups. The content was both people and delivery plan (IMTP) focused. Feedback received was favourable and generated lots of requests and ideas for inclusion at future senior leadership events.
- VI. The key themes within both the People and Organisational Development Strategy and the Strategic Equality Plan were given a good percentage of time during these Events. This raised awareness, encouraged discussion, and sparked interest, and supported our senior leaders to better understand the importance of all our roles as leaders and how we can all contribute to achieve our ambitions.
- VII. As part of this commitment to develop our senior leaders the People and OD team appointed two external specialist providers, Silvermaple and King's Fund, to support our Senior Leadership Development Programme, Talent Management and Succession Planning commitments.
- VIII. There have been several focus groups sessions with senior leaders and the executive team over quarters 1 and 2 to support both the Kings Fund and Silvermaple in the development of bespoke provisions for the organisation. These have been well supported and the Kings Fund are leading the next in-person senior Leadership Day planned for the 8th of November 2023.
- IX. Significant planning and preparation undertaken with SilverMaple and the People and OD team during quarter one 2023-4 resulted in the establishment of a new Talent Cohort for Bands 6 to 8B. This cohort was successfully launched in June 2023 with over 80 employees being throughput onto this talent programme. The features of this programme include, psychometrics, interviews, monthly cohort catch ups, access to a large range of development and learning offerings, questionnaires, and attendance at the first in-person Talent Day Event in June 2023. The Event was well supported by the Executive team and additionally several senior leaders from across the organisation. The OD team are currently carrying out one-to-one sessions with all this talent cohort to keenly pull all the information strands gathered so far together and to map skills gaps and development interest(s) to best support development and learning offerings for each member of the talent cohort.
- X. Silvermaple are currently working with the People and OD Business Partnering team to assess the **succession planning** position in each Directorate. The POD team will then link this to the strategic workforce planning work-stream to best support new development provision and mitigate high risks in relation to single points of failure within the workforce and risks identified in particular teams and professions and understand this better organisationally.
- XI. The final group in the Talent programme is the Band 5s to Band 3s, including apprentices. This support offering is currently being developed in-house and is planned for roll-out in quarter 4 of 2023-4. This is being led by Chris Darling, Board Secretary and Head of Profession for Administration and Sarah-Jane Taylor. There is acknowledgement that there are two discrete groups, one administration officers and the other technical talent. The cohort will be one group with discrete learning offerings in relation to the group which they are employed in and in which they wish to develop their careers.

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Training and Development

- XII. As a learning organisation, training and development is very well supported within the organisation. The grow your own talent commitment has been embedded and the variety of provision offered ranges from: on-line through the DHCW learning platforms, in house via the POD training team, through the all Wales (HEIW) development offerings, bespoke commissioned provision, on-line learning modules external to the DHCW platforms, offerings as part of professional memberships and education provision via Universities and our partnerships with them. In terms of development and outcomes achieved, it can be noted that 57% of our vacancies were filled in the last financial year through internal career moves and progression. This indicates the organisation is developing and supporting our existing workforce move forward with their career ambitions, with many securing more specialist and senior roles within the organisation.

Grow Your Own

- XIII. In addition to the various leadership, talent, development offerings already highlighted in this report to support awareness of everything being driven forward in this theme, it will be helpful to note some external commitments. Through our established partnerships and collaborative working over the last 12 months there has been strong engagement felt with local community groups, schools, colleges and universities. This has been achieved through careers events and Open Days which raise the knowledge and profile of our organisation, with particular focus on showcasing careers in digital and opportunities to join and develop a career within DHCW.

The organisation is continuing to appoint new Apprentices and we are currently supporting seven and supporting them with various development opportunities. Similarly with graduates, those which join us a direct hire and join our workforce through various intake schemes and also NHS Wales graduates supported by HEIW who have development placements with DHCW for a number of years.

A key partnership is the Wales Institute of Digital Information (WIDI). Through the Governance Board (membership of the Chief Executive and Director of People and OD for DHCW) and WIDI Operational Groups which both work collaboratively on the development and upskilling of our digital workforce.

3.2 Great Organisation to work

Much of the detailed information within this key theme is integral with the Strategic Equality Plan update report being presented to SHA Board on the 28th of September 2023. To provide comprehensive assurance under this theme, the organisation continues to work closely with Trade Union colleagues on all matters pertaining to our people and work with external partners and academia to ensure that we are strongly positioned as an employer of choice.

The organisation were the winners of UK IT Industry Award – Best Place to Work in November 2022 and through a number of external assessments, achievement of international ISO standards and internal and external Audits the organisation continues to be highly rated.

The good work that Rachel Powell, the Head of Research and Innovation has taken forward in driving research and innovation across organisation follows the publication of the R&I Strategy in 2022 and there are positive working relationships forged across the whole organisation. The DHCW Executive Medical Director, Rhidian Hurle has recently set up and is the Chair of the new DHCW's Research and Innovation Board.

Richards Cynys
21/09/2023 10:29:15

3.3 Strategic Workforce Planning and Shaping the Workforce

A strategic workforce planning tool was developed in house in partnership with the Directorate leads and led and implemented by the People and OD business partnering team to capture resource requirements. This required further specialist development for the People and OD team and support was provided by Gartner, who ran a session to go through best practice models and robust methodologies. The workforce planning exercise was implemented across the whole organisation, and it was comprehensive but time consuming to complete, especially for some of the larger teams.

A detailed report was produced, and shared with the executive team, management board and the SHA Board. It would be fair to say, that there is some development needed in this area of the work and upskilling across the organisation is being rolled out in November 2023 to support the content, development, usability, and quality of this year's return in order to best inform development investment and focus over the coming years. This is an area of priority for quarters 3 and 4 of 2023-4.

Resourcing - Recruitment & Retention

The Strategic Resourcing Group was established to explore resourcing options including those through contractual arrangements and work packages and to monitor resource requirements at organisational level and recruitment activity and explore options to mitigate risk and this group is well attended, chaired by the Director of People and OD and meets once a month with senior representatives across the whole organisation. Recruitment has and continues to be challenging.

The POD team work closely with Finance colleagues who have developed a robust Resource Tracker Dashboard which provides one source of the true position, enabling credible and confident understanding of a position at any given time. This has been a great achievement. The focus on this area of the work has been concentrated throughout the year and continues to be one of the highest priorities and will be keenly managed throughout the remainder of the financial year and reviewed by the executive team.

There has been increased collaboration with wider digital community networks and groups such as Centre for Digital Public Services (CDPS), Health Education Improvement for Wales (HEIW), Federation for Informatics Professionals (FEDIP) and British Computer Society (BCS) and an all-Wales Group has been established to progress the recommendations for the Digital Workforce Review. Following the financial challenges review in the summer of 2023 this work stream is being reviewed with options of how best to progress this currently with the Chief Executive and Director of People and OD.

3.4 Wellbeing & Engagement

DHCW successfully retained Gold Corporate Health Standard and recertification for BS76000 Valuing People Standard and BS76005 Diversity Inclusion Standards which demonstrates progress and activity.

New categories were added to the Staff Recognition Awards reflecting the importance of the new DHCW Values, as a result there were increased nominations and a successful awards event held in quarter one.

The DHCW Health and Wellbeing group and People and OD team worked closely in partnership with Trade Unions to develop and publish the financial and wellbeing pages on the website and alert and signpost people to expert support throughout the year. This is going to be reprised this year for the winter period and work has commenced to refresh and check all support is still available and what

new provision can be added. Engagement with colleagues and external partners is well established.

3.5 New Ways of Working

As our working approaches continue to evolve since the pandemic, a new Hybrid Working Policy was developed and implemented this year accompanied by Hybrid workshops and a new toolkit for staff and managers.

A recent external audit (September 2023) on Hybrid Working in the organisation carried out by external Audit team identified areas of best practice and compliance and rated the assurance as substantial.

Wellness checks by managers and colleagues to staff working on appears to be well embedded, and positive feedback through various in-house surveys suggest that the new ways of working are positive and have improved overall wellbeing. A key finding was that 96% of employees advised that they would not enjoy returning to an office 9-5 each day. People advised that they are more productive and happier working a hybrid approach. Some staff have said that they have enjoyed coming into the DHCW offices more regularly over the course of this year, and there has been an increase compared to 2022-23. The re-furbished 3rd floor in the Cardiff office, for example, is often singled out as being a great place to work and this environment has encouraged some staff to work in the office more often.

4. FOCUS FOR NEXT 3-6 MONTHS – Quarters 3 and 4 of this reporting year

This section highlights the areas of keen focus and planned activity over the next two quarters of 2023-24.

- I. Continuing the focussed work of the strategic resourcing group – addressing the identified recruitment gaps and risks on a weekly and monthly basis, and sourcing options, exploring the new commercial contracts for work packages and contractors, and reviewing and working together organisationally on ‘at scale’ recruitment and intakes to best support graduates and apprentices etc.
- II. For the People and Development team business partners, working with the senior leadership to fully support the various organisational change programmes, structure reviews and new arrangements, with particular regard to the large-scale changes in the Operational team aligned to the product approach.
- III. The development and delivery of the next senior leadership day for 8Cs and above on the 8th of November 2023 with Kings Fund
- IV. The development and launch of the strategic workforce planning exercise in quarter 3 – incorporating skills mix analysis, single points of failure, succession planning, resource requirements – those requiring investment and growth and those which will need re-training and deployment across the organisation at identified points in the future in order that support and development offering can be planned at the right time in the area of key priority, acting as a development and retention enabler
- V. For the People and OD senior team to have a keen focus on job evaluation, matching and consistency and working at organisational level with senior managers, alongside structure reviews and organisational change programmes to support and map the organisational design and future plans.

- VI. Development and delivery of the band 3s/4s and 5s Development Programmes in quarter 4
- VII. The launch of the NHS Wales Staff Survey is diarised for the 2nd of October 2023. The People and OD team will work with the Comms team to support good engagement and completion rates and the POD team will review the findings and provide these to the Executive team and each Directorate. This report will likely give us a good indication on how things are progressing and if any areas of further focus that we should be aware of and develop plans and activities to support improvements.
- VIII. The development of a new resourcing strategy co-developed by the strategic resourcing group but led by the People and OD profession. This is planned for development in quarter 4 and will consider the initial finding of the next strategic workforce planning exercise.
- IX. To plan the next staff conference and staff awards events for year end 2023-24 as activity and planning will need to commence on these work stream in November 2023.

5. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 5.1 Following the publication of the strategic equality plan and the people and od strategy the requirements to develop and implement a number of new work streams within a small team has been challenging. The People and OD Director with the Head of People and OD are currently reviewing the POD team structure and aligning this to the commitments over the coming year to confirm resource is matched to sufficiently support meeting all the future commitments and delivery of priorities.

6. RECOMMENDATIONS

- 6.1 SHA Board is being asked to **NOTE** the following:
 - The activities and initiatives undertaken in year one to deliver the priorities and commitments of the People and OD Strategy
 - The next planned activity in quarter 3 and 4 of 23-24.

7. APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Sarah Brooks, Organisational Development, Culture-Engagement Lead	04/09/2023 (v1)	Original Author with support from Jo Jamieson Head of Business Partnering (People Team) – preparation and issued to Do&POD
Sarah-Jane Taylor, Director of People and Organisational Development	15/09/2023 (v3)	Scrutiny and final version prepared and signed off
Weekly Executive Directors Meeting	16/08/2023	Noting
Management Board	17/08/2023	Noting
SHA Board	28/09/2023	Noting

People and Organisational Development Strategy Progress Update

Sarah-Jane Taylor

Director of People and Organisational Development

Richards Carys
21/09/2023 10:29:15

People and OD Strategy - Key Themes

Key Themes	People Priorities
Extraordinary Leadership	<ul style="list-style-type: none"> Leadership Development Training and Development Talent Management- at all levels Succession Planning
Great Organisation to Work	<ul style="list-style-type: none"> Culture and Organisation Development Diversity/Equality/Inclusion/Welsh Language Values and Behaviours Thriving Research and Innovation agenda
Strategic Workforce Planning	<ul style="list-style-type: none"> Resourcing - Recruitment & Retention Shaping the Workforce – current and future workforce Workforce Review – career pathways across digital profession*
Grow Our Own	<ul style="list-style-type: none"> Growing our own talent Career pathways – all workforce* *(linked commitments) Partnership and Collaborative Working
Wellbeing & Engagement	Wellbeing and Engagement
New Ways of Working	Technology and New Ways of Working

Richards, Carys
21/09/2023 10:29:15

Leadership and Talent Management – GYO, New Ways Of Working, Development & Succession Planning



Richards, Carys
21/09/2023 10:29:15

Great Organisation to Work



Strategic Workforce Planning and Shaping, Careers, Resourcing and GYO Development



Well-being and Engagement – A sample of our staff wellness photo competition 23



Richards, Carlys
21/09/2023 10:29:15





DIGITAL HEALTH AND CARE WALES PROGRAMME GOVERNANCE

Agenda Item	6.1
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

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

Purpose of the Report	For Noting
Recommendation	SHA Board is being asked to
NOTE the proposed new Governance arrangements relating to DHCW hosted programmes, and the ongoing work in this area.	

Richard Steyn
21/09/2023 17:09:15

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions apply
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CORPORATE RISK (ref if appropriate)	
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Prosperous Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	N/A
If more than one standard applies, please list below:	

<u>DUTY OF QUALITY ENABLER</u>	Leadership
<u>DOMAIN OF QUALITY</u>	Effective
If more than one enabler / domain applies, please list below:	

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

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

Richard
21/09/2023 10:29:15

Section 2:

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2 APPROVAL / SCRUTINY ROUTE

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

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
WG	Welsh Government	SRO	Senior Responsible Owner

Richards Carys
21/09/2023 10:29:15

3 SITUATION/BACKGROUND

- 3.1 DHCW is accountable to Welsh Government, with leadership and direction provided by the [DHCW Board](#), which has oversight in ensuring sound governance arrangements. DHCW's remit is to provide national digital and data services and infrastructure to NHS Wales.
- 3.2 DHCW hosts a number of Welsh Government funded major digital programmes, providing a range of expertise including but not limited to programme management, commercial, technical, delivery and business change, reporting into relevant national programme boards. Typically, external Senior Responsible Owners (SROs), appointed by Welsh Government, are accountable for delivery of these programmes. Historically there has been variation in governance structures across these major programmes, and with the establishment of DHCW as a statutory body in April 2021, it was identified by DHCW and Welsh Government that it would be helpful if the accountabilities and responsibilities of Digital Programme Boards and DHCW are clarified for DHCW hosted programmes.
- 3.3 DHCW commissioned an independent review supported by Welsh Government, which has been carried out by Mr Steve Combe MBE, an independent governance advisor, with significant experience of NHS governance. The review commenced on the 7 November 2022. The report was finalised in April 2023 and shared by the DHCW Chair with the Minister for Health and Social Care. In addition, the DHCW Chief Executive shared the report with the Chief Executive for NHS Wales / Director General for the Health and Social Services Group.
- 3.5 The report was also shared formally with SROs of the DHCW hosted programmes, Welsh Government, Audit Wales and other stakeholders.
- 3.6 The implications from the report were considered via:
- DHCW Board Development Day on the 27 April 2023
 - Consideration at the DHCW Audit and Assurance Committee on the 3 July 2023
 - Liaison with Welsh Government via the DHCW Chief Executive.
- 3.7 The main recommendation from the report was to simplify governance arrangements to include streamlining lines of accountability, ensure greater clarity on roles and responsibility, allowing DHCW hosted programmes to operate in an open and transparent manner.

Richards Carys
21/09/2023 10:29:15

4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 4.1 Since the publication of the report, DHCW have met with Welsh Government Officials and have agreed that financial and delivery accountability for all DHCW hosted programmes would transition to sit with the DHCW Accountable Officer – Chief Executive Officer.
- 4.2 Welsh Government will hold DHCW to account for the delivery of DHCW hosted programmes, using existing performance management arrangements e.g. Joint Executive Team (JET) reviews and Integrated Quality Planning and Delivery (IQPD) Reviews.
- 4.3 Welsh Government Officials have developed a phasing for the transfer of programmes to the new arrangements whilst all new programmes will adopt the new governance arrangements automatically. New programme governance arrangements, for all programmes will be fully in place by the end of March 2024.
- 4.4 The DHCW Chair, together with the CEO, have agreed to establish a sub-committee of the DHCW Board to provide assurance and scrutiny on delivery of major DHCW hosted programmes in an open and transparent manner. The Terms of Reference for the new Programmes Delivery Committee will be considered by the Committee and come to a future SHA Board meeting for formal approval, with the first Committee meeting planned for November 2023. In addition, the internal DHCW management governance arrangements to oversee programmes is being strengthened. These internal arrangements are being developed with input from programme leads.

Richards Carys
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Section 5: two boxes available in this section (1/2), use an appendix where necessary

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 5.1 There is lack of clarity in terms of accountability for major DHCW hosted digital programmes. The new Governance arrangements will address this ambiguity but requires a number of areas to be confirmed by DHCW and Welsh Government.

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

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
NOTE the proposed new Governance arrangements relating to DHCW hosted programmes.	

Richards Carys
21/09/2023 10:29:15

DIGITAL HEALTH AND CARE WALES

INTEGRATED ORGANISATIONAL PERFORMANCE REPORT

Agenda Item	6.2
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

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

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

Richards Carys
21/09/2023 10:29:15

1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply
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CORPORATE RISK (ref if appropriate)	n/a
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WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

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

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

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

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

2 SITUATION/BACKGROUND

- 2.1 This document provides a summary of the Digital Health and Care Wales (DHCW) Integrated Organisational Performance Report (IOPR) to the end of August 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. The Board IOPR is presented on a bi-monthly basis in arrears.
- 2.2 Updates on DHCW's Integrated Medium Term Plan (IMTP) are included on a quarterly basis in arrears, providing assurance that progress is aligned to DHCW's published plan. The update for quarter one is included in this report.

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.

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)

3.1 Plan on a Page

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

In the period since the last report there has been a significant achievement in in Mission 1 (Data Platform and Reference Services) as the Data Platform went live early August 2023, consisting of a secure platform integrated with NHS Wales digital infrastructure which hosts the National Data and Analytics Platform (NDAP) and the Care Data Repository (CDR). These products are key enablers in delivering all-Wales data capabilities in a governed, secure and ethical manner. The first data pipeline (national reference data set) has been implemented in readiness for the platform to be populated over

Richard's Review
21/09/2023 10:15

time with health and care data from both local and national services in line with the NDR operational delivery framework.

Also, during the period, we have seen a new contract awarded to underpin our integration services, a national release to our current radiology system, acceptance testing complete for the new critical care system minimal viable product and the execution of the laboratory system (LIMS 2.0) contract to 2030.

The Digital Services for Patients and the Public has made further progress with the build of work package 7 – including a proof of concept for API management, and initial work on a messaging service to support in-app and push notifications. In addition, a technical proof of concept for the primary care electronic prescription programme is underway with one supplier in a test environment and local contractual agreements are progressing for the secondary care electronic prescribing programme.

3.2 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. There are eighteen indicators on the scorecard twelve are **GREEN** and the remainder are **AMBER**. The details below highlight selected indicators from the scorecard:

Operational Service Support = AMBER. There were nine Major IT Incidents in the period, all were resolved within the target resolution time. Major IT incidents are disruptions to IT services that are categorised as 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 specified in service level agreements (SLA). A Major IT Service 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 (IRLG) to minimise future occurrences and improve IT service delivery.

There were five incidents in July; no SLA breaches: 3 affected multiple services, 1 x Welsh Clinical Portal (WCP) and 1 x GP Systems Supplier.

There were four incidents in August; no SLA breaches: 1 x Welsh Radiology Information System (WRIS) (local IT issues), 1 x Master Patient Index (MPI), 1 x Welsh Laboratory Information Management System (WLIMS) and 1 x WCP and Welsh Patient Administration System.

IT Service Availability in 2023-24 to dates is 99.989%

Service Level Agreement (SLA) meetings = AMBER. Fourteen of twenty two 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.

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 July - August 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	14 th August 2023	Approved

Richards, Carys
21/09/2023 10:29:15

DIGITAL HEALTH AND CARE WALES

INTEGRATED ORGANISATIONAL PERFORMANCE REPORT JULY - AUGUST 2023

Richards, Carys
21/09/2023 10:29:15



INTRODUCTION

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

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

CONTENTS

- Organisational Scorecard
- Corporate Planning
- Financial Management
- People and Organisational Development
- Commercial Services
- Operational Service Management
- Clinical Assurance and Information Governance
- Governance and Quality
- Engagement



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

ORGANISATIONAL PERFORMANCE SCORE CARD

AMBER STATUS

Audit Actions - 1 out of 25 audit actions will not be completed by the target date. A formal request for an extension will be submitted to the October 2023 Audit and Assurance Committee as part of the Audit Action Log submission.

Quality Management System - The number of documents held in IMS which have not been reviewed to timescales is 61%. The Quality Team have emailed Directors with lists of documents which are out of date and escalated their concerns through the IMS Assurance Group to the Quality Regulatory Group.

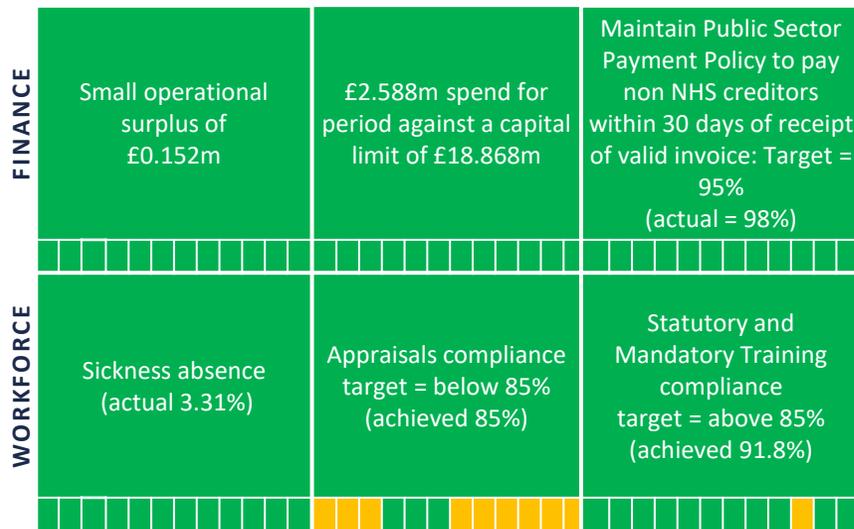
Contract Management - Two planned contract reviews were postponed due to availability, both rescheduled for September.

Operational Service Support – In July there were five Major IT Incidents affecting 14 services; no SLA breach. In August there were four Major IT Incidents reported, affecting four services. All resolved within SLA. IT Service Availability increased to 99.993% on the month.

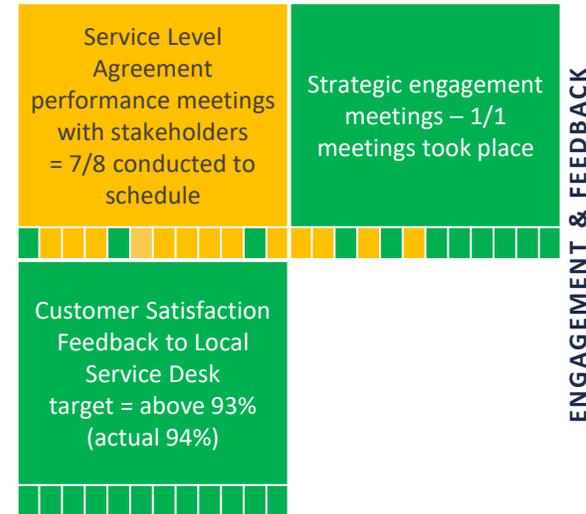
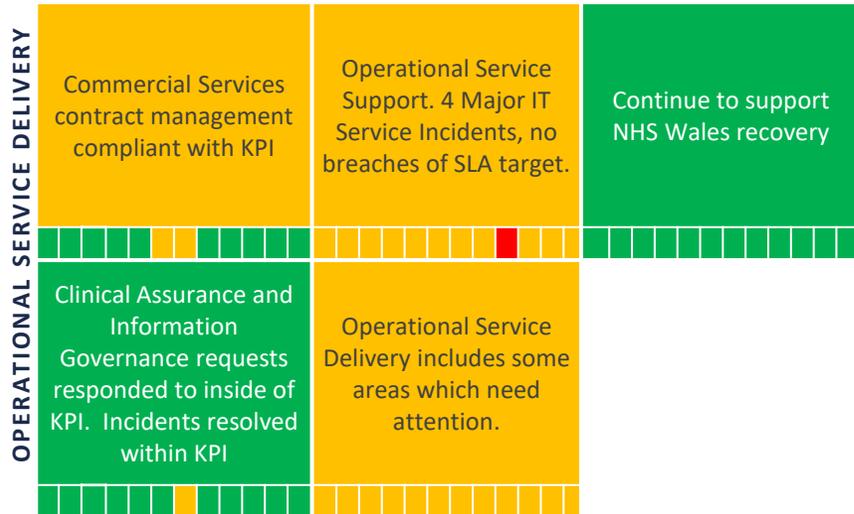
Operational Service Delivery – We have increased the regularity at which service are expected to be patched.

Service Level Agreement meetings – Seven meetings took place in July, seven were cancelled at the request of the Health Boards. The cancelled meetings have been rescheduled. Seven meetings took place in August. One was cancelled at the request of the Health Board and has been rescheduled.

FINANCE & WORKFORCE



GOVERNANCE & QUALITY



OPERATIONAL SERVICE DELIVERY

ENGAGEMENT & FEEDBACK

Previous 12 months RAG status are indicated in the smaller boxes right to left. 196/273



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



1 PROVIDE A PLATFORM for enabling digital transformation



Portfolios

- 1 Data Platform and Reference Services **NEW**
- 2 Open Architecture and Interoperability **NEW**
- 3 Protecting Patient Data
- 4 Sustainable and Secure Infrastructure

2 DELIVER high quality digital products and services



Portfolios

- 1 Public Health
- 2 Primary, Community and Mental Health
- 3 Planned Care
- 4 Urgent and Emergency Care **NEW**
- 5 Diagnostics
- 6 Medicines

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



Portfolios

- 1 Engaging with Users: Health and Care Professions
- 2 Engaging with Users: Patients and the Public

4 DRIVE better value and outcomes through innovation



Portfolios

- 1 Research and Innovation
- 2 Value from data



Enablers

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

- 1 People and Culture
- 2 Finance
- 3 Sustainability
- 4 Stakeholder Engagement
- 5 Quality and Safety
- 6 Governance, Performance and Assurance





Key

Funded
Resource not confirmed
Change control pending
Complete

Confidence in availability of funding or budget allocation
 Limited confidence in funding or budget allocation
The border shows the position at the start of the year.

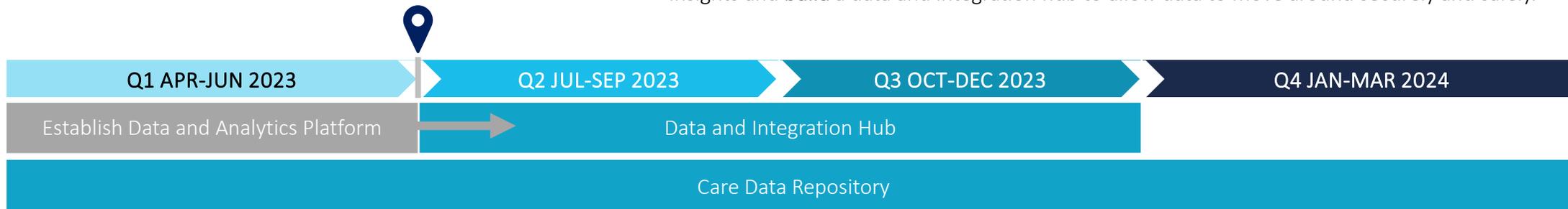


Portfolios	Qtr 1 Apr-Jun 2023	Qtr 2 Jul-Sep 2023	Qtr 3 Oct-Dec 2023	Qtr 4 Jan-Mar 2024	2024-2025	2025-2026
1.1 Data Platform and References Services	Care Data Repository					
	Establish Data and Analytics Platform	Data and integration Hub				
1.2 Open Architecture and Interoperability	API Roadmap	APIs into production				
	Platform and Product Roadmaps					
1.3 Protecting Patient Data	Data Promise Programme	National IG Governance Framework				
	National Audit System Award					
1.4 Sustainable and Secure Infrastructure	Cloud Plan and Business Case					
	Cyber Plan				Data Centre Move	
2.1 Public Health	Vaccine Transformation Discovery		Screening Programme Priorities			
2.2 Primary, Community and Mental Health	Digital Partner for Strategic Programme for Primary Care					
	Welsh Community Care Information System Strategic Review Recommendations				GP Systems Preferred Supplier(s)	
2.3 Planned Care	Welsh Patient Administration across North Wales	Welsh Patient Administration Health Board Boundary Change				
	Procure an All Wales Maternity system					
2.4 Urgent and Emergency Care	Eye Care Gateway Review and transition arrangements					
	Welsh Emergency system - review outputs of strategic review	Intensive Care System roll out				
2.5 Diagnostics	New laboratory management system readiness (LINC)				Start LINC roll out	Complete LINC roll out
	New radiology management system business case	New radiology management system readiness (RISP)			Start RISP roll out	Complete RISP roll out
2.6 Digital Medicines	Digital Medicines Transformation (DMTP) initial stages of: single medicines record, electronic transfer of prescriptions, hospital e-prescribing, patient access to meds				DMTP next stages	DMTP next stages
3.1 Health and Care Professions	Electronic requesting expanded across specialties					
	Future phases of Cancer Informatics Solution				Cancer Improvement Plan deliverables	
3.2 Patients and the Public	NHS Wales App launch GP services	Develop core functional services				Support and further development
	Onboarding and connection of third party suppliers with NHS Wales App core services					
4.1 Research and Innovation	Rules of engagement with industry partners		Review of academic research partnership and develop a catalogue of commitments			
4.2 Value from Data	Analysis and modelling for Strategic Programmes and Public Health					
	Information and Analytics Strategy			Implement 'Official Statistics' plan		
Ongoing priority analytics in Value in Health and Primary and Community						

Prepared by: 11/09/2023 10:29:13



PORTFOLIO 1.1: DATA PLATFORM AND REFERENCES SERVICES: We will **store** structured data in a Care Data Repository, **acquire** care data into a National Data and Analytics Platform and provide modern tools and technologies to support data driven insights and **build** a data and integration hub to allow data to move around securely and safely.



CURRENT PORTFOLIO STATUS:

The build of national data and analytics platform landing zone is complete. The care data repository is under development with minimum viable product due to be completed by end of Q2 2023-24.

DELIVERY:

The build of the Google Cloud platform is complete and is undergoing assurance. This is the underlying architecture that will enable the National Data & Analytics Platform and Care Data Repository.

The review of the Terminology Server infrastructure is complete. The Infrastructure design is under-review, and a plan is in development with a view to ensure ongoing alignment with the NDR.

IMPACT:

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

SITUATIONS OF NOTE:

A funding letter has been received from the Digital Priorities Investment Fund (DPIF) for 2023-24.

Richards, Cerys
21/09/2023 10:29:35



**PORTFOLIO 1.2:
OPEN ARCHITECTURE AND INTEROPERABILITY**

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



CURRENT PORTFOLIO STATUS:

The Application Programming Interfaces (API) modernisation programme is on track to deliver against an agreed roadmap. This includes key requirements for the Digital Medicines Transformation Programme (DMTP), commitments in the IMTP, and commitments through the NDR programme which form part of the response to the strategic architecture review.

DELIVERY:

The NDR Programme successfully led a go-live of the Google Apigee API management product that will host and manage the API endpoints including logging and security. Within DHCW, we have established a community of developers who are committed to API-first development and an inventory of existing APIs in service, which can be selected for modernisation and Google Apigee publication. This increased the number of beyond APIs in scope from those already prioritised.

IMPACT:

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

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

SITUATIONS OF NOTE:

None

Richards, Calfin
21/09/2023 10:29:15



**PORTFOLIO 1.3:
PROTECTING PATIENT DATA**

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



CURRENT PORTFOLIO STATUS:

The portfolio is on track to deliver this year. In particular, the IG team are working on a plan for the Data Coordination Board (DCB) Standards.

DELIVERY:

The National Intelligent Audit Solution (NIAS) has received approval to proceed with procurement and the third version of the IG Toolkit is now live.

IMPACT:

Patients can be assured their private data is protected.

SITUATIONS OF NOTE:

The Patient Safety Standards have received initial approval from Wales Information Standards Board (WISB) for adopting in Wales. DHCW have received a commissioning Letter from Welsh Government requesting that they make provisions for the implementation of Patient Safety Standards.

Wales Accord for Sharing Personal Information (WASPI) – WG sponsored consultation on making WASPI a Code of Conduct completed – Final report due in Autumn.

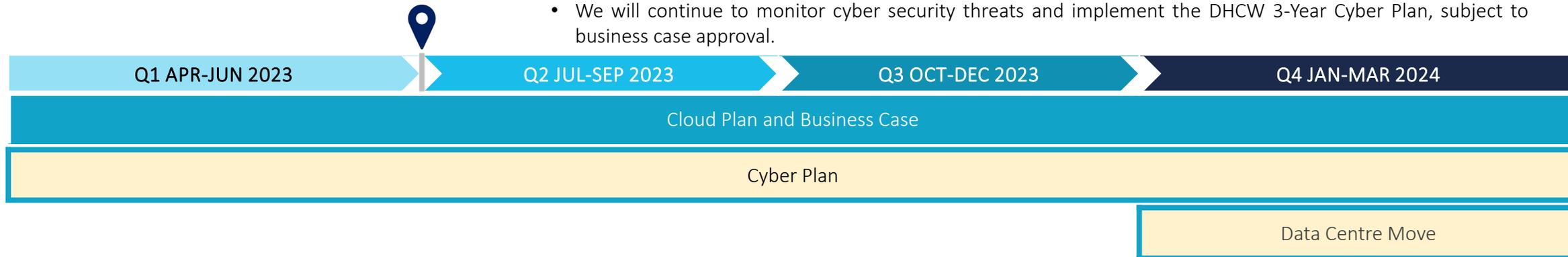
Richards Carys
21/09/2023 10:29:15



PORTFOLIO 1.4 : SUSTAINABLE AND SECURE INFRASTRUCTURE

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

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



CURRENT PORTFOLIO STATUS:

Cloud: The development of the cloud migration plan and associated business case is on-track, however, there have been some challenges in establishing a multi-cloud operational team. Third party resources have been used as an interim arrangement. **Cyber:** Many elements of the Cyber Security Plan are delayed awaiting approval of the Cyber Business Justification Case (BJC) by Welsh Government. **Data Centre:** The Data Centre move has encountered some supplier delay, however, the DHCW team have taken action which should recover the time. **Legacy replacement:** Work to upgrade legacy infrastructure is progressing and aligned with the data centre project work where possible to reduce impact to DHCW teams and services. A new contact centre and telephony solution for DHCW is broadly on track - Some minor supplier delays.

DELIVERY:

Cloud: A Cloud PC solution has been implemented. Around 90% of DHCW Core Server estate has been scanned by Cloud Migration Assessment Tools and initial cost estimates for operating in the cloud have been received. **Cyber:** A Domain Name Service (DNS) based security solution has been implemented. Preparations are underway for the replacement of one of the Security Monitoring Systems. **Data Centre Move:** The new data centre hall has been handed over from the supplier to DHCW and rack installation and cabling work in underway.

IMPACT:

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

SITUATIONS OF NOTE:

Many elements of the Cyber Security Plan are delayed awaiting approval of the Cyber Business Justification Case (BJC) by Welsh Government. Still awaiting approval from WG for funding to support Data Centre migration activity planned for this current financial year. Resource constraints have resulted in some delays to the cloud assessment work.



PORTFOLIO 2.1: PUBLIC HEALTH

The Public Health strategy in Wales aims to improve health and well-being and reduce health inequalities, particularly in light of challenges such as aging populations, long-term conditions, wealth disparities, and emerging threats such as antimicrobial resistance and infectious diseases.

- We will continue to deliver any planned Covid-19 requirements as they arise through the Welsh Immunisation System (WIS)
- We will undertake discovery work around digital options for the national Vaccine Transformation Programme.
- We will support Public Health Wales screening service requirements



CURRENT PORTFOLIO STATUS:

The WIS team have received the Autumn Booster requirements and are working on a delivery plan. Additionally, they have started pre-discovery work on the implications of the National Immunisation Framework (NIF) with key activities to begin late in July.

DELIVERY:

The WIS and CYPrIS applications have been separated so they now stand alone and can be developed independently, this is a key enabler for future modernisation. DHCW have procured Case Record Management (CRM) Licenses for Test Trace Protect (TTP).

IMPACT:

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

SITUATIONS OF NOTE:

There are resourcing challenges in the test area, in particular for the WIS and the Children and Young Persons Integration System (CYPrIS) which are impacting our ability to deliver the work plan. Mitigations are being made via call off of contract resource. The Autumn Booster requirements represent a departure from previous dose practice resulting in additional business analysis being required.

The Child Health team are undertaking a review of the options to stabilise the New-born Hearing & Bloodspot Screening system with Public Health Wales (PHW) should the system becomes unstable.

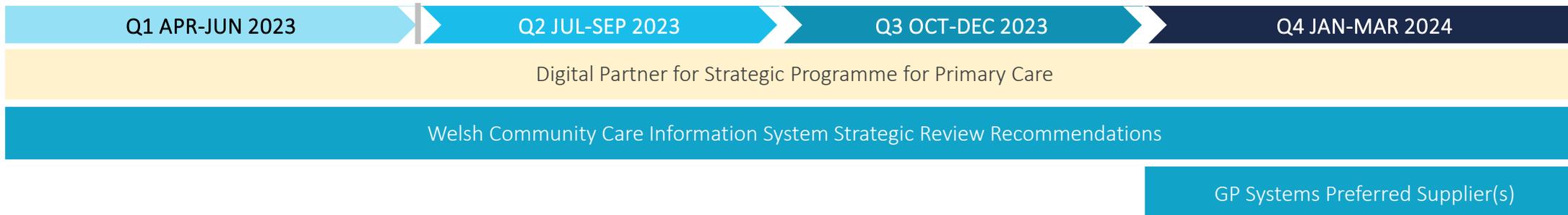
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21/09/2023 10:10:15



PORTFOLIO 2.2: PRIMARY, COMMUNITY AND MENTAL HEALTH

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

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



CURRENT PORTFOLIO STATUS:

For WCCIS there are delays to the pilot for Mental Health due to shortfalls in the development approach (enforced waterfall due to Advanced arrangement). A second iteration of development is required as functionality did not pass user acceptance testing. Insufficiently specific requirements and poor interpretation are areas for improvement on each side (WCCIS programme and Advanced) respectively. There is a small pathfinder pilot for the mobile version live in Hywel Dda University Health Board. In regards to the Primary Care GP Systems there are external supplier/partner dependencies which are resulting in some delays.

DELIVERY:

WCCIS has released of the version of the system with mobile capability. There have been two releases of the Care Director platform (v2.13/14). There has been ministerial engagement on the Outline Business Case for Phase 2 and discovery work has been initiated for Mental Health services and Allied Health Professions. The process by which practices will choose their next GP system has commenced and is on track.

IMPACT:

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

SITUATIONS OF NOTE:

The WCCIS team are waiting for Ministerial Advice to be formally issued (approval) for Phase 2 of the Outline Business Case after ministerial meeting which was held in June.

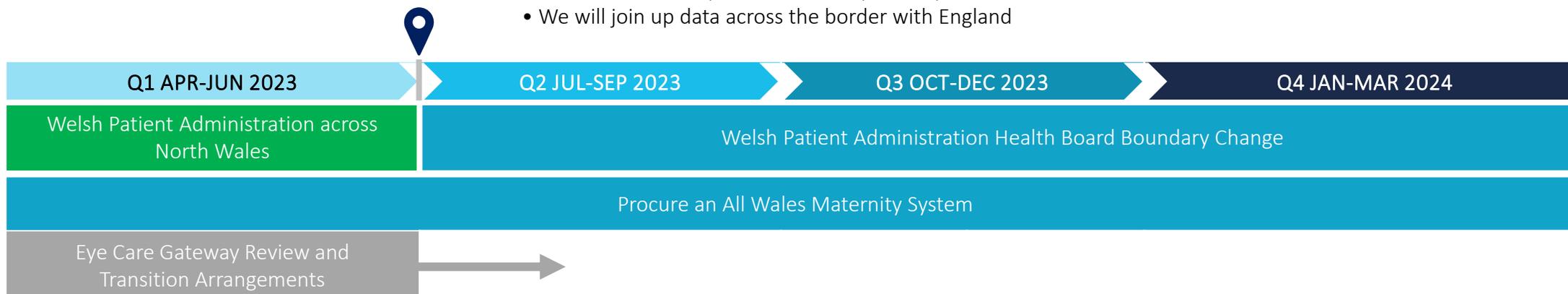
Richards, Cerys
21/09/2023 10:39:11



PORTFOLIO 2.3: PLANNED CARE

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

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



CURRENT PORTFOLIO STATUS:

The service are making preparations for the realignment of Cwm Taf Morgannwg and Swansea Bay Health Boards within the Welsh Patient Administration Service (WPAS) which are progressing to plan.

DELIVERY:

A consolidated instance of the Welsh Patient Administration System went live across the Betsi Cadwaladr University Health Board.

IMPACT:

This is now a single instance and has allowed common, consistent recording of patient administration data in secondary care across North Wales. This is positive for patient safety and communication across the region.

SITUATIONS OF NOTE:

The National Digital Eye Care Programme is transitioning to DHCW. A 'pause and review' is underway, at the request of Welsh Government, whilst we move this programme into DHCW. The revised plan will not be in place until end September 2023.

Richards, Caryl
21/09/2023 10:29:15



PORTFOLIO 2.4 – URGENT AND EMERGENCY CARE

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

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



CURRENT PORTFOLIO STATUS:

The Welsh Intensive Care Information System (WICIS) project is expecting a final software drop from the supplier in July (software received) to enable completion of User Acceptance Testing (UAT) and the start of Validation testing, in readiness for a Q3 go live in Aneurin Bevan. The WEDS project has received a supplier proposal to change the hosting arrangement for Swansea Bay University Health Board (SBU), the proposal is being considered by the health board.

DELIVERY:

Testing has been completed for stapling the 111 service to the Welsh Clinical Portal (WCP) for GP record.
A Strategic Review of the WEDS has been completed and presented to the National Project Board.

IMPACT:

Emergency care clinicians have access to the right information to help triage and direct patients to the right services. Intensive care clinicians will use less paper and have a better view of capacity and variation across Wales.

SITUATIONS OF NOTE:

There are ongoing discussions regarding the hosting and future direction of the WEDS project with active WEDS HBs. There is a funding shortfall for WICIS, caused by changes, principally, in Medication and Drug therapy module. Additionally, Laboratory Information Management System (LIMS) integration has delayed the project. The financial implications have led the project to request support from Welsh Government. The provision of a post event message from 111 or Out of Hours GP back to the patient’s GP is proving difficult as documentation regarding appropriate schemas yet to be sourced.

Board Report: Mission 2 – Portfolio 2.4 – Urgent and Emergency Care

Richards, Caryn
21/09/2023 16:29:14



PORTFOLIO 2.5: DIAGNOSTICS

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

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



CURRENT PORTFOLIO STATUS:

DHCW has executed a contractual change note (CCN) to extend the term of the legacy laboratory information system agreement until June 2030. The RISP has awarded a contract and an All-Wales deployment order has been signed with individual health board deployment orders being worked on by each Health Board.

DELIVERY:

The programme has reached an agreement on the contract termination for the laboratory information system with the supplier. The RISP full business case has been approved and the Board granted approval to award the contract in June.

IMPACT:

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

SITUATIONS OF NOTE:

The timescales are challenging for the laboratory information system. NHS Wales will need to minimize configuration changes as all deployments must be completed by August 2025. The scope and timelines for RISP are ambitious. This is the first time that both a picture archiving and communication system and a RIS system have been replaced at the same time, all health boards deployment must be completed by June 2025. Health boards and DHCW will need to align and protect resources across operational and digital teams.

Board Report: Mission 2 – Portfolio 2.5 - Diagnostics

Richards, Caryn
21/09/2023 16:29:14



PORTFOLIO 2.6: MEDICINES

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



CURRENT PORTFOLIO STATUS:

The DMTP project have progressed procurement activities for Electronic Prescribing and Medicines Administration (ePMA) and are supporting the NHS Wales Executive on the business case to reprocure a national Systemic Anti-Cancer Therapy (SACT) ePMA application. The first GP and community pharmacy sites to test EPS in a live environment have been confirmed. The Community Pharmacy System Innovation Fund (in partnership with Life Sciences Hub Wales) opened to enable potential suppliers to complete software development for EPS use. The project has received a letter of support from the General Practitioners Committee (GPC) Wales for accessing and sharing GP medicines and allergies data via the SMR. The NHS Wales App supplier has started discovery work with the public and pharmacies on requirements for recording a nominated community pharmacy to receive GP prescriptions digitally and to send push notifications informing patients that their prescription has been dispensed and is ready to collect from their nominated community pharmacy.

DELIVERY:

A Gateway review has been completed to independently assure portfolio governance of DMTP. The EPS technical proof of concept (PoC) has commenced in the test environment. Two health boards have published their Invitation To Tender (ITT) notices for ePMA and a national supplier event has been held with three suppliers on the framework, health board and trust colleagues. A learning event was held by Swansea Bay UHB on 25th May to share lessons and experiences from their e-prescribing pathfinder. The SMR PoC has been completed with NDR to test that medicines information can be shared between the GP record and SMR. The SMR design has been finalised and signed off by Technical Design Authority. The Welsh Language Technical group has been established to optimise the use of Welsh for medicines information in the NHS Wales App.

IMPACT:

Making the prescribing, dispensing and administration of medicines everywhere in Wales, easier, safer, more efficient and effective through digital. Enabling modernisation of medicines management, reducing dispensing errors and improving outcomes.

SITUATIONS OF NOTE:

Delivery of Phase 1 national APIs and integrations and the SMR platform are a go live dependency for health boards and trust procured secondary care ePMAs.



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

PORTFOLIO 3.1: ENGAGING WITH USERS: HEALTH AND CARE PROFESSIONALS

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

- We will expand electronic test requesting.
- We will add new forms to our Nursing Care Record.
- We will develop future phases of the Cancer solution delivered in the Welsh Clinical Portal.
- We will continue to work with NHS Wales partners as hosts of the Microsoft Centre of Excellence.



CURRENT PORTFOLIO STATUS:

The WCP is continuing to expand to plan in usage and functionality. The DHCW Centre of Excellence (CoE) programme successfully completed in March, 2023 and the team are continuing to work to maximise the value from Microsoft 365.

DELIVERY:

In WCP, Cwm Taf Radiology Department has placed the first radiology request from a GP Practice using Primary Care specific reference data. Palliative Care development is near complete. The WCP have almost completed the Phlebotomy module development ready for rollout. They have developed and tested a cardiology form through clinical engagement.

The DHCW Centre of Excellence (CoE) team are working across NHS Wales on a range of projects, including 111, National Trauma Network, Lymphedema and Diabetes. They are running training and engagement events to drive usage and adoption, and have launched the Teams Telephony service

IMPACT:

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

SITUATIONS OF NOTE:

There are competing priorities within the Cancer programme relating to WCP which need to be resolved.



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

PORTFOLIO 3.2: ENGAGING WITH USERS: PATIENTS AND THE PUBLIC

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



CURRENT PORTFOLIO STATUS:

The 'Public Beta' and early adopter activity of the NHS Wales App is making solid progress. We have planned for rollout in phases to GP practices which will enable wider adoption, supported by a public communications campaign. Planning is also in progress for the transition of the App to core / live service.

DELIVERY:

The NHS Wales App was launched via Public Beta soft launch in April 2023. We have completed the development of a GP search function, API activity for nominating a preferred pharmacy, initial supplier integration testing, google analytics dashboard, and links to other health and care services. We have established a Change Advisory Board and, agreed and implemented the service support model. We have procured software tools to support technical delivery and user feedback. We have migrated our Azure subscriptions to new contractual arrangements. The delivery partner contract value extension has been approved in order to continue support and delivery of the NHS Wales App during transition.

IMPACT:

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

SITUATIONS OF NOTE:

Additional discovery / development from October onwards, and the pace and scale of new feature delivery in 2024 will depend on the level of future funding.

Richards, S
21/09/2023 10:29 AM



PORTFOLIO 4.1: RESEARCH AND INNOVATION

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



CURRENT PORTFOLIO STATUS:

DHCW have secured funding and a secondment agreement with Welsh Government & Health and Care Research Wales (HCRW) to scope and develop a business case for the Find, Recruit and Follow-up service. The team is exploring national clinical research studies to identify support that can be offered, including supporting delivery of data for Symplify and Ascend Plus with HCRW, academic partner and commercial sponsor. They are contributing to national and DHCW specific Intellectual Property (IP) policy. They have developed a draft costing template which has been agreed at the Operational and Engagement Group and for submitted to the Exec Team for review. DHCW is continuing to monitor ongoing studies to understand the value added and impact. DHCW is supporting proposals for nursing research fellowships.

DELIVERY:

The approved R&I governance process was presented to the Digital Governance and Safety committee (DGS). The benefit of this is raising awareness of Research & Innovation (R&I) and ensuring correct processes are in place and to provide the committee with additional assurance. We have presented at MediWales Connects and Bevan Commission to raise awareness of the importance of R&I.

IMPACT:

Processing, analysis and application of data to solve real health problems and ultimately derive value from that data.

SITUATIONS OF NOTE:

HCRW have advised that they will fund a proportion of the R&I team in 24/25. The funding for R&I is time limited and capacity within the team is limited. There is a need to ensure DHCW and National Data Resource (NDR) Governance Processes for R&I requests, projects and collaborations are aligned. Ongoing support is required from the DHCW Board to promote R&I within the organisation and nationally.

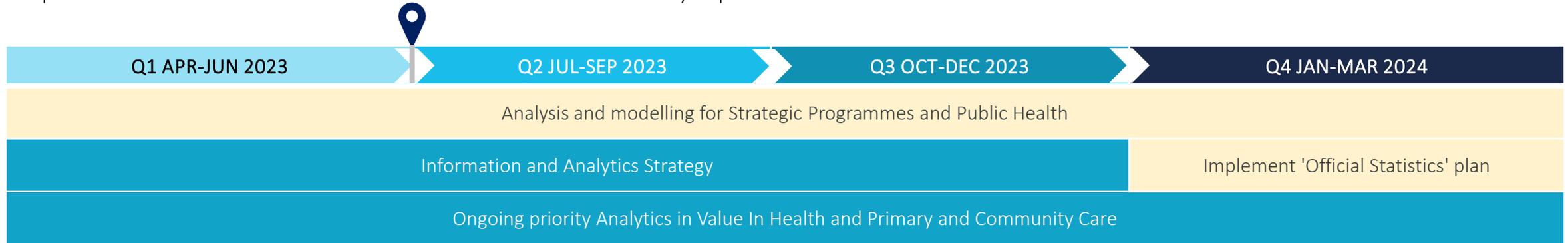
Board Report: Mission 4 – Portfolio 4.1 – Research and Innovation (R&I)

Richards Case
21/09/2023 10:19



PORTFOLIO 4.2: VALUE FROM DATA

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



CURRENT PORTFOLIO STATUS:

The team has engaged with key stakeholders to scope, plan and develop a first draft of the information and analytics strategy. They are developing and implementing new dashboards and continuing to augment the Primary Care Information Portal (PCIP) with new functionality.

DELIVERY:

The team have developed a Vascular Dashboard and STAVES (copyrighted name for the visuals created by St'Anna University) visualisations and are working to develop Emergency & Unplanned Care and Benchmarking dashboards. The Value in Health team were shortlisted for the Health Service Journal "Driving Change Through Data and Analytics" award. They have made a number of updates to the Primary Care Information Portal, including the Access Standards year-end position and annual reports relating to Military Veterans. Audit+ modules have been deployed to the GMR clinical systems to support the QIF (Quality Improvement Framework) 2023/2023 Unhealthy Behaviours and the Green inhalers projects. Individuals and teams have attended conferences/awards ceremonies to promote the work and highlight value from data, including a presenting on the 'Last Year of Life Dashboard' at International Conference on Integrated Care 23 Conference in Antwerp; 'Data to Innovate' at MediWales; 'Using Data to Inform and Support Prudent Health and Integrated Care' at Bevan Commission; 'The future of healthcare: A new foundation for improving patient outcomes' at ESRIUK.

IMPACT:

Data gets processed, analysed, communicated and applied to real health service problems, allowing informed decision making and actions to be taken which ultimately bring value.

SITUATIONS OF NOTE:

Uncertainty around the governance process for vaccination work will be addressed through the WG National Immunisation Framework (NIF).

Board Report: Mission 4 – Portfolio 4.2 – Value from Data



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

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

- Revenue – Operational underspend as per forecast of £0.152m after applying the savings target profile.
- Capital – Current Spend of £2.588m against CRL of £18.868m.
- 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 £0.152m.
Remain within Capital Resource Limit (To ensure net Capital Spend does not exceed the Capital Resource Limit CRL)		£2.588m spend for period against a capital limit of £18.868m
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 31/08 5.655m

EXECUTIVE SUMMARY:

- **Financial Challenge:** As part of the NHS Wales Finance Improvement exercise DHCW has identified an initial £2.488m identified an initial £2.488m (with £0.726m being sourced via core budgets with the remaining balance via ring fenced allocations). Additional core savings targets have been deployed in line with WG advice pending formal confirmation and will now form part of the overall saving requirement and reported within established monitoring arrangements.
- **Forecast:** DHCW is forecasting achievement of all financial targets, however focus continues upon recruitment and payroll run rates as this could materially impact the final position as pay underspend continues to exceed the planned vacancy factor, supplemental third party capacity continues to be addressed via the strategic resourcing group.
- **Savings:** DHCW is currently forecasting achievement of the total revised savings core savings target of £4.978m (excluding £1.762m ring fenced candidates DPIF/Primary Care IM&T and COVID yet to be approved).
- **COVID:** The forecast decrease in vaccine scheduling volumes and system development activity will support the proposed return of funding to WG as part of the Financial Improvement exercise.
- **Capital** is underspent by £0.072m as a consequence of small variances in Digital Investment spend and additional VAT recovery obtained. LIMS funding has been increased with an additional £5.658m for 2023/24 to support the recently approved contract extension.

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21/09/2023 16:09



SICKNESS ABSENCE

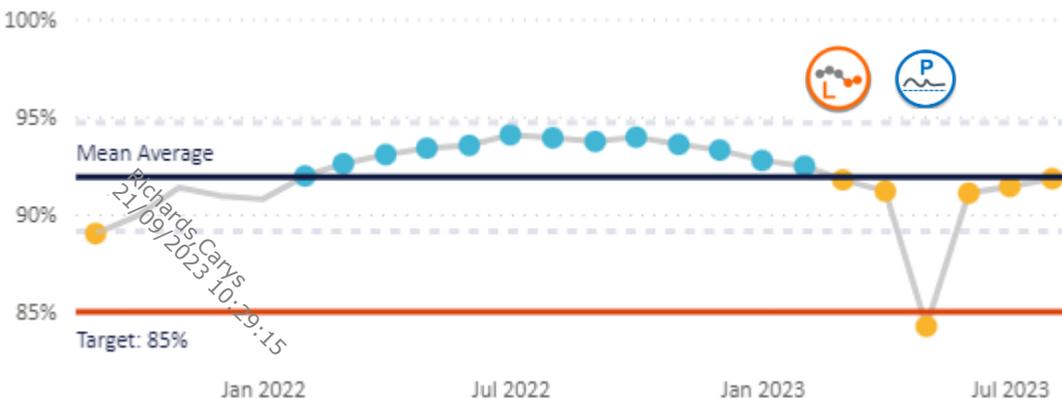


Overall sickness absence - 3.31%, which is a slight increase of 0.37% from last month.

Long term sickness – 2.02% increased by 0.28% from last month.

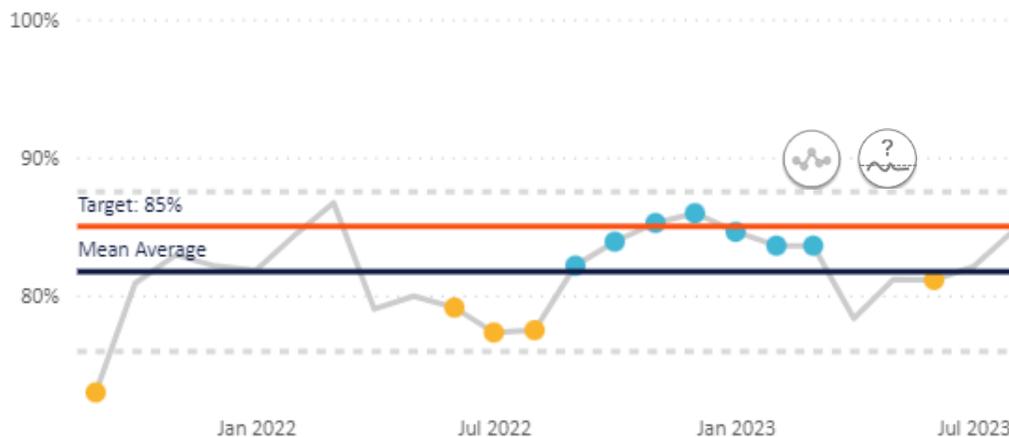
Short term sickness - 1.29% increase of 0.09% from last month.

STATUTORY AND MANDATORY TRAINING



Statutory and Mandatory Training is 91.8% an increase of 0.4% from last month. It is above the Welsh Government target of 85% for NHS Wales.

APPRAISALS



Appraisal completion rate is 85%, an increase of 3% since previous month. This is meeting the Welsh Government target of 85%

TURNOVER



Turnover is 8.05%, a slight increase of 0.17% from last month.

VARIATION



Special Cause Concerning variation



Special Cause Improving variation



Common Cause

ASSURANCE



Consistently fail target



Consistently hit target



Hit and miss target subject to random



Target



Average



Process Limits



The following procurement contracts will be presented to the DHCW Board for approval, as noted in the schedule.

TITLE	ALL WALES / DHCW INTERNAL	OVERVIEW OF THE SCOPE	INDICATIVE CONTRACT VALUE	INDICATIVE TERM (YEARS)	CONTRACT START DATE	SHA BOARD DATE	CURRENT STATUS
NetBackup and Backup Exec	DHCW	The software provides backup and restore functionalities for server infrastructure, both physical and virtual across both Data Centres.	£1.1m	3	31/07/2023	27/07/2023	Approved at July SHA Board
LIMS Replacement Solution	All Wales	Following Termination of LINC Agreement, a replacement contract to ensure continuity of service for LIMS services across NHS Wales	£21m	5	29/06/2025	27/07/2023	Approved at July SHA Board
National Intelligent Integrated Audit Tool	All Wales	Provision of a specialised software product to audit data access across all Welsh Clinical Systems	£975k	3	23/11/2023	28/09/2023	Renewal of existing agreement. Renewal to be made in accordance with PCR15 Reg 32(5)(b) and (6).
Microsoft License Agreement Reseller (LAR)	All Wales	A contract to secure a sole supplier re-seller for all Microsoft Products and Services used across the NHS in Wales.	£300m	4+2	01/04/2023	March 2024	Renewal of the existing P159.06
Medicines Information Solution	All Wales	Provision of a central pharmacy database provided for/by the All-Wales Library Service.	£1.2m	2+1	01/09/2024	July 2024	In planning
Systematic Anti-Cancer Therapy (SACT) System	All Wales	An All-Wales agreement for the provision of an Anti-Cancer Therapy information management software solution as a managed service.	£5m	5+2	01/10/2024	September 2024	NEW: Procurement planning stage-defining a route to market
Data Engine	DHCW Internal	Digital Health and Care Wales is seeking to procure technical capability to facilitate access to structured clinical data using open standards, and a mechanism for capturing data as a Clinical Data Engine (CDE). This forms a key building block to the open architecture approach as described as a deliverable of the National Data Resource Programme.	£15m	3+1+1	TBC	TBC	Procurement planning stage-defining a route to market. Currently drafting an OBC to secure funding. (being undertaken by external 3rd Party Inform Solutions



- Incident and Service Request Resolution Targets were achieved in month for both the Critical and Standard Service Groups for National Services.
- There were nine Major IT Incidents across July (5) and August (4). The four in August, affected 4 services including one local issue affecting WRIS in Swansea Bay University Health Board. The five in July, affected 14 services, one was due to a power related network issue for Aneurin Bevan University Health Board impacting connectivity to some DHCW services. All were resolved within the SLA target time.
- The Service Desk abandoned call rates rose to 4.6% in August. The increase comes as a result of a Major IT Incident relating to PSBA, and issues with the Junior Doctors rotation during the month. Despite this, the Customer Satisfaction scores are very positive.

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PERFORMANCE AREA	METRIC	AUG-22	SEPT-22	OCT-22	NOV-22	DEC-22	JAN-23	FEB-23	MAR-23	APR-23	MAY-23	JUN-23	JUL-23	AUG-23
National Services - Critical (Excluding GP Services)	Score denotes % of Incidents resolved within the SLA target *(Resolved total can include Incidents logged outside the month)	1204 (96%)	1197 (97%)	1110 (97%)	1378 (97%)	1115 (91%)	1156 (92%)	1079 (98%)	1449 (98%)	1321 (97%)	1221 (96%)	1310 (97%)	1174 (97%)	1265 (97%)
	Score denotes % of Service Requests resolved within the SLA target *(Resolved total can include SRs logged outside the month)	5643 (98%)	5701 (98%)	5401 (99%)	5688 (98%)	4860 (98%)	5089 (98%)	4855 (98%)	5048 (98%)	4566 (98%)	4980 (98%)	4916 (98%)	4924 (98%)	5254 (98%)
National Services – Standard	Score denotes % of Incidents resolved within the SLA target *(Resolved total can include Incidents logged outside the month)	453 (98%)	330 (98%)	438 (99%)	409 (96%)	298 (97%)	412 (94%)	675 (99%)	469 (99%)	314 (99%)	386 (100%)	367 (98%)	348 (99%)	407 (95%)
	Score denotes % of Service Requests resolved within the SLA target *(Resolved total can include SRs logged outside the month)	1384 (97%)	1388 (99%)	1648 (98%)	1600 (98%)	1280 (98%)	1401 (98%)	1407 (98%)	1388 (98%)	1047 (99%)	1211 (98%)	1203 (97%)	1178 (98%)	1397 (98%)
Desktop Support Service - Critical	Total Incidents Resolved (% resolved within timescale)	1258 (95%)	1136 (95%)	1291 (94%)	1195 (93%)	992 (94%)	1250 (96%)	1235 (95%)	1315 (94%)	1435 (95%)	1667 (94%)	1680 (94%)	1677 (96%)	1714 (96%)
	Total Service Requests Resolved (% resolved within timescale)	848 (96%)	1018 (97%)	1056 (97%)	1053 (96%)	789 (94%)	840 (95%)	800 (96%)	1078 (94%)	989 (95%)	1166 (94%)	1034 (94%)	1091 (95%)	946 (94%)

PERFORMANCE AREA	METRIC	AUG-22	SEPT-22	OCT-22	NOV-22	DEC-22	JAN-23	FEB-23	MAR-23	APR-23	MAY-23	JUN-23	JUL-23	AUG-23
National GP Services - Critical	Calls Logged as Incidents (% resolved within timescale)	681 (100%)	757 (100%)	863 (99%)	949 (100%)	627 (98%)	765 (100%)	800 (99%)	1143 (100%)	1139 (99%)	970 (100%)	729 (99%)	742 (99%)	TBC
	Calls Logged as Service Requests (% resolved within timescale)	279 (99%)	378 (99%)	331 (99%)	308 (100%)	260 (98%)	382 (100%)	299 (100%)	573 (100%)	658 (100%)	615 (99%)	745 (100%)	649 (99%)	TBC

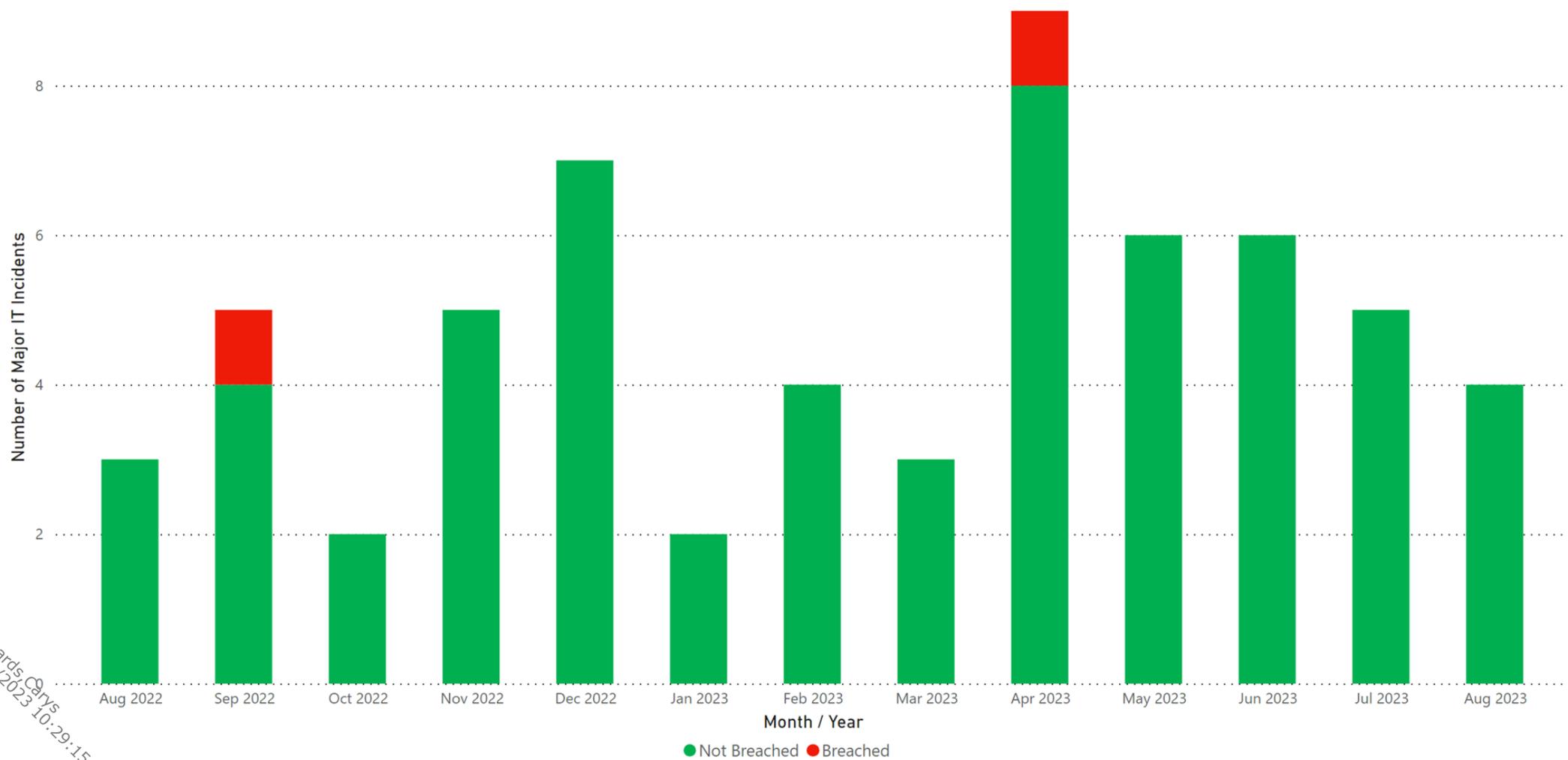
Desktop Support - minor reduction in Service Requests performance in August due to lower than usual staffing levels in August

National Service Standard – Performance dropped due to 12 Incidents for the NHS Wales App failing to achieve target. If a pattern of failure develops the service will be added to OSB monitoring.

Other points to note on next slide



OPERATIONAL PERFORMANCE | MAJOR IT INCIDENTS



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IT Service Availability in August 2023

was **99.993%**

with **3** MIs totalling **218** minutes of disruption across **3** services

IT Service Availability in 2023-24 to date is

99.989% with

20 MIs totalling **38** instances of

disruption across **21** Services

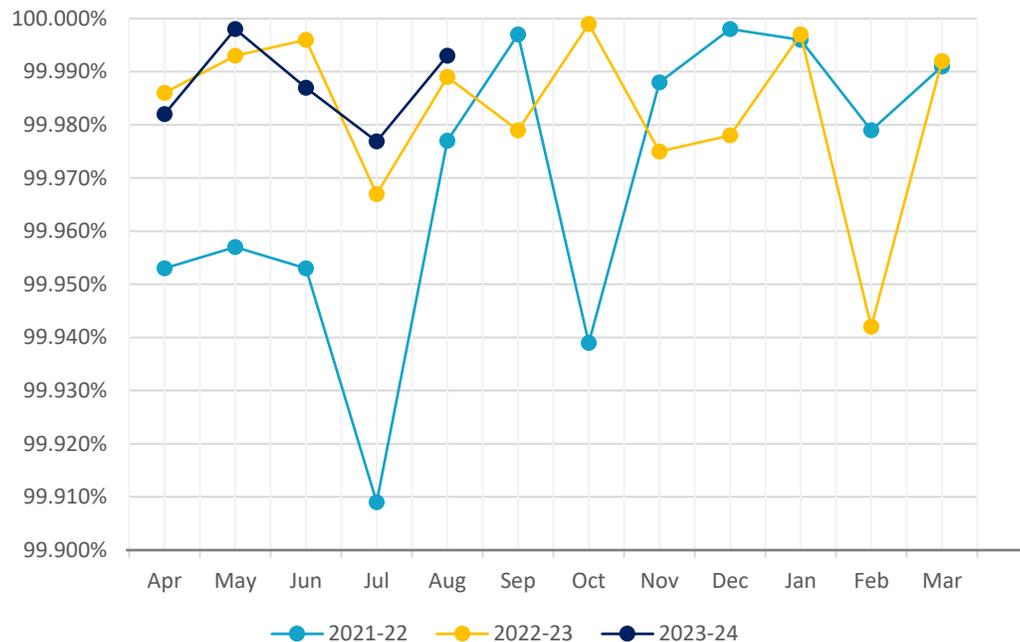
SUMMARY:

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

- The first is tracking the 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.
- 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), Multiple impacts with staggered restoration, scheduled maintenance windows.

DHCW Service Availability Annual Comparison



TARGET AVAILABILITY IS 99.90%

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



SERVICE(S) AFFECTED	WELSH CLINICAL PORTAL (WCP) WELSH NURSING CARE RECORD (WNCR) DCS HOSTING & STORAGE	SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8567190 PROBLEM REF 29026
DATE/TIME LOGGED	04/07/2023 10:37	DATE/TIME RESOLVED	04/07/2023 12:17	Time to resolution: 100 Minutes Incident did not breach the 8 hour SLA target
DESCRIPTION	Users in Swansea Bay University Health Board (SBUHB) reported that the WNCR had stopped working. Slowness was also reported for the WCP. The server endpoints were redirected to the secondary site which restored service. A Root Cause Analysis indicates Central Processing Unit (CPU) exhaustion caused slowness, however the cause of CPU exhaustion has yet to be identified. This resulted in 4 calls being received, intermittent slowness and connectivity issues for 100 minutes.			
SERVICE(S) AFFECTED	DESKTOP SUPPORT WELSH DEMOGRAPHICS SERVICE (WDS) SERVER SUPPORT SERVICE	SERVICE LEVEL: INFRASTRUCTURE CRITICAL	P2	INCIDENT REF 8604091 PROBLEM REF 29127
DATE/TIME LOGGED	20/07/2023 07:42	DATE/TIME RESOLVED	20/07/2023 11:00	Time to resolution: 198 Minutes Incident did not breach the 8 hour SLA target
DESCRIPTION	Following a loss of power to a BT point of presence in Aneurin Bevan University Health Board's (ABUHB) Data Centre, DHCW internal users reported the software used to provide remote support to GP Practices by DHCW staff could not be launched. Further reports were then received that the following systems were inaccessible/unavailable: GP Remote PC, Client Services Support Terminal Servers, WiFi National Imaging Academy and Health Education and Improvement Wales (HEIW), as well as the scan to email functionality on supported copiers. When the impacted circuit was restored, the issues were resolved. This resulted in 39 calls being received and systems unavailable/impacted for 198 minutes. The Internal business impact was that no remote support was available during this period. The impact to the WDS was no feeds from the National Health Applications and Infrastructure Services (NHAIS). The NHAIS system is legacy and not designed to be highly available. The root cause of the WiFi issues were down to incorrect authentication timeouts on the WiFi equipment, which resulted in the system not using the alternative authentication system, at the national data centres. Options to improve resilience are being considered.			
SERVICE(S) AFFECTED	GP SYSTEMS SUPPLIER	SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF INC0132339/CS1188380 (EMIS Service Desk) PROBLEM REF
DATE/TIME LOGGED	21/07/2023 14:32	DATE/TIME RESOLVED	21/07/2023 14:59	Time to resolution: 27 Minutes Incident did not breach the 8 hour SLA target
DESCRIPTION	Users on one of the patch domains (69 practices) were unable to login or use the system. They were experiencing an error message 'Network Error, cannot connect to the Application Server' as application servers were hitting limitations of memory usage. When the environment was patched, the scheduler wasn't patched to the same version. This caused the scheduler service to experience errors when a scheduled job began to run. This resulted in the searches not processing as expected and caused the application tier to reach limitation. A rolling reboot was performed on the application tier, which caused memory consumption to subside as a mitigation. The scheduler was patched to the same patch version as the environment as a permanent resolution. The patching is now screen recorded for review and continuity purposes. Patching runbook updated and refresher training provided to all relevant engineers.			



SERVICE(S) AFFECTED	WELSH CLINICAL PORTAL (WCP), WELSH REPORTS RESULTS SERVICE (WRRS) DCS CITRIX, GP TEST REQUESTING (GPTR), SERVICEPOINT, ACTIONPOINT NATIONAL OPERATING DATABASES (NOD)	SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8612809 PROBLEM REF 29147
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DATE/TIME LOGGED 24/07/2023 14:49 **DATE/TIME RESOLVED** 24/07/2023 15:00

Time to resolution: 11 Minutes

Incident **did not breach** the 8 hour SLA target

DESCRIPTION Users in Velindre Cancer Centre reported that the WCP was not loading. They were able to log on, however the system was not responding. Investigations identified that a Change implemented as part of planned work, resulted in issues around connectivity to Services, however Services restored themselves. Further investigations then identified what appears to be a known issue. Change implementation work has been replanned due to these issues.
This incident resulted in 23 calls being logged across 2 Problem Records, and varying levels of system impact for 11 minutes.

SERVICE(S) AFFECTED	WELSH CLINICAL PORTAL (WCP)	SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8620063 PROBLEM REF 29165
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DATE/TIME LOGGED 27/07/2023 11:33 **DATE/TIME RESOLVED** 27/07/2023 13:55

Time to resolution: 142 Minutes
Incident **did not breach** the 8 hour SLA target

DESCRIPTION Users in Cwm Taf reported that the WCP was not responding in various browsers. Investigations identified that a Change was made to re-point endpoints to new Welsh Patient Administration System (WPAS) servers ahead of a planned failover. Whilst the change was initially successful, the server that the new endpoint pointed to was under high CPU load and throttling connections leading to timeouts in WCP. The change was reverted, and the endpoint was brought back up on servers that had the previous configuration. This resulted in 5 calls being received and WCP unable to draw data from WPAS impacting some functionality for 142 minutes.

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SERVICE(S) AFFECTED	MASTER PATIENT INDEX (MPI)	SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8679095 PROBLEM REF 29279
DATE/TIME LOGGED	25/08/2023 11:28	DATE/TIME RESOLVED	25/08/2023 12:50	Time to resolution: 82 Minutes
DESCRIPTION	<p>MPI Inspector (web dashboard) was reported to be unavailable at DHCW, Cardiff & Vale, Cwm Taf Morgannwg and Velindre health boards. This was caused by Data Centre Services (DCS) Structured Query Language (SQL) server patching change.</p> <p>This is a monthly standard change, which usually does not cause more than a few seconds of downtime. The process called for putting the host/physical server into maintenance mode, this did not take affect properly, prior to reboot (which some Virtual Machines (VM) were running on). Note: There is normally a small amount of downtime as the databases failed over to the other node automatically within seconds. Review of timing synchronisation to be carried out with DCS SQL team, and identification of any additional check which may need to be built into the process.</p>			

SERVICE(S) AFFECTED	WELSH LABORATORY INFORMATION MANAGEMENT SYSTEM (WLIMS)	SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8635542 PROBLEM REF 29200
DATE/TIME LOGGED	03/08/2023 13:09	DATE/TIME RESOLVED	03/08/2023 15:03	Time to resolution: 114 Minutes
DESCRIPTION	<p>Pathology users in Aneurin Bevan University Health Board reported receiving electronic test request orders in to WLIMS with no tests attached.</p> <p>The WLIMS teams investigated and found that a Change had been placed into production around an hour prior to reports of blank orders. The WLIMS team raised a problem to track resolution activity, the Change was rolled back and affected episodes were replayed, to allow for the correct test requests to be received. This incident saw no clinical impact or patient harm. The patch had been tested through UAT environment, by DHCW and no issues were observed prior to application in production. The supplier had advised patch would only affect blood transfusion, however, issues have been seen in other disciplines in the production environment.</p> <p>This Incident resulted in a single P2 call being raised and a reported service downtime of 114 Minutes.</p>			

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SERVICE(S) AFFECTED	WELSH CLINICAL PORTAL (WCP) WELSH PATIENT ADMINISTRATION SYSTEM (WPAS)	SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8630001 PROBLEM REF 29204
DATE/TIME LOGGED	01/08/2023 15:13	DATE/TIME RESOLVED	01/08/2023 16:26	Time to resolution: 44 Minutes Incident did not breach the 8 hour SLA target
DESCRIPTION	<p>This affected Swansea Bay University Health Board only. The WPAS integration server for Data Centre One was under performing due to server resource constraints resulting in intermittent degradation of service for WCP. On the 3rd August 23, the WCP support team reointed WCP services back to WPAS integration in Data Centre Two where the server had suitable resources whilst additional resources were added to the CDC side.</p> <p>Note - during PAS unavailability WCP reverts to read-only and pulls patient demographics from the MPI.</p> <p>This Major Incident resulted in a single P2 call being received and 44 Minutes of service degradation.</p>			

SERVICE(S) AFFECTED	WELSH RADIOLOGY INFORMATION SYSTEM^ (WRIS)	SERVICE LEVEL: CLINICAL CRITICAL	P1	INCIDENT REF 8629111 PROBLEM REF
DATE/TIME LOGGED	01/08/2023 12:26	DATE/TIME RESOLVED	01/08/2023 13:11	Time to resolution: 45 Minutes Incident did not breach the 4 hour SLA target
DESCRIPTION	<p>Users in Swansea Bay University Health Board (SBUHB) reported that access to the WRIS client was unavailable across all sites. The WRIS Team attempted to connect to the client, however they identified that the webserver and database server were both offline. SBUHB Local IT reported that they were experiencing power issues at the local Data Centre, causing unscheduled server restarts. It was observed that some services did not automatically restart on the database server host, upon reboot even though they are configured to. The WRIS Team asked Local IT to restart the database host to ensure all services restarted correctly. Once the database host server was restarted the WRIS Client was accessible to users.</p> <p>The Radiology department will follow up with Local IT as to the root cause of the outage and will feedback to the WRIS team when possible.</p> <p>This Major Incident resulted in a single P1 call being received and 45 Minutes of service downtime.</p>			

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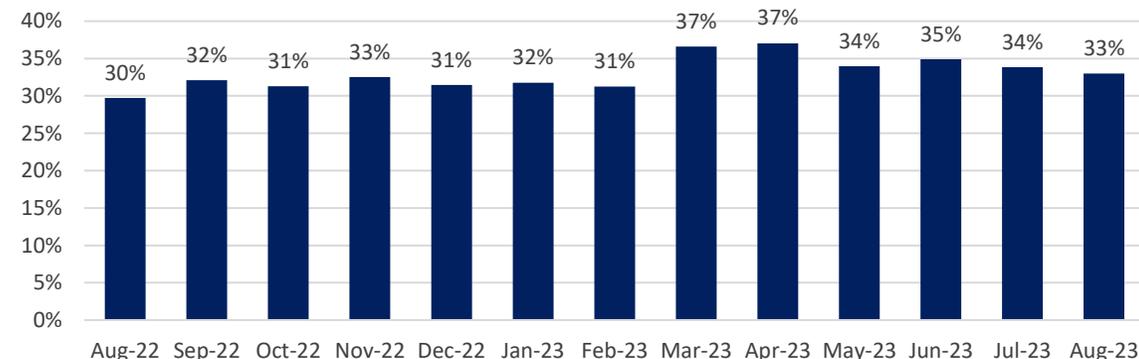


	AUG-22	SEP-22	OCT-22	NOV-22	DEC-22	JAN-23	FEB-23	MAR-23	APR-23	MAY-23	JUN-23	JUL-23	AUG-23
Total Number of calls logged	17688	19613	21152	21735	14617	17632	17505	19580	16077	17890	15805	17170	20335
% All Abandoned Calls (Threshold 4%)	4.0%	4.1%	7.1%	6.6%	5.3%	3.5%	7.5%	3.8%	4.2%	2.4%	2%	2.2%	4.6%
Average Speed of Answer (Seconds) (Target 30 sec)	10.5	10.5	11.5	12.5	13.5	10.0	19.0	11.5	6.0	8.5	7.5	7.5	10.5

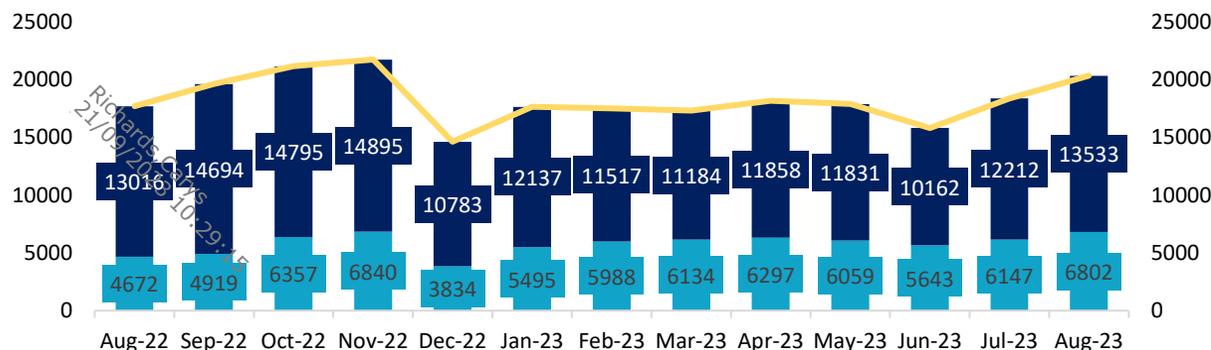
SUMMARY:

- The number of Incidents and Service Requests increased from July with 6802 Incidents and 13,533 Service requests received. Email was again our most popular communication channel for customers to log calls with us, followed by calls escalated from the Local Service Desks.
- We received 5414 telephone calls during August and had a 4.6% Abandoned Calls rate.
- The increase in our abandoned calls comes as a result of a Major IT Incident relating to PSBA, and issues with the Junior Doctors rotation during the month.
- If these major IT incidents had not occurred our abandoned calls would have been on par with previous months at approximately 2.5%. Average call answer times were 10.5 seconds.
- Customer Satisfaction remains at 94%, with our Staff Satisfaction at 93%. First Line Fix Rates were steady at 33%.

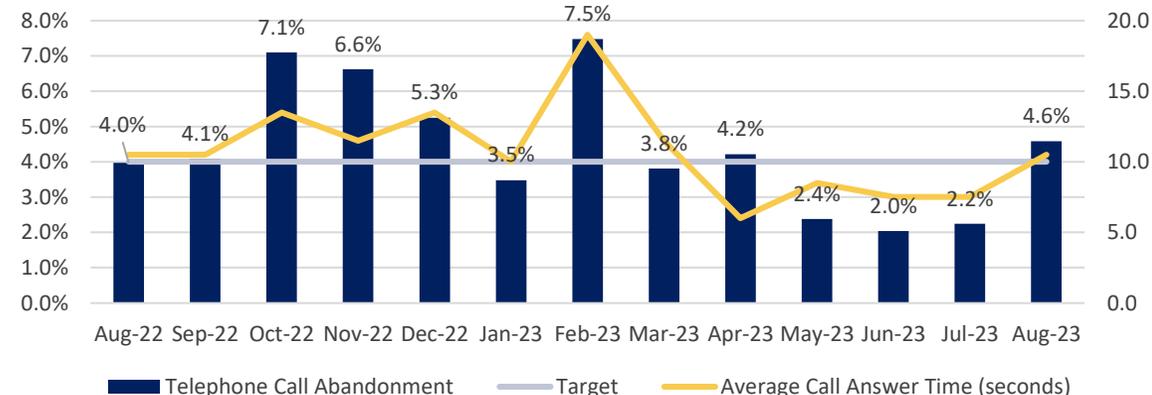
First Line Fix Rate



Incidents and Service Requests Received



Telephone Abandoned Calls



Number of Service Requests Received | Number of Incidents Received



CLINICAL INCIDENTS:

There are three incident investigations underway, one incident was closed in July. There have been no new incidents logged since March 23.

INFORMATION GOVERNANCE:

- In July 2023,
 - DHCW received five Freedom of Information (FOI) Act requests, three Subject Access Requests (SAR) and one other official request.
 - Three FOIs and three SARs were responded to in July 2023.
- In August 2023,
 - In August 2023, DHCW received two Freedom of Information (FOI) Act requests.
 - Three FOIs and one official request were responded to in August 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.



NUMBER	RAG	STATUS
18	■	Complete
6	■	The action is on target for completion by the agreed date
1	■	The action is not on target for completion by the agreed date
0	■	The implementation date has passed, and management action is not complete
25	Open Actions	

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

At the end of July 2023, there were 25 open actions, 13 of which had been completed. 2 were noted as being overdue and 2 not on schedule for completion by the target date with the remaining 8 on target for completion within agreed timescales.

However, during August 2023, great progress has been made against recommendations relating to organisational performance with the 2 overdue actions completed and 1 action that was not on target also addressed successfully. A further 2 actions relating to the Centre of Excellence audit have also been completed.

This results in 18 of the 25 open actions being recorded as complete, 6 on target for completion by the agreed deadline and 1 requiring an extension to target date.

KEY MATTERS FOR CONSIDERATION OF THIS MEETING

This month has seen good progress with further actions being completed bringing the total actioned to 18.

1 action has been identified as “not on target for completion by the agreed date” of October 2023. It has been agreed that a formal request for an extension clearly indicating cause and likely completion dates will be submitted to the October 2023 Audit and Assurance Committee as part of the Audit Action Log submission.

The following items have been identified for submission to the next meeting of the Audit and Assurance Committee which takes place on 17th October 2023:

- Legislative Assurance Framework Register
- Board Assurance Framework Escalations
- Corporate Risk Trending Analysis
- Decarbonisation Return

In addition, the following audit reports are expected:

- Hybrid Working
- Board Assurance Reporting
- Stock Management
- Legacy Software
- Benefits Realisation



PROGRESS:

Strategic Engagement NHS Wales Partners

- Strategic engagement sessions held with NWSSP, HEIW and CAVUHB.
- Architecture workshop held with Hywel Dda University Health Board (HDUHB) 14th July with National Data Resource (NDR) and operational teams following up to support their digital transformation plans.
- Undertaking retrospectives with partners, first one planned 15th September with ABUHB.
- Working with planning to map governance boards across DHCW to check right stakeholders are engaged at right points.

Engagement events and showcases

- DHCW Showcase and Engagement Series outline for 2023/24 drafted for approval by execs. Planning of joint in person on-site sessions with all NHS Wales partners.

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Partnerships

- Finalising Life Sciences Hub Wales (LSHW) and DHCW partnership agreement, draft with LSHW for review.
- Met with Centre for Digital Public Services (CDPS) to discuss collaborative working and agreed bi-annual strategic sessions to better identify opportunities and align working.
- Meeting with Technology Enabled Care (TEC) Cymru arranged for August 31st to discuss partnership plan.

Stakeholder Intelligence

- Mapping existing engagement within DHCW and survey launched to capture groups and feedback mechanisms.

Digital Inclusion

- Listening & learning SHA Board session July 2023.
- Expressions of Interest closed for DHCW Digital Inclusion working group with 9 applications. Group being established with first meeting aimed for end October.
- Creation of two digital inclusion surveys, with first completed with patients and the public through Digital Inclusion Survey Working Group.

Engagement Toolkit & Workshops

- 'Engagement Workshops' held with Digital Maternity Cymru (DMC) and Eyecare in July to review stakeholder mapping and support development of refreshed engagement plans.
- NDR Stakeholder Engagement workshop held with NDR team & partners to help inform strategy.
- NDR Engagement and Comms strategy draft completed & out for consultation. Approval by partners needed and submission to Welsh Government by 30th September.

NHS WALES STRATEGIC ENGAGEMENT MEETINGS:

DATE	ORGANISATION
26 th July 2023	Health Education and Improvement Wales (HEIW)
31 st July 2023	Cardiff and Vale University Health Board (CAVUHB)
11 th August 2023	NHS Wales Shared Services Partnership (NWSSP)
13 th September 2023	Aneurin Bevan University Health Board
14 th September 2023	Cwm Taf Morgannwg Health Board
20 th September 2023	Velindre University NHS Trust
TBC	Hywel Dda University Health Board
4 th October 2023	Powys Teaching Health Board (full day in person)
12 th October 2023	NHS Executive
25 th October 2023	Welsh Ambulance Service Trust
8 th November 2023	Public Health Wales

OTHER STRATEGIC ENGAGEMENT ACTIVITIES:

DATE	ORGANISATION
7 th July 2023	Digital Health and Care Commissioning Meeting with Welsh Government
17 th July 2023	HDD Digital Transformation workshop
31 st August 2023	TEC Cymru Partnership Discussion (to be rearranged)
1 st September 2023	Digital Health and Care Commissioning Meeting with Welsh Government
7 th September 2023	All Wales Digital Programme Leads Meeting
15 th September 2023	ABUHB Partnership Retrospective
18 th /19 th September 2023	Four Nations Meeting
26 th September 2023	LSHW/DHCW CEO Oversight Meeting
6 th October 2023	Digital Health and Care Commissioning Meeting with Welsh Government
25 th October 2023	Catalyse 2023: Symposium (UWSSP)



SERVICE LEVEL AGREEMENT / SERVICE REVIEW MEETINGS:

DATE	ORGANISATION
6 th July 2023	NHS Wales Shared Services Partnership (NWSSP)
10 th July 2023	Aneurin Bevan University Health Board (ABUHB)
13 th July 2023	Betsi Cadwaladr University Health Board (BCUHB)
18 th July 2023	NHS Executive
24 th July 2023	Cardiff & Vale University Health Board (CVUHB)
28 th July 2023	National Imaging Academy Wales (NIAW)
31 st July 2023	Powys Teaching Health Board (PTHB)
2 nd August 2023	Hywel Dda University Health Board (HDUHB)
3 rd August 2023	Welsh Ambulance Service Trust (WAST)
7 th August 2023	Cwm Taf Morgannwg University Health Board (CTMUHB)
10 th August 2023	Public Health Wales (PHW)
11 th August 2023	Health Education and Improvement Wales (HEIW)
22 nd August 2023	Swansea Bay University Health Board (SBUHB)
29 th August 2023	Velindre University NHS Trust (VUNHST)

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SUMMARY:

Customer Satisfaction levels remain above target at 94%.

W91029 - Bodowen Surgery
Extremely professional and helpful was able to get Office upgraded on my laptop very quickly.

W95049a - Senghenydd Health Centre
very helpful , patient and I understood what I was being told without it being too tech- worded.

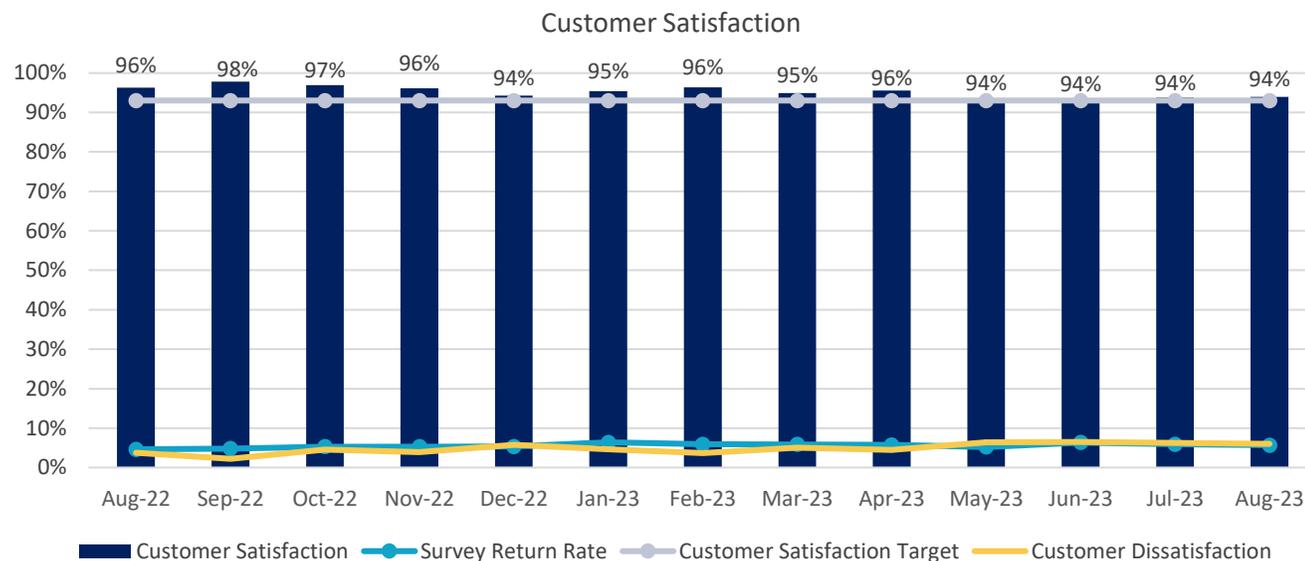
W93004 - Tudor Gate Surgery
Very helpful and accommodating adviser - efficient and patient.

Digital Health and Care Wales - Ty Glan-yr-Afon
Excellent communication and extremely responsive

Digital Health and Care Wales - Ty Glan-yr-Afon
The service was extremely prompt, courteous, friendly. What a great experience all round.

NHS Wales Executive - Bocam Park
Excellent communication with the Helpdesk person very early in the morning.

Cardiff & Vale University HB
Fast and efficient service





"Delighted with WNCR" and is using often via WCP Reverse Stapling to view inpatient notes." – **Betsi Cadwaladr(WNCR)**



"Very user friendly, you can see everything and don't have to go looking for it" – **Betsi Cadwaladr(WNCR)**



"Very easy to use especially using 'patient search' feature" – **Betsi Cadwaladr(WNCR)**



"The Demo was perfectly paced and both Sara and Jamie explained everything in detail without going to quickly." – **National(DSPP)**



"WNCR has made my working life easier and has saved me so much time. Due to Dystonia in my right hand, I am unable to write notes. I had to type handover notes on a Word doc, print them off and distribute to the staff. Now I can type them directly into the inpatient notes for all to view. WNCR has halved the time I did things before, thank you so much for all your training and support."
– **Senior Nurse, Betsi Cadwaladr (WNCR)**



"Excited to have you on board."
– **Cardiff & Vale (DCDN)**



Diolch!

DIGITAL HEALTH AND CARE WALES

RISK MANAGEMENT REPORT

Agenda Item	6.3
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

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

Purpose of the Report	For Discussion/Review
Recommendation	
<p>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.</p>	

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1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	Delivering High Quality Digital Services
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CORPORATE RISK (ref if appropriate)	All are relevant to the report
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WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

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

HEALTH CARE STANDARD	Governance, leadership and accountability
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 IMPLICATIONS/IMPACT	Yes, please see detail below Additional scrutiny and clear guidance as to how the organisation manages risk has a positive impact on quality and safety.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below Should effective risk management not take place, there could be legal implications
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below 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.

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

2 SITUATION/BACKGROUND

- 2.1 The [DHCW Risk Management and Board Assurance Framework \(BAF\) Strategy](#) outlines the approach the organisation will take to managing risk and Board assurance.
- 2.2 The [Risk and BAF workplan for 2023/24](#) 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)'.

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- 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](#). 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.
- 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 co-benefits of minimizing data storage needs.

- 3.5 The [HM Government National Risk Register](#) was published in August 2023, which includes a section on the cyber attack: health and care system. Learning from this report will be subject to a future Board Development session.
- 3.6 DHCW's Corporate Risk Register currently has 28 risks on the Register, 17 of which are detailed at item 6.3ii Appendix B. There are 11 Private risks, of which 10 are considered at every Digital Governance and Safety Committee and 1 is considered at Audit and Assurance Committee.

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3.7 Board members are asked to note the following changes to the Corporate Risk Register 6.3.ii Appendix B (new risks, risks removed and changes in risk scores) for the period 1 July 2023 to 31 August 2023:

NEW RISKS (3) 1 Private 2 Public

Risk Ref	Risk Title	Risk Description
DHCW0326	Insufficient commitment to build out functionality from the NHS Wales App	IF we are unable to find & collaborate with other Digital Programmes across Wales to support & build on NHS Wales App functionality. THEN funding maybe limited and stakeholder engagement will be decrease negatively impacting on development and improvement of the NHS Wales App, RESULTING IN the NHS Wales App functionality stagnating and this will potentially cause reputational damage to DSPP, DHCW, NHS Wales and Welsh Government.
DHCW0327	Delays in Operationalising NDR Platform impacting Services which require NDR	IF there are delays to the new NDR data platform and architecture becoming operational as a live service THEN there will be delays to other services which are being designed and built to run on the NDR platform and architecture RESULTING IN additional costs, missed benefits and value opportunities, and erosion of stakeholder trust
DHCW0328	**PRIVATE	**PRIVATE**

RISKS REMOVED (3) 2 PRIVATE 1 PUBLIC

Risk Ref	Risk Title	Risk Description	Statement
DHCW0299	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	Risk downgraded for management at Directorate level as section 255 has been agreed
DHCW0310	**PRIVATE**	**PRIVATE**	Approved at WEDs downgraded to Directorate level for management until implemented
DHCW0298	**PRIVATE**	**PRIVATE**	Contingency plan agreed, mobilisation activity commenced. Downgraded for

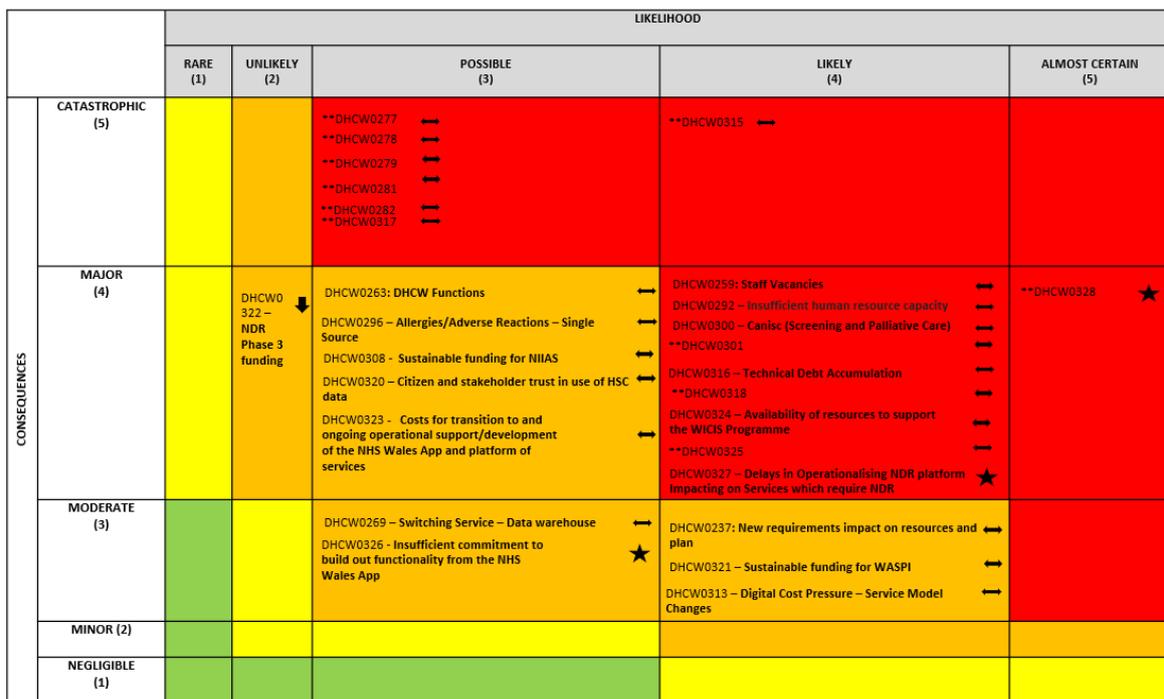
			management at Directorate level
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RISKS WITH A CHANGE IN SCORE (1)

There was one change in score during the period

Risk Ref	Risk Title	Risk Description	Statement
DHCW0322	NDR Phase 3 funding	IF funding requested to deliver Phase 3 of the NDR Programme is not confirmed THEN resources cannot be committed to delivery RESULTING IN changes to the Phase 3 Business Justification Case, slower delivery, delayed benefits, and reduced value for money	Funding letter confirmed for 2023/2024 ongoing discussions to secure funding for 2024/2025

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



★ New Risk ← Non-Mover ↓ Reduced ↑ Increased ** Private risks

3.9 All the risks on the Corporate Risk log are assigned to a Committee as outlined in the Risk Management and Board Assurance Framework Strategy to provide the SHA Board with the necessary oversight and scrutiny. As previously stated, the private (commercially sensitive, cyber and security related) risks are reviewed in detail by the Committee's in a private session.

3.10 The annual review of [DHCW's risk appetite and associated information](#) was signed off during the May 2023 SHA Board.

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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 three new risks, change in score of one risk and the removal of three risks.

5 RECOMMENDATION

- 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.

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	05/09/2023	Discussed and verified
Management Board	14/09/2023	Discussed and verified

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6.3ii Appendix B – Corporate Risk Register

Risk Matrix

		LIKELIHOOD				
		RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	ALMOST CERTAIN (5)
CONSEQUENCES	CATASTROPHIC (5)	5	10	15	20	25
	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:

Critical	Significant	Moderate	Low
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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0327	Project	<p>Delays in Operationalising NDR Platform impacting Services which require NDR</p> <p>IF there are delays to the new NDR data platform and architecture becoming operational as a live service THEN there will be delays to other services which are being designed and built to run on the NDR platform and architecture RESULTING IN additional costs, missed benefits and value opportunities, and erosion of stakeholder trust</p>	27/07/2023	04/09/2023	16 (4X4)	<p>AIM: Reduce Likelihood</p> <p>FORWARD ACTIONS: Further discussions at Project Board and actions to be agreed</p> <p>ACTIONS TO DATE: 04/09/2023: risk reviewed. Workshop held with SMR team on 21st August. Timeline developed and agreed between NDR and SMR. Important for other teams to formally request pipelines and to discuss and agree dependencies or pre-requisites within appropriate timescales. 27/07/2023 Workshop held with Digital Medicines Portfolio on 18th July to agree scope, timescales and responsibilities</p> <p>Escalation of risk of non-approval to Medical Director of DHCW from WIAG Chair</p>	16 (4X4)	10 (5X2)	Executive Director of Strategy	Non-Mover	Digital Governance and Safety	Development of Services	Mission 2
DHCW0259	Business & Organisational	<p>Staff Vacancies</p> <p>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</p>	11/02/2020	17/08/2023	12 (3x4)	<p>AIM: REDUCE Impact and REDUCE Likelihood</p> <p>FORWARD ACTIONS: DHCW will be developing new contractual vehicle/s commencing from April 2023 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 approach is more optimal in order to quickly and effectively secure time critical delivery of key</p>	16 (4X4)	6 (2X3)	Director of People	Non-Mover	Audit & Assurance Committee / Local Partnership Forum	Service Delivery	Mission 5

6.3ii Appendix B – Corporate Risk Register

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission	
		functionality for NHS Wales users.				<p>projects</p> <p>ACTIONS TO DATE: 17/08/23 There are a number of key strands of work and commitments this is being led by SRG which represents all the organisation and has senior representatives from programmes and Directorates across all DHCW. Each Directorate has detailed recruitment plans and these have been revised in line with financial challenge work - work with Finance BPs/POD BPs is concentrated and ongoing. Actions include: weekly review of recruitment plans, monthly SRG deep dive reviews, new outlets for advertising and sourcing interim workers, working with colleges and universities to support grads etc/new appointees into DHCW and working with Directorates to convert some roles to grad roles etc but do need some resource support centrally in POD to fully support management of this moving forward - which as SRG suggested could be supported by under spend. We have also carried out strategic workforce planning to better plan and execute actions at the right time in the right way and also look at areas scaling down to deploy and retrain our current workforce to move to new roles and have the training to support them. All in progress. 03/07/23 There are a significant number of vacancies, and the recruitment team are managing a high volume of activity. There is a need to increase the volume of appointments and the Recruitment Team will be planning for a number of Recruitment events in September to help expedite the ability to appoint the right people at the right time.</p> <p>The P&OD Business Partners and working with the Finance Business Partners to ensure we encourage Appointing Managers to start the recruitment process as soon as possible and before the end of Period 2 in most cases given the time it takes to recruit and on board. This will be closely monitored by the Resource Tracker a tool created by Finance and used jointly with P&OD.</p> <p>26/50/2023 - Initial WFOD planning exercise complete and currently aligning the WFO and Finance forecasts by the end of June which should give focus and timings for key areas. Tracker is now up and running which is accessible by WFO and Finance to ensure we have an up to date view on resource and recruitment. 03/05/2023 Recruitment Plan for the year is being</p>								

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6.3ii Appendix B – Corporate Risk Register

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						finalised following the workforce planning exercise which will allow us to focus effort in timely manner. Also planning to carry out Careers Fairs aligned to last year’s 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 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.							
DHCW0292	Service Interruption	<p>Insufficient capacity in the infrastructure teams to undertake BAU activity and activities in the 1-year plan</p> <p>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.</p> <p>Examples include: * Data Centre 2 Project * Migration of systems from legacy virtual server platform * WPAS Hardware Replacement * Legacy Operating System Replacements</p>	01/04/2022	04/09/2023	16 (4x4)	<p>AIM: REDUCE Likelihood</p> <p>FORWARD ACTIONS: Develop workforce plan for the resources required for major Infrastructure maintenance work such as those identified.</p> <p>ACTIONS TO DATE: 04/09/2023 Discussions are ongoing within the Operations Directorate around resources, awaiting the approval and sign off of the Data Centre 2 Business Case 13/07/2023 CLJ - No change. Indications are that we will get Time Limited Funding from WG for the data centre migration, which will enable DHCW to procure some short-term resources to assist with that specific project. 30/05/2023 CLJ - Work is underway across the Operations Directorate to address the unfunded positions. Risk level unchanged at the moment 05/05/2023 CLJ - Work is underway across the Operations Directorate to address the unfunded positions. Risk level unchanged at the moment 04/04/2023 CLJ - Updated risk description to reflect the change in focus of the risk as a result of the new financial year. 04/04/2023 CLJ - The team sizing report has shown that the current staffing levels are appropriate, but that higher levels of automation could result in fewer but higher skilled staff being needed over time. 03/04/2023 MP - Work ongoing to mitigate report suggested improvement areas. 23/02/2023 MP - Report delivered and discussions ongoing to effect recommendations and address concerns.</p>	16 (4x4)	8 (4x2)	Executive Director of Digital Operations	Non-Mover	Digital Governance & Safety	Financial	Mission 1

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6.3ii Appendix B – Corporate Risk Register

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						02/02/2023 MP - Awaiting report output from 3rd party engagement.							
DHCW0300	Service Interruption	<p>Canisc (Screening and Palliative Care)</p> <p>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.</p>	07/12/2022	06/09/2023	16 (4x4)	<p>AIM - Reduce Likelihood and Impact by developing four new features; Palliative Care MDT, Patient Preferences, Caseload Management and Specialist Palliative Care Eform</p> <p>FORWARD ACTIONS User Acceptance Testing to continue for Palliative Care MDT and Patient Preferences features. Continue development of remaining features i.e., Caseload Management and Specialist Palliative Care Eform. Implement across Wales.</p> <p>ACTIONS TO DATE 06/09/2023 Palliative Care development expected completion is end of Qtr 2 (Sep 2023). No further slippage on development is expected. Patient Preference is almost fully UAT compliant, Palliative Care MDT to begin shortly. 06/07/23 Development on going for Caseload Management and Specialist Palliative Care Eform. UAT has commenced on Palliative Care MDT and Patient Preferences. New risk raised by Clinical Lead delays during UAT of the Patient Preferences e-form. Data set-up took a number of months during which clinicians were unable to test effectively. When testing has been possible bugs have been identified but it has taken a number of weeks for these bugs to be resolved. For both Patient Preferences form and other Specialist Pall Care workstream products, the implications of working at this pace would prohibit us from having all products ready for live delivery by end of March 2024.</p> <p>22/03/2023 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</p>	16 (4x4)	6 (4x2)	Executive Medical Director	Non-Mover	Digital Governance & Safety	Service Delivery	Mission 3

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0316	Finance	<p>Technical Debt Accumulation</p> <p>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.</p>	19/04/2023	03/08/2023	16 (4x4)	<p>16 June 23 for Specialist Pall Care form 30 June 23 for Caseload Management 15/12/2222 - CLJ. Changed risk type to "Service Interruption". Not a cyber security risk</p> <p>AIM: Reduce Likelihood</p> <p>FORWARD ACTIONS: Establish TDA to steer architecture development Conduct DevOps maturity assessment Develop product-centric target operating model Develop WPAS cloud migration roadmap Establish cloud TCO model and develop business case</p> <p>ACTIONS TO DATE: 03/08/2023. Procurement of DevOps maturity assessment completed. DORA metrics development well under way. Initial findings have been presented. 26/07/2023. Initial Technical Architecture benchmarking exercise complete. 13/07/2023 - Funding has been secured to use 3rd parties to assist with multiple workstreams which will lay the foundations for the transition to a product centric operations model and target architecture. Procurement is currently underway. 1. Secured third parties to assist with the Software engineering maturity assessment. 2. Target Operating model Design 3. WPAS Cloud blueprint development A Consultation is underway for the Operational Directorate restructure which creates additional portfolios with specific focus on Digital Delivery, Dev Ops, Digital Architecture, Cyber Security and Enterprise Service Management. The collection of DORA metrics work is underway with existing software teams which will provide performance metrics relating to our software engineering capabilities benchmarked against external industry standards. Expect this to be presented in the IOPR in August/September 2023. 31/05/2023 - Migration actions updated. Initial discovery work on Cloud business case is underway.</p>	16 (4x4)	8 (4x2)	Executive Director of Digital Operations	Non-Mover	Digital Governance & Safety Committee	Financial	Mission 2
DHCW0324	Finance	<p>Availability of Resources to Support the WICIS Programme</p> <p>IF there is no additional</p>	18/01/2023	23/08/2023	16 (4x4)	<p>AIM: Reduce</p> <p>FORWARD ACTION: Continued escalation to SRO and impact assessment paper (authored in collaboration with NHS Executive) to be submitted to WG describing</p>	16 (4x4)	8 (4x2)	Executive Director of Strategy	Non-Mover	Digital Governance & Safety	Financial	Mission 2

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
		<p>funding to support required changes to the WICIS programme plan and contract</p> <p>THEN there is a risk of delays to implementation and dispute with the supplier</p> <p>RESULTING IN digital ICU systems and services not being available to users as planned</p>				<p>potential delivery scope change as consequence to funding deficiency.</p> <p>ACTION TO DATE:</p> <p>23/08/23: Revenue funding costs calculated from April 23, due to be shared with HB Chief Executives. Revised implementation plan with HDD UHB go lives moving into Q1 & Q2 of 2025/26.</p> <p>04/08/23: Capital shortfall paper agreed with SRO and sent to Chief Executive. Includes assumption that roll out will extend into 25-26.</p> <p>28/07/23: Reforecast of financial plan with finance partner is being completed to identify funding requirements to continue with project and to extend the implementation into 2025/26. Plans to present funding request within DHCW before the programme board on 22/06/23: Further details supplied to WG DPIF team following SRO discussions.</p> <p>09/06/23: Escalation of Risk to Corporate Risk level following agreement by Ifan by e-mail 08/06/23 alongside rewording of risk component to cover extent of funding deficiency.</p> <p>08/06/23: Email from NHS Executive confirms earmark of revenue funding, yet to be formally confirmed.</p> <p>16/05/23: Funding gap discussed and escalated with WAG and ongoing discussions with NHS Executive.</p> <p>03/05/23: Discussions with NHS Executive on funding commitment.</p> <p>14/04/23: Commercial discussions taking place, following review of forecast spend and ongoing financial support of the programme.</p> <p>28/03/2023: Forecast spend drafted to share with senior team and discuss what funding is required for 2023/24. Mark Cox aware.</p> <p>01/02/2023: Chased Mark Cox for update on escalation who is on leave at the moment. Will await a response.</p> <p>18/01/2023: Alex Percival and Rachel Williams escalated to Mark Cox in order to escalate to Directors.</p> <p>13/01/2023: Jo Davies, NHS Wales Collaborative, advised WICIS that the funding £1m funding from the collab will no longer be available from 01/04/2023. Agreed to escalate to finance.</p>							
DHCW0323	Business & Organisational	Costs for transition to and ongoing operational support/development of the NHS Wales App and platform of services	14/06/2023	04/09/2023	25 (5x5)	<p>AIM: Reduce Likelihood</p> <p>FORWARD ACTIONS: Develop a transition plan and understand the resources needed to support the plan. Outline approach and plan</p>	12 (3x4)	4 (2x2)	Executive Director of Strategy	Non-Mover	Audit & Assurance	Financial	Mission 4

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
		IF additional funding is not allocated to DSPP/DHCW to support transition (including resource capacity to learn/upskill) nor to establish an operational application support model/team, THEN staff may need to be moved away from other services or the NHS Wales App switched off, Resulting in non-delivery of objectives and a delay in benefits being realised, as well as reputational damage.				for transition of development team proposed. ACTIONS TO DATE: 04/09/23 - DSPP programme team are waiting on key inputs from DHCW (ADS) staff to inform the transition plan and costs therein. A key meeting has been arranged to take place on 5/09 to understand progress. DHCW FIN confirmed that a Full Business Case would be required. 02/08/23 Planning work continuing with DHCW to understand future TOM following transition and plan to get there (including full costings). Understand phase of transition has taken place between ADS lead and Supplier. Transition approach and outline plan proposed is viable, but unaffordable. Plan to be utilised to inform the resources requirements needed for transition.							
DHCW0313	Finance	Digital Cost Pressure – Service Model Changes IF externally and internally sourced service provision models change resulting in movement from CAPEX based solutions to OPEX 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	07/09/2023	16 (4x4)	AIM REDUCE LIKELIHOOD FORWARD ACTIONS 06/07/2023 Externally DHCW has instigated robust horizon scanning processes by incorporating specific intelligence gathering during recurring supplier contract management meetings to enable upstream management of any risk. Internally an assessment is being made as part of the cloud adoption Business Case and as part of the product approach which will inform financial impact and revenue requirements. 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. 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. The proposed timelines for this mitigation will run until September 2023 ACTIONS TO DATE: 07/09/2023 DHCW is currently constructing a sustainable funding paper (due October 2023) which will propose recommendations to address changes in the technological layer (both external supplier and internal cloud adoption) that have a consequential CAPEX to	12 (4x3)	9 (3x3)	Executive Director of Finance	Non-Mover	Audit & Assurance Committee	Financial	Mission 5

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6.3ii Appendix B – Corporate Risk Register

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						<p>OPEX impact. This exercise builds upon the current established mitigation of strengthened horizon scanning adopted as part of the contract management reviews.</p> <p>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.</p> <p>03/04/2023: An updated database has now been compiled with formal guidance surrounding escalation within the appropriate organisational governance forums.</p> <p>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</p> <p>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 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.</p> <p>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.</p>							
DHCW0237	Business & Organisational	<p>New requirements impact on resources and plan</p> <p>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.</p>	30/03/2020	05/09/2023	16 (4X4)	<p>AIM: REDUCE Impact and REDUCE Likelihood</p> <p>FORWARD ACTIONS: Continue to monitor new requirements and new initiatives. Use capacity planning, new service request, formal change control and reprioritisation methods to address requests. Impact assessed if staff need to be moved to urgent work.</p> <p>ACTIONS TO DATE: Focussed prioritisation is being undertaken by the ADS directorate to ensure key IMTP objectives are supported. Comms being drafted about being unable to take on new service requests without further resource.</p> <p>The IMTP 23-26 was approved at the SHA Board on 30 Mar 2023 and the DHCW Business Plan 23-24 was approved by Management Board on 24 Apr 2023.</p>	12 (3X4)	9 (3x3)	Executive Director of Strategy	Non-Mover	Audit & Assurance	Development of Services	Mission 2

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6.3ii Appendix B – Corporate Risk Register

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						Capacity assessments are ongoing and recorded in a corporate milestone app. Milestones are baselined and monitored with the Planning and Performance Management Group where corrective actions are escalated. The IMTP this year also illustrates unfunded requests and pipeline products which aren't resourced as at time of publication and therefore aren't committed to. 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 and help in consideration of new requests - as pipeline need to be considered ahead of new requests.							
DHCW0296	Clinical Risk	<p>Allergies/Adverse Reactions - Single Source</p> <p>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.</p> <p>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 - Interoperability - Allergen not SNOMED coded - Reaction not SNOMED coded</p>	13/09/2022	15/08/2023	12 (4x3)	<p>AIM: Reduce Likelihood</p> <p>FORWARD ACTION: Shared Medicines Record to take up this functionality to be cross-systems. Strategy to be determined.</p> <p>ACTION TO DATE: 15/8/23 [PcD] - No Change July 2023 Dependencies still remain on CDR. 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 Jan/2023: - SMR project to include AR in their remit. Strategy to be determined. - 2022 Ken Leake updated as Risk Handler. Creation of overarching risk. Risks linked. Presented to the Medical Director and raised to Corporate Risk Register</p>	12 (4x3)	4 (4x1)	Executive Medical Director	Non-Mover	Digital Governance & Safety	Safety / Wellbeing	Mission 3

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6.3ii Appendix B – Corporate Risk Register

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
		- Difficulty filtering through SNOMED results - No standard as how to portray Adverse reactions (ie: not all systems display them in the patient banner)											
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	06/09/2023	12 (3x4)	AIM - Reduce likelihood FORWARD ACTIONS - Commercial and Procurement support on options appraisal ACTIONS TO DATE - 06/09/2023 Discussions between Welsh Government and DHCW are ongoing 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 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 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.	12 (3x4)	6 (2x3)	Executive Medical Director	Non-Mover	Audit & Assurance	Information, Access and Sharing	Mission 1
DHCW0320	Information Governance	Citizen and stakeholder trust in uses of Health and Social Care data IF (i) DHCW does not articulate a costed plan to deliver citizen and stakeholder engagement and involvement around uses of Health and Social Care data, and (ii) Resources are not available to deliver the plan... THEN it is less likely that stakeholders and patients be assured that current and proposed uses of Health and Social data in	12/05/2023	06/09/2023	12 (4X3)	AIM: REDUCE Likelihood FORWARD ACTIONS: Await actions from Welsh Government for mitigation plan to be progressed ACTIONS TO DATE September 2023 - Awaiting actions from Welsh Government to continue mitigation July 2023 - Paper for EMD and CEO being put together for consideration in August Continue discussions with Welsh Government colleagues to define DHCW's role in the Communication and Engagement. Discussion to be held January 2023 - See Datix Risk 0263 for ref to meeting with WG CDO	12 (4X3)	4 (4X1)	Executive Medical Director	Non-Mover	Digital Governance and Safety	Information Storing and Maintaining	Mission 4

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6.3ii Appendix B – Corporate Risk Register

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
		Wales are trustworthy... 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											
DHCW0263	Information Governance	<p>DHCW Data Functions</p> <p>IF directions from Welsh Government do not provide a sound legal basis for the collection, processing and dissemination of Welsh 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</p> <p>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.</p>	26/01/2021	06/09/2023	12 (4x3)	<p>AIM: REDUCE Likelihood</p> <p>FORWARD ACTIONS: Continue discussions with Welsh Government colleagues to define the parameters of the functions. Discussions to be held in January 2023.</p> <p>ACTIONS TO DATE: 06/09/2023 - Awaiting action plan from Welsh Government to progress mitigation 04/07/2023 - DHCW facilitating discussions with WG senior Policy leads and WG lawyers</p> <p>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</p> <p>DHCW meeting WG on 31/1 to discuss how the Data Promise Programme is progressed, confirming roles, responsibilities and timeframes</p> <p>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:</p> <p>(i) DHCW's establishment functions and initial set of</p>	12 (4x3)	4 (4x1)	Executive Medical Director	Non-Mover	Digital Governance & Safety	Information Access and Sharing	Mission 1

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						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.							
DHCW0321	Information Governance	Sustainable funding for WASPI IF a sustainable financial position cannot be found for funding to support the development and implementation of the WASPI Code of Conduct THEN key organisation stakeholders are unlikely to sign up to become code member organisations as DHCW would not be able to discharge Code responsibilities RESULTING IN a missed opportunity for enhancing data sharing standards across Wales and reducing missed opportunities with data sharing between agencies.	15/05/2023	06/09/2023	12 (3x4)	AIM Reduce likelihood FORWARD ACTIONS Confirm funding application outcomes ACTIONS TO DATE September 2023 Continued discussions with Welsh Government July 2023 early indicators from the WG Public Consultation suggest extensive public service support - although finance still to be resolved March/April/May 2023 Meetings with Finance to determine ability to apply for funding via the Digital Priorities Investment Fund December 2022 Funding business case for a WASPI Code team taken to Executive Management Board	12 (3X4)	6 (2X3)	Executive Medical Director	Non-Mover	Digital Governance and Safety	Information Access and Sharing	Mission 3
DHCW0326 <i>Richards Cerys 21/09/2023 17:29:15</i>	Project	Insufficient commitment to build out functionality from the NHS Wales App IF we are unable to find & collaborate with other Digital Programmes across Wales to support &	06/06/2023	04/09/2023	20 (5X4)	AIM: Reduce Likelihood FORWARD ACTIONS: clarification from WG as to governance arrangements of other programmes with digital content and their compliance with the DSPP methodology. ACTIONS TO DATE:	9 (3X3)	6 (3X2)	Executive Director of Strategy	Non-Mover	Digital Governance and Safety	Service Delivery	Mission 2

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
		build on NHS Wales App functionality. THEN funding maybe limited and stakeholder engagement will be decrease negatively impacting on development and improvement of the NHS Wales App, RESULTING IN the NHS Wales App functionality stagnating and this will potentially cause reputational damage to DSPP, DHCW, NHS Wales and Welsh Government.				04//09/23 - Preparing to brief NHS Wales Exec EDT on 12 October 2023 on what the NHS Wales App currently does and what it could deliver in the future with commitment / investment. 02/08/23 DSPP focus is on signposting which features would add most value if connected with the NHS Wales App. The intent is to work with WG officials and the NHS Exec to agree priorities for future collaboration. 05/07/2023 - DSPP Accelerator Conference held on 16.06.2023. Improved stakeholder engagement from across Wales and further discussions and meetings planned to translate improved stakeholder engagement into contractual obligations for future NHS Wales App development. DSPP Accelerator Conference planned to take place on 16.06.2023. Request made to CDO - WG to call for closer alignment with the NHS Wales App with shared commitment for development and build out from the NHS Wales App.							
DHCW0269	Business & Organisational	Switching Service - Data Warehouse IF the current automated switching service fails before new NDR platform is live THEN data will be need to be manually acquired into the ISD Data Warehouse RESULTING IN an increased resource requirement to maintain updates to multiple reporting systems. The lack of ability to upgrade or to develop the Switching Service will also mean that ISD may be unable to meet any new demands for information.	07/12/2020	05/09/2023	9 (3x3)	AIM: REDUCE Likelihood and REDUCE Impact FORWARD ACTION: Meeting scheduled to agree the NDR solution and agree reasonable timelines or structure ACTION TO DATE: 05/09/2023 The outline workplan is being discussed and agreed, project manager has been allocated and the scrutiny process has been approved to recruit the resource requirements identified to complete the work. ISD have identified a lead ("Data warehouse and acquisition lead"), Steering group formed and Project in scoping phase. 23/06/2023 Awaiting meeting to propose roadmap for NDR scoring reduced 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 1/01/2023 - Change Risk Handler to reflect ownership 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. 23/12/2022 No update from NDR or IRAT teams	9 (3x3)	6 (3x2)	Executive Director of Digital Operations	Non-Mover	Digital Governance & Safety	Information Storing and Maintaining	Mission 4

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						30/11/2022 Awaiting responses from NDR and IRAT teams around critical responses to recommendation.							
DHCW0322	Finance	NDR Phase 3 funding IF funding requested to deliver Phase 3 of the NDR Programme is not confirmed THEN resources cannot be committed to delivery RESULTING IN changes to the Phase 3 Business Justification Case, slower delivery, delayed benefits, and reduced value for money	06/06/2023	05/09/2023	16 (4X4)	<p>AIM: Reduce Likelihood</p> <p>FORWARD ACTIONS: Continue discussions with Welsh Government to agree funding position</p> <p>ACTIONS TO DATE: 05/09/2023 Funding letter confirmed for this financial year. Milestones to meet by 30th September that will support the position in Welsh Government confirming funding for 24/25 however there may be an impact should DPIF funding reduce during this financial year. 27/07/2023 Funding letter was countersigned by DHCW and returned to Welsh Government on 18th July 2023 17/07/2023 - Funding letter received. waiting for confirmation this has been signed by Helen Thomas 06/07/2023 Funding for 23/24 has been confirmed discussion ongoing to formally secure 2024/25 funding as part of a review exercise. 06/06/2023 Funding letter received on 5th June indicating 50% funding for Q1/Q2 with requirements to meet milestones by 30th September at which point the remaining 50% will be released. The discussion is ongoing between Programme Director, Finance and Welsh Government as the funding letter does not correspond with advice received previously.</p>	8 (4X2)	6 (2X3)	Executive Director of Strategy	Non-Mover	Digital Governance & Safety	Financial	Mission 1

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DIGITAL HEALTH AND CARE WALES

STRATEGIC EQUALITY PLAN UPDATE

Agenda Item	6.4
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Name of Meeting	SHA Board
Date of Meeting	28 September 2023

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

Executive Sponsor	Sarah-Jane Taylor, Director of People and Organisational Development
Prepared By	Lenisha Wright, Equality, Diversity, Inclusion and Wellbeing Lead Sarah-Jane Taylor, Director of People and Organisational Development
Presented By	Sarah-Jane Taylor, Director of People and Organisational Development

Purpose of the Report	For Noting
Recommendation	
The SHA Board is being asked to NOTE the report	

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1. IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	Development of the new Digital Organisation
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CORPORATE RISK (ref if appropriate)	Not applicable
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WELL-BEING OF FUTURE GENERATIONS ACT	A More Equal Wales
If more than one standard applies, please list below:	
<ul style="list-style-type: none"> • A Resilient Wales • A Wales of cohesive Communities • A Wales of Vibrant Culture and Thriving Welsh Language 	

DHCW QUALITY STANDARDS	BS 76000:2015
If more than one standard applies, please list below:	
<ul style="list-style-type: none"> • BS 76005 • ISO 30415 (replacing BS 76005) 	

HEALTH CARE STANDARD	Staying Healthy
If more than one standard applies, please list below:	

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

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below That resources to support the strategic equality plan commitments are permanent and that there is an on-going commitment to these each financial year.
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below The activities and work undertaken to support the commitments of the strategic equality plan have wide ranging implications and are intended to have positive implications for

	the workforce of DHCW, its stakeholders and key partners. There should be benefits felt in the attraction and retention of diverse talent, greater understanding, innovation, and creativity and the realising of a positive and inclusive culture.
SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below <ul style="list-style-type: none"> The activities and work undertaken around Equality, Diversity and Inclusion impacts the diverse communities within which DHCW operates. Completion of equality impact assessments supports diversity and inclusion in the work undertaken by DHCW throughout its communities.
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
SEP	Strategic Equality Plan	ESR	Electronic Staff Record
UK	United Kingdom	ONS	Office of National Statistics
Q	Quarter	BS	British Standard
ISO	International Standards Organisation	EDI	Equality, Diversity and Inclusion
EIA	Equality Impact Assessment	POD	People and Organisational Development

2. SITUATION/BACKGROUND

2.1 All public sector employers within Wales have a requirement to share its equality objectives in the form of a published Strategic Equality Plan.

DHCW welcomed this keen focus and developed its plan earlier this year in line with the commitments outlined in the DHCW People and Organisational Strategy (10/2022). DHCW is committed to building an organisation of innovative and diverse talent and to be known as having a supportive and inclusive culture where everyone thrives and there is equality of opportunity for all. The DHCW People and Organisational Strategy commitments are:

Key Themes	People Priorities
Extraordinary Leadership	Leadership Development Training and Development Talent Management- at all levels Succession Planning
Great Organisation to Work	Culture and Organisation Development Diversity/Equality/Inclusion/Welsh Language Values and Behaviours Thriving Research and Innovation agenda

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Strategic Workforce Planning	Resourcing - Recruitment & Retention Shaping the Workforce – current and future workforce Workforce Review – career pathways across digital profession
Grow Our Own	Growing our own talent Career Pathways – all workforce Partnership and Collaborative Working
Wellbeing & Engagement	Wellbeing and Engagement
New Ways of Working	Technology and New Ways of Working

An overarching commitment integral of the People and Organisational Development Strategy was to formulate the DHCW Strategic Equality Plan. This plan was developed in partnership and presented to the DHCW SHA Board in March 2023 and was endorsed by the Board to take forward the commitments.

The DHCW Strategic Equality Plan (SEP) 2023-2027 is underpinned by the Equality Act 2010, the Anti-racist Wales Action Plan 2022, and the Wales LGBTQ+ Action Plan 2010.

This SHA Board report focusses specifically on the progress being made to the commitments outlined in the Strategic Equality Plan.

The action plan identifies five key commitments to equality, diversity and inclusion which align to our DHCW organisational values and are integral to the People and Organisational Development Strategy commitments. These commitments are:

Commitment 1	Supporting our people
Commitment 2	Ensuring everyone is educated and held accountable
Commitment 3	To utilise data and tracking to understand our starting point and supportive commitments
Commitment 4	Analyse to better understand those opportunities and barriers
Commitment 5	Visible and active sponsorship through our partners

An update of the progress made to date is detailed under each commitment area in Section 3.

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

3.1 Commitment 1: Supporting our People

There have been a number of developments within this commitment, these include:

- I. The set up in quarter one of the DHCW Equality, Diversity and Inclusion workforce group, the membership of which is growing and is detailed in Appendix 1.

This group has representation across all the protected characteristics and is a designated safe space and is driving improved understanding and positive change in how materials are developed. The membership is providing valuable insight of how we can all improve presentation of materials and

language used to support improved engagement and felt inclusion for everyone in the workforce. The network is currently supporting development and review of people policies and surveys and is operating very effectively and passionately across a wide range of topics and themes. EDI network membership includes Marilyn Bryan-Jones, Independent Member who is the Board Champion for Equality and Sarah-Jane Taylor, Director of People and OD.

- III. There have been a number of revised and new learning offerings in support of upskilling managers and employees to highlight and improve the understanding of equality, diversity and inclusion and the benefits that can be felt organisationally by having a positive inclusive culture and equality of opportunity for everyone to develop, feel supported and thrive throughout their working life. These include, Corporate and Local Induction, the Senior Leaders days, where both events heavily featured the new values and the strategic equity plan and discussed everyone's role to support the commitments. Corporate Induction and new additions incorporated into a range of DHCW development programmes. The new Talent programme (2023) for 83 employees. The Statutory and mandatory training has been well received with 99% of employees completing the Equality and Diversity and Human Rights Level 1 training. This is supported by the whole of the Executive team and reviewed each month as part of the Management Board standing performance items.
- IV. There has been a number of supported DHCW Ten Talks, with people sharing their lived experiences. These have received positive feedback and has raised awareness about specific matters, with staff given the opportunity ask questions and gain real insight, which has been welcome. The EDI sessions delivered during Equality Week 2023 raised awareness on various topics: How to better support international staff; The challenges of engaging with the unengaged; Mental Health support in the Showman and wider Roma, Gypsy and Traveller community; Health inequality in the Justice System and The Impact of waiting lists on health inequalities. Marilyn Bryan-Jones led a Ten Talk session on Windrush and raised awareness around this important piece of history and the impacts felt by many.
- V. The People and OD team and Communications team led and delivered both the Staff Conference and Staff Awards alongside an organisational task and finish group. The conference had a number of diverse and inspirational speakers both internal to DHCW and externally, such as Chris Moon MBE. The conference received high praise and the learning opportunities across a wide range of themes including those within the People and OD Strategy and the Strategic Equality Plan and had the ability to be communicated with every member of the workforce. Additionally, the same teams led and managed the successful Staff Awards event where a high number of award categories linked heavily to those living the new organisational values and how their work was making a felt positive difference to others.

3.2 **Commitment 2: Ensuring everyone is educated and held accountable**

The publication of the Strategic Equality Plan (April 2023), in particular regard to the action plan commitments formed a good step forward in increasing transparency around progress and goals. This update report provides assurance to the SHA Board that performance is monitored closely and the commitments within this area have been delivered to plan and are being supported organisationally.

- I. There are robust reviews at the EDI network, the DHCW Local Partnership Forum, Health and Well-being group, the People and OD SLT monthly meeting and the Management Board and Executive Meetings, as part of the forward work plan. Additionally, Audit, both internal and external provide keen attention alongside the various external assessments for British Standards/ISO standards accreditations and employer inspections and awards.

- II. There has been a keen focus on Equality Impact Assessments, these concentrate on systematically assessing and recording the likely impact of a new project or policy on equality. The profile of these has increased with the greater knowledge and understanding shared and discussions around equality that need to be considered with each project or scheme are now being undertaken at earlier stages. The drive for this to be gold standard and be fully embedded is one of the commitments in quarter 4.
- III. The organisation committed to develop and grow our own talent. As a learning organisation, schemes to grow the future generation of talent, supporting our people at each stage of their career is very much committed to. The DHCW Talent cohort was launched in May 2023, with 108 applications received, resulting in 81 successful placements. The opportunity to grow our own and build a pipeline of diverse talent will further be achieved through ongoing funded education with our education partners. There are a number of employees undertaking various education programmes from digital degree apprenticeship programmes, through to Masters degrees and PHDs.
- IV. Engagement and communication in all forms, verbal, written and through behaviour invites all to feel heard. Anonymity with the launch of our staff survey (2023) which sought views on values and wellbeing demonstrates how the EDI network is adding value. EDI network members reviewed a draft and supported some re-wording and presentation changes to increase engagement and wider feedback, which has been successful. In addition, the Staff Briefings led by the Chief Executive and supported by the other Executives, allows for updates across a number of themes and provides an open communication platform which activity invites feedback from everyone in real time and is considered a valuable and supportive feature.

3.3 **Commitment 3: To utilise data and tracking to understand our starting point and supportive commitments**

Data is part of what we do as an organisation. DHCW utilises data to develop and guide meaningful equality, diversity and inclusion support features and initiatives. The aim is to capture and represent an accurate picture for all characteristics and diverse groups. The table below provides information of some of the data monitored for initiatives undertaken during quarter 1 and 2 of 2023-4.

Initiative	Description	Data and Tracking
Growing our own and building a pipeline	DHCW Talent Cohort	<ul style="list-style-type: none"> • 108 applications received and 81 successful placements. • Education programmes – detailed and tracked at organisational level within the People and OD team
Ten Talks	Topic: All things EDI	<ul style="list-style-type: none"> • Just under 200 employees attended the Ten Talk with many questions raised during the session. • Some staff attending the Ten Talk requested joining the EDI Network following the session • Other employees watched the Talk at a later stage as they couldn't join the live session
EDI Network	Network members engage in discussions on various matters pertaining to diversity and inclusion. Members	<ul style="list-style-type: none"> • 28 employees have joined the EDI Network • Meetings are held bi-monthly with actions and activities supported in intervening periods • Appendix 1 – notes some comments made by our network members

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	of the network provide valuable input which influence further activities and decisions on approaches	
Pride Parade	The Cardiff Pride Parade takes place annually.	<ul style="list-style-type: none"> • DHCW participation in the parade increased by 83% in 2023 • Employees from our LGBTQ+ community responded during Pride month expressing that they experienced inclusivity and felt really supported

3.4 Commitment 4: Analyse to better understand those opportunities and barriers

Deep analysis within the People and OD team has been a challenge and it is so important for us to better understand a range of opportunities and challenges, particularly those real challenges faced by people, with unique lived experiences.

On a one-to-one basis the POD team work exceptionally well but for wider analysis the dependency for employees to enter, quite often sensitive information into survey and our systems e.g., ESR can be a barrier.

By building trust and confidence through the work undertaken by the EDI officer and EDI Network it is hoped that those who do not provide information to help us better shape support and awareness will hopefully feel more confident to do so. This is especially important for those employees with an invisible non-physical disability. EDI network members heard about this by a member of the workforce with lived experience, he referred to this as his hidden disability. This is something we are keen to better understand, make positive adaptations and put good support features in place. For example, following this session the People and OD Director discussed with the Estates leadership that as part of their next steps with office re configurations that having some smaller and private working spaces will help some members of the workforce as large open plan offices can often be noisy and overwhelming for some people.

- I. Based on the recruitment data captured in ESR for the previous financial year (2022-23), 16 staff recruited classify as disabled. As a Disability Confident Employer, DHCW makes provision for reasonable adjustments, placing the organisation in a good position to continue to attract and retain disabled people and support the development of their careers.
- II. Diversity data is monitored to determine opportunities to achieve a diverse workforce. The percentage of DHCW's workforce reported as Black, Asian, Minority Ethnic is currently 10.74% and this is monitored monthly. The November 2022 Census in Wales provided a figure of c5.4% as the percentage of the population who identified within this group. DHCW has good representation in the workforce compared with the latest Census figures for Wales. A number of supportive themes have taken place over the first two quarters of 2023, these include new recruitment material featuring a diverse workforce which are now used on DHCW open days, for our visits to schools, colleges, and universities and at wider careers fairs alongside positive imagery in our external messaging and on the DHCW website.

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- III. Exit interview data is gathered and analysed to track trends for opportunities and to determine any barriers or challenges. The average turnover rate is 7.8% from the first quarters of this year. There is keen focus on retention interviews to retain our talent and reviewing local pulse surveys and staff surveys, and additionally working closely with the trade union representatives to identify and tackle any hot spots where turnover is high. The People and OD team will then support some focussed work with managers and staff in these teams as forms part of embedded practice for the Business Partnering team within the POD Directorate.
- IV. The lived experience shared by DHCW employees classifying as disabled led to an assessment to address any barriers to accessibility. During quarter 1-2 the DHCW Estates team conducted a review of DHCW buildings to assess accessibility, ensuring that estates plans are progressed to meet needs.
- V. An external audit on our hybrid working was carried out in quarter 2 with key features on well-being and people, this achieved substantial assurance and is being presented to the Audit Committee in October 2023.

3.5 **Commitment 5: Visible and active sponsorship through our partners**

As outlined in the Strategic Equality Plan, the areas of focus are Black, Asian and Minority Ethnic, Disability, LGBTQ+, Welsh Language and Women in Leadership. The Board and Executive are visible and keen sponsors of the People and OD Strategy and the Strategic Equality Plan. A summary is provided below of the range of further visible and active sponsorship organisationally and nationally.

- I. The EDI Network meetings are attended by the Director of People and OD and the appointed Equality Champion (Independent Member), demonstrating senior leadership commitment. Discussions at Network meetings have led to gathering of important information resulting in a review of some of our selection practices, including greater consideration for reasonable adjustments for employees classifying with autism. Network members are integrated into activities, advising on important matters such as their input during the development of the questionnaire for the staff launched earlier this year.
- II. DHCW is represented and participates a in the various NHS All Wales groups and meetings across the EDI agenda, Equality Leadership Group (ELG) which discusses pertinent matters such as gender identity and transitioning. As a group, the ELG jointly participate to activities such as Windrush with a view to share information and upskill knowledge organisationally. The Anti-Violence Collaborative meeting with Welsh Government discusses women's rights and violence and aggression experienced by staff in the NHS, and actions being undertaken by the Police Services.
- III. DHCW supports other national initiatives such as the roll out of the Anti-racism survey carried out by Diverse Cymru on behalf of Welsh Government. There is currently work undertaken in preparation for the roll out of the NHS Wales survey during quarter 3.
- IV. DHCW includes Welsh Language as one of the key areas of Strategic focus. This is driven by the Welsh Language lead for DHCW and there has been an increase intake for Welsh Language training during quarter 1-2 with further focus planned for quarters 3 and 4 of 2023-24.

DHCW demonstrates visible and active sponsorship holding accreditation for the Diversity and Inclusion Standard BS 76005. A self-inspection is currently being undertaken in readiness for the ISO 30415 audit planned for quarter 3.

- VI. The staff conference had many great speakers, but one in particular was Christ Moon MBE, we were fortunate to have had an open session where he shared his real-life story overcoming incredible odds. Chris spoke with passion and humour on overcoming challenges as a landmine survivor and triumph as an amputee marathon runner.
- VII. The organisation adopts a systematic approach to Equality Impact Assessments (EIAs). Equality is included as a matter for discussion at the Wales Informatics Assurance Group where projects, schemes and policies are presented.

4. FOCUS FOR NEXT 3-6 MONTHS UNDER STRATEGIC EQUALITY PLAN COMMITMENTS

Section 3 provides an update of some of the actions undertaken during quarter 1-2 of this financial year.

This section highlights the areas of keen focus and planned activity over the next two quarters of 2023-24.

- I. Ongoing engagement and integration will continue through the EDI network with bi-monthly held meetings. Planned representation, Events and activities will continue to be supported.
- II. The launch of the NHS Wales Staff Survey is diarised for the 2nd of October 2023. The People and OD team will work with the Comms team to support good engagement and completion rates and the POD team will review the findings and provide these to the Executive team and each Directorate Manager. This report will likely give us a good indication on how things are progressing and if any areas of further focus that we should be aware of and development activities to support improvements.
- III. DHCW currently holds the BS 76005 for Diversity and Inclusion which is being replaced by the ISO 30415 standard. The audit and certification process are represented below and activities to support information share have already commenced to support the stage 1 Audit in September 2023.



- IV. A centred approach, working closely with the EDI network members, POD team and the Communications Business Partner is being progressed to deliver a number of new Ten Talk sessions. This is alongside regular inputs into the Insider (in-house newsletter), with a number of articles supporting improved EDI awareness and understanding and highlighting support available for all the workforce, with a keen focus on well-being over the coming Autumn and Winter months.

Information has already been shared for some of activities we are supporting, these include Macmillan Coffee Morning, Black history month, food bank during the winter season, menopause awareness, International Men's Day, 'Movember' in support of men's health, International Woman's Day and Disability history month.

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5. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

There are no major risks identified for escalation at this stage to the SHA Board.

6. RECOMMENDATIONS

- 6.1 SHA Board is being asked to **NOTE** the following:
- The activities and initiatives undertaken to drive equality and inclusion in the organisation.
 - The value to the organisation of the establishment of the EDI Network in achieving the objectives outlined in the Strategic Equality Plan.
 - The next steps and planned activity in quarter 3 and 4 of 23-24.

7. APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Sarah Brooks, Organisational Development, Culture-Engagement Lead	04/09/2023 (v1)	Scrutiny
Sarah-Jane Taylor, Director of People and Organisational Development	15/09/2023 (v5)	Scrutiny and final version prepared and signed off
Weekly Executive Directors Meeting	16/08/2023	Noting
Management Board	17/08/2023	Noting
SHA Board	28/09/2023	Noting

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Appendix 1: What some of our ED&I Network Members had to say:

"The EDI network has made me feel more connected, more empowered, knowing I'm not alone in our efforts to champion and improve inclusion, and celebrate our diversity in DHCW and wider. It gives me hope we may help influence the changes that are within our power to improve what we in DHCW deliver to our populations who live in Wales." **Rebecca Meyrick**

"It has been eye-opening to hear people's stories and I am looking forward to what we can achieve as a Network moving forward." **Sarah Tunncliffe**

"We are so fortunate to have an abundance of human experiences in one Network, all collaborating to create one thing: Equality." **Rohie Khan**

"The network is giving me hope that I work for an organisation that enables staff to realise their full potential." **Sandra Chapman**

"It has made me realise that I have a network of members which I can call upon for advice on issues" **Vijay Halai**

"I have gained better awareness of the unconscious biases that patients and staff may encounter, further emphasising the importance of openness, active listening, and continuous learning." **Sara Lucena Araujo**

Our DHCW EDI network, set up this year, has such passion, drive and diverse representation it's wonderful. With each sharing of personal stories, I learn something new which makes me (and other members) think differently of how we can all better understand and support everyone. Making a positive difference is really important to me and with the work this network is taking forward I feel really proud to be a member. **SJ Taylor**

"I have already seen from others in the network that maintaining an inclusive environment that allows everyone to feel comfortable sharing ideas and being their authentic selves is key within the Organisation- lots of open ideas and discussions- and I have only attended one session!" **David Rees**

"I am astonished at the level of support amongst staff and colleagues at DHCW." **Marilyn Bryan-Jones**

"Through the network, I realise that everyone has a story to share. With each network engagement, I learn something new about fellow colleagues, other cultures and different characteristics." **Lenisha Wright**

"Becoming a better ally - by listening and learning to the personal lived experiences of the EDI Network members and the discussions in the meetings, as well as educating me, it has also inspired me to continue to learn more to understand how I can be a better ally for my colleagues." **Sarah Brooks**



GIG
CYMRU
NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

Strategic Equality Plan Progress Update

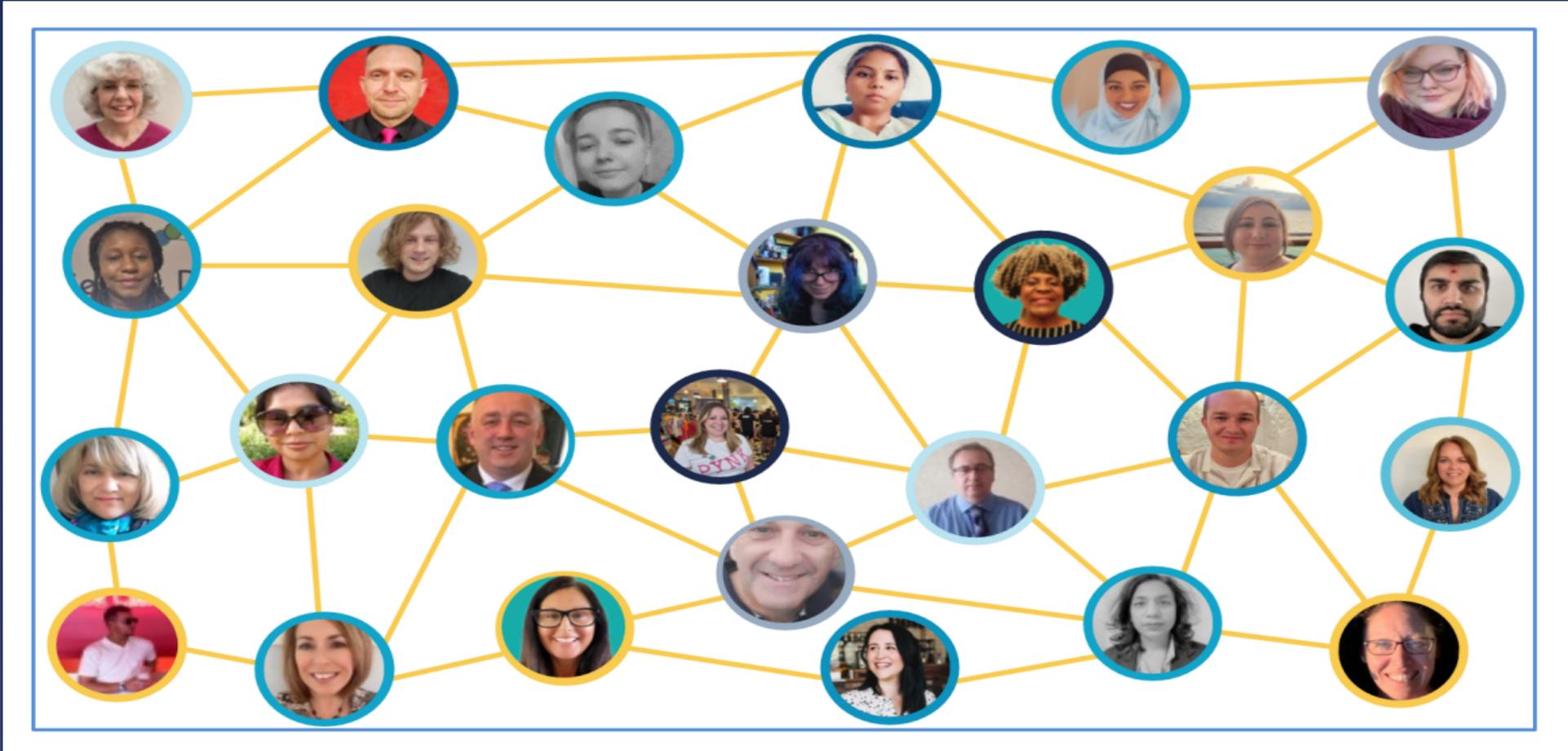
Sarah-Jane Taylor

Director of People and Organisational Development

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Supporting our People

Since the Strategic Equality Plan went live six months ago March 2023, there has been a number of commitments which have moved the plan ambitions forward – turning new focus into benefits for all



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Ensuring everyone is educated and held accountable



Grow your
own **talent**



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To utilise data and tracking to better understand challenges, analyse and review those opportunities and take forward and reduce barriers



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Visible and active sponsorship through our partners

ENGAGEMENT AND PARTICIPATION

- The All Wales Equality Leadership Group
- The Welsh Government Anti-Violence Collaborative group
- Anti-racism survey by Diverse Cymru on behalf of Welsh Government
- NHS All Wales Staff Survey
- External Audit
- Digital Directors Group, HEIW, WIDI, Director Peer Groups, BCS, Gartner and Education sector

STANDARDS

- BS 76000 Valuing People Standard
- BS 76005 Diversity and Inclusion, ISO30415
- GOLD LEVEL Corporate Health Standard
- Audit – internal and external Audit
- Legislation compliance

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"It has been eye-opening to hear people's stories and I am looking forward to what we can achieve as a Network moving forward." Sarah Tunnicliffe

"The network is giving me hope that I work for an organisation that enables staff to realise their full potential. Sandra Chapman

"It has made me realise that I have a network of members which I can call upon for advice on issues"

Vijay Halai
"The network is helping me become a better ally to my colleagues." S Brooks

What EDI Network have said

"We are so fortunate to have an abundance of human experiences in one Network, all collaborating to create one thing: Equality." Rohie Khan

"I have gained better awareness of the unconscious biases that patients and staff may encounter, further emphasising the importance of openness, active listening, and continuous learning."
Sara Lucena Araujo

Our DHCW EDI network, set up this year, has such passion, drive and diverse representation it's wonderful. With each sharing of personal stories, I learn something new which makes me (and other members) think differently of how we can all better understand and support everyone. Making a positive difference is really important to me and with the work this network is taking forward I feel really proud to be a member. Sarah-Jane Taylor

"I have already seen from others in the network that maintaining an inclusive environment that allows everyone to feel comfortable sharing ideas and being their authentic selves is key within the Organisation- lots of open ideas and discussions!" David Rees

"The EDI network has made me feel more connected, more empowered, knowing I'm not alone in our efforts to champion and improve inclusion, and celebrate our diversity in DHCW and wider. It gives me hope we may help influence the changes that are within our power to improve what we in DHCW deliver to our populations who live in Wales." Rebecca Meyrick

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"I am astonished at the level of support amongst staff and colleagues at DHCW." Marilyn Bryan-Jones

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

Date of Board Meeting	28 September 2023
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Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Name of Committee	Digital Governance and Safety Committee
Chair of Committee	Rowan Gardner, Independent Member
Lead Executive Director	Rhidian Hurle, Executive Medical Director
Date of Last Meeting	3 August 2023
Prepared By	Carys Richards, Corporate Governance Support Manager
Presented By	Rowan Gardner, Chair of Committee

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

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STRATEGIC MISSION	Be the trusted strategic partner and a high quality, inclusive and ambitious organisation
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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
If more than one standard applies, please list below:	

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

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		

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IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Should the appropriate assurance not take place, there could be unforeseen quality and safety implications to the DHCW services provided
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implication related to the activity outlined in this report
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
DG&S	Digital Governance & Safety		

Definitions	
ALERT	Alert the Board/Committee to areas of non-compliance or matters that need addressing urgently
ASSURE	Detail any areas of assurance that the Committee has received
ADVISE	Detail any areas of ongoing monitoring where an update has been provided to the Committee

PUBLIC SESSION

ALERT	<ul style="list-style-type: none"> N/A
ASSURE	<ul style="list-style-type: none"> The Committee received the following Assurance Reports <ul style="list-style-type: none"> Information Governance Assurance Report Informatics Assurance Report Information Services Assurance Report Research & Innovation Strategy Assurance Report The Incident Review and Organisational Learning Annual Report was comprehensive and well presented.

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	<ul style="list-style-type: none"> The Digital Programme Overview Update was received and discussed, including the ongoing organisational challenge around resource and the inherent impact on delivery of key programmes.
ADVISE	<ul style="list-style-type: none"> The Corporate Risk Register – PUBLIC, was discussed and it was noted the number of new risks escalated onto the risk register that are impacted by the current financial position.

PRIVATE SESSION

ALERT	<ul style="list-style-type: none"> N/A
ASSURE	<ul style="list-style-type: none"> The Cyber Security Assurance Report was received and the Independent Member training as part of the Board development session was discussed noting how future sessions could be delivered to maximise the amount of cyber updates and information available. The Committee received the Early insight into the WASPI Code of Conduct Consultation process update, noting the importance of a robust Information Governance framework required to deliver digital public health and care services and welcomed the thinking on underpinning the presentation to support optionality and value for money.
ADVISE	<ul style="list-style-type: none"> The Corporate Risk Register – PRIVATE was discussed in detail, and the surfacing of specific risks.

Delegated action taken by the committee:

The Committee approved 6 policies;

- Access Control
- Acceptable Use
- Information Security
- Wales Informatics Assurance
- NEW Vulnerability Management
- NEW Service Management

Date of next committee meeting:

2 November 2023

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