Cyfarfod Bwrdd Iechyd a Gofal Digidol Cymru - Cyhoeddus

Thu 28 July 2022, 10:00 - 13:30

ZOOM

Agenda

10:00 - 10:00 0 min	**1. MATERION RHAGARWEINIOL**

1.1. Croeso a Chyflwyniadau

I'w Nodi   *Cadeirydd*

1.2. Ymddiheuriadau am Absenoldeb

I'w Nodi   *Cadeirydd*

1.3. Datganiad o Fuddiannau

I'w Nodi   *Cadeirydd*

10:00 - 10:10 10 min	**2. I'W CYMERADWYO A'I NODI**

2.1. Cofnodion Cyfarfod y Bwrdd 26 Mai 2022 heb eu cadarnhau

I'w Cymeradwyo   *Cadeirydd*

i. Materion yn Codi

📄 2.1 29062022-LT-DHCW SHA Board Meeting Minutes 20220526 V2-en-cy-C.pdf (23 pages)

2.2. Cofnodion Cyfarfod y Bwrdd 26 Mai 2022 heb eu cadarnhau

I'w Cymeradwyo   *Cadeirydd*

i. Materion yn Codi

2.2.1.

2.3. Cofnodion heb eu cadarnhau o Gyfarfod Bwrdd 14 Mehefin 2022

I'w Cymeradwyo   *Cadeirydd*

i. Materion yn Codi

📄 2.2 DHCW SHA Board Meeting Minutes 20220614 V2-en-cy-C.pdf (7 pages)

2.4. Cofnodion Gweithredu

I'w Nodi   *Cadeirydd*

📄 2.4 Action Log.pdf (1 pages)

2.5. Blaengynllun Gwaith

I'w Nodi   *Ysgrifennydd y Bwrdd*

📄 2.5 Forward Workplan Report.pdf (4 pages)

10:10 - 10:40
30 min

3. PRIF AGENDA - I'W DRAFOD

3.1. Cyflwyniad Gwrando a Dysgu ar y Cyd – Gwasanaethau Sgrinio a Sut y Cânt Gefnogaeth

I'w Drafod   *Cyfarwyddwr Meddygol Gweithredol*

10:40 - 11:00
20 min

4. PRIF AGENDA - I'W ADOLYGU

4.1. Adroddiad y Cadeirydd

I'w Nodi   *Cadeirydd*

4.2. Adroddiad y Prif Swyddog Gweithredol

I'w Nodi   *Prif Swyddog Gweithredol*

11:00 - 11:50
50 min

5. PRIF AGENDA - EITEMAU STRATEGOL

5.1. Fframwaith Gwrando a Dysgu ar y Cyd ac Adolygiad Blynyddol

I'w Nodi   *Cyfarwyddwr Meddygol Gweithredol*

5.2. Tasglu Recriwtio – Gwersi a Ddysgwyd

I'w Nodi   *Cyfarwyddwr Pobl a Datblygu Sefydliadol*

11:50 - 13:25
95 min

6. PRIF AGENDA - LLYWODRAETHU, RISG, PERFFORMIAD A SICRWYDD

6.1. Adroddiad Cyllid

I'w Nodi   *Cyfarwyddwr Gweithredol Cyllid*

6.1 REP_DHCW Finance Report June 2022 D-07.pdf (23 pages)

6.1i July 2022 Board Slides Final-07.pdf (14 pages)

6.2. Adroddiad Perfformiad Sefydliadol Integredig

For Discussion   *Cyfarwyddwr Cynllunio a Pherfformiad a Phrif Swyddog Masnachol*

6.2 DHCW IOPR Cover Sheet Apr-Jun 2022.pdf (5 pages)

6.2i REP-DHCW Board Report 2206-JUNE 2022 V1 (1).pdf (33 pages)

6.3. Adroddiad Fframwaith Sicrwydd y Bwrdd

I'w Cymeradwyo   *Ysgrifennydd y Bwrdd*

6.3 Board Assurance Framework Report.pdf (7 pages)

6.3i Appendix A BAF Dashboard Report July 2022.pdf (10 pages)

6.4. Adroddiad y Gofrestr Risgiau Corfforaethol

I'w Drafod   *Ysgrifennydd y Bwrdd*

6.4 Risk Management Report.pdf (7 pages)

6.4i Appendix A Risk and BAF Forward Workplan 202223 V1.pdf (2 pages)

6.4ii Appendix B DHCW Corporate Risk Register.v1.pdf (12 pages)

6.5. Adroddiad Crynhoi Cynnydd Pwyllgor Archwilio a Sicrwydd

I'w Nodi   *Cadeirydd y Pwyllgor*

6.5 Audit and Assurance Committee Highlight Report 040722v1.pdf (6 pages)

6.6. Adroddiad Crynhoi Cynnydd y Fforwm Partneriaeth Lleol

I'w Nodi   *Cadeirydd Grŵp Ymgynghorol*

6.6 DHCW Local Partnership Forum Highlight Report June DRAFT.pdf (5 pages)

6.7. Adroddiad Crynhoi Cynnydd Rhwydwaith Digidol Aelodau Annibynnol

I'w Nodi   *Cadeirydd Rhwydwaith*

6.7 All Wales IM Digital Network Highlight Report 20.07.22v2.pdf (5 pages)

6.8. Adroddiad Crynhoi Cynnydd y Pwyllgor Taliadau a Thelerau Gwasanaeth

I'w Nodi   *Cadeirydd y Pwyllgor*

6.8 Remuneration and Terms of Service Committee Highlight Report 20220721.pdf (4 pages)

13:25 - 13:30
5 min

7. MATERION I GLOI

7.1. Unrhyw Fater Brys Arall

I'w Nodi   *Cadeirydd*

7.2. Dyddiad y Cyfarfod Nesaf

I'w Nodi   *Cadeirydd*

Dydd Iau 29 Medi

Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru – CYHOEDDUS – Cofnodion heb eu cadarnhau

Cofnodion cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd ddydd Iau 26 Mai 2022 fel cyfarfod rhithiol a ddarlledwyd yn fyw drwy Zoom.

🕐 10:00 i 13:30   📅 26 Mai 2022

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
Gareth Davies	GD	Cyfarwyddwr Gweithredol Dros Dro Gweithrediadau	Iechyd a Gofal Digidol Cymru
Ifan Evans	IE	Cyfarwyddwr Gweithredol Strategaeth	Iechyd a Gofal Digidol Cymru
Rhidian Hurle	RH	Cyfarwyddwr Meddygol Gweithredol	Iechyd a Gofal Digidol Cymru
Claire Osmundsen-Little	COL	Cyfarwyddwr Gweithredol Cyllid	Iechyd a Gofal Digidol Cymru
Grace Quantock	GQ	Aelod Annibynnol	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

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Yn bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Chris Darling	CD	Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Andrew Fletcher	AF	Aelod Cyswllt o'r Bwrdd – Undeb Llafur	Iechyd a Gofal Digidol Cymru
Nerys Hurford	NH	Cyfieithydd	Cyfieithiad Nerys Hurford
Carwyn Lloyd Jones	CLJ	Cyfarwyddwr Technoleg Gwybodaeth a Chyfathrebu (ar gyfer eitem 6.4)	Iechyd a Gofal Digidol Cymru
Sally Pritchard	SP	Prif Reolwr Prosiect (ar gyfer eitem 3.1)	Iechyd a Gofal Digidol Cymru
Michelle Sell	MS	Cyfarwyddwr Cynllunio a Pherfformiad a Phrif Swyddog Masnachol (ar gyfer eitemau 5.2 a 6.2)	Iechyd a Gofal Digidol Cymru
Sarah-Jane Taylor	SJT	Director of People & Organisational Development	Iechyd a Gofal Digidol Cymru
Laura Tolley	LT	Rheolwr Llywodraethu Corfforaethol	Iechyd a Gofal Digidol Cymru

Ymddiheuriadau	Teitl	Sefydliad
Rowan Gardner	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru

Acronymau			
Iechyd a Gofal Digidol Cymru	Iechyd a Gofal Digidol Cymru	SHA	Awdurdod Iechyd Arbennig
CEO	Prif Swyddog Gweithredol	DCT	Trosglwyddo Canolfan Ddata
UBRG	Uwch-berchennog Risg Gwybodaeth	MOU	Memorandwm Dealltwriaeth
DPIF	Cronfa Buddsoddi Blaenoriaethau Digidol	IMTP	Cynllun Tymor Canolig Integredig
ETR	Ceisiadau Prawf Electronig	BAF	Fframwaith Sicrwydd y Bwrdd

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Rhif yr Eitem	Manylion yr Eitem	Canlyniad	I'w gweithredu gan
	MATERION RHAGARWEINIOL		
1.1	**Croeso ac Ymddiheuriadau**	Nodwyd	Dim i'w nodi
	Croesawodd y Cadeirydd bawb i gyfarfod cyntaf y flwyddyn ariannol o Fwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru. Estynnodd y Cadeirydd groeso arbennig i Gareth Davis, Cyfarwyddwr Gweithredol Dros Dro Gweithrediadau, Ifan Evans, Cyfarwyddwr Gweithredol Strategaeth a Sarah-Jane Taylor, Cyfarwyddwr Pobl a Datblygu Sefydliadol gan nodi mai hwn oedd eu cyfarfod Bwrdd Awdurdod Iechyd Arbennig cyhoeddus cyntaf ers cael eu penodi.		
	Cadarnhaodd y Cadeirydd fod y cyfarfod yn cael ei ddarlledu'n fyw drwy Zoom. Yn ogystal, byddai'r recordiad ar gael drwy wefan DHCW ar gyfer unrhyw un nad oedd yn gallu cael mynediad i'r cyfarfod yn fyw. Roedd y 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 neu Saesneg.		
	Darparodd y Cadeirydd hysbysiadau cadw tŷ ynghylch agweddau technegol ffrydio byw'r cyfarfod, y seibiannau arfaethedig, a'r defnydd o'r agenda caniatâd ar gyfer eitemau 2.1 i 2.4.		
	Yna, amlinellodd y Cadeirydd yr eitemau o fewn yr agenda caniatâd a dywedodd y byddai aelodau'r Bwrdd yn cael cyfle i ddod ag unrhyw un o'r eitemau hynny ar y brif agenda er mwyn cael trafodaeth fwy llawn yn eitem 1.4.		
	Cyn bwrw ymlaen â'r agenda, rhoddodd y Cadeirydd wybod i'r Bwrdd am farwolaeth sydyn Konrad Kujawinski, Pennaeth Ansawdd a Rheoleiddio yn Iechyd a Gofal Digidol Cymru. Dywedodd y Cadeirydd fod Konrad yn aelod gwerthfawr iawn o Iechyd a Gofal Digidol Cymru a byddai colled fawr ar ei ôl. Ar ran y Bwrdd, a Iechyd a Gofal Digidol Cymru, estynnodd y Cadeirydd gydymdeimlad diffuant â theulu a ffrindiau Konrad.		
	Oedodd y Bwrdd am funudau o dawelwch.		
1.2	**Ymddiheuriadau am Absenoldeb**	Nodwyd	Dim i'w nodi
	Nodwyd ymddiheuriadau gan Rowan Gardner, Aelod Annibynnol Iechyd a Gofal Digidol Cymru.		
1.3	**Datganiadau o Fuddiannau**	Nodwyd	Dim i'w nodi
	Ni dderbyniwyd unrhyw ddatganiadau o fuddiannau mewn perthynas â'r agenda.		

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1.4	**Materion yn Codi** Ni nodwyd unrhyw eitemau ar yr agenda caniatâd gan aelodau'r Bwrdd ar gyfer eu symud i'r brif agenda.	Trafodwyd	Dim i'w nodi

AGENDA CYDSYNIO - I'W CHYMERADWYO

2.1	**Cofnodion y Cyfarfod a Gynhaliwyd ar 31 Mawrth 2022 sydd eto i'w Cadarnhau** **Penderfynodd y Bwrdd:** **GYMERADWYO** cofnodion cyfarfod diwethaf y Bwrdd a gynhaliwyd ar 31 Mawrth 2022.	Cymeradwywyd	Dim i'w nodi
2.2	**Cofnodion Gweithredu** Mae'r holl gamau gweithredu sy'n weddill wedi'u marcio fel rhai wedi'u cwblhau. **Penderfynodd y Bwrdd:** **NODI'R** log gweithredu.	Nodwyd	Dim i'w nodi
2.3	**Blaengynllun** **Penderfynodd y Bwrdd:** **NODI** cynnwys y Blaengynllun.	Nodwyd	Dim i'w nodi
2.4	**Y Diweddaraf am Hyrwyddwyr Bwrdd** **Penderfynodd y Bwrdd:** **GYMERADWYO** Rolau Anogwr y Bwrdd.	Cymeradwywyd	Dim i'w nodi

PRIF AGENDA

RHAN 3 – I'W DRAFOD

3.1	**Cyflwyniad Gwrando a Dysgu ar y Cyd – Gwneud Cais am Brawf Electronig**		
	Cyflwynodd Rhidian Hurle, Cyfarwyddwr Meddygol Gweithredol (RH) Sally Pritchard, Prif Reolwr Prosiect (SP) i gyflwyno'r Cyflwyniad Gwrando a Dysgu ar y Cyd am Gais am Brofion Electronig. Amlygwyd y canlynol o'r cyflwyniad: • Nod y prosiect oedd digideiddio pob cais am brawf mewn gofal sylfaenol ac eilaidd ledled Cymru; • Roedd ETR yn fyw yn: - Profion gwaed - Radioleg o fewn Ysbyty Brenhinol Morgannwg, Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg	Trafodwyd	Dim i'w nodi

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- Hysbysiadau canlyniad • Roedd ETR yn cael ei ddatblygu yn: - Histopatholeg - Fflebotomi - Cardioleg - Gofal Sylfaenol Radioleg • Roedd ETR i'w ariannu yn: - Endosgopi - Spirometreg • Rhannwyd trosolwg o'r broses ETR; • Amlinellwyd nodau'r prosiect fel a ganlyn: - Dileu'r broses bapur - Gwella profiad y defnyddiwr - Digideiddio fetio - Cyflawni effeithlonrwydd - Darparu gwasanaeth digidol di-dor, cyflymach o'r dechrau i'r diwedd • Nodwyd y prif gyfyngiadau a'r problemau ar gyfer Iechyd a Gofal Digidol Cymru: - Gwasanaeth Clinigol ac Ymgysylltu - Dylunio a Phroses - Integreiddio a Safonau - Cyfyngiadau Lleol a Rhwydwaith • Nodwyd y prif gyfyngiadau a phroblemau ar gyfer Defnyddwyr: - Cysylltedd - Mynediad i galedwedd a nwyddau traul ar wardiau, yn enwedig argraffwyr ar gyfer labeli sampl - Newid Busnes - Cyfarwyddyd gan Arweinwyr Clinigol i ddefnyddio ETR a Hysbysiadau Canlyniad - Adnodd Bwrdd Iechyd priodol - Cefnogaeth TG Rheng Flaen Leol (24/7) • Roedd cynnydd sylweddol wedi'i wneud yn y defnydd o ETR o fewn Byrddau Iechyd, a llwyddiant mawr oedd y cynnydd yn y defnydd o fewn Bwrdd Iechyd Prifysgol Caerdydd a'r Fro gan gynyddu o 30% i dros 80%. Yn ogystal, roedd Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg Ysbyty Brenhinol Morgannwg			

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Gofal Digidol Cymru 20220526

wedi gwneud cynnydd aruthrol o ran profion Radioleg;

- Roedd pob Bwrdd Iechyd yn defnyddio gwersi a ddysgwyd drwy gydol y prosiect ETR ac yn cydweithio â Iechyd a Gofal Digidol Cymru i gynyddu defnydd a oedd yn gadarnhaol iawn;

- Amlygwyd y gwersi allweddol a ddysgwyd fel a ganlyn:
  - Cydweithio gyda defnyddwyr – Nodwyd bod ETR wedi'i ddylunio gyda chlinigwyr cyn datblygu
  - Adnodd y Bwrdd Iechyd
  - Paratoi safle ar gyfer 'Go Live' - rhaid bod yna ddigon o argraffwyr, digon o gyfrifiaduron personol, ynghyd ag arweinydd clinigol cefnogol a nodwyd
  - Cydweithio – Roedd hyn yn gweithio'n dda gyda Byrddau Iechyd.
  - Cynllunio ar gyfer Busnes fel Arfer – Adborth parhaus a chydweithio parhaol â Byrddau Iechyd ar ôl gweithredu.

Gofynnodd Marian Wyn Jones, Aelod Annibynnol (MWJ) sut y gallai Bwrdd Iechyd a Gofal Digidol Cymru helpu Byrddau Iechyd eraill i fod yn ymwybodol o fanteision ETR. Mewn ymateb, esboniodd SP fod angen i'r neges ar gyfer defnyddio ETR gael ei rhaeadru drwy sefydliadau. Pwysleisiodd RH bwysigrwydd anogaeth glinigol ETR o fewn Byrddau Iechyd.

Cododd David Selway, Aelod Annibynnol, her y model ariannu gan Lywodraeth Cymru i gefnogi busnes fel arfer. Mewn ymateb, esboniodd Claire Osmundsen-Little, Cyfarwyddwr Gweithredol Cyllid (COL) fod y broses bresennol o ran cyllid yn cael ei gwneud yn ofynnol bod gan Iechyd a Gofal Digidol Cymru Gytundebau Lefel Gwasanaeth gyda Byrddau Iechyd ac Ymddiriedolaethau a oedd yn ymdrin ag agweddau o ddydd i ddydd, pe bai angen cyllid ychwanegol ar gyfer datblygiadau pellach, byddai hyn yn mynd drwy gais am wasanaeth drwy Iechyd a Gofal Digidol Cymru. Tynnodd COL sylw at bwysigrwydd rhagfynegi cyfrifiadau cyllid yn gywir wrth symud ymlaen, gan roi sylwadau ar fanteision y nifer sy'n manteisio ar y gwasanaeth a'r gwerth i GIG Cymru pe bai hyn yn cael ei wneud yn gynaliadwy.

Ychwanegodd RH sylw terfynol fod ETR yn galluogi gwneud cais am brofion o unrhyw le yng Nghymru gan ychwanegu at y fantais y gall clinigwyr weld canlyniadau unrhyw le yng Nghymru, waeth bynnag y Bwrdd Iechyd.

Penderfynodd y Bwrdd:

DRAFOD y Cyflwyniad Gwrando a Dysgu ar y Cyd – Gwneud Cais am Brofion Electronig

RHAN 4 - I'W HADOLYGU

4.1	**Adroddiad y Cadeirydd**	Nodwyd	Dim i'w nodi
	Amlinellodd y Cadeirydd yr uchafbwyntiau canlynol o'r adroddiad:-		
	• Cynhaliwyd Cyfarfod Gweinidogol gyda Chadeiryddion ar 24 Mawrth 2022;		
	• Cynhaliwyd Gwobrau Staff Iechyd a Gofal Digidol Cymru ddechrau mis Ebrill gyda'r gwobrau'n cyd-fynd â'r nodau llesiant a geir yn Neddf Llesiant Cenedlaethau'r Dyfodol;		
	• Cyfarfodydd Pwyllgor – Yn unol ag ymrwymiad Iechyd a Gofal Digidol Cymru i fod yn agored a thryloyw, o fis Mai 2022 ymlaen mae cyfarfodydd Pwyllgor cyhoeddus yn cael eu cofnodi a'u postio ar wefan Iechyd a Gofal Digidol Cymru;		
	• Amcanion y Cadeirydd - Roedd y rhain wedi'u cyflwyno ac roedd cyfarfod adolygu gyda'r Gweinidog wedi'i drefnu ar gyfer Mehefin 2022;		
	• Swydd Wag Aelod Annibynnol Iechyd a Gofal Digidol Cymru – Roedd y broses hon yn un barhaus ac wedi symud ymlaen yn dda;		
	• Cyfarfod Rhagarweiniol gyda Chomisiynydd Cenedlaethau'r Dyfodol Cymru – Roedd y drafodaeth hon yn canolbwyntio ar sgiliau'r gweithlu a chynhwysiant digidol a'r rô sydd gan Iechyd a Gofal Digidol Cymru yn y ddau faes hyn;		
	• Roedd nifer o Sesiynau Briffio Bwrdd a Sesiynau Datblygu'r Bwrdd wedi'u cynnal ers cyfarfod diwethaf y Bwrdd, a rhestrwyd y rhain yn yr adroddiad.		
	Penderfynodd y Bwrdd:		
	NODI cynnwys adroddiad y Cadeirydd.		
4.2	**Adroddiad y Prif Swyddog Gweithredol**	Nodwyd	Dim i'w nodi
	Amlinellodd Helen Thomas (HT), Prif Swyddog Gweithredol y pwyntiau allweddol yn yr adroddiad:		
	• Strwythur Ymateb Brys – Roedd hwn bellach wedi'i dynnu i lawr. Fodd bynnag, roedd gofynion parhaus yn y rhaglen frechu a fyddai'n parhau i esblygu;		
	• Briffio Staff – Mynychodd Ifan Evans, Cyfarwyddwr Gweithredol Strategaeth (IE) ac ymunodd dros 500 o staff â'r briffio staff rhithiol fis diwethaf. Cafodd y briffio dderbyniad da;		
	• Diweddariad ar y Portffolio Meddyginiaethau Digidol – Ers cyhoeddi'r adroddiad bu datblygiadau pellach yn y portffolio gydag ailddechrau'r fframwaith caffael, a thrwy ymgysylltu â chyflenwyr, nodwyd meysydd yr oedd angen eu mireinio. Byddai'r caffaeliad rhagnodi a gweinyddu meddyginiaethau		

electronig (ePMA) yn cael ei ailgyhoeddi a rhagwelwyd y byddai'r contract yn cael ei gyflwyno i'r Bwrdd ym mis Medi i'w gymeradwyo;

- Marwolaeth drist y Pennaeth Ansawdd a Rheoleiddio – atgyfnerthwyd sylwadau cynharach y Cadeirydd gan HT;

- Recriwtio Cyfarwyddwr Gweithredol – esboniodd HT ei bod yn bleser cael y penodiadau diweddaraf o'r Tîm Gweithredol yn eu swyddi a chroesawodd Ifan Evans, Cyfarwyddwr Gweithredol Strategaeth, Gareth Davis, Cyfarwyddwr Gweithredol Dros Dro Gweithrediadau a Sarah-Jane Taylor, Cyfarwyddwr Pobl a Datblygu Sefydliadol yn ffurfiol i'r Tîm Gweithredol;

- Sesiwn Ymgysylltu Strategol Bwrdd Iechyd Prifysgol Caerdydd a'r Fro a gynhaliwyd ym mis Mai 2022;

- Cynhadledd Staff – Diolchodd HT i'r holl staff a gymerodd ran yn y gynhadledd gan ganmol y tîm Cyfathrebu, a phawb a fu'n ymwneud â chynnal y diwrnod;

- Achrediad Awdurdod Ystadegau'r DU – dywedodd HT fod yr achrediad hwn yn hynod gadarnhaol i Iechyd a Gofal Digidol Cymru gan longyfarch y tîm a'r sefydliad am gyflawni hyn;

- Rhaglen Gwybodeg Canser – Cadarnhaodd HT ddyddiad diwygiedig ar gyfer disodli Canisc, gydag Ymddiriedolaeth GIG Prifysgol Felindre, o ganol mis Tachwedd 2022, gyda Byrddau Iechyd yn bwriadu mynd yn fyw cyn mis Tachwedd 2022.

Penderfynodd y Bwrdd:

NODI cynnwys adroddiad y Prif Swyddog Gweithredol.

	RHAN 5 - EITEMAU STRATEGOL		
5.1	**Adroddiad Fframwaith Sicrwydd y Bwrdd** Cyflwynodd Chris Darling, Ysgrifennydd y Bwrdd (CD) Fframwaith Sicrwydd y Bwrdd gan dynnu sylw at y canlynol: • Cymeradwyodd y Bwrdd Strategaeth Fframwaith Sicrwydd y Bwrdd ym mis Mai 2021 ac elfen allweddol o'r strategaeth oedd datblygu adroddiad Fframwaith Sicrwydd y Bwrdd; • Roedd adroddiad Fframwaith Sicrwydd y Bwrdd yn canolbwyntio'n llwyr ar y risgiau i gyflawni cenadaethau strategol y sefydliad; • Cynlluniwyd adroddiad Fframwaith Sicrwydd y Bwrdd i roi trosolwg a sicrwydd i'r Bwrdd bod y sefydliad ar y trywydd iawn i gyflawni'r cenadaethau strategol;	Cymeradwywyd	Dim i'w nodi

- Mynegwyd y cenadaethau strategol ym mhapur clawr yr adroddiad, a neilltuwyd pob cenhadaeth i arweinydd gweithredol;

- Roedd templed yr adroddiad yn cynnwys datganiad derbynioldeb risg Iechyd a Gofal Digidol Cymru a gymeradwywyd ym mis Tachwedd 2021 a oedd yn cynnwys y datganiad 'Rhaid i Iechyd a Gofal Digidol Cymru gymryd risgiau i gyflawni ei nodau strategol a sicrhau canlyniadau buddiol i randdeiliaid';

- Roedd gwaith yn cael ei wneud i neilltuo archwaeth risg i bob cenhadaeth strategol, a byddai hwn yn cael ei gyflwyno i'r Bwrdd ym mis Gorffennaf i'w gymeradwyo;

- Cynigiwyd y byddai adroddiad Fframwaith Sicrwydd y Bwrdd yn cael ei gyflwyno i'r Bwrdd ddwywaith y flwyddyn a byddai hyn yn rhoi digon o gyfle i'r Bwrdd drafod cenadaethau strategol a bod yn ymwybodol o risgiau allweddol a chynlluniau i'w lliniaru.

CD yn trosglwyddo i bob arweinydd gweithredol i roi trosolwg o bob un o'u cenadaethau strategol penodedig;

Cyn rhoi'r trosolwg, dywedodd IE mai sicrwydd oedd y ffocws, yn hytrach nag edrych ar reolaethau manwl a phwysleisiodd fod y ddogfen yn strategol ac yn cwmpasu'r sefydliad cyfan.

Tynnodd IE sylw at y canlynol ar gyfer cenhadaeth strategol 1 - *Galluogi Trawsnewid Digidol i gefnogi gofal cyson cydgysylltiedig*

Nod y genhadaeth strategol:

- Argaeledd a Llif Gwybodaeth: Datblygu agwedd 'llwyfan agored' at arloesi digidol, drwy ymateb i safonau cenedlaethol ar gyfer sut mae data, meddalwedd a thechnolegau'n gweithio gyda'i gilydd, a sut y gall partneriaid allanol weithio gyda'r llwyfan digidol cenedlaethol a'r adnodd data cenedlaethol
- Diogelu Data Cleifion: Datblygu fframwaith Llywodraethu Gwybodaeth a Seiberddiogelwch, safonau a mecanweithiau sy'n blaenoriaethu diogelwch a chyfrinachedd cleifion a defnyddwyr gwasanaeth, ac yn diogelu data rhag bygythiadau allanol a mewnol, gan arwain at ddata'n aros yn ddiogel ac ymddiried yn GIG Cymru i gadw gwybodaeth bersonol cleifion a defnyddwyr gwasanaeth
- Seilwaith Cynaliadwy: Datblygu a chynnal seilwaith cenedlaethol o ansawdd uchel, gan drosglwyddo i'r Cwmwl er mwyn sicrhau gwell argaeledd, dibynadwyedd, diogelwch, gwarchodaeth, cyflymder ac ystwythder

Disgrifiad o'r Risg:
Os na fydd Iechyd a Gofal Digidol Cymru yn cyd-gynllunio gwasanaethau gyda defnyddwyr a gefnogir gan safonau cyffredin a ffyrdd cydweithredol o weithio, yna efallai na fydd datblygiad yn diwallu anghenion defnyddwyr a byddai cymhlethdod a seilos ar draws

systemau Iechyd a Gofal Digidol Cymru a fyddai'n arwain at anallu i drawsnewid yn gyflym.

Roedd y rheolaethau allweddol sydd ar waith yn cynnwys, ond heb fod yn gyfyngedig i:
Fframweithiau Llywodraethu Gwybodaeth, fframweithiau Seiber, Bwrdd Safonau Gwybodaeth, a Bwrdd Safonau Technegol.

Camau ymlaen:
- Bwrdd Awdurdod Iechyd Arbennig yn cymeradwyo'r strategaeth Pensaernïaeth Agored a'r Cynllun Gweithredu
- Creu cynllun gweithredu ar gyfer y Strategaeth Ddata NDR
- Creu cynllun gweithredu ar gyfer strategaeth y Cwmwl

Tynnodd IE sylw at y canlynol ar gyfer cenhadaeth strategol 3 - *Ehangu cynnwys, argaeledd ac ymarferoldeb y cofnod iechyd a gofal digidol fel bod ansawdd gofal a thriniaeth yn cael ei wella*

Nod y genhadaeth strategol:

- Grymuso Gweithwyr Proffesiynol Gofal Iechyd Digidol: Gwella ac ehangu cynnwys, argaeledd ac ymarferoldeb y Cofnod Iechyd a Gofal Digidol, agnostig o ffiniau byrddau iechyd a daearyddol a chefnogi gwneud penderfyniadau ar sail tystiolaeth a chysylltedd gan ddefnyddio e-lyfrgell GIG Cymru a chyfres Microsoft 365
- Grymuso Cleifion yn Ddigidol: Darparu gwasanaethau digidol i gleifion a'r cyhoedd i alluogi rhyngweithio di-dor gyda gwasanaethau iechyd a gofal yn cefnogi cleifion i gyfranogi'n llawn yn eu hiechyd a'u lles eu hunain

Disgrifiad o'r Risg:
Pe bai Iechyd a Gofal Digidol Cymru yn methu ag ehangu cynnwys, argaeledd ac ymarferoldeb y Cofnod Iechyd a Gofal Digidol ar y cyflymder gofynnol yna gallai gwybodaeth fod yn anghyflawn, yn anghyson, neu'n cael ei chadw mewn mannau gwahanol a fyddai'n arwain at lai o allu i ddefnyddio gwybodaeth i lywio gofal a grymuso dinasyddion, gan arwain at ganlyniadau gwell.

Roedd y rheolaethau allweddol sydd ar waith yn cynnwys, ond heb fod yn gyfyngedig i:
Byrddau rheoli gwasanaeth, Byrddau prosiect, Adborth defnyddwyr clinigol ac Adolygu digwyddiadau a dysgu.

Camau ymlaen:
- Mwy o Brofiad a Chyfranogiad Defnyddwyr; goruchwylio gweithrediad systemau newydd ar brofiad clinigol y claf gan sicrhau ystyriaeth o adborth ar bob lefel

Amlygodd Gareth Davis, Cyfarwyddwr Gweithredol Dros Dro Gweithrediadau (GD) y canlynol ar gyfer cenhadaeth strategol 2 -

Darparu technoleg, cynhyrchion data a gwasanaethau o ansawdd uchel i gefnogi effeithlonrwydd a gwelliannau mewn prosesau gofal

Nod y genhadaeth strategol:

- Iechyd y Cyhoedd: Datblygu, gweithredu a chynnal set o wasanaethau digidol cenedlaethol o ansawdd uchel i gefnogi Rhaglenni atal ac ymyrraeth gynnar Iechyd y Cyhoedd.
- Iechyd Sylfaenol, Cymunedol a Iechyd Meddwl: Creu seilwaith digidol ar draws gofal sylfaenol a chymunedol drwy ddatblygu, gweithredu a chynnal set o wasanaethau digidol cenedlaethol o ansawdd uchel sy'n adlewyrchu modelau newydd o ofal lleol, yn nes at y cartref
- Gofal Wedi'i Gynllunio a Gofal Heb ei Drefnu: Datblygu, gweithredu a chynnal set o wasanaethau digidol cenedlaethol o ansawdd uchel i alluogi modelau newydd o ofal a rheolaeth cleifion wedi'i gynllunio a heb ei drefnu.
- Diagnosteg: Datblygu, gweithredu a chynnal set o wasanaethau digidol cenedlaethol o ansawdd uchel i alluogi moderneiddio diagnosteg.
- Meddyginiaethau Digidol: Datblygu, gweithredu a chynnal set o wasanaethau digidol cenedlaethol o ansawdd uchel i alluogi moderneiddio rheolaeth meddyginiaethau.

Disgrifiad o'r Risg:
Pe na bai Iechyd a Gofal Digidol Cymru yn darparu cynhyrchion a gwasanaethau cadarn, hygyrch, gwydn o ansawdd uchel yna byddai gallu partneriaid iechyd a gofal i ddarparu a moderneiddio gwasanaethau yn cael ei beryglu a fyddai'n arwain at ofal llai effeithiol, llai cynaliadwy a allai achosi niwed ac na fyddai'n bodloni disgwyliadau cleifion neu weithwyr proffesiynol.

Roedd y rheolaethau allweddol sydd ar waith yn cynnwys, ond heb fod yn gyfyngedig i'r:
- Grŵp Sicrwydd Pensaernïaeth Cymwysiadau
- Desg Gwasanaeth
- Bwrdd Gwasanaeth Gweithredol
- Cynllun Parhad Busnes
- Byrddau Rheoli Gwasanaeth

Camau ymlaen:
- Proses gadarn fwy ffurfiol, gan ail-wreiddio adborth ar ddyluniad sy'n canolbwyntio ar y defnyddiwr

- Symud i ddull sy'n seiliedig ar gynnyrch

Tynnodd RH sylw at y canlynol ar gyfer cenhadaeth strategol 4 - *Sbarduno gwerth ac arloesedd ar gyfer canlyniadau gwell a gofal*

Seiliedig ar Werth

Nod y genhadaeth strategol:

- Ymchwil ac Arloesi: Darparu mewnwelediadau ymchwil ac arloesedd ar gyfer gwella gwasanaethau
- Gwerth o ddata: Sbarduno gwerth o ddata ar gyfer canlyniadau gwell i gleifion a chynllunio gwasanaethau

Disgrifiad o'r Risg:
Os na fydd Iechyd a Gofal Digidol Cymru yn canolbwyntio ar ddefnyddio data ac arloesi i wella canlyniadau, yna efallai na fydd Iechyd a Gofal Digidol Cymru yn gwneud y gorau o werth i ddinasyddion a fyddai'n arwain at wasanaethau iechyd a gofal llai cynaliadwy a llai o fudd neu oedi i'r cyhoedd a chleifion.

Roedd rheolaethau allweddol sydd ar waith yn cynnwys ond heb fod yn gyfyngedig i:
- Grŵp Datblygu Gwybodaeth Cymraeg
- Strategaeth gwerth mewn iechyd
- Cofrestrau asedau gwybodaeth
- Uwch-berchennog Risg Gwybodaeth a Enwyd

Camau ymlaen:
- Strategaeth Ymchwil ac Arloesi - Datblygu'r strategaeth a'r cynllun gweithredu
- Ymgorffori prosesau ar gyfer cymeradwyo ymchwil ar ran y sefydliad
- Cryfhau perthnasoedd â sefydliadau partner yn enwedig darparwyr academaidd
- Addewid Data - Datblygu'r strategaeth a'r cynllun gweithredu

Tynnodd HT sylw at y canlynol ar gyfer cenhadaeth strategol 5 - *Dod yn bartner strategol yr ymddiriedir ynddo ac yn sefydliad sy'n perfformio'n dda, yn gynhwysol ac yn uchelgeisiol sy'n cefnogi ein gweithlu a'n rhanddeiliaid*

Nod y genhadaeth strategol:
- Cryfhau Perthynas â Rhanddeiliaid: gweithio ar y cyd â'r holl randdeiliaid i ddatblygu mapiau ffordd digidol Iechyd a Gofal Digidol Cymru
- Datblygu ein gallu a'n capasiti Digidol trwy ddatblygu a chynllunio ein gweithlu, yn ogystal â pherthnasoedd masnachol Iechyd a Gofal Digidol Cymru
- Modelau ariannu cynaliadwy
- Y Gymraeg: Parhau i ddatblygu ein hunaniaeth Gymreig fel sefydliad statudol newydd
- Ansawdd, Rheoleiddio a Gwella Gwasanaethau

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- Parhau i ymgorffori rolau llywodraethu ac arwain y sefydliad

Disgrifiad o'r Risg:
Pe na bai Iechyd a Gofal Digidol Cymru yn dod yn bartner dibynadwy ac yn sefydliad cynhwysol sy'n perfformio'n dda, yna ni fyddai pobl eisiau gweithio gydag ac ar gyfer Iechyd a Gofal Digidol Cymru ac fe fyddai hyn yn arwain at fethiant i gyflawni uchelgais strategol Iechyd a Gofal Digidol Cymru o ddarparu gwasanaethau digidol o'r radd flaenaf.

Roedd y rheolaethau allweddol sydd ar waith yn cynnwys, ond heb fod yn gyfyngedig i:
- Strwythur tîm gweithredol
- Strategaeth a chynllun ymgysylltu â rhanddeiliaid
- Grŵp Iechyd a Lles Staff
- Tasglu recriwtio
- Sesiynau ymgysylltu strategol gyda phartneriaid
- Archwiliadau ISO
- Gweithio gyda phartneriaid academaidd i hyrwyddo datblygiad staff

Camau ymlaen:
- Mae gwerthoedd sefydliadol yn gweithio
- Strategaeth Pobl a Datblygu Sefydliadol – a fyddai'n cynnwys cynllunio ar gyfer olyniaeth a dulliau rheoli talent
- Model cyllido cynaliadwy – cynllun 10 mlynedd
- Penodiad i rôl derfynol y Tîm Gweithredol, Cyfarwyddwr Gwasanaethau Digidol Sylfaenol, Cymunedol ac Iechyd Meddwl
- Cynllun Iaith Gymraeg
- Strategaeth Gyfathrebu a chynllun gweithredu

Yn dilyn y trosolwg a gyflwynwyd, holodd Grace Quantock, aelod Annibynnol, sut y codwyd pwysigrwydd bod yn agored ac yn dryloyw ar draws y sefydliad. Mewn ymateb, cadarnhaodd CD fod y tîm Llywodraethu Corfforaethol yn codi ymwybyddiaeth o Safonau Ymddygiad yn barhaus ar draws y sefydliad, a oedd yn cynnwys cyflwyniad misol yn y cyfnod Ymefydlu Corfforaethol a thrwy amrywiol sianeli cyfathrebu mewnol.

Diolchodd y Cadeirydd i CD am yr adroddiad ac awgrymodd ar gyfer Adroddiad Sicrwydd y Bwrdd ddwywaith y flwyddyn a fyddai'n cael ei gyflwyno i'r Bwrdd, fod unrhyw dueddiadau mewn risgiau yn cael eu cynnwys o fewn hwnnw er gwybodaeth a chraffu.

Penderfynodd y Bwrdd:

GYMERADWYO Adroddiad Fframwaith Sicrwydd y Bwrdd

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5.3	**Adroddiad Caffael Strategol**	Cymerad wywyd	Dim i'w nodi
	Cyflwynodd Ifan Evans, Cyfarwyddwr Gweithredol Strategaeth yr adroddiad, yn cadarnhau bod tri chontract wedi'u cyflwyno i'r Bwrdd i'w cymeradwyo.		
	Amlygodd Michelle Sell, Cyfarwyddwr Cynllunio a Pherfformiad a Phrif Swyddog Masnachol (MS) y canlynol:		
	System Reoli eAtgyfeirio Deintyddol		
	Contractwr: Gwasanaethau Rheoli Atgyfeirio Cyfyngedig Cyfnod: 1 Mehefin 2023 i 31 Mai 2027 gyda'r opsiwn i ymestyn am ddwy (2) flynedd arall Gwerth: £2,250.000.00 heb TAW (gan gynnwys yr opsiwn i ymestyn) Cais am Gymeradwyaeth: Dyfarnu Contract		
	Cadarnhaodd MS fod Gwasanaethau Rheoli Atgyfeirio Cyfyngedig yn cael eu hadnabod yn ffurfiol fel FDIS Consultancy.		
	Offer Rhwydweithio ar gyfer y Ganolfan Ddata Newydd 2		
	Contractwr: Computacenter (UK) Limited Cyfnod: 1 Mehefin 2022 i 31 Mai 2025, gyda'r opsiwn i ymestyn am ddwy (2) flynedd arall. Gwerth: £1,368,633.33 heb TAW Cais am Gymeradwyaeth: Dyfarnu Contract		
	Cytundeb Microsoft Enterprise		
	Contractwr: TrustMarque Cyfnod: 1 Gorffennaf 2022 i 30 Mehefin 2025, gyda'r opsiwn i ymestyn am ddwy (2) flynedd arall. Gwerth: Gwerth llawn y gwariant posib o dan y cytundeb oedd £162,104,662.00 (heb gynnwys TAW) Cais am Gymeradwyaeth: Dyfarnu Contract		
	Ychwanegodd MS fod Iechyd a Gofal Digidol Cymru wedi arwain y drafodaeth ar gyfer y cytundeb hwn ar ran GIG Cymru ac y byddai'r cytundeb yn cael ei weithredu drwy TrustMarque. Cadarnhaodd MS na fyddai'r contract yn cael ei weithredu nes bod holl ymrwymiadau'r Bwrdd Iechyd wedi'u derbyn.		
	Dywedodd IE fod yr adroddiad yn dangos agwedd Iechyd a Gofal Digidol Cymru at fod yn agored ac yn dryloyw a mynegodd ddiolch i dimau Masnachol a Chyllid Iechyd a Gofal Digidol Cymru, yn ogystal â thimau cyllid ar draws GIG Cymru am gyflawni canlyniad gwych gyda Chytundeb Menter Microsoft ac ychwanegodd fod y cytundeb yn dangos pa mor bwysig oedd digidol ar draws GIG Cymru, roedd y cynnydd mewn seiberddiogelwch, yn dangos sut yr aliniwyd Iechyd a Gofal Digidol Cymru yn strategol ar draws GIG Cymru yn ogystal â dangos cydweithio effeithiol ar draws GIG Cymru.		

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	Penderfynodd y Bwrdd:		
	GYMERADWYO'r System Reoli eAtgyfeirio Deintyddol;		
	CYMERADWYO'r Offer Rhwydweithio ar gyfer y Ganolfan Ddata Newydd 2;		
	CYMERADWYO Cytundeb Microsoft Enterprise; yn amodol ar dderbyn ymrwymiadau gan bob Bwrdd Iechyd;		
	NODI'R Gweithgaredd Caffael Strategol.		
	Egwyl		

RHAN 6 – LLYWODRAETHU, RISG, PERFFORMIAD A SICRWYDD

6.1	**Adroddiad Cyllid**	Nodwyd	Dim i'w adrodd
	Cyn cyflwyno'r adroddiad, diolchodd COL yn ffurfiol i dîm Cyllid Iechyd a Gofal Digidol Cymru am y gwaith gwych a wnaed yn 2021-22 i sicrhau bod Iechyd a Gofal Digidol Cymru mewn sefyllfa wych hyd yma. Cyflwynodd COL yr Adroddiad Cyllid hyd at ddiwedd mis Mawrth 2022, gan dynnu sylw at y canlynol:		

- Roedd yr adroddiad wedi'i gyflwyno mewn Sesiwn Datblygu'r Bwrdd ac i'r Pwyllgor Archwilio a Sicrwydd cyn ei rannu yn y Sesiwn Bwrdd;

- Roedd Iechyd a Gofal Digidol Cymru yn adrodd ar gyflawniad yr holl ddangosyddion ariannol allweddol ar gyfer y flwyddyn ariannol a ddaeth i ben ar 31 Mawrth 2022;

- Tanwariant refeniw o £0.366m yn erbyn y sefyllfa ariannol a ragwelir ar ddiwedd y flwyddyn;

- Cyfanswm gwariant cyfalaf oedd £10.963m;

- Rhagorwyd ar darged Polisïau Taliadau yn y Sector Gyhoeddus sef 97%;

- Darparwyd trosolwg a rhagolwg lefel uchel o gyfradd rhedeg Iechyd a Gofal Digidol Cymru;

- Roedd angen llenwi swyddi gwag recriwtio o fewn y Cyfarwyddiaethau Cyllid a Sicrwydd Busnes a Strategaeth;

- Roedd pwysau i'w gweld o fewn TGCh, ond mae gwaith wedi'i wneud i fynd i'r afael â hyn;

- Roedd gofyniad i arbed £2.457m ar gyfer y flwyddyn ariannol 2022/23, rhagwelwyd y byddai swm o £1.139m yn cael ei ailadrodd;

- Roedd y Gronfa Buddsoddi mewn Blaenoriaethau Digidol wedi bod yn faes ffocws. Roedd ail-broffilio wedi'i gychwyn gan Lywodraeth Cymru. Roedd cynllun cytbwys

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wedi'i gyflwyno i'r Gweinidog ac roedd y tîm yn hyderus y byddai cyn lleied â phosibl o darfu ar Iechyd a Gofal Digidol Cymru;

- Rhannwyd Risgiau Ariannol Corfforaethol fel:

- Cynnydd Ynni ac Yswiriant Gwladol. Roedd llythyr wedi'i gyflwyno i Lywodraeth Cymru a chytunwyd y byddai'r risg hon yn cael ei chadw ganddynt yn ganolog, fodd bynnag, roedd yn bwysig i DHCW fel sefydliad fod yn ymwybodol o'r risgiau ariannol corfforaethol;

- Mudo Pontio'r Ganolfan Ddata – roedd gwaith rhwng cyllid a TGCh yn mynd rhagddo i ddeall y goblygiadau o ran cost, pe bai angen i Iechyd a Gofal Digidol Cymru symud i leoliad canolfan ddata gwahanol;

- Chwyddiant Digidol – Byddai angen nodi, mesur a rheoli'r effaith ariannol ar gadwyn gyflenwi Iechyd a Gofal Digidol Cymru a'r pwysau prisiau digidol sylfaenol.

- Cyfleoedd ariannol corfforaethol sydd wedi'u cynnwys

- Rheoli Swyddi Gwag

- Tanwariant Costau Teithio Ychwanegol

Cadarnhaodd COL fod y cyfrifon yn cael eu cwblhau ar hyn o bryd ac y byddent yn cael eu cyflwyno i'w cymeradwyo'n derfynol mewn cyfarfod arbennig o'r Pwyllgor Archwilio a Sicrwydd a chyfarfod Bwrdd ar 14 Mehefin, cyn eu cyflwyno i Lywodraeth Cymru ar 15 Mehefin.

Yn dilyn y cyflwyniad, gofynnodd David Selway, Aelod Annibynnol, a oedd y gwaith i liniaru'r problemau gyda'r Gronfa Buddsoddi mewn Blaenoriaethau Digidol yn berthnasol i wariant refeniw a chyfalaf? Mewn ymateb, cadarnhaodd COL ei fod yn gwneud hynny a bod y risg wedi'i ddatrys ar gyfer blwyddyn ariannol 2021/22, fodd bynnag roedd y gronfa fuddsoddi yn un aml-flwyddyn, felly byddai gwaith yn cael ei wneud i fynd i'r afael â sut y byddai hyn yn cael ei reoli a'i sicrhau ar gyfer y blynyddoedd i ddod.

Soniodd y Cadeirydd am arbedion cost oherwydd swyddi gweigion, a dywedodd fod angen i'r Bwrdd fod yn gwbl ymwybodol o'r gwaith oedd yn cael ei wneud i fynd i'r afael â'r mater. Mewn ymateb, esboniodd COL er bod niferoedd y swyddi gweigion yn uchel, i liniaru hyn roedd Iechyd a Gofal Digidol Cymru yn gweithio gyda chyflenwyr trydydd parti i gefnogi gweithrediadau a darpariaeth y sefydliad dros dro. Cadarnhaodd COL yr angen i gael cydbwysedd rhwng arbedion rheolaidd ac arbedion anghylchol a dyma fyddai'r her i'r grŵp di-dâl o ran dechrau blaengynllunio. Eglurodd COL hefyd, mewn perthynas â chyllid cynaliadwy, fod angen i Iechyd a Gofal Digidol Cymru fynegi'r gwerth a grëwyd gan y sefydliad drwy fudd-daliadau a Chytundebau Lefel Gwasanaeth, yn ogystal â deall costau cynnyrch a gwasanaeth yn

	well. Pwysleisiodd COL y byddai sgyrsiau gyda Llywodraeth Cymru ynghylch buddsoddi digidol yn hanfodol ar gyfer darparu'r GIG ledled Cymru. Dywedodd Ruth Glazzard, yr Is-Gadeirydd, na ellid diystyru faint o fuddsoddiad fyddai ei angen i gyflawni Gweledigaeth Iechyd a Gofal Digidol Cymru a bod angen i hyn fod yn glir wrth fynegi gorwel 10 mlynedd Iechyd a Gofal Digidol Cymru. **Penderfynodd y Bwrdd:** **NODI'R** Adroddiad Ariannol		
6.2	**Adroddiad Perfformiad Sefydliadol Integredig** Cyflwynodd IE yr Adroddiad Perfformiad Sefydliadol Integredig ar gyfer y cyfnod Mawrth-Ebrill 2022. Amlygodd MS y meysydd canlynol: • Cymeradwyodd y Bwrdd y Cynllun Tymor Canolig Integredig 2022-25 ym mis Mawrth ac roedd hwn wedi'i gyflwyno i Lywodraeth Cymru. Disgwyliwyd ymateb ffurfiol ym mis Mehefin; • O ran cyflawniadau, roedd cynnydd sylweddol wedi'i wneud gan gydweithwyr yn ystod y flwyddyn. Byddai'r cyflawniadau'n cael eu nodi yn yr Adroddiad Blynyddol; • Byddai adroddiad yn cael ei gyflwyno bob chwarter wrth symud ymlaen; • PADR's were reporting amber, work with the new Director of People and Organisational Development would be undertaken to address this. Mewn perthynas â'r pwynt hwn, dywedodd Sarah-Jane Taylor, Cyfarwyddwr Pobl a Datblygiad Sefydliadol (SJT) fod gwaith yn cael ei wneud ar y Strategaeth Pobl a Datblygu Sefydliadol. Mewn perthynas â phwysau recriwtio eleni, roedd y tîm yn gweithio ar ffyrdd arloesol newydd o recriwtio. Meysydd ffocws pellach ar gyfer recriwtio fyddai gweithio mwy gyda rhwydwaith y lluoedd arfog ac anableddau i weithio tuag at ddod yn gyflogwr o ddewis i weithlu mwy amrywiol. • Roedd y Ddesg Gwasanaeth yn adrodd ambr, roedd gwaith sylweddol yn cael ei wneud i fynd i'r afael â hyn. Dywedodd GQ ei bod yn gadarnhaol iawn nodi'r datganiad am fod yn weithlu mwy amrywiol ac ychwanegodd y byddai'n wych gweld hyn yn cael ei ddatblygu. **Penderfynodd y Bwrdd:** **DRAFOD** yr Adroddiad Perfformiad Sefydliadol Integredig.	Trafodwyd	Dim i'w nodi

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6.3	**Adroddiad y Gofrestr Risgiau Corfforaethol**	Trafodwyd a Nodwyd	Dim i'w nodi
	Cyn cyflwyno'r adroddiad, atgoffodd CD y Bwrdd o adroddiad mwyaf diweddar Fforwm Economaidd y Byd Tirwedd Risgiau Byd-eang Hirdymor (2022), gan nodi'n benodol, y bydd y ddibyniaeth ddigidol gynyddol yn dwysáu bygythiadau seiber yn fyd-eang.		
	Rhoddodd CD drosolwg o'r adroddiad risg a dywedodd y canlynol:		
	• Roedd 22 o risgiau ar y gofrestr risg, ac roedd 13 ohonynt wedi'u cynnwys yn yr adroddiad;		
	• dosbarthwyd 9 risg yn breifat gan eu bod yn ymwneud â seiberddiogelwch, fodd bynnag, archwiliwyd y rhain yn fanwl yn y Pwyllgor Llywodraethu a Diogelwch Digidol;		
	• Ers cyfarfod diwethaf y Bwrdd, ychwanegwyd 8 risg:		
	- DHCW0284 – Cynnydd mewn Costau Byw		
	- DHCW0285 – Cynnydd YG heb ei Ariannu		
	- DHCW0287 - Cyllid Buddsoddi mewn Blaenoriaethau Digidol		
	- DHCW0288 – Cyllid Refeniw Mudo Canolfan Ddata		
	- DHCW0289 – Chwyddiant Digidol		
	• CANISC oedd y sefydliad risg uchaf o hyd, ac fe nodwyd dyddiad newydd y cytunwyd arno ar gyfer disodli CANISC Ymddiriedolaeth GIG Prifysgol Felindre ym mis Tachwedd 2022;		
	• Rhoddodd y pwysau ariannol a seiberddiogelwch broffil risg i Iechyd a Gofal Digidol Cymru gan adlewyrchu risgiau allweddol yn y meysydd hyn		
	• Mewn perthynas â chynllun carreg filltir Fframwaith Sicrwydd y Bwrdd, mae pob eitem ac eithrio un bellach yn wyrdd, roedd hyn yn braf. Nododd CD y byddai archwaeth risg yn parhau i fod yn ffocws ar gyfer adolygiad blynyddol.		
	Dywedodd RG fod yr holl risgiau preifat a gyflwynir i Bwyllgorau'r Bwrdd bob amser yn cael eu herio'n rheolaidd p'un ai dylent aros yn breifat neu a oes modd eu trafod mewn sesiwn gyhoeddus, ond nododd ei bod yn briodol bod yr holl risgiau preifat ar hyn o bryd yn briodol i'w trafod mewn sesiwn breifat oherwydd eu natur.		
	Penderfynodd y Bwrdd:		
	DRAFOD a NODI'R Adroddiad ar y Gofrestr Risg Gorfforaethol		
6.4	**Adroddiad Blynyddol Uwch-berchennog Risg Gwybodaeth**	Cymeradwywyd	Dim i'w nodi
	Rhoddodd Gareth Davis, Cyfarwyddwr Gweithredol Dros Dro Gweithrediadau drosolwg o'r adroddiad. Cyflwynodd Carwyn Lloyd-		

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Jones, Cyfarwyddwr TGCh (CLJ) yr adroddiad gan dynnu sylw at y canlynol:

- Hwn oedd Adroddiad Blynyddol cyntaf yr Uwch-berchennog Risg Gwybodaeth ar gyfer Iechyd a Gofal Digidol Cymru

- Darparodd sicrwydd ynghylch y polisïau a'r gweithdrefnau sydd gan Iechyd a Gofal Digidol Cymru ar waith i reoli risgiau gwybodaeth;

- O ran strwythurau, y swyddog atebol ar gyfer Rheoli Risg Gwybodaeth yw'r Prif Swyddog Gweithredol, yr Uwch-berchennog Risg Gwybodaeth oedd y Cyfarwyddwr Gweithredol Dros Dro Gweithrediadau a Gwarcheidwad Caldicott oedd y Cyfarwyddwr Meddygol Gweithredol. Yn ogystal, roedd Perchnogion Asedau Gwybodaeth, Swyddog Diogelu Data – gyda chefnogaeth y Timau Llywodraethu Gwybodaeth a Thimau Seiberddiogelwch;

- Darparwyd trosolwg a Sicrwydd o risgiau gwybodaeth gan y Pwyllgor Llywodraethu a Diogelwch Digidol, a'r Pwyllgor Archwilio a Sicrwydd;

- Roedd y datblygiadau allweddol yn 2021/22 yn cynnwys:

  - Fframwaith rheoli risg newydd

  - Gwell Cofrestr Asedau Gwybodaeth

  - Gwell Rheolaeth Asedau TG

  - Asesiad Meddalwedd Wystlo

  - Cael gwared ar Seilwaith Etifeddol

  - Achrediad Safon E-bost Diogel NHS Digital

  - Achrediad Prosesydd Deddf yr Economi Ddigidol

- Roedd yr archwiliadau a gynhaliwyd yn cynnwys ISO27001, BS1008, Archwiliadau Mewnol a Systemau TG a Gynhelir yn Genedlaethol gan Archwilio Cymru;

- Roedd gweithgareddau arfaethedig ar gyfer 2022/23 yn cynnwys:

  - Prosiect Gwella Gwasanaethau Seiberddiogelwch Iechyd a Gofal Digidol Cymru

  - Strategaeth ac Achos Busnes Rheoli Gwybodaeth a Digwyddiadau Diogelwch

  - Llwyfan Pecyn Cymorth Llywodraethu Gwybodaeth Cymru

  - Cytundeb Rhannu Gwybodaeth Bersonol Cymru

  - Datblygu Achos Busnes a chaffael Teclyn Archwilio Integredig Deallus Cenedlaethol newydd

  - Gwella'r wybodaeth a gesglir yn y Gofrestr Asedau

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	Gwybodaeth		
	Yn dilyn y cyflwyniad, dywedodd HT ei bod yn hynod gadarnhaol i'r adroddiad gael ei gyflwyno i'r Bwrdd, ynghyd â'r ffocws ar risg gwybodaeth a mynegi agwedd Iechyd a Gofal Digidol Cymru fel sefydliad. Ychwanegodd HT ei fod yn gam sylweddol ymlaen y gallai clinigwyr nawr gyfnewid gwybodaeth ar draws GIG Cymru a Lloegr. **Penderfynodd y Bwrdd:** **GYMERADWYO** Adroddiad Blynyddol Uwch-berchennog Risg Gwybodaeth		
6.5	**Adroddiad Crynhoi Rhwydwaith Digidol Aelodau Annibynnol Cymru Gyfan** Rhoddodd DS, Cadeirydd y Rhwydwaith drosolwg o'r cyfarfod diwethaf a gynhaliwyd ar 27 Ebrill 2022. Tynnwyd sylw at y canlynol: • Cymeradwywyd y Cylch Gorchwyl yn ffurfiol; • David Selway wedi'i benodi'n Gadeirydd am 12 mis; • Maynard Davies wedi'i benodi'n Is-Gadeirydd am 12 mis; • Cafodd y cyflwyniad ar Seiberddiogelwch dderbyniad da iawn; • Rhannwyd Cynllun Tymor Canolig Integredig Iechyd a Gofal Digidol Cymru, gan dynnu sylw at ymateb Iechyd a Gofal Digidol Cymru i COVID-19 a'r hyn a ddysgwyd o ganlyniad; • Cafwyd dadl ynghylch her y model ariannu esblygol ar gyfer GIG Cymru gyda phawb yn cytuno bod angen gwella cyllid digidol; • Rhannwyd Strategaeth Llywodraethiant Cymru ddrafft ar gyfer Iechyd a Gofal, gyda'r Rhwydwaith yn gofyn i hyn gael ei gyflwyno eto wrth iddo ddatblygu ymhellach. Ychwanegodd Marian Wyn-Jones, Aelod Annibynnol (MWJ) fod y cyflwyniad Seiberddiogelwch hefyd wedi'i rannu yng nghyfarfod Cadeiryddion Archwilio GIG Cymru a'i fod wedi'i dderbyn yn arbennig o dda. Ychwanegodd HT y cytunwyd y byddai agenda a phapurau Rhwydwaith Digidol IM yn cael eu rhannu â Chyfarwyddwyr Digidol, ynghyd â chais am eitemau agenda wrth symud ymlaen. **Penderfynodd y Bwrdd:** **NODI** Adroddiad Crynhoi Rhwydwaith Digidol Aelodau Annibynnol Cymru Gyfan.	Nodwyd	Dim i'w nodi

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6.6	**Adroddiad Crynhoi Cynnydd y Fforwm Partneriaeth Lleol**	Nodwyd	Dim i'w nodi
	Rhoddodd HT, Cyd-Gadeirydd y Fforwm Partneriaeth Leol drosolwg o'r cyfarfod diwethaf a gynhaliwyd ar 5 Ebrill 2022. Tynnwyd sylw at y canlynol:		
	• Ymunodd Cadeirydd Iechyd a Gofal Digidol Cymru â'r cyfarfod a chafodd ei groesawu;		
	• Adolygodd y Fforwm adroddiad a dangosfwrdd y gweithlu;		
	• Roedd ffocws ar weithio hybrid a sicrhawyd bod nifer o sgyrsiau'n cael eu cynnal rhwng cynrychiolwyr staff a chydweithwyr i sicrhau bod ymagwedd gyfunol a chydweithredol at weithio hybrid;		
	• Adolygiad Gweithlu Digidol, trafodwyd canfyddiadau cychwynnol;		
	• Trafodwyd a chytunwyd ar derminoleg ddiwygiedig o fewn TGCh.		
	Penderfynodd y Bwrdd:		
	NODI Adroddiad Crynhoi Cynnydd y Fforwm Partneriaeth Lleol ar gyfer SICRWYDD.		
6.7	**Adroddiad Crynhoi Cynnydd Pwyllgor Llywodraethu a Diogelwch Digidol**	Derbyniwyd ar gyfer Sicrwydd	Dim i'w nodi
	Cyflwynodd DS, Is-Gadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol yr adroddiad o'r cyfarfod diwethaf a gynhaliwyd ar 12 Mai 2022 gan dynnu sylw at y canlynol:		
	• Rhannwyd Adroddiad Blynyddol yr Uwch-berchennog Risg Gwybodaeth cyn ei gyflwyno i'r Bwrdd;		
	• Rhannwyd yr Archwiliad Mewnol ar Symud y Ganolfan Ddata a nodwyd yr adborth ardderchog o'r archwiliad;		
	• Derbyniwyd diweddariad ar y Strategaeth Ymchwil ac Arloesi sydd ar y gweill;		
	• Adolygwyd y risgiau a neilltuwyd i'r Pwyllgor yn fanwl;		
	• Cafwyd cyflwyniad cadarnhaol iawn ar Hunaniaeth Cleifion		
	• Adolygodd y Pwyllgor yr Adroddiad Sicrwydd Seiberddiogelwch yn fanwl.		
	Penderfynodd y Bwrdd:		
	NODI Adroddiad Crynhoi'r Pwyllgor Llywodraethu a Diogelwch Digidol ar gyfer SICRWYDD.		

6.8	**Adroddiad Crynhoi Cynnydd y Pwyllgor Taliadau a Thelerau Gwasanaeth** Cyflwynodd y Cadeirydd adroddiad uchafbwyntiau'r cyfarfod diwethaf a gynhaliwyd ar 19 Mai 2022 a dywedodd fod penodiad a thelerau gwasanaeth y Cyfarwyddwr Gweithredol Dros Dro Gweithrediadau wedi'u cymeradwyo a'u cadarnhau. **Penderfynodd y Bwrdd:** **NODI** Adroddiad Crynhoi Cynnydd y Pwyllgor Taliadau a Thelerau Gwasanaeth er **SICRWYDD.**	Nodwyd	Dim i'w nodi
6.9	**Adroddiad Crynhoi Cynnydd y Pwyllgor Archwilio a Sicrwydd** Cyflwynodd MWJ, Cadeirydd y Pwyllgor Archwilio a Sicrwydd, adroddiad uchafbwyntiau'r cyfarfod diwethaf a gynhaliwyd ar 3 Mai 2022 a dywedodd: • Hwn oedd y cyfarfod Pwyllgor cyntaf i gael ei recordio a'i rannu ar wefan Iechyd a Gofal Digidol Cymru; • Cyflwynwyd tri archwiliad: - Pontio'r Ganolfan Ddata - Sicrwydd Sylweddol - Trefniadau Llywodraethu Rhan 2 – Sicrwydd Rhesymol - Datblygu System – Sicrwydd Rhesymol • Cymeradwywyd y Cynllun Archwilio Mewnol ar gyfer 2022/23; • Darparodd Archwilio Cymru ddiweddariad mewn perthynas â'r rhaglen waith, gan gynnwys yr asesiad strwythuredig; • Derbyniwyd nifer o ddiweddariadau gan gynnwys Atal Twyll, Cyfrifon Blynyddol, Safonau Ymddygiad, Archebion Prynu Gwerth Uchel, Caffael, Cydymffurfiaeth Ansawdd a Rheoleiddiol a Chydymffurfiaeth Ystadau; • Derbyniwyd diweddariad ar gydymffurfiaeth Iechyd a Gofal Digidol Cymru o ran y Gymraeg ac roedd yn gadarnhaol iawn gweld y cynnydd sylweddol a wnaed yn y maes hwn ers penodi Rheolwr Gwasanaethau'r Gymraeg. Ychwanegodd MWJ ei bod wedi bod yn bleser cael profi'r defnydd o'r Gymraeg yn ystod cyfarfod y Bwrdd heddiw. Diolchodd MWJ ar ran y Pwyllgor i'r Cyfarwyddwr Gweithredol Cyllid, Ysgrifennydd y Bwrdd a thimau Llywodraethu Corfforaethol a Chyllid sy'n cefnogi gwaith y Pwyllgor yn drylwyr. **Penderfynodd y Bwrdd:** **NODI**'r adroddiad Crynhoi Cynnydd Archwilio a Sicrwydd ar gyfer **SICRWYDD.**	Derbyniwyd ar gyfer Sicrwydd	Dim i'w nodi

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RHAN 7 - MATERION I GLOI				
7.1	**Unrhyw faterion brys eraill**		Trafodwyd	Dim i'w nodi
	Ni chodwyd unrhyw fater brys arall.			
7.2	**Dyddiad ac Amser y Cyfarfod Nesaf**		Nodwyd	Dim i'w nodi
	• Dydd Mawrth 14 Mehefin – Cyfarfod Arbennig (Cymeradwyo'r Cyfrifon Blynyddol)			
	• Dydd Iau 28 Gorffennaf 2022			
	Daeth y cyfarfod i ben am 13:30			

Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal

Cofnodion cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd ddydd Iau 14 Mehefin 2022 fel cyfarfod rhithwir a ddarlledwyd yn fyw drwy Zoom.

🕐 14:30 i 15:10　　　📅 14 Mehefin 2022

Aelodau'n Bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Simon Jones	SJ	Cadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Gareth Davies	GD	Cyfarwyddwr Gweithredol Dros Dro Gweithrediadau	Iechyd a Gofal Digidol Cymru
Ifan Evans	IE	Cyfarwyddwr Gweithredol Strategaeth	Iechyd a Gofal Digidol Cymru
Rowan Gardner	RG	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
Claire Osmundsen-Little	COL	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

Yn bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Chris Darling	CD	Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Andrew Fletcher	AF	Aelod Cyswllt o'r Bwrdd – Undeb Llafur	Iechyd a Gofal Digidol Cymru

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Sophie Fuller	SF	Pennaeth Llywodraethu Corfforaethol	Iechyd a Gofal Digidol Cymru
Sarah-Jane Taylor	SJT	Cyfarwyddwr Pobl a Datblygu Sefydliadol	Iechyd a Gofal Digidol Cymru
Mike Whiteley	MW	Rheolwr Archwilio	Archwilio Cymru

Ymddiheuriadau	Teitl	Sefydliad
Nathan Couch	Arweinydd Archwilio Perfformiad (Iechyd)	Archwilio Cymru
Ruth Glazzard	Is-gadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Darren Griffiths	Rheolwr Archwilio (Perfformiad)	Archwilio Cymru
Rhidian Hurle	Cyfarwyddwr Meddygol Gweithredol	Iechyd a Gofal Digidol Cymru
Grace Quantock	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru

Acronymau			
Iechyd a Gofal Digidol Cymru	Iechyd a Gofal Digidol Cymru	SHA	Awdurdod Iechyd Arbennig
CEO	Prif Swyddog Gweithredol	DCT	Trosglwyddo Canolfan Ddata
AW	Archwilio Cymru	ISA260	Safonau Rhyngwladol ar gyfer Archwilio 260
DPIF	Cronfa Buddsoddi Blaenoriaethau Digidol	IMTP	Cynllun Tymor Canolig Integredig
BAF	Fframwaith Sicrwydd y Bwrdd	IA	Archwilio Mewnol

	Manylion yr Eitem	Canlyniad	I'w gweithredu gan
	MATERION RHAGARWEINIOL		
1.1	Croeso ac Ymddiheuriadau	Nodwyd	Dim i'w nodi

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	Croesawodd y Cadeirydd bawb i gyfarfod eithriadol Bwrdd Awdurdod Iechyd Arbennig i gymeradwyo'r adroddiad blynyddol cyntaf gan gynnwys cyfrifon i'w cyflwyno i Lywodraeth Cymru.		
	Cadarnhaodd y Cadeirydd fod y cyfarfod yn cael ei ddarlledu'n fyw drwy Zoom. Yn ogystal, byddai'r recordiad ar gael drwy wefan DHCW ar gyfer unrhyw un nad oedd yn gallu cael mynediad i'r cyfarfod yn fyw. Roedd y platfform Zoom yn cael ei ddefnyddio i ganiatáu i aelodau fod yn weladwy trwy gydol y cyfarfod cyfan. Nid oedd cyfieithu ar y pryd ar gael ar gyfer cyfarfod eithriadol y Bwrdd ond bydd yn ailddechrau fel arfer yng nghyfarfod y Bwrdd ar 28 Gorffennaf 2022.		
1.2	**Ymddiheuriadau am Absenoldeb** Nodwyd ymddiheuriadau gan Ruth Glazzard, Is-gadeirydd y Bwrdd, Nathan Couch (Archwilio Cymru), Darren Griffiths (Archwilio Cymru), Grace Quantock, Aelod Annibynnol a Rhidian Hurle, Cyfarwyddwr Meddygol Gweithredol.	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
1.4	**Materion yn Codi** Nid oedd unrhyw faterion yn codi.	Trafodwyd	Dim i'w nodi
PRIF AGENDA — I'W GYMERADWYO A'I NODI			
2.1	**Cyflwyniad i'r Adroddiad Blynyddol a Chyfrifon 2021/22 - Ar lafar** Amlinellodd y Cadeirydd ddiben y cyfarfod a gafodd ei gynnull i gymeradwyo'r adroddiad blynyddol a'r cyfrifon archwiliedig terfynol yn barod i'w cyflwyno i Lywodraeth Cymru ar 15 Mehefin 2022. Amlinellodd y Cadeirydd fod yr Adroddiad Blynyddol yn cynnwys yr adroddiad Perfformiad, yr adroddiad Atebolrwydd a'r cyfrifon terfynol. Mae'r Adroddiad Atebolrwydd yn cynnwys sawl elfen arall: • Yr Adroddiad Llywodraethu Corfforaethol sy'n cynnwys y datganiad llywodraethu blynyddol • Adroddiad ar Gyflogau a Staff • Adroddiad Atebolrwydd ac Archwilio Seneddol Cymru Ystyriwyd y cyfrifon a'r adroddiad blynyddol terfynol mewn cyfarfod eithriadol o'r Pwyllgor Archwilio a Sicrwydd a gynhaliwyd ar 14 Mehefin 2022 cyn cyfarfod Bwrdd yr Awdurdod Iechyd Arbennig. Nododd y Cadeirydd y byddai'n gwahodd Cadeirydd y Pwyllgor Archwilio a Sicrwydd, Marian Wyn Jones i roi adborth llafar i'r Bwrdd yn eitem 2.4 cyn gofyn i'r Bwrdd gymeradwyo'r cyfrifon blynyddol a'r adroddiad blynyddol i'w cyflwyno i Lywodraeth Cymru.	Nodwyd	Dim i'w nodi

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	Penderfynodd y Bwrdd: NODI'R cyflwyniad llafar gan y Cadeirydd.		
2.2	**Adroddiad ISA260 Archwilio Cymru** Gwahoddodd y Cadeirydd Mike Whiteley o Archwilio Cymru i gyflwyno Adroddiad Archwiliad Cyfrifon ISA 260. Rhoddodd Mike Whiteley (MW) o Archwilio Cymru grynodeb o brif ganfyddiadau'r archwiliad o ddatganiadau 2021/22. Yn gyffredinol, roedd yn adroddiad cadarnhaol ac roedd Archwilio Cymru yn cydnabod bod y cyfrifon a baratowyd gan gydweithwyr cyllid Iechyd a Gofal Digidol Cymru o ansawdd da a chanmolwyd hynny. Amlinellodd MW strwythur a chynnwys yr adroddiad gan dynnu sylw at y cynnwys canlynol: • Mae paragraff 8 yn amlinellu'r bwriad i gyhoeddi barn ddiamod • Mae paragraff 12 yn manylu nad oes unrhyw gamddatganiadau heb eu cywiro • Mae Atodiad 3 yn amlinellu'r datganiad o gywiriadau a wnaed • Mae Atodiad 4 yn manylu ar yr argymhelliad sy'n codi o'r archwiliad, o'r un canfyddiad. Nodwyd ar gyfer y Bwrdd bod gwaith eisoes wedi dechrau i fynd i'r afael â hyn. Diolchodd y Cadeirydd i MW am yr adroddiad ac roedd yn falch o nodi'r cynnwys cadarnhaol. **Penderfynodd y Bwrdd:** NODWYD yr adroddiad gan Archwilio Cymru.	Nodwyd	Dim i'w nodi
2.3	**Barn ac Adroddiad Blynyddol y Pennaeth Archwilio Mewnol 2021/22** Gwahoddodd y Cadeirydd Simon Cookson (SC), Cyfarwyddwr y Gwasanaethau Archwilio a Sicrwydd, i gyflwyno'r adroddiad ar gyfer Barn y Pennaeth Archwilio Mewnol. Yn gyffredinol, roedd Barn y Pennaeth Archwilio Mewnol yn gadarnhaol, gyda sicrwydd rhesymol yn cael ei adrodd ar gyfer y trefniadau cyffredinol ar gyfer llywodraethu, rheoli risg a rheolaethau mewnol. Amlinellodd SC strwythur yr adroddiad sy'n rhoi manylion: • rôl Archwilio Mewnol • y gwaith a wnaed drwy gydol y flwyddyn a adroddwyd i'r Pwyllgor Archwilio a Sicrwydd • gwaith arall a wnaed a oedd yn berthnasol i DHCW • Dangosyddion Perfformiad Allweddol • Crynodeb o'r amcanion a'r canlyniadau	Cymerad wywyd	Dim i'w nodi

4Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru 20220526

	Diolchodd y Cadeirydd i SC am yr adroddiad a nododd gynnwys cadarnhaol yr adroddiad. **Penderfynodd y Bwrdd:** **Gymeradwyo** Adroddiad Blynyddol a Barn y Pennaeth Archwilio Mewnol 2021/22		
2.4	**Adborth gan Gadeirydd y Pwyllgor Archwilio a Sicrwydd – Llafar** Gwahoddodd y Cadeirydd Marian Wyn Jones (MWJ), Cadeirydd y Pwyllgor Archwilio a Sicrwydd i roi adborth llafar o'r cyfarfod eithriadol a gynhaliwyd yn gynharach ar 14 Mehefin 2022. Eglurodd MWJ drefniadau'r cyfarfod eithriadol o'r Pwyllgor Archwilio a Sicrwydd a gynhaliwyd i gadarnhau'r adroddiad blynyddol a'r cyfrifon terfynol yn barod i'w cymeradwyo yng nghyfarfod Bwrdd SHA. Amlinellodd MWJ rôl bwysig y Pwyllgor Archwilio a Sicrwydd yn y broses adolygu ar gyfer yr adroddiad blynyddol a'r cyfrifon er mwyn craffu a darparu adborth. Roedd MWJ yn falch o nodi canfyddiadau cadarnhaol Archwilio Cymru, Archwilio Mewnol ac Atal Twyll a ddangosodd fod Iechyd a Gofal Digidol Cymru yn gweithredu gyda strwythurau a phrosesau da ar waith yn ei flwyddyn gyntaf fel Awdurdod Iechyd Arbennig. Diolchodd MWJ i'r tîm Gweithredol a'r sefydliad ehangach am eu gwaith yn ystod y flwyddyn ddiwethaf gan gydnabod rôl hanfodol Iechyd a Gofal Digidol Cymru wrth helpu i ddarparu iechyd a gofal i bobl Cymru a dylem fod yn falch o'r cynnydd wrth edrych ymlaen at ymgorffori'r gwaith da hyd yma. Cadarnhaodd MWJ fod y Pwyllgor Archwilio a Sicrwydd a gynhaliwyd ar 14 Mehefin wedi cymeradwyo'r Adroddiad Blynyddol a'r Cyfrifon. Diolchodd y Cadeirydd i MWJ am ei gwaith fel Cadeirydd y Pwyllgor Archwilio a Sicrwydd a gwaith ei chyd-Aelodau Annibynnol sy'n ffurfio'r Pwyllgor Archwilio a Sicrwydd ac sy'n ymgymryd â rôl annatod ar ran y Bwrdd. **Penderfynodd y Bwrdd:** **NODI'R** diweddariad llafar a ddarparwyd gan Gadeirydd y Pwyllgor Archwilio a Sicrwydd gan gynnwys cymeradwyaeth y Pwyllgor i gymeradwyo'r Adroddiad Blynyddol a'r Cyfrifon.	Nodwyd	Dim i'w nodi
2.5	**Datganiadau Ariannol Blynyddol 2021/22** Gwahoddodd y Cadeirydd Claire Osmundsen-Little (COL), y Cyfarwyddwr Cyllid Gweithredol, i gyflwyno'r datganiadau ariannol blynyddol. Amlinellodd COL y gweithgaredd a wnaed i baratoi'r datganiadau 15 mis fel rhan o'r gwaith diwedd blwyddyn.	Cymerad wywyd	Dim i'w nodi

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Roedd pum datganiad cryno allweddol o fewn y cyfrifon blynyddol:

- Datganiad o Wariant Net Cynhwysfawr

- Gwariant Net Cynhwysfawr Arall

- Datganiad o'r Sefyllfa Ariannol ar 31 Mawrth 2022

- Datganiad o newidiadau i ecwiti trethdalwyr

- Datganiad o Lifau Arian Parod am y cyfnod a ddaeth i ben 31 Mawrth 2022.

Mae gan Iechyd a Gofal Digidol Cymru ddwy ddyletswydd ariannol - y cyntaf yw mantoli'r gwariant, a'r ail yw paratoi cynllun ariannu cymeradwy i Lywodraeth Cymru.

Cyflwynwyd drafft cychwynnol y cyfrifon i Lywodraeth Cymru ar 29 Ebrill 2022 a'i rannu i'w adolygu a'i graffu i'r Pwyllgor Archwilio a Sicrwydd ar 24 Mai 2022.

Gweithiodd cydweithwyr cyllid gydag Archwilio Cymru i egluro rhai meysydd o'r cyfrifon sy'n ymwneud â chyflwyno a dosbarthu.

Diolchodd COL i'r tîm cyllid, y Cyfarwyddwyr Gweithredol a'r sefydliad ehangach am eu cefnogaeth wrth ddilyn y llywodraethu ariannol i gyflawni'r sefyllfa gytbwys a'r canlyniad cyffredinol cadarnhaol ar gyfer y cyfrifon.

Diolchodd y Cadeirydd i COL am yr adroddiad.

Penderfynodd y Bwrdd:

GYMERADWYO'R adroddiad ar y datganiadau ariannol blynyddol.

2.6	**Yr Adroddiad Blynyddol gan gynnwys yr Adroddiad Atebolrwydd Blynyddol a'r Adroddiad Perfformiad ar gyfer 2021/22** Gwahoddodd y Cadeirydd Chris Darling (CD), Ysgrifennydd y Bwrdd, i gyflwyno'r adroddiad blynyddol i'r Bwrdd. Adroddiad Blynyddol 2021/22 oedd y cyntaf fel corff statudol a gyflwynwyd i'r Bwrdd i'w gymeradwyo. Wrth ddatblygu'r adroddiad blynyddol, roedd y llawlyfr ar gyfer cyfrifon ac yn arbennig canllawiau pennod 3 yn darparu'r strwythur ar gyfer y cynnwys. Roedd y cais am un adroddiad blynyddol i gynnwys: • Adroddiad perfformiad • Adroddiad atebolrwydd • Datganiadau ariannol Mae'r adroddiad perfformiad yn darparu gwybodaeth am brif amcanion, strategaethau a phrif risgiau Iechyd a Gofal Digidol Cymru, a rhaid iddo ddarparu golwg gytbwys a theg ar y perfformiad ar draws y flwyddyn. Cynnwys yr adroddiad Perfformiad yw prif sail y cynnwys ar gyfer y Cyfarfod Cyffredinol Blynyddol sy'n gyfle i rannu manylion yr	Cymerad wywyd	Dim i'w nodi

adroddiad gyda'r cyhoedd.

Mae'r adroddiad Atebolrwydd yn cynnwys:

- Adroddiad Llywodraethu Corfforaethol
- Adroddiad ar Gyflogau a Staff
- Adroddiad Atebolrwydd ac Archwilio Cynulliad Cenedlaethol Cymru

Rhannwyd yr Adroddiad Blynyddol gydag aelodau'r Bwrdd sawl gwaith ar gyfer eu hadolygiad a'u mewnbwn gyda'r drafft cychwynnol a gyflwynwyd i Lywodraeth Cymru ar 6 Mai 2022.

Diolchodd CD i'r rhai a roddodd adborth gan nodi bod yr adborth wedi cael sylw yn fersiwn derfynol yr adroddiad heddiw a GYMERADWYWYD gan y Pwyllgor Archwilio a Sicrwydd yn eu cyfarfod eithriadol.

Yn olaf, amlinellodd CD fod yn rhaid i'r Adroddiad Blynyddol fod yn gynrychiolaeth deg a chytbwys o'r sefydliad ac mae Helen Thomas fel Prif Swyddog Gweithredol yn cymryd cyfrifoldeb personol am hyn ac yn llofnodi i'r perwyl hwnnw.

Diolchodd y Cadeirydd i CD am yr adroddiad, i gydweithwyr Archwilio Cymru ac archwilio mewnol a'r sefydliad am eu holl waith yn ystod 2021/22.

Diolchodd Helen Thomas (HT), Prif Swyddog Gweithredol, i gydweithwyr ar draws DHCW am eu gwaith dros y flwyddyn ddiwethaf mewn amgylchiadau heriol, a'r gwaith a wnaed i gynhyrchu'r Adroddiad Blynyddol a'r cyfrifon.

Penderfynodd y Bwrdd:

GYMERADWYO'R adroddiad blynyddol a'r cyfrifon archwiliedig i'w cyflwyno i Lywodraeth Cymru.

NODYN Cymeradwyodd y Bwrdd bod y Cadeirydd a'r Prif Swyddog Gweitherdol yn llofnodi'r adroddiad blynyddol a'r cyfrifon cyn eu cyflwyno i Lywodraeth Cymru.

	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** - Dydd Iau 28 Gorffennaf 2022 Daeth y cyfarfod i ben am 15:10	Nodwyd	Dim i'w nodi

Tolley,Laura
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Title	Date of Meeting	Business Area	Action/Decision Narrative	Action Lead	Due Date	Status/Outcome Narrative	Revised due date	Status
20220331-A01	31/03/2022	Workforce and Organisational Development	Cost of living risk be considered for the organisations workforce	Sarah-Jane Taylor - Director of People and OD	28/07/2022	This will be discussed at the SHA Board Meeting in July		Underway

Tolley, Laura
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DIGITAL HEALTH AND CARE WALES
FORWARD WORKPLAN REPORT

Agenda Item	2.5

Name of Meeting	SHA Board
Date of Meeting	28 July 2022

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

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

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

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

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

1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	Development of the new Digital Organsation

CORPORATE RISK (ref if appropriate)	

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

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

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

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

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
CEO	Chief Executive Officer		

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 July 2022

- Shared Listening and Learning Annual Review
- DHCW Risk Appetite (included within the Board Assurance Framework Report)
- Lessons Learnt from the Recruitment Taskforce
- Welsh Government Decarbonisation Return

3.2   In addition, the following items are scheduled to be presented to the September meeting:

- Research and Innovation Strategy
- DHCW Estates Strategy
- Communications Strategy 2022-23
- Health Emergency Planning Annual Report for 2021
- People and Organisational Development Strategy
- Welsh Government Digital Health Strategy
- Cyber Action Plan *Private Agenda Item

4   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

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

Forward Workplan Report   Page 3 of 4   Author: Laura Tolley
                                                                        Approver: Chris Darling
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4.2   The updated Workplan can be found as 2.5i 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	November 2021	Noted
SHA Board	January 2022	Noted
SHA Board	March 2022	Noted
SHA Board	May 2022	Noted

Forward Workplan Report   Page 4 of 4   Author: Laura Tolley
                                                                          Approver: Chris Darling
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Digital Health and Care Wales Board Work Programme

Meeting Date	Standing items	Governance	Additional items
28 July 2022	- Welcome and Introductions - Minutes - Declarations of interest - Action log - Forward Work Programme - Shared listening and learning – Patient/User Story - Chairs Report - Chief Executives Report - Review of Corporate Risk Register - Integrated Organisational Performance Report - Committee Highlight Reports - Financial Report - Risk Management and Board Assurance Framework Report - Strategic Procurement Report	- Annual Report - Accountability Report - IMTP Progress Update (Via IOPR) - Annual Statutory Accounts - IM Digital Network Highlight Report - DHCW Risk Appetite	- Shared Listening and Learning Annual Review - Lessons learnt from the Recruitment Taskforce - Welsh Government Decarbonisation Return
29 September 2022	- Welcome and Introductions - Minutes - Declarations of interest - Action log - Forward Work Programme - Shared listening and learning – Patient/User Story - Chairs Report - Chief Executives Report - Review of Corporate Risk Register - Integrated Organisational Performance Report - Committee Highlight Reports - Financial Report - Risk Management and Board Assurance Framework Report - Strategic Procurement Report (including NDR Cloud Procurement)	- IMTP Progress Update (Via IOPR) - Equality Monitoring / Strategic Equality Plan	- Research and Innovation Strategy - DHCW Estates Strategy - Communications Strategy 2022-23 - Health Emergency Planning Annual Report for 2021 - People and OD Strategy - Cyber Action Plan (PRIVATE) - Welsh Government Digital Health Strategy
24 November 2022	- Welcome and Introductions - Minutes	Senior Information Risk Owner Annual Report	Data Centre Move

Tolley,Laura 21/07/2022 13:51:09

	• Declarations of interest • Action log • Forward Work Programme • Shared listening and learning – Patient/User Story • Chairs Report • Chief Executives Report • Review of Corporate Risk Register • Integrated Organisational Performance Report • Committee Highlight Reports • Financial Report • Risk Management and Board Assurance Framework Report • Strategic Procurement Report	• Half Year Performance Against Plan • IMTP Progress Update (Via IOPR) • IM Digital Network Highlight Report • Policy Update – IP Policy	
26 January 2023	• Welcome and Introductions • Minutes • Declarations of interest • Action log • Forward Work Programme • Shared listening and learning – Patient/User Story • Chairs Report • Chief Executives Report • Review of Corporate Risk Register • Integrated Organisational Performance Report • Committee Highlight Reports • Financial Report • Risk Management and Board Assurance Framework Report • Strategic Procurement Report	• Audit Wales Structured Assessment and Audit Letter • Approach to End of Year Reporting • IMTP Approval • IMTP Progress Update (Via IOPR) • Board Cycle of Business (2023-24) • Board Champion annual review report	
30 March 2023	• Welcome and Introductions • Minutes • Declarations of interest • Action log • Forward Work Programme • Shared listening and learning – Patient/User Story • Chairs Report • Chief Executives Report • Review of Corporate Risk Register • Integrated Organisational Performance Report • Committee Highlight Reports	• IMTP Approval • IMTP Progress Update (Via IOPR) • Emergency Planning Annual Report • Engagement Strategy • Performance Management Framework • Annual Review of Standing Orders • Board and Committee Effectiveness Self-Assessment • IM Digital Network Highlight Report	•

Tolley,Laura
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	• Financial Report • Risk Management and Board Assurance Framework Report • Strategic Procurement Report		

DIGITAL HEALTH AND CARE WALES
DHCW DECARBONISATION RETURN

Agenda Item	2.6

Name of Meeting	SHA Board
Date of Meeting	28 July 2022

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

Executive Sponsor	Claire Osmundsen-Little, Executive Director of Finance
Prepared By	Julie Ash, Head of Corporate Services
Presented By	Claire Osmundsen-Little, Executive Director of Finance

Purpose of the Report	For Approval
Recommendation	
The Board is being asked to: **APPROVE** the DHCW Decarbonisation Return 2021-22	

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

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

1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply

CORPORATE RISK (ref if appropriate)	

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 acccountability
If more than one standard applies, please list below:	

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

Workforce EQIA page

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below
	Compliance with Welsh Government targets published in their Delivery Plan issued via a Welsh Health Circular
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implication related to the activity outlined in this report
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below
	Commitment from the Workforce is key to achieving targets
SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below
	Social impacts on health are embedded in the broader

Author: Julie Ash
Approver: Claire Osmundsen-Little
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	environment and shaped by complex relationships between economic systems and social structures.
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	NWSSP	NHS Wales Shared Services Partnership
kgCO2e	Kilogram of carbon dioxide equivalent	MTCO2e	Metric tons of carbon dioxide equivalent

2   SITUATION/BACKGROUND

2.1   This report provides an update on decarbonisation activity within Digital Health and Care Wales during the period April 2021 to March 2022 and includes the emissions return for Welsh Government as 2.6i Appendix A for approval.

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. We are due to present an overview of our Decarbonisation Strategic Action Plan at a future meeting.

2.3   NHS Wales Shared Services Partnership have recently undertaken an audit of our Decarbonisation management arrangements. The report is awaited.

2.4   Digital Health & Care Wales (DHCW) has a number of Groups in place which manage activities relating to the environment:

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

Author: Julie Ash
Approver: Claire Osmundsen-Little

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1 Overview of Activity

We have made significant progress in decarbonising our estate in recent years; however, we recognise that there is more to be accomplished. The DHCW Decarbonisation Strategic Plan allows us to take a fresh look at our building and energy needs, as well as procurement, travel, and other emissions sources. Some of these emissions are beyond our direct control; highlighting the challenge we have in working collaboratively to influence the decisions of others.

DHCW are in a unique position to contribute towards reducing carbon emissions across the wider NHS by providing and improving digital solutions across NHS Wales such as those allowing for digital transfer and storing of information and solutions which allow for remote consultation. We recently presented an overview of DHCW products contributing to decarbonisation to the Health and Social Services Group (HSSG) Climate Change Approach to Healthcare Project Board.

DHCW will work with NHS Wales Shared Services Partnership (NWSSP) Procurement Services through the Welsh Government Procurement and Transport Workstream to develop low carbon procurement strategies which have the potential to have a significant effect on emissions. We have recently reviewed our methodology for calculating procurement emissions to ensure that all procurements are categorised correctly and double-counting does not occur, which has provided a more accurate picture.

Our overall carbon emissions for 2021/22 are detailed in the table below demonstrating a 29% reduction compared to the baseline year of 2019/20, with Procurement remaining the significant contributory factor:

Broad Category	Category	Scope	2019/2020 Emissions (T CO2e)	19/20 %	2021/2022 Emissions (T CO2e)	21/22 %
Building Use	Natural Gas	1 & 3	92		58 (-36%)	
	Electricity (Offices)	2 & 3	400		292 (-27%)	
	Water & Waste	3	10		2 (-80%)	
	Electricity (Datacentres)	2 & 3	1,215		660 (-46%)	
	Subtotal		1,717	9%	1012 (-41%)	7%
Procurement		3	17,207	86%	12,399 (-28%)	88%
Transport	Business Travel	3	138		11 (-92%)	
	Fleet	1	21		25 (+16%)	
	Subtotal		159	1%	36 (-77%)	0.3%
Staff	Commuting	3	872		70 (-92%)	
	Homeworking	3	9		601 (+98%)	
	Subtotal		881	4%	671 (-24%)	4.7%
Total			19,964	100%	14,117 (-29%)	100%

Our full emissions return for Welsh Government is attached as 2.6i Appendix A.

Author: Julie Ash
Approver: Claire Osmundsen-Little

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3.2 Building Use

Gas, waste, water and electricity emissions at our buildings has reduced compared to 2019/20. Use of waste-to-energy services opposed to landfill and switching to renewables energy have contributed towards this. The electricity at the Data centre that is used for power and cooling has seen a significant reduction of 555 Tonnes CO2e. This has been predominantly due to a move to a more energy efficient data centre.

3.3 Procurement Activity

Procurement emissions, which account for the largest proportion of DHCWs carbon footprint, have reduced by 28% (a substantial reduction of 2,808 Tonnes CO2e reduction). Improved data gathering and an enhanced carbon footprint methodology have aided this improvement.

3.4 Transport

Business travel has seen a substantial reduction of 92% (127 Tonnes CO2e); this is largely due to hybrid working practices such as virtual meetings which have allowed for less business travel. Fleet vehicles has slightly risen by 4 Tonnes CO2e, this is as a result of altered working practices requiring additional fleet journeys (delivery of equipment to homes and additional site attendance for estate compliance activity).

3.5 Staff

Commuting has reduced by 802 Tonnes CO2e; this is to be expected due to homeworking. Likewise, homeworking emissions have risen to 592 Tonnes CO2e. Each category offsets the other.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

4.1 The DHCW Decarbonisation Strategic Delivery Plan was approved at the March 2022 Board and submitted with the Integrated Medium Term Plan to Welsh Government on 31 March 2022. Plans are undergoing a Peer Review (involving all NHS organisations) during July 2022.

4.2 We are required to report our 2021/22 emissions performance to Welsh Government via an agreed template which is completed and attached as 2.6i Appendix A 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.

4.3 We have achieved a 29% reduction in emissions during 2021-22 compared to our baseline year 2019-20.

Author: Julie Ash
Approver: Claire Osmundsen-Little

5   RECOMMENDATION

The Board is being asked to:
APPROVE the DHCW Decarbonisation Return 2021-22

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 (Emissions return)	23 June 2022	Approved
Audit & Assurance Committee (Emissions return)	4 July 2022	Noted

Author: Julie Ash
Approver: Claire Osmundsen-Little
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APPENDIX B

Operational Emmisions
Summary emission reporting format

Summary table where emission sources, consumption data, RSD and emissions per source are listed.

Instructions for users
1) You can keep raw data in separate sheets; this summary sheet is for aggregating your consumption data per emission source or per activity, and applying appropriate emission factors.
2) You will need to put in appropriate formulas to calculate the units of kgCO2e from the consumption data in column F and your chosen emission factors in the tab.
3) You should provide one line per emission source and methodology tier e.g. if you have mostly metered gas data with emissions calculated using Tier 3 method but two buildings where you have no metering and therefore you need to use Tier 1, this should be given as two separate lines because the RSD will be different.

Table 22: Summary table for emission reporting format

Category	Description	Consumption data	Standard consumption data units	RSD estimate (+/-%)	Emissions - Units tCO2e	Ease of collection assessment / Reason for not including	Organisational Notes
Diesel - biofuel blend	All organisation fleet vehicles	8,109.45	Litres	+/-2%	25.32	*Data complete and easy to collect and process*	*Diesel Fleet vans*
Grid electricity - buildings	TGA and Bocam	512,252.80	kWh	+/-2%	149.22	*Data complete and easy to collect and process*	*TGA and Bocam both have renewable electricity*
Grid electricity - buildings	Castlebridge, Mamhilad and Swansea	233,084.50	kWh	+/-2%	67.90	*Data complete and easy to collect and process*	*Castlebridge, Mamhilad and Swansea have renewable electricity, as confimred by landlord certificates*

Grid electricity - buildings	Mold	257,053.40	kWh	+/-10%	74.88	Data complete but requires effort to collect and process	Standard electricity supply i.e. NOT supplied from renewable sources
Grid electricity - buildings	Homeworking	224,613.00	kWh	+/-25%	65.43	Data unavailable in the timescales	Methodology based on EcoAct Whitepaper 2020
Grid electricity - datacentres	Vantage Datacentre	1,125,981.79	kWh	+/-2%	328.00	Data complete and easy to collect and process	Direct consumption in metered rack space provided on 3rd party site
Grid electricity - datacentres	Church Village Datacentre	408,570.00	kWh	+/-2%	119.02	Data complete and easy to collect and process	Direct consumption in metered rack space provided on 3rd party site
Grid electricity - datacentres	Church Village Datacentre	57,199.80	kWh	+/-25%	16.66	Data complete and easy to collect and process	Scope 3 cooling etc. based on PUE of 1.14
Grid electricity - datacentres	Vantage Datacentre	675,589.07	kWh	+/-25%	196.80	Data complete and easy to collect and process	Scope 3 cooling etc. based on PUE of 1.6
Natural Gas	TGA and Mamhilad both invoiced	233,425.00	kWh	+/-2%	50.07	Data complete and easy to collect and process	Bocam and Mold sites have no Gas on site.
Natural Gas	Castlebridge and Swansea are all calculated using floor area	37,072.78	kWh	+/-10%	7.95	Data complete but requires effort to collect and process	Castlebridge and Swansea are all calculated using TGA floor area
Natural Gas	Homeworking	2,496,948.00	kWh	+/-25%	535.62	Data unavailable in the timescales	Methodology based on EcoAct Whitepaper 2020

Travel - bus	Staff commuting	21,249.00	passenger km	+/-25%	3.11	*Data unavailable in the timescales*	*Methodology based on EcoAct Whitepaper 2021- Percentage proportioning taken from Welsh Public Sector Net Zero Reporting Guide-2021 Modified WG Tier 1 using 885 staff, 94% homeworking in this year*
Travel - car passenger	Staff commuting	31,166.00	vehicle km	+/-25%	0.00	*Data unavailable in the timescales*	*as above*
Travel - cycle	Staff commuting	6,611.00	vehicle km	+/-25%	0.00	*Data unavailable in the timescales*	*as above*
Travel - motorcycle	Staff commuting	2,833.00	vehicle km	+/-25%	0.41	*Data unavailable in the timescales*	*as above*
Travel - private car	Staff commuting	302,215.00	vehicle km	+/-25%	65.45	*Data unavailable in the timescales*	*as above*
Travel - private car	Business mileage - all employees	48,403.27	vehicle km	+/-5%	10.48	*Data complete and easy to collect and process*	
Travel - rail	Staff commuting	8,972.00	passenger km	+/-25%	0.38	*Data unavailable in the timescales*	*as above*
Travel - taxi	Staff commuting	1,889.00	passenger km	+/-25%	0.35	*Data unavailable in the timescales*	*as above*
Travel - walk	Staff commuting	44,860.00	vehicle km	+/-25%	0.00	*Data unavailable in the timescales*	*as above*
Waste - incineration	TGA and Mold WtE	10.71	tonnes	+/-2%	0.23	*Data complete and easy to collect and process*	*WtE used at these sites - no waste sent to landfill*

Waste - incineration	Castlebridge, Mamhilad and Swansea WtE, all calculated using floor area	3.47	tonnes	+/-15%	0.07	*Availability of data unknown*	*Estimated tonnage based on floor area - waste disposed of via WtE, no waste is sent to landfill by our landlord as part of lease agreement.*
Waste - landfill	**No sites**	0.00	tonnes	+/-15%	0.00	*Availability of data unknown*	*Estimated tonnage based on floor area - watse sent to landfill by our landlords as part of lease agreement.*
Waste - landfill	Bocam	0.14	tonnes	+/-2%	0.07	*Data complete and easy to collect and process*	*Estimated tonnage based on collection contract.*
Waste - recycling	All Sites	6.82	tonnes	+/-2%	0.15	*Data complete but requires effort to collect and process*	*DHCW provide and dispose of IT kit from across NHW Wales*
Waste - recycling	All Sites Confidential Waste Data and TGA and Bocam recycling	12.41	tonnes	+/-2%	0.26	*Data complete but requires effort to collect and process*	*These figures include our confidential and dry mixed recycling i.e plastic, cans, glass and cardboard.*
Waste - recycling	Castlebridge, Mamhilad, and Swansea recycling are all calculated using floor area	4.85	tonnes	+/-15%	0.10	*Availability of data unknown*	*These figures include our confidential and dry mixed recycling i.e plastic, cans, glass and cardboard. Estimated tonnage based on floor area.*
Water supply	TGA, Bocam and Mamhilad	1,567.31	m³	+/-2%	0.23	*Data complete and easy to collect and process*	*Invoiced water supply*

Water supply	Castlebridge, Swansea and Mold are all calculated using floor area	393.79	m³	+/-15%	0.06	*Data complete but requires effort to collect and process*	*Water is included within lease agreement. In the absence of invoice data, usage is calculated using floor area*
Water treatment	TGA, Bocam and Mamhilad	1,490.64	m³	+/-2%	0.41	*Data complete and easy to collect and process*	*Invoiced water supply*
Water treatment	Castlebridge, Swansea and Mold are all calculated using floor area	374.63	m³	+/-15%	0.10	*Data complete but requires effort to collect and process*	*Water is included within lease agreement. In the absence of invoice data, usage is calculated using floor area*
		6,741,963			**1,719**		

Procurement Emissions

Indirect emissions from the supply chain

This table is taken directly from the Defra source 'Table 13 - Indirect emissions from the supply chain'.
www.gov.uk/government/statistics/uks-carbon-footprint

This table only covers indirect emissions from the supply chain and is an estimate of the indirect GHG emissions resulting from expenditure on procuring goods and services. The emission factors were calculated by the Centre for Sustainability Accounting and were last updated for the year 2011. Currently there are no more recent factors available for expenditure by SIC code.

This table also includes a number of activities that are likely to be covered in your operational emissions, such as fuel use and transmission and distribution, travel and water. If you have captured that expenditure in the Operational emissions tab, you should remove the expenditure from this table as otherwise you will be double counting your emissions. However, the information in this table may still be useful for a rough initial calculation of the relative importance of these activities in the first instance.

Instructions for users:

1) Identify the amount spent on different product groups (in actual prices in £s, including VAT).

2) Multiply the amount of spending by the conversion factor to get total emissions in kilograms of carbon dioxide equivalent (kg CO_2e). This excel spreadsheet does this automatically following your entry of the amount of spending into the appropriate box.

Table 13 Indirect emissions from the supply chain

SIC code (SIC 2007)	Product category	Amount spent by product category (£)	Emission factor (kgCO2e per £ spent)	Total kg CO_2e	RSD estimate (+/-%)	Notes on data source and exclusions
10.8	*Other food products*	£0.00	0.96	0	+/-25%	
11.07	*Soft drinks*	£0.00	0.60	0	+/-25%	
14	*Wearing apparel*	£1,137.75	0.68	769	+/-25%	

17	Paper and paper products	£466.03	1.18	552	+/-25%
18	Printing and recording services	£0.00	0.58	0	+/-25%
20.4	Soap and detergents, cleaning and polishing preparations, perfumes and toilet preparations	£5,129.96	1.44	7398	+/-25%
22	Rubber and plastic products	£2,986.50	0.96	2868	+/-25%
26	Computer, electronic and optical products	£2,568,926.09	0.41	1055117	+/-25%
27	Electrical equipment	£42,752.66	0.62	26514	+/-25%
28	Machinery and equipment n.e.c.	£0.00	0.56	0	+/-25%
31	Furniture	£24,409.22	0.64	15539	+/-25%
32	Other manufactured goods	£0.00	0.45	0	+/-25%
38	Waste collection, treatment and disposal services; materials recovery services	£0.00	1.36	0	+/-25%
41-43	Construction[4]	£0.00	0.37	0	+/-25%
52	Warehousing and support services for transportation	£0.00	0.28	0	+/-25%
53	Postal and courier services	£1,451.27	0.35	508	+/-25%

55	Accommodation services	£0.00	0.45	0	+/-25%	
56	Food and beverage serving services	£17,939.22	0.40	7236	+/-25%	
58	Publishing services	£20,199.50	0.23	4558	+/-25%	
61	Telecommunications services	£1,760,237.69	0.32	560862	+/-25%	
62	Computer programming, consultancy and related services	£53,281,493.02	0.18	9401503	+/-25%	
65.1-3	Insurance, reinsurance and pension funding services, except compulsory social security & Pensions	£0.00	0.18	0	+/-25%	
68.1-2	Real estate services, excluding on a fee or contract basis and imputed rent	£0.00	0.13	0	+/-25%	
69.1	Legal services	£27,342.86	0.10	2629	+/-25%	
69.2	Accounting, bookkeeping and auditing services; tax consulting services	£0.00	0.12	0	+/-25%	
70	Services of head offices; management consulting services	£0.00	0.17	0	+/-25%	
71	Architectural and engineering services; technical testing and analysis services	£74,587.67	0.18	13379		
73	Advertising and market research services	£0.00	0.20	0	+/-25%	
74	Other professional, scientific and technical services	£0.00	0.16	0	+/-25%	

77	Rental and leasing services	£1,068,552.61	0.23	251059	+/-25%	
78	Employment services	£1,624,346.01	0.14	223606	+/-25%	
80	Security and investigation services	£0.00	0.24	0	+/-25%	
81	Services to buildings and landscape	£239,196.43	0.25	58741	+/-25%	
82	Office administrative, office support and other business support services	£4,270,021.14	0.18	765820	+/-25%	
84	Public administration and defence services; compulsory social security services	£0.00	0.27	0	+/-25%	
85	Education services	£0.00	0.17	0	+/-25%	
95	Repair services of computers and personal and household goods	£0.00	0.22	0	+/-25%	
Not confirmed	Spending categories with less than £10Kpa spend	£0.00	0.25	0	+/-25%	Data complete but requires effort to collect and process - conservative EF assigned
Unknown	37470-Miscellaneous Expenditure	£0.00	0.25	0	+/-25%	Metadata unavailable in the timescales - conservative EF assigned.
Unknown	37400-Other General Provisions	£0.00	0.25	0	+/-25%	Metadata unavailable in the timescales - conservative EF assigned.

Tolley, Laura
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Unknown	*32810-Other General Supplies & Services*	**£0.00**	*0.25*	0	+/-25%	*Metadata unavailable in the timescales - conservative EF assigned.*
Unknown	*37710-Recharge : Miscellaneous*	**£0.00**	*0.25*	0	+/-25%	*Metadata unavailable in the timescales - conservative EF assigned.*
	Total	**£65,031,175.63**		**12,398,656**		

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DIGITAL HEALTH AND CARE WALES
STANDING FINANCIAL INSTRUCTIONS ANNUAL REVIEW

Agenda Item	2.7

Name of Meeting	SHA Board
Date of Meeting	28 July 2022

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	Mark Cox, Associate Director of Finance

Purpose of the Report	For Approval
Recommendation	
The Board is being asked to: **APPROVE** the Standing Financial Instructions Review and proposed changes.	

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

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

1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply

CORPORATE RISK (ref if appropriate)	

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 acccountability
If more than one standard applies, please list below:	

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

Workforce EQIA page

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below
	The Standing Financial Instructions form the basis upon which DHCW's governance and accountability framework is developed and, together with the adoption of DHCW's Values and Standards of Behaviour framework, is designed to ensure the achievement of the standards of good governance set for the NHS in Wales.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below
	The SFI's are designed to achieve probity, accuracy, economy, efficiency, effectiveness and sustainability in the conduct of business, they translate statutory and Welsh Government financial requirements for the NHS in Wales into day to day operating practice.
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.

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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
SFI	Standing Financial Instructions	SO	Standing Orders

2   SITUATION/BACKGROUND

2.1   The SHA standing orders require that the DHCW Board must consider and agree to adopt the Standing Orders (SOs) for the regulation of their proceedings and business. They are designed to translate the statutory requirements set out in legislation into day-to-day operating practice, and, together with the adoption of a Scheme of Decisions reserved to the Board; a Scheme of Delegations to officers and others; and Standing Financial Instructions (SFIs), they provide the regulatory framework for the business conduct of DHCW.

These SFIs detail the financial responsibilities, policies and procedures adopted by DHCW. They are designed to ensure that DHCW's financial transactions are carried out in accordance with the law and with Welsh Government policy in order to achieve probity, accuracy, economy, efficiency, effectiveness and sustainability. They should be used in conjunction with the Schedule of decisions reserved to the Board and the Scheme of delegation adopted by DHCW.

2.2   The DHCW Board considered and agreed to adopt the Standing Financial Instructions in April 2021.

2.3   This paper presents the outcome of the annual Standing Financial Instructions content review.

3   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1   Standing Financial Instructions – Content Review

The SHA Board are asked to approve the following changes to the Standing Financial Instructions with tracked changes which can be found <u>HERE:</u>

- **Allocations And Financial Duty: Section 4 (Page 19) 4.1**
  Amendment proposed: Delete "Revenue and capital allocations are determined by Welsh Ministers in accordance with its allocated budget and distribution policy" as superfluous and not explicitly relevant to DHCW.

- **Non-Pay Expenditure: Section 11 (Page 34) 11.2**
  Amendment proposed: amended section to "Ensure the Board are advised regarding the NHS Wales national procurement and payment systems thresholds" rather than "Advise the Board regarding the NHS Wales national procurement and payment systems thresholds" due to the Executive structure.

- **Non-Pay Expenditure: Section 11 (Page 36) 11.5.1**
  Amendment proposed: replace "behalf of the DHCW" to "behalf of DHCW".

- **Non-Pay Expenditure: Section 11 (Page 37) 11.6.2**
  Amendment proposed: revise wording from " on the DHCW" to "on DHCW".

- **Procurement And Contracting For Goods And Services: Section 12 (Page 38) 12.2.1**
  Amendment proposed: revise schedule reference from "2" to "1".

- **Agreements And Contracts For All Wales Digital Solutions & Services Section 13 (page 53) 13.1.4**
  Amendment proposed: revise schedule reference from "2" to "1".

- **Capital Plan, Capital Investment, Fixed Asset Registers And Security of Assets: Section 16 (Page 68) 16.7.3**
  Amendment proposed: remove "Director of Planning" reference.

- **Revised General Consent To Enter Individual Contracts: Schedule 1 (Page 77)**

  Amendment proposed: replace schedule 1 to reflect latest Welsh Government letter issued 31st March 2022 (replacing November 2020 version) with DHCW now explicitly referenced within the latest iteration.

Details of the review can be found in Appendix A.

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4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

4.1 All DHCW Board members and officers must be made aware of these Standing Financial Instructions and, where appropriate, should be familiar with their detailed content. The Executive Director of Finance will be able to provide further advice and guidance on any aspect of the Standing Financial Instructions. The Board Secretary will be able to provide further advice and guidance on the wider governance arrangements within DHCW. If approved by the Board the amended SFI's will be uploaded to the DHCW Internet site and DHCW SharePoint site.

4.2 Proposed amendments were reviewed and endorsed by the Audit and Assurance Committee on 4 July 2022.

5 RECOMMENDATION

5.1 The Board is being asked to:
APPROVE the Standing Financial Instructions Review and proposed changes.

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 Audit and Assurance Committee	04/07/2022	Endorsed
DHCW Management Board	23/06/2022	Noted

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Appendix A: Standing Financial Instructions – Review Detail

Ref	Section	Comment	Proposed Change
1	**INTRODUCTION**	None	None
1.1	General	None	None
1.2	Overriding Standing Financial Instructions	None	None
1.3	Financial provisions and obligations of DHCW	None	None
2	**RESPONSIBILITIES AND DELEGATION**	None	None
2.1	The Board	None	None
2.2	The Chief Executive and Director of Finance	None	None
2.3	The Director of Finance	None	None
2.4	Board members and DHCW officers, and DHCW Committees and Advisory Groups	None	None
2.5	Contractors and their employees	None	None
3	**AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT**	None	None
3.1	Audit Committee	None	None
3.2	Chief Executive	None	None
3.3	Internal Audit	None	None
3.4	External Audit	None	None
3.5	Fraud and Corruption	None	None
3.6	Security Management	None	None
4	**ALLOCATIONS AND FINANCIAL DUTY**	Revenue and capital allocations are determined by Welsh Ministers in accordance with its allocated budget and distribution policy	Delete as superfluous and not explicitly relevant to DHCW
5	**INTEGRATED PLANNING**	None	None
6	**FINANCIAL MANAGEMENT AND BUDGETARY CONTROL**	None	None
6.1	Budget Setting	None	None
6.2	Budgetary Delegation	None	None

Ref	Section	Comment	Proposed Change
6.3	Financial Management, Reporting and Budgetary Control	None	None
6.4	Capital Financial Management, Reporting and Budgetary Control	None	None
6.5	Reporting to Welsh Government - Monitoring Returns	None	None
7	**ANNUAL ACCOUNTS AND REPORTS**	None	None
8	**BANKING ARRANGEMENTS**	None	None
8.1	General	None	None
8.2	Bank Accounts	None	None
8.3	Banking Procedures	None	None
8.4	Review	None	None
9	**CASH, CHEQUES, PAYMENT CARDS AND OTHER NEGOTIABLE INSTRUMENTS**	None	None
9.1	General	None	None
9.2	Petty Cash	None	None
10	**INCOME, FEES AND CHARGES**	None	None
10.1	Income Generation	None	None
10.2	Income Systems	None	None
10.3	Fees and Charges	None	None
10.4	Income Due and Debt Recovery	None	None
11	**NON-PAY EXPENDITURE**		
11.1	Scheme of Delegation, Non Pay Expenditure Limits and Accountability	None	None
11.2	The Director of Finance's responsibilities	a) Advise the Board regarding the NHS Wales national procurement and payment systems thresholds above which quotations (competitive or otherwise) or formal tenders must be obtained; and, once approved, the thresholds should be incorporated in SOs and SFIs;	a) Ensure the Board are advised regarding the NHS Wales national procurement and payment systems thresholds above which quotations (competitive or otherwise) or formal tenders must be obtained; and, once approved, the thresholds should be incorporated in SOs and SFIs;
11.3	Duties of Budget Holders and Managers	None	None

Ref	Section	Comment	Proposed Change
11.4	Departures from SFI's	None	None
11.5	Accounts Payable	11.5.1 wording " behalf of the DHCW"	"behalf of DHCW"
11.6	Prepayments	11.6.2 wording " on the DHCW" rather than "on DHCW"	"on DHCW"
12	**PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES**	None	None
12.1	Procurement Services	None	None
12.2	Policies and Procedures	None	None
12.3	Procurement Principles	None	None
12.4	Procurement Regulations and Legislation Governing Public Procurement	None	None
12.5	Procurement Procedures	None	None
12.6	Procurement Consent/Notification	12.6.1 The guidance process for DHCW to notify their intent to enter into contracts exceeding £1 million is at Schedule 2. This requirement also applies to contracts that are to be let through a mini-competition under a public sector contract framework, such as National Procurement Service, NHS Supply Chain or Crown Commercial Services. The use of suitable Welsh frameworks where access is permissible shall take precedence over frameworks led by Public Sector Bodies outside of Wales. Further detailed guidance is incorporated within the Procurement Procedures.D73	12.6.1 The guidance process for DHCW to notify their intent to enter into contracts exceeding £1 million is at Schedule 1. This requirement also applies to contracts that are to be let through a mini-competition under a public sector contract framework, such as National Procurement Service, NHS Supply Chain or Crown Commercial Services. The use of suitable Welsh frameworks where access is permissible shall take precedence over frameworks led by Public Sector Bodies outside of Wales. Further detailed guidance is incorporated within the Procurement Procedures.
12.7	Sustainable Procurement	None	None
12.8	Small and Medium Sized Enterprises (SMEs), Third Sector Organisations (TSOs) and Supported Factories and Businesses (SFBs)	None	None
12.9	Planning Procurements	None	None
12.1	Procurement Process	None	None
12.11	Procurement Thresholds	None	None
12.12	Designing Competitions	None	None
12.13	Single Quotation Application or Single Tender Application	None	None
12.14	Disposals	None	None

Ref	Section	Comment	Proposed Change
12.15	Evaluation, Approval and Award	None	None
12.16	Contract Management	None	None
12.17	Extending and Varying Contracts	None	None
12.18	Requisitioning	None	None
12.19	No Purchase Order, No Pay	None	None
12.2	Official orders	None	None
13	**AGREEMENTS AND CONTRACTS FOR ALL WALES DIGITAL SOLUTIONS & SERVICES**	None	None
13.1	Digital Solution Agreements	13.1.4 For all agreements entered into in the form of a contract, the process for notifying the Welsh Ministers of NHS contracts set out in section 12 and Schedule 2 of these SFIs must be followed.	13.1.4 For all agreements entered into in the form of a contract, the process for notifying the Welsh Ministers of NHS contracts set out in section 12 and Schedule 1 of these SFIs must be followed.
13.2	Statutory provisions	None	None
13.3	Application of delegated limits	None	None
14	**GRANT FUNDING,**	None	None
14.1	Legal Advice	None	None
14.2	Policies and procedures	None	None
14.3	Corporate Principles underpinning Grants Management	None	None
14.4	Grant Procedures	None	None
15	**PAY EXPENDITURE**	None	None
15.1	Remuneration and Terms of Service Committee	None	None
15.2	Funded Establishment	None	None
15.3	Staff Appointments	None	None
15.4	Pay Rates and Terms and Conditions	None	None
15.5	Payroll	None	None
15.6	Contracts of Employment	None	None
16	**CAPITAL PLAN, CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS**	None	None
16.1	Capital Plan	None	None
16.2	Capital Investment Decisions	None	None

Ref	Section	Comment	Proposed Change
16.3	Capital Projects	None	None
16.4	Capital Procedures and Responsibilities	None	None
16.5	Capital Financing with the Private Sector	None	None
16.6	Asset Registers	None	None
16.7	Security of Assets	16.7.1 All discrepancies revealed by verification of physical assets to fixed asset register shall be notified to the Director of Planning and Director of Finance.	16.7.1 All discrepancies revealed by verification of physical assets to fixed asset register shall be notified to the Director of Finance.
17	**STORES AND RECEIPT OF GOODS**	None	None
17.1	General position	None	None
17.2	Control of Stores, Stocktaking, condemnations and disposal	None	None
17.3	Goods supplied by an NHS supplies agency	None	None
18	**DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS**	None	None
18.1	Disposals and Condemnations	None	None
18.2	Losses and Special Payments	None	None
19	**DIGITAL, DATA and TECHNOLOGY**	None	None
19.1	Digital Data and Technology Strategy	None	None
19.2	Responsibilities and duties of the responsible Director	None	None
19.3	Responsibilities and duties of the Director of Finance	None	None
19.4	Contracts for data and digital services with other health bodies or outside agencies	None	None
19.5	Risk assurance	None	None
20	**RETENTION OF RECORDS**	None	None
20.1	Responsibilities of the Chief Executive	None	None
	SCHEDULE 1		

Tolley Laura
21/07/2022 13:51:09

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Ref	Section	Comment	Proposed Change
	Revised General Consent to Enter Individual Contracts	March 2020 Version	Updated for March 22 and dates, version now references DHCW. Note applicable to DHCW (but explicit to HEIW) the following was added "Contracts entered into by HEIW for services which are the consequences of annual commissioning approved by the Minister e.g. annual education and training commissioning do not require further Ministerial notification or consent. "

STANDING FINANCIAL INSTRUCTIONS REVIEW   Page 11 of 11   Author: Mark Cox
Approver: Claire Osmundsen-Little
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11/11   65/233

DIGITAL HEALTH AND CARE WALES
SHARED LISTENING AND LEARNING
PRESENTATION – SCREENING SUPPORT

Agenda Item	3.1

Name of Meeting	SHA Board
Date of Meeting	28 July 2022

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

Executive Sponsor	Rhidian Hurle, Executive Medical Director
Prepared By	Stephen Price, Applications Manager (Corporate)
Presented By	Stephen Price, Applications Manager (Corporate)

Purpose of the Report	For Discussion/Review
Recommendation	

The Board is being asked to:

DISCUSS the Shared Listening and Learning Presentation.

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

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

1   IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply

CORPORATE RISK (ref if appropriate)	N/A

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

DHCW QUALITY STANDARDS	ISO 20000
If more than one standard applies, please list below: The shared listening and learning approach focuses on improving quality through ongoing listening and learning.	

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

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	Yes, please see detail below	
	The inclusion of shared listening and learning at the start of each Board will ensure the DHCW Board considers Quality and Safety as they relate to all learning (patient, staff/clinician, citizen) stories told.	
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below	
	No stories will be told without the consent of those individuals who agree to tell their stories for wider learning.	
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.	

Author: Stephen Price
Approver: Rhidian Hurle

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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
AAA	Abdominal Aortic Aneurysm		

2   SITUATION/BACKGROUND

2.1   Digital Health and Care Wales (DHCW) became a Special Health Authority on the 1 April 2021 governed by the DHCW Board made up of Executive and Independent Board members. The DHCW Board meets formally on a bi-monthly basis.

2.2   DHCW Board approach to shared listening and learning was approved at the 27 May 2021 Board meeting which set out how the Board will start each meeting with a story from either a patient or member of the public or staff/ health and care professional. With the purpose of reminding and reinforcing DHCW Board members of the organisation's core purpose to take forward the digital transformation needed for better health and care in Wales, making services more accessible and sustainable while supporting personal health and well-being.

3   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1   The presentation for the July Board meeting is from the Screening Services and focuses on two adult screening products – Bowel and Abdominal Aortic Aneurysm (AAA). It describes each product, the challenges and what we learnt.

3.2   The presentation highlights key lessons learnt including:

- Software testing
- Participant status codes
- Pro-active incident and problem management
- Hosting
- Covid

Author: Stephen Price
Approver: Rhidian Hurle
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4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

4.1 A copy of the presentation is included at item 3.1i Appendix A.

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	July	Approved

Tolley,Laura
21/07/2022 13:51:09

Author: Stephen Price
Approver: Rhidian Hurle

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Adult Screening Services

How we Support The Programme

DHCW SHA Public Board Meeting
Thursday, 28th July 2022

Stephen Price
Application Manager
Digital Health and Care Wales

Paul Owen
Senior Product Specialist
Digital Health and Care Wales

Introduction

Tolley,Laura
21/07/2022 13:51:09

Description

Bowel Screening

Abdominal Aortic Aneurysm (AAA)

Screening

The Challenges

What we Learnt

Summary

Questions

Description

Abdominal Aortic Aneurysm (AAA) Screening

The aim of this screening programme is to reduce the number of ruptured AAA's and deaths. 65-year-old men who live in Wales are invited to take part by visiting a mobile clinic.

The test involves a simple and painless ultrasound scan to measure the abdominal aorta. Men are six times more likely to have an AAA than women and this becomes increasingly common with age.

Bowel Screening

Bowel screening aims to find cancer at an early stage when treatment is likely to be more effective. Men and women aged between 58 and 74, and who are living in Wales are invited to take the test every two years.

The test kit is designed to measure how much blood is in your faeces and can be completed at home.

Rhaglen Sgrinio Ymlediadau Aortig Abdomenol Cymru — Wales Abdominal Aortic Aneurysm Screening Programme

Sgrinio Coluddion Cymru — Bowel Screening Wales

Bowel Screening

Commissioned By

- Public Health Wales

Users

- PHW Administrators
- PHW Laboratory Staff
- PHW Specialist Screening Practitioners (SSP)

Metrics

- Over 1,067,000 invites
- Approx. 6,500 call and 3,000 re-call per week

Cohort

- Men and Women
- Aged 58 to 74
- Prisoners and other vulnerable groups

Involvement

- Develop and Support

Functionality

- Invitation
- Letters
- Laboratory Testing and Results
- SSP Clinic Scheduling for positive cases
- SSP Management Forms
- HL7 Message Management

Interfaces

- Demographics
- Analysers
- GP Links
- 3rd Party Outsource Company

Tolley,Laura
21/07/2022 13:51:09

Abdominal Aortic Aneurysm (AAA) Screening

Commissioned By

- Public Health Wales

Users

- PHW Administrators
- PHW Screeners

Metrics

- Over 200,00 invites
- Approx. 1,700 per month

Cohort

- Men only
- Aged 65
- Plus 'Walk-ins' are accepted

Involvement

- Develop and Support

Functionality

- Invitation
- Clinic Scheduling
- Letters
- Mobile Clinic Daybook

Interfaces

- Demographics
- PACS

Tolley, Laura
21/07/2022 13:51:09

Iechyd a Gofal Digidol Cymru   Digital Health and Care Wales

The Challenges

General
- Requirements
- Timescales
- New screening programmes (no parallel running)

Specific
- AAA - Remote clinics
- BSIMS - New testing from FoB (card based) to liquid FIT

COVID
- Emergency cessation and controlled restarting of programmes.

Liquid FIT kit

FoB (Card-based) kit

Tolley, Laura
21/07/2022 13:51:09
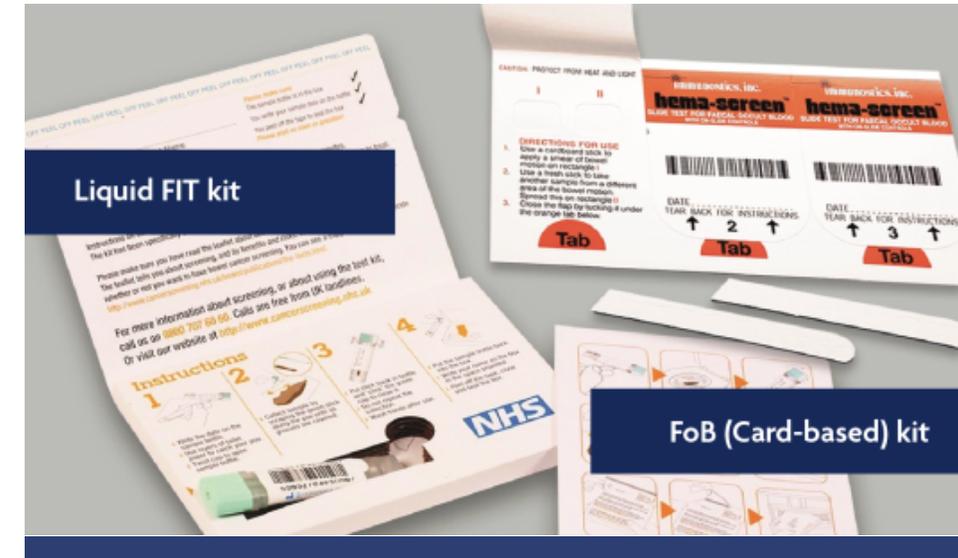
What we Learnt

Software Testing

- Customer Resources available
- Simulation

Participant Status Codes

Pro-active Incident and Problem Management

Hosting

Covid

Tolley Maria
21/07/2022 13:51:09

Summary

We delivered each product on time, to requirements and within budget

Still running and **being actively developed**

NSCNI have their own custom version of Bowel Screening

Excellent working relationship with PHW and HSCNI (Northern Ireland)

At a high level all screening programmes have the same concept – **cohort, call / re-call, test, manage** however **each programme implements this very differently**
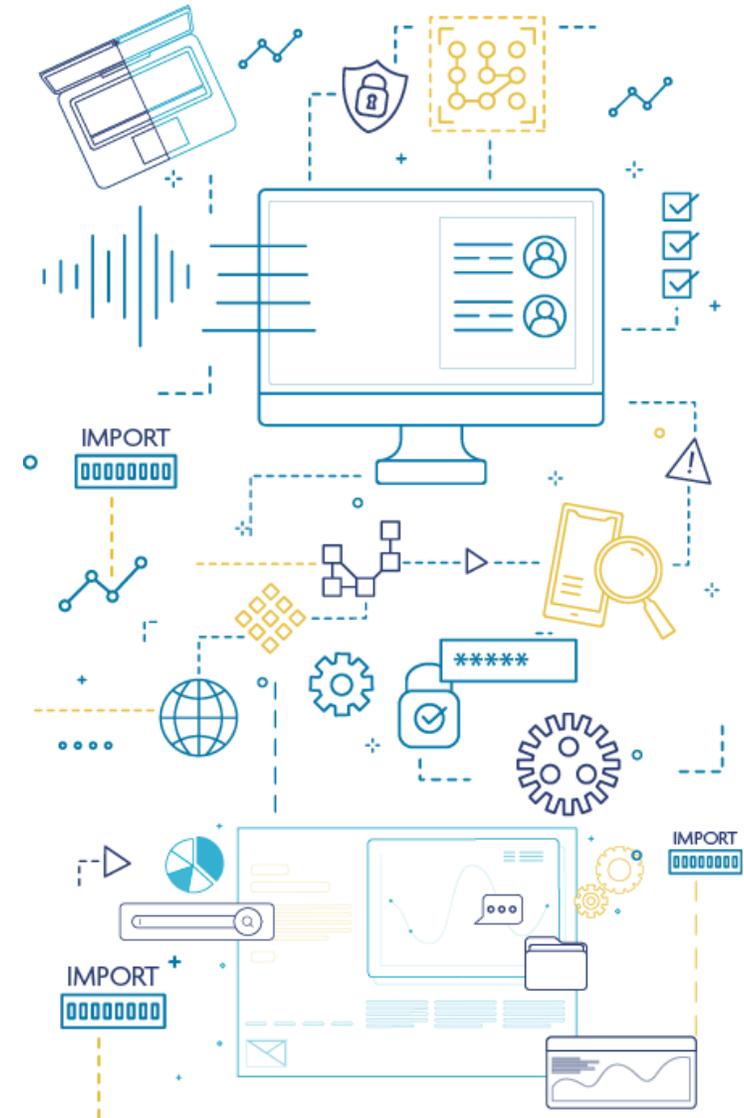
Diolch

Thank You

DIGITAL HEALTH AND CARE WALES
CHAIR'S REPORT

Agenda Item	4.1

Name of Meeting	SHA Board
Date of Meeting	28 July 2022

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

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

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

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

1   IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply

CORPORATE RISK (ref if appropriate)	

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

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

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

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

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

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

Acronyms			
DHCW	Digital Health and Care Wales	AW	Audit Wales
SHA	Special Health Authority	IA	Internal Audit
SOP	Standard Operating Procedure	NCSC	National Cyber Security Centre
SO	Standing Orders	KPI	Key Performance Indicator

2   SITUATION/BACKGROUND

2.1   At each Public Board meeting, the 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)

3.1   DHCW Independent Member Vacancy

We have been working closely with the Public Bodies Unit over the past four months to recruit to the DHCW Independent Member vacancy. The interviews for Sian Doyle's replacement took place on the 7 June and advice to the Minister has been submitted. We now await The Minister's decision on who she wishes to appoint.

3.2   DHCW Independent Member Resignation

There has been a further change to the Independent Board member make up, with Grace Quantock standing down from her DHCW Independent Member position, in order to take up the position of Deputy Chair of the Citizen Voice Board. This an independent of NHS Wales organisation that represents the opinions and voices of the people of Wales in respect of health and social care services. It will replace all Community Health Council functions from April 2023.

Grace has made an enormous contribution to our organisation during her time as an Independent Board Member and her experience and input has been greatly valued.

I would like to take this opportunity, on behalf of everyone at DHCW, to congratulate Grace on her new appointment.

I am working with colleagues at the Public Bodies Unit to provide further advice to the Minister to appoint an additional Independent Member to the DHCW Board.

3.3   Chair's Objectives Meeting with the Minister

On the 8 June I met with the Minister for Health and Social Care for my annual appraisal and objective setting meeting. The meeting was very positive with the role digital will play over the coming years highlighted as vitally important. I have since received positive written feedback from the Minister on the work of DHCW over the past twelve months. My objectives for 2022/23 have been discussed with the Minister and it is hoped these will be agreed in the near future.

3.4   Chief Executive and Chair's Meeting with the Minister

On the 23 June I joined other NHS body Chairs and Chief Executives for our quarterly meeting with the Minister. The discussions focused on the current operational pressures being faced across the health and care system, urgent and emergency care, planned care recovery, building community care capacity, maternity care. The Minister asked for a future meeting to include a focus on digital in health and care, which is being planned.

3.5   Ministerial Statement on transforming health and social care using digital and data services

On the 17 June, Welsh Government released a statement on transforming health and social care using digital and data services. The statement highlights the impact digital can have to transform the delivery of health and care services. The statement provides an update about the progress made in using digital technology and harnessing health and care data. The full statement can be seen here: [Written Statement: Transforming health and social care using digital and data services (17 June 2022) | GOV.WALES](#)

3.6   Meeting with the Older Persons Commissioner

On the 8 June I with Helen Thomas met Helena Herklots CBE, the Older Persons Commissioner for Wales. We had a very useful discussion on how DHCW can help work with the Commissioner on their long-term vision of making Wales the best place in the world to grow older. We also had a productive discussion about the digital inclusion agenda, and I am delighted the Commissioner has agreed to be a keynote speaker opening the Digital Summit planned at the end of September 2022 to explore how the NHS in Wales and voluntary sectors can work together for greater equity of access and digital inclusion for the people of Wales.

Chair's Report   Page 4 of 6   Author: Chris Darling
                                                                           Approver: Simon Jones
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3.7 Meeting with the Children's Commissioner

On the 6 July myself and Helen Thomas met with Rocio Cifuentes the Children's Commissioner for Wales. We discussed how we can work together and how children and young people are engaged on future digital health and care developments, in particular the NHS Wales app.

3.8 The Senedd Health and Social Committee and Public Administration and Public Accounts Committee Joint Scrutiny into Digital Health and Care Wales

On the 15 July the Senedd Health and Social Committee and Public Administration and Public Accounts Committee announced that they would be undertaking a joint scrutiny session into Digital Health and Care Wales.

Written evidence will be provided to the inquiry by the 23 September, with the oral hearing taking place on the 26 October.

The Committees will consider:

- The process of establishing DCHW and progress in the first year, progress achieved and outstanding challenges.
- Progress on recommendations of **Fifth Senedd Public Accounts Committee reports**.
- Prioritisation and manageability of the work programme and change agenda, including workforce, skills issue and any areas of particular pressure or concern.
- Relationship with local health boards, NHS trusts, local authorities, social services providers, and other key stakeholders including patient 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 comparability with health and social care data and key

The inquiry provides a fantastic opportunity to demonstrate all of DHCW's achievements to date and highlight the importance of digital in health and care for the people of Wales, now and in the future. The inquiry will also allow consideration and discussion on the challenges and opportunities that lie ahead for DHCW and the wider health and care system in Wales.

3.9 Board Development: NHS Digital

Since the last public Board meeting, we have held two Board Development sessions, the first of which took place on the 9 June with NHS Digital colleagues Laura Wade-Gery, Chair of NHS Digital and Verena Stocker, Deputy Director of Strategy. The session was arranged to learn from the Laura's report, 'Putting digital and data at the heart of transforming the NHS' in NHS England, as well as sharing the NHS Wales and DHCW position. I would like to extend a big

thank you to Laura and Verena for facilitating such an insightful Board development discussion.

3.10 Extraordinary Board Meeting 14 June

On the 14 June the DHCW board met to formally approve the 2021/22 DHCW Annual Report and Annual Accounts. I am pleased to say these were formally approved and have since been submitted to Welsh Government. The Annual General Meeting (AGM) will take place virtually between 4pm and 6pm on the 28 July to present the Annual Report and Accounts.

3.11 Board Development

The second Board Development session took place on the 30 June, which we held as a hybrid meeting. The hybrid approach to Board Development worked well and we had two sessions, the morning session covering the draft Board Assurance Framework (BAF) Report with a focus on the risk appetite for each of our strategic missions/principle risks. The afternoon session focused on the transition to a Product approach.

4   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

4.1   The appointment to the vacant DHCW Independent Member role timeframes are dictated by the Public Bodies Unit and the Minister, but it is hoped the role will be appointed to imminently.

5   RECOMMENDATION

5.1   The SHA Board is being asked to **NOTE** 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
Chair	July 2022	Approved.

Tolley,Laura
21/07/2022 13:51:09

Chair's Report   Page 6 of 6   Author: Chris Darling
Approver: Simon Jones
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DIGITAL HEALTH AND CARE WALES
CHIEF EXECUTIVE OFFICER REPORT

Agenda Item	4.2

Name of Meeting	SHA Board
Date of Meeting	28 July 2022

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

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

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

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

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

1   IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply

CORPORATE RISK (ref if appropriate)	

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

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

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

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

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	AW	Audit Wales
SHA	Special Health Authority	IA	Internal Audit
SOP	Standard Operating Procedure	NCSC	National Cyber Security Centre
SO	Standing Orders	KPI	Key Performance Indicator
DSPP	Digital Services for Patients and the Public	CDPS	Centre for Digital Public Services

2   SITUATION/BACKGROUND

2.1   This CEO 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 over the past two months.

2.2   The purpose of this report is to keep the Board up to date with key issues affecting the organisation, Digital Health and Care Wales (DHCW), since the last meeting.

3   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1   Covid-19

Welsh Government published their strategy *Together for a safer future: Wales' long term Covid-19 transition from pandemic to endemic* in March 2022. I advised at our last Board meeting that DHCW had stood down its emergency response structure as the organisation, in-line with national strategy move beyond the emergency phase of the response to Covid-19. This position remains unchanged; however, it should be noted that as has been the case throughout the pandemic we are working hard to respond to an ever-changing public health landscape. We are currently prioritising work to ensure the Welsh Immunisation System (WIS) vaccine system release is ready to support the Covid-19 Vaccine Autumn Booster programme, with a number of complex changes to the vaccine system taking place over the coming weeks to ensure the system is ready.

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3.2 Staff Briefing

Our most recent virtual staff briefing session was held on the 29 June 2022 with over 400 DHCW staff tuning in to hear the live-streamed event, which is fantastic staff engagement, and I am very grateful to all those who joined and interacted in the session. We used the briefing to introduce one of the newest members of the executive team, Sarah-Jane Taylor, who has recently taken up her role as Director of People and OD. Sarah-Jane talked about her background her reflections on joining DHCW and the challenges facing DHCW at present, including staff recruitment and retention, the cost-of-living crisis, hybrid working, rising Covid numbers and taking sensible pre-cautions, and celebration of Pride month. There was excellent engagement and questions and answers for myself and Sarah-Jane during the session.

3.3 Digi Leaders 100 'Digital Leader of the Year'

I am pleased to say that Digital Health and Care Wales' Chief Nursing Information Officer, Fran Beadle was shortlisted as one of the 10 finalists for the DigiLeaders 100 'Digital Leader of the Year' Awards. The Welsh Nursing Care Record has been instrumental in releasing time to care on wards, efficiencies in service and user satisfaction and its success has been underpinned by the standardisation and digitalisation of nursing records within Wales which Fran has put in amazing effort and led on.

3.4 Digital Finance Function Awards

I am delighted to say that Digital Health and Care Wales' Director of Finance and Deputy Chief Executive Officer Claire Osmundsen-Little has won the prestigious Finance Leader of the Year award at the Digital Finance Function Awards held on the 16 June. The award recognises the hard work of innovative teams and their technology partners. The award is great recognition of the hard work and impact Claire and the wider finance team has had since the establishment of DHCW.

3.5 Digital Medicines Portfolio Update

The Digital Medicines Portfolio continues to make good progress across all four areas: Primary Care, Secondary Care, Patient Access and Shared Medicines Record. I am pleased to update that over the past two months the following deliverables have been achieved within each area:

Primary Care:

There has been good initial engagement with GP suppliers to agree contract changes and engagement with Community Pharmacy Wales. In addition the team have been progressing user research with support from Centre for Digital Public Services (CDPS).

Secondary Care:

The Framework is scheduled to be awarded in October 2022. Readiness work is being taken forward in a number of Health Boards, with Cardiff and Vale recruiting their team and Aneurin Bevan University Health Board and Betsi Cadwaladr University Health Board having both submitted funding bids to start their pre-implementation work. Other Health Boards and Trusts are currently working on their proposals.

Shared Medicines Record:

The provisional architectural design has been completed with learning taken from others who have developed shared medicines record capability within England, Denmark and Spain.

Patient Access:

The patient access programme is being taken forward in partnership with Digital Services for Patients and the Public programme (DSPP) with focus on digital medicines functionality within the NHS Wales App. User research is being supported by the Centre for Digital Public Services (CDPS) with a focus on ordering and the management of repeat prescriptions. In addition to the pharmacy of patient choice for dispensing.

3.6   Executive Director and Director Recruitment

The Director of Primary, Community and Mental Health Digital Services has recently been advertised and the shortlisting for this position has recently taken place. This role will be a vital new member of the executive team and the interviews for this role will take place in early August 2022.

The permanent position for the Executive Director of Operations will be advertised imminently. As previously updated Gareth Davis has taken the interim Executive Director of Operations role.

3.7   Public Services (CDPS) CEO Meeting

It was great to meet Harriet Green and Myra Hunt joint Chief Executive Officers from the Centre for Digital Public Services (CDPS) on 7 June with Ifan Evans, Executive Director of Strategy, DHCW. We had a useful discussion on how our organisations can work collaboratively together on areas of digital transformation, the importance of technical standards and interoperability as well as developing digital capability, sharing knowledge and user centred design. Further

CEO Report   Page 5 of 7   Author: Chris Darling
                                                                                                       Approver: Helen Thomas
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discussion and collaboration with Myra Hunt and Harriet Green will be taken forward by Ifan Evans.

3.8 Healthcare Information and Management Systems Society (HIMSS) Conference

The 2022 HIMSS European Health Conference took place in Helsinki from 14 to 16 June. I was fortunate to attend and present at the conference along with a number of DHCW colleagues and colleagues from NHS Wales. The conference allowed for valuable insights from numerous international digital experts, and for international relationships to develop and be nurtured.

3.9 TechUK Health & Social Care Council

I was pleased to attend the fourth meeting of the TechUK Health and Social Care Council. I attended this meeting to present on the work taking place at DHCW and the approach taken to digital transformation in NHS Wales. The panel discussion that followed allowed for a great discussion on how to foster collaboration.

3.10 The Institute of Government & Public Policy's Healthcare Innovation and Technology Show

The Institute of Government and Public Policy's Healthcare Innovation and Technology Show took place on the 7 July 2022. I attended the show with Ifan Evans, Executive Director of Strategy, DHCW to share and discuss the digital transformation work taking place in Wales and be part of the panel discussion to talk about innovation in healthcare.

3.11 Your Information Your Rights Materials

Your Information Your Rights is a national set of materials used to help NHS Wales organisations meet their legal obligations to the right to be informed. These documents are used to make patients aware of their rights and how information about them is used.

I am grateful to the Digital Health and Care Wales (DHCW) Information Governance team who have led on updating these materials, which included consultation with the Information Commissioner's Office, patient forum and the All-Wales Information Governance Management Advisory Group.

Copies of the materials can be found on the DHCW website:
https://dhcw.nhs.wales/ig/information-governance/your-privacy-your-rights/

Tolley,Laura
21/07/2022 13:51:09

CEO Report   Page 6 of 7   Author: Chris Darling
                                                              Approver: Helen Thomas
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6/7   90/233

Board members who sit on the Digital Governance and Safety Committee will hear more about this work at the next Committee meeting on the 4 August 2022.

3.12 DHCW Response to the Health and Social Care Committee's consultation on the Welsh Government's plan for transforming and modernising planned care and reducing waiting lists

DHCW along with other NHS bodies provided feedback to Welsh Government's plan for transforming and modernising planned care and reducing waiting lists, which was collated by the NHS Confederation. The focus of the feedback was around sustainable digital funding to enable transformation planned care and waiting lists. The COVID response demonstrated the value of standard digital solutions, deployed nationally at pace, and developed and enhanced through a lean but effective governance and service process. DHCW are keen to see more on this in the plan for transforming and modernizing planned care and reducing waiting lists. The collated feedback to the consultation can be seen on the NHS Confederation website: Welsh NHS Confederation response to the Health and Social Care Committee's consultation on the Welsh Government's plan for transforming and modernising planned care and reducing waiting lists | NHS Confederation

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

4.1 There remains a gap in the DHCW executive team, with the Director of Primary, Community and Mental Health Digital Services due to be recruited to imminently.

5 RECOMMENDATION

5.1 The SHA Board is being asked to **NOTE** 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
Chief Executive Officer	July 2022	Approved.

Tolley,Laura
21/07/2022 13:51:09

DIGITAL HEALTH AND CARE WALES
SHARED LISTENING AND LEARNING ANNUAL REVIEW REPORT

Agenda Item	5.1

Name of Meeting	SHA Board
Date of Meeting	28 July 2022

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

Executive Sponsor	Rhidian Hurle, Executive Medical Director
Prepared By	Laura Tolley, Corporate Governance Manager
Presented By	Rhidian Hurle, Executive Medical Director

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

Tolley,Laura
21/07/2022 13:51:09

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

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

1   IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply

CORPORATE RISK (ref if appropriate)	

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

DHCW QUALITY STANDARDS	ISO 20000
If more than one standard applies, please list below: The shared listening and learning approach focuses on improving quality through ongoing listening and learning.	

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

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	Yes, please see detail below
	The inclusion of shared listening and learning at the start of each Board ensures the DHCW Board considers Quality and Safety as they relate to all learning (patient, staff/clinician, citizen) stories told.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below
	No stories will be told without the consent of those individuals who agree to tell their stories for wider learning.
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.

Shared Listening and Learning Annual Review   Page 2 of 4   Author: Laura Tolley
Approver: Rhidian Hurle
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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 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   DHCW Board approach to shared listening and learning was approved at the 27 May 2021 Board meeting which set out how the Board will start each meeting with a story from either a patient or member of the public or staff/ health and care professional. With the purpose of reminding and reinforcing DHCW Board members of the organisation's core purpose to transform digital health and care for everyone in Wales.

2.2   Patient/public and staff/health and care professional stories allow for lessons to be learnt, bring to life real experiences and ensure the value of digital health and care is considered in real life experiences and scenarios.

2.3   The approach is considered good practice from other NHS bodies across the UK, building quality, safety and learning through experiences into the Board room.

2.4   Stories are considered in a number of ways, including working with our partner organisations to promote the use of patient/public, staff/health and care professionals and DHCW staff stories in organisational learning, as well as being identified from the DHCW Incident Review and Organisational Learning Group.

3   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1   During the 2021/22 period the Board received Shared Listening and Learning Stories on the following:

- Choose Pharmacy
- Welsh Immunisation System

- Welsh Nursing Care Record
- Value Based Health Care
- DHCW Service Desk

3.2   The following learning themes have been identified during the 2021-22 period:

- Co-design of systems identified as a key enabler to the success of system roll out
- Early evaluation and engagement
- Sustainable funding
- Collaboration
- Clinical Leadership

3.3   Four out of the five of the Shared Listening and Learning Presentations for 2021-22 included attendance from partner bodies recognising our collaborative way of working and delivery.

4   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

4.1   Engaging with patients directly to contribute to DHCW's Shared Listening and Learning Presentations is challenging due to the remit and role of the organisation, however work is being undertaken to try and address this for 2022-23

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
Rhidian Hurle	15/07/2022	Approved

Tolley,Laura
21/07/2022 13:51:09

DIGITAL HEALTH AND CARE WALES
RECRUITMENT TASKFORCE LESSONS LEARNT REPORT

Agenda Item	5.2

Name of Meeting	SHA Board
Date of Meeting	28 July 2022

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

Executive Sponsor	Sarah-Jane Taylor, Director of People and Organisational Development
Prepared By	Shikala Mansfield, Head of People & Organisational Development
Presented By	Sarah-Jane Taylor, Director of People and Organisational Development

Purpose of the Report	For Noting
Recommendation	
The Board is asked to **NOTE** the Recruitment Taskforce Lessons Learnt Report.	

1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply

CORPORATE RISK (ref if appropriate)	

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

DHCW QUALITY STANDARDS	BS 76000:2015
If more than one standard applies, please list below: BS 67005	

HEALTH CARE STANDARD	Staff & Resources
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 required for this report		

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	Yes, please see detail below Budget for extra resource
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below
	Time for Senior Management to participate
SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below
	Potential to support employment for local community
RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there is no specific research and innovation implications relating to the activity outlined within this report

Recruitment Taskforce Lessons Learnt

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Author: Shikala Mansfield
Approver: Sarah-Jane Taylor

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Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority

2 SITUATION/BACKGROUND

2.1 This Lessons Learnt report has been compiled for the Board given that recruitment is an identified risk for the organisation and provides an overview of the functionality of the Recruitment Taskforce Group and what the organisation has learned from the work carried out and how this has contributed into formulating the next steps to support the resourcing challenges.

2.2 The group was established in February 2021, chaired by Head of Workforce & Organisational Development with membership of managers across the organisation. The key focus was to:-

- Go through new vacancies and explore best routes to source staff

- Plan recruitment processes, job fairs and resources to support campaigns

- Explore routes to market - including the British Computer Society, Life Science Hub, social media, career Wales, Women in IT, under-represented groups and university/college/school leavers etc

- Develop career path by working in close partnership with the education sector with particular focus on key roles

- Discuss approach to different contract arrangements

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1 Key achievements through the Recruitment Taskforce Group include the following: -

- Since the establishment of Recruitment Taskforce Group, over 340 vacancies have been filled of which 53% internally and 47% externally, increasing whole time equivalent from 800 to 997 as at 1st June 2022.

- As part of the Workforce team's key performance indicators which are reviewed by the Board each month, the year end position provided a positive outcome, the time to approve vacancies moved from 2.3 days to 1.1 day and a standardisation of recruitment processes.

- Nine Career Fairs with over 1300 visits, in person or virtual, held in venues hosted by universities, colleges and schools as well as Local Authorities and Specialist Groups

Recruitment Taskforce Lessons Learnt
Page 3 of 5
Author: Shikala Mansfield
Approver: Sarah-Jane Taylor
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across Wales. In addition, DHCW successfully hosted first virtual career fair.

- The Workforce team developed a new DHCW CV Database to provide information to potential candidates and encourage those who joined to apply for roles.

- Three National Recruitment agencies were appointed to aid specialist as well as general technical roles, these are still in place now.

- Increased partnership working with voluntary and specialist groups which represent the diverse population of Wales, these include Science, Technology, Electronics, Mathematics (STEM), Women in Tech, Remploy, People Plus, Chwarae Teg (Fair Play), Ex-Armed Forces as well as Education Institutes ranging from Junior Schools to Universities etc.

- Established DHCW Collaborative Bank through NHS Wales Shared Services to support short term assignments.

3.2 The challenges and learning identified as part of this review to compile the report are as follows:

- **Nominated Representatives**
  The level of nominations from the organisation should have on reflection, been more senior managers and specialists in order to execute the actions that were agreed for the group. Unfortunately, this did not universally happen across all teams which resulted in mixed outcomes. This is a strong lesson learnt for the future.

- **Placements for Graduate and Apprenticeship Roles**
  There needed to be more time set aside at senior level to explore, agree and take forward placements. As a consequence, we may have missed opportunities to place some individuals across the business. A lesson learnt is that a multi-specialist approach needed to be fully supported at senior level in advance to maximise numbers of new joiners into the organisation.

- **Job/Career Fairs**
  These were successful and there was good attendance both on-line and face to face job/career fairs and some were converted into new joiners into the organisation. However, on reflection after some events, it was felt that specialist representation that had committed to attend would have reaped a better return. A lesson learnt is that committed specialist should always attend once agreed and if by exception they cannot that a deputy is provided.

- **The DHCW Collaborative Bank**
  The establishment of the DHCW Collaborative Bank was a positive outcome, however, to continue a Band 3 Admin Support (£20k) needs to be funded in order for this initiative to continue as this was a pilot. This is being worked through as part of budget setting. If this is not supported, this could affect short term hires in the future.

Recruitment Taskforce Lessons Learnt

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Author: Shikala Mansfield
Approver: Sarah-Jane Taylor

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- **Partnership Working**
  The organisation has increased partnership working with voluntary, underrepresented and specialist groups, however, converting some of these positive relationships into new starters at all levels continues to be a challenge and will be picked up strongly as part of the People and Organisational Development Strategy for 2022 onwards.

4   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

4.1   The Recruitment Taskforce Group finished operating in June 2022. Following discussions at Executive level with key stakeholders in attendance, the creation of a new group, The Strategic Resourcing Group will come into fruition in August 2022. This group will have membership of senior managers and directors across the organisation, it will be a multi-professional group, chaired by the Director of People and Organisational Development to identify, plan and execute new resourcing solutions to support the challenges across the business for the whole organisation. The chair of this group will provide regular updates to the Executive.

4.2   The recommended way forward is to learn from the positives and the ongoing challenges from the Recruitment Taskforce Group's achievements and concerns and fully support the establishment of the new strategic group which will have clear aims and objectives and senior leaders and specialists across the organisation as part of its membership so that agreements made can be taken forward quickly and effectively to aid recruitment throughout the organisation, to develop individual teams and best retain key talent.

5   RECOMMENDATIONS

5.1   The Board is asked to **NOTE** the Recruitment Taskforce Lessons Learnt 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
DHCW Management Board	15 July 2022	Approved content of the report

Tolley,Laura
21/07/2022 13:51:09

DIGITAL HEALTH AND CARE WALES
FINANCE REPORT FOR THE PERIOD ENDED
30 JUNE 2022

Agenda Item	6.1

Name of Meeting	SHA Board
Date of Meeting	28 July 2022

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	For Noting
Recommendation	
The Board is being asked to: **NOTE** the DHCW Financial Report for the period ended 30 June 2022	

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

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

1. IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply

CORPORATE RISK (ref if appropriate)	

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 acccountability
If more than one standard applies, please list below:	

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

Workforce EQIA page

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
LEGAL 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

Author: Mark Cox
Approver: Claire Osmundsen-Little

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	VAT	Value Added Tax
IFRS	International Financial Reporting Standards	SHA	Special Health Authority
HB	Health Board	PSPP	Public Sector Payment Policy
NI	National Insurance	COS	Contracted Out Services
IMTP	Integrated Medium Term Plan	DPIF	Digital Priority Investment Fund
NHS	National Health Service	WPAS	Welsh Patient Administration System

2. SITUATION/BACKGROUND

2.1 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 June 30th, 2022.

2.2 The report sets out the financial position as at the end of June 2022 against initial budgets. The delegated directorate budgets have been derived from the current core funding and agreed COVID-19 planning assumptions. Digital Priority Investment Fund allocations have now been finalised and are incorporated within financial plans supported by assumed anticipated income (subject to formal funding letters where appropriate).

2.3 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.

Author: Mark Cox
Approver: Claire Osmundsen-Little
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- **Cash:** Manage residual year end balances to a maximum of £2m.

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

3.1 Core Operations Financial Performance

The summarised financial position presents achievement of both the period financial targets and forecasted year end position. The finance report presents the following assessments contributing to the reported position:

- o **Revenue**: DHCW is reporting an underspend of £0.050m for the period to June 30th. The current organisational expenditure revenue run are impacted by vacancy levels and ICT cost pressures.
- o **Exceptional Costs (NI & Energy)**: costs are being monitored and indicate an increased pressure due to National Insurance rates (£0.099m for the first quarter) whilst unmitigated energy cost pressures total £0.030m.
- o **Capital**: A small capital underspend of £0.057m has been reported against plan.
- o **The target Public Sector Payment Policy (PSPP):** target has been exceeded with 98% of non-NHS invoices being paid within 30 days.
- o **Savings**: The current savings target is expected to be met for the full year, for the quarter the target of £1.198m is being exceeded by £0.221m.
- o **Forecast End of Year position**: DHCW is forecasting breakeven position for revenue and breakeven for capital. Key issues impacting on the core end of year position (and future years assessment) will be developments surrounding the following areas:
  - Core Vacancy Position & Recruitment
  - Increased Cyber Security Requirement, Datacentre Migration
  - Improvement initiatives, Cloud Adoption/Product Centred Approach
  - Exceptional Cost Pressures and the Outcome of identified risks & opportunities
- o **Cash Management** - Cash balances stood at £5.1m at the end of June. The intention is to minimise cash balances with an end of year target to a maximum of £2m.
- o **Financial Risk** – There remain several risks and uncertainties our assessments will continue to be refined, identify mitigating actions and update throughout the financial year.
- o **Opportunities** – The organisation continues to pursue savings/efficiency opportunities. Possible opportunities have been identified around vacancy management and widened COS 14 VAT Recovery totalling £11.93m.

3.2 COVID -19 Response Expenditure

The planned revenue spend for 22-23 is £10.258m with £2.658m spend being reported for June (in line with budget).

3.3 Digital Priority Investment Fund

Revenue funding of £33.3m (including "flow down" allocations via other NHS organisations) and capital funding of £6.7m is expected to be received to support priority digital investment planned for 2022/23.

Including allocations expected via other lead organisation 50% of anticipated capital funding (£3.4m) and 50% of anticipated revenue funding (£11.4m) are awaiting formal funding letters and supporting increases in Capital & Revenue resource limits. DHCW has recorded £3.6m of cumulative revenue spend against DPIF schemes to June.

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

4.1   DHCW's core vacancy position has tracked ahead of the planned position for the first quarter of the financial year. The current DPIF recruitment plan presents significant activity to support project resourcing requirement. To mitigate recruitment challenges DHCW has compiled an External Workforce Sourcing Strategy which sets out an analysis, findings and recommendations in relation to a strategy for Digital Health and Care Wales (DHCW) to source external workforce from the commercial marketplace. A senior management group has been convened to implement and drive successful mitigating actions.

4.2   As agreed with Welsh Government all figures now exclude any provision for a future pay award cost, consistent with guidance it is assumed that the negotiated settlement will be fully funded.

4.3   In accordance with WG plan guidance, additional allocations have been assumed in respect of our assessed exceptional cost pressures (£0.453m pa) and ongoing COVID response costs (£10.258m).

4.4   Funding letters are awaited totalling £21.7m revenue and £3.4m. DHCW will work with Welsh Government and lead DPIF organisations to ensure these formal funding letters and the supporting increases in Capital & Revenue resource limits are completed as a matter of urgency.

4.5   The final negotiations of the new All Wales Microsoft Enterprise Agreement have now been completed. Letters of commitment have been received from organisations. DHCW has written to all organisation with the expectation that the recharge to each organisation will be settled within July. An invoice totalling £28m is expected with the corresponding recharges issued to organisations with an agreed settlement period of 10 days to assist with cashflow.

4.6   The organisational underlying position remains consistent with that reported within the IMTP (£1.318m). Mitigating actions for 2022/23 have been identified and are forecast to support an end of year breakeven position whilst both resource requirement is being reassessed in parallel additional funding options are being explored.

4.7   All delegated expenditure limits have been approved by Executive Directors with further budget deployment sign off now close to 100%.

5. RECOMMENDATION

5.1 The Board is being asked to:
    NOTE the DHCW Financial Report for the period ended 30 June 2022

Author: Mark Cox
Approver: Claire Osmundsen-Little
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6. APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Claire Osmundsen-Little	July 2022	APPROVED

Author: Mark Cox
Approver: Claire Osmundsen-Little
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APPENDIX A

DHCW SHA BOARD FINANCE REPORT PERIOD TO 30 JUNE 2022

Tolley,Laura
21/07/2022 13:51:09

Author: Mark Cox
Approver: Claire Osmundsen-Little

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1. FINANCIAL PERFORMANCE

HIGH LEVEL PERFORMANCE AGAINST KEY TARGETS

The following table presents a summary indicator of performance against key financial targets.

Movement indicators articulate a positive movement (upwards arrow), negative movement (downwards arrow) or no movement (sideways arrow) from the previous month.

Table 1:Performance against KPI's

Key	RAG
Good Performance /On Target	(green)
Management intervention required	(amber)
Target materially missed or at risk – Director intervention required	(red)

INDICATOR	CUMULATIVE PERFORMANCE	FORECAST OUTLOOK	COMMENT
Revenue Breakeven (To secure that the organisations expenditure does not exceed aggregated income)	£0.050m (Underspend decreased from £0.084m) ⬇ Movement	Breakeven ⬌ Movement	Small period operational surplus of £0.050m. DHCW is forecast to breakeven by the end of the financial year.
Remain within Capital Resource Limit (To ensure net Capital Spend does not exceed the Capital Resource Limit)	£0.057m (From breakeven position) ⬆ Movement	Breakeven ⬌ Movement	DHCW is reporting a £0.824m capital spend to date (presenting a small period underspend of £0.57m against initial plan). The current capital funding envelope is £5.514m with the expectation that this will be increased once additional DPIF funding has been formally approved.
Public Sector Payment Policy (To pay a minimum of all non-NHS creditors within 30 days of receipt of a valid invoice)	98% ⬆ Movement	95% ⬌ Movement	PSPP target achieved. Target – 95%, Actual 98% increased from 97%.
Cash Balances Appropriate balances to meet creditor requirements	£5.1m (Increased from £0.3m) ⬆ Movement	Positive Cash Balance ⬌ Movement	Cash balance has increased from £0.3 to £5.1m.

Recommendation

The board are requested to note the financial performance for the first quarter of the financial year and the forecast achievement of all financial targets.

Author: Mark Cox
Approver: Claire Osmundsen-Little

2. SUMMARY PERFORMANCE AGAINST KEY FINANCIAL TARGETS

2.1 Revenue Performance

Core Operations: The organisation is reporting a revenue surplus of £0.050m for the period to June 30th 2022 with a forecast breakeven position at year end (assuming central pay award funding and dependent upon the outcome of the hey issues listed below). The underspend reflects the ongoing lag in recruitment offset by the ongoing pressures within the Infrastructure & Communications Technology Directorate.

Key issues impacting on the core end of year position (and future years assessment) will be developments surrounding the following areas:

- Core Vacancy Position & Recruitment
- Increased Cyber Security Requirement, Datacentre Migration
- Improvement initiatives, Cloud Adoption/Product Centred Approach
- Exceptional Cost Pressures and the Outcome of identified risks & opportunities

DPIF Schemes: A total of £3.6m revenue has been spent to June 30th which is currently being matched by anticipated funding ahead of the formal issuing of funding letters. A total of £4.8m is forecast to be disbursed to NHS organisations.

COVID-19 Spend: At the end of June the cumulative spend for Covid is £2.7m. Covid spend outlook is in line with the budget, subject to any changes in government policy. Vaccines related spend remains particularly sensitive to impactors upon volumes and changes in Health Board scheduling.

Table 2: Summary of Revenue Performance by Area

	Period Plan £000's	Period Actual £000's	Underspend/-Overspend £000's
Income			
Core Organisational	25,019	25,019	0
COVID-19 Response	2,658	2,658	0
Digital Priority Investments	3,600	3,600	0
Total	31,239	31,239	0
Expenditure			
Core Organisational	25,019	24,969	50
COVID-19 Response	2,658	2,658	0
Digital Priority Investments	3,562	3,562	0
Total	31,239	31,189	50
Period Surplus/(Deficit)	0	50	50

2.2 The Organisational Run Rate and Forward Look

The initial run rate incorporated within the current financial plan is presented below.

Figure 1:DHCW Expenditure Run Rate
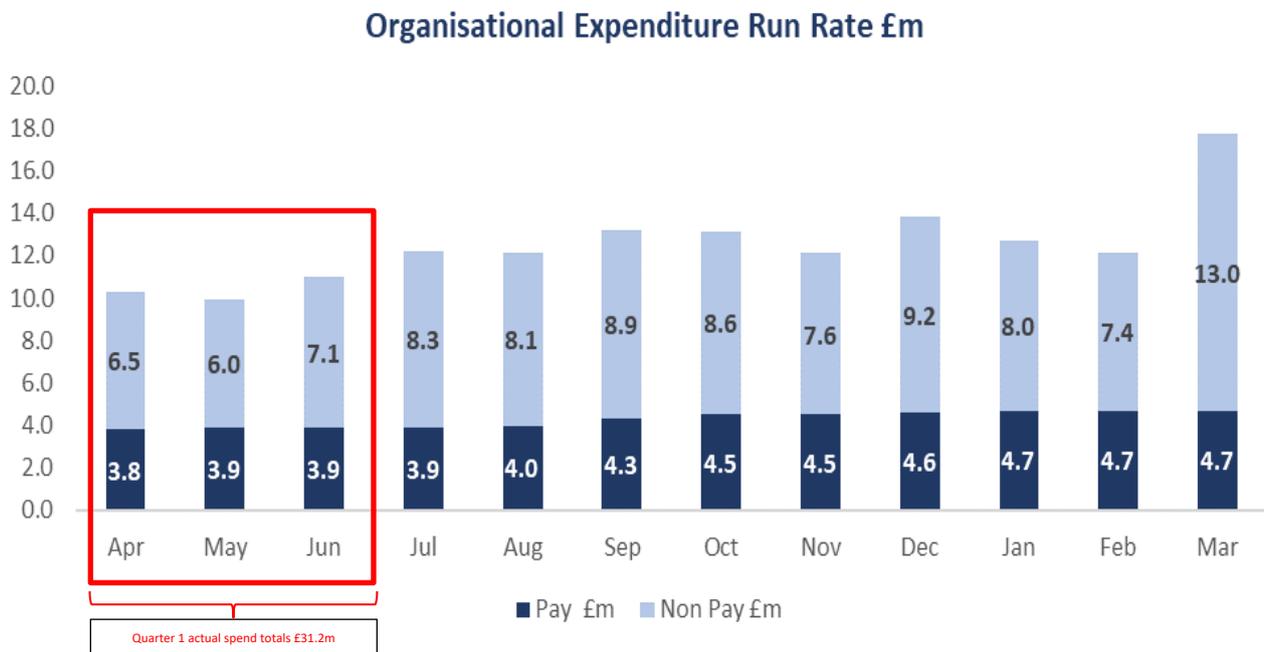
The run rate for the year is materially affected by the latest DPIF expenditure profiles. At present the initial plan includes major spend items relating to contractual payments and NHS disbursements. The following Programmes and projects are major contributors to the spend peaks currently forecast:

Table 3: Contributors to Monthly Run Rate Movement

Programme/Project	Sept £000's	Oct £000's	Nov £000's	December	January	February	March
Digital Services for Patients & Public	343	701	0	0	0	0	677
Welsh Community Care Information Solution	0	0	0	0	0	0	1,335
Welsh Patient Administration System Standardisation	441	0	441	0	0	0	441
National Data Resource	0	0	0	941	0	0	1,632
Total	784	701	441	941	0	0	4,085

DHCW will look to work with leads to (where appropriate) bring forward spend plans and ensure delivery prior to year-end.

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2.2 Capital Performance

2.2.1   June Capital Performance

For the financial year 2022/23, DHCW identified capital funding via the following routes:

1. Discretionary – Available for delegation by the organisation in line with priorities and infrastructure lifecycles.
2. Digital Priority Investment Fund (DPIF) – Ring fenced investment granted by Welsh Government for specific project activity.
3. COVID-19 – Investment applied to specific COVID-19 response initiatives.

Capital funding allocations will continue to flex in line with disbursements to other NHS Wales organisations as part of DPIF project arrangements.

2.2.2   June Capital Performance

DHCW has recorded £0.824m of capital spend against a current allocated allowance of £5.514m (£0.057m underspend against quarter one plan) leaving a residual balance of £4.690m to be spent before the end of the financial year.

Table 4: Capital Plan Performance

Scheme	Annual Forecast £000's	Period Plan £000's	Period Actual £000's	Under/-Overspend £000's	Residual Spend £000's
Discretionary					
Infrastructure Communications Technology	1,966	123	66	57	1,900
Estates & Facilities	50	0	0	0	50
Total Discretionary	**2,016**	**123**	**66**	**57**	**1,950**
Digital Priority Investment					
Cancer Informatics Solution	998	465	465	0	533
National Data resource	800	43	43	0	757
Digital ICU	1,200	84	84	0	1,116
Total Digital Priority Investment	**2,998**	**592**	**592**	**0**	**2,406**
COVID-19					
Test, Trace & Protect	500	166	166	0	334
Total COVID-19	**500**	**166**	**166**	**0**	**334**
Total Capital Plan	**5,514**	**881**	**824**	**57**	**4,690**

The capital funding allocated is likely to increase once the final DPIF position is confirmed and various schemes are funded.

Author: Mark Cox
Approver: Claire Osmundsen-Little

2.2.3 Capital Forecast

The current forecast is for the organisation to remain within its resource limit, an additional £3.4m is anticipated to support DPIF Programmes.

3. DETAILED PERFORMANCE

The following section presents the detailed financial performance for the organisation brigaded by Directorate (encompassing recurrent activity) and non-recurrent areas such as Digital Investment Priority Fund Schemes and COVID-19 Response.

3.1 DHCW Directorate Financial Performance

DHCW is currently organised into directorates that are currently reporting a net underspend of £0.050m against plan predominately as a result of pay variances offsetting pressures within the Information & Communications Technology directorate.

Figure 2:Core Activity Directorate Performance
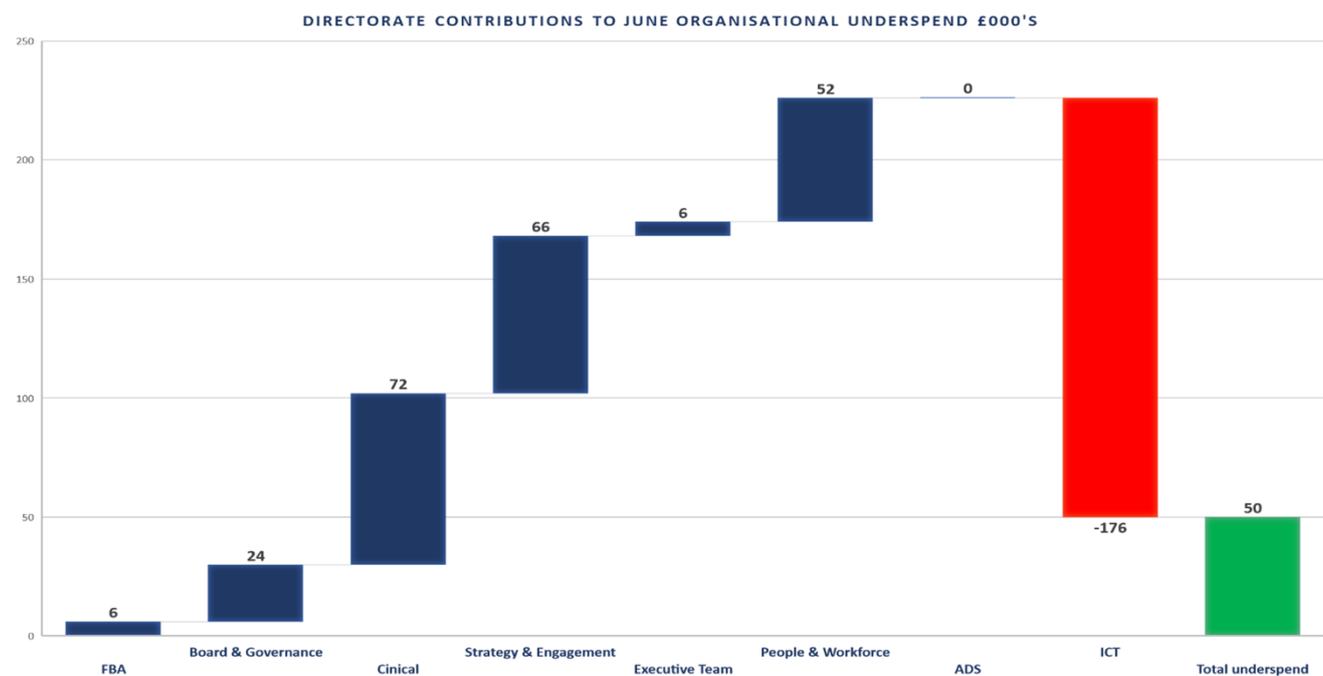
The current variances are representative of underspend in pay budget within directorates offset by pressures within ICT.

- **Finance and Business Assurance** – The Directorate is reporting a small underspend of £0.006m, forecast anticipated to be underspent due to vacancies which are expected to be filled in the coming quarters.

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- **Board & Governance**- The Directorate is reporting a small underspend of £0.024m no significant variances anticipated resulting in an anticipated breakeven position at the end of the financial year.

- **Clinical Directorate** – The Directorate is reporting an underspend of £0.072m. This is due to vacancies which are expected to be filled as the year progresses together with timing the procurement requirement of electronic journals that may affect the final outturn position.

- **Strategy and Engagement** – The Directorate is reporting an underspend of £0.066m driven by a pay underspend (due to backfill vacancies of staff now allocated to DPIF schemes).

- **Executive Team**- Directorate is reporting a small underspend of £0.006m.

- **People and Workforce** – Directorate is reporting an underspend of £0.052m., reflecting vacancy position.
- **Application Development and Support team** – Directorate is reporting a break-even position.

- **Information Communications Technology Directorate** - The directorate is reporting an overspend of £0.176m. This is driven by variance against budget in pay to date. Reflecting the over recruitment in data Centres.

3.2   Exceptional Cost Pressures

As part of the IMTP process exceptional pressures were identified covering the National Insurance increase and Energy, the current position is as follows:

- **National Insurance increase**
  An annual pressure of   £0.333m has been forecast with £0.099m actual recorded to June 30th.

- **Energy increases**
  Estimates energy increases across facilities and datacenters were provided for totaling £0.120m (reduced from £0.624m). DHCW has mitigated datacentre energy price increases (identified as part of the IMTP process) via by offsetting decommissioning of equipment and decreasing rack power requirement at one site and agreeing contractual arrangements with the supplier freezing energy increases until 2023/24 for datacentre 2.

  DHCW will continue to look to monitor and mitigate any increases where possible with any reduction in anticipated funding reported within future returns (including the non-recurrent offset of gains generated within the organisation).

3.3 COVID-19 Response Financial Performance

As part of the COVID-19 response DHCW provides digital solutions to support both the Test, Trace & Protect Programme and Mass Immunisation Vaccines scheduling digital solutions. DHCW is currently forecasting a revenue requirement of £10.258m for the financial year. At the end of June the cumulative spend for Covid activity is £2.658m.

The is forecast to spend to budget, subject to any changes in government policy or planning assumptions.
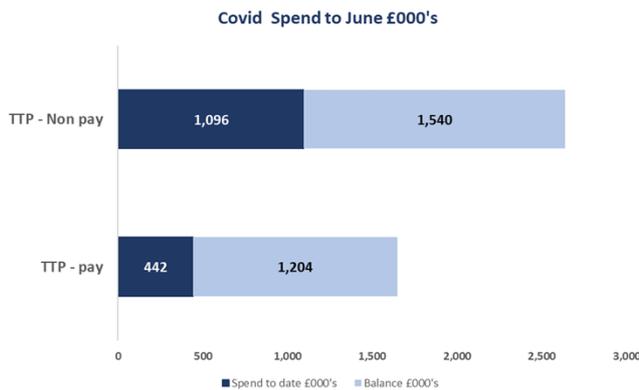
Figure 3: TTP Spend

Covid Spend to June £000's

	Spend to date £000's	Balance £000's
TTP - Non pay	1,096	1,540
TTP - pay	442	1,204

Figure 4: Mass Vaccination Spend

Covid Spend to June £000's

	Spend to date £000's	Balance £000's
Vaccines -Non Pay	692	3,703
Vaccines -pay	428	1,153
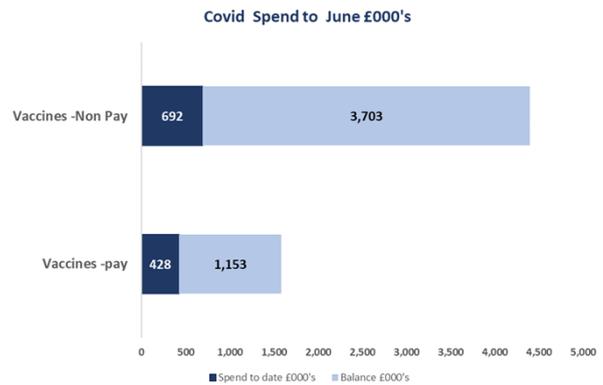
3.3.1 Test, Trace & Protect

Cost Avoidance/Savings: DHCW has initiated and agreed with Welsh Government the following reduction in Test, Trace & Protect non pay licencing of Solgari & Microsoft licences reflected within the financial forecast. The changes in licencing levels are expected to result in a reduction in expenditure run rate of £0.214m per month.

Figure 5: Test, Trace & Protect Licence Volumes

User Licence Volumes Profile

	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22
Microsoft	4,100	4,100	4,100	4,100	4,100	4,100	750	750	750
Solgari	3,208	3,250	3,175	2,262	2,269	1,894	1,816	716	716

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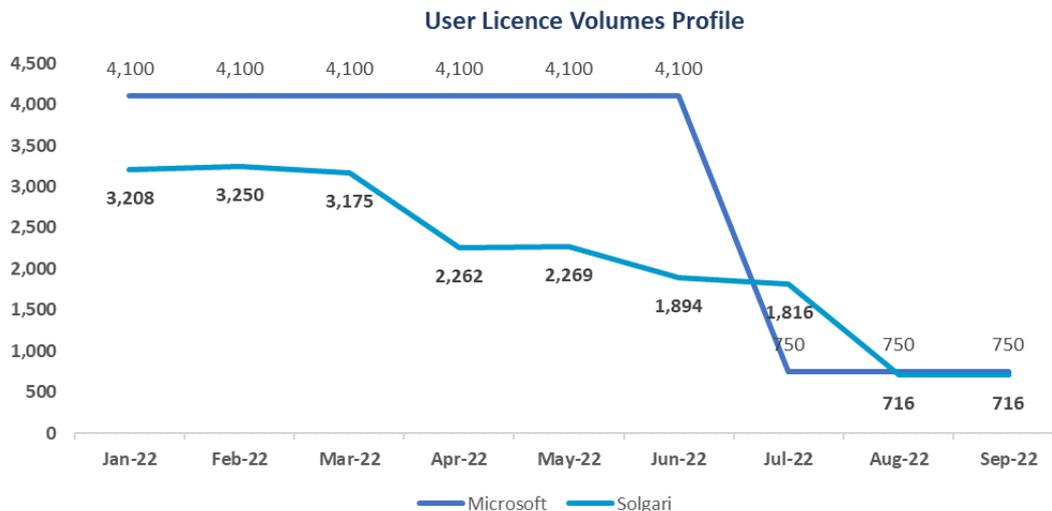
Tolley Laura
21/07/2022 13:51:09

3.3.2 Vaccines

A key impactor on forecast costs will be the final Health Board volumes as part of the Autumn immunisation programme, once scheduling plans are finalised the cost implications will be reflected within updated profiles.
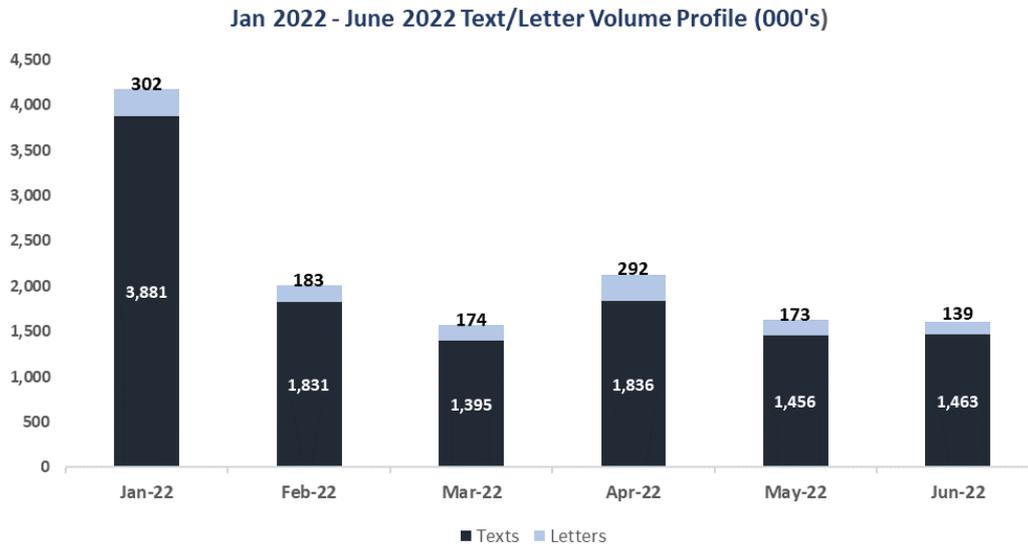
Figure 6: Vaccines Scheduling Text/Letter Volumes Profile

Jan 2022 - June 2022 Text/Letter Volume Profile (000's)

Text & letter volumes remain relatively low however these will be materially affected by new cohorts, boosters and the Autumn programme.

3.4   Digital Priority Investment

3.4.1 Funding

DHCW anticipates total funding amounting to £6.7m capital and £33.3m revenue (receivable both directly from Welsh Government and other lead NHS Wales organisations). At the time of writing 50% of anticipated capital (£3.4m) and 34% revenue (£11.4m) are awaiting formal funding letters.

Figure 7:Anticipated DPIF Capital Allocation

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Digital Priority Investment Fund 2022/23 Anticipated Revenue Allocation (£000's)
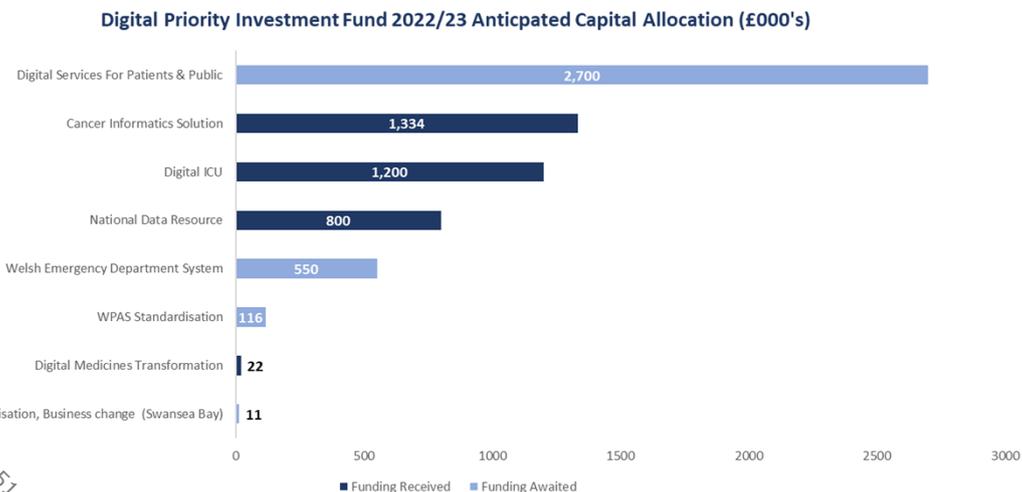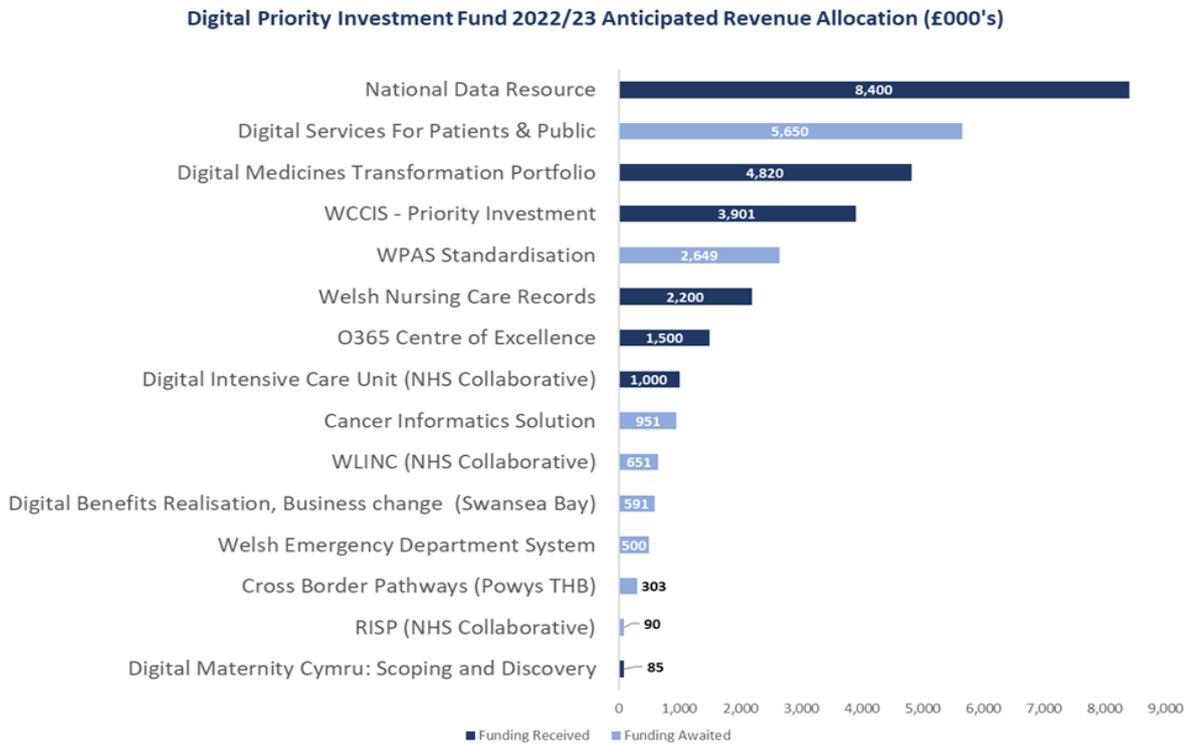
3.4.2 Period Spend

DHCW has expensed £0.592m on DPIF capital during the first quarter £0.549m due to capitalised pay costs.

Figure 9:DPIF Capital Spend

Capital Performance to June £000's

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Figure 10: Digital Investment Revenue Spend

DPIF Revenue Spend to June £000's

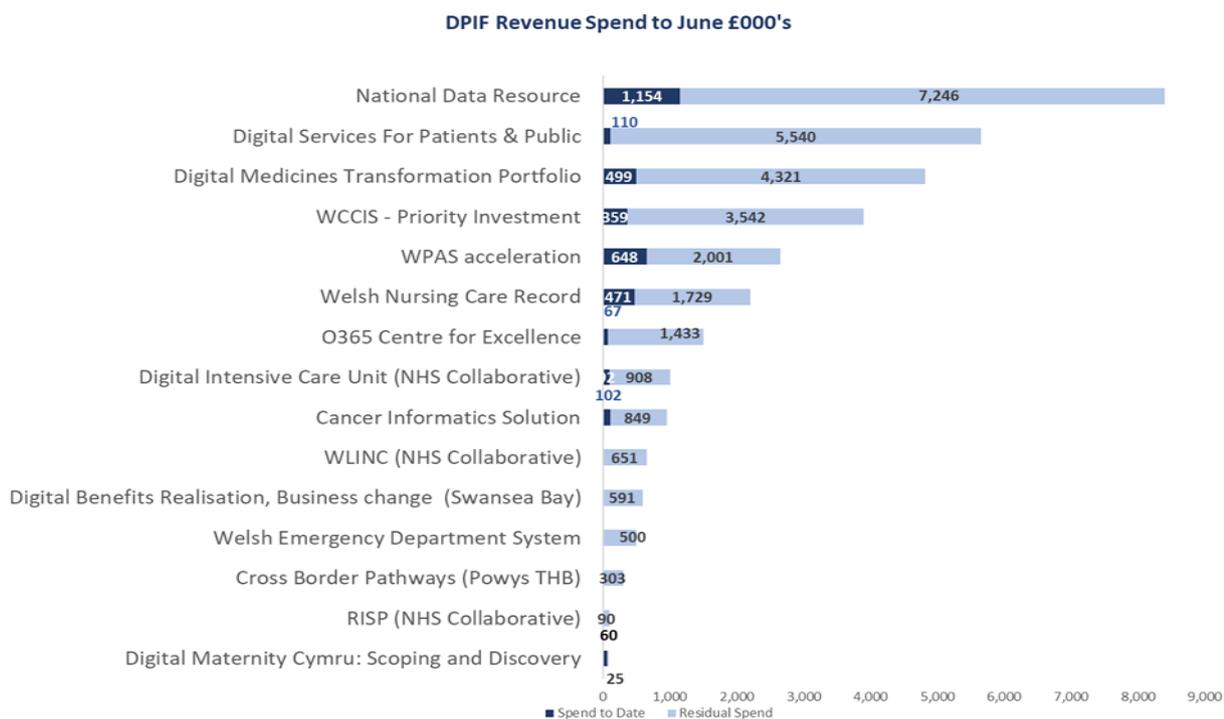|	Spend to Date	Residual Spend
National Data Resource	1,154	7,246
Digital Services For Patients & Public	110	5,540
Digital Medicines Transformation Portfolio	499	4,321
WCCIS - Priority Investment	359	3,542
WPAS acceleration	648	2,001
Welsh Nursing Care Record	471 / 67	1,729
O365 Centre for Excellence		1,433
Digital Intensive Care Unit (NHS Collaborative)	102	908
Cancer Informatics Solution		849
WLINC (NHS Collaborative)		651
Digital Benefits Realisation, Business change (Swansea Bay)		591
Welsh Emergency Department System		500
Cross Border Pathways (Powys THB)		303
RISP (NHS Collaborative)	90 / 60	
Digital Maternity Cymru: Scoping and Discovery	25	

In terms of revenue £3.6m has been expensed supporting digital priority schemes leaving £29.7m to be spent in the remaining 3 quarters of the financial year. DHCW will continue to work with scheme leads to manage timely spend in support of stated deliverables.

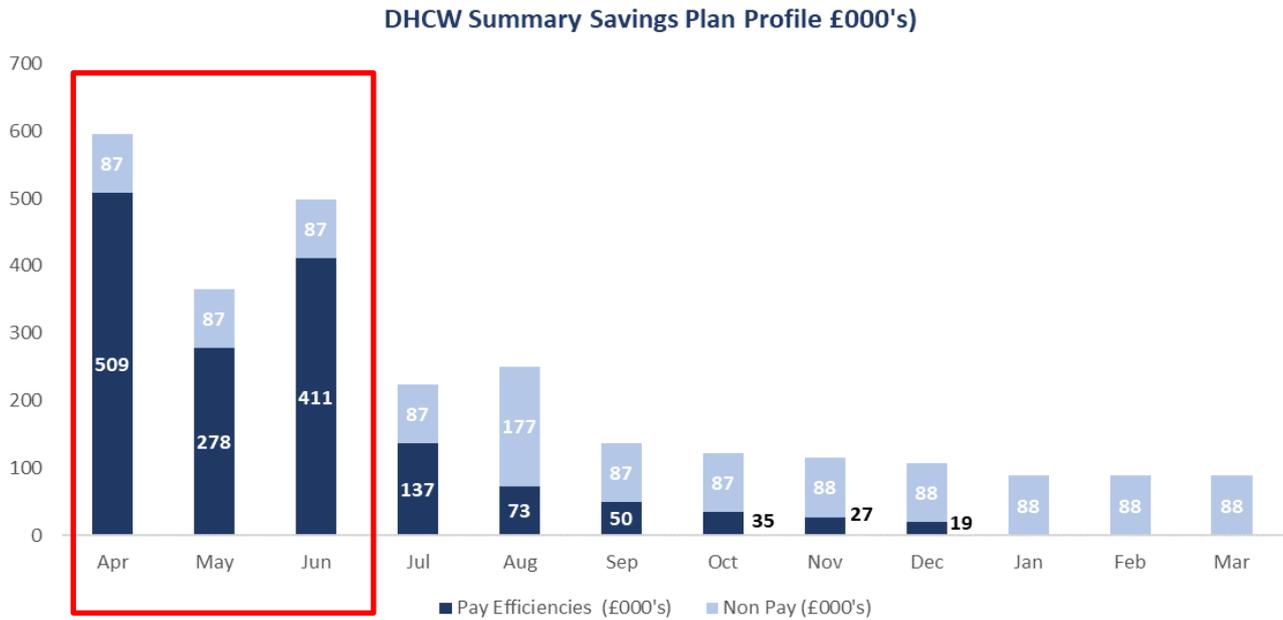Challenges emerging from the digital priority investment fund with financial aspect include:

1. **Multi Year Programmes & Projects**: A key issue remains the acquisition of resource into time limited posts particularly where funding is only approved on an annual basis. DHCW will liaise with Welsh Government Digital leads to accelerate approval processes as much as possible.

2. **Run Rate**: Both pay and non-pay run rates submitted by programmes are reflected within the organisational run rate presented in section 2.1.

3. **Sustainable Funding**: The ongoing operational funding post transition requires a strategic view rather than the current piecemeal approach.

4 SAVINGS

The annual plan articulated a savings target of £2.457m of which £1.139m (46%) is anticipated to be recurrent in nature and available to offset future years cost pressures.

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GIG
CYMRU
NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

Figure 11: Savings Plan Profile

DHCW Summary Savings Plan Profile £000's)

For the quarter DHCW has exceeded its savings target of £0.977m by £0.221m resulting in total actual savings of £1.198m. The overachievement was as a consequence pay underspend.

Figure 12: Quarter 1 Savings Plan Performance

Qtr 1 Savings Plan Performance
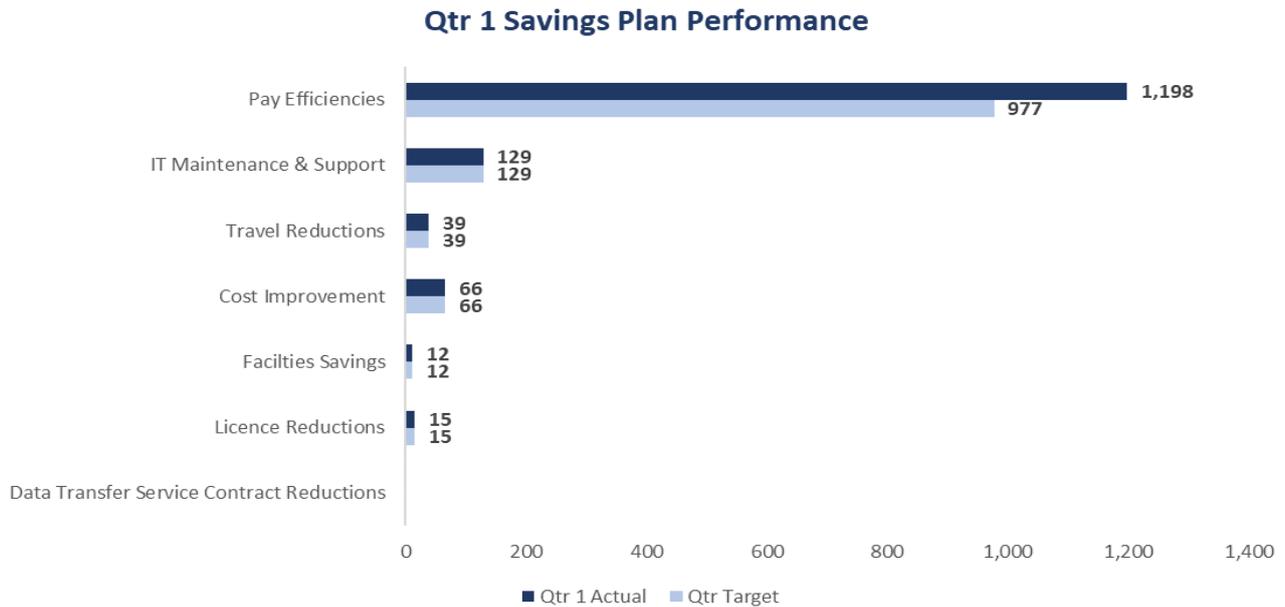
All savings schemes will be monitored with any forecast variance escalated via established risk management processes with appropriate mitigating actions.

5 PUBLIC SECTOR PAYMENT POLICY (PSPP)

DHCW is reporting a figure of 98% achievement against a target of 95%.

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6 CASH

The cash balances at the end of June amounted to £5.1m, post reporting discussion with Welsh Government has resulted in a preferred maximum balance of £2m. The balance will continue to be reviewed particularly in terms of marrying cash requirement with material expenditure items such as settlement of the All-Wales licencing contract. As of June 30th, the debtors total stood at £31.3m with no disputes lodged and no aged debt exceeding 90 days.

7 RISKS AND OPPORTUNITIES

DHCW has identified corporate level financial risks (see corporate risk register for details). These risks are managed via the established process.

7.1 Corporate Financial Risks

DHCW financial risks with are summarised below.

- **Exceptional Costs – Energy (across 3 sites)**: A potential cost pressure of £0.120m has been identified which is currently being mitigated via agreed monitoring and central management through Welsh Government at all Wales level.

- **Exceptional Costs– National Insurance increase:** A potential cost pressure of £0.330m has been identified which is currently being mitigated via agreed monitoring and central management through Welsh Government at all Wales level.

- **Digital Inflation & Supplier Cost increases**: Supply chain issues such as the chip shortage and underlying digital price pressures and contract renewals may have a negative impact upon prices and as a consequence there will be additional price increases in equipment, maintenance contract cost. The underlying digital price pressures will need to be identified, quantified and managed, however for specific contracts DHCW will continue to look to mitigate by negotiation, competitive procurement and changes in requirement where appropriate.

- **Digital Priority Investment Fund**: Should funding Letters not be provided in a timely manner organisations may not commit to activity without formal agreement of funding to support expenditure. This could lead to significant delays to scheme deliverables and possible risk to scheme objectives, benefits and completion.

- **Data Centre migration**: Once the details of the move have been finalised, there may be a requirement for additional resource to complete any activity planned for this year and a consequential need to secure funding and meet the increased cost pressure.

7.2 Financial Opportunities

High level financial opportunities currently identified for monitoring and pursuing are as follows:

- **Vacancy Management:** DHCW has reported achievement against its target vacancy factor. Whilst leads will look to supplement resource requirements via 3rd party suppliers there is a possibility of additional financial gains, finance & workforce leads will continue to monitor and agree mitigating actions/alternate plans with Directors and service leads.

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- **Additional Travel Expenditure Underspends:** Minimal travel expenditure has been recorded during quarter one. This will continue to be monitored to ascertain whether budget can be repurposed to support plan deliverables or continue to contribute to the organisational underspend.

- **Unwinding of provisions:** In line with guidance, DHCW entered accounting balanced at year end to reflect carried forward annual leave. Balances remained high due to the two-year COVID 19 flexibility. Should DHCW shift to historical levels of carried forward annual leave then the movement may present an accounting gain this financial year should additional resource not be contracted. An amount totaling £0.4m has been initially estimated.

- **VAT Recovery:** DHCW has reviewed its recovery position and is progressing additional VAT recovery totaling £11.9m for the items below:

  - National Licences (Prior Year)   £6.50m
  - National Licences (current year)   £4.80m
  - DPIF & Primary Care   £0.29m
  - Core   £0.34m

  Once agreed the necessary transactions will be incorporated within the financial accounts with any repatriation to other organisations communicated and completed.

8. BALANCE SHEET

The DHCW balance Sheet for quarter one is presented within table 5. The Balance Sheet (or Statement of Financial Position) reports the assets, liabilities and reserves of the organisation at a specific point in time. The report also notes material movement in balances and developments since April 2022.

Non-Current Assets
The movement is due to the implementation of IFRS16 and the capitalisation of leases formerly reported in revenue (see section 9). Trade and other receivables show an Increase in Prepayments in relation to the period from 1st July 2023 (Over 12 Months)

Trade and Other receivables
Increases are related to recent annual invoices raised to organisations reflecting recharges to support payment of the All-Wales Microsoft Enterprise Agreement resulting on additional debtors.

Cash and Cash equivalents
Balances were at the lowest at year end to meet the Welsh Government expectation of holding balances at a maximum of £2m, so the increase is to be expected in order to support the settlement of substantial supplier invoices expected in July.

Current Liabilities
The presented increase in trade and other payables is driven by the income prebilled to NHS Wales organisations to settle supplier payment of National Licences for the full year of service provision.

Financed by: Taxpayers Equity

The movement relates to current underspend and mainly the difference between Welsh Government planned and received income in the month.

Table 5: DHCW Statement of Financial Position (Balance Sheet)

	Opening Balance 01/04/2022	Movement	Closing Balance 30/06/2022
Non-Current Assets	**£'000**	**£'000**	**£'000**
Property, plant and equipment	12,170	3,092	15,262
Intangible assets	17,763	0	17,763
Trade and other receivables	371	150	521
Non-Current Assets sub total	**30,304**	**3,242**	**33,546**
Current Assets			
Inventories			
Trade and other receivables	13,707	17,613	31,320
Cash and cash equivalents	1,546	3,536	5,082
Current Assets sub total	**15,253**	**21,149**	**36,402**
TOTAL ASSETS	**45,557**	**24,391**	**69,948**
Current Liabilities			
Trade and other payables	15,677	17,855	33,532
Provisions	267	0	267
Current Liabilities sub total	**15,944**	**17,855**	**33,799**
NET ASSETS LESS CURRENT LIABILITIES	**29,613**	**6,536**	**36,149**
Non-Current Liabilities			
Trade and other payables			
Non-Current Liabilities sub total	**0**	**0**	**0**
TOTAL ASSETS EMPLOYED	**29,613**	**6,536**	**36,149**
FINANCED BY: **Taxpayers' Equity**			
General Fund	29,580	6,520	36,100
Revaluation Reserve	33	16	49
Other reserve			
Total Taxpayers' Equity	**29,613**	**6,536**	**36,149**

9. ADDITIONAL INFORMATION

International Financial Reporting Standard 16 (IFRS 16)
Background
International Financial Reporting Standard (IFRS) 16 is the new accounting standard to be applied to leases. From 1st April 2022 all leases greater than £5,000 in value and with a lease term greater than

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12 months will require "capitalisation" and form part of the organization balance sheet.

Action Required
On the balance sheet, DHCW are required to recognise each lease as a "right to use" asset and also recognise a corresponding lease liability representing our obligation to make future payments against the lease.

Impact to DHCW
DHCW identified 12 qualifying leases (10 property leases and 2 data centre leases) which had the following financial impact:

The financial impact will be change in funding streams to DHCW but overall nil impact. DHCW will receive a reduction in its Revenue Resource Limit of the recovery amount, which is £1.935m and an increase in its depreciation funding by £1.886m.

10. RECOMMENDATION

The board are requested to note the contents of the financial report for period ended 30 June and the forecast year end achievement of key financial targets.

Author: Mark Cox
Approver: Claire Osmundsen-Little

SHA Board Meeting July 2022

Financial Performance: Period to June 30th

CONTENTS

2022/23 Financial Performance

- Summary Performance
- Organisational Run Rate
- Core Directorate Performance
- Savings Performance
- COVID Response
- Digital Priorities Investment
- Capital Programme
- Balance Sheet
- Additional Information
- Risks & Opportunities
- Recommendations

DIGITAL HEALTH AND CARE WALES

2022/23 QUARTER ONE FINANCIAL PERFORMANCE

DIGITAL HEALTH AND CARE WALES

FINANCIAL PERFORMANCE AGAINST KEY INDICATORS

DHCW is reporting achievement of all of the key financial indicators for the period *(ref Table 1, page 8).*

| Achieved |

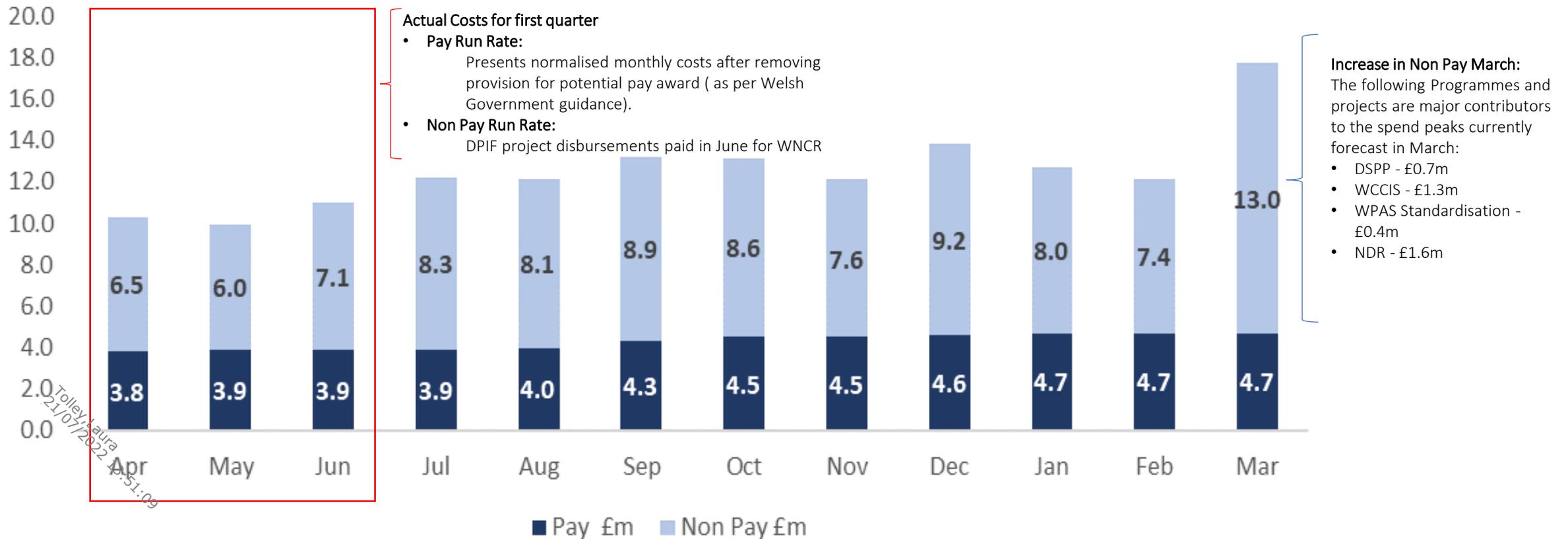| INDICATOR	CUMULATIVE PERFORMANCE	FORECAST OUTLOOK	COMMENT
Revenue Breakeven (To secure that the organisations expenditure does not exceed aggregated income)	£0.050m (Underspend decreased from £0.084m) Movement	Breakeven Movement	Small period operational surplus of £0.050m. DHCW is forecast to breakeven by the end of the financial year.
Remain within Capital Resource Limit (To ensure net Capital Spend does not exceed the Capital Resource Limit)	£0.057m (From breakeven position) Movement	Breakeven Movement	DHCW is reporting a £0.824m capital spend to date (presenting a small period underspend of £0.57m against initial plan). The current capital funding envelope is £5.514m with the expectation that this will be increased once additional DPIF funding has been formally approved.
Public Sector Payment Policy (To pay a minimum of all non-NHS creditors within 30 days of receipt of a valid invoice)	98% Movement	95% Movement	PSPP target achieved. Target – 95%, Actual 98% increased from 97%.
Cash Balances Appropriate balances to meet creditor requirements	£5.1m (Increased from £0.3m) Movement	Positive Cash Balance Movement	Cash balance has increased from £0.3 to £5.1m.

SUMMARY:

• DHCW is reporting a small revenue underspend of £0.050m and a year end forecast of breakeven.

• Capital spend to date totals £0.824m (an underspend of £0.057m from plan) against a current capital resource limit of £5.514m.

• PSPP target exceeded @ 98%

• Cash balance at manageable levels in readiness for material cash transactions in July.

RUN RATE AND FORWARD LOOK

The run rate for the year is materially affected by the latest DPIF expenditure profiles. At present the initial plan includes major spend items relating to contractual payments and NHS disbursements.. (Ref Figure 1, Page10).

Organisational Expenditure Run Rate £m

Actual Costs for first quarter
- **Pay Run Rate:**
  Presents normalised monthly costs after removing provision for potential pay award (as per Welsh Government guidance).
- **Non Pay Run Rate:**
  DPIF project disbursements paid in June for WNCR

Increase in Non Pay March:
The following Programmes and projects are major contributors to the spend peaks currently forecast in March:
- DSPP - £0.7m
- WCCIS - £1.3m
- WPAS Standardisation - £0.4m
- NDR - £1.6m

■ Pay £m ■ Non Pay £m

- Core and DPIF related pay costs may flex between payroll and third party supplier subject to resourcing strategy.
- Significant Non Pay spend projected for quarter 4, DHCW will look to work with leads to (where appropriate) bring forward spend plans and ensure delivery prior to year-end.

CORE DIRECTORATE PERFORMANCE

To June 30th DHCW is reporting an underspend of £0.050m, predominantly due to pay savings offsetting corresponding pressures within the ICT Directorate *(Ref Figure 2, page 13).*

DIRECTORATE CONTRIBUTIONS TO JUNE ORGANISATIONAL UNDERSPEND £000'S
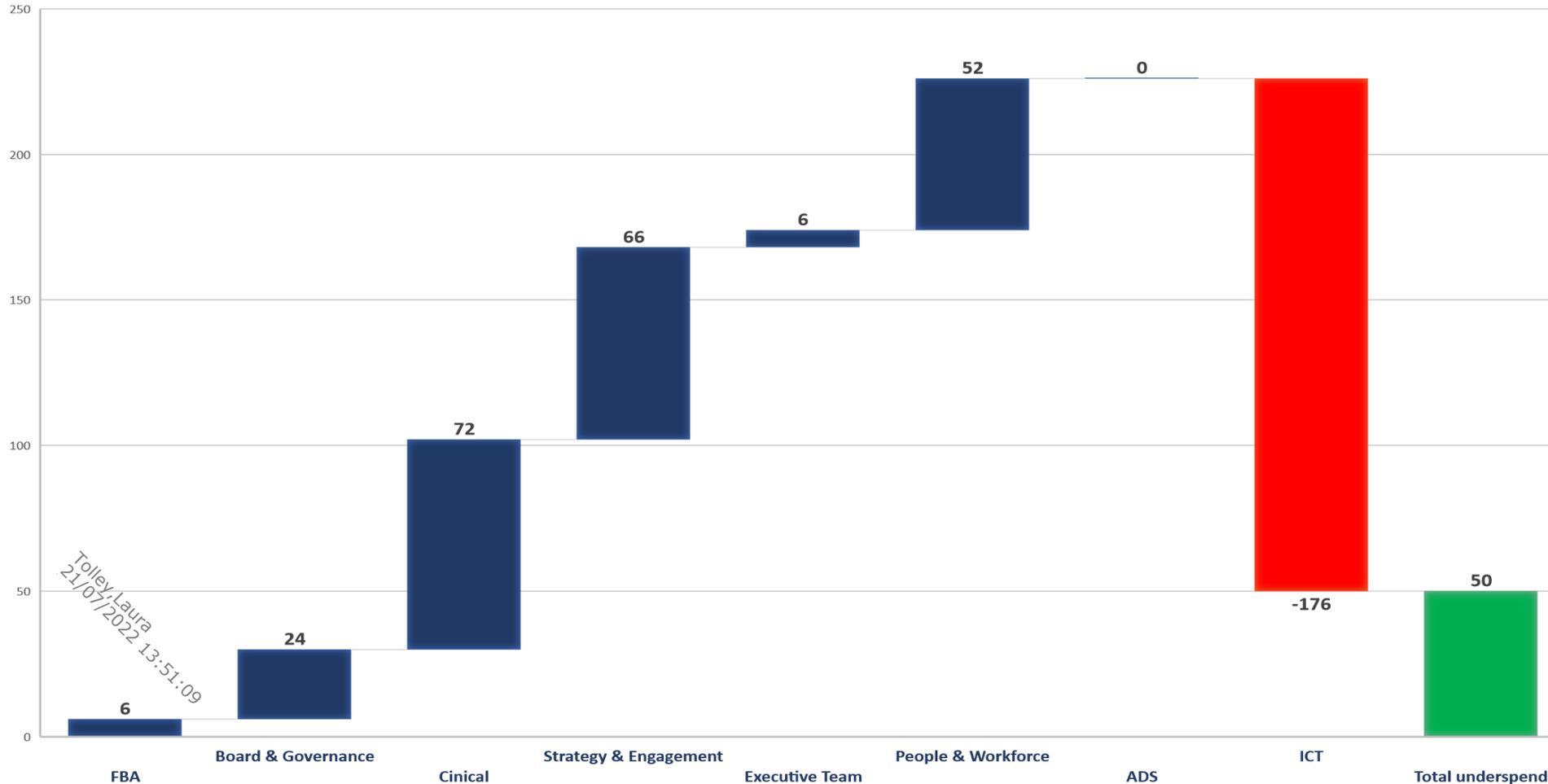
Material Directorate Variances:

Clinical Directorate – The Directorate is reporting an underspend of £0.072m. This is due to vacancies which are expected to be filled as the year progresses, this together with the timing of the procurement requirement of electronic journals may affect the final outturn position.

Strategy and Engagement – The Directorate is reporting an underspend of £0.066m driven by a pay underspend (due to backfill vacancies of staff now allocated to DPIF schemes).

Information Communications Technology Directorate - The directorate is reporting an overspend of £0.176m reflecting the over recruitment in data centres.

2022/23 SAVINGS PLAN

As part of the financial plan a savings requirement of £2.457m has been targeted. It is anticipated that £1.139m (46%) will be recurrent in nature and available to offset future years cost pressures. These are forecast to be achieved. *(Ref Figure 11 & 12, Page 21).*

DHCW Summary Savings Plan Profile £000's)
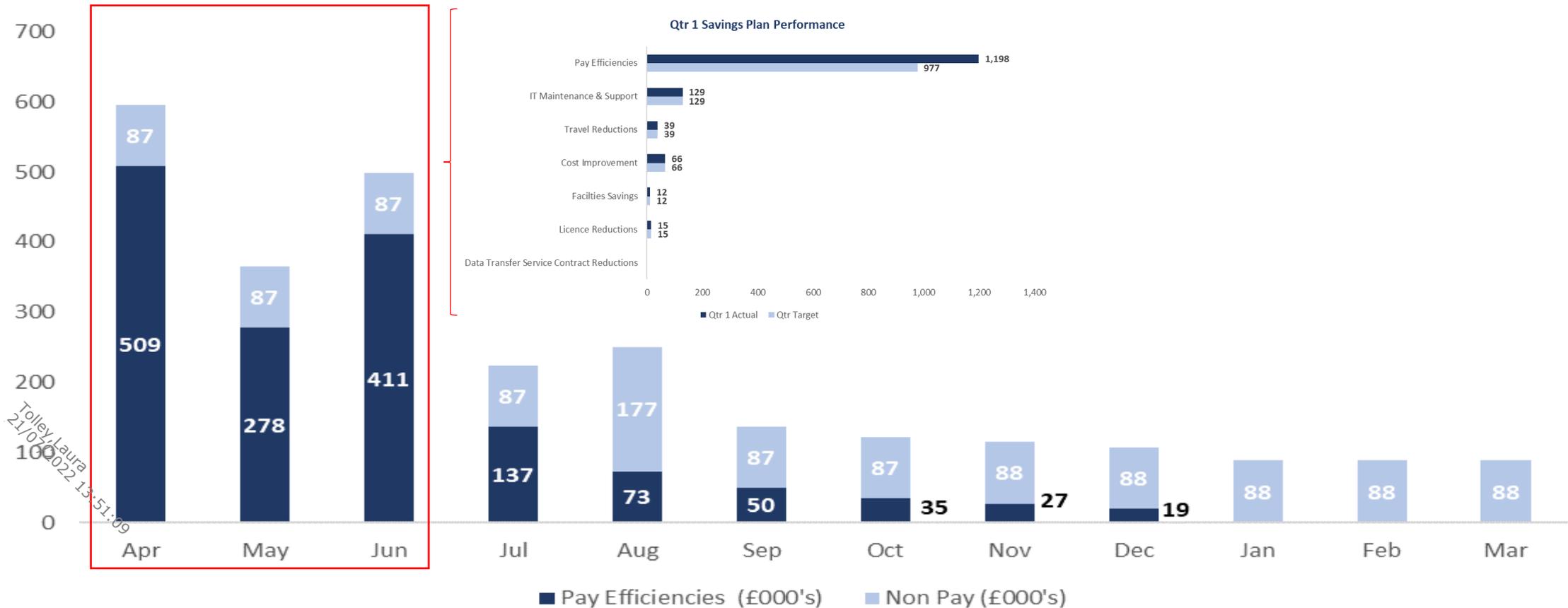
COVID 19 RESPONSE

At the end of June the cumulative revenue spend for Covid is £2.658m *(Ref page 16 & 17, fig 3,4,5,6).* the current outlook is to meet the cu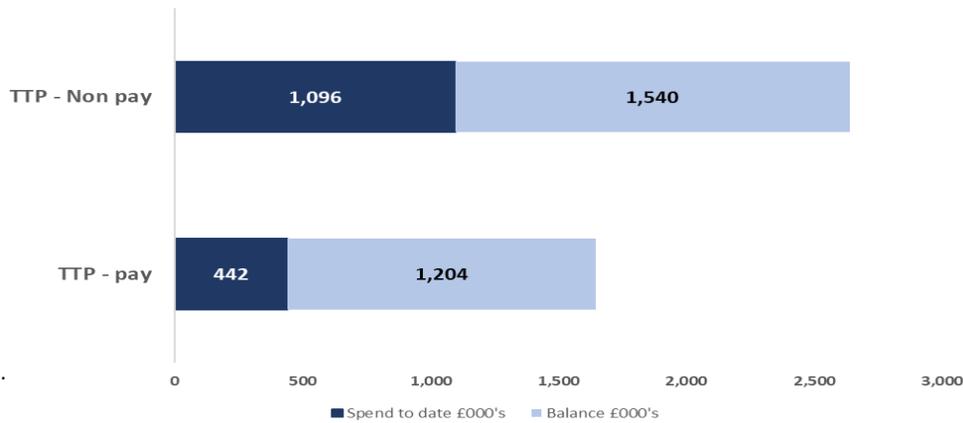rrent allocation of £10.258m. Capital spend in relation to TTP Development totals £0.166m from an annual allocation of £0.500m. A considerable element of non pay revenue spend is variable in nature and directly impacted by volume chaRges.

Test, Trace & Protect spend:

Quarter one expenditure totalling £1.120m, non pay run rate forecast to decrease by £0.164m per month due to licence reductions.

Covid Spend to June £000's

	Spend to date £000's	Balance £000's
TTP - Non pay	1,096	1,540
TTP - pay	442	1,204
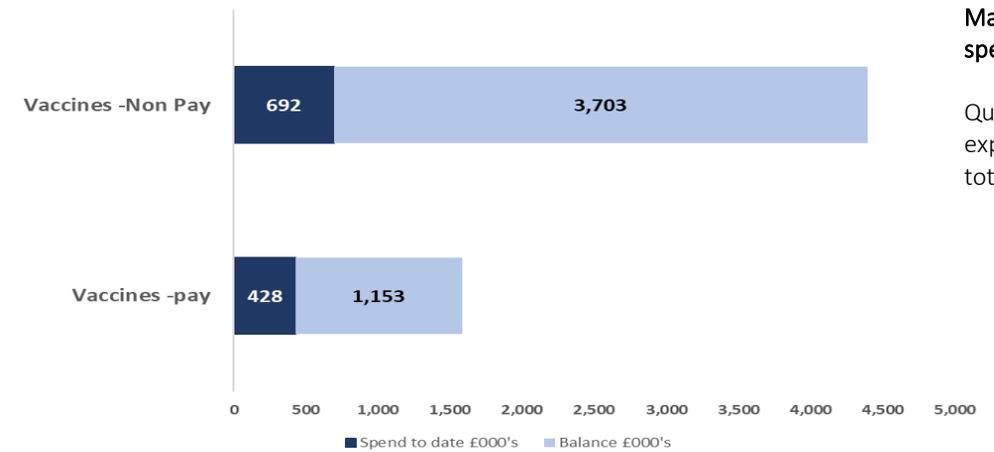
Mass Vaccination spend:

Quarter one expenditure totalling £1.538m.

Covid Spend to June £000's

	Spend to date £000's	Balance £000's
Vaccines -Non Pay	692	3,703
Vaccines -pay	428	1,153

Key Variable Spend:

Reduction in licencing requirement to come into effect from July onwards.

User Licence Volumes Profile

Microsoft: 4,100, 4,100, 4,100, 4,100, 4,100, 4,100, 750, 750, 750 (Jan-22 to Sep-22)

Solgari: 3,208, 3,250, 3,175, 2,262, 2,269, 1,894, 1,816, 716, 716 (Jan-22 to Sep-22)
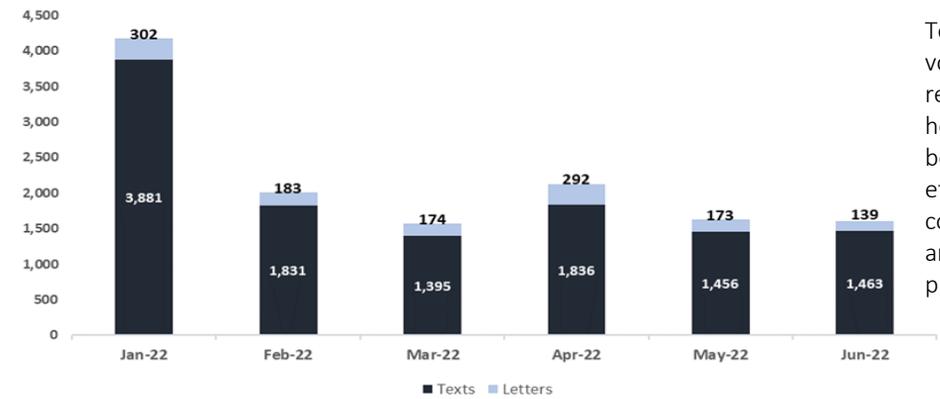
Key Variable Spend:

Text & letter volumes remain relatively low however these will be materially effected by new cohorts, boosters and the Autumn programme.

Jan 2022 - June 2022 Text/Letter Volume Profile (000's)

	Texts	Letters
Jan-22	3,881	302
Feb-22	1,831	183
Mar-22	1,395	174
Apr-22	1,836	292
May-22	1,456	173
Jun-22	1,463	139

DIGITAL INVESTMENT

Of the anticipated £6.733m DHCW has recorded £0.592m spend for the first quarter leaving £2.406m to be spent in the remaining 3 quarters of the financial year. *(Ref: Figure7 & 9, page s 18 & 19)*
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Digital Priority Investment Fund 2022/23 Anticpated Capital Allocation (£000's)

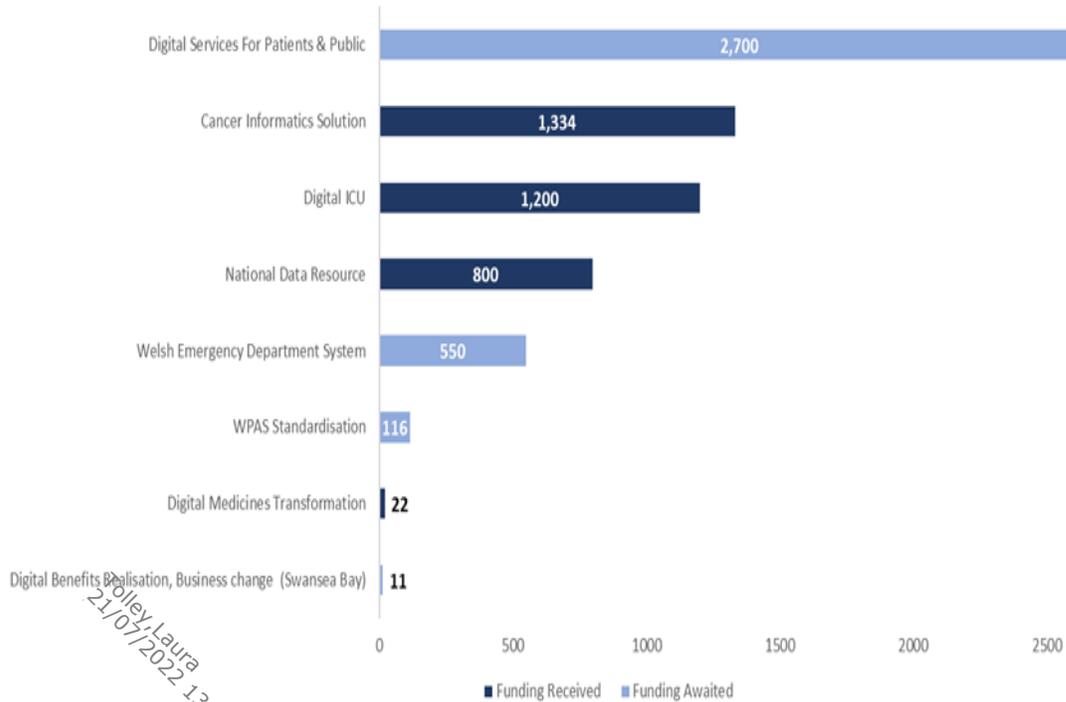| Category	Value
Digital Services For Patients & Public	2,700
Cancer Informatics Solution	1,334
Digital ICU	1,200
National Data Resource	800
Welsh Emergency Department System	550
WPAS Standardisation	116
Digital Medicines Transformation	22
Digital Benefits Realisation, Business change (Swansea Bay)	11

■ Funding Received   ■ Funding Awaited

Capital Performance to June £000's

Project	Spend to date £000's	Balance £000's
Digital Intensive Care Unit	84	1,116
Cancer Informatics Solution	465	533
National Data Resource	43	757

■ Spend to date £000's   ■ Balance £000's

Capital funding letters totalling £3.377m to support schemes is still awaiting DHCW has requested confirmation of timescales of receipt of formal funding. Only projects with actual funding and currently generating costs are presented.

DIGITAL INVESTMENT

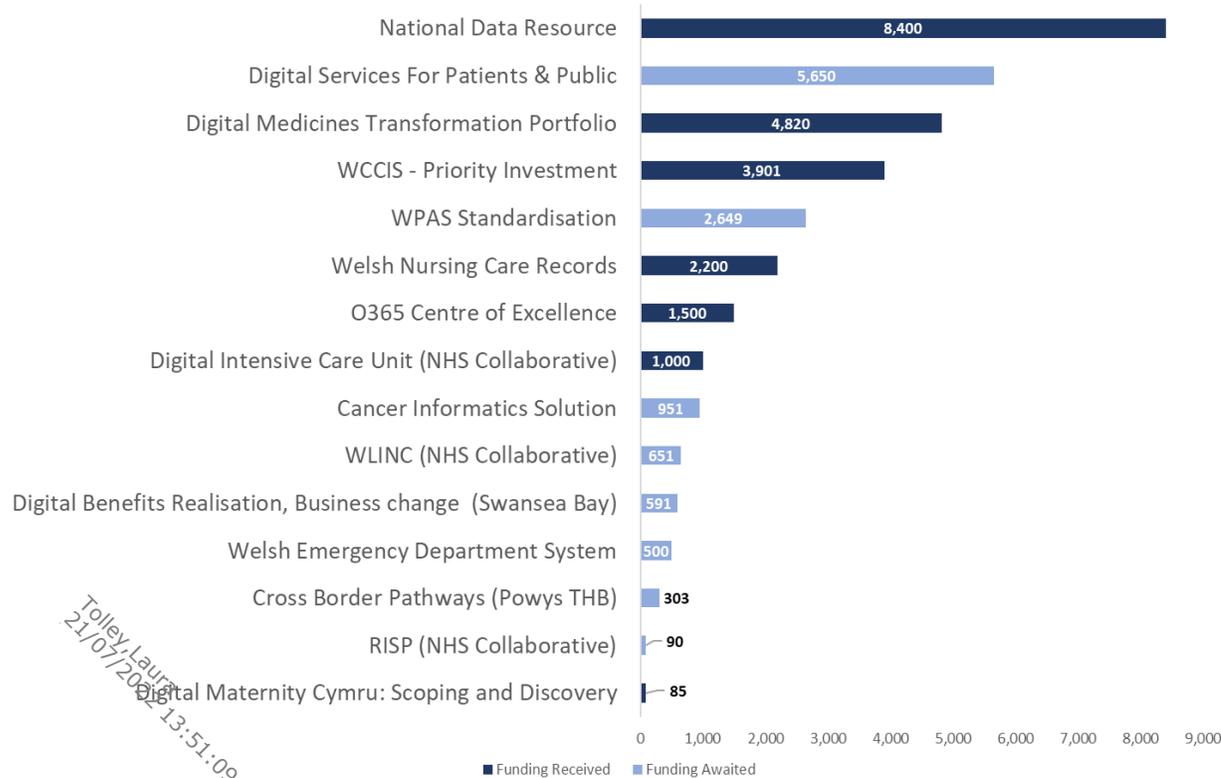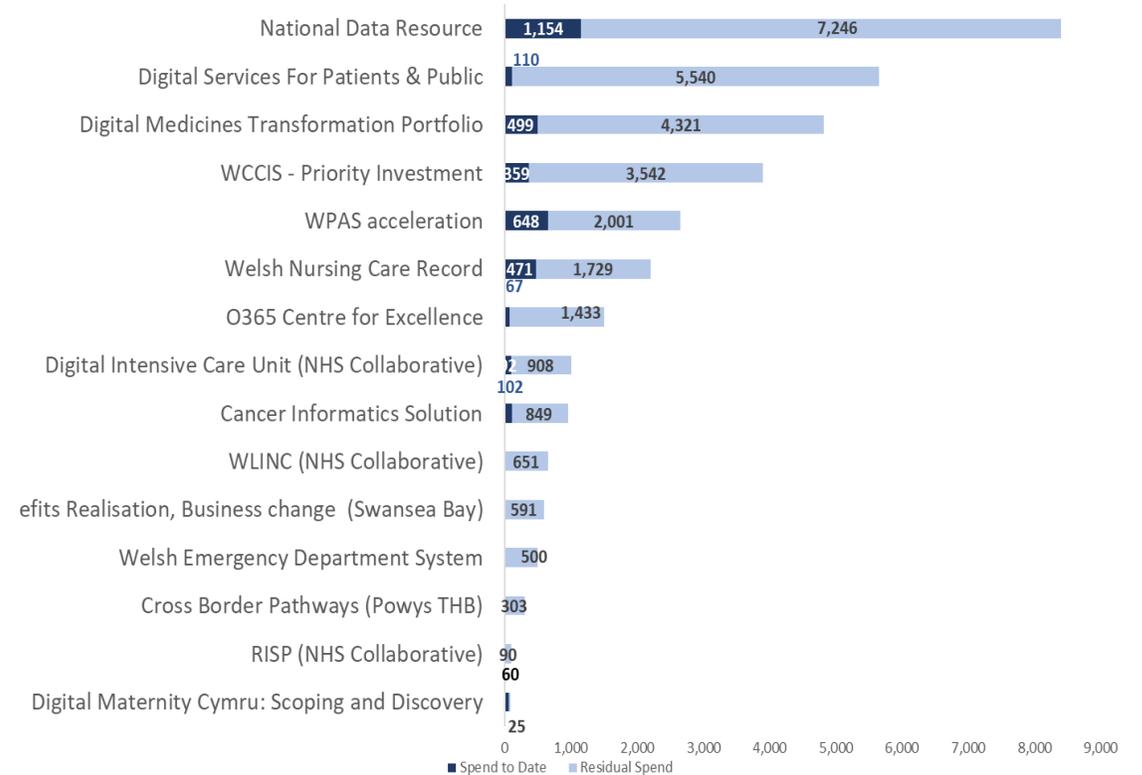Of the anticipated £32.291m funding (both direct from WG and via other NHS lead organisations) DHCW has recorded £3.6m spend for the first quarter leaving £28.6m to be spent in the remaining 3 quarters of the financial year. . *(Ref: Figures 8 & 10, page 18 & 19)*

Digital Priority Investment Fund 2022/23 Anticipated Revenue Allocation (£000's)

Category	Value
National Data Resource	8,400
Digital Services For Patients & Public	5,650
Digital Medicines Transformation Portfolio	4,820
WCCIS - Priority Investment	3,901
WPAS Standardisation	2,649
Welsh Nursing Care Records	2,200
O365 Centre of Excellence	1,500
Digital Intensive Care Unit (NHS Collaborative)	1,000
Cancer Informatics Solution	951
WLINC (NHS Collaborative)	651
Digital Benefits Realisation, Business change (Swansea Bay)	591
Welsh Emergency Department System	500
Cross Border Pathways (Powys THB)	303
RISP (NHS Collaborative)	90
Digital Maternity Cymru: Scoping and Discovery	85

■ Funding Received ■ Funding Awaited

DPIF Revenue Spend to June £000's

Category	Spend to Date	Residual Spend
National Data Resource	1,154	7,246
Digital Services For Patients & Public	110	5,540
Digital Medicines Transformation Portfolio	499	4,321
WCCIS - Priority Investment	359	3,542
WPAS acceleration	648	2,001
Welsh Nursing Care Record	471	1,729
O365 Centre for Excellence	67	1,433
Digital Intensive Care Unit (NHS Collaborative)	2	908
Cancer Informatics Solution	102	849
WLINC (NHS Collaborative)		651
efits Realisation, Business change (Swansea Bay)		591
Welsh Emergency Department System		500
Cross Border Pathways (Powys THB)	303	
RISP (NHS Collaborative)	90	
Digital Maternity Cymru: Scoping and Discovery	60	25

■ Spend to Date ■ Residual Spend

Revenue funding letters totalling £11.385m to support schemes is still awaiting DHCW has requested confirmation of timescales of receipt of formal funding.

CAPITAL PROGRAMME

DHCW has recorded £0.824m of capital spend against a current allocated allowance of £5.514m leaving a residual balance of £4.690m to be spent before the end of the financial year. [Ref Table 4, Page 11].

Scheme	Annual Forecast £000's	Period Plan £000's	Period Actual £000's	Under/-0verspend £000's	Residual Spend £000's
Discretionary					
Infrastructure Communications Technology	1,966	123	66	57	1,900
Estates & Facilities	50	0	0	0	50
Total Discretionary	**2,016**	**123**	**66**	**57**	**1,950**
Digital Priority Investment					
Cancer Informatics Solution	998	465	465	0	533
National Data resource	800	43	43	0	757
Digital ICU	1,200	84	84	0	1,116
Total Digital Priority Investment	**2,998**	**592**	**592**	**0**	**2,406**
COVID-19					
Test, Trace & Protect	500	166	166	0	334
Total COVID-19	**500**	**166**	**166**	**0**	**334**
Total Capital Plan	**5,514**	**881**	**824**	**57**	**4,690**

Discretionary ICT includes the following investment schemes:
- Cloud Readiness & Adoption
- Cyber Resilience
- Infrastructure Growth & Capacity Management
- Datacentre Lifecycle Management
- Network Improvements.

Risks to delivery:
- Networking equipment supply
- General supply chain issues/component shortages

Digital Priority Investment Fund:
Additional £3.377m anticipated to support
- Digital Benefits Realisation, Business change   £0.011m
- WPAS Standardisation   £0.116
- Welsh Emergency Department System   £0.550m
- Digital Services For Patients & Public   £2.700m

COVID Response
- TTP Development Pathway to be confirmed with Welsh Government.
- Vaccines Requirement also to be confirmed

DHCW BALANCE SHEET

. The Balance Sheet, or Statement of Financial Position, reports the assets, liabilities and reserves of the organisation at a specific point in time

(ref Table 5 Page 24).

Non-Current Assets
The movement is due to the implementation of IFRS16 and the capitalisation of leases formerly reported in revenue. Trade and other receivables show an Increase in Prepayments in relation to the period from 1st July 2023 (Over 12 Months)

Trade and Other receivables
Increases are related to Health Board National Licence SLA Debtors. Cash and Cash equivalents were at the lowest at year end to meet the Welsh Government expectation of holding balances at a maximum of £2m, so the increase is to be expected.

Current Liabilities
Matching increase in deferred income as a result of the National Licence income also in Debtors above.
Trade and other provision denote the provision raised against NHS digital at year end.

Financed by: Taxpayers Equity
Movement relates to current underspend and mainly the difference between Welsh Government planned and received income in the month.

	Opening Balance 01/04/2022	Movement	Closing Balance 30/06/2022
Non-Current Assets	**£'000**	**£'000**	**£'000**
Property, plant and equipment	12,170	3,092	15,262
Intangible assets	17,763	0	17,763
Trade and other receivables	371	150	521
Non-Current Assets sub total	**30,304**	**3,242**	**33,546**
Current Assets			
Inventories			
Trade and other receivables	13,707	17,613	31,320
Cash and cash equivalents	1,546	3,536	5,082
Current Assets sub total	**15,253**	**21,149**	**36,402**
TOTAL ASSETS	**45,557**	**24,391**	**69,948**
Current Liabilities			
Trade and other payables	15,677	17,855	33,532
Provisions	267	0	267
Current Liabilities sub total	**15,944**	**17,855**	**33,799**
NET ASSETS LESS CURRENT LIABILITIES	**29,613**	**6,536**	**36,149**
Non-Current Liabilities			
Trade and other payables			
Non-Current Liabilities sub total	**0**	**0**	**0**
TOTAL ASSETS EMPLOYED	**29,613**	**6,536**	**36,149**
FINANCED BY:			
Taxpayers' Equity			
General Fund	29,580	6,520	36,100
Revaluation Reserve	33	16	49
Other reserve			
Total Taxpayers' Equity	**29,613**	**6,536**	**36,149**

ADDITIONAL INFORMATION *(ref Page 25).*

International Financial Reporting Standard 16 (IFRS 16) - Headlines

International Financial Reporting Standard (IFRS) 16 is the new accounting standard to be applied to leases. From 1st April 2022 all leases greater than £5,000 in value and with a lease term greater than 12 months will require "capitalisation" and form part of the organization balance sheet.

On the balance sheet, DHCW are required to recognise each lease as a "right to use" asset and also recognise a corresponding lease liability representing our obligation to make future payments against the lease.

Impact to DHCW
DHCW identified 12 qualifying leases (10 property leases and 2 data centre leases) which had the following financial impact:

Revenue Impact
- The financial impact will be change in funding streams to DHCW but overall nil impact.
- DHCW will receive a reduction in its Revenue Resource Limit of the recovery amount, which is £1.935m and an increase in its depreciation funding by £1.886m.

Balance Sheet Implications
- A right of use asset totalling £4.713m (representing the net present value of all leases) is added to the accounts.
- A corresponding Lease liability for £4.713m will also be added – reflecting future committed payments.

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Tolley,Laura
21/07/2022 13:51:09

DHCW SUMMARY RISKS & OPPORTUNITIES

DHCW Financial Risks and Opportunities are summarised below. *(ref Pages 22 & 23).*

Financial Risks

- Exceptional Costs – Energy (across 3 sites): A potential cost pressure of £0.120m has been identified which is currently being mitigated via agreed monitoring and central management through Welsh Government at all Wales level.

- Exceptional Costs– National Insurance increase: A potential cost pressure of £0.330m has been identified which is currently being mitigated via agreed monitoring and central management through Welsh Government at all Wales level.

- Digital Inflation & Supplier Cost increases: Supply chain issues such as the chip shortage and underlying digital price pressures and contract renewals may have a negative impact upon prices and as a consequence there will be additional price increases in equipment, maintenance contract cost. The underlying digital price pressures will need to be identified, quantified and managed, however for specific contracts DHCW will continue to look to mitigate by negotiation, competitive procurement and changes in requirement where appropriate.

- Digital Priority Investment Fund: Should funding Letters not be provided in a timely manner organisations may not commit to activity without formal agreement of funding to support expenditure. This could lead to significant delays to scheme deliverables and possible risk to scheme objectives, benefits and completion.

- Data Centre migration: Once the details of the move have been finalised, there may be a requirement for additional resource to complete any activity planned for this year and a consequential need to secure funding and meet the increased cost pressure.

Financial Opportunities

- Vacancy Management: DHCW has reported overachievement against its target vacancy factor. Whilst leads will look to supplement resource requirements via 3rd party suppliers there is a possibility of additional financial gains. The finance & workforce will continue to monitor and agree mitigating actions/alternate plans with Directors and service leads.

- Additional Travel Expenditure Underspends: Minimal travel expenditure has been recorded during April. This will continue to be monitored to ascertain whether budget can be repurposed to support plan deliverables or continue to contribute to the organisational underspend.

- VAT Recovery: DHCW has reviewed its recovery position and is progressing additional VAT recovery (totalling £11.9m)for the items below:

National Licences (Prior Year)	£6.50m
National Licences (current year)	£4.80m
DPIF & Primary Care	£0.29m
Core	£0.34m

  .

- Unwinding of provisions: In line with guidance, DHCW entered accounting balanced at year end to reflect carried forward annual leave. Balances remained high due to the two-year COVID 19 flexibility. Should DHCW shift to historical levels of carried forward annual leave then the movement may present an accounting gain this financial year should additional resource not be contracted. An amount totalling £0.4m has been initially estimated.

RECCOMENDATION

The Board are requested to note the contents of the financial report for June 30th and the forecast year end achievement of key financial targets.

Tolley,Laura
21/07/2022 13:51:09

DIGITAL HEALTH AND CARE WALES
INTEGRATED ORGANISATIONAL PERFORMANCE REPORT

Agenda Item	6.2

Name of Meeting	SHA Board
Date of Meeting	28 July 2022

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

Executive Sponsor	Ifan Evans, Executive Director of Strategy
Prepared By	Alyson Smith, Head of Organisational Performance
Presented By	Michelle Sell, Director of Planning and Performance and Chief Commercial Lead

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 the period April - June 2022.	

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

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

1   IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply

CORPORATE RISK (ref if appropriate)	n/a

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

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

HEALTH CARE STANDARD	Governance, leadership and acccountability
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.

Author: Alyson Smith
Approver: Ifan Evans

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Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
IOPR	Integrated Organisational Performance Report		

2 SITUATION/BACKGROUND

2.1 This document provides a summary of the quarterly Digital Health and Care Wales (DHCW) Integrated Organisational Performance Report (IOPR). A similar report is presented to DHCW Management Board monthly where board members present and discuss performance and resulting actions or risks.

2.2 The IOPR is published to Board on a quarterly basis in arrears.

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

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

3.2 In response to DHCW's Integrated Medium Term Plan the IOPR contains updates on the twelve Portfolios which describe our deliverables throughout the year. The Board is asked to take note of these updates and any situations of note recorded in the report.

Of particular interest in the quarter is the delivery of the Welsh Patient Administration System (WelshPAS) as a single instance into two hospitals in Betsi Cadwaladr University Health Board. This means that patients' hospital information is easily accessible in whichever hospital a patient presents, saving time, resources and reducing the risk of patient harm.

Additionally, for the Welsh Immunisation Service, overseas vaccination data is now available, as is the ability to receive cross-border UK-wide data from Scotland, Northern Ireland and the Isle of Man. These enhancements help to create a more accurate record for people who received their vaccinations outside their residential area, by including a full vaccination history

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which can be accessed by clinicians where required, as well as being presented in the Covid-19 digital or paper pass.

Following this work, a further release of WIS delivered both Welsh Language and two-way texting, meaning that citizens who record Welsh as their preferred language, can receive timely and accurate information in Welsh, and ensuring that Welsh is not treated less favourably than English.

3.3   There remain two corporate risks relating to the plan:

- potential recruitment delays - our Recruitment Task Force is working across the organisation and with external support to accelerate recruitment, however progress is challenging as noted in the Recruitment section below.

- additional Covid-19 workload – this continues to impact on our planned activities and the current uncertainty in the management of the pandemic makes this a challenging area to fully address. We will continue to seek to minimise wider disruption depending on requirements and capacity

3.4   Scorecard

The Scorecard provides an 'at a glance' indicator of performance in key areas. As DHCW further develops and refines performance indicators in line with strategy, further indicators will be included. The details below highlight areas monitored in the Scorecard as a summary:

Major IT Services Incidents = GREEN. There was one Major IT Service Incident, however it did not breach the agreed service level resolution target.

Audits = AMBER. There is one audit action which has not met its target resolution date.

Service Level Agreement Meetings = AMBER. Only seven of the scheduled 11 meetings were conducted in April.

Sickness Absence = GREEN. Sickness is at 2.53%, which is well below the national NHS Wales threshold.

Personal Development Appraisals Compliance = AMBER. Performance is at 79% against a target of 85%.

Statutory and Mandatory Training = GREEN. Compliance is at 93.6% against a target of 85%.

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3.5   Workforce

DHCW's Recruitment Task Force continues to make a positive impact on recruitment, although the volume of work remains a challenge. The focus of the group will now be broadened with new members and a remit to consider strategic resourcing as a whole, i.e. the most appropriate mechanisms to resource the plan including a range of commercial partners.

There are currently 60 vacancies in various stages of recruitment, and there are thirty six people waiting to join DHCW.

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 April - June 2022.

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	15th July 2022	APPROVED

Author: Alyson Smith
Approver: Ifan Evans

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DIGITAL
HEALTH AND
CARE **WALES**

BOARD PERFORMANCE

REPORT: JUNE 2022

Tolley,Laura
21/07/2022 13:51:09

INTEGRATED ORGANISATIONAL PERFORMANCE REPORT

INTRODUCTION

This Integrated Organisational Performance Report provides evidence of performance against key indicators across Digital Health and Care Wales (DHCW) and is linked to the Strategic Missions 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 Performance
- People and Organisational Development
- Commercial Services
- Operational Service Management
- Clinical Assurance and Information Governance
- Governance and Quality
- Engagement

This report supports the requirements of Management Review as defined in ISO9001 and other related standards.

SCORE CARD

The score card presents a high-level view of the business areas which are monitored and presented in greater detail throughout this report.

ORGANISATIONAL PERFORMANCE SCORE CARD

Operational Measures:

⬌ **Major IT Service Incidents –** One WLIMS significant incident logged, which did not breach the SLA resolution target.

⬇ **Audits -** One action has not been completed (replacement of Windows and SQL 2008 legacy Servers).

⬇ **Service Level Agreement meetings -** Only 7 of the scheduled 11 meetings were conducted in April.

Workforce Measures:

⬌ **Sickness Absence –** Increased to 2.53%. This figure includes 32 Covid-19 related absences; an increase of 30 cases.

⬌ **Appraisal compliance –** Decreased from 80% to 79%.

⬌ **Statutory and Mandatory Training –** Compliance has continued to improve and is above target at 93.6%.

FINANCE & WORKFORCE | GOVERNANCE & QUALITY

FINANCE			GOVERNANCE & QUALITY	
Forecast Revenue Small operational surplus	Forecast to remain within Capital Expenditure Limit to ensure net Capital spend does not exceed Capital Expenditure Limit	Maintain within Public Sector Payment Policy to pay non NHS creditors within 30 days of receipt of valid invoice: Target = 95% (Actual = 98%)	One audit action has not met it's target date; all other actions on track to be completed by their target date	ISO and BS Standards compliant with requirement
WORKFORCE				
Sickness absence (actual 2.53%)	Appraisals compliance target = above 85% (achieved 79%)	Statutory and Mandatory Training compliance target = above 85% (achieved 93.6%)	Clinical Risk Management	Corporate Risk Management

OPERATIONAL SERVICE DELIVERY			ENGAGEMENT & FEEDBACK	
Commercial Services contract management compliant with KPI	Operational Service Support KPIs were achieved in eight of ten domains	Continue to support NHS Wales recovery	Service Level Agreement performance meetings with stakeholders conducted to schedule	Strategic engagement meetings with NHS partners conducted to schedule
Clinical Assurance and Information Governance requests and incidents resolved within KPI	One Major IT Service Incident, which did not breach the SLA resolution target	Other metric under development	Customer Satisfaction Feedback to Local Service Desk target = above 93% (actual 96%)	Other metric under development

OPERATIONAL SERVICE DELIVERY | ENGAGEMENT & FEEDBACK

MISSIONS - National |

Our 4 overarching national missions are divided into 12 enablers and portfolios

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

ENABLING Digital Transformation

1 Information Availability and Flow:
Develop an 'open platform' approach to digital innovation, by responding to national standards for how data, software and technologies work together, and how external partners can work with the national digital platform and national data resource

2 Protecting Patient Data:
Develop an Information Governance and Cyber Security framework, standards and mechanisms that prioritise patient and service user safety and confidentiality, and protect data from external and internal threats, resulting in data remaining secure and NHS Wales being trusted to host patient and service user personal information

3 Sustainable Infrastructure:
Develop and maintain a high-quality national infrastructure, transitioning to the cloud for better availability, reliability, safety, security, speed and agility

EXPANDING THE CONTENT, AVAILABILITY AND FUNCTIONALITY of the Digital Health and Care Record

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

5 Digital Patient Empowerment:
Provide Digital services for patients and the public to enable seamless interaction with health and care services supporting patients to fully participate in their own health and well being

DELIVERING HIGH QUALITY technology, data products and services

6 Public Health:
Develop, operate and maintain a set of high-quality national digital services to support Public Health prevention and early intervention Programmes

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

8 Planned and Unscheduled Care:
Develop, operate and maintain a set of high-quality national digital services to enable new models of planned and unscheduled patient care and management

9 Diagnostics:
Develop, operate and maintain a set of high-quality national digital services to enable the modernisation of diagnostics

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

DRIVING VALUE AND INNOVATION for better outcomes and value based care

11 Research and Innovation:
Delivering research insights and innovation for service improvement

12 Value from data:
Driving value from data for better patient outcomes and service planning

Tolley, Laura 21/07/2022 13:51:09

DIGITAL HEALTH AND CARE WALES | PLAN ON A PAGE

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

MISSIONS	PORTFOLIOS	Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2023
ENABLING DIGITAL TRANSFORMATION	Information Availability and Flow	**Open Architecture:** Develop implementation plans for embedding Architectural Building Blocks into NHS Wales digital architecture and continue to deploy APIs during the year			
			Data Strategy: Develop Data Strategy implementation Plan as part of the National Data Resource.	**Data Platform:** procurement of national data platform	Deliver the Data Strategy and national dataset developments
	Protecting Patient Data	**Information Governance:** Develop and promote a Welsh Government National Information Governance Framework		**System access:** National Audit Tool Roadmap	
		Cyber: Ongoing audit and assurance from Cyber Resilience Unit. Continue to implement DHCW Cyber Service Improvement plan			
	Sustainable Infrastructure	**Infrastructure Strategy**: Further develop sub strategies			
		Cloud: Migrate initial services to cloud hosting plus Cloud First procurements			
		Data Centres: Review second data centre provision			
EXPANDING the content, availability and functionality of the DIGITAL HEALTH AND CARE RECORD	Digital Healthcare Professional Empowerment	**Nursing solution:** More features and further roll out			
		Cancer solution: Initial implementation			
		Digital Health Record: Populating the Digital Health Record and extending electronic test requesting to more disciplines		Establish M365 Centre of Excellence	Populating the Digital Health Record and extending test requesting
	Digital Patient Empowerment	**Digital Services for Patients and the Public:** Initial priorities and work packages			
Delivering HIGH QUALITY TECHNOLOGY, DATA PRODUCTS AND SERVICES	Public Health	**Test Trace Protect:** Respond to highest priority confirmed requirements for Test Trace and Protect			
	Primary, Community & Mental Health	**GP Systems:** Manage the transition to new GP systems agreement ensuring support for cluster development plans			
		Welsh Community Care Information System: Strategic Review and Roadmap		**Mental Health:** Functionality and Information sharing	**Healthy Child Wales** Programme functionality enhancements in the Child Health system
	Planned and Unscheduled Care	**Covid-19 Recovery:** Respond to Covid-19 recovery initiatives			
		Unscheduled Care digital developments including the Emergency department system and supporting the Welsh Ambulance Service			
		Welsh Patient Administration System - Betsi Cadwaladr West		**Eye Care:** integration with national systems	**Intensive Care** System available for roll out
			Welsh Patient Administration System - Velindre		
	Diagnostics		**Welsh Radiology Information System** Roadmap of decommissioning		
		Work with New Radiology and Laboratory Information Programmes: Support the RISP procurements and LINC delivery			
		Endoscopy: Review National Programme requirements as they emerge			
	Digital Medicines	Readiness for early e-prescribing and medicines management sites along with enabling patient medicines management			
		E-Prescribing and Medicines Administration: award contract framework for health boards to buy system for hospitals	**Shared Medicines Record**: design		
DRIVING VALUE AND INNOVATION for better outcomes and value based care	Research and Innovation		**Research and Innovation:** Complete development of DHCW R&I Strategy	Delivery of Research and Innovation Strategy	
	Value from Data	**Analytics:** Responding to analytical requirements from Covid-19, Primary Care and Value in Health			

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MISSION 1:
ENABLING DIGITAL TRANSFORMATION

PORTFOLIO 1:
INFORMATION AVAILABILITY AND FLOW

Develop an 'open platform' approach to digital innovation, by responding to national standards for how data, software and technologies work together, and how external partners can work with the national digital platform and national data resource.

Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2022

OPEN ARCHITECTURE: Develop implementation plans for embedding Architectural Building blocks into NHS Wales digital architecture and continue to deploy APIs during the year.

DATA STRATEGY: Develop implementation plan as part of the National Data Resource Programme	DATA PLATFORM: procurement of national data platform	DATA STRATEGY: Deliver the Data Strategy and national dataset developments

DELIVERY:	IMPACT:
OPEN ARCHITECTURE: An approach to developing implementation plans has been defined, and workshops have been held to further the design work on the Patient-ID and Demographics building block, which, alongside the Reference Data building block, and the Integration Hub, is a priority area. In addition, there are 3 'Enabler' projects underway. • **API Management:** Platform Safety Case & Readiness Report has been presented to the Wales Informatics Assurance Group. • **FHIR** Façade/Server: Development is ongoing around WRRS Façade. • **Clinical Data Engine:** Treatment repository for Cancer workstreams in Radiotherapy and Chemotherapy are both at User Acceptance Testing. **DATA STRATEGY:** There are 6 workstreams that make up the Data Strategy Roadmap; NDR Use Case Delivery, Data Platform, Data Governance & Quality, Target Operating Model, Data Management Architecture, and Showcase Value & Data Acquisition. Each are at differing points of defining the scope of the project, start-up/initiation. Data Platform Setup has established work packages for delivery. Infrastructure design work is in progress and Proof of Concept work has been initiated. Engagement events with NHS Wales organisations are underway.	The local and national Data Platforms will underpin the Digital Health and Care Record, to service analytical data stores through a federated approach across the health and care system.

SITUATIONS OF NOTE:

Risks being managed by the Programme Board: Legal Gateway/Availability of Data, Recruitment to API Management Team (Interim Solution in place), Potential gaps in the data from newly procured third party systems.

MISSION 1:
ENABLING DIGITAL TRANSFORMATION

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

PORTFOLIO 2:
PROTECTING PATIENT DATA

Develop an Information Governance and Cyber Security framework, standards and mechanisms that prioritise patient and service user safety and confidentiality, and protect data from external and internal threats, resulting in data remaining secure and NHS Wales being trusted to host patient and service user personal information.

Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2022
INFORMATION GOVERNANCE: Develop and promote a Welsh Government National Information Governance Framework		**SYSTEM ACCESS:** National Audit Tool Roadmap	
CYBER: Ongoing audit and assurance from Cyber Resilience Unit. Continue to implement DHCW Cyber Service Improvement Plan			

DELIVERY:	IMPACT:
INFORMATION GOVERNANCE: In partnership with Gartner, work to define an Information Governance Framework to support NDR related services is in progress.	Enabling organisations to measure their level of compliance against national Information Governance standards and legislation.
CYBER: The Cyber Improvement Plan is underway and on track.	The Cyber Improvement Plan will increased protection from threats against user devices and servers, preventing both the likelihood and impact of malicious attacks, provide new technical controls, policies and ways of working that will help DHCW protect the NHS Infrastructure. It will also increase DHCW's cyber posture and national baseline of standards for NHS Wales.

SITUATIONS OF NOTE:

None.

Tolley, Laura
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MISSION 1:
ENABLING DIGITAL TRANSFORMATION

PORTFOLIO 3:

SUSTAINABLE INFRASTRUCTURE:

Develop and maintain a high-quality national infrastructure, transitioning to the cloud for better availability, reliability, safety, security, speed and agility.

Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2022

INFRASTRUCTURE STRATEGY: Further develop sub strategies

CLOUD: Migrate initial services to cloud hosting plus Cloud First procurements

DATA CENTRES: review second data centre provision

DELIVERY:	IMPACT:
INFRASTRUCTURE STRATEGY: Building on the foundational cloud and data strategies approved by DHCW board in 2021-22, a series of smaller technical based strategies are in development.	The sub-strategies will help form standardised approach within DHCW and sit alongside the cloud and data strategies, supporting the cloud first approach, the journey to greater cloud consumption and product road map developments.
CLOUD: Approximately 25% of DHCW's servers are now residing in public cloud.	Migration to cloud is aligned to future product roadmaps and supports the ambitions of A Healthier Wales.
DATA CENTRES: The procurement of the second data centre is underway with the tender documentation being completed ready for issue.	The second data centre will further DHCW's reduction in carbon footprint and ability to move to a cloud-first approach.

SITUATIONS OF NOTE:

Secured, on-going funding presents the biggest challenge.

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

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

PORTFOLIO 4:
DIGITAL HEALTH PROFESSIONAL EMPOWERMENT

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

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

DELIVERY:

IMPACT:

NURSING SOLUTION: The Nursing Care Record Project Board has recently undertaken a review of, and re-prioritised, project milestones.

Re-prioritisation means that the nursing community will receive additional digital forms sooner than expected, and will avoid delays.

CANCER SOLUTION: In response to the extended scope of the cancer programme, which now includes radiotherapy requesting, observations and image upload, and alongside Velindre's wish to maximise the time available to prepare for the significant business change; DHCW is on track to transition Oncology services from Canisc in November 2022.

Oncology's take-up of the new cancer solution will be a major milestone in the delivery of modern cancer services; the start of a journey across Wales.

DHCR: Centralised Allergies and Adverse Reactions have been integrated into WCP, with WCP Mobile about to launch with access to those same datasets.

This work increases the clinical decision-making effectiveness of the Welsh Clinical Portal, with details of patients' allergies and adverse reactions easily accessible in the digital record.

SITUATIONS OF NOTE:

The scope of the Cancer funded deliverables in Phase 2 is yet to be confirmed, as is the funding beyond November 2022.

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

PORTFOLIO 5:
DIGITAL PATIENT EMPOWERMENT

Provide Digital services for patients and the public to enable seamless interaction with health and care services supporting patients to fully participate in their own health and well being

Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2022

DIGITAL SERVICES FOR PATIENTS AND THE PUBLIC: Initial priorities and work packages

DELIVERY:

The NHS Wales App is on track for 'private beta' release within the next few weeks. This is a testing and feedback stage for invited users working with the development team.
The private beta release includes: first phase booking engine functionality and wellbeing event viewer, a communications module to enable users to define communications preferences and the ability to manage repeat prescriptions, bookings and view health record information as supported by their GP practice. A 'public beta' is scheduled to follow from late summer / early autumn. This will be an invitation to users to download and use the App, preferably linked to GP practices that are taking part in the beta and provide feedback to the development team.

Other elements of the NHS Wales App development and wider programme are on track. A communications and marketing supplier has been appointed, service management arrangements have been defined and detailed planning is under way for a Symposium event in the autumn.

IMPACT:

The NHS Wales App will provide access to key health services through a mobile phone app (Apple and Android platforms) and supporting web services. It is being developed on an agile basis, informed by user research and user design principles. There are over 1.2 million people in Wales already registered with NHS Login, the integrated user authentication process within the NHS Wales App.

The initial launch of the App will be supported by communications and engagement activity to encourage the availability of functionality within the app (e.g. Appointment scheduling and repeat prescriptions). Following launch, further extended functionality will be added to the app through 2023 and 2024, using an open architecture approach which will enable third party services to be launched from or within the app.

SITUATIONS OF NOTE:

High – extended delivery dates for IM1 data integration from a key primary care system supplier will delay service adoption for around half the population
Medium - 2022/23 funding and targets from Welsh Government have not been formally confirmed. DHCW is seeking clarity on three year funding profile, without which recruitment is challenging and there is uncertainty on transition to business as usual.
Low – There is no agreed timetable yet for a Welsh language interface on part of the in-app login process; the login process is an integration of NHS Login which is provided by NHS Digital; the remainder of the app is fully bilingual throughout from launch.

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

PORTFOLIO 6:
PUBLIC HEALTH:

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

Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2022

TEST, TRACE, PROTECT (TTP): Respond to the highest priority requirements for TTP

DELIVERY:	IMPACT:
WELSH IMMUNISATION SERVICE (WIS): Overseas vaccination data is now available in WIS, and the ability to receive cross-border UK-wide data from Scotland, Northern Ireland and the Isle of Man is also complete. Cardiff and Vale are piloting this project and have uploaded a number of oversees vaccination records with a non GB country code (16th June total 599). A further release of WIS took place in June. Both Welsh Language and two-way texting is now available.	Inclusion of overseas and cross-border vaccination data helps to create a more accurate record for people who received their vaccination(s) outside their residential area, by including a full vaccination history which can be accessed by clinicians where required, as well as being presented in the Covid-19 digital or paper pass. Ensuring citizens who record Welsh as their preferred language receive timely and accurate information, and ensuring that Welsh is not treated less favourably than English.

SITUATIONS OF NOTE:

The TTP team has been supporting Welsh Government in the deployment of the Homes for Ukraine (HfU) solution; this has resulted in some TTP activities being delayed.

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

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

PORTFOLIO 7:
PRIMARY, COMMUNITY AND MENTAL HEALTH:

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

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

DELIVERY:	**IMPACT:**
WCCIS STRATEGIC REVIEW: DHCW is tendering for consultancy to support three work streams: Technology; Service Management; Commercial; with the invitation to tender scheduled to complete in August.	The Welsh Community Care Information System provides a single national system for sharing of information securely between health and social care services.
WCCIS ROADMAP: DHCW has produced a forward plan for the Technology work stream that outlines the work required to complete the associated road map in the next 6 months and beyond. This includes information on releases and go-lives.	
DHCW has worked closely with stakeholders to agree the priorities for Community and Mental Health information dataset requirements.	To develop a National service and Information standards for community information services. Stakeholders: Social Care, Community Nursing, Mental Health and Allied Health Professionals.

SITUATIONS OF NOTE:
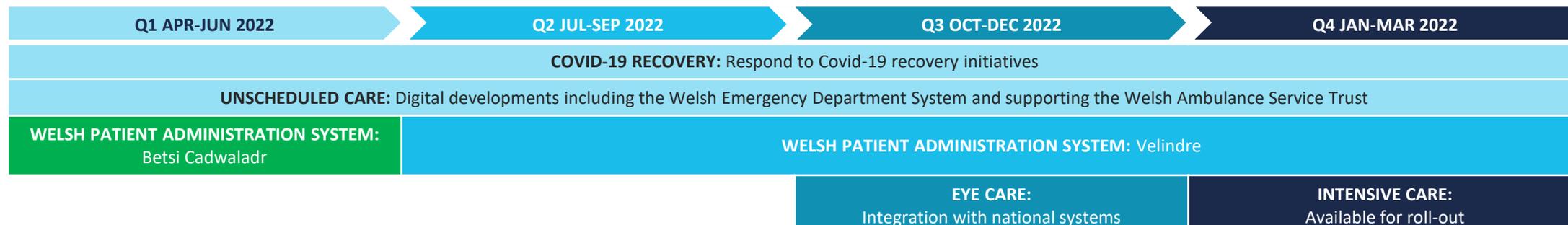
None.

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

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

PORTFOLIO 8:
PLANNED AND UNSCHEDULED CARE:

Develop, operate and maintain a set of high-quality national digital services to enable new models of planned and unscheduled patient care and management

Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2022
COVID-19 RECOVERY: Respond to Covid-19 recovery initiatives			
UNSCHEDULED CARE: Digital developments including the Welsh Emergency Department System and supporting the Welsh Ambulance Service Trust			
WELSH PATIENT ADMINISTRATION SYSTEM: Betsi Cadwaladr	**WELSH PATIENT ADMINISTRATION SYSTEM:** Velindre		
		EYE CARE: Integration with national systems	**INTENSIVE CARE:** Available for roll-out

DELIVERY:

WELSH PATIENT ADMINISTRATION SYSTEM (WelshPAS): The WelshPAS has been deployed across two hospitals in Betsi Cadwaladr University Health Board (BCU) as a single instance, including substantial data migration and performance enhancements, marking the largest implementation of a PAS in Wales since 2013.

WELSH EMERGENCY DEPARTMENT SYSTEM (WEDS): The WEDS project has implemented in Neath Port Talbot Minor Injuries Unit (MIU), but on-going issues with system performance remain. A workshop with supplier teams was held in June with technical deep dive sessions following but significant progress needs to be seen before the system progresses to Morriston Emergency Department. There is also uncertainty regarding proposed DPIF funding.

WELSH INTENSIVE CARE INFORMATION SYSTEM (WICIS): Development and test sprints continue broadly to plan. Concerns about future levels of funding from DPIF have been allayed.

IMPACT:

Two of BCU's major acute hospitals are now working on one single WelshPAS for the first time, meaning that patients' hospital information is easily accessible in whichever hospital a patient presents, saving time, resources and reducing the risk of patient harm.

The WEDS delay is creating a lack of trust in the supplier and solution by all Health Boards, which may impact the future viability of the project.

The project and supplier continue to focus on the first go live in Q4 this year.

SITUATIONS OF NOTE:

High: WEDS has a RED status. Without a date for Morriston go live, the rest of Wales will not make plans. As this is an ongoing situation, confidence in the solution is falling.

Medium: EyeCare. This is a national programme run by Cardiff and Vale University Health Board (CAV). The current Programme Director (CAV) is retiring, and CAV are looking to move the programme to DHCW.

Medium: Delays and uncertainty about DPIF funding for projects and services including WPAS, WEDS and WICIS, have removed some focus in Q1, and delayed planned recruitment activity

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

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

PORTFOLIO 9:

DIAGNOSTICS:

Develop, operate and maintain a set of high-quality national digital services to enable the modernisation of diagnostics.

Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2022

WELSH RADIOLOGY INFORMATION SYSTEM: Roadmap for decommissioning

WORK WITH NEW RADIOLOGY AND LABORATORY INFORMATION SYSTEMS: support the RISP procurements and LINC delivery

ENDOSCOPY: Review National Programme requirements as they emerge

DELIVERY:	IMPACT:
RADIOLOGY INFORMATION SOLUTION PROGRAMME (RISP): The RISP programme continues to progress through a Competitive Dialogue process	Contract Award is expected in Q1 2023-24.
LABORATORY INFORMATION NETWORK CYMRU (LINC): The project will replace the legacy Pathology Laboratory system. There have been delays to the original project timelines which has resulted in a change request from the supplier. Further work is required on the plan, and production of design documents needs to define the scope and scale of DHCW's workload.	Potential delays to the implementation of the new system.
WELSH IMAGE ARCHIVING SERVICE (WIAS): The WIAS supplier continues to build the cloud solution.	WIAS and two key operational services have moved from being on premise to cloud based. The operational services are working effectively in the cloud.
ENDOSCOPY: Results from Swansea Bay University Health Board are now available in the Welsh Results Reports Service (WRRS) across organisational and geographical boundaries, following a go live in May 2022.	Clinicians treating patients who have had an Endoscopy test in Swansea Bay UHB can now see the result in WCP or in the GP Test Requesting (GPTR) service, regardless of their NHS Wales organisation /location. This provides the clinician with more clinical information to make a judgement, and potentially reduces the number of duplicated tests.

SITUATIONS OF NOTE:
LINC status has been escalated through formal commercial channels

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

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

PORTFOLIO 10:
DIGITAL MEDICINES:

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

Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2022

Readiness for early e-Prescribing and medicines management sites along with enabling patient medicines management

E-PRESCRIBING AND MEDICINES ADMINISTRATION: Award framework for Health Boards to buy system

SHARED MEDICINES RECORD: Design

DELIVERY:	IMPACT:
ELECTRONIC PRESCRIBING AND MEDICINES ADMINISTRATION (ePMA): The Procurement has been re-established with revised timescales, to deliver a framework in November 2022, approved by the ePMA programme board. Information and interoperability standards for medicines, allergies and intolerances have been drafted and endorsed by the Welsh Technical Standards Board (WTSB), Welsh Information Standards Board (WISB) and the ePMA programme board.	Through electronic prescribing it will be possible to improve the way patients, clinicians and pharmacists access and manage the provision of medicines across the health system.
SHARED MEDICINES RECORD (SMR): The project is in discovery phase. An initial user requirements workshop has been held and DHCW has met with Somerset NHS Foundation Trust to learn from their medicines repository architecture.	The Shared Medicines Record will improve visibility of patients' medications which will contribute to increased patient safety.

SITUATIONS OF NOTE:

ePMA contract award has been change-controlled to Q3. This has had no adverse impact on Health Boards/Trust procurement timelines, particularly Cardiff and Vale UHB, as they are planning to recruit their ePMA pre-implementation team before commencing procurement activities. Aneurin Bevan UHB and Betsi Cadwaladr UHB have submitted their ePMA funding bids. All other Health Boards'/Trust bids are outstanding.
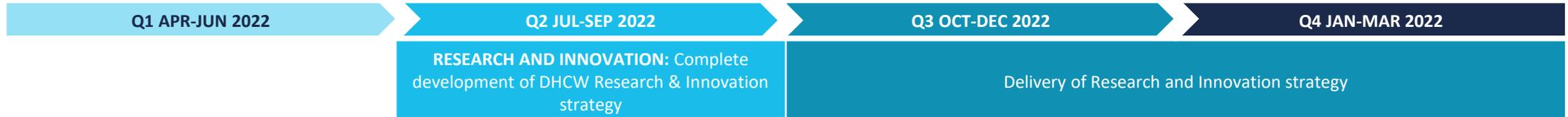
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MISSION 4:
DRIVING VALUE AND INNOVATION FOR BETTER OUTCOMES AND VALUE BASED CARE

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

PORTFOLIO 11:
RESEARCH AND INNOVATION:

Delivering research insights and innovation for service improvement.

Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2022
	RESEARCH AND INNOVATION: Complete development of DHCW Research & Innovation strategy	Delivery of Research and Innovation strategy	

DELIVERY:	IMPACT
DHCW has successfully delivered the IDEATE (outcomes-based agreements) project with abstracts submitted to the ISPOR EU2022 (global conference for Health Economic & Outcomes Research).	Collaboration between DHCW, Pfizer, Wales Cancer Network and Swansea University.
The stakeholder engagement plan has been developed with ongoing delivery as part of developing the Research and Innovation (R&I) strategic approach. The R&I strategy, vision and objectives were presented to Digital Governance & Safety Committee in May 2022.	To undertake a thorough review of R&I landscape in Wales and to inform DHCW R&I objectives.
The DHCW Research and Innovation catalogue has been completed.	An assessment of all DHCW R&I activity across the organisation, capturing status and outcome with ongoing review at DHCW R&I working group.
A Memorandum of Understanding and Schedule of Deliverables for DHCW has been completed with the Wales Institute of Digital Information (WIDI).	Refreshed commitment and strengthened partnership approach with WIDI.

SITUATIONS OF NOTE:	
Medium: We are still awaiting matching of the dedicated R&I posts (they were recently unmatched), which creates a capacity problem for ongoing development and delivery of the strategy.	

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MISSION 4:
DRIVING VALUE AND INNOVATION FOR BETTER OUTCOMES AND VALUE BASED CARE

PORTFOLIO 12:
VALUE FROM DATA:

Driving value from data for better patient outcomes and service planning.

Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2022

ANALYTICS: Respond to analytical requirements from COVID-19, Primary Care and Value in Health

DELIVERY:	IMPACT:
The Value in Health (ViH) team were nominated for the Moondance Cancer Award for the Myeloma Dashboard. Shortlisted in the "working Together" category (included ViH Programme team, DHCW Information Services team, Health Boards and clinicians).	Recognition of the collaborative and impactful work being done by the team and programme.
Lymphoedema, Epilepsy, Delivery Unit (DU) Vaccine and Colorectal Dashboards launched.	Stakeholders benefiting from the dashboard launch included ViH Programme, WG, Clinical Teams, Special Interest Groups, Clinical Networks, Support Functions.
The all-Wales Diabetes Module has been delivered.	This enables practices to manage their diabetic patients more rigorously and focus on patients with pre-diabetes. Stakeholders included Practices, Clusters, LHB, WG.
DHCW has provided cluster-level data for the total number of new lung cancers diagnosed in Hywel Dda Health Board in 2019-20 and 2020-21.	Planning services to target where the need is most, and reduce inequality in provision of access to early diagnosis.
WE have ensured that the Primary Care Information Portal was fully functional to support the Access Standards submission and reporting requirements of the GMS contract.	Enabled accurate payments in relation to Access Standards and provided local HBs with appropriate data in relation to the Access provision for patients offered by each Practice. Stakeholders included GP Practices, clusters, HBs & WG.
The Looked After Children (LAC) national process and dataset was presented by DHCW, and endorsed at the LAC Nurses Cymru network.	Widespread interest in being involved in the pilot thus ensuring information is shared safely and appropriately between practitioners and organisations providing the service. This base data will be used to complete the looked after children census which is a WG requirement. Stakeholders included Heads of Children of Services, LAC Services, WG, NHS & PHW.
A new Health Maps Wales release has been deployed.	Latest data release for mortality APC and demographic data. Stakeholders included WG.

SITUATIONS OF NOTE:

None.

SUMMARY RISK:

The key risks to delivering our plan and therefore our strategic objectives relate to new requirements which may mean moving staff to new Covid and essential services priorities and not filling vacancies in a timely manner.

PORTFOLIO REF	STRATEGIC OBJECTIVE	RISKS TO DELIVERING OUR STRATEGIC OBJECTIVES
ALL	ALL	**DHCW 0259** IF DHCW are unable to recruit to vacancies due to skills shortages and unavailability of suitable staff THEN this will impact on service deliverables and timescales resulting in delays to system support and new functionality for NHS Wales users. **Mitigation** DHCW will be finalising the Resourcing Strategy for 2022-23. The strategy will look at a number of initiatives to ensure that DHCW achieves its recruitment target. This will include an improvement in workforce planning data as well as exploring further collaboration opportunities. DHCW are already experiencing success with LinkedIn and CV library and we will continue to utilise these sources. DHCW has held a number of career fairs and will continue to use this method of attracting wide range of future talent. To support retention, DHCW are planning to work in partnership with WIDI to develop programmes to upskill and reskill our existing workforce. Additionally DHCW will be developing new contractual vehicle/s commencing from June 2022 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 and a determination that the procurement approach is more optimal in order to quickly and effectively secure time critical delivery of key projects
ALL	ALL	**DHCW 0237** IF new requirements for digital solutions to deal with Covid 19, recovery of services and other new areas of work 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. **Mitigation** FORWARD ACTIONS: Continue to monitor new requirements for Covid recovery and other new initiatives. Use formal change control methods to ensure impact is mapped and impacted work is re-baselined. **ACTIONS TO DATE:** IMTP approved by SHA Board end March 2022. Annual Business Plan approved April 2022 - this plan is flexible and new requirements will be assessed against available capacity and go through a formal change control process before being added to the plan. Still significant Covid backlog and new requirements coming through some of which are on a candidate list until resource is confirmed. Funding letters not received yet (Digital Priorities Investment Fund). Anticipated new requirements from Emergency and Unscheduled Care (Six Goals Framework) and new National Vaccination programme.

FINANCIAL MANAGEMENT| Financial Highlights

DHCW is reporting achievements 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 £0.050m after applying the savings target profile.

- Capital – Current Spend of £0.824m against Capital Resource Limit of £5.514m.

- Public Sector Payment Policy (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 £0.050m.
Remain within Capital Resource Limit (To ensure net Capital Spend does not exceed the Capital Resource Limit CRL)		£0.824m spend for period against a capital limit of £5.514m
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 Target 95% – Actual 98%
Bank Sufficient bank balances		Balance as at 30/06 £5.1m

SUMMARY:

- The organisational month end revenue underspend is currently £0.050m against a forecast of breakeven.

- Capital spend to date is £0.824m of the total CRL of £5.514m (0.057m underspend against plan).

- PSPP target exceeded.

- Cash balance of £5.1m.

PEOPLE & ORGANISATIONAL DEVELOPMENT| Summary

**SICKNESS ABSENCE** (P)

Absence SPC Chart

Sickness absence is 2.53% - increase by 0.46%. This figure includes 15 recorded COVID-19 related cases, down from 2 last month. There are however 32 COVID-19 cases in total as 18 have yet to be recorded on ESR by line managers.

Long term sickness is 1.39% - decreased by 0.13%. There were 20 long term sickness cases of which 10 have returned.

Short term sickness is 1.15% - increased by 0.6%, likely to be attributed to the increase in COVID-19 absences.
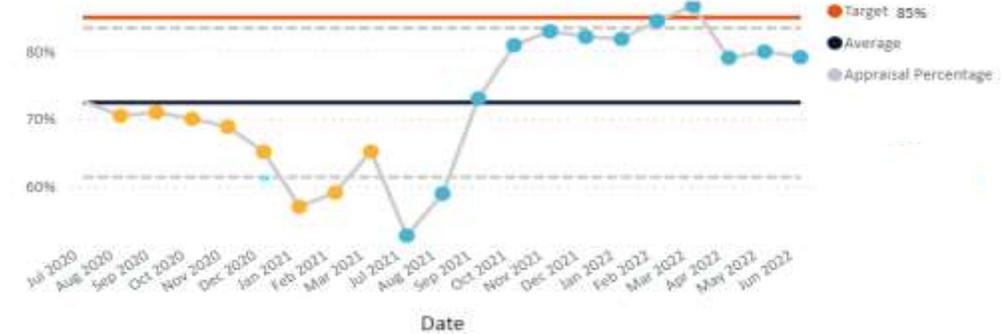
STATUTORY AND MANDATORY TRAINING (?) (H)

Compliance SPC Chart
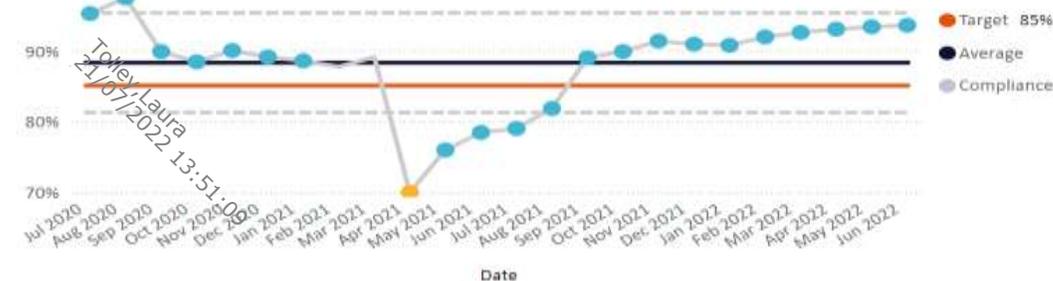
Statutory and Mandatory Training is 93.6% - increased by 0.02% on last month and is above the Welsh Government target of 85% for NHS Wales.
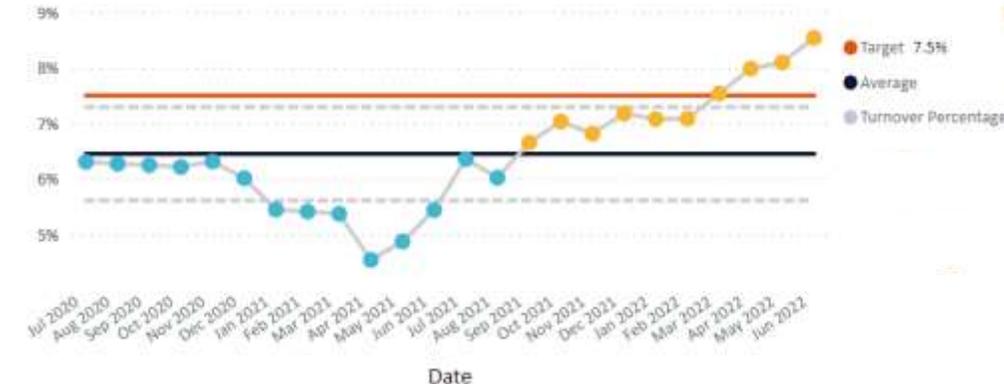
APPRAISALS (?) (F)

Reviews Complete (%) by Month

Appraisal completion rate is 79% (80% last month).
This is below the Welsh Government target of 85% for NHS Wales.

TURNOVER (H)

Turnover SPC Chart

Turnover is 8.54% (8.10% last month), a slight increase from last month.

VARIATION

(H) (L)
Special Cause Concerning variation

(H) (L)
Special Cause Improving variation

Common Cause

ASSURANCE

(F)
Consistently fail target

(P)
Consistently hit target

(?)
Hit and miss target subject to random

COMMERCIAL SERVICES| Strategic Procurement Activity

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

TITLE	ALL WALES / DHCW INTERNAL	OVERVIEW OF THE SCOPE	INDICATIVE CONTRACT VALUE	INDICATIVE TERM (YEARS)	CONTRACT START DATE	SHA BOARD DATE	CURRENT STATUS
Microsoft Enterprise Agreement	All Wales	Enterprise Agreement to give over 100,000 NHS Wales staff access to Microsoft 365 to enable organisations to have robust, modern tools and capabilities needed to enable new ways of working and better collaboration and secure sharing of information more easily within the NHS and the wider public sector in Wales using Microsoft 365.	£176m	3+2	01/07/2022	26/05/2022	Approved at SHA Board May 2022
Dental Referral System	All Wales	Digital solution to facilitate and track dental referrals on a health board by health board basis across Wales.	£2.7m	3+1+1	01/06/2023	26/05/2022	Approved at SHA Board May 2022
Data Centre Networking	DHCW Internal	Provision of networking equipment in DHCW Data Centre 2.	£1.64m	3+2	01/06/2022	26/05/2022	Approved at SHA Board May 2022
NDR Data Platform	DHCW Internal	Provision of a Google Cloud Solution Partner to provide the Authority with Google cloud products and services to support the development and implementation of the NDR Data Platform. Intention is to meet September's SHA Board but is contingent on technical input into procurement products. Internal stakeholders have been made aware that slippage to November's board is a possibility.	£12m	2+1+1	03/10/2022	29/09/2022	Procurement products drafting
Data Centre 2	All Wales	Provision of a second Data Centre service to host NHS Wales Services and Infrastructure	£4.8m	5	01/02/2023	24/11/2022	Procurement products drafting
Data Quality System (DQS)	All Wales	Provision of a Data Quality System (DQS) to GP practices for data quality and reporting requirements for national and local initiatives. The software extracts, analyses and presents patient information that is derived from the data held in the practice clinical information system.	£7.2m	3+1+1	15/04/2023	30/03/2023	In plan

COMMERCIAL SERVICES| Strategic Procurement Activity

The following procurement contracts will be presented to the DHCW and or Management 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
Radiology Imaging System	All Wales	Digital solution to store, access, review and report radiology images	£60m	10	15/04/2023	30/03/2023	Progressing to plan
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.	£5.5m	3+1+1	TBC	TBC	Procurement planning stage- defining a route to market

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OPERATIONAL SERVICE MANAGEMENT | Key points to note

- Incident Management performance for June dipped slightly on the previous month; however, SLA targets remain within tolerance.

- There was one Major IT Service Incident, relating to a WLIMS time-sync issue with a server. This Incident did not breach its SLA target resolution time.

- The Service Desk abandoned call rates have increased as a result of staff turnover, a high number of vacancies, and a supplier incident which affected the TalkTalk network.

- Despite this, the Service Desk has maintained a high first-contact and first-fix rate, and has increased Customer Satisfaction scores, which demonstrates the quality of the team.

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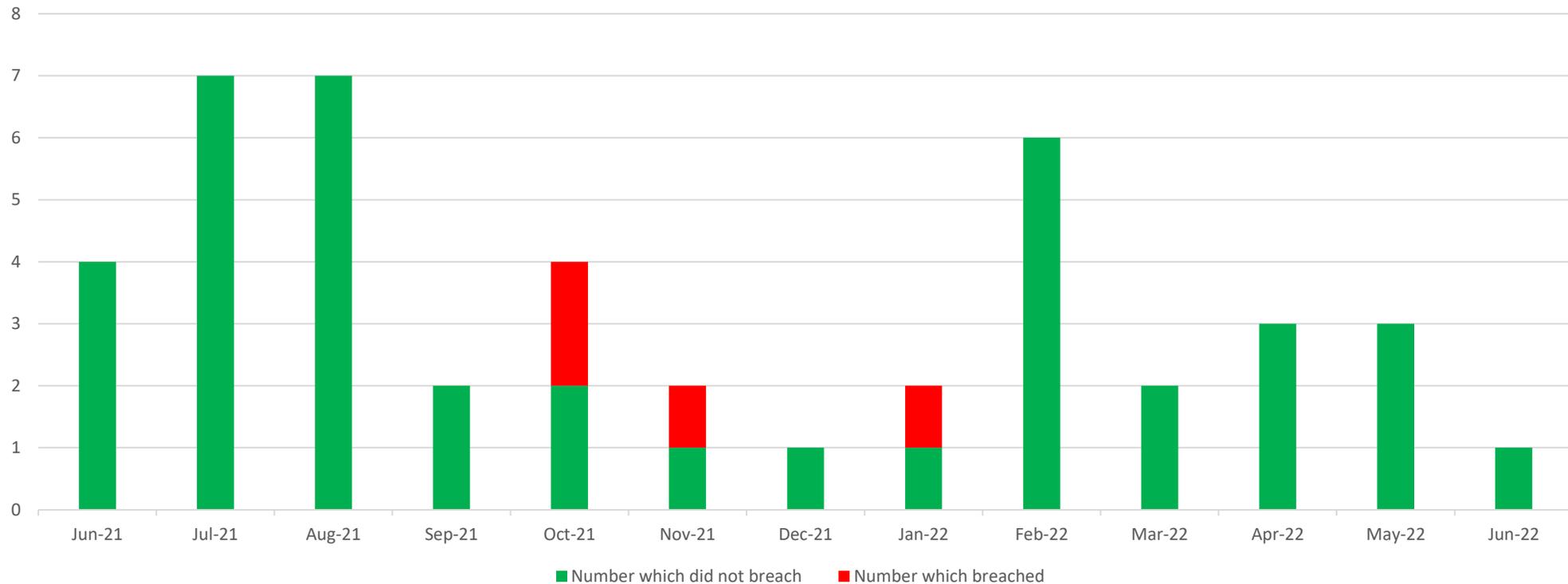# OPERATIONAL PERFORMANCE | Incident & Service Request Management

PERFORMANCE AREA	METRIC	JUN-21	JUL-21	AUG-21	SEPT-21	OCT-21	NOV-21	DEC-21	JAN-22	FEB-22	MAR-22	APR-22	MAY-22	JUN-22
National Services - Critical (Excluding GP Services)	Score denotes % of **Incidents** resolved within the SLA target *(Resolved total can include Incidents logged outside the month)	1891 (89%)	1622 (95%)	2085 (95%)	1901 (90%)	1990 (94%)	1526 (92%)	1446 (95%)	1484 (95%)	1701 (94%)	1286 (95%)	1632 (95%)	1301 (94%)	1063 (93%)
	Score denotes % of **Service Requests** resolved within the SLA target *(Resolved total can include SRs logged outside the month)	7497 (96%)	5630 (92%)	6254 (97%)	6117 (96%)	7107 (98%)	7087 (98%)	6634 (98%)	5989 (97%)	6479 (97%)	5432 (97%)	5322 (97%)	5809 (97%)	5276 (97%)
National Services – Standard	Score denotes % of **Incidents** resolved within the SLA target *(Resolved total can include Incidents logged outside the month)	392 (96%)	423 (99%)	419 (97%)	419 (96%)	392 (99%)	284 (98%)	293 (97%)	369 (97%)	367 (97%)	343 (98%)	441 (99%)	403 (96%)	322 (98%)
	Score denotes % of **Service Requests** resolved within the SLA target *(Resolved total can include SRs logged outside the month)	1799 (96%)	1809 (97%)	1273 (93%)	1288 (96%)	1278 (96%)	1295 (97%)	1059 (96%)	1226 (97%)	1269 (96%)	1331 (92%)	1128 (97%)	1191 (97%)	1026 (98%)
Desktop Support Service - Critical	Total **Incidents** Resolved (% resolved within timescale)	1431 (97%)	1423 (95%)	1274 (91%)	1461 (97%)	1448 (96%)	1350 (97%)	1276 (96%)	1389 (97%)	1374 (96%)	1263 (97%)	1160 (97%)	1251 (97%)	1261 (94%)
	Total **Service Requests** Resolved (% resolved within timescale)	1060 (98%)	1110 (93%)	1111 (92%)	1147 (97%)	1098 (96%)	1071 (96%)	1030 (96%)	1071 (96%)	1050 (95%)	1021 (96%)	1138 (96%)	903 (96%)	975 (96%)

PERFORMANCE AREA	METRIC	JUN-21	JUL-21	AUG-21	SEPT-21	OCT-21	NOV-21	DEC-21	JAN-22	FEB-22	MAR-22	APR-22	MAY-22	JUN-22
National GP Services - Critical - Cegedim	Calls Logged as **Incidents** (% resolved within timescale)	540 (99%)	578 (99%)	455 (98%)	562 (99%)	547 (99%)	587 (100%)	510 (99%)	615 (99%)	565 (99%)	596 (99%)	454 (100%)	446 (99%)	TBC
	Calls Logged as **Service Requests** (% resolved within timescale)	180 (100%)	257 (99%)	178 (100%)	194 (99%)	227 (100%)	242 (99%)	224 (100%)	184 (99%)	177 (99%)	131 (99%)	141 (99%)	128 (100%)	TBC
National GP Services - Critical - EMIS	Calls Logged as **Incidents** (% resolved within timescale)	260 (99%)	311 (98%)	217 (96%)	203 (98%)	175 (94%)	212 (92%)	153 (95%)	259 (97%)	186 (93%)	201 (98%)	165 (98%)	199 (99%)	TBC
	Calls Logged as **Service Requests** (% resolved within timescale)	61 (98%)	43 (98%)	41 (98%)	114 (98%)	41 (98%)	38 (95%)	44 (93%)	47 (89%)	31 (84%)	58 (94%)	37 (97%)	28 (97%)	TBC

SUMMARY: Performance for June has dipped slightly for Incident resolution on the previous month, however Service Level targets remain within tolerance. This was due to resolution of Problem records and some single service level breaches across multiple services.

CLICK HERE TO SEE THE RAG KEY

OPERATIONAL PERFORMANCE | Major IT Incidents

Major IT Incidents

1 Major IT Incident occurred in June 2022, but did not breach the Service Level. This is summarised below.

OPERATIONAL PERFORMANCE | Major IT Incidents (Detail)

SERVICE(S) AFFECTED	**WELSH LABORATORY INFORMATION MANAGEMENT SYSTEM (WLIMS)**	**SERVICE LEVEL: CRITICAL**	**P2**	**1ST P2 LOGGED 7663635**
				PROBLEM REF 27095

DATE/TIME LOGGED	01/06/2022 15:11	DATE/TIME RESOLVED	01/06/2022 17:21	**Time to resolution:** 130 minutes
				Incident **did not breach** the 8 hour SLA target

| DESCRIPTION	Users across NHS Wales reported that they were unable to access WLIMS. Sessions to the application were crashing and users were subsequently unable to login, but were presented with an error message 'Cannot set Client PC Date/Time to that of Cache Server Date/Time - Insufficient Permissions'.
	Investigations by the support team and the supplier identified that there was a time sync delay between the server and the database, of greater than 5 seconds.
	Users were advised that the system retries every minute to sync and will fix itself in gradual steps. The system restored itself within the threshold and users were able to access again. Permanent mitigation has now been put in place to.

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OPERATIONAL PERFORMANCE | Service Desk

|	JUN-21	JUL-21	AUG-21	SEP-21	OCT-21	NOV-21	DEC-21	JAN-22	FEB-22	MAR-22	APRIL-22	MAY-22	JUN-22
Total Number of calls logged	18473	17786	18017	21266	18694	17915	17542	19580	18302	15390	16704	17427	16698
Total Number of TTP Calls Logged	1316	1304	1157	1312	1478	1614	1865	1616	1362	939	1122	828	559
% All Abandoned Calls (Threshold 5%)	4.5%	1.9%	1.4%	1.0%	0.5%	1.2%	1.5%	1.4%	1.9%	7.1%	6.5%	3.9%	10.4%

SUMMARY:

- This month has seen a significant increase in call abandoned rates. There was a major service disruption to the TalkTalk network on 15th June which generated 102 abandoned calls. The other main contributing factor for this increase is high levels of employee turnover between March and June. The service desk currently have 5 vacancies and 5 employees still within the onboarding process. In addition, 35 sickness days were recorded in June 2022. The average speed of answer in June was 23 seconds, higher than May which was 16 seconds.

- Customer satisfactions levels have increased to 96%.

- Employee satisfaction levels continue to remain above target at 95%.

- The First Contact and First Line Fix rates have improved slightly this months; given the current situation with staff turnover, plans are on hold to improve first contact and first line fix rates.

First Contact and First Line Fix Rate

First Contact and First Line Fix Rate

Incidents and Service Requests Received
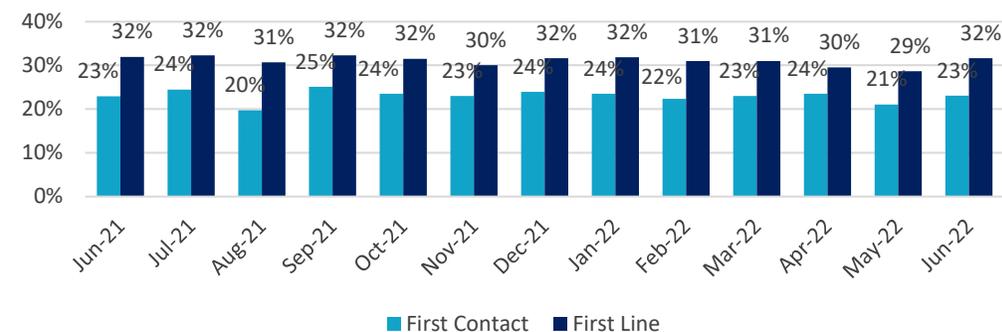
Legend: Number of Incidents Received / Number of Service Requests Recevied / Total number of Incidents and Service Requests Received
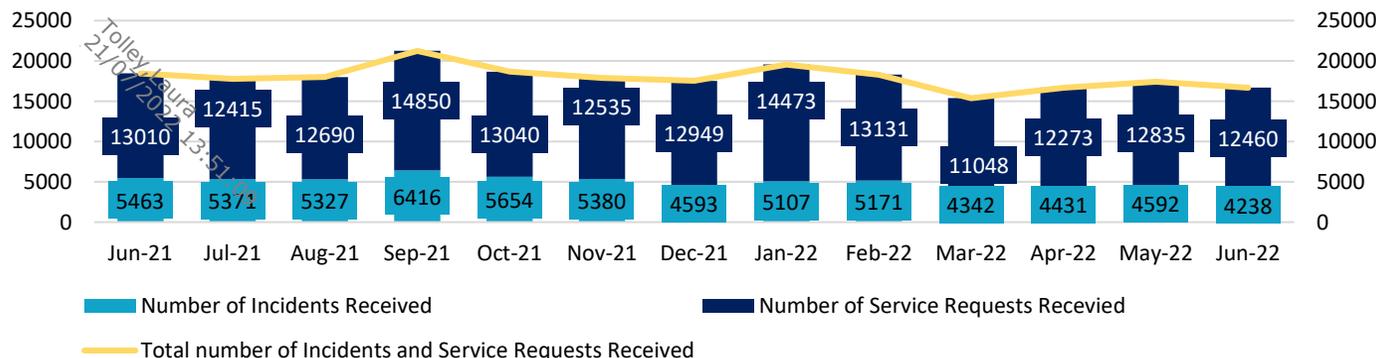
Telephone Abandoned Calls
(Abandoned >5 seconds)

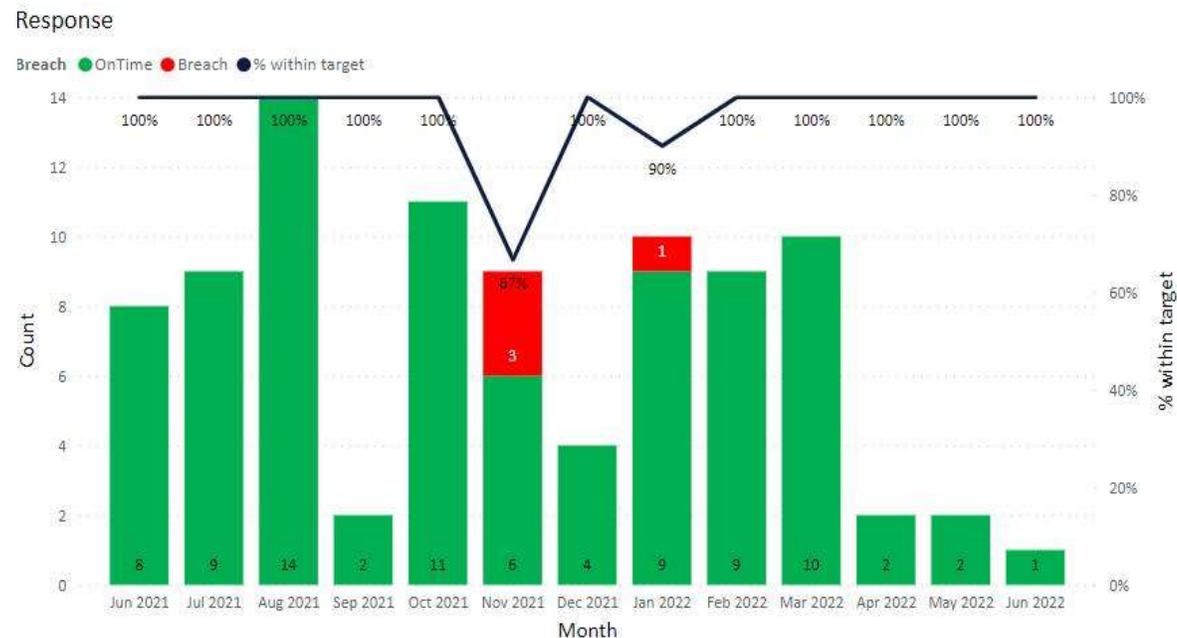Legend: Telephone Call Abandonment / Target
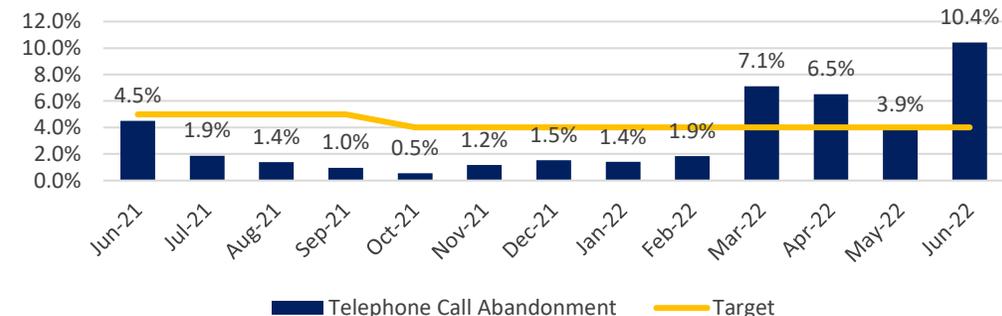
CLINICAL AND INFORMATION GOVERNANCE | SUMMARY

CLINICAL INCIDENTS:

There are two clinical incident investigations ongoing;
one logged in May and one in June.

INFORMATION GOVERNANCE

- 5 Freedom of Information (FOI) Act requests received; all of which have been responded to within their agreed time scales.

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GOVERNANCE AND QUALITY| Audit

NUMBER	RAG	STATUS
32	🟢	Complete
6	🟡	The action is on target for completion by the agreed date
0	🟠	The action is not on target for completion by the agreed date
1	🔴	The implementation date has passed, and management action is not complete
39		Open Actions

Overall RAG Status

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 May 2022, 39 audit actions were open. 29 of these had been completed as of that date, 8 were underway due to be completed on time and 2 were overdue.

During June 2022 a further three actions (including 2 previously reported as being overdue) have been completed increasing the number of completed items to 32. 6 actions remain on track for completion by the agreed target date.

Unfortunately, one action due for action by the end of June has not been completed and work is ongoing to undertake an assessment of a revised timescale with a view to requesting a formal extension at the next Audit and Assurance Committee meeting:

- Replacement of legacy Windows Server and SQL Server 2008 operating systems – June 2022

KEY MATTERS FOR CONSIDERATION OF THIS MEETING

Excellent progress has been maintained over the period (and since audit feedback had been received) with 29 actions being completed however there are three actions which have target dates for completion within the next two months that need to be progressed:

- Embedding the Health and Care Standards in performance reporting – July 2022

The Audit & Assurance Committee next meets on 4th July 2022 and the following Internal Audit reports are expected:

- Workforce
- Directorate Review

Audit Wales have commenced the Nationally Hosted IT Systems work for this year with initial meetings already held and a visit to the new Data Centre undertaken a few months ago.

The following internal audits are underway or scheduled to begin shortly:

- Switching Service
- Recommendation Tracker
- Decarbonisation
- Performance Management
- Strategic Planning
- Stakeholder Engagement

GOVERNANCE AND QUALITY| Quality Management Standards

SUMMARY INDICATORS	JAN-22	FEB-22	MAR-22	APR-22	MAY-22	JUN-22
ISO 9001 Quality Management						
ISO 14001 Environmental Management						
ISO 20000 Service Management						
ISO 27000 Information Security Management						
BS76000/760005 Valuing People						
Service Desk Institute (SDI)						
BS 10008 Evidential weight & Legal admissibility						

Quality Management standards are overseen by the Quality and Regulatory Compliance Group which reports to the Audit & Assurance Committee. The Group meets monthly.

An internal audit plan is in place to monitor progress against each standard.

Corrective actions from all audits are held on the Quality Improvements Action List (QIAL) which is also used to manage improvement actions as a result of reviews outside of the formal audit programme, such as Significant IT Service Incident reviews.

- **Quality & Regulatory Compliance Summary:**
  - The agile, Risk based Internal Audit programme is now operational. Audits have been scheduled as far as October. The second auditor training course has been delivered, 37 auditors have now been trained. A third, mop up training date is being arranged.
  - The IMS Assurance Group will review compliance to the risk based audit programme and any standard specific self inspections conducted to underpin the risk based audits on a monthly basis. The review will include a review of the current plan, current compliance with the plan and where there is non compliance, the recovery plan.
  - Work led by Welsh Government is ongoing to determine the requirements for compliance with the Health and Social Care (Quality and Engagement) (Wales) Act 2020 and the Quality and Safety Framework. The new monthly quality operations report will contribute to this. This report is presented to Quality & Regulatory Compliance Group monthly
  - Indicators
    - **Quality Improvement Actions List (QIAL)** = 8 overdue (previously 9 for May) = 93% compliance (2% improvement on last month, showing good progress to new 95% target)
    - **Integrated Management System (IMS) Document Reviews**: = 91% with 9% overdue (target 5%). A significant number of documents due for review in June were submitted to Quality on June 30th after the report was generated, this will be reflected in an increased compliance figure in July.

- **Summary Indicators Key Points:**
  - **All standards are GREEN:** No external audits were conducted in the period

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ENGAGEMENT | Strategic Engagement

PROGRESS:

- The Stakeholder Engagement Strategy was agreed by the SHA Board in September and the associated plan at the January SHA Board.

- Regular meetings are held with other national groups such as HEIW, NWSSP and the NHS Collaborative to ensure alignment across plans.

- Additional engagement with individual NHS organisations to align digital plans has taken place.

- Director level Strategic Engagement meetings proved more difficult to arrange, deferred due to the COVID situation over the winter.

- The Patient and Public Assurance Group meeting monthly to help shape the DSPP programme.

- The Project and Planning teams are now meeting with Health Boards to work with IMTP milestones in order to agree joint plans

- Interviews have been scheduled for the Head of Engagement as identified in the Stakeholder Engagement Plan.

STRATEGIC ENGAGEMENT MEETINGS:

DATE	ORGANISATION
4th May 2022	Cardiff & Vale University Health Board
13th July 2022	Aneurin Bevan University Health Board
20th July 2022	Hywel Dda University Health Board
27th July 2022	Cwm Taf Morgannwg University Health Board
Being scheduled	Powys Teaching Health Board
21st September 2022	Cwm Taf Morgannwg University Health Board
28th September 2022	Swansea Bay University Health Board
Being scheduled	Public Health Wales
Being scheduled	NHS Wales Shared Services Partnership
Being scheduled	Betsi Cadwaladr University Health Board
Being scheduled	Velindre University NHS Trust
Being scheduled	Welsh Ambulance Service Trust

SERVICE LEVEL AGREEMENT / SERVICE REVIEW MEETINGS:

DATE	ORGANISATION
1st April 2022	Cwm Taf Morgannwg University Health Board
7th April 2022	Cardiff & Vale University Health Board
11th April 2022	Powys Teaching Health Board
14th April 2022	Health Education and Improvement Wales
19th April 2022	Velindre University NHS Trust
21st April 2022	Welsh Ambulance Services Trust
25th April 2022	NHS Wales Health Collaborative
25th April 2022	Health Education and Improvement Wales (HEIW)
26th April 2022	Betsi Cadwaladr University Health Board
28th April 2022	Hywel Dda University Health Board
29th April 2022	Community Health Council
7th July 2022	Velindre University NHS Trust (VUNHST)
08 July 2022	Hywel Dda University Health Board (HDUHB)
11 July 2022	Betsi Cadwaladr University Health Board (BCUHB)
13 July 2022	Swansea Bay University Health Board (SBUHB)
15 July 2022	Welsh Ambulance Services NHS Trust (WAST)
19th July 2022	Community Health Council
20th July 2022	NHS Wales Health Collaborative
21 July 2022	NHS Wales Shared Services Partnership (NWSSP)
25 July 2022	Cardiff & Vale University Health Board (CVUHB)
26 July 2022	Powys Teaching Health Board (PTHB)
01 August 2022	Aneurin Bevan University Health Board (ABUHB)
03 August 2022	Cwm Taf Morgannwg University Health Board (CTMUHB)
08 August 2022	Health Education and Improvement Wales (HEIW)
10 August 2022	Public Health Wales (PHW)
11 August 2022	Velindre University NHS Trust (VUNHST)
23 August 2022	Finance Delivery Unit (FDU)

ENGAGEMENT| Service Recipient Feedback: Service Desk

SUMMARY:

Given the continued high customer satisfaction rates the target increased from 90% to 93% from 1st November 2021.

Customer Satisfaction levels have returned to within target at 96%.

- *Clear communication, friendly attitude, empathetic and people –oriented – Digital Health & Care Wales*

- *Have always had an excellent service with any query – Public Health Wales*

- *I was very impressed by the support provided, even late of a Friday. Thank you – GP Practice*

- *I was on leave and yet colleagues found the relevant member of staff, contacted her and set the account up in my absence which was greatly appreciated – Digital Health & Care Wales*

- *Kylea could not have been more helpful in resolving my query. She was an absolute star and an exemplar of what excellent customer service should be – Hywel Dda University Health Board*

Customer Satisfaction

	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22
Customer Satisfaction	94%	92%	94%	94%	95%	94%	94%	96%	93%	95%	92%	94%	96%

Legend: Customer Satisfaction · Survey Return Rate · Customer Satisfaction Target · Customer Dissatisfaction

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

ENGAGEMENT | Business Change Team - Feedback

"This is so easy to use. Our ward has already started and we are not live until next week." **– Clark (Bonney Ward) – Betsi Cadwaladr (WNCR)**

"This is exciting to finally work online. Thanks for the training it was very informative for me." **– Physio – Betsi Cadwaladr (WNCR)**

"I didn't think I'd get to see this in my career, it's really easy and straight forward to use. I did an audit last night that took me 20 minutes, when normally it would take all morning." **– Betsi Cadwaladr (WNCR)**

"Karl asked my knowledge of the system, this is really helpful as it meant it was tailored to my needs. **– Velindre (Canisc)**

Diolch!

END OF REPORT

DIGITAL HEALTH AND CARE WALES
BOARD ASSURANCE FRAMEWORK REPORT

Agenda Item	6.3

Name of Meeting	SHA Board
Date of Meeting	28 July 2022

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

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

Purpose of the Report	For Approval
Recommendation	
The SHA Board is being asked to: **NOTE and DISCUSS** the content of the report. **APPROVE** the risk appetites agreed for each strategic mission / principal risk. **NOTE** the control and assurance gaps and plan to address these via the BAF Dashboard Report.	

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

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

1   IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply

CORPORATE RISK (ref if appropriate)	All

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

DHCW QUALITY STANDARDS	Choose an item.
If more than one standard applies, please list below: Good governance support all Quality Standards	

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

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission:
Choose an item.	Outcome:
Statement: Not applicable	

Workforce EQIA page

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below
	Effective management of risk has a positive impact on the quality and safety of the organisation
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below
	There can legal ramifications if compliance risks are not managed effectively.
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below
	There can financial ramifications if compliance risks are not managed effectively.
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

Author: Bethan Walters
Approver: Chris Darling

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

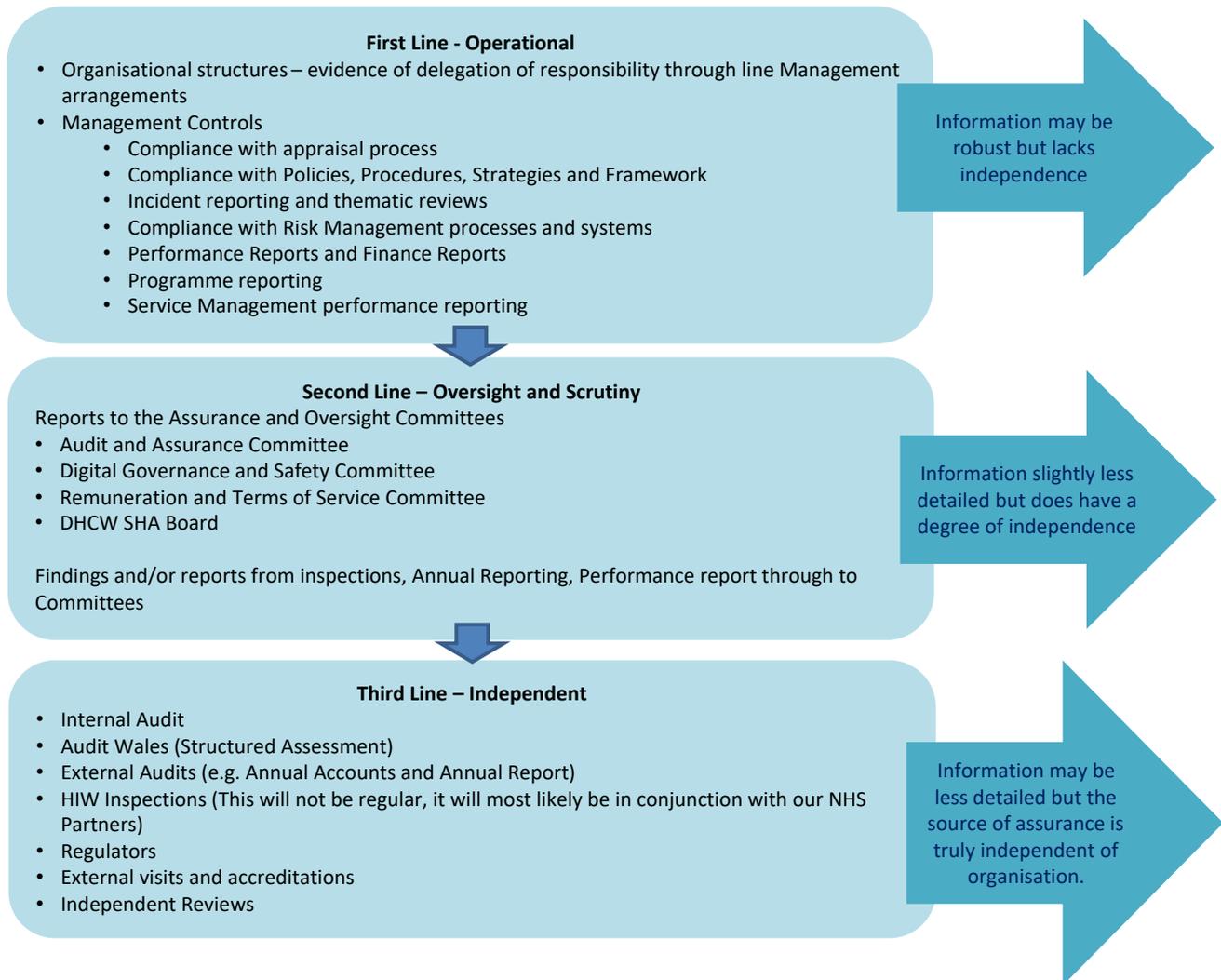| Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
BAF	Board Assurance Framework	H&WB	Health and Wellbeing Group
GAF	Governance Assurance Framework	OD	Organisational Development
ISO	International Organisation for Standardisation	KPI's	Key Performance Indicators

2 SITUATION/BACKGROUND

2.1 The Risk and Board Assurance Framework Strategy was approved by the Board in May 2021. Since then, work has been undertaken to establish the risk appetite for the organisation, the associated tolerances and what that means for Digital Health and Care Wales (DHCW) operationally.

2.2 The Board Assurance Framework Report included at 6.3i Appendix A is designed to provide the Board with timely information on what the principal risks are to the delivery of the SHA's strategic missions and how the organisation is managing and/or mitigating the risks through the identified controls and assurances in place. It also highlights areas for improvement. The BAF report outlines the agreed risk domains and associated appetite and tolerances.

2.3 Included within the BAF report dashboard are:

- the principal risks as defined through the work undertaken in the risk workshops (Summer – Autumn 2021) that included Board member (Executive and Independent Member) input as well as senior leaders from the wider organisation
- The initial and target scores for the principal risks
- A RAG assurance self-assessment rating undertaken by the lead Director which takes into account:
  - o the controls and assurances in place
  - o the corporate risks assigned to the relevant mission and their associated activity to mitigate. NB: some corporate risks map to more than one strategic mission, but are only assigned to the primary strategic mission in the BAF report dashboard
  - o key actions to improve controls and assurance systems owned by senior leaders across the organisation

Author: Bethan Walters
Approver: Chris Darling
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2.4   Key terms used in the report:

- Principal Risks – are the primary risks to achieving our strategic missions
- Key Controls - are the mechanisms in place to protect against the threat of those risks, they help with the management of the risk and are made up of governance structures, policies and plans that further the protections against the principal risk
- Assurances - are the mechanisms to provide evidence that the organisation is operationally effective in relation to the specific risk, either through direct operational reporting or scrutiny and oversight from other sources. Checking the design and implementation of critical controls is an important component of assurance. Below you can see some examples of the 1st, 2nd and 3rd line assurances.

First Line - Operational
- Organisational structures – evidence of delegation of responsibility through line Management arrangements
- Management Controls
    - Compliance with appraisal process
    - Compliance with Policies, Procedures, Strategies and Framework
    - Incident reporting and thematic reviews
    - Compliance with Risk Management processes and systems
    - Performance Reports and Finance Reports
    - Programme reporting
    - Service Management performance reporting

Information may be robust but lacks independence

Second Line – Oversight and Scrutiny
Reports to the Assurance and Oversight Committees
- Audit and Assurance Committee
- Digital Governance and Safety Committee
- Remuneration and Terms of Service Committee
- DHCW SHA Board

Findings and/or reports from inspections, Annual Reporting, Performance report through to Committees

Information slightly less detailed but does have a degree of independence

Third Line – Independent
- Internal Audit
- Audit Wales (Structured Assessment)
- External Audits (e.g. Annual Accounts and Annual Report)
- HIW Inspections (This will not be regular, it will most likely be in conjunction with our NHS Partners)
- Regulators
- External visits and accreditations
- Independent Reviews

Information may be less detailed but the source of assurance is truly independent of organisation.

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Author: Bethan Walters
Approver: Chris Darling

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3   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1   The 26 May 2022 Board meeting received the final draft BAF Dashboard Report and identified the additional work required to finalise the risk appetite for each strategic mission and to validate the overall gap action plan and identify any changes required.

3.2   Included in slide 5 of the Board Assurance Framework Dashboard Report at item 6.3i Appendix A are the proposed risk appetites for each strategic mission for approval by the SHA Board. The risk appetite for each was discussed at the Board Development session held on the 30 June 2022.

Strategic Mission and Principal Risk	Risk Appetite
1. Enabling digital transformation supporting joined up, consistent care	CAUTIOUS
IF we do not co-design safe and secure services with users supported by common standards and collaborative ways of working THEN our development may not meet user needs RESULTING IN not being able to digitally transform services at pace	
2. Delivering high quality technology, data products and services to support efficiencies and improvements in care processes	CAUTIOUS
IF we do not deliver safe, secure, accessible, resilient products and services of high quality THEN the ability of health and care partners to deliver and modernise services is compromised RESULTING IN less effective, less sustainable care that could cause harm and would not meet the expectations of patients or professionals.	
3. Expanding the content, availability and functionality of the digital health and care record so that care and treatment quality is improved	MODERATE
IF we fail to expand the content, availability and functionality of the Digital Health and Care Record at the required pace THEN information could be incomplete, inconsistent, or held in different places RESULTING IN a reduced ability to use information to inform care and empower citizens, leading to better outcomes.	
4. Driving Value and innovation for better outcomes and value based care	OPEN
IF we do not focus on making use of data and innovation to improve outcomes THEN we may not be optimising value for citizens RESULTING IN less sustainable health and care services and reduced or delayed benefit for the public and patients.	
5. Becoming the trusted strategic partner and a high performing, inclusive, ambitious organisation supporting our workforce and stakeholders	MODERATE
IF we do not become a trusted partner and a high performing inclusive organisation THEN people will not want to work with and for us RESULTING IN a failure to achieve our strategic ambition of delivering world leading digital services.	

Author: Bethan Walters
Approver: Chris Darling

3.3   Discussion sessions took place with Executive owners and operational leads and managers to finalise the gap actions plans and the associated timeframes. The following additional items were identified:

Strategic Mission	Key Control/Assurance Gap	Gap	Planned Action
Trusted Partner	Key Control	Long term financial strategy	Create the long-term financial strategy
Trusted Partner	Key Control	Commercial Strategy for using third parties to increase workforce capacity	Agree commercial strategy and approach for using third parties to increase workforce capacity and identify implementation plan for embedding across the organisation
Trusted Partner	Key Control	Organisational Values Review	Undertake and review of the organisation's values
Trusted Partner	Assurance Gap	Lack of assurance mechanism in relation to the effectiveness of the long term financial strategy	Create reporting on the Long-Term Financial strategy and associated plan
Trusted Partner	Assurance Gap	Commercial Strategy for using third parties to increase workforce capacity	Create a resourcing group to assess the effective use of the strategy and impact on workforce
Trusted Partner	Assurance Gap	Organisational Values Review	Undertake review and validation of the organisational values with the staff

3.4   The Board Assurance Framework will be reviewed twice a year for validity and progress by the Board. This will be May and November each year.

3.5   There has been progress on the actions within the Risk and BAF Workplan, the highlights are below:

Action	Status
Approval of Initial Dashboard report (with further work identified to strategic mission risk appetite and rationale)	Complete
Confirmation of risk appetite for each strategic mission / principal risk agreed at Board Development	Complete

4   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

4.`   The assurance summary provides an overview of the current risk score vs target and the rationale approved by the mission Executive owner.

Author: Bethan Walters
Approver: Chris Darling

5   RECOMMENDATION

5.1   The SHA Board is being asked to:

NOTE and DISCUSS the content of the report.
APPROVE the risk appetites agreed for each strategic mission / principal risk.
NOTE the control and assurance gaps and plan to address these via the BAF Dashboard Report (Item 6.3i).

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	26 May 2022	BAF Dashboard Report template approved
Board Development Session	30 June 2022	Risk appetite per strategic mission agreed

The Board Assurance Report Dashboard

Digital Health and Care Wales

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DHCW Risk appetite statement and tolerances

DHCW RISK APPETITE

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

Less Controls, more devolved decision making

HUNGRY	Risk with rating 25 of above are escalated for consideration to report to the Board	None
OPEN	Risk with rating 20 of above are escalated for consideration to report to the Board	Development of Services
MODERATE	Risk with rating 15 of above are escalated for consideration to report to the Board	Corporate Social Responsibility
CAUTIOUS	Risk with rating 12 of above are escalated for consideration to report to the Board	Financial, Reputational Safety and Wellbeing, Service Delivery Reputational, Information - Access and Sharing
ADVERSE	Risk with rating 9 of above are escalated for consideration to report to the Board	Compliance, Information - Storing and Maintaining, Citizen Safety

More Controls, more centralised decision making

Tolley@aura
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Principal risk summary

Type	Detail	Current risk score and rationale	Target risk score and rationale
OBJ	**1. Enabling Digital Transformation supporting joined up, consistent care**		
PR	IF we do not co-design safe and secure services with users supported by common standards and collaborative ways of working THEN our development may not meet user needs RESULTING IN not being able to digitally transform services at pace	**16 - 4 (Likely) x 4 (Major)** This risk score is derived from our analysis of systems as part of developing new strategies over the last twelve months.	**4 – 1 (Rare) x 4 (Major)** Each of our strategies addresses complexity and silos through a commitment to standards based open architecture, which is intended to streamline and simplify our systems and delivery interoperability.
OBJ	**2. Delivering high quality technology, data products and services to support efficiencies and improvements in care processes**		
PR	IF we do not deliver safe, secure, accessible, resilient products and services of high quality THEN the ability of health and care partners to deliver and modernise services is compromised RESULTING IN less effective, less sustainable care that could cause harm and would not meet the expectations of patients or professionals.	**9 - 3 (Possible) x 3 (Moderate)** Established operational support is in place and work has been undertaken in recent years to improve the availability and security of the services, but further action is needed to ensure resilience and security is at the required level.	**4 – 2 (Unlikely) x 2 (Minor)** There are clearly articulated plans for the activity required to increase the resilience and security of the system which should reduce the risk to an acceptable level with careful scrutiny and monitoring.
OBJ	**3. Expanding the content, availability and functionality of the digital health and care record so that care and treatment quality is improved**		
PR	IF we fail to expand the content, availability and functionality of the Digital Health and Care Record at the required pace THEN information could be incomplete, inconsistent, or held in different places RESULTING IN a reduced ability to use information to inform care and empower citizens, leading to better outcomes.	**12 – 3 (Possible) x 4 (Major)** The digital health and care record has developed over recent years, but we know this expansion must continue at pace to ensure that patients and clinicians have the best possible information to support the achievement of high quality care outcomes.	**6 – 2 (Unlikely) x 3 (Moderate)** The new NDR strategy has set out a clear and prioritised road map for the single health record along side development in digital services such as WCP and WNCR. We will continue to explore enhanced functionality supporting use cases in the strategy and using AI.
OBJ	**4. Driving Value and innovation for better outcomes and value based care**		
PR	IF we do not focus on making use of data and innovation to improve outcomes THEN we may not be optimising value for citizens RESULTING IN less sustainable health and care services and reduced or delayed benefit for the public and patients.	**16 – 4 (Likely) x 4 (Major)** Fragmented approaches to driving value from data may result in lost opportunities to innovate, enhance operational delivery and improve health and care outcomes.	**12 – 3 (Possible) x 4 (Major)** A best practice approach and operating model to sharing data for operational delivery, research and innovation.
OBJ	**5. Becoming the trusted strategic partner and a high performing, inclusive, ambitious organisation supporting our workforce and stakeholders**		
PR	IF we do not become a trusted partner and a high performing inclusive organisation THEN people will not want to work with and for us RESULTING IN a failure to achieve our strategic ambition of delivering world leading digital services.	**15 – 3 (Possible) x 5 (Catastrophic)** As a new organisation the initial risk score reflects the work still to do in terms of continuing to be a learning organisation which will support recruitment and retention of staff as well as working collaboratively with partner organisations . This includes the implementation of the DHCW organisational structure and approach across the organisation.	**5 - 1 (Rare) x 5 (Catastrophic)** There are multiple activities that contribute to the delivery of the strategic objective and these include a focus on the digital workforce, recruiting and retaining the best talent, being organised in the most efficient and effective way, as well as working in a high trust environment with partners to enable digital transformation.

Principal risk heat map

Progress Report

The planned activity for the principal risks is for action April 22 – March 23 with aim to move towards or achieve the target risk score by then. The report will be presented to the SHA Board in May and November each year, it will provide a self assessment RAG status from the objective/mission owner to indicate the current areas of concern. Additionally it will give an overview of progress on the action plans to address any gaps and will provide narrative as to the trajectory of the principal risks.

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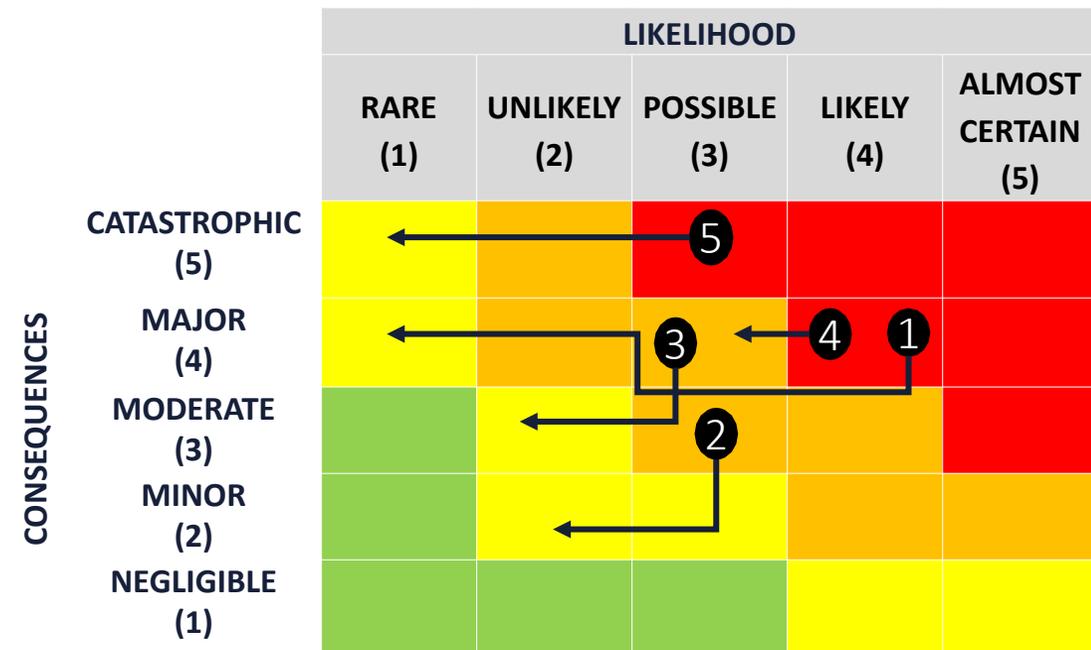
Strategic Principal Risk Impact Statement

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

Questions to ask yourself:

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

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

	LIKELIHOOD				
CONSEQUENCES	RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	ALMOST CERTAIN (5)
CATASTROPHIC (5)			5		
MAJOR (4)			3	4 ❶	
MODERATE (3)			2		
MINOR (2)					
NEGLIGIBLE (1)					

Assurance Summary

	Key – Control and assurance RAG Rating		
	LOW NUMBER OF CONTROLS IN PLACE		Significant concerns over the adequacy/effectiveness of the controls in place in proportion to the risks
	MEDIUM NUMBER OF CONTROLS IN PLACE		Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks
	HIGH NUMBER OF CONTROLS IN PLACE		Controls in place assessed as adequate/effective and in proportion to the risk
	INSUFFICIENT DATA TO PROVIDE A RAG		Insufficient information at present to judge the adequacy/effectiveness of the controls

Type	Detail	Associated risk impact domain		Risk Appetite	Risk Appetite rationale/likely scenario	Assurance Self-Assessment
M	**1. Enabling digital transformation supporting joined up, consistent care**	• Reputational • Development of services • Information – Access and Sharing • Information – Storing and maintaining	• Financial • Service Delivery • Patient/Citizen Safety • Corporate Social Responsibility	**CAUTIOUS**	DHCW will accept a small amount of risk in ensuring compliance with information governance, information security and cyber security. We will manage the associated corporate risks at their appetite levels to protect against the potential consequences.	
PR	IF we do not co-design safe and secure services with users supported by common standards and collaborative ways of working THEN our development may not meet user needs RESULTING IN not being able to digitally transform services at pace					
M	**2. Delivering high quality technology, data products and services to support efficiencies and improvements in care processes**	• Patient/Citizen Safety • Development of services • Service Delivery	• Financial • Information – Access and Sharing • Compliance	**CAUTIOUS**	DHCW will accept a small amount of risk in the provision of secure and resilient high quality digital services. Where we are developing services we will take more risks.	
PR	IF we do not deliver safe, secure, accessible, resilient products and services of high quality THEN the ability of health and care partners to deliver and modernise services is compromised RESULTING IN less effective, less sustainable care that could cause harm and would not meet the expectations of patients or professionals.					
M	**3. Expanding the content, availability and functionality of the digital health and care record so that care and treatment quality is improved**	• Reputational • Patient/Citizen Safety • Development of services • Service Delivery	• Financial • Corporate Social Responsibility • Compliance	**MODERATE**	DHCW will accept a moderate amount of risk to deliver successful expansion of the digital health and care record with input from users. We will carefully manage the associated corporate risks with a focus on prioritising any patient/citizen safety risk concerns.	
PR	IF we fail to expand the content, availability and functionality of the Digital Health and Care Record at the required pace THEN information could be incomplete, inconsistent, or held in different places RESULTING IN a reduced ability to use information to inform care and empower citizens, leading to better outcomes.					
M	**4. Driving value and innovation for better outcomes and value based care**	• Reputational • Information – Access and Sharing	• Development of services	**OPEN**	DHCW will accept risks in the pursuit of driving innovation to achieve better value evidenced by improved outcomes.	
PR	IF we do not focus on making use of data and innovation to improve outcomes THEN we may not be optimising value for citizens RESULTING IN less sustainable health and care services and reduced or delayed benefit for the public and patients.					
M	**5. Becoming the trusted strategic partner and a high performing, inclusive, ambitious organisation supporting our workforce and stakeholders**	• Reputational • Safety and Wellbeing	• Corporate Social Responsibility • Compliance	**MODERATE**	DHCW will accept a moderate amount of risk in the pursuit of becoming recognised as a trusted partner and a high performing inclusive organisation.	
PR	IF we do not become a trusted partner and a high performing inclusive organisation THEN people will not want to work with and for us RESULTING IN a failure to achieve our strategic ambition of delivering world leading digital services.					

MISSION 1: Enabling Digital Transformation supporting joined up, consistent care

EXECUTIVE OWNER: Director of Strategy

RISK APPETITE: CAUTIOUS

REPORTING PERIOD: 1ST April – 30th June 2022

DATE OF REVIEW: 01st July 2022

RAG STATUS: AMBER
Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks

		Amber	Amber
	SELF ASSESSMENT ASSURANCE RATING	**KEY CONTROLS**	**ASSURANCE**

RISKS

PRINCIPAL RISK 1	CURRENT SCORE	TARGET SCORE
IF we do not co-design safe and secure services with users supported by common standards and collaborative ways of working THEN our development may not meet user needs RESULTING IN not being able to digitally transform services at pace	**16/25** 4 (Likely) x 4 (Major)	**4/25** 1 (Rare) x 4 (Major)

Risk Key: ★ New Risk ⟺ Non-Mover ⬇ Reduced ⬆ Increased

ASSOCIATED CORPORATE RISK/S	CURRENT SCORE	TARGET SCORE
0264 – Data Promise	4x3 = 12/25	1x4 = 4/25
0290 – Digital Supplier Contracts Increased	4x4 – 16/25	1x3 = 6/25

CONTROLS AND ASSURANCE

KEY CONTROLS GAPS	ACTION PLAN	ASSURANCE GAPS	ACTION PLAN	PROGRESS ON ACTION PLAN – NARRATIVE PROVIDED BY EXECUTIVE OWNER
• Open Architecture Strategy - need to develop implementation plan • NDR Data Strategy - develop an implementation plan • Cloud strategy - develop an implementation plan • National rulebook for accessing open architecture • Data Promise (1) need to support the development of the strategy; (2) need to support the implementation plan • Information Asset Register (1) Finalise and close project and move to business as usual.	• Approval of the Open Architecture Implementation plan by SHA Board • Identify ownership of the 'Asset Register' • Work with Welsh Government to define requirements and approach for data promise • Create an implementation plan for the NDR data strategy • Create an implementation plan for the cloud strategy • Create a national rulebook for accessing open architecture and seek approval from the SHA Board.	• Lack of organisational reporting on the compliance with the national data standards • Lack of reporting on the delivery of the implementation plans as a result of approval of the NDR data strategy • Lack of reporting on the organisational compliance with the Cloud strategy • Lack of reporting on the effective implementation of the national rulebook for accessing open architecture • Routine reporting to monitor the health of the Information Asset Register.	• Create a method for monitoring compliance with the agreed standards with reporting to operational and assurance arenas • Create DHCW compliance reporting against the NDR data strategy delivery plan • Create DHCW compliance reporting against the Cloud strategy • Create progress reporting on the effectiveness of the national rulebook.	• There is a phased plan to address control gaps and then develop reporting which will address related assurance gaps. • Strategic roadmaps have been developed for elements of the Open Architecture and as part of the NDR Data Strategy. • APIS will provide access to elements of the Open Architecture and the first of these will be available during Q2. • The rulebook will authorise access to APIs and will follow by Q4. • An implementation plan is being developed alongside work on developing our product approach and is due by Q3 2022. • Good progress made on establishing Information Asset Registers during the period. • WG continued to work on the data promise, with support and input from the DHCW IG team.

MISSION 2: Delivering high quality technology, data products and services to support efficiencies and improvements in care processes

RAG STATUS: AMBER
Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks

SELF ASSESSMENT ASSURANCE RATING	KEY CONTROLS	ASSURANCE
	Amber	Amber

EXECUTIVE OWNER: Director of Operations **RISK APPETITE: CAUTIOUS**

REPORTING PERIOD: 1ST April – 30th June 2022 **DATE OF REVIEW: 01st July 2022**

PRINCIPAL RISK 2	CURRENT SCORE	TARGET SCORE
IF we do not deliver safe, secure, accessible, resilient products and services of high quality THEN the ability of health and care partners to deliver and modernise services is compromised RESULTING IN less effective, less sustainable care that could cause harm and would not meet the expectations of patients or professionals.	9/25 3 (Possible) x 3 (Moderate)	4/25 2 (Unlikely) x 2 (Minor)

ASSOCIATED CORPORATE RISK/S

Risk Key: ★ New Risk ⟷ Non-Mover ⬇ Reduced ⬆ Increased

RISK REFERENCE	CURRENT SCORE	TARGET SCORE	RISK REFERENCE	CURRENT SCORE	TARGET SCORE
0228 – Fault Domains	4x3 = 12/25	3x2 = 6/25	**0280 – PRIVATE	5X3 = 15/25	2X5 = 10/25
**0229 - PRIVATE	3x4 = 12/25	3x2 = 6/25	**0281 – PRIVATE	3X5 = 15/25	2X3 = 6/25
**0257 – PRIVATE	5X3 = 15/25	5X2 = 10/25	**0282 - PRIVATE	3X5 = 15/25	2X5 = 10/25
**0277 - PRIVATE	5x3 = 15/25	2x5 = 10/25	**0286 – PRIVATE	3x4 = 12/25	2x4 = 8/25
0289 – Digital Inflation	4x4 = 16/25	3x4 = 12/25	0291 – Network Equipment delays – DC 2	4x4 = 16/25	3x3 = 9/25
**0278 - PRIVATE	5X3 = 15/25	2X5 = 10/25	0292 – Insufficient human resource infrastructure capacity	4x4 = 16/25	4x2 = 8/25
**0279 – PRIVATE	5X3 = 15/25	2X5 = 10/25			

KEY CONTROLS GAPS	ACTION PLAN	ASSURANCE GAPS	ACTION PLAN	PROGRESS ON ACTION PLAN – NARRATIVE PROVIDED BY EXECUTIVE OWNER
• (User experience): (1) need to more consistently embed feedback on user centred design; (2) No systemic and routine implementation of the feedback across all services. • Product Approach: (1) define implementation plan	• Introduce User Experience Involvement Group; group to oversee implementation of the strategy ensuring consideration of feedback at every level	• Lack of assurance for widespread user experience on the range of systems	• Provide effectiveness reporting to the Product Owner, Senior Management Team and assurance reporting on how user feedback is being considered	• Product approach high-level plan developed and presented to Management Board in June 2022 • Product approach discussion held at Board Development on 30 June 2022. • Further directorate planning on 12 July 2022 in conjunction with Strategy to confirm product structure recommendations and technical approach for the remainder of this year and forecasting for 2023.

RISKS

CONTROLS AND ASSURANCE

MISSION 3: Expanding the content, availability and functionality of the digital health and care record so that care and treatment quality is improved

RAG STATUS: AMBER
Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks

		SELF ASSESSMENT ASSURANCE RATING	KEY CONTROLS	ASSURANCE
		Amber	Amber	

EXECUTIVE OWNER: Director of Strategy | **RISK APPETITE: MODERATE**

REPORTING PERIOD: 1ST April – 30st June 2022 | **DATE OF REVIEW: 01st July 2022**

RISKS

PRINCIPAL RISK 3	CURRENT SCORE	TARGET SCORE
IF we fail to expand the content, availability and functionality of the Digital Health and Care Record at the required pace THEN local solutions could be sought RESULTING IN disparate data stored outside the single record and potential impact on system wide digital transformation and patient care.	**12 /25** 3 (Possible) x 4 (Major)	**6 /25** 2 (Unlikely) x 3 (Moderate)

Risk Key: ★ New Risk ⟷ Non-Mover ⬇ Reduced ⬆ Increased

ASSOCIATED CORPORATE RISK/S	CURRENT SCORE	TARGET SCORE
0204 – Canisc System	**5X4 =20/25**	**3X2 = 6/25**

CONTROLS AND ASSURANCE

KEY CONTROLS GAPS	ACTION PLAN	ASSURANCE GAPS	ACTION PLAN	PROGRESS ON ACTION PLAN – NARRATIVE PROVIDED BY EXECUTIVE OWNER
• User experience: (1) need to more consistently embed feedback on user centred design; (2) Create systemic and routine implementation of the feedback across all services. • Clinical Feedback: (1) Need to formalise the mechanism for gaining more sophisticated understanding of clinical user need;(2) Continuous feedback from clinical users on the extent to which how digital is supporting joined up consistent care	• Introduce User Experience Involvement Working Group; group to oversee implementation of new systems on the patient experience ensuring consideration of feedback at every level • Create and seek approval for the clinical user feedback approach	• Reporting of structured feedback on services and systems at a Directorate and organisational level	• Create consistent approach to gathering feedback including establishing user groups to provide feedback • Include learning and action from feedback into the assurance reporting to the relevant Committee	• Directors are reviewing existing arrangements for user input, including service desk feedback, clinical engagement, clinical informatics. • Directors are considering options for an User Design team and/or profession within DHCW. If viable and affordable this would provide more assurance than an User Experience Involvement Working Group. • The strategic approach will be confirmed during Q2.

MISSION 4: Driving Value and innovation for better outcomes and value based care

RAG STATUS: AMBER
Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks

	Amber	Amber
EXECUTIVE OWNER: Medical Director	**RISK APPETITE: OPEN**	
REPORTING PERIOD: 1ST April – 30st June 2022	**DATE OF REVIEW: 01st July 2022**	**SELF ASSESSMENT ASSURANCE RATING**	**KEY CONTROLS**	**ASSURANCE**

RISKS

PRINCIPAL RISK 4		CURRENT SCORE	TARGET SCORE
IF we do not focus on making use of data and innovation to improve outcomes THEN we may not be optimising value for citizens RESULTING IN less sustainable health and care services and reduced or delayed benefit for the public and patients.		**16/25** **4 (Likely) x 4 (Major)**	**12/25** **3 (Possible) x 4 (Major)**

Risk Key: ★ New Risk ⟷ Non-Mover ⬇ Reduced ⬆ Increased

ASSOCIATED CORPORATE RISK/S	CURRENT SCORE	TARGET SCORE
0269 – Switching Service	**4x4 = 16/25**	**3x2=6/25**
0263 – DHCW Functions	**4x3 = 12/25**	**4x1 = 4/25**

CONTROLS AND ASSURANCE

KEY CONTROLS GAPS	ACTION PLAN	ASSURANCE GAPS	ACTION PLAN	PROGRESS ON ACTION PLAN – NARRATIVE PROVIDED BY EXECUTIVE OWNER
• Research and Innovation Strategy (1) need to develop the strategy; (2) need to develop implementation plan • Not having clarity on DHCW Functions to process data to drive value and innovation.	• Research and Innovation Strategy to be completed for sign off by the DHCW SHA Board • Work with Welsh Government to define DHCW's functions based on the data promise.	• Reporting on progress of implementation of the Research and Innovation Strategy • Reporting on compliance with DHCW's functions to process data to drive value and innovation.	• Create routine reporting for the Information Asset Register both operationally and to the relevant Committee • Create reporting mechanisms for the R&I strategy both operationally and to the relevant Committee • Create a reporting mechanism for compliance with DHCW's functions for processing data once these are clearly defined.	• Continued discussions with Welsh Government colleagues to define the parameters of the DHCW functions during the quarter. • Work on developing the R&I Strategy continues. • R&I Strategy updated provided to the DG&S Committee in May 2022 and further update planned for August 2022 • TensTalk provided on the emerging R&I Strategy on 12 July to update the organisation.

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MISSION 5: Becoming the trusted strategic partner and a high performing, inclusive, ambitious organisation supporting our workforce and stakeholders

RAG STATUS: AMBER
Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks

	Amber	Amber
SELF ASSESSMENT ASSURANCE RATING	**KEY CONTROLS**	**ASSURANCE**

EXECUTIVE OWNER: Director of Finance/Deputy CEO | **RISK APPETITE: MODERATE**

REPORTING PERIOD: 1st April – 30th June 2022 | **DATE OF REVIEW: 1st July 2022**

RISKS

PRINCIPAL RISK 5	CURRENT SCORE	TARGET SCORE
IF we do not become a trusted partner and a high performing inclusive organisation THEN people will not want to work with and for us RESULTING IN a failure to achieve our strategic ambition of delivering world leading digital services.	**15/25** 3 (Possible) x 5 (Catastrophic)	**5/25** 1 (Rare) x 5 (Catastrophic)

ASSOCIATED CORPORATE RISK/S

Risk Key: ★ New Risk ⬌ Non-Mover ⬇ Reduced ⬆ Increased

RISK REF	CURRENT SCORE	TARGET SCORE	RISK REF	CURRENT SCORE	TARGET SCORE
0259 – Staff Vacancies	4X4 = 16/25	2X3 = 6/25	0237 - New requirements impact on resource and plan	4x4 = 16/25	3x3 = 9/25
0288 – Data Centre migration revenue funding	4x4 = 16/25	2x4 = 8/25	0208 – Welsh Language Compliance	3x4 = 12/25	1x4 =4/25
0285 – Unfunded NI increase	4x3 = 12/25	2x3 = 6/25	0284 – Increased Utility Costs Financial Pressures	4x3 = 12/25	3x2 = 6/25

CONTROLS AND ASSURANCE

KEY CONTROLS GAPS	ACTION PLAN	ASSURANCE GAPS	ACTION PLAN	PROGRESS ON ACTION PLAN
• DHCW ISO Internal audit plan • Corporate succession plan to outline (initially) succession into the top three tiers • Welsh Language Scheme - (1) finalise Scheme and seek Board sign off (2) Set up assurance activity to review compliance • Communications strategy (1) finalise strategy and seek sign off (2) Create new KPI's to measure the impact • People and OD Strategy (1) need to develop the strategy; (2) need to develop implementation plan • Lack of assurance mechanism in relation to the effectiveness of the Long term financial strategy • Commercial Strategy for using third parties to increase workforce capacity • Organisational Values Review	• Finalise ISO Internal audit plan for 22/23 • Complete Corporate Succession Plan • Consult on and Sign off Welsh Language Scheme • Communications Task and finish group to review finalise strategy • People and OD Strategy and implementation plan to be completed for sign off by the SHA Board • Create Long-Term Financial strategy and associated plan • Agree commercial strategy for using third parties to increase workforce capacity and implementation plan • Undertake and review of the organisations values	• Lack of assurance mechanism in relation to effectiveness of DHCW ISO Internal Audit plan • Reporting on the progress of the succession plan • Progress reporting on effectiveness of implementation of Communications strategy • Lack of assurance mechanism in relation to the effectiveness of the Long term financial strategy • Commercial Strategy for using third parties to increase workforce capacity • Organisational Values Review • Progress reporting on effectiveness of implementation of People and OD strategy • Lack of assurance mechanism in relation to the effectiveness of the Health and Wellbeing group • Lack of assurance mechanism in relation to effectiveness of Governance Assurance Framework • Progress of implementation of stakeholder engagement plan	• Create reporting parameters for DHCW ISO Internal Audit Plan • Create regular review mechanisms for the Corporate Succession plan • Create reporting on the Communications strategy both operational and assurance • Create reporting on the Long-Term Financial strategy and associated plan • Create a resourcing group to assess the effective use of the commercial strategy and establish next steps • Undertake review and validation of the organisational values with the staff • Create reporting on the People and OD strategy both operational and assurance • Create reporting mechanism on activities of the H&WB group and feedback on activities • Create reporting for GAF • Create 6-monthly report on stakeholder engagement as part of the SHA IOPR	• People and OD Strategy drafted and discussed at Directors Strategic session in June 2022. • Commercial Workforce Resourcing T&F Group being established. • DHCW Welsh Language Scheme out to public consultation (1 July – 30 September 2022) • Long Term Financial Funding approach being developed and due to come back to Exec Team for discussion. • Communications T&F Report being finalised for discussion. • Digital Maturity matrix being explored as an all Wales NHS Digital metric.

DIGITAL HEALTH AND CARE WALES
RISK MANAGEMENT REPORT

Agenda Item	6.4

Name of Meeting	SHA Board
Date of Meeting	28 July 2022

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

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

Purpose of the Report	For Discussion/Review
Recommendation	
The Board is being asked to: DISCUSS and NOTE the status of the Corporate Risk Register including changes since the last meeting and; NOTE the Risk and Board Assurance Forward Workplan for 2022/23.	

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

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

1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	Delivering High Quality Digital Services

CORPORATE RISK (ref if appropriate)	All are relevant to the report

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

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

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

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

IMPACT ASSESSMENT		
QUALITY AND SAFETY 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.	
	The members of the Management Board will be clear on the expectations of managing risks assigned to them.	

Author: Bethan Walters
Approver: Chris Darling

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SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report
	Yes, please see detail below
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

2   SITUATION/BACKGROUND

2.1   The DHCW Risk Management and Board Assurance Framework (BAF) Strategy was endorsed by the Audit and Assurance Committee, Digital Governance and Safety Committee and approved formally at the SHA Board on the 27 May 2021. This outlined the approach the organisation will take to managing risk and Board assurance.

2.2   Further work on the Board Assurance Report took place at the SHA Board Development Session on 5 May 2022 resulting in the agreement of the final principal risks for the coming year and their rationales. This concludes the work that began in August 2021 to implement the Risk and BAF Milestone plan to implement the Risk Management and Board Assurance Framework (BAF) Strategy. Recognising the management of risk is not a static activity the Risk and BAF forward workplan for 2022/23 has been developed and can be seen as appendix 6.3ii Appendix B.

3   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1   Board members are asked to consider risk, in the context of assurance 'what could impact on the Organisation being successful in the short term (1 – 12 months) and in the longer term (12 – 36 months)'.

3.2   The wider considerations regarding organisational risk factors have been previously stated but remain relevant. They include, sector, stakeholder, and system factors, as well as National and International environmental factors.

3.3   In considering environmental and international factors members should note the World Economic Forum Long Term Global Risks Landscape (2022) report, more information can be

Author: Bethan Walters
Approver: Chris Darling

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found [HERE](). This report considers risk from an international perspective, the report highlights a number of highly relevant areas for consideration by DHCW.

3.4　　The below are extracts/summaries from the World Economic Forum Term Global Risks Landscape (2022) for context and consideration by the Board:

Growing digital dependency will intensify cyberthreats

Growing dependency on digital systems—intensified by COVID-19—has altered societies. Over the last 18 months, industries have undergone rapid digitalization, workers have shifted to remote working where possible, and platforms and devices facilitating this change have proliferated. At the same time, cybersecurity threats are growing—in 2020, malware and ransomware attacks increased by 358% and 435% respectively—and are outpacing societies' ability to effectively prevent or respond to them. Lower barriers to entry for cyberthreat actors, more aggressive attack methods, a dearth of professionals and patchwork governance mechanisms are all aggravating the risk.

Cybersecurity failure is one of the risks that worsened the most through COVID-19.

3.5　　DHCW's Corporate Risk Register currently has 25 risks on the Register, 15 of which are detailed at item 6.3ii Appendix B. The other 10 are private risks which are considered at every Digital Governance and Safety Committee in private session as per the Committee assignment approach.

3.6　　Board members are asked to note the following changes to the Corporate Risk Register (new risks, risks removed and changes in risk scores) for the period 1 May 2022 to 30 June 2022:

NEW RISKS (4)

Risk Ref	Risk Title	Risk Description
DHCW0290	Private Risk	N/A
DHCW0291	Network Equipment delays in relation Data Centre 2 move	IF the networking kit required for the data center move doesn't arrive by Quarter 1 23/24 THEN the replacement network required will not be implemented prior to the end of the current contract with our current supplier RESULTING IN extension of the existing contract, and an elongated project plan
DHCW0292	Insufficient human resource capacity in the infrastructure teams to undertake BAU activity and activities in the 1-year plan	IF DHCW are unable to secure revenue funding to support major infrastructure developments identified in the IMTP and 1-year business plans, THEN there will be a delay to these activities RESULTING IN increased costs and/or system failures.
DHCW0293	DPIF Funding Letters	IF Digital Priority Investment Funding Letters are not provided to DHCW in a timely manner THEN organisations may not commit to activity without formal agreement of funding to support expenditure RESULTING IN delays to scheme

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| | | deliverables and possible risk to scheme objectives, benefits and completion. | |

RISKS REMOVED (1)

Risk Ref	Risk Title	Risk Description	Statement
DHCW0287	Digital Priorities Investment Funding (DPIF)	IF DPIF budgets are requested to be significantly re-profiled (greater than £2.5 million) THEN the completion of planned developments will not be possible with associated supplier payment issues RESULTING IN reputational damage, non-delivery of investments, cost pressures and potential legal challenge.	Downgraded for management at Directorate level as the DPIF funding prioritisation and re-profiling was discussed and agreed by the All-Wales Directors of Digital Peer Group.

RISKS WITH A CHANGE IN SCORE (0)

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

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CONSEQUENCES		RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	ALMOST CERTAIN (5)
CATASTROPHIC (5)				**DHCW0257 ⬌ **DHCW0277 ⬌ **DHCW0278 ⬌ **DHCW0279 ⬌ **DHCW0280 ⬌ **DHCW0281 ⬌ **DHCW0282- ⬌	DHCW0204: Canise System ⬌	
MAJOR (4)				DHCW0208: Welsh Language Compliance ⬌ DHCW0228: Fault Domains ⬌ **DHCW0229 ⬌ DHCW0263: DHCW Functions ⬌ DHCW0264: Data Promise ⬌ **DHCW0286 ⬌	DHCW0237: Covid-19 Resource Impact ⬌ DHCW0259: Staff Vacancies ⬌ DHCW0269: Switching Service ⬌ DHCW0288 – Data Centre Migration Revenue Funding ⬌ DHCW0289 – Digital Inflation ⬌ **DHCW0290 ★ DHCW0291 – Network Equipment Delay ★ DHCW0292 – Insufficient human resource capacity ★ DHCW0293 – DPIF Funding letters ★	
MODERATE (3)					DHCW0284 – Increased Utility Costs Financial Pressure ⬌ DHCW0285 – Unfunded NI Increase ⬌	
MINOR (2)						
NEGLIGIBLE						

★ New Risk   ⬌ Non-Mover   ⬇ Reduced   ⬆ Increased   **Private risks

3.8 All the risks on the Corporate Risk log are assigned to a Committee as outlined in the Risk Management and Board Assurance Framework Strategy to provide the SHA Board with the necessary oversight and scrutiny. As previously stated, the private (cyber and security related) risks are reviewed in detail by the Digital Governance and Safety Committee in a private session.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

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

5 RECOMMENDATION

5.1 The Board is being asked to:
DISCUSS and NOTE the status of the Corporate Risk Register (item 6.4ii) including changes since the last meeting and NOTE the Risk and Board Assurance Forward Workplan (item 6.4i) for 2022/23.

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Approver: Chris Darling

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	05/07/2022	Discussed and Verified
Management Board	16/07/2022	Discussed and Verified

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Author: Bethan Walters
Approver: Chris Darling

6.4i Appendix A
Risk & Board Assurance Framework Forward Workplan 2022/23

Activity	Purpose and Outcome	Due Date	Status Update
Risk Management Group & Management Board	Review of all risks on a monthly basis by the Risk Management Group and also the DHCW Management Board. Each SHA Board meeting to also receive the corporate risk register report.	Monthly	Risks reviewed at the Risk Management Group and Management Board in April – June 2022.
SHA Board	Initial presentation of the Board Assurance Framework Dashboard 6 monthly report for approval	May 22	Initial Dashboard report was approved with further work identified to strategic mission risk appetite and rationale.
SHA Board Development	Discuss risk appetite for each strategic mission / principle risk	June 22	Confirmation of risk appetite for each strategic mission / principle risk agreed at Board Development.
SHA Board	Final presentation of the Board Assurance Framework Dashboard Report	July 22	Further validation and discussion has resulted in finalise risk appetites for each strategic mission to be presented to July's SHA Board for approval.
DG&S Committee	Scrutiny of DG&S Committee assigned corporate risks including cyber risks in private session	August 22	
A&A Committee	Scrutiny of A&A Committee assigned corporate risks including any deep dives into risks.	October 22	
SHA Board	Board Assurance Framework Dashboard 6 monthly report	November 22	
DG&S Committee	Scrutiny of DG&S Committee assigned corporate risks including cyber risks in private session	November 22	
Management Board	Review and Discuss Strategic Missions and risks to IMTP and make recommendations to SHA Board in readiness for IMTP	December 22	
SHA Board Development Session	Review and Discuss Strategic Missions and risks to IMTP	December 22	
SHA Board	Confirm Strategic Missions and draft IMTP	January 23	

6.4i Appendix A

Risk & Board Assurance Framework Forward Workplan 2022/23

SHA Board Development Session	Review risk appetite statement, identified risk domains and their risk appetite and tolerances	February 23	
A&A Committee	Scrutiny of A&A Committee assigned corporate risks including any deep dives into risks.	February 23	
DG&S Committee	Scrutiny of DG&S Committee assigned corporate risks including cyber risks in private session	February 23	
SHA Board	Confirm Final IMTP	March 23	
SHA Board	Board Assurance Framework Dashboard 6 monthly report including any changes as a result of updates to the strategic missions and confirmation of Executive Owners	May 23	
SHA Board	Board Assurance Framework Dashboard 6 monthly report	November 23	

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6.4ii 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

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Impact (current)	Likelihood (current)	Rating (Target)	Impact (Target)	Likelihood (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0204	Security	Canisc System IF there is a problem with the unsupported software used within the Canisc system THEN the application will fail RESULTING IN disruption to operational service requiring workarounds.	08/02/2018	05/07/2022	15	AIM: REDUCE Impact and REDUCE Likelihood FORWARD ACTION: Replace Canisc across Wales Continue development of replacement functionality and interfaces (Phase 1) Health Boards to continue UAT of functionality VCC Go Live 14th November 2022 (WPAS & WCP) Health Board plans to launch dataset forms for two cancer tumours across Wales in Sept 2022 and potentially MDT forms. Plans will be confirmed by the end of May 22. Commence development of Phase 2 work streams (Palliative Care & Screening & Colposcopy) ACTIONS TO DATE: 29/06/22 Continued iterative roll out of software made available for UAT in WCP and WPAS.	20	5	4	6	3	2	Executive Medical Director	Non Mover	Digital Governance & Safety Committee	Compliance	Mission 3 – Expanding the Content

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6.4ii Appendix B – Corporate Risk Register

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Impact (current)	Likelihood (current)	Rating (Target)	Impact (Target)	Likelihood (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0269	Business & Organisational	Switching Service IF the current switching service fails THEN no data new will be acquired into the ISD Data Warehouse RESULTING IN the inability to provide updates to multiple reporting systems.	07/12/2020	05/07/2022	9	AIM:REDUCE Likelihood and REDUCE Impact FORWARD ACTION: Now that the Director of Operations is in post, ISD are looking to share ownership of the risk with Operational Services and there will be an internal audit review of the Switching Service which should provide specific feedback during June 2022 in order to advance this work. ACTION TO DATE: 28/06/2022 – Discussions had with Interim Director of Operations and working with Internal Audit to review the process and risk. 21/02/2022 - NDR confirmed that a plan to replace switching service functionality will be considered as part of the data strategy work. In the meantime a paper is being drafted within ISD to propose some immediate solutions for geographical resilience in order to consider reducing the risk score. 13/10/2021 - ISBMG: Whilst the data centre moves have taken place the fragility of the switching service remains due to the rigid nature of it and the inability to add to or amend it easily. Keep the score as is at this time. 02/08/2021 - TAH: ISD working with NDR to ensure appropriate	16	4	4	6	3	2	Executive Medical Director	Non Mover	Digital Governance & Safety Committee	Information Storing and Maintaining	Mission 4 - Value and Innovation

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Impact (current)	Likelihood (current)	Rating (Target)	Impact (Target)	Likelihood (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						priority given to this work.											
DHCW0259	Business & Organisational	Staff Vacancies

IF DHCW are unable to recruit to vacancies due to skills shortages and unavailability of suitable staff THEN this will impact on service deliverables and timescales RESULTING in delays to system support and new functionality for NHS Wales users. | 11/12/2020 | 05/07/2022 | 12 | AIM: REDUCE Impact and REDUCE Likelihood

FORWARD ACTIONS: DHCW will be finalising the Resourcing Strategy for 2022-23. The strategy will look at a number of initiatives to ensure that DHCW achieves its recruitment target. This will include an improvement in workforce planning data as well as exploring further collaboration opportunities. DHCW are already experienced success with LinkedIn and CV library and we will continue to utilise these sources. DHCW has held a number of career fairs and will continue to use this method of attracting wide range of future talent. To support retention, DHCW are planning to work in partnership with WIDI to develop programmes to upskill and reskill our existing workforce. Additionally DHCW will be developing new contractual vehicle/s commencing from June 2022 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 | 16 | 4 | 4 | 6 | 2 | 3 | Director of People | Non Mover | Audit and Assurance Committee and Local Partnership Forum | Service Delivery | Mission 5 - Trusted Partner |

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Impact (current)	Likelihood (current)	Rating (Target)	Impact (Target)	Likelihood (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						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 projects ACTIONS TO DATE: 28/06/22 - CV Database created to build a talent pool of candidates we have met at jobs fairs, events and through Trac reserve lists. - We have reviewed our contracts with recruitment agencies and are working with them to ensure they deliver us high quality candidates. - Recruitment team have a dedicated Linked In and CV Library license so that we can contact candidates directly and invite them for interview. - Workforce Planning underway with Finance and Directorates to develop a quarterly recruitment plan for future-proofing our service support.														
DHCW0288	Finance	Data Centre Migration Revenue Funding IF Data Centre migration activity takes place in 2022/23 THEN additional cost pressures will emerge RESULTING IN a requirement to source additional funding.	16/05/2022	05/07/2022	16	AIM: Reduce Likelihood FORWARD ACTIONS: Business Case identifying all resource requirements and timing to be constructed. Explore possible funding options. ACTIONS UNDERTAKEN: Project Group established. Full plan being developed.	16	4	4	8	4	2	Executive Director of Finance	Non Mover	Audit & Assurance Committee	Financial	Mission 5 - Trusted Partner

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Impact (current)	Likelihood (current)	Rating (Target)	Impact (Target)	Likelihood (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0289	Finance	Digital Inflation IF supply chain issues such as the chip shortage and underlying digital price pressures and contract renewals have a negative impact upon prices THEN there will be additional price increases RESULTING IN higher cost equipment and maintenance contracts.	16/05/2022	05/07/2022	16	AIM: Reduce Likelihood FORWARD ACTIONS: To research and construct cost avoidance actions. For specific contract issues DHCW will continue to look by negotiation, competitive procurement and changing in requirements where appropriate. ACTIONS UNDERTAKEN: Engaged with sector specialists to ascertain potential impact and future trends. Negotiations held with suppliers.	16	4	4	12	4	3	Executive Director of Finance	Non Mover	Audit & Assurance Committee	Financial	Mission 2 - Delivering Technology
DHCW0291	Finance	Network Equipment delays in relation Data Centre 2 move IF the networking kit required for the data centre move doesn't arrive by Quarter 1 23/24 THEN the replacement network required will not be implemented prior to the end of the current contract with our current supplier RESULTING IN extension of the existing contract, and a elongated project plan.	30/06/2022	05/07/2022	16	AIM Reduce Likelihood FORWARD ACTIONS Work with supplier to determine delivery dates and if alternative equipment can utilised. ACTIONS TO DATE This action has been raised at the end of June 2022. Orders placed with supplier and discussions ongoing to determine equipment delivery dates.	16	4	4	9	3	3	Interim Executive Director of Operations	New Risk	Digital Governance & Safety Committee	Service Delivery	Mission 2 - Delivering Technology
DHCW0237	Project	New requirements impact on resource and plan IF new requirements for digital solutions to deal with Covid 19,	30/03/2020	05/07/2022	16	AIM: REDUCE Impact and REDUCE Likelihood FORWARD ACTIONS: Continue to monitor new requirements for Covid recovery and other new initiatives. Use formal	16	4	4	9	3	3	Executive Director of Strategy	Non Mover	Digital Governance and Safety Committee	Service Delivery	Mission 5 - Trusted Partner

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Impact (current)	Likelihood (current)	Rating (Target)	Impact (Target)	Likelihood (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
		recovery of services and other new areas of work 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.				change control methods to ensure impact is mapped and impacted work is re-baselined. ACTIONS TO DATE: IMTP approved by SHA Board end March 2022. Annual Business Plan approved April 2022 - this plan is flexible and new requirements will be assessed against available capacity and go through a formal change control process before being added to the plan. Still significant Covid backlog and new requirements coming through some of which are on a candidate list until resource is confirmed. Funding letters not received yet (Digital Priorities Investment Fund). Anticipated new requirements from Emergency and Unscheduled Care (Six Goals Framework) and new National Vaccination programme.											
DHCW0292	Service Interruption	Insufficient human resource capacity in the infrastructure teams to undertake BAU activity and activities in the 1-year plan IF DHCW are unable to secure revenue funding to support major infrastructure developments identified in the IMTP and 1-year business plans,	01/04/2022	05/07/2022	16	AIM: REDUCE Likelihood FORWARD ACTIONS: Develop workforce plan for the resources required for major Infrastructure maintenance work such as those identified. ACTIONS TO DATE: 12/05/2022. CLJ. Initial meeting to develop the workforce plan has taken place.	16	4	4	8	4	2	Interim Executive Director of Operations	New Risk	Digital Governance & Safety Committee	Financial	Mission 2 - Delivering Technology

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Impact (current)	Likelihood (current)	Rating (Target)	Impact (Target)	Likelihood (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
		THEN there will be a delay to these activities RESULTING IN increased costs and/or system failures. Examples include: * Data Centre 2 Project * Migration of systems from legacy virtual server platform * WPAS Hardware Replacement * Legacy Operating System Replacements															
DHCW0293	Financial	DPIF Funding Letters IF Digital Priority Investment Funding Letters are not provided to DHCW in a timely manner THEN organisations may not commit to activity without formal agreement of funding to support expenditure RESULTING IN delays to scheme deliverables and possible risk to scheme objectives, benefits and completion.	18/07/2022	18/07/2022	16	AIM: Reduce Impact FORWARD ACTIONS: Formal request to Welsh Government for clarification of approval timelines by end of July 2022. ACTIONS TO DATE: Escalation to Welsh Government DPIF Leads.	16	4	4	8	4	2	Executive Director of Finance	New Risk	Digital Governance & Safety	Finance	Mission 5 - Trusted Partner

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Impact (current)	Likelihood (current)	Rating (Target)	Impact (Target)	Likelihood (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0208	Business & Organisational	Welsh Language Compliance

IF DHCW are unable to comply with Welsh Language Standards outlined in the Welsh Language Scheme under development THEN they would not be compliant with national legislation applicable to other public bodies RESULTING in the potential for reputational damage | 21/05/2018 | 05/07/2022 | 16 | AIM: REDUCE Likelihood

FORWARD ACTIONS: Focus on supporting the Digital Services for patients and the public programme in bilingualism. Launch public consultation on 1st July 22. Prepare an outcome report for approval by the Welsh Language Commissioners Office to be able to launch in December 22. Work to finalise the More than just words action plan in collaboration with the Welsh Government.

ACTIONS TO DATE: Welsh Language Scheme public consultation formally launched on 1 July 2022. Welsh language group remit and TOR were reviewed and are undergoing validation. All Wales Welsh Language Preference System first release is undergoing a second pilot with a wider test base during June 22. Updated assurance compliance report sent to the Audit and Assurance Committee. Investment proposals to support the language preference data sharing across systems submitted to WG was rejected, alternative discussions are taking place. Initial work on setting the vision for DHCW's bilingual objective. | 12 | 4 | 4 | 4 | 4 | 1 | Board Secretary | Non Mover | Audit & Assurance Committee | Service Delivery | Mission 5 - Trusted Partner |

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Impact (current)	Likelihood (current)	Rating (Target)	Impact (Target)	Likelihood (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0284	Finance	Increased Utility Costs Financial Pressure IF utility costs increase significantly (circa £620k per annum) as expected THEN costs will exceed those normally budgeted for RESULTING IN increased facilities costs and financial pressures	21/10/2021	05/07/2022	12	AIM: REDUCE Impact FORWARD ACTION: Build potential cost pressures into IMTP assumptions. Continue to report to Welsh Government to ensure DHCW pressure is incorporated within the central risk management and any future consequential funding is secured. ACTIONS TO DATE: 13/06/2022 BW - Risk increased to £620k to represent both potential increases to Office and Data centre costs Engagement with NWSSP Procurement to confirm All Wales NHS Utilities contract terms Communication with Landlords to understand timing and impact of any change Discussed with Associate Finance Directors and Finance Business Partner	12	3	4	6	2	3	Director of Finance	Non Mover	Audit & Assurance Committee	Service Delivery	Mission 5 - Trusted Partner
DHCW0285	Finance	Unfunded NI increase IF the additional 1.25% employer NI contributions are unfunded centrally THEN DHCW will have a cost pressure of £319k in 22/23 RESULTING IN DHCW's ability to breakeven.	11/05/2022	05/07/2022	12	AIM: Reduce Likelihood FORWARD ACTIONS: Monitor financial impact and report to Welsh Government on a monthly basis to ensure that DHCW pressures are represented in the central Risk Register. In that way, any consequential funding will have been identified and made available to the organisation. ACTIONS TO DATE: Forecast submitted to Welsh Government.	12	3	4	6	3	2	Executive Director of Finance	Non Mover	Audit & Assurance Committee	Service Delivery	Mission 5 - Trusted Partner

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6.4ii Appendix B – Corporate Risk Register

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Impact (current)	Likelihood (current)	Rating (Target)	Impact (Target)	Likelihood (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0263	Information Governance	DHCW Functions IF directions from Welsh Government do not provide a sound legal basis for the collection, processing and dissemination of Welsh resident data, THEN (i) partners, such as NHS Digital, may stop sharing data, (ii) DHCW may be acting unlawfully if it continues to process data RESULTING IN (i) DHCW being unable to fulfil its intended functions regarding the processing of data, or, in the case of continued processing, (ii) legal challenge, or (iii) the need to submit a further application to the Confidentiality Advisory Group (which may not be successful) to assess the public interest in processing confidential data without a legal basis or consent.	26/01/2021	05/07/2022	12	AIM: REDUCE Likelihood FORWARD ACTIONS: Continue discussions with Welsh Government colleagues to define the parameters of the functions. Review in July 2022 ACTIONS TO DATE: Actions set against Welsh Government to define a set of Directions that will enable DHCW to move forwards on BAU and to provide cover for important functions such as NDR: (i) DHCW's establishment functions and initial set of directions in the form of a letter has been published on the Welsh Government's website, to ensure that DHCW's remit is clear and transparent. (ii) Welsh Government have informed the Confidentiality Advisory Group (CAG) of DHCW's new statutory status and legal basis for processing data. CAG have confirmed that they are content that we would no longer be requesting section 251 support for the handling of data not related to research. (iii) Welsh Government are planning to issue a new direction for DHCW regarding the collection of prescription data, which will test the process for issuing new directions. (iv) a letter was sent from Ifan Evans to confirm DHCW's	12	4	3	4	4	1	Executive Medical Director	Non Mover	Digital Governance & Safety Committee	Service Delivery	Mission 4 Driving Value and Innovation

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Impact (current)	Likelihood (current)	Rating (Target)	Impact (Target)	Likelihood (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						functions in response to a request for clarity from the Chair of the Digital Governance and Safety Committee and a deep dive provided at November 2021's meeting.											
DHCW0264	Information Governance	Data Promise IF the national conversation regarding the use of patient data (Data Promise) is delayed, THEN stakeholders and patients will not be assured that the proposed uses of Welsh resident data include sufficient controls to ensure data is treated responsibly, handled securely and used ethically. RESULTING IN (i) potential challenges to proposed uses of data, and/or a loss of public/professional confidence, and (ii) a failure to realise the desired outcomes regarding 'data and collaboration' (effective and innovative uses of data, joined up services, better outcomes for individuals) set out in Welsh Government's Digital Strategy.	26/01/2021	05/07/2022	12	AIM: REDUCE Likelihood FORWARD ACTIONS: Continue discussions with Welsh Government colleagues to define the Data Promise. To be reviewed in July 2022 ACTIONS TO DATE: The specific responsibilities for implementation of the Data Promise have been given to the Head of Data Policy in Welsh Government, who will be supported by a Data Policy Manager who will focus on delivering the Data Promise. (i) Stakeholder engagement is underway. (ii) The Minister for Health and Social Services has endorsed the proposals to deliver a Data Promise for health and care. (iii) A steering group has been set up to review and comment on Data Promise materials and help to make decisions on the direction of the programme. (iv) Aim of launching the Data Promise 'publicity' campaign in 2022.	12	4	3	4	4	1	Executive Medical Director	Non Mover	Digital Governance & Safety Committee	Service Delivery	Mission 1 Enabling Digital Transformation

6.4ii Appendix B – Corporate Risk Register

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Impact (current)	Likelihood (current)	Rating (Target)	Impact (Target)	Likelihood (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0228	Service Interruption	Fault Domains

IF fault domains are not adopted across the infrastructure estate THEN a single infrastructure failure could occur RESULTING IN multiple service failures. | 05/06/2019 | 05/07/2022 | 16 | AIM: REDUCE Likelihood and REDUCE Impact

FORWARD ACTIONS: A newly installed virtual server farm has been implemented with two fault domains at each data centre. Work is now underway to plan the migration of existing virtual servers onto this infrastructure which is expected to take around 9 months. This will provide some additional resilience for many of our services. Introduction of further fault domains will be considered in the planning and migration of services from on-premises to cloud providers.

ACTIONS TO DATE: 21-06-2022 MP - New deployments are designed to utilise the fault domain principals. Old services will be moved to a fault domain structure when they are renewed or migrated to new infrastructure/cloud.

06/06/2022 MP - Work continues to utilise further fault domains for all new deployments. | 12 | 4 | 3 | 6 | 3 | 2 | Interim Executive Director of Digital Operations | Non Mover | Digital Governance & Safety Committee | Financial | Mission 2 - Delivering Technology |

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DIGITAL HEALTH AND CARE WALES
AUDIT AND ASSURANCE COMMITTEE
CHAIR'S REPORT FOR BOARD

Date of Board Meeting	28 July 2022

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

Name of Committee	Audit and Assurance Committee
Chair of Committee	Marian Wyn Jones, Independent Member and Chair of Audit and Assurance Committee
Lead Executive Director	Claire Osmundsen-Little, Director of Finance and Chris Darling, Board Secretary
Date of Last Meeting	04 July 2022
Prepared By	Chris Darling, Board Secretary
Presented By	Marian Wyn Jones, Independent Member and Chair of Audit and Assurance Committee

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

STRATEGIC OBJECTIVE	Delivering High Quality Digital Services

CORPORATE RISK (ref if appropriate)	

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

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

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

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
Audit and Assurance Committee	04.07.22	The Chair summarised the key items to highlight at the end of the Committee meeting which were supported.

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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
	There are implications for how DHCW manages its financial allocation in-line with the financial control procedures approved by the Committee.
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

A&A	Audit and Assurance	DHCW	Digital Health and Care Wales
NHS	National Health Service	NWIS	NHS Wales Informatics Service
SHA	Special Health Authority	KPI	Key Performance Indicators

Summary of Key matters considered by the committee and any relevant decisions made:

DHCW Audit Tracker
The Committee **approved** the request for the closure of 29 audit actions on the log. The Committee were pleased to note the progress made on the audit tracker with a further 8 actions on track to be completed within the timeframes.

Welsh Language Compliance & Improvement Framework
The Committee **noted** the Welsh Language Compliance & Improvement Framework and the plans in place to advertise recruitment posts bilingually.

Standards of Behaviour Report
The Audit and Assurance Committee **received** for **assurance** the Standards of Behaviour Report and **noted** progress made to populate the register and the ongoing work underway to raise awareness of the policy within the organisation.

Quality & Regulatory Annual Review
The first Quality & Regulatory Annual Review was received and the Committee **noted** the key

Audit and Assurance Committee Highlight Report   Page 3 of 6   Author: Chris Darling
Approver: Marian Wyn Jones
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achievements made during the previous 12 months.

Baseline Governance Review Action Plan Report
The Committee **noted** the positive progress made against the Baseline Governance Review Action Plan and **noted** that any outstanding areas for improvement would be incorporated into the Structured Assessment action tracker.

Estates and Compliance Report
The Committee **received** the Estates and Compliance Report and **noted** the significant progress being made in the Decarbonisation Strategic Delivery Plan.

Internal Audit Update
The Committee **received** the update on activity and future planned work from Internal Audit for assurance. Internal Audit Reports received by the Committee during the meeting included:

Workforce
The Audit and Assurance Committee received the review of the audit undertaken on the **Workforce** for assurance. The review received a *Reasonable* assurance rating.

Directorate Review
The Committee received the **Directorate Review** audit for assurance. The Committee were pleased to note the review received a *Reasonable* assurance rating.

Audit Wales Committee Update Report
The Committee **received** an update to the work undertaken by Audit Wales and were pleased to note the progress being made on the Structured Assessment. The Committee were also updated on the Welsh Community Care Information System (WCCIS) follow up report which would be presented to the next Committee meeting.

Local Counter Fraud
Members received the following reports from Counter Fraud:

Local Counter Fraud Annual Report 2021/2022
The Committee received the Counter Fraud Annual Report 2021/2022 for **approval**. Members noted the progress made by the Counter Fraud team.

Local Counter Fraud Annual Plan 2022/2023
The Audit and Assurance Committee **approved** the Local Counter Fraud Annual Plan 2022/2023, noting that the plan could be flexed to accommodate any changes over the coming months.

Counter Fraud Update
Members **received** the Counter Fraud Progress Report. The Committee were informed the department was now fully staffed with four personnel which enabled focus to be made on the infrastructure and developing the Counter Fraud Plan for 2022/23.

Risk Management including Corporate Risk Register
The Risk and Board Assurance milestone plan against key milestones was **noted**. Members noted

there were 23 risks on the Corporate Risk Register; 13 were reviewed in the public session and 9 risks relating to cyber were considered in depth at the Digital Governance and Safety Committee. The Committee received **updates** on the 6risks assigned to the Committee.

Welsh Health Circular – Annual Report

The first Welsh Health Circular Annual Report was **received** for **noting** by the Committee. The Committee were informed that this report would now be received for assurance on a bi-annual basis.

High Value Purchase Order Report

The Audit and Assurance Committee **received** the High Value Purchase Order Report noting the inclusion of the cumulative high value contracts information.

Standing Financial Instruction Compliance Review

The Committee **endorsed** the Standing Financial Instructions and proposed changes to the Board and **noted** the progress to date in their implementation and compliance.

Procurement and Scheme of Delegation Compliance Report

The Committee **noted** the update in relation to procurement activity undertaken since the last Committee meeting including compliance with the Standing Financial Instructions.

Quality and Regulatory Compliance Update Report

The Committee **noted** the Quality and Regulatory Update to include the 1 external International Organisation Standardisation (ISO) quality audit during the period.

Key risks and issues/matters of concern of which the board needs to be made aware:

No items for escalation.

Delegated action taken by the committee:

DHCW Audit Tracker
The Committee **approved** the request for the closure of the 29 actions on the log now complete.

Local Counter Fraud Annual Report 2021/2022
The Committee **approved** the Local Counter Fraud Annual Report 2021/2022.

Local Counter Fraud Annual Plan 2022/2023
Members **approved** the Local Counter Fraud Annual Plan 2022/23.

Standing Financial Instruction Compliance Review
The Committee **endorsed** the Standing Financial Instruction Compliance Review and proposed

changes to the Board.

Date of next committee meeting:
18 October 2022

DIGITAL HEALTH AND CARE WALES
LOCAL PARTNERSHIP FORUM
HIGHLIGHT REPORT

Date of Board Meeting	28 July 2022

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

Name of Committee	Local Partnership Forum
Chair of Committee	Andrew Fletcher Associate Board Member (Trade Union), Helen Thomas, Chief Executive Officer,
Lead Executive Director	Helen Thomas, Chief Executive Officer and Chris Darling, Board Secretary
Date of Last Meeting	7 June 2022
Prepared By	Chris Darling, Board Secretary
Presented By	Andrew Fletcher, Associate Board Member (Trade Union)

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

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

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

STRATEGIC OBJECTIVE	Delivering High Quality Digital Services

CORPORATE RISK (ref if appropriate)	N/A

WELL-BEING OF FUTURE GENERATIONS ACT | A Healthier Wales

If more than one standard applies, please list below:

DHCW QUALITY STANDARDS | N/A

If more than one standard applies, please list below:

HEALTH CARE STANDARD | Governance, leadership and acccountability

If more than one standard applies, please list below:
Effective Care
Safe Care

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
Local Partnership Forum	07.06.2022	The Chair summarised the key items to highlight at the end of the meeting which were supported.

Tolley,Laura
21/07/2022 13:51:09

Local Partnership Forum Highlight Report   Page 2 of 5   Author: Julie Robinson
Approver: Chris Darling
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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	Yes, please see detail below
	The Local Partnership Forum considers and engages on workforce issues.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

Acronyms

LPF	Local Partnership forum	DHCW	Digital Health and Care Wales
SHA	Special Health Authority	ESR	Electronic Staff Record
PADR	Personal Appraisal Development Review	NWIS	National Wales Informatics Service
FEDIP	The Federation for Informatics Professional in Health and Care	DDaT	Digital, Data and Technology

Summary of Key matters considered by the committee and any relevant decisions made:

Welcome and Apologies
The Local Partnership Forum were informed that Joe Donnelly the representative from UNISON had tendered his resignation to the Forum and would be replaced by Tanya Bull. The Local Partnership Forum welcomed Sarah-Jane Taylor, Director of Workforce and Development to her first meeting and David Murphy from Audit Wales in attendance as part of the work being undertaken on the Structured Assessment.

Risk Management Report
The Local Partnership Forum **discussed** the Risk Management Report and received an update from Workforce relating to risk DHCW0259 – Staff Vacancies.

Workforce Performance Report
The Local Partnership Forum **noted** the Workforce Performance Report / Dashboard and decrease in appraisal completion rate with work continuing to encourage all Directorates to undertake

appraisals in a timely manner.

Policy Update
The Local Partnership Forum **noted** two new policies and **received** an update on the status of these policies.

Update from Trade Unions
The Local Partnership Forum **noted** the pay review report had still not been received. The Trade Unions expressed their concern for staff with regards to the 'cost of living' crisis and offered their support to struggling members.

New Ways of Working – Hybrid Working
The Local Partnership Forum **received** the update relating to new ways of working – taking a hybrid approach. The Local Partnership Forum **noted** a draft policy had been formulated and would be reviewed once the interim period had ended.

Executive Structure
The Local Partnership Forum **noted** the role of Director of Primary, Community and Mental Health Digital Services would be advertised shortly. The advert for the Director of Operations had been finalised and will be released over the summer.

Health and Wellbeing Group
The Local Partnership Forum **received** an update on the Health and Wellbeing Group and **noted** the objectives and initiatives being brought in by the group.

National Cyber Security Centre (NCSC) Message
The Local Partnership Forum **noted** the latest Security Report comprising phishing data for DHCW.

Staff Conference 2022/23 Lessons Learnt and Reflections
The Local Partnership Forum **noted** the feedback received from the recent Staff Conference and **discussed** the comments received on the proposed planning for next year's event.

Staff Awards 2022/23 Lessons Learnt and Reflections
The Local Partnership Forum **received** the update on the recent Staff Awards and **noted** that the feedback was overall positive.

Financial Performance – Year End
The Local Partnership Forum **received** the Financial Performance – Year End report and **noted** the position of the annual accounts.

Key risks and issues/matters of concern of which the board needs to be made aware:

There are no items for escalation.

Delegated action taken by the Local Partnership Forum:

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	Date of next committee meeting:
	9th August 2022

Tolley,Laura
21/07/2022 13:51:09

DIGITAL HEALTH AND CARE WALES
ALL WALES INDEPENDENT MEMBER DIGITAL NETWORK HIGHLIGHT REPORT

Name of Meeting	All Wales Independent Member Digital Network Highlight Report
Date of Meeting	28 July 2022

Public or Private	Private
IF PRIVATE: please indicate reason	The IM Digital Network is a Private meeting

Executive Sponsor	Chris Darling, Board Secretary
Prepared By	Chris Darling, Board Secretary
Presented By	David Selway, Independent Member, DHCW

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

1   IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply

CORPORATE RISK (ref if appropriate)	

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

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

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

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
Choose an item.	Outcome:
Statement:	

[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

Author: Chris Darling - DHCW
Approver: David Selway - DHCW
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RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there is no specific research and innovation implications relating to the activity outlined within this report

Acronyms			
DHCW	Digital Health and Care Wales	IM	Independent Member
SHA	Special Health Authority	RAG	Red, Amber, Green
CDPS	Centre for Digital Public Services	ICT	Information Communication Technology
SRO	Senior Responsible Officer	DMP	Digital Medicine Portfolio

2   SITUATION/BACKGROUND

2.1   The Independent Member Digital Network was created to strengthen links with Independent Members from all Health Boards, Special Health Authorities and Trusts across NHS Wales to enhance the Digital agenda and improve services for patients and service users across the system.

2.2   The inaugural meeting took place on the 26 January 2022 and this report provides a highlight from the third meeting which took place on 20 July 2022.

2.3   The expectation will be that all members of the network contribute agenda items and that the forward plan will take a system wide approach in terms of subjects for discussion.

3   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

Digital Medicine Portfolio

3.1   The Network received an informative presentation from members of the Digital Medicine Portfolio team, Hamish Lang, Digital Medicine Portfolio SRO and Rhian Harmer, Portfolio Director. The presentation outlined the aims to make prescribing, dispensing and administration of medicines in Wales easier, safer, more efficient, and effective through the use of digital. The joint working with the Digital Services for Patients and the Public programme to offer people digital medicines functionality on the NHS Wales App was discussed. The network also discussed and noted the benefits the Digital Medicines Portfolio would realise, in particular improving quality and safety with fewer queries and mistakes in prescriptions.

Author: Chris Darling - DHCW
Approver: David Selway - DHCW

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Microsoft Contract

3.2   The Network were joined by Claire Osmundsen-Little, Executive Finance Director and Deputy Chief Executive from DHCW who gave a presentation on the Microsoft Contract. Over 100,000 NHS Wales staff have access to Microsoft 365, and the benefits of the contract were discussed. An all-Wales approach enabled the exploitation of economies of scale and flexibility in the management of licenses, with the new agreement seeing increased functionality and service.

Electronic Test Requesting

3.3   The Network welcomed Rhidian Hurle, DHCW Medical Director and Sally Pritchard, DHCW Principal Project Manager to provide an overview of Electronic Testing Requesting. The opportunities for efficiencies, improved user experience and improved patient safety by digitising all requests in primary and secondary care was a focus of the presentation and discussion. The constraints in take up of Electronic Test Requesting was identified as poor connectivity, and access to hardware and consumables in particular to working printers.

Overview of All Wales Directors Digital Peer Group

3.4   Stuart Morris the Director of Digital for Cwm Taf Morgannwg (CTM) UHB and Chair of the All-Wales Directors of Digital Peer Group joined the meeting to provide an overview of the Directors of Digital Peer Group. Stuart talked through the focus of this peer group over the coming year and how the group may help bring to the attention of this network relevant agenda items such as sharing of best practice from NHS Wales bodies. Key priorities for the All-Wales Directors of Digital Peer Group were identified as:

- Sustainable funding model for digital
- Workforce including skills and capability gaps and a digital ready workforce
- Digital maturity
- Cyber resilience including education

4   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

4.1   Not all NHS Wales Bodies have an Independent Member with a lead for Digital, however, any nominated Independent Member can attend the IM Digital Network to ensure each body is represented.

4.2   An additional topic for the forward workplan identified during the meeting was:
- Health Board specific issues and areas of best practice to share

Tolley,Laura
21/07/2022 13:51:09

Author: Chris Darling - DHCW
Approver: David Selway - DHCW

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5 RECOMMENDATION

5.1 The Board is being asked to **NOTE** 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
David Selway	21/07/2022	Approved

Tolley,Laura
21/07/2022 13:51:09

Author: Chris Darling - DHCW
Approver: David Selway - DHCW

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DIGITAL HEALTH AND CARE WALES
REMUNERATION AND TERMS OF SERVICE COMMITTEE CHAIR'S REPORT FOR BOARD

Date of Board Meeting	28 July 2022

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

Name of Committee	Remuneration and Terms of Service Committee
Chair of Committee	Simon Jones, Chair
Lead Executive Director	Sarah-Jane Taylor, Director of People and Organisational Development
Date of Last Meeting	21 July 2022
Prepared By	Chris Darling, Board Secretary
Presented By	Simon Jones, Chair

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

STRATEGIC OBJECTIVE	Delivering High Quality Digital Services

CORPORATE RISK (ref if appropriate)	

WELL-BEING OF FUTURE GENERATIONS ACT

	A Healthier Wales

If more than one standard applies, please list below:

DHCW QUALITY STANDARDS

	N/A

If more than one standard applies, please list below:

HEALTH CARE STANDARD

	Governance, leadership and acccountability

If more than one standard applies, please list below:
Effective Care
Safe Care

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
Remuneration and Terms of Service Committee	21/07/2022	The Chair summarised the key items to highlight at the end of the Committee meeting which were supported.

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	Yes, please see detail below
	Appointment to the Associate Board Member – Trade Union
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

Acronyms

SHA	Special Health Authority	DHCW	Digital Health and Care Wales

Summary of Key matters considered by the committee and any relevant decisions made:

Forward Workplan
The Committee **noted** forward workplan.

Ratification of the Associate Board Member – Trade Union Tenure Extension
The Committee **ratified** the Associate Member Trade Union tenure extension to run until 31 July 2025.

Verbal Update on the Director of Primary, Community and Mental Health Digital Services and Executive Director of Operations Vacancy
The Committee received a verbal update on the appointment to the Director of Primary, Community and Mental Health Digital Services, with shortlisting having recently taken place and interviews planned for early August.

The substantive role for the Executive Director of Operations is likely to go out to advert in the next few weeks.

Executive Team Objectives

Objectives for members of the Executive team were **discussed** and **reviewed** with some additional points for consideration being taken forward.

Key risks and issues/matters of concern of which the board needs to be made aware:

Seven members of the Executive Team are currently in post and therefore the objectives for the other member of the Executive Team will be presented to a future Committee meeting.

Delegated action taken by the committee:

Ratification of the Associate Board Member – Trade Union Tenure Extension
The Committee **ratified** the Associate Member Trade Union tenure extension to run until 31 July 2025.

Date of next committee meeting:

8 September 2022

Tolley,Laura
21/07/2022 13:51:09