Cyfarfod Bwrdd Iechyd a Gofal Digidol Cymru - Cyhoeddus

Thu 27 January 2022, 10:00 - 14:00

Zoom

Agenda

10:00 - 10:05
5 min

1. MATERION RHAGARWEINIOL

1.1. Croeso a Chyflwyniadau

I'w Nodi   *Cadeirydd*

1.2. Ymddiheuriadau absenoldeb

I'w Nodi   *Cadeirydd*

1.2.1.

1.3. Datganiad o Fuddiannau

I'w Nodi   *Cadeirydd*

10:05 - 10:10
5 min

2. AGENDA GYDSYNIO

I'W CYMERADWYO A'I NODI

2.1. Cofnodion heb eu cadarnhau Cyfarfod Bwrdd 25 Tachwedd 2021

I'w Cymeradwyo   *Cadeirydd*

i. Materion yn Codi

📄 2.1 Cofnodion heb eu cadarnhau Cyfarfod Bwrdd 25 Tachwedd 2021cy-C (1).pdf (24 pages)

2.2. Cofnodion heb eu cadarnhau Cyfarfod Bwrdd PREIFAT ar 25 Tachwedd 2021

I'w Cymeradwyo   *Cadeirydd*

i. Materion yn Codi

📄 2.2 Cofnodion heb eu cadarnhau Cyfarfod Bwrdd PREIFAT ar 25 Tachwedd 2021cy-C.pdf (6 pages)

2.3. Cofnodion Gweithredu

I'w Nodi   *Cadeirydd*

📄 2.3 Action Log.pdf (1 pages)

2.4. Cylch busnes blynyddol y Bwrdd 22/23

I'w Gymeradwyo   *Ysgrifennydd y Bwrdd*

📄 2.4 DHCW Board Annual Cycle of Business Report.pdf (4 pages)

📄 2.4i Appendix 1 DHCW - Board Business Cycle 22_23 v1.pdf (3 pages)

2.5. Blaengynllun Gwaith

📄 2.5 DHCW Forward WorkPlan Report.pdf (4 pages)
📄 2.5i Board Forward Work Programme 21_22 v10.pdf (2 pages)

2.6. Trefniadau adrodd diwedd blwyddyn 21/22

I'w Nodi   *Ysgrifennydd y Bwrdd*

📄 2.6 End of year reporting arrangements 2021-22.pdf (5 pages)

10:10 - 10:40
30 min

3. PRIF AGENDA - I'W DRAFOD

3.1. Cyflwyniad Gwrando a Dysgu a Rennir – Gofal Iechyd sy'n seiliedig ar Werth

I'w Drafod   *Cyfarwyddwr Meddygol Gweithredol*

📄 3.1 Shared Listening and Learning Cover Report.pdf (4 pages)
📄 3.1i Appendix A Value Based Health Care - Shared Learning Presentation.pdf (7 pages)
📄 3.1ii Appendix B Welsh Value in Health Centre_Strategy to 2024_Eng.pdf (17 pages)

10:40 - 11:10
30 min

4. PRIF AGENDA - I'W ADOLYGU

4.1. Adroddiad y Cadeirydd

I'w Nodi   *Cadeirydd*

📄 4.1 Chair's Report Jan 22v1.pdf (6 pages)

4.2. Adroddiad y Prif Swyddog Gweithredol

I'w Nodi   *Prif Swyddog Gweithredol*

📄 4.2 Chief Executive's Report Final.pdf (7 pages)

Egwyl - 10 Munudau

11:10 - 12:30
80 min

5. EITEMAU STRATEGOL

5.1. Diweddariad Datblygiadau Strategol

I'w Drafod   *Prif Swyddog Gweithredol*

📄 5.1 Strategic Developments Update Jan 2022.pdf (6 pages)

5.2. Cynllun Ymgysylltu â Rhanddeiliaid

I'w Gymeradwyo   *Prif Swyddog Gweithredol*

📄 5.2 DHCW Engagement Plan Cover Sheet_Jan 22.pdf (6 pages)
📄 5.2i Appendix 1 - Draft_DHCW Appendix_Enagement Action Plan_Clean Dec 2021.pdf (12 pages)

5.3. Adroddiad Caffael Strategol

I'w Gymeradwyo   *Prif Swyddog Gweithredol*

- Adnoddau Cam 3 Office 365

📄 5.3 Strategic Procurement Report SHA Board January 22 v1.0.pdf (7 pages)
📄 5.3i Appendix 1 - DHCW Contract Extension and Value Increase Request Paper P665 DSPP v1.pdf (6 pages)

5.4. Fframwaith Sicrwydd Llywodraethu

I'w Gymeradwyo   *Ysgrifennydd y Bwrdd*

5.5. Fframwaith Rheoli Perfformiad

I'w Gymeradwyo   *Prif Swyddog Gweithredol*

Egwyl - 10 Munudau

12:30 - 13:35
65 min

6. LLYWODRAETHU, RISG, PERFFORMIAD A SICRWYDD

6.1. Adroddiad Perfformiad Sefydliadol Integredig

I'w Drafod   *Prif Swyddog Gweithredol*

6.2. Adroddiad Sicrwydd Risg a Bwrdd

I'w Drafod   *Ysgrifennydd y Bwrdd*

6.3. Adolygiad Llywodraethu Sylfaenol Archwilio Cymru

I'w Nodi   *Ysgrifennydd y Bwrdd*

6.4. Adroddiad Cyllid

I'w Nodi   *Cyfarwyddwr Gweithredol Cyllid*

6.5. Adroddiad Crynhoi Cynnydd y Fforwm Partneriaeth Lleol

I'w Nodi   *Cadeirydd y Grŵp Cynghori*

6.6. Adroddiad Crynhoi Cynnydd y Pwyllgor Archwilio a Sicrwydd

I'w Nodi   *Cadeirydd y Pwyllgor*

6.7. Adroddiad Crynhoi Cynnydd Tâl Cydnabyddiaeth a Thelerau Gwasanaeth

I'w Nodi   *Cadeirydd y Pwyllgor*

13:35 - 13:40
5 min

7. MATERION I GLOI

7.1. Unrhyw Faterion Brys Eraill

I'w Trafod   *Cadeirydd*

7.2. Dyddiad y Cyfarfod Nesaf: Dydd Iau 31 Mawrth

I'w Nodi   *Cadeirydd*

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

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 25 Medi 2021 fel cyfarfod rhithwir a ddarlledwyd yn fyw drwy Zoom.

🕐 10:00 i 13:30   📅 25/11/2021

Aelodau'n Bresennol	Cychwynnol	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
Siân Doyle	SD	Aelod Annibynnol, Cadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol	Iechyd a Gofal Digidol Cymru
Rowan Gardner	RoG	Aelod Annibynnol, Is-gadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol	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
David Selway	DS	Aelod Annibynnol, Aelod o'r Pwyllgor Llywodraethu a Diogelwch Digidol yn ogystal â'r Pwyllgor Archwilio a Sicrwydd	Iechyd a Gofal Digidol Cymru
Helen Thomas	HT	Prif Swyddog Gweithredol	Iechyd a Gofal Digidol Cymru

1Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

			Iechyd a Gofal Digidol Cymru
Marian Wyn Jones	MWJ	Aelod Annibynnol, Cadeirydd y Pwyllgor Archwilio a Sicrwydd	Iechyd a Gofal Digidol Cymru

Yn bresennol	Cychwynnol	Teitl	Sefydliad
Frances Beadle	FB	Pennaeth Cynorthwyol Gwybodeg Glinigol (ar gyfer eitem 3.1)	Iechyd a Gofal Digidol Cymru
Judith Bowen	JB	Arweinydd Clinigol Dros Dro ar gyfer Dogfennau Nyrsio (ar gyfer eitem 3.1)	Bwrdd Iechyd Prifysgol Hywel Dda
Rebecca Cook	RC	Cyfarwyddwr yr Adnoddau Data Cenedlaethol (ar gyfer eitem 5.1iii)	Iechyd a Gofal Digidol Cymru
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
Sophie Fuller	SF	Rheolwr Llywodraethu a Sicrwydd Corfforaethol	Iechyd a Gofal Digidol Cymru
Robert Jones	RJ	Prif Bensaer — Datblygu a Chefnogi Ceisiadau (ar gyfer eitem 5.1ii)	Iechyd a Gofal Digidol Cymru
Carwyn Lloyd Jones	CLJ	Cyfarwyddwr Technoleg Gwybodaeth a Chyfathrebu	Iechyd a Gofal Digidol Cymru
Iola Lloyd	IL	Cyfieithydd ar y pryd	Troeso
Rachael Powell	RP	Dirprwy Gyfarwyddwr Gwybodaeth	Iechyd a Gofal Digidol Cymru
Julie Robinson	JR	Ysgrifenyddiaeth y Cyfarfod	Iechyd a Gofal Digidol

2Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

			Cymru
Michelle Sell	MS	Prif Swyddog Gweithredol	Iechyd a Gofal Digidol Cymru
Ian Williams	IW	Cyfarwyddwr Cynorthwyol (Pensaernïaeth Ddigidol) Datblygu a Chefnogi Ceisiadau (ar gyfer eitem 5.1ii)	Iechyd a Gofal Digidol Cymru

Ymddiheuriadau	Teitl	Sefydliad
Grace Quantock	Aelod Annibynnol, Is-gadeirydd y Pwyllgor Archwilio a Sicrwydd	Iechyd a Gofal Digidol Cymru

Acronymau			
DHCW	Iechyd a Gofal Digidol Cymru	SHA	Awdurdod Iechyd Arbennig
CEO	Prif Swyddog Gweithredol	LlC	Llywodraeth Cymru
DCT	Trosglwyddo Canolfan Ddata	NWIS	Gwasanaeth Gwybodeg GIG Cymru
NDR	Adnoddau Data Cenedlaethol	MOU	Memorandwm Cyd-ddealltwriaeth
DPIF	Cronfa Buddsoddi Blaenoriaethau Digidol	TPP	Profi, Olrhain a Diogelu
DSPP	Gwasanaethau Digidol ar gyfer Cleifion a'r Cyhoedd	LINC	Rhwydwaith Gwybodaeth Labordy Cymru
IMTP	Cynllun Tymor Canolig Integredig	LPF	Fforwm Partneriaeth Lleol
WNCR	Cofnod Gofal Nyrsio Cymru	WPAS	System Gweinyddu Cleifion Cymru

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

3Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

	Croesawodd SJ bawb i'w gyfarfod cyhoeddus llawn cyntaf fel Cadeirydd Iechyd a Gofal Digidol Cymru. Cafodd y cyfarfod ei ddarlledu'n fyw oherwydd y cyfyngiadau Covid-19 parhaus a gweithio gartref lle bo hynny'n bosibl. Mae'r broses hon wedi'i monitro'n barhaus a bydd yn cael ei hasesu yn unol ag unrhyw ddiweddariadau i ganllawiau Llywodraeth Cymru. Byddai'r recordiad ar gael drwy wefan Iechyd a Gofal Digidol Cymru ar gyfer unrhyw unigolion na fyddent yn gallu cael mynediad i'r cyfarfod byw. Roedd y platfform a oedd yn cael ei ddefnyddio wedi newid o Microsoft Teams i Zoom 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.		
1.2	**Ymddiheuriadau Absenoldeb** Nodwyd ymddiheuriadau am absenoldeb gan: • Grace Quantock, Aelod Annibynnol	Nodwyd	Dim i'w nodi
1.3	**Datganiadau o Fuddiannau** Ni dderbyniwyd unrhyw rai mewn perthynas â'r agenda.	Nodwyd	Dim i'w nodi
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 Heb eu Cadarnhau Cyfarfod Bwrdd 30ain Medi 2021** Cymeradwywyd cofnodion 30ain Medi 2021 fel cofnod gwir a chywir. **Penderfynodd y Bwrdd:** GYMERADWYO Cofnodion y cyfarfod diwethaf.	Cymeradwywyd	Dim i'w nodi
2.2	**Cofnodion Heb eu Cadarnhau Cyfarfod Bwrdd PREIFAT ar 30ain Medi 2021** Cymeradwywyd cofnodion cyfarfod y Bwrdd Preifat 30ain Medi 2021 fel	Cymeradwywyd	Dim i'w nodi

4Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

		cofnod gwir a chywir.		
		Penderfynodd y Bwrdd:		
		GYMERADWYO Cofnodion y cyfarfod diwethaf.		
	2.3	**Cofnodion Heb eu Cadarnhau Cyfarfod Bwrdd Arbennig 14ᵉᵍ Hydref 2021**	Cymeradwywyd	Dim i'w nodi
		Cymeradwywyd cofnodion cyfarfod Bwrdd Arbennig 14ᵉᵍ Hydref 2021 fel cofnod gwir a chywir.		
		Penderfynodd y Bwrdd:		
		GYMERADWYO Cofnodion y cyfarfod diwethaf.		
	2.4	**Cofnodion Gweithredu**	Nodwyd	Dim i'w nodi
		Roedd yr holl gamau gweithredu a oedd yn weddill, gan gynnwys y tri a godwyd yn y cyfarfod diwethaf, naill ai **ar waith** neu **wedi'u cwblhau** ac fe'u nodwyd fel rhai wedi'u cau.		
		Penderfynodd y Bwrdd:		
		NODI'r log gweithredu.		
	2.5	**Blaengynllun**	Nodwyd	Dim i'w nodi
		Nododd y Bwrdd y Blaengynllun a oedd yn nodi'r amserlen waith a gyflwynir i gyfarfodydd y Bwrdd yn y dyfodol.		
		Penderfynodd y Bwrdd:		
		NODI cynnwys y Blaengynllun.		
	PRIF AGENDA			
	RHAN 3 - I'W DRAFOD			
	3.1	**Cyflwyniad Gwrando a Dysgu a Rennir — Cofnod Gofal Nyrsio Cymru**		
		Gwahoddodd y Cadeirydd Rhidian Hurle (RH) i gyflwyno ei gydweithwyr, Frances Beadle (FB) a Judith Bowen (JB) a fyddai'n arwain y cyflwyniad ynghylch Cofnod Gofal Nyrsio Cymru (WNCR), fel rhan o'r dull dysgu sefydliadol. Nododd RH fod y rhaglen Ddigidol hon wedi gwneud camau mawr tuag at y weledigaeth ddigidol ddi-bapur, a disgwylid y byddai'r cyflwyniad hwn mor addysgiadol â'r ddau gyflwyniad dysgu sefydliadol blaenorol.	Trafodwyd	Dim i'w nodi
		Diolchodd FB i'r Cyfarwyddwr Meddygol am gefnogi nyrsio yn y daith hon a chyflwynodd Judith Bowen, Prif Swyddog Gwybodaeth Nyrsio Bwrdd Iechyd Prifysgol Hywel Dda. Darparodd JB y cefndir gan gynnwys sut y nodwyd nyrsio mewn adroddiadau amrywiol o ran pa mor wael roedd cofnodion gofal nyrsio. Roedd cofnodi gwybodaeth â llaw yn cymryd llawer o amser i nyrsys ac roedd cleifion yn pryderu nad		

5Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

oedd eu gwybodaeth bersonol yn eu dilyn.

Roedd y cyflwyniad yn amlinellu gweledigaeth Cofnod Gofal Nyrsio Cymru a oedd â'r nod o safoni a digideiddio gwybodaeth am ofal cleifion. Mae gan y system y potensial i arbed amser nyrsio sylweddol a rhoi nyrsys yn ôl wrth erchwyn y gwely, gan roi'r claf yn ganolog i'r daith ddigidol.

Amlygwyd y prif gyfyngiadau, risgiau a materion i lwyddo i'r Bwrdd ac roeddent yn cynnwys cyllid, cyfyngiadau technegol, defnyddwyr yn derbyn a newid busnes.

Amlinellodd JB y gwelliannau a'r cyfleoedd a grëwyd drwy ddefnyddio'r system a oedd yn cynnwys safoni gofal ar draws pob maes, roedd yr ôl troed carbon wedi lleihau gyda phenderfyniadau'n cael eu gwneud o bell, bydd arbedion cost ar gaffael, manteision i'r gweithlu gyda chadw staff a chynhyrchu cofnodion clir ac archwiliadwy.

Aeth Cofnod Gofal Nyrsio Cymru yn fyw ym mis Ebrill 2021 ac roedd bellach yn cael ei ddefnyddio mewn pum sefydliad GIG na fyddai wedi bod yn bosibl heb gymorth gan dîm Iechyd a Gofal Digidol Cymru

Hysbyswyd y Bwrdd fod system Cofnod Gofal Nyrsio Cymru yn rhaglen gwella ansawdd ac wedi sicrhau newid cadarnhaol, fodd bynnag, nid oedd yn rhyddhau arian ac roedd unrhyw enillion ariannol yn gymhleth ac yn anodd eu mesur gan fod rhaglenni digidol yn aml yn gofyn am fuddsoddi mewn meysydd eraill.

Cadarnhawyd y bydd pob Bwrdd Iechyd yn gweithredu'r system, ac roedd bellach yn fyw mewn pum Bwrdd Iechyd gyda thri arall i ddechrau gweithredu yn ystod 2022.

Cadarnhaodd JB eu bod yn gweithio'n agos gyda thimau cymunedol a nyrsys ardal ac yn defnyddio safonau data a ddatblygwyd ar lefel genedlaethol fel eu bod yn berthnasol ac yn gymwys i'r lleoliad gofal. Roedd gwaith yn mynd yn ei flaen ar hyn o bryd ar ryngweithredu Cofnod Gofal Nyrsio Cymru gyda systemau eraill.

Hysbysodd RH y Bwrdd mai un o elfennau enghreifftiol go iawn y rhaglen hon oedd y cydweithio i safoni'r wybodaeth a gasglwyd o wahanol amgylcheddau gofal. O ran y dyfodol roedd rhai cyfleoedd cyffrous ar gyfer gweithredu cymorth penderfyniadau clinigol a llwybrau lle gofynnir cwestiynau sy'n ysgogi ymatebion cleifion, er enghraifft rhoi'r gorau i ysmygu, a all gyfeirio'r gofal â chymorth i'r rhai sy'n dymuno rhoi'r gorau i ysmygu.

Diolchodd SJ i FB a JB am gyflwyniad addysgiadol iawn ynghylch y rhaglen ddigidol arloesol wych hon.

Penderfynodd y Bwrdd:

DRAFOD y Cyflwyniad gwrando a dysgu ar y cyd a ddarparwyd gan

6Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

6/24   6/303

	Gofnod Gofal Nyrsio Cymru.		
RHAN 4 - I'W HADOLYGU			
4.1	**Adroddiad y Cadeirydd** Dechreuodd SJ ei adroddiad drwy hysbysu'r Bwrdd bod Siân Doyle (SD), Aelod Annibynnol yn gadael Iechyd a Gofal Digidol Cymru i faes newydd fel Prif Swyddog Gweithredol S4C. Llongyfarchodd SJ Siân a diolchodd iddi am ei chyfraniad i'r Bwrdd. Ychwanegodd SD ei bod wedi mwynhau gweithio gyda'r Bwrdd a nododd y cynnydd a wnaed ers mis Mawrth 2021. Amlinellodd SJ yr uchafbwyntiau yn yr adroddiad: - - **Cyfarfodydd sefydlu** — cynhaliwyd llawer o gyfarfodydd rhwng cydweithwyr mewnol ac allanol ers i SJ gychwyn yn ei swydd a byddai'n parhau i gyfarfod â rhanddeiliaid a staff yn Iechyd a Gofal Digidol Cymru. - **Briffio Staff Iechyd a Gofal Digidol Cymru —** Ymunodd SJ â'r Prif Weithredwr mewn Sesiwn briffio staff a oedd wedi rhoi cyfle i staff gymryd rhan mewn cwestiynau a materion amserol. - **Rhwydwaith Digidol Aelodau Annibynnol** — cytunwyd ar y rhwydwaith gyda sefydliadau partner. Roedd Aelodau Annibynnol gydag arweinydd digidol wedi'u henwebu gan bob Corff Iechyd yn GIG Cymru i ymuno â'r rhwydwaith. Roedd y Gweinidog Iechyd a Gwasanaethau Cymdeithasol wedi croesawu sefydlu'r rhwydwaith gyda'r cyfarfod cyntaf wedi'i drefnu ar gyfer Ionawr 2022. - **Gwobrau Iechyd Digidol** — Enwyd HT yn Brif Swyddog Gweithredol y flwyddyn a ystyriwyd fel cydnabyddiaeth o'r holl staff yn Iechyd a Gofal Digidol Cymru. **Penderfynodd y Bwrdd:** **NODI** cynnwys yr adroddiad	Nodwyd	Dim i'w nodi
4.2	**Adroddiad y Prif Weithredwr** Gwahoddodd SJ Helen Thomas (HT), Prif Swyddog Gweithredol i gyflwyno Adroddiad y Prif Weithredwr. Amlinellodd HT y pwyntiau allweddol yn yr adroddiad. - **Dechreuodd cynllun Casgliad Pontio Canolfan Ddata ddydd Gwener 30 Gorffennaf 2021 a daeth i ben yn ffurfiol ar 03 Hydref 2021**	Nodwyd	Dim i'w nodi

7Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

7/24 7/303

Roedd pob un o'r wyth casgliad o symudiadau penwythnos bellach wedi'u cwblhau. Roedd dau wasanaeth yn weddill i'w symud, gydag un wedi mudo'n llwyddiannus i'r Cwmwl yr wythnos hon, gan adael un yn weddill. Roedd gwaith gyda'r cyflenwr data yn mynd yn ei flaen i'w symud.

- **Diweddariad ynghylch E-ragnodi**

  Parhaodd y gwaith i fwrw ymlaen â recriwtio Cyfarwyddwr Rhaglen ac Arweinydd Rhaglen i gefnogi adeiladu portffolio o raglenni. Roedd gwaith cynnar eisoes wedi dechrau i ddatblygu rhai o'r blaenoriaethau cynnar.

- **Cyfarfod â Simon Bolton, Prif Weithredwr Dros Dro, GIG Digidol**

  Cynhaliwyd cyfarfodydd gyda Simon Bolton a'i dîm i archwilio'r defnydd o wasanaeth presgripsiwn electronig a ddefnyddiwyd yn llwyddiannus iawn ers peth amser yn GIG Digidol.

- **Recriwtio Cyfarwyddwr Gweithredol**

  Roedd y broses recriwtio wedi hen ddechrau, roedd y dyddiad cau ar gyfer gwneud cais am y ddwy rôl Weithredol wedi cau yr wythnos hon. Nodwyd bod nifer a safon yr ymgeiswyr yn uchel. Roedd yr hysbyseb ar gyfer Cyfarwyddwr Pobl a Datblygu Sefydliadol hefyd wedi'i hanfon i'w hysbysebu yr wythnos hon gyda'r bwriad o gyfweld ddiwedd mis Ionawr.

- **Briffio Diwydiant Tech UK**

  Roedd HT wedi cynnal sesiwn friffio lwyddiannus, ynghyd ag Ifan Evans, Cyfarwyddwr Trawsnewid Technoleg a Digidol o Lywodraeth Cymru ar gyfer Diwydiant Tech UK, a chafodd groeso da. Y gobaith oedd y gallai rhagor o ddigwyddiadau sy'n canolbwyntio ar Gymru gael eu cynnal yn y dyfodol.

- **Wythnos Gwerth Mewn Iechyd 2021**

  Dathliad o'r rhaglen oedd hwn o dan arweiniad Dr Sally Lewis. Ymunodd HT fel prif siaradwr gan nodi'r rôl sydd gan Iechyd a Gofal Digidol Cymru yn llwyddiant system Gofal Iechyd Seiliedig ar Werth.

- **Grŵp Gweithredu Anadlol**

  Gwahoddwyd HU i rôl Prif Weithredwr arweiniol GIG Cymru ar y grŵp hwn ac roedd yn edrych ymlaen at gymryd mwy o ran yn y maes hwn.

- **System Effaith Meddygon Teulu**

  Roedd problem ar 11eg Tachwedd a effeithiodd ar nifer o systemau Meddygon Teulu, oherwydd toriad pŵer yn y Ganolfan Ddata. Cafodd y mater ei gywiro cyn gynted â

8Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

8/24   8/303

	phosibl, ond cynhelir adolygiad llawn, a bydd y grŵp Adolygu a Dysgu Sefydliadol yn bwrw ymlaen â'r gwersi a ddysgwyd. • **Ymgysylltu â Staff Nyrsio ym Mwrdd Iechyd Prifysgol Bae Abertawe** Ymwelodd HT a gweld drosto'i hun y gwerth roedd gan system Cofnod Gofal Nyrsio Cymru yn y lleoliad gofal iechyd. Diolchodd RG i HT am y diweddariad ar recriwtio, yn enwedig y Cyfarwyddwr Gweithredol a holodd beth oedd Global yn ei wneud i sicrhau bod y broses recriwtio'n annog amrywiaeth. Cadarnhawyd bod amrywiaeth eang yn y ceisiadau ar gyfer y rolau hyn. Gofynnwyd i Global sicrhau bod hyn yn ffocws i'r ymgeiswyr. **Penderfynodd y Bwrdd:** **NODI** cynnwys adroddiad y Prif Weithredwr.		
	Egwyl		
RHAN 5 - EITEMAU STRATEGOL			
5.1	**Datblygiad Strategol** Cadarnhaodd HT fod yr adran hon yn canolbwyntio ar nifer o Ddatblygiadau Strategol a oedd ar y gweill ac roedd nifer o gydweithwyr oedd yn gweithio ar y strategaethau wedi ymuno â'r cyfarfod, Rebecca Cooke (Cyfarwyddwr y Rhaglen Adnoddau Data Cenedlaethol), Robert Jones (Prif Bensaer — Datblygu a Chefnogi Ceisiadau) ac Ian Williams (Cyfarwyddwr Cynorthwyol (Pensaernïaeth Ddigidol) Datblygu a Chefnogi Ceisiadau) a fyddai'n cyflwyno'r strategaeth bensaernïaeth yn nes ymlaen ar yr agenda. **Penderfynodd y Bwrdd:** **NODI**'r Adroddiad Datblygu Strategol.	Nodwyd	Dim i'w nodi
5.1i	**Strategaeth Cwmwl** Cyflwynodd HT Claire Osmundsen Little (COL), Cyfarwyddwr Gweithredol Cyllid i ddarparu diweddariad ar lafar ynghylch y Strategaeth Cwmwl. Cadarnhaodd COL fod llawer o waith wedi'i wneud ar y Strategaeth Cwmwl ers iddi ddiweddaru'r Bwrdd ddiwethaf ar Egwyddorion Strategol y Strategaeth Cwmwl sy'n dod i'r amlwg. Roedd y meysydd ffocws a oedd yn cymryd mwy o amser nag yr amcangyfrifwyd yn ymwneud â chynllun gweithredu'r Strategaeth Cwmwl ac yn benodol y modd y mae trefniadau llywodraethu'r Strategaeth Cwmwl yn cyd-fynd â'r prosesau cyfredol a'r strategaeth a'r cynllun masnachol a oedd yn sail i bob elfen o waith.	Nodwyd	Dim i'w nodi

9Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

		Ar ôl cwblhau'r gwaith hwn, byddai'r ddogfen Strategol a'r Cynllun Busnes a fyddai'n dod â'r holl linynnau at ei gilydd yn cael eu cwblhau.		
		Hysbyswyd y Bwrdd fod y ffrwd waith yn cyfarfod yn rheolaidd ac yn ystyried torri i mewn i ffrydiau gwaith unigol, a'r cyntaf ohonynt oedd y cynllun gweithredu a oedd â dwy agwedd; y datblygiadau a'r gofynion newydd a'r etifeddiaeth. Roedd angen i'r uchelgais a'r cyflymder i newid i Cwmwl adlewyrchu ac alinio i'r Cynllun Seilwaith a'r blaenoriaethau a hefyd alinio â'r Cynllun Tymor Canolig Integredig.		
		Cynhaliwyd gweithdy gyda'r Uwch dîm Arweinyddiaeth i ddeall a chydlynu'r gwaith. Y camau nesaf allweddol oedd cytuno ar ragdybiaethau'r ganolfan ddata sy'n ymwneud â'r cynlluniau seilwaith yn y Cynllun Tymor Canolig Integredig		
		Hysbyswyd y Bwrdd mai'r amserlenni i ddod â'r holl ganlyniadau terfynol at ei gilydd a chwblhau'r holl waith oedd diwedd Chwefror 2022.		
		Hysbyswyd y Bwrdd mai strategaeth Llywodraeth Cymru oedd dull Cwmwl yn Gyntaf gydag ymgyrch i amgylchedd Cwmwl yn Gyntaf.		
		Penderfynodd y Bwrdd:		
		NODI'r cynnydd yn y Strategaeth Cwmwl.		
5.1ii		**Diweddariad Strategaeth Pensaernïaeth Agored**	Trafodwyd	Dim i'w nodi
		Gwahoddodd SJ Robert Jones (RJ) ac Ian Williams (IW) i gyflwyno'r adroddiad ar ddiweddariad y Strategaeth Pensaernïaeth Agored.		
		Cyflwynodd RJ gefndir yr adroddiad, yn rhan olaf 2018 comisiynwyd Sianel 3 gan Lywodraeth Cymru i adolygu'r bensaernïaeth ddigidol yng Nghymru er mwyn sicrhau ei bod yn barod i fodloni'r disgwyliadau a'r uchelgeisiau a nodwyd yng Nghymru Iachach i gefnogi trawsnewid digidol ym maes Iechyd a Gofal Cymdeithasol. Cynhaliwyd yr adolygiad yn chwarter cyntaf 2019 a'i gyhoeddi yn nhymor yr hydref 2019. Prif argymhelliad yr adolygiad oedd mabwysiadu ymagwedd seiliedig ar safonau i ddarparu pensaernïaeth agored ac wrth wneud hynny nodi cyfres o flociau adeiladu pensaernïol a fyddai, unwaith y byddent yn cael eu cyflwyno, yn dod yn sylfaen ar gyfer adeiladu ceisiadau a gwasanaethau digidol cyfredol ac yn y dyfodol yng Nghymru.		
		Cafodd y gwaith ar yr ymateb i'r adolygiad ar bensaernïaeth ddigidol yn 2020 ei effeithio'n ddifrifol gan yr angen i neilltuo adnoddau Iechyd a Gofal Digidol Cymru i'r ymateb ynghylch Covid. Fodd bynnag, yn 2021 roedd gwaith wedi ailddechrau ochr yn ochr â'r rhaglen adnoddau data genedlaethol ar yr ymateb i'r adolygiad.		
		Dywedodd DS y cytunwyd bod rhywfaint o waith i'w wneud o hyd ar flociau adeiladu dadansoddi data ac nid oedd yn ofynnol eto ond ar ryw adeg byddai Iechyd a Gofal Digidol Cymru eisiau prosesu Data Cyfres Amser ac a fyddai hyn yn cael ei ystyried yn y bloc adeiladu. Cadarnhawyd y byddai hyn yn wir gydag elfennau yn dod o'r		

10Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

10/24   10/303

strategaeth ddata i gefnogi hyn.

Diolchodd RoG i RJ am y diweddariad a dywedodd ei bod yn dda gweld bod y gwaith wedi ailddechrau ar y bensaernïaeth agored a fyddai'n caniatáu i'r holl systemau ddod at ei gilydd a chyflawni'r weledigaeth. Dilynodd RoG hyn drwy holi beth allai'r Bwrdd ei wneud i gefnogi llwyddiant y cyfnod gweithredu gan fod pensaernïaeth o'r golwg a bod sgiliau i'w roi ar waith yn brin.

Hysbyswyd y Bwrdd pe byddent yn gallu treulio amser gyda'r rhai sy'n gweithio yn y maes hwn, byddai'n eu galluogi i ddeall beth oedd y gwaith yn ei olygu ac efengyleiddio'r gwaith hwn i gydweithwyr a rhanddeiliaid y maent yn ymgysylltu â nhw. Awgrymwyd y gallai fod yn rhywbeth y byddai'r Rhwydwaith Digidol newydd yn gallu'i ddatblygu.

Gan fod y bensaernïaeth yn rhywbeth o'r golwg, ond dyma oedd y sylfaen rydym yn adeiladu llawer o'r gwasanaethau arni, byddai'r sicrwydd y gallai'r Bwrdd ei roi i'r rhaglen yn cael ei groesawu, gan gydnabod arbenigedd rhai o'r Aelodau Annibynnol yn y maes hwn.

Penderfynodd y Bwrdd:

NODI cynnydd ar y Strategaeth Pensaernïaeth Agored.

5.1iii	**Diweddariad Strategaeth Data Adnoddau Data Cenedlaethol** Gwahoddodd SJ Gyfarwyddwr Rhaglen y Rhaglen Adnoddau Data Genedlaethol, Rebecca Cook (RC) i gyflwyno'r Strategaeth Data Adnoddau Data Cenedlaethol. Hysbysodd RC y Bwrdd fod yr Adnoddau Data Cenedlaethol yn uchelgeisiol ac yn un o'r rhaglenni strategol mwyaf yng Nghymru. Yn yr un modd â rhaglenni eraill, roedd wedi dioddef o adnoddau wedi'u dargyfeirio yn ystod pandemig Covid-19 ac yn ddiweddar roedd wedi derbyn cymeradwyaeth gan Fwrdd y Rhaglen i gomisiynu partner (Gartner) i weithio gydag Iechyd a Gofal Digidol Cymru a chyflymu'r broses o ddarparu'r data a'r galluoedd dadansoddol ar gyfer Cymru. Roedd y papur yn amlinellu'r camau gwaith dros gyfnod o 12 wythnos, a oedd ar hyn o bryd yn agosáu at ddiwedd wythnos 4. Darparodd RC rai uchafbwyntiau allweddol: • Mae Iechyd a Gofal Digidol Cymru wedi ymgysylltu â 45 o grwpiau rhanddeiliaid ar draws darparwyr Iechyd a Gofal ar y rhaglen Adnoddau Data Genedlaethol • Crëwyd tîm sy'n gweithio ar y cyd â Gartner. Roedd rhywfaint o estyniad wedi bod i gam cyflawni cynllun y prosiect. Nid oedd llithriad i'r cynllun cyffredinol ar hyn o bryd ac roedd ar y trywydd iawn i gyflawni o fewn yr amserlen a'r costau y cytunwyd arnynt. **Penderfynodd y Bwrdd:** NODI'r diweddariad i'r Strategaeth Adnoddau Data Genedlaethol.	Trafodwyd	Dim i'w nodi

11Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

11/24   11/303

5.1iv	**Diweddariad Cynllun Tymor Canolig Integredig 2022/23 – 2024/25**	Nodwyd	Dim i'w nodi
	Gwahoddodd SJ Michelle Sell, y Prif Swyddog Gweithredu i gyflwyno diweddariad Cynllun Tymor Canolig Integredig 2022/23 — 2024/25.		

Amlygodd MS y pwyntiau allweddol o ddiweddariad y Cynllun Tymor Canolig Integredig: -

- Derbyniwyd Canllawiau'r Fframwaith Cynllunio gan Lywodraeth Cymru gyda'r blaenoriaethau'n cael eu mynegi'n dda.

- Y dyddiad cau ar gyfer cyflwyno bellach oedd diwedd mis Chwefror ond cynigiwyd parhau i weithio i ddyddiad Bwrdd mis Ionawr.

- Cynhaliwyd cyfarfod ym mis Medi a oedd yn ystyried y blaenoriaethau allweddol a sesiwn arall ym mis Tachwedd yn edrych yn fanwl ar y data. Mae'r sesiynau'n nodi'r portffolios allweddol.

- Parhawyd i ymgysylltu â gweithdai a chyfarfodydd ar lefel uwch a gyda Byrddau Iechyd i alinio'r cynllun â'u rhai nhw. Roedd sicrhau aliniad perffaith yn heriol ond cynhaliwyd rhai trafodaethau da gydag Addysg a Gwella Iechyd Cymru a sefydliadau cenedlaethol eraill.

- Roedd cydweithwyr yn datblygu'r cynllun a oedd yn cynnwys gosod yr amcanion a'r cerrig milltir i'w cyflawni. Mae'r cerrig milltir yn cynnwys nodi adnoddau.

- Bydd sesiwn Datblygu'r Bwrdd ddechrau mis Ionawr yn dod â chynllun manylach a bydd cyfle i'w fireinio cyn iddo ddod gerbron y Bwrdd ddiwedd mis Ionawr cyn ei gyflwyno i Lywodraeth Cymru.

Dywedodd SD ei bod yn falch bod adnoddau'n mynd i gael eu gwerthuso'n iawn o fewn y Cynllun Tymor Canolig Integredig a'r set sgiliau gan y bydd hyn yn hanfodol er mwyn llwyddo. Sut y byddai hyn yn cael ei gyfleu i randdeiliaid wrth symud ymlaen.

Mae'n her sut mae Iechyd a Gofal Digidol Cymru yn gosod ei gwmpas strategol a'r hyn y gellid ei gyflawni'n realistig a rheoli disgwyliadau rhanddeiliaid. Byddai'r disgwyliadau bob amser yn ehangach na'r gallu i gyflawni, a dyma oedd y sgyrsiau a fyddai'n cael eu cynnal gyda'r Byrddau Iechyd ynghylch beth yw eu blaenoriaethau allweddol a sut y gellir alinio adnoddau i'w cyflawni.

Canmolodd SD Iechyd a Gofal Digidol Cymru am y gwaith roeddent yn ei wneud i ddod yn bartner strategol dibynadwy.

Hysbysodd CLJ y Bwrdd, ochr yn ochr â'r holl systemau a datblygiadau newydd sydd ar y gweill, ei bod hefyd yn angenrheidiol cynnal a chadw

12Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

12/24

12/303

	systemau sy'n cael eu defnyddio ar hyn o bryd. **Penderfynodd y Bwrdd:** **NODI**'r cynnydd ar Gynllun Tymor Canolig Integredig Iechyd a Gofal Digidol Cymru.			
5.2	**Adroddiad Caffael Strategol** Gwahoddodd SJ MS i gyflwyno'r Adroddiad Caffael Strategol. Cadarnhaodd MS fod pedwar cytundeb yn cael eu cyflwyno a oedd dros y trothwy roedd angen cymeradwyaeth y Bwrdd arnynt a chyflwynodd y cefndir. • e-Gyfnodolion Diwedd Blwyddyn • Crynodebau Tystiolaeth. • Cymeradwyo Cytundeb Trwyddedu Citrix • Adnewyddu Caledwedd System Gweinyddu Cleifion Cymru **Cytundebau e-Gyfnodolion a Chrynodebau Tystiolaeth Diwedd Blwyddyn** O ran yr e-Gyfnodolion Diwedd Blwyddyn a Chrynodebau Tystiolaeth, roedd RG yn falch o nodi bod Iechyd a Gofal Digidol Cymru yn ymgysylltu â'r defnyddwyr ar y Crynodebau Tystiolaeth gan ei bod yn bwysig i Iechyd a Gofal Digidol Cymru fel sefydliad dysgu a'r system iechyd a gofal ehangach gael mynediad at wybodaeth ac ymchwil gyfredol. Pwysleisiodd RH bwysigrwydd y tîm e-lyfrgell sy'n cefnogi darparu gofal sy'n seiliedig ar dystiolaeth. Atgoffwyd y Bwrdd bod Llywodraeth Cymru wedi hysbysu Llywodraeth Cymru ynghylch unrhyw gytundebau sy'n ceisio cael eu dyfarnu dros £1m. Roedd yr hysbysiad i ddyfarnu'r Crynodebau Tystiolaeth a chytundebau e-Gyfnodolion Diwedd Blwyddyn wedi'i gyflwyno ond ni fyddai'r cyswllt yn cael ei roi ar waith hyd nes y cafwyd cadarnhad ganddynt. **Trwyddedu Citrix a Chytundebau Adnewyddu Caledwedd System Gweinyddu Cleifion Cymru** Cadarnhaodd MS fod Citrix yn cael ei ddefnyddio i ddarparu nifer o systemau a chynigiwyd ymrwymo i gytundeb am gyfnod o 3 blynedd. Roedd y drwydded yn cael ei chaffael yn y fath fodd i gefnogi'r newid i Cwmwl. Cynhaliwyd deialog gaffael gystadleuol a chynigiwyd dyfarnu'r cytundeb gwerth £1.5m i'r Ganolfan Gyfrifiadura. Yr ail gytundeb oedd ar gyfer caledwedd i redeg System Gweinyddu Cleifion Cymru. Dyfarnwyd y cytundeb i Dell a oedd yn gytundeb yn ôl y gofyn o galedwedd yn y lle cyntaf a chymorth a oedd yn cyfateb i ychydig o dan £1m o werth buddsoddi. Gofynnwyd am gyllid	Cymeradwywyd	Dim i'w nodi

13Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

13/24   13/303

	ychwanegol gan Lywodraeth Cymru ar gyfer hyn ac roedd cyflwyniad wedi'i wneud gyda chadarnhad anffurfiol wedi'i dderbyn y byddai'r cyllid ar gael. Hysbyswyd y Bwrdd y byddai hyn fel arfer yn rhan o'r cyllid dewisol ar gyfer y flwyddyn nesaf gan ei fod yn wariant hanfodol ar seilwaith. Roedd trafodaethau wedi'u cynnal gyda Llywodraeth Cymru i ddeall a fyddai cyfalaf ychwanegol ar gael yn y flwyddyn ariannol hon (2021/22) y gellid wedyn ei ddyrannu i hyn a symud y cytundeb hwn yn ei flaen. Os cymeradwyir y cytundeb hwn gan y Bwrdd, ni fyddai'n cael ei symud ymlaen nes bod cadarnhad ynghylch y cyllid ychwanegol wedi'i dderbyn gan Lywodraeth Cymru yn ysgrifenedig. Unwaith y byddai'r cadarnhad ffurfiol wedi'i dderbyn, byddai'r archeb wedyn yn cael ei chyflwyno. **Penderfynodd y Bwrdd:** **GYMERADWYO'r** : - Cymeradwyo Cytundeb Trwyddedu Citrix - Adnewyddu Caledwedd System Gweinyddu Cleifion Cymru - Crynodebau Tystiolaeth - e-Gyfnodolion Diwedd Blwyddyn **NODI**'r: - Cynllun Caffael Strategol		
	Egwyl		
RHAN 6 – LLYWODRAETHU, RISG, PERFFORMIAD A SICRWYDD			
6.1	**Adroddiad Perfformiad Sefydliadol Integredig** Gwahoddodd SJ MS i gyflwyno'r Adroddiad Perfformiad Integredig/Dangosfwrdd Perfformiad. Cyflwynodd MS adroddiad sefyllfa Medi/Hydref ac amlygodd y pwyntiau allweddol: - Gwnaed cyflawniadau, er gwaethaf y gwaith yn parhau ar COVID ac roedd rhai buddion allweddol wedi'u cyflwyno e.e. E-gyngor i Feddygon Teulu a alluogodd Meddygon Teulu i gael cyngor gan glinigwyr gofal eilaidd, lle gallent fod wedi gwneud atgyfeiriadau yn y gorffennol a allai arwain at oedi. - Cafodd Cofnod Gofal Nyrsio Cymru ei drafod yn flaenorol ac roedd yn y broses o gael ei gyflwyno i sefydliadau partner ar draws GIG Cymru. - Fferylliaeth mewn Ysbytai. Roedd tîm mewnol a gweithio'n effeithiol ledled Cymru wedi galluogi'r ateb newydd hwn i gael ei gyflwyno o fewn 12 mis. - System Adran Achosion Brys Cymru (WEDS) - dyma'r system newydd a ddefnyddir yn yr adran achosion brys a oedd yn	Trafodwyd	Dim i'w adrodd

14Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

allweddol i gefnogi gofal brys yn y dyfodol. Bu newid mewn trefn yn dilyn cytundeb â'r Byrddau Iechyd. Roedd hyn ar y trywydd iawn a nod Bwrdd Iechyd Prifysgol Bae Abertawe yw mynd yn fyw yn un o'u safleoedd erbyn diwedd y mis.

Tynnodd MS sylw'r Bwrdd at y ddau ddigwyddiad gwasanaeth a oedd wedi torri lefel y gwasanaeth a gwahoddodd Carwyn Lloyd Jones (CLJ) i roi mwy o fanylion.

Cyflwynodd CLJ y diweddariad ynghylch y digwyddiad cyntaf a ddigwyddodd pan beidiodd chwe system â gweithredu. Cafodd pedair o'r rhain eu datrys yn gyflym ond roedd y ddwy a oedd yn weddill yn cynnwys y rhwydweithiau gyda Rhwydwaith Gofal Cymdeithasol Cymru a Lloegr. Digwyddodd y digwyddiad ar 7^{fed} Hydref pan anfonodd British Telecom (BT) draffig data trwy Abertawe ac nid oedd yn mynd i'r lle roedd i fod ac nid oedd yn gallu gwneud cysylltiadau â'r system. Gwnaed gwaith gyda BT a GIG Digidol a oedd yn gyfrifol am y llinell, a chafodd ei ddatrys ychydig oriau'n ddiweddarach. Cododd y broblem eto ychydig ddyddiau'n ddiweddarach gan arwain at gofnodi'r digwyddiad am gyfnod o 3 diwrnod.

Roedd yr ail ddigwyddiad yn golygu nad oedd rhai defnyddwyr gwasanaeth yn gallu gwneud cysylltiad â gwasanaethau. Cafodd ei ddatrys yn gyflym, ac roedd gwaith yn cael ei wneud i sicrhau nad yw'n digwydd eto.

Parhaodd MS gyda'r diweddariad ar y Gweithlu a oedd ychydig o dan y targed a bennwyd ar gyfer recriwtio, gyda 190 o swyddi bellach wedi'u recriwtio. Un o'r heriau oedd bod ychydig dros hanner y bobl a recriwtiwyd wedi'u recriwtio o gronfa staff mewnol Iechyd a Gofal Digidol Cymru, a arweiniodd at gynnydd net o tua 95 o staff yn eu swyddi. Mae gwaith yn parhau i fynd i'r afael â'r diffyg hwn gyda ffair recriwtio'n cael ei chynnal yng Nghaerdydd heddiw (25 Tachwedd 2021), gan sefydlu menter i weithio gydag ysgolion ac annog unigolion i ddewis gyrfa mewn maes digidol. Roedd Iechyd a Gofal Digidol Cymru hefyd yn awyddus i weithio gyda phartneriaid masnachol a phartneriaid eraill i gefnogi'n fwy creadigol o fewn y gymuned ehangach.

Ehangodd RH ymhellach ar y system e-Gyngor Meddygon Teulu a oedd yn teimlo na fanteisiwyd yn llawn arni. Pwysleisiwyd i'r Bwrdd fod y system hon yn ymwneud ag amseroldeb atgyfeirio ar gyfer lleoliadau gofal priodol. Roedd wedi bod yn bosibl addasu'r sylfeini cadarn gyda gwasanaethau Meddygon Teulu ac anfon eu holl atgyfeiriadau mewn un templed generig gyda chrynodeb o gofnod y Meddyg Teulu. Byddai hyn yn caniatáu derbyn atgyfeiriad a dychwelyd gyda chyngor. Bellach mae gan Feddygon Teulu ddewis i ofyn am gyngor uniongyrchol gan gynnwys ffotograffiaeth neu ddelwedd, neu ar ôl gwneud y diagnosis gallant argymell triniaeth, neu ofyn am ymchwiliad pellach a bydd hyn yn cyflymu llwybr y claf.

Cyflwynwyd y system yn Uwchgynhadledd Pan Care a chafodd ei

15Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

15/24

15/303

derbyn yn dda gyda chanfyddiadau cychwynnol cadarnhaol.

Gwnaeth MWJ sylwadau ar y camau cadarnhaol a gymerwyd mewn perthynas â'r gweithlu a holodd lle roedd y pwysau mwyaf o ran llenwi rolau a beth oedd y risgiau o ganlyniad i'r swyddi hynny heb eu llenwi. Cadarnhaodd MS fod tasglu recriwtio ar waith a'i fod yn canolbwyntio ar ddeall y materion ac a oedd y gweithlu'n targedu'r pethau cywir. Cafwyd heriau mewn nifer o feysydd; roedd datblygu meddalwedd wedi tyfu'n gyflym a bellach roedd angen ei ymgorffori yn y sefydliad gyda model cynaliadwy'n cael ei sefydlu i gefnogi hyn. Yn ogystal, roedd cyllid pellach yn creu galw. Mae Iechyd a Gofal Digidol Cymru wedi buddsoddi mewn rhaglen i ddod â phobl drwy'r system a'u hyfforddi'n fewnol, fodd bynnag, roedd rhai rolau arbenigol lle bu'n anodd denu digon o ymgeiswyr ac roedd wedi cymryd mwy o amser i'r swyddi hyn gael eu llenwi.

Ychwanegodd COL ei bod yn bwysig cael cydbwysedd iawn wrth ddenu'r setiau sgiliau cywir i Iechyd a Gofal Digidol Cymru mewn amserlen fer ac ar yr un pryd adeiladu'r llif linell drwy'r gwaith sy'n cael ei wneud.

O safbwynt seiberddiogelwch, bu'n rhaid gweithio gyda chontractwyr a phartneriaid i gynorthwyo gan fod y rolau arbenigol hyn yn arbennig o anodd eu recriwtio.

Hysbyswyd y Bwrdd fod cynnydd da wedi'i wneud yn ystod y blynyddoedd diwethaf o ran moderneiddio'r seilwaith etifeddol ond roedd dyled dechnegol, ac roedd rhai systemau ar ddiwedd cylch oes y dechnoleg. Roedd hyn yn heriol, er mwyn cyflwyno'r achos o fewn y Cynllun Tymor Canolig Integredig ar gyfer systemau cyfredol, fodd bynnag, roedd cyllid untro wedi'i dderbyn ar gyfer systemau a oedd bellach yn hen. Roedd nifer y systemau a oedd ar waith a'r dibyniaeth a'r defnydd ohonynt wedi cynyddu yn ystod yr ychydig flynyddoedd diwethaf, gyda maint y timau sy'n eu cefnogi heb gynyddu ar yr un cyflymder. Roedd gwaith yn mynd rhagddo i ddatrys y sefyllfa a sicrhau bod yr adnoddau yn eu lle i gyflawni'r gwaith cynnal a chadw gyda nifer o fentrau megis Canolfan Ragoriaeth Microsoft 365, y Cwmwl a'r achos busnes.

Cadarnhaodd COL yr eir i'r afael â'r mater dyled dechnegol a bod cynnydd wedi'i wneud wrth symud i'r Ganolfan Ddata newydd i ddatrys rhai o'r materion allweddol, er bod angen mynd i'r afael â rhai materion a manteisio ar bob cyfle i gyflymu'r gwaith lle bo'n bosibl. Roedd y problemau capasiti yn cael eu rheoli, ynghyd â chynnal a chadw'r systemau craidd.

Hysbyswyd y Bwrdd y byddai'r caffaeliadau strategol wrth symud ymlaen yn cynnig ymgysylltu â chyflenwyr a chontractwyr lleol i gael cymorth ychwanegol gyda'r diffyg arbenigedd meddalwedd.

Cadarnhaodd RH fod gallu digidol ar draws y GIG yn ehangach ac nid yn unig yn Iechyd a Gofal Digidol Cymru ac roedd gweithio gyda

16Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

	chyflenwr masnachol i sicrhau eu bod yn deall cymhlethdodau systemau'r GIG ychydig yn anoddach na gweithio'n fewnol. **Penderfynodd y Bwrdd:** **DRAFOD** yr Adroddiad Perfformiad Sefydliadol Integredig		
6.2	**Perfformiad Hanner Blwyddyn yn Erbyn y Cynllun** Gwahoddodd SJ MS i gyflwyno'r Cynllun Perfformiad Hanner Blwyddyn yn Erbyn y Cynllun. Hysbysodd MS mai adolygiad oedd yr adroddiad o berfformiad y chwe mis diwethaf yn erbyn y cynllun a'i fod wedi'i drafod yn flaenorol ac y byddai'n cael ei rannu â Llywodraeth Cymru. Roedd y Set Ddata Isafswm wedi'i chynnwys mewn perthynas â'r gweithlu'n unig ac unrhyw effaith gan COVID, ni ofynnwyd am y wybodaeth ariannol a ddiweddarwyd. Nodwyd bod un neu ddau o'r prosiectau yn y portffolio yn goch, holodd RoG beth oedd goblygiadau hyn i'r dyraniad cyllid a dderbyniwyd gan Lywodraeth Cymru ar gyfer y prosiectau hyn h.y., a fyddai'r cyllid yn cael ei gario drosodd. Hysbyswyd y Bwrdd bod adolygiad manwl o'r Gronfa Buddsoddi â Blaenoriaethau Digidol (DPIF) wedi'i gynnal gyda Llywodraeth Cymru fel rhan o'r adolygiad hanner blwyddyn a bod cyllid cysylltiedig â'r Gronfa Buddsoddi Blaenoriaethau Digidol a COVID yn 'talu wrth fynd', felly byddai unrhyw gyllid na chafodd ei ddefnyddio yn cael ei dalu'n ôl i Lywodraeth Cymru. **Penderfynodd y Bwrdd:** **NODI**'r Perfformiad Hanner Blwyddyn yn Erbyn y Cynllun.	Nodwyd	Dim i'w nodi
6.3	**Adroddiad Rheoli Risg a Datganiad Parodrwydd i Dderbyn Risg** Gwahoddodd SJ Chris Darling (CD) i gyflwyno'r Adroddiad Rheoli Risg a oedd yn cynnwys y Datganiad Parodrwydd i Dderbyn Risg. Rhoddodd CD ddiweddariad ar y tair adran yn yr adroddiad Rheoli Risg☐ **Adroddiad y Gofrestr Risg** - Cefndir economaidd tymor hir Fforwm Economaidd y Byd a ddiweddarwyd ar gyfer 2021. Roedd gwahaniaethau sylfaenol oherwydd difrod a achoswyd gan COVID ac roedd nifer y bobl â mynediad at offer digidol yn lleihau ac roedd hyn yn risg er mewn cyd-destun rhyngwladol. - Y Gofrestr Risg Gorfforaethol. Mae 19 o risgiau ar y gofrestr, gyda phump wedi'u nodi fel rhai hanfodol, 14 arwyddocaol, gyda phedair i'w hadolygu yn y cyfarfod preifat oherwydd natur sensitif y risgiau. O ran newidiadau ers y Bwrdd diwethaf, roedd un risg wedi'i huwchgyfeirio ac fe'i cymeradwywyd gan Gyfarwyddwr Gweithredol Cyllid i'w hychwanegu at y gofrestr.		**Camau gweithredu:** cyfarfod i'w drefnu ynghylch y Risg Gwasanaeth Newid gyda CD/DS/RP/RC

17Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

Roedd un o'r risgiau, y rhestr o gleifion cysgodol wedi'i hisraddio a'i thrafod yn y cyfarfod Llywodraethu a Diogelwch Digidol (DG&S). Canisc yw'r risg uchaf ar y gofrestr o hyd. Adolygwyd y risgiau a neilltuwyd i'r Pwyllgor Archwilio a Sicrwydd ar 5ed Hydref ac roedd y risgiau hynny a neilltuwyd i'r Pwyllgor Llywodraethu a Diogelwch Digidol wedi'u hadolygu ar 15fed Tachwedd. Trafodwyd un risg yn benodol yn y Pwyllgor Llywodraethu a Diogelwch Digidol ynghylch y Gwasanaeth Newid a oedd angen trafodaeth bellach yng nghyd-destun rhaglen yr Adnodd Data Cenedlaethol (NDR). Ers y cyfarfod Pwyllgor hwnnw, roedd DS wedi estyn allan i gadarnhau'r camau nesaf a gofynnodd am drafodaeth ddilynol.

Gweithred 20211125-01: Cyfarfod i'w drefnu gyda CD/DS, Rebecca Cook a Rachael Powell i drafod y camau nesaf yn fanylach a chyflwyno adborth yn ôl drwy'r Pwyllgor Llywodraethu a Diogelwch Digidol.

Nododd RG y mater parhaus o drafod rhai risgiau mewn cyfarfodydd preifat a'r awydd i drafod cymaint â phosibl yn gyhoeddus. Rhoddwyd eglurhad mai risgiau sensitif eu natur neu'r rhai a allai beri i'r sefydliad fod yn agored i niwed yn unig a drafodwyd yn breifat.

Hysbyswyd y Bwrdd bod sgyrsiau defnyddiol gydag Archwilio Cymru ac Archwilio Mewnol wedi'u cynnal sy'n cefnogi'r dull cyfredol o gymryd sesiwn breifat risgiau sensitif.

Datganiad o'r Parodrwydd i Dderbyn Risg

Cyflwynodd CD gynllun Carreg Filltir Fframwaith Sicrwydd y Bwrdd (Atodiad C) a amlygodd y pedair sesiwn a gynhaliwyd fel Bwrdd ers ei sefydlu fel Awdurdod Iechyd Arbennig lle adolygwyd y risgiau, sicrwydd y bwrdd a'r parodrwydd i dderbyn risg. Y parodrwydd i dderbyn risg oedd lefel y risg y mae sefydliad yn barod i'w dderbyn wrth ddilyn ei amcanion. Cyflwynwyd canlyniad y gwaith hwn yn yr adroddiad, gan nodi bod hyn yn cynrychioli'r parodrwydd cyfredol i dderbyn risg Iechyd a Gofal Digidol Cymru ar draws nifer o feysydd. Amlygwyd y parthau lle roedd Iechyd a Gofal Digidol Cymru yn wrthwynebus neu'n ofalus trwy gydol y parth lle'r oedd gan Iechyd a Gofal Digidol Cymru barodrwydd agored i dderbyn risg ar gyfer datblygu gwasanaethau newydd.

Cytunodd y Bwrdd fod hwn yn ymarfer defnyddiol ac roedd llawer o waith wedi'i wneud i gyrraedd y sefyllfa gryno hon o'r parodrwydd cyfredol i dderbyn risg. Heriodd RG y sefyllfa parodrwydd i dderbyn risg a gyflwynwyd ac a gynghorwyd ac roedd llawer o sgyrsiau heriol wedi'u cynnal yn ystod y gwaith hwn. Mynegodd RG awydd i weld y sefydliad yn symud o'r dull gofalus cyfredol i sefyllfa parodrwydd i dderbyn risg yn fwy agored.

Cytunodd aelodau'r Bwrdd fod rhai heriau wrth ddatblygu'r lefel gywir o barodrwydd i dderbyn risg.

Diolchodd RH i RG am herio ar y maes hwn ac amlygodd fanteision ac

18Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

18/24

18/303

anfanteision dibyniaethau. Darparwyd gofal a chymorth gan systemau a oedd â dibyniaeth uchel ac roedd angen iddynt fod ar gael yn gyson, fel arall gallai pobl ddod i niwed, felly roedd yn rhaid i'r parodrwydd i dderbyn risg i seilwaith, i symud data fod yn isel oherwydd y ddibyniaeth arno. Gellid rhoi arloesedd ar waith mewn meysydd lle nad oes dibyniaeth ar wybodaeth bersonol adnabyddadwy a gellid defnyddio dull masnachol o fethiant yn gyflym, ond roedd unrhyw beth sydd â goblygiadau uniongyrchol i ofal cleifion, yna roedd angen ymagwedd fwy gofalus.

Cadarnhawyd bod gwahaniaeth mewn parthau'n bwysig a lle roedd y sefydliad yn barod i fentro a bod yn glir o ran lle roedd am hybu'r parodrwydd i dderbyn risg a'r parthau cysylltiedig.

Cytunodd y Bwrdd ei bod yn deg cael uchelgais a dylid adolygu'r darn risg hwn yn rheolaidd. Roedd y pwyntiau ar ddiogelwch cleifion a llywodraethu gwybodaeth yn hanfodol a gwelwyd yn flaenorol y gall cleifion golli hyder, gan ddibynnu ar sut y cafodd data cleifion eu defnyddio a'u storio.

Ychwanegodd RG nad oedd bod ag awydd agored am risg yn golygu gweithredu heb reolaethau ond datganoli'r broses o wneud penderfyniadau ar draws y sefydliad. Un o'r risgiau mwyaf a wynebir gan y sefydliad oedd pe bai'r holl benderfyniadau allweddol yn cael eu gwneud gan Weithredwyr, a daeth i'r brig o ran gwneud penderfyniadau nad oedd yn dynodi sefydliad a oedd yn ymddiried yn ei staff i wneud penderfyniadau ynghylch rheolaethau risg.

Penderfynodd y Bwrdd:

NODI'r sefyllfa gyfredol a'r newidiadau mewn sgoriau risg ar y Gofrestr Risg.

CYMERADWYO sefyllfa gyfredol y parodrwydd i dderbyn risg a chytunwyd i'w hadolygu i ystod y chwech i ddeuddeg mis nesaf.

6.4	**Adroddiad Cyllid**	Trafodwyd	Dim i'w nodi	

Gwahoddodd SJ Claire Osmundsen-Little (CO-L) i gyflwyno'r Adroddiad Cyllid i'r Bwrdd ar 31ain Hydref.

Rhoddodd COL drosolwg byr o'r papur ac amlygodd y canlynol: -

- Gofynion y perfformiad cyfredol mewn perthynas â'r perfformiad ariannol.

- Mae'r holl dargedau ariannol wedi'u cyrraedd — tanwariant o £595,000 o ran refeniw, gyda £510,000 o danwariant o ran cyfalaf. Roedd y polisi talu ar 97% ar ddiwedd mis Hydref.

- Roedd y sefyllfa ariannol wedi gostwng i £3.1m ar ddiwedd mis Hydref ac, ynghyd â Llywodraeth Cymru, roedd y lefel fwyaf effeithiol o arian parod yn cael ei monitro yn y dyfodol. O ystyried lefel y cytundebau cenedlaethol, mae'r lefel hon o fewn lefel gyfforddus o ystyried lefel yr adnoddau ariannol sydd

19Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

19/24

ar gael.

- Ers yr adroddiad diwethaf, cynhaliwyd adolygiad manwl gan Lywodraeth Cymru a'r Uned Cyflawni Ariannol ynghylch y sefyllfa hanner blwyddyn a'r sefyllfa ragweld. Cafodd y cyfraddau rhedeg, COVID a'r Gronfa Buddsoddi Blaenoriaethau Digidol (DPIF) eu hadolygu hefyd. Mewn perthynas â chyllid craidd Iechyd a Gofal Digidol Cymru, cytunwyd ar ddyfarniad cyflog 3% ond nid oedd hyn yn rhan o'r dyraniad cyllid craidd, felly yn ystod y mis rhoddwyd dyraniad o £800,000 i gefnogi'r adolygiad cyflog.

- Mewn perthynas â refeniw COVID, roedd £7.2m wedi'i ailddyrannu ar gyfer ail hanner y flwyddyn ariannol, a swm bach o gyfalaf o £300,000.

- Mewn perthynas â Chronfa Buddsoddi Blaenoriaethau Digidol roedd addasiad o £1.2m o refeniw a £400,000 o gyfalaf.

- Y cyfle i weithredu gofyniad seilwaith System Gweinyddu Cleifion Cymru, a fyddai'n ofyniad cyfalaf ychwanegol o £1.1m ar gyfer Iechyd a Gofal Digidol Cymru yn y flwyddyn ariannol hon, a gefnogwyd ar lafar gan Lywodraeth Cymru, ond disgwyliwyd cadarnhad ffurfiol.

- Roedd amcanestyniad tanwariant diwedd blwyddyn o £350,000.

Penderfynodd y Bwrdd:

DRAFOD cynnwys yr adroddiad cyllid hwn ar gyfer 31ain Hydref 2021 a NODI'r cyrhaeddiad a ragwelir ar ddiwedd y flwyddyn o dargedau ariannol allweddol.

6.5	**Diweddariad Polisi**	Derbyniwyd ar gyfer Sicrwydd	Dim i'w nodi

Gwahoddodd SJ Chris Darling, Ysgrifennydd y Bwrdd i gyflwyno'r diweddariad Polisi.

Gofynnwyd i aelodau'r Bwrdd gofio eu bod wedi cymeradwyo 80 o bolisïau ar 1af Ebrill, a nodwyd gan Lywodraeth Cymru i alluogi Iechyd a Gofal Digidol Cymru i weithredu fel sefydliad.

Darparwyd diweddariad ar y polisïau nad oedd ar waith ar hyn o bryd, ac o'u plith, amlygodd CD y canlynol□

- Cafodd y Strategaeth Gyfathrebu a pholisi'r Cyfryngau eu drafftio bellach ac roedd disgwyl eu cymeradwyo ym mis Ionawr 2022.

- Cymeradwywyd polisi wrthfaleiswedd yn amodol ar rai newidiadau a wnaed yn dilyn y Pwyllgor Llywodraethu a

20Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

20/24   20/303

	Diogelwch Digidol. Cytunwyd y byddai'r newidiadau'n cael eu cwblhau yn y cyfnod o bythefnos yn dilyn y cyfarfod a gynhaliwyd ar 15 Tachwedd. - Cynllun Iaith Gymraeg - roedd sylwadau wedi dod i law gan Swyddfa Comisiynwyr y Gymraeg a disgwylid i ddrafft diwygiedig y Cynllun fynd yn ôl i swyddfa Comisiynwyr y Gymraeg i gael sylwadau pellach. Y nod oedd ei gymeradwyo erbyn mis Mawrth 2022, ond roedd hyn yn amodol ar ba mor gyflym y cafwyd adborth a mynd i'r afael ag unrhyw faterion posibl. - Cymeradwywyd y Weithdrefn Rheoli Cyfalaf ym Mhwyllgor Archwilio a Sicrwydd mis Hydref. - Roedd disgwyl i Ymchwil ac Arloesi ddod i'r Bwrdd ym mis Mawrth 2022. - Cymeradwywyd Polisi Diogelwch a Gwrthderfysgaeth gan y Bwrdd Rheoli ym mis Medi. - Y Polisi Adleoli wedi'i gymeradwyo a'i fabwysiadu gan Ymddiriedolaeth GIG Prifysgol Felindre. **Penderfynodd y Bwrdd:** NODI'r Diweddariad Polisi ar gyfer **SICRWYDD**.		
6.6	**Adroddiad Uchafbwyntiau Cynnydd y Pwyllgor Archwilio a Sicrwydd** Gwahoddodd SJ MWJ i ddarparu adroddiad Uchafbwyntiau'r Pwyllgor Archwilio a Sicrwydd a gynhaliwyd ar 5ed Hydref. Rhoddodd MWJ ei diweddariad yn Gymraeg, ac amlygodd y canlynol: - Cafodd yr adroddiad Archwilio Mewnol ar y Pontio o Wasanaeth Gwybodeg GIG Cymru i Iechyd a Gofal Digidol Cymru sgôr sicrwydd rhesymol gref ac roedd yr hyn a ddysgwyd wedi'i nodi o'r broses. - Roedd yr adroddiad Archwilio Mewnol ar Ddadansoddi Data yn nodi bod cynnydd da wedi'i wneud yn y maes hwn gyda sicrwydd rhesymol wedi'i ddarparu. - Cymeradwyodd y Pwyllgor nifer o bolisïau a gweithdrefnau. - Derbyniwyd y wybodaeth ddiweddaraf am yr Adolygiad Llywodraethu Sylfaenol. - Gan fod Adroddiad Ymgynghorol Safonau'r Gymraeg wedi dod i law gan yr Archwilydd Mewnol a oedd yn amlinellu'r gwersi a ddysgwyd a phwysigrwydd hyrwyddo a defnyddio'r Gymraeg ar draws y sefydliad. - Cafwyd diweddariad ynghylch lle roedd Iechyd a Gofal Digidol	Derbyniwyd ar gyfer Sicrwydd	Dim i'w nodi

21Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

21/24   21/303

	Cymru wrth weithredu Safonau'r Gymraeg wedi dod i law gan Ysgrifennydd y Bwrdd, a oedd yn cynnwys recriwtio Swyddog y Gymraeg, a fydd yn helpu i sicrhau bod y Gymraeg yn cael ei thrin yn gyfartal ar draws systemau yn y gwasanaeth iechyd. • Bydd y themâu diwedd blwyddyn ariannol sydd wedi dod i'r amlwg yn ystod y flwyddyn ddiwethaf yn cael eu hadolygu. **Penderfynodd y Bwrdd:** **NODI**'r adroddiad Uchafbwyntiau Archwilio a Sicrwydd ar gyfer **SICRWYDD**.		
6.7	**Adroddiad Uchafbwyntiau'r Pwyllgor Llywodraethu a Diogelwch Digidol** Gwahoddodd SJ Siân Doyle Cadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol i gyflwyno adroddiad Uchafbwyntiau'r cyfarfod a gynhaliwyd ar 15f^(ed) Tachwedd 2021. Cyflwynodd SD yr adroddiad yn Gymraeg a darparodd yr uchafbwyntiau canlynol o fewn yr adroddiad: • Llongyfarchodd SD y Pwyllgor ar y ffordd roedd wedi datblygu, a oedd yn cynnwys safon yr adroddiadau a'r tîm yn dechrau deall yr hyn oedd ei angen o ran sicrwydd. • Cynhaliwyd cyfarfod datblygiadol ym mis Medi a roddodd y cynllun gwaith ar waith ac roedd yn trafod heriau mewn adnoddau a chyllid. • Derbyniwyd y polisi gwrthfaleiswedd gyda therfyn amser o 2 wythnos yn cael ei roi i ddiwygio'r polisi, • Ymgymerwyd ag edrych ar feysydd risg gwasanaethau gwybodaeth a llywodraethu gwybodaeth yn fanwl a chymerwyd camau i SD ysgrifennu at Lywodraeth Cymru ynghylch rhai o'r risgiau a drafodwyd. Un o'r prif themâu a ddaeth allan o'r drafodaeth oedd adnoddau a chanolbwyntir ar hyn o fewn y Cynllun Tymor Canolig Integredig. • Y cam gweithredu olaf a ddaeth allan o'r gofrestr risg, a fydd yn cael ei ystyried yn y cyfarfod nesaf, fyddai'r risgiau hirsefydlog ar y gofrestr risg gyda'r nod o fynd i'r afael â, dileu neu roi'r wybodaeth ddiweddaraf. • Cymeradwywyd y Cylch Gorchwyl ar gyfer yr Adolygiad o Ddigwyddiadau a Dysgu Sefydliadol a fydd yn rhan greiddiol o'r pwyllgor wrth symud ymlaen. • Cynhaliwyd sesiwn ar drosolwg y rhaglen ddigidol i roi sicrwydd a dealltwriaeth ynghylch rhaglenni digidol cenedlaethol. • Darparodd Rebecca Cook sesiwn ar y rhaglen Adnoddau Data Cenedlaethol.	Derbyniwyd ar gyfer Sicrwydd	Dim i'w nodi

22Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd

Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

	• Roedd y Sesiwn breifat yn trafod materion seiber a risgiau sy'n ymwneud â'r Gofrestr Risg Gorfforaethol. Diolchodd SD i'r tîm a'r Cyfarwyddwyr Gweithredol am eu cefnogaeth yn ystod y 6 mis diwethaf. **Penderfynodd y Bwrdd:** **NODI** Adroddiad Uchafbwyntiau'r Pwyllgor Llywodraethu a Diogelwch Digidol.		
6.8	**Adroddiad Uchafbwyntiau'r Pwyllgor Taliadau a Thelerau Gwasanaeth** Tynnodd SJ sylw'r Bwrdd at y cais i gadarnhau penderfyniad y Pwyllgor Taliadau a Thelerau Gwasanaeth i dderbyn yr argymhelliad y dylid penodi'r Cyfarwyddwr Gweithredol Cyllid yn Ddirprwy Brif Swyddog Gweithredol. **Penderfynodd y Bwrdd:** **GADARNHAU** a **CHYMERADWYO** penderfyniad y Pwyllgor Taliadau a Thelerau Gwasanaethau i benodi'r Cyfarwyddwr Gweithredol Cyllid yn Ddirprwy Brif Weithredwr.	I'w Cymeradwyo	Dim i'w nodi
6.9	**Adroddiad Uchafbwyntiau'r Fforwm Partneriaeth Lleol** Gwahoddodd SJ Andrew Fletcher (AF) i gyflwyno Adroddiad y Cadeirydd o gyfarfod y Fforwm Partneriaeth Lleol (LPF) a gynhaliwyd ar 12ed Hydref 2021. Darparodd AF rai uchafbwyntiau o'r adroddiad: • Nododd y Pwyllgor adroddiad Perfformiad y Gweithlu. Hoffai'r Fforwm weld gwelliant yn y nifer sy'n derbyn gwerthusiadau er mwyn sicrhau bod staff yn cael pob cyfle i ddatblygu'n llawn. • Gofynnwyd am gynrychiolwyr hyfforddiant Gwerthuso Swyddi, a fyddai'n dileu peth o'r ddibyniaeth ar Fyrddau ac Ymddiriedolaethau Iechyd i gyflawni'r swyddogaeth hon ar gyfer Iechyd a Gofal Digidol Cymru. • Derbyniwyd yr arolwg staff diweddar. Roedd staff yn ystyried bod eu lles wedi gwella oherwydd bod ganddynt fwy o hyblygrwydd i weithio gartref. • Cefnogwyd y cynnig Prynu Gwyliau Blynyddol Yn Ôl. **Penderfynodd y Bwrdd:** **NODI** Adroddiad Uchafbwyntiau'r Pwyllgor Partneriaeth a Diogelwch Lleol am sicrwydd.	Derbyniwyd ar gyfer Sicrwydd	Dim i'w nodi
RHAN 7 – MATERION I GLOI			
7.1	Unrhyw faterion brys eraill	Trafodwyd	Dim i'w

	Ni chodwyd unrhyw eitemau pellach. Rhoddodd SJ ei ddiolch olaf i SD am ei chyfraniad i Iechyd a Gofal Digidol Cymru a dymunodd y gorau iddi ar gyfer y dyfodol.		nodi
7.2	**Dyddiad ac Amser y Cyfarfod Nesaf** – 27ain Ionawr 2022 Daeth y cyfarfod i ben am 13.40	Nodwyd	Dim i'w nodi

24Cofnodion Heb eu Cadarnhau: Cyfarfod Bwrdd
Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd 20211125

Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal

Cofnodion cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd ddydd Iau 25 Tachwedd 2021 fel cyfarfod rhithwir trwy Microsoft Teams.

🕐 14:00 i 15:00   📅 25/11/2021

Aelodau'n Bresennol	Blaenlythrennau	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
Siân Doyle	SD	Aelod Annibynnol, Cadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol	Iechyd a Gofal Digidol Cymru
Rowan Gardner	RoG	Aelod Annibynnol, Is-gadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol	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
David Selway	DS	Aelod Annibynnol, Aelod o'r Pwyllgor Llywodraethu a Diogelwch Digidol a'r Pwyllgor Archwilio a Sicrwydd	Iechyd a Gofal Digidol Cymru
Helen Thomas	HT	Prif Swyddog Gweithredol	Iechyd a Gofal Digidol Cymru
Marian Wyn Jones	MWJ	Aelod Annibynnol, Cadeirydd y Pwyllgor Archwilio	Iechyd a

		a Sicrwydd	Gofal Digidol Cymru

Yn bresennol	Blaenlythrennau	Teitl	Sefydliad
Judith Bates	JB	Cyfarwyddwr Rhaglen	Cydweithrediad Iechyd GIG Cymru
John Collins	JC	Arweinydd BBaCh, Rhaglen RISP	Cydweithrediad Iechyd GIG Cymru
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
Sophie Fuller	SF	Rheolwr Llywodraethu Corfforaethol a Sicrwydd	Iechyd a Gofal Digidol Cymru
Anouska Huggins	AH	Ymgynghorydd Prosiect	Archus UK
Carwyn Lloyd-Jones	CLJ	Cyfarwyddwr Technoleg Gwybodaeth a Chyfathrebu	Iechyd a Gofal Digidol Cymru
Dr Sian Phillips	SP	Radiolegydd Ymgynghorol	BIP Cwm Taf
Rachel Powell	RP	Dirprwy Gyfarwyddwr Gwybodaeth	Iechyd a Gofal Digidol Cymru
Julie Robinson	JR	Ysgrifenyddiaeth y Cyfarfod	Iechyd a Gofal Digidol Cymru
Michelle Sell	MS	Prif Swyddog Gweithredol	Iechyd a Gofal Digidol Cymru

Ymddiheuriadau	Teitl	Sefydliad
Grace Quantock	Aelod Annibynnol, Is-gadeirydd y Pwyllgor Archwilio a Sicrwydd	Iechyd a Gofal Digidol Cymru

2 Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru 20211125

Acronymau

Iechyd a Gofal Digidol Cymru	Iechyd a Gofal Digidol Cymru	SHA	Awdurdod Iechyd Arbennig
CEO	Prif Swyddog Gweithredol	LIC	Llywodraeth Cymru
DCT	Trosglwyddo Canolfan Ddata	NWIS	Gwasanaeth Gwybodeg GIG Cymru (NWIS)
NDR	Adnodd Data Cenedlaethol	MOU	Memorandwm Cyd-ddealltwriaeth
DPIF	Cronfa Buddsoddi Blaenoriaethau Digidol	TPP	Profi, Olrhain a Diogelu
DSPP	Gwasanaethau Digidol ar gyfer Cleifion a'r Cyhoedd	RISP	Caffael System Gwybodaeth Radioleg
CTM	Cwm Taf Morgannwg	PCC	System Archifo a Chyfathrebu Lluniau
WRIS	System Gwybodaeth Radioleg Cymru		

Rhif yr Eitem	Manylion yr Eitem	Canlyniad	I'w gweithredu gan
MATERION RHAGARWEINIOL			
1.1	**Croeso ac Ymddiheuriadau** Croesawodd Simon Jones (SJ), y Cadeirydd, aelodau'r Bwrdd i sesiwn Breifat Bwrdd Awdurdod Iechyd Arbennig (SHA) Iechyd a Gofal Digidol Cymru. Cadarnhaodd SJ, oherwydd natur fasnachol sensitif yr achos busnes amlinellol i'w drafod, fod angen cynnal y cyfarfod hwn yn unol â Rheolau Sefydlog Iechyd a Gofal Digidol Cymru oedd yn nodi'r sail i gwrdd a thrafod eitemau perthnasol yn breifat ym mharagraff 7.5.2.	Nodwyd	Dim i'w nodi
1.2	**Ymddiheuriadau absenoldeb** Nodwyd ymddiheuriadau am absenoldeb gan: • Grace Quantock	Nodwyd	Dim i'w nodi
1.3	**Datganiadau o Fuddiant**	Nodwyd	Dim i'w

3Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru 20211125

	Dim		nodi
1.4	**Materion yn Codi** Ni nodwyd unrhyw eitemau ar yr agenda caniatâd gan aelodau'r Bwrdd ar gyfer eu symud i'r prif agenda.	Trafodwyd	Dim i'w nodi
RHAN 2 - PRIF AGENDA - I'W GYMERADWYO			
2.1	**Cofnodion heb eu cadarnhau o Gyfarfod Bwrdd 30 Medi 2021 – Sesiwn Breifat** Cymeradwywyd y Cofnodion fel cofnod cywir. **Penderfynodd y Bwrdd:** **GYMERADWYO** Cofnodion y cyfarfod diwethaf.	Cymeradwywyd	Dim i'w nodi
2.2	**Caffael y System Gwybodeg Radioleg (RISP) – Achos Busnes Amlinellol** Gwahoddodd y Cadeirydd, Michelle Sell (MS), y Prif Swyddog Gweithredu i gyflwyno Caffael y System Gwybodaeth Radioleg – Achos Busnes Amlinellol. Bydd yr achos busnes amlinellol yn cael ei gyflwyno i bob Bwrdd Iechyd a Byrddau Ymddiriedolaeth perthnasol GIG Cymru ym mis Tachwedd 2021. Mae'n nodi'r achos dros newid, y buddsoddiad sydd ei angen a'r argymhelliad i symud ymlaen i gaffael i ddyfarnu contract. Mae'r achos busnes amlinellol hefyd wedi'i gyflwyno i Lywodraeth Cymru i ofyn am eu cymeradwyaeth i fwrw ymlaen a chadarnhad y byddant yn darparu'r cyllid cyfalaf o £20.6m a chyllid refeniw anghylchol o £1.2m yn ogystal â chymeradwyaeth i fynd ymlaen i gaffael yr opsiwn a ffefrir. Nododd y Bwrdd mai DHCW fydd yr Awdurdod Dyfarnu ar gyfer y Cytundeb GwasanaethauMeistr RISP newydd a bydd yn rheoli'r Contractwr ar ôl mynd yn fyw. Nododd Bwrdd DHCW y gofynnwyd i'r Bwrdd gymeradwyo'r achos busnes amlinellol: • ymrwymo i'r dull arfaethedig, gan gynnwys cefnogaeth DHCW i gaffael a gweithredu'r System Gwybodaeth Radioleg newydd a chymorth parhaus, i alluogi'r Byrddau Iechyd/Ymddiriedolaethau i gyflawni'r manteision a ragwelir. Caiff hyn ei gynnwys fel amcan yng Nghynllun Tymor Canolig Integredig DHCW ar gyfer 2022-25. • cefnogi'r penderfyniad i ymddeol y WRIS mewnol a phennu a datblygu'r integreiddio sy'n deillio o hynny i gyflawni'r llif gwaith o'r dechrau i'r diwedd.	Cymeradwywyd	Dim i'w nodi

4Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru 20211125

Bydd yr Achos Busnes Llawn a'r Contract sy'n deillio o hynny yn cael eu cyflwyno ar wahân i Fwrdd DHCW i'w cymeradwyo ar ôl cwblhau'r broses o gaffael a chadarnhau cymeradwyaeth yr Achos Busnes Llawn gan yr holl Fyrddau Iechyd ac Ymddiriedolaethau perthnasol a Llywodraeth Cymru.

Ailadroddodd MS yr angen am yr achos busnes a chyflwynodd gydweithwyr o'r Rhaglen RISP i ddarparu cyd-destun pellach.

Cadarnhaodd Dr Sian Phillips (SP) y prif sbardunau ar gyfer yr achos busnes; byddai'r Contract System Archifo a Chyfathrebu Lluniau (PACS) presennol yn dod i ben ym mis Tachwedd 2024. Nid oedd opsiwn pellach i uwchraddio o fewn telerau'r contract presennol ac roedd awydd i sicrhau ateb electronig o'r dechrau i'r diwedd a oedd yn bodloni gofynion y presennol a'r dyfodol.

Roedd y system bresennol yn caniatáu gweld delweddau ond nid eu rhannu. Fodd bynnag, byddai'r system newydd yn galluogi gweld a rhannu delweddau â phob Bwrdd Iechyd.

Sicrhawyd y Bwrdd fod y system PAC bresennol yn parhau i fod yn addas i'r diben ond gan fod y contract yn agosáu at ei derfyn, roedd y cyfle i gaffael system wedi'i diweddaru ac integredig yn cael ei chymryd.

Hysbyswyd y Bwrdd bod proses hir o'n blaenau cyn dod i gasgliad terfynol. Byddai 9 mis o gaffael ac adolygu'r hyn yr oedd gan y farchnad i'w gynnig cyn ystyried achos busnes llawn. Roedd y costau caffael a chymorth wedi'u cynnwys yn yr achos busnes amlinellol.

Gofynnodd MWJ am sicrwydd bod y rhaglen yn ddi-dor gan y byddai'n ymgorffori'r Byrddau Iechyd hynny ar y ffin â Lloegr. Cadarnhaodd RH fod gwaith wedi'i ehangu i gynnwys mabwysiadu rhyngwyneb nad yw'n radioleg ar y ffiniau agos ac un o'r cymhlethdodau oedd y byddai DHCW yn darparu un plwg safonol ond byddai gan bob awdurdod ar y gororau eu safonau a'u plygiau eu hunain.

Trafododd y Bwrdd y mater storio ac os byddai ateb cwmwl yn cael ei ddefnyddio gan fod rhai delweddau'n fawr iawn.

Cadarnhaodd RH fod arbenigedd wedi'i ennill o ran dysgu o'r rhaglen flaenorol.

Bydd angen rhywfaint o hyblygrwydd ar y materion ynghylch faint o le fydd ei angen a bydd yn cael ei arwain i ryw raddau gan y cyflenwyr yn ystod y ddeialog gystadleuol. Cadarnhaodd JC fod twf o 5% o flwyddyn i flwyddyn wedi'i gynnwys yn yr achos busnes.

Cafodd y Bwrdd gadarnhad y byddai angen mwy o waith ar ddeall y manylion technegol wrth i'r rhaglen fynd rhagddi.

5Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru 20211125

	Cafodd y Bwrdd sicrwydd nad oedd unrhyw gynigion i'r system fod ar wasanaeth cwmwl DHCW. Crynhodd RH fod y gwasanaeth radioleg yn wasanaeth 24/7 critigol a waeth bynnag a gynlluniwyd, byddai angen gweithio gyda thrydydd parti. Y manteision gwirioneddol fyddai ei fod yn system 'Cymru Gyfan' a fyddai'n galluogi i bopeth gael ei wneud mewn un man. **Penderfynodd y Bwrdd:** **CYMERADWYO** Achos Busnes Amlinellol y System Gwybodaeth Radioleg.		
2.3	**Y Gofrestr Risg Gorfforaethol – Risgiau Preifat** Gwahoddodd y Cadeirydd, Chris Darling, Ysgrifennydd y Bwrdd i gyflwyno'r Gofrestr Risg Gorfforaethol. Cadarnhaodd CD mai ymhlith y papurau oedd y risgiau seiberddiogelwch yr oedd angen eu hadolygu yn y sesiwn breifat. Roedd Llywodraethu Digidol a Diogelwch wedi craffu ac adolygu'r risgiau ar 15 Tachwedd ac roeddent yn awyddus i'r Bwrdd hefyd gael eu gweld gyda sesiwn Datblygu Bwrdd i'w chynnal ar faterion seiber. Yna gwahoddodd CD Carwyn Lloyd Jones, Cyfarwyddwr Gwybodaeth, Cyfathrebu a Thechnoleg i roi'r wybodaeth ddiweddaraf am y risgiau seiber. Nododd y Bwrdd y sefyllfa ar gyfer pob un o'r risgiau a'r camau lliniaru sy'n cael eu cymryd i fynd i'r afael â'r risgiau. **Penderfynodd y Bwrdd:** **Nodi'r** Gofrestr Risg.	Cymeradwywyd	Dim i'w nodi
RHAN 3 - MATERION I GLOI			
3.1	**Unrhyw faterion brys eraill** Dim eitemau i'w trafod	Trafodwyd	Dim i'w nodi
3.2	**Dyddiad ac Amser y Cyfarfod Nesaf** – 27 Ionawr 2022	Nodwyd	Dim i'w nodi

6Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru 20211125

Title	Date of Meeting	Business Area	Action/Decision Narrative	Action Lead	Due Date	Status/Outcome Narrative	Status
20210930-A02	30/09/2021	Performance Reporting	Stakeholder Engagement Strategy - Provision of the Key milestones and timelines for the implementation of the strategic framework.	Michelle Sell (DHCW - Chief Operating Officer)	25/11/2021	Work is underway with the Consultation Institute to finalise plan being brought to January Board. Board Briefing on the stakeholder engagement plan took place in Dec 21, and Stakeholder engagement plan is on the agenda in Jan 22 for approval by the Board.	Complete
20211125-A01	25/11/2021	Corporate Governance	Meeting to be set up to include Rebecca Cook, Rachael Powell, David Selway and Chris Darling to discuss Switching Service Risk	Chris Darling (DHCW - Board Secretary)	09/12/2021	Meeting arranged for 14th December.	Complete

Tolley, Laura
01/20/2022 12:01:25

DIGITAL HEALTH AND CARE WALES
BOARD ANNUAL CYCLE OF BUSINESS
2022/23

Agenda Item	2.4

Name of Meeting	SHA Board
Date of Meeting	27 January 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	Chris Darling, Board Secretary

Purpose of the Report	For Approval
Recommendation	

The Board is asked to:
APPROVE the DHCW Annual Cycle of Board Business for 2022/23.

Acronyms			
DHCW	Digital Health and Care Wales	SIRO	Senior Information Risk Owner
LPF	Local Partnership Forum	LINC	Laboratory Information Network Cymru
SHA	Special Health Authority		

1   SITUATION/BACKGROUND

1.1   The DHCW Board should, on annual basis, receive an Annual Cycle of Board Business which identifies the items which will be regularly presented to the Board for consideration. The annual cycle is one of the key components in ensuring that the DHCW Board is effectively carrying out its role.

1.2   A draft of the annual Cycle of Business was previously presented to the SHA Board meeting on 1st April 2021, on the first day of DHCW's establishment, this Cycle of Business was approved at the SHA Board meeting held on the 27 May 2021. It is intended that approval of the annual Cycle of Board Business will take place before the start of each new financial year.

2   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1   The Cycle of Business, attached as 2.4i, covers the period 1 April 2021 to 31 May 2022. The Cycle of Business has been developed to help plan the management of Board matters and facilitate the management of agendas and Board and Committee business.

2.2   The forward workplan, is included as item, 2.5i, will be used to identify any additional timely items for inclusion in Board business to ensure the Board are reviewing and receiving all relevant matters in a timely fashion. The forward workplan will be regularly reviewed and updated with input from the Executive Team.

3   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1   Please refer to item 2.4i (Appendix 1) – DHCW Board Cycle of Business for further detail.

4   RECOMMENDATION

The Board is asked to:
APPROVE the Board Cycle of Business.

5   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	Staff & Resources
If more than one standard applies, please list below: Effective Care	

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

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

COMMITTEE OR GROUP	DATE	OUTCOME
DHCW SHA Board	27 May 2021	Approved

IMPACT ASSESSMENT

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

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

IMPLICATION/IMPACT	
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below
	Regular strategic items to be considered by the Board are set out in the Annual Cycle of Business, many of which will require consideration of Socio-economic impact.

Tolley,Laura
01/20/2022 12:01:25

Board Annual Cycle of Business Report   Page 4 of 4

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

Digital Health and Care Wales

Special Health Authority

Cycle of Business
(1st April 2022 – 31st May 2023)

The Special Health Authority (SHA) should, on annual basis, receive a cycle of business which identifies the items which will be regularly presented for consideration. The annual cycle is one of the key components in ensuring that the Special Health Authority is effectively carrying out its role.

The Cycle of Business covers the period 1st April 2022 to 31st May 2023.

The Cycle of Business has been developed to help plan the management of Board matters and facilitate the management of agendas and committee business.

The principal role of the Special Health Authority is set out in the Standing Orders 1.0.1. The Board's main role is to add value to the organisation through the exercise of strong leadership and control, including:

- Setting the organisation's strategic direction
- Establishing and upholding the organisation's governance and accountability framework, including its values and standards of behaviour
- Ensuring delivery of the organisation's aims and objectives through effective challenge and scrutiny of the Health Authority performance across all areas of activity.

Page 1 of 3

Board Cycle of Business (1st April 2022 – 31st May 2023)

Item of Business	Executive Lead	Reporting period	Mar 2022	April 2022	May 2022	June 2022	July 2022	Aug 2022	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	April 2023	May 2023
Preliminary Matters																	
Shared Listening & Learning	Executive Medical Director	All Regular Meetings	✓		✓		✓		✓		✓		✓		✓		✓
Minutes of the previous Board Meeting	Board Secretary	All Regular Meetings	✓		✓		✓		✓		✓		✓		✓		✓
Action Log	Board Secretary	All Regular Meetings	✓		✓		✓		✓		✓		✓		✓		✓
Chairs Report *(Including affixing of the Common Seal and Chairs Urgent Action Requests)*	Board Secretary	All Regular Meetings	✓		✓		✓		✓		✓		✓		✓		✓
Chief Executive Report	Chief Executive	All Regular Meetings	✓		✓		✓		✓		✓		✓		✓		✓
Governance, Risk, Performance & Assurance																	
Adoption of corporate policies	Board Secretary	Annually and As Required	✓												✓		
Audit Wales Structured Assessment & Audit Letter (date tbc)	Board Secretary	Annually											✓				
Organisational Risk Register	Board Secretary	All Regular Meetings	✓		✓		✓		✓		✓		✓		✓		✓
Risk Management and Board Assurance Framework Strategy	Board Secretary	Annually	✓												✓		✓
Board Assurance Report	Board Secretary	All Regular Meetings (tbc)	✓		✓		✓		✓		✓		✓		✓		✓
Governance Assurance Framework	Board Secretary	Annually													✓		
Senior Information Risk Owner Annual Report	Director of ICT	Annually	✓								✓				✓		
Organisational Performance Report	Chief Operating Officer	All Regular Meetings	✓		✓		✓		✓		✓		✓		✓		✓
Approach to end of Year Reporting	Board Secretary	One off											✓				
Accountability Report	Board Secretary	Annually					✓										✓
Annual Report	Board Secretary	Annually					✓										✓
Audit & Assurance Committee Highlight Report	Board Secretary	All Regular Meetings following a Committee			✓		✓				✓				✓		✓
Audit & Assurance Committee Annual Report	Board Secretary	Annually															✓
Digital Safety & Governance Committee Highlight Report	Board Secretary	All Regular Meetings following a Committee	✓		✓				✓		✓		✓		✓		✓
Digital Safety & Governance Committee Annual Report	Board Secretary	All Regular Meetings following a Committee	✓												✓		
Remuneration and Terms of Service Committee Highlight Report	Board Secretary	As required at all Regular Meetings following a Committee	✓		✓		✓		✓		✓		✓		✓		
Remuneration and Terms of Service Committee Annual Report	Board Secretary	Annually	✓												✓		

Page 2 of 3

Item of Business	Executive Lead	Reporting period	Mar 2022	April 2022	May 2022	June 2022	July 2022	Aug 2022	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	April 2023	May 2023
Local Partnership Forum Highlight Report	Board Secretary	As required at all Regular Meetings following a meeting of the Forum	✓		✓		✓		✓		✓		✓		✓		✓
Local Partnership Forum Annual Report	Board Secretary	Annually	✓												✓		
Workforce & Organisational Development																	
Welsh Language Scheme (Standards) Annual Report	Board Secretary	Annually			✓												✓
Equality & Monitoring / Strategic Equality Plan	Chief Operating Officer	Annually			✓												✓
Planning																	
Integrated Medium Term Plan – Approval	Chief Operating Officer	Annually	✓										✓		✓		
Annual Plan Progress Updates	Chief Operating Officer	All Regular Meetings	✓		✓		✓		✓		✓		✓		✓		✓
Half Year Performance Against Plan	Chief Operating Officer										✓						
Emergency Planning Annual Report	Chief Operating Officer	Annually	✓												✓		
Engagement Strategy	Chief Operating Officer	As required													✓		
Performance Management Framework	Chief Operating Officer	As required													✓		
Finance																	
Monthly Finance Reports	Executive Director of Finance	All Regular Meetings	✓		✓		✓		✓		✓		✓		✓		✓
Annual Statutory Accounts	Executive Director of Finance	Annually					✓										
Strategic Procurement Report	Chief Operating Officer	All Regular Meetings	✓		✓		✓		✓		✓		✓		✓		✓
Board Effectiveness																	
Approval of the Standing Orders	Board Secretary	One off			✓												
Annual Review of the Standing Orders	Board Secretary	Annually	✓												✓		
Board Cycle of Business (Period April 23 – March 24)	Board Secretary	Annually											✓				
Board Effectiveness Self-Assessment	Board Secretary	Annually	✓												✓		

Tolley, Laura
01/20/2022 12:01:25

DIGITAL HEALTH AND CARE WALES
FORWARD WORKPLAN REPORT

Agenda Item	2.5

Name of Meeting	SHA Board
Date of Meeting	27 January 2022

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

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

Purpose of the Report	For Noting
Recommendation	

The Board is being asked to:
NOTE the content of the report.

Acronyms			
DHCW	Digital Health and Care Wales	WIDI	Wales Institute for Digital Information
SHA	Special Health Authority	R&I	Research and Innovation
MOU	Memorandum of Understanding	POSA	Provision of Service Agreement
IMTP	Integrated Medium-Term Plan	Q2	Quarter 2

1   SITUATION/BACKGROUND

1.1   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.

2   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1   There have been a number of updates to the forward workplan since the last meeting:

The following are the additional items for the January meeting:
- SAIL Memorandum of Understanding (via CEO Report)
- Audit Wales Baseline Governance Review Report
- DHCW and NHS Digital Memorandum of Understanding and Provision of Service (via CEO Report)

The following have been moved to the March meeting:
- DHCW and Social Care Wales Memorandum of Understanding
- DHCW and Wales Institute of Digital Information Memorandum of Understanding
- Senior Information Risk Owner Report
- Covid-19 Inquiry Update
- Emergency Planning Annual Report
- Policy Update
- Progress of the Recruitment Taskforce

3   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1   A number of 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. The Committee development session identified an additional report to provide greater assurance on behalf of

the Board on those Programmes of greatest material risk to the delivery of the planned objectives.

3.2   Please see attached the updated forward workplan at item 2.5i Appendix A.

4   RECOMMENDATION

The Board is being asked to:
NOTE the content of the report.

5   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		

APPROVAL/SCRUTINY ROUTE:

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

COMMITTEE OR GROUP	DATE	OUTCOME
Board	November 2021	Noted

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

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
	Both the RIS Procurement and the Contract awards will have financial implications for the organisation.
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

Tolley Laura
01/20/2022 12:01:25

Item 2.6i Appendix A - Digital Health and Care Wales Board Work Programme

Meeting Date	*Standing items*	*Governance*	*Additional items*
27th January 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 • Local Partnership Forum (LPF) Highlight Report • Financial Report • Risk Management and Board Assurance Framework Report • Strategic Procurement Report	• Governance Assurance Framework • Board Annual Cycle of Business • End of year reporting arrangements 21/22	• Audit Wales Structured Assessment • Performance Framework • Stakeholder Engagement Plan • IMTP Approval • Audit Wales report NHS Staff Wellbeing report 'Taking Care of the Carers' • SAIL Memorandum of Understanding • Audit Wales Structure Assessment Baseline Review Report • DHCW and NHS Digital Memorandum of Understanding and Provision of Service Agreement
31st March 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 • Local Partnership Forum (LPF) Highlight Report • Financial Report	• Annual Board effectiveness self-assessment Report • Annual Audit and Assurance Committee effectiveness self-assessment • Annual Digital Governance and Safety Committee effectiveness self-assessment • Annual Remuneration and Terms of Service Committee effectiveness self-assessment • Annual Local Partnership Forum Advisory Group effectiveness self-assessment	• Covid-19 Inquiry Update • Senior Information Risk Owners Annual Report • DHCW and Social Care Wales Memorandum of Understanding • DHCW and Wales Institute of Digital Information Memorandum of Understanding • Emergency Planning Annual Report or March Consent • Progress of the Recruitment Taskforce

	• Risk Management and Board Assurance Framework Report • Strategic Procurement Report • Organisational Learning Framework Review	• Policy Update • DHCW Standing Orders Review	
26th May 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		•

DIGITAL HEALTH AND CARE WALES
END OF YEAR REPORTING ARRANGEMENTS
2021-22

Agenda Item	2.6

Name of Meeting	SHA Board
Date of Meeting	27 January 2022

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

Executive Sponsor	Chris Darling, Board Secretary
Prepared By	Sophie Fuller, Corporate Governance and Assurance Manager
Presented By	Chris Darling, Board Secretary

Purpose of the Report	For Noting
Recommendation	
The Board is being asked to: **NOTE** the arrangements for the Annual Report 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

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
MA	Manual for Accounts	AGM	Annual General Meeting

1 SITUATION/BACKGROUND

1.1   The purpose of this report is to set out the proposed arrangements to meet national end-of-year reporting requirements for corporate governance.

1.2   The SHA is required to submit its Annual Report including its Accountability Report to Welsh Government following the commencement of the new financial year, after which the documents are to be received at its Annual General Meeting.

1.3   This will be the first year DHCW will submit an Annual Report as a statutory body, this report sets out the proposed arrangements to comply with these requirements.

2 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

1.1   Annual Report 2020-2021 - The Manual for Accounts (MfA) sets out that all NHS organisations are required to publish as a single unified document, a three-part Annual Report and Accounts which includes:

- The Performance Report
- The Accountability Report
- The Financial Statements

2.1   The Performance Report provides information on the entity, its main objectives and strategies and the principal risks it faces. The performance report must provide a fair, balanced and understandable analysis of the entity's performance, in line with the overarching requirement for the annual report and accounts to be fair, balanced and understandable.

The Performance Report will require contributions from senior leaders in the organisation as well as the Executive Directors and will be used to communicate to the public and other stakeholders.

There are numerous topics that will be included, additional focus on the DHCW Covid-19 response and the transition to inclusion in Business as Usual will play a key part.

1.2   The Accountability Report is designed to meet the key accountability requirements to Welsh Government and comprises of the following elements:

- Corporate Governance Report
- Remuneration and Staff Report and

- A National Assembly for Wales Accountability and Audit Report

1.3 The Financial Statements comprises of the audited Annual Accounts, this will be managed by the Finance department and incorporated into the final document. Arrangements are being made to ensure additional Audit and Assurance Committees are planned to enable scrutiny and approval in appropriate time.

1.4 The Annual General Meeting (AGM) is planned for July 2022, the information from the Annual Report will be shared with the public, giving an opportunity for reflection, celebration and identification of key learning points for the future. Plans are being made for a virtual event, at this stage, but also allowing for the option of in-person attendance event.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 There is no requirement for 2021/22 to produce a separate annual quality statement or a sustainability report.

3.2 Plan and Timescales

As previously stated, the Annual Report requires input from a number of senior leaders in the organisation, a task and finish group will be established in the coming weeks to assign the requirements to the relevant leads and ensure timely delivery of the information and alignment with the required approvals from the DHCW Board and relevant Committee.

Below is a high-level timeline.

Activity	Due Date
Draft accounts due to Welsh Government and Audit Wales	April 2022
Integrated draft report due to Welsh Government and Audit Wales to include performance, accountability report and remuneration report	May 2022
Final Annual Report including accounts due to WG by Audit Wales	15 June 2022

4 RECOMMENDATION

The Board is being asked to:
NOTE the arrangements for the Annual Report 2021-22

5 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:

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: An EQIA will be undertaken on the Annual Report once complete.		

Workforce EQIA page

APPROVAL/SCRUTINY ROUTE:

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

COMMITTEE OR GROUP	DATE	OUTCOME
Management Board	14 January 2022	Noted

IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below
	Evidence suggests there is correlation between governance behaviours in an organisation and the level of performance achieved at that same organisation. Therefore, ensuring good governance within the Special Health Authority supports quality and safety.
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
	No, there is no direct impact on resources as a result of the

WORKFORCE IMPLICATION/IMPACT	activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below
	The Annual Report should highlight any areas of improvement in relation to socio economic duty

Tolley,Laura
01/20/2022 12:01:25

DIGITAL HEALTH AND CARE WALES
VALUE BASED HEALTH CARE

Agenda Item	3.1

Name of Meeting	SHA Board
Date of Meeting	27 January 2021

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

Executive Sponsor	Rhidian Hurle, Executive Medical Director
Prepared By	Dr Sally Lewis, National Clinical Lead for VBHC in Wales
Presented By	Dr Sally Lewis, National Clinical Lead for VBHC in Wales

Purpose of the Report	For Discussion/Review
Recommendation	

The Board is being asked to:
DISCUSS the Shared listening and learning presentation.

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
VIH	Value In Health	VBHC	Value Based Health Care

1   SITUATION/BACKGROUND

1.1   Digital Health and Care Wales 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.

1.2   The 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.

2   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1   The presentation for the January Board meeting is from a health and care professional perspective and focuses on the Value Based Healthcare Programme. This is the all-Wales Programme striving towards achieving a Value-Based Health Care approach across NHS Wales in support of Prudent Healthcare principles.

2.2   A Healthier Wales the Welsh Government's Plan for Health and Social Care sets out the need for services to change so they can meet the challenges of the future and help deliver the best results for patients in Wales.

It indicates that the NHS needs to find new, flexible, and smarter ways of providing services. In particular, health and care services should deliver better outcomes that matter to people. By talking to people about what they want, and what treatment might or might not be able to achieve, health care becomes more personalized and people feel more involved in decisions about their own care.

In most healthcare systems clinical data is routinely collected, however, patients have limited opportunities to provide information on their own perception of outcomes, symptoms, priorities, and experiences. The Value in Health Programme is working to help solve this. The Welsh Value In Health Centre Strategy is included at item 3.1i Appendix B.

Shared Listening and Learning Report - VBHC   Page 2 of 4   Author: Sally Lewis
Approver: Rhidian Hurle
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

2/4   51/303

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

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

4 RECOMMENDATION

The Board is being asked to:
DISCUSS the Shared listening and learning presentation.

5 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objective 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		

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

COMMITTEE OR GROUP	DATE	OUTCOME
Rhidian Hurle	Jan 2022	Approved

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 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

Delivering value and improving outcomes
The critical role of DHCW

Dr Sally Lewis

National Clinical Lead for VBHC in Wales

Honorary Professor Swansea School of Medicine

@RslewisSally

Definition: Value-based healthcare is the equitable, sustainable and transparent use of the available resources to achieve better outcomes and experiences for every person

Tolley, Laura
01/20/2022 12:01:25

Hurst L, Mahtani K, Pluddemann A, Lewis S, Harvey K, Briggs A, Boylan A-M, Bajwa R, Haire K, Entwistle A, Handa A and Heneghan C CEBM, University of Oxford

GIG CYMRU NHS WALES | Gwerth Mewn Iechyd | Value In Health

How do we reach this point?

Person-Centred Health Care (PCHC)
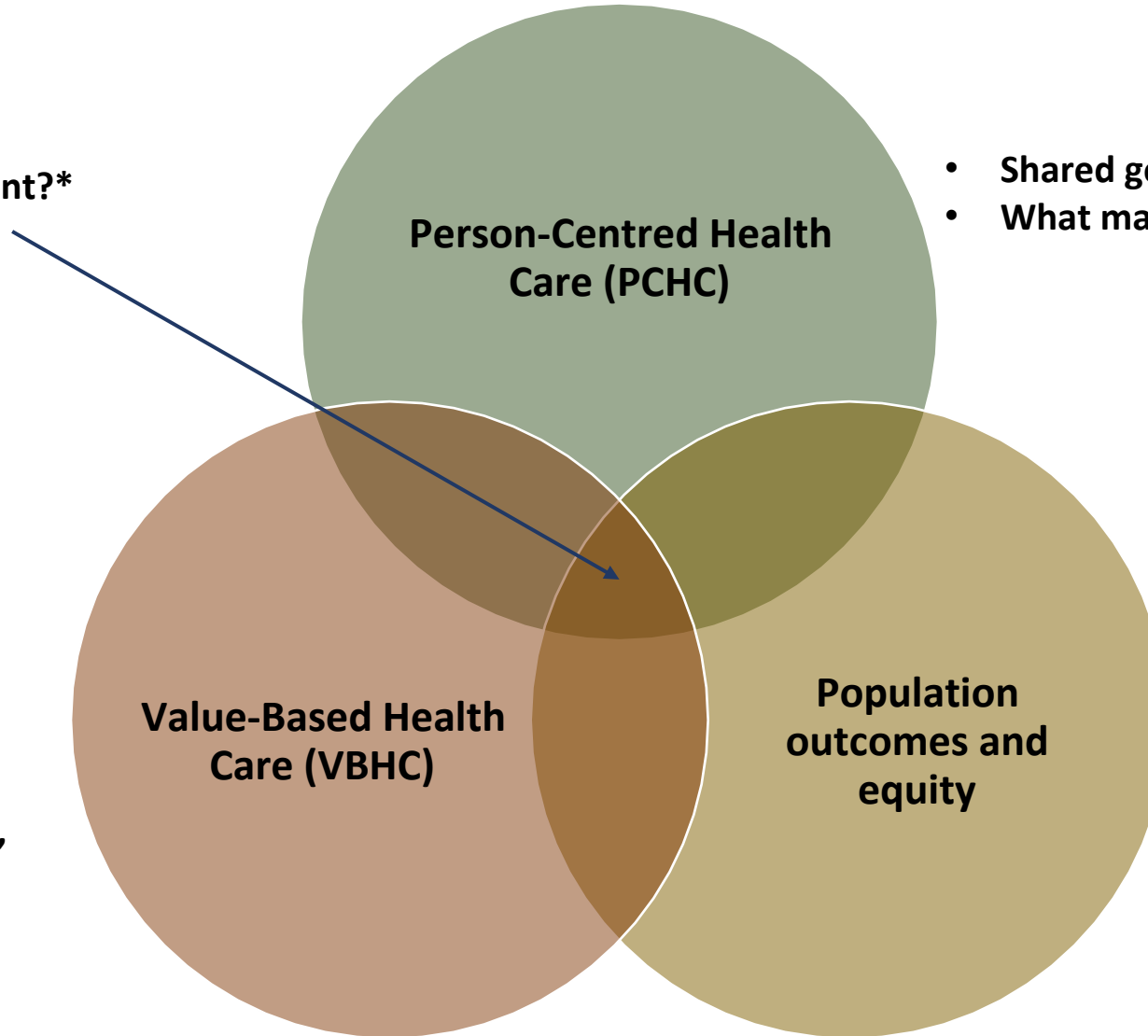
- **Shared goal-setting and decision making.**
- **What matters to me.**

Value-Based Health Care (VBHC)

- **Achieving the best outcomes with the available resources for individual conditions.**
- **Unwarranted variation, waste and harm.**
- **Quality Improvement**
- **New models of care.**

Population outcomes and equity

- **The greatest quantum of health gained for the whole population.**
- **Issues of equity.**
- **Affordability and sustainability.**

https://www.sprink.co.uk/pcvbhc-report/

Achieving outcomes for patients, achieving sustainability

Patient factors

- Raise health literacy
- Support healthy behaviours towards prevention and optimisation of quality of life
- Support shared understanding of medicine- towards the best choices
- Supported self-management

Healthcare factors

- Financing for value, optimum allocation and prioritisation of resources, incentivising best practice
- Decrease unwarranted variation and low value care
- Optimum positioning of drugs and devices
- Tailoring treatment to the individual's goals and context including preferred place of care
- New models of care, digital health, releasing capacity in the system
- Focus on meeting true need and reducing inequities

GIG CYMRU NHS WALES | Gwerth Mewn Iechyd | Value In Health

Our enablers – where do we need to be?

Our enablers facilitate the delivery of value-based care across the whole pathway of care, for the whole population of Wales, equitably.

Digital Health
- Routine outcome data sharing
- Maturity of National Data Resource
- Improved digital communication with patients

Education, Communication and Engagement
- Leading a culture of stewardship
- Intensive learning academy
- Website, conference, webinars

Research, industry and strategic partnerships
- Value in Health research group
- HTA

Impact – delivering value
- National clinical framework
- Reduce unwarranted variation and low value care
- Financing for value – a toolkit
- An outcomes driven approach to planning

Person-centred care
- Health literacy (OHOK)
- Shared decision making
- Participation

Implementation
- Community of practice
- PROMs implementation
- Costing methodology

GIG CYMRU NHS WALES | Gwerth Mewn Iechyd | Value In Health

DHCW value touchpoints

- Essential data work – standards, processing
- Data visualisation – Welsh Clinical Portal, All Wales data tools
- Standard reporting products
- Information governance

- Digital Services for Patients and the Public –
- creating the environment for trusted, secure, usable
- patient-generated data

- The Value in Health website

- Advanced Analytics

Toller, Laura
01/20/2022 12:01:25

Welsh Value in Health Centre

Our Strategy to 2024

Enabling a whole system approach to value-based healthcare for Wales.

Tolley,Laura
01/20/2022 12:01:25

WHAT'S INSIDE...

Tolley,Laura
01/20/2022 12:01:25

FOREWORD FROM DR SALLY LEWIS

There are many ways to deliver increased value for patients across the system and everyone has a part to play in improving outcomes: patients, clinical teams, operational management, informatics and finance, in our healthcare organisations.

Some of these value-based approaches are relatively small and straightforward, being within the power of patients and their clinicians to achieve on their own. Others require large transformational change. For example, we know that radical changes to the way we deliver healthcare will be necessary if we are to deliver the outcomes that matter to people with the resources that we have.

New models of care frequently require not only cultural, professional and organisational change, but also the building of infrastructure and policy levers to allow those changes to be enacted and embedded.

Over the last 18 months, we have all faced challenges because of the Covid-19 pandemic. Value-based healthcare was important prior to the pandemic, but we now face a healthcare system that is under unprecedented levels of pressure and has many people who have suffered non-Covid related harm due to having difficulty, accessing healthcare through the pandemic.

Embedding a value-based approach across the entire healthcare pathway is vital. We need to focus on how we use our resources wisely to get the best possible outcomes for as many people as possible over the coming months and years.

A positive that has emerged through the pandemic is the acceleration of digital transformation throughout NHS Wales. We have seen the exchange and use of information operate at a scale like never before. We have seen new uses for existing systems and the emergence of new systems to best support our response to Covid-19 here in Wales.

This offers some real opportunities for us at the Welsh Value in Health Centre. We are now able to utilise more data to answer the questions that can be the catalyst for improved patient outcomes. Digital literacy has improved amongst the population as a whole, which creates more opportunities for us to introduce the use of patient reported experience and outcome measures to more healthcare pathways, further embedding value-based healthcare across NHS Wales.

As the Welsh Value in Health Centre, we will continue to work with key stakeholders across the healthcare sector in Wales and Welsh Government, to facilitate all of the necessary changes to health and care infrastructure to make this happen.

Dr Sally Lewis

Director of the Welsh Value in Health Centre, National Clinical Lead for Value Based and Prudent Healthcare and Honorary Professor at Swansea School of Medicine

FOREWORD FROM PAUL MEARS

I would like to welcome the Welsh Value in Health Centre to Cwm Taf Morgannwg University Health Board. The programme has made great progress over the last few years, embedding value-based healthcare across NHS Wales. Hosting a programme which has already been recognised internationally for its work is really exciting for Cwm Taf Morgannwg University Health Board and I have no doubt that the team led by Dr Sally Lewis, will continue to go from strength-to-strength as they deliver the areas of focus outlined in this strategy.

Many Health Boards and Trusts in Wales have already set up dedicated teams to focus on value-based healthcare. Under the stewardship of the Welsh Value in Health Centre, these teams will be delivering initiatives throughout the healthcare pathway that improve the outcomes that matter most for patients, staff and the wider population.

I look forward to working with the team and providing strategic guidance and support, as the importance of value-based healthcare to the success and sustainability of our system is further realised.

Thank you.

Paul Mears

CEO Cwm Taf Morgannwg University Health Board and Strategy Lead for Prudent and Value Based Healthcare

Tolley,Laura
01/20/2022 12:01:25

INTRODUCTION

The Value in Health programme set out an initial Action Plan in 2019 with the aim of embedding value-based healthcare across healthcare delivery in NHS Wales. Since then, considerable progress has been made creating an environment with a focus on outcomes that matter to patients along with changes to infrastructure to create a more data-driven system. The programme encompassed the national PROMs programme from July 2019 and is now able to take the implementation of value-based healthcare in Wales to the next stage with the creation of the Welsh Value in Health Centre, under the sponsorship of the Director of Technology, Digital and Transformation in the Welsh Government's Health and Social Services Group.

In April 2021, Cwm Taf Morgannwg University Health Board was formally requested by Welsh Government to host the Value in Health programme, its Director and core staff. This request was acknowledged by the Cwm Taf Morgannwg University Health Board on 1 July 2021, subject to final agreement. The CEO of Cwm Taf Morgannwg University Health Board will also Chair the Value in Health Strategy Board.

Tolley,Laura
01/20/2022 12:01:25

OUR VISION, MISSION AND PRINCIPLES

Our Vision ● ● ● ● ● ●

To achieve World leading health outcomes for the people of Wales in a financially sustainable way.

Our Mission ● ● ● ● ● ●

To provide leadership, support, expertise and strategic direction across NHS Wales that drives better outcomes for patients in a way that is sustainable in the long-term.

Our Principles

Three main principles underpin who we are at the Welsh Value in Health Centre:

We are connected

We cannot achieve our programme goals in isolation. We rely on other organisations, programmes and teams to achieve a value-based healthcare system for Wales. The need to connect, share and work together are key to our future success.

We are positive

Improving outcomes for the people of Wales is at our core. Positivity, improvement and development are vital characteristics for the programme.

We are strong

Our team is full of talented individuals, but our collective strength enables us to collaborate and work towards shared goals.

OUR KEY PARTNERS

● Digital Health and Care Wales

Digital Health and Care Wales (DHCW) has a dedicated value-based healthcare team who work closely with the Welsh Value in Health Centre to give Health Boards and Trusts the mechanism to implement value-based approaches to healthcare within their own organisations. Our work with DHCW is focussed in two main areas. Firstly, the creation of data tools that bring clinical audit to life, along with other information products that support value-based decision making. Secondly, the development of an ecosystem for patient facing technology through the Digital Services for Patients and Public (DSPP) programme.

● Cedar

Cedar is supporting the Welsh Value in Health Centre by providing analytical and evaluation capacity, advising on PROMs selection, use, licenses and administration, and supporting the production of outputs and reports for presentations, conferences and publications. As the Welsh Value in Health Centre Research Group, their role requires collaboration with a broad range of stakeholders including patients, clinicians, Health Board and Welsh Government representatives for both local and national projects.

● Finance Delivery Unit

The Finance Delivery Unit (FDU) is playing a significant role at the heart of the Welsh Value in Health Centre. Their team is passionate about the principles of value-based healthcare and the part they can play inw improving outcomes for patients. They are involved in value-based projects across all aspects of the programme and the wider healthcare system in Wales.

● Health Boards and Trusts

The programme has been working with Health Boards and Trusts since 2018 to establish a value-based approach to healthcare in Wales. Today, the programme has a whole system approach that is embedding value-based healthcare as the way NHS Wales optimises available resources. Using technology to measure what matters most to people, ensuring activity is data-driven and focussed on improving patient outcomes.

Continued overleaf

OUR KEY PARTNERS

● The Value-Based Health and Care Academy

The Value-Based Health and Care Academy at Swansea University is the first of its kind, globally, dedicated to supporting leaders and organisations in the successful adoption of value-based healthcare. The Academy works alongside the Welsh Value in Health Centre and is affiliated with the European Alliance for Value in Health.

● Life Sciences Hub Wales

The life sciences sector has a key role co-growing the value-based healthcare ecosystem by supporting collaborative approaches to develop and implement innovative products and services into health and social care systems.

Tolley,Laura
01/20/2022 12:01:25

● Health Technology Wales

Health Technology Wales will contribute significantly by appraising the scientific evidence to inform technology adoption and disinvestment decisions. This will encourage best use of the scarce resources available to invest in health and social care technologies, and maximise the health gain they offer for the people of Wales.

● National Data Resource

Within Digital Health and Care Wales, the National Data Resource (NDR) programme is a strategic imperative for health and care in Wales and an essential component of the Digital Architecture Review. It underpins delivery of the commitments made in ***A Healthier Wales: Our Plan for Health and Social Care (2018)*** with goals to deliver a more joined up approach to health and care data across Wales. It will support the timely and seamless data flows required by the Welsh Value in Health Centre.
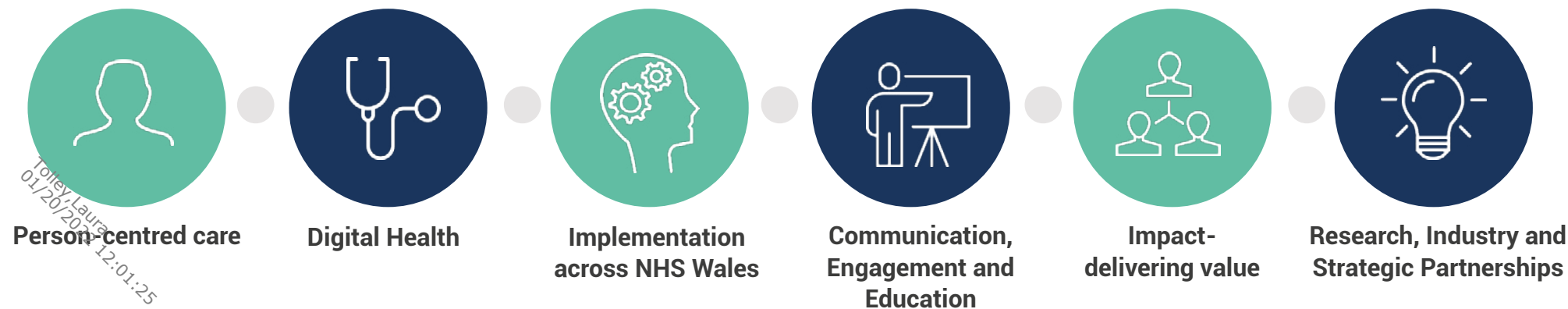
OUR AREAS OF FOCUS

There are opportunities to embed a value-based approach at every stage of the healthcare pathway, many great examples of which have already been introduced by teams across Wales. Working with our partners, we will expand our programme reach to enable the delivery of value-based healthcare throughout the entire pathway, for the whole population of Wales, equitably.

| Prevention | Early accurate diagnosis | Optimising intervention | Supportive treatment | End of life care |

Our initial programme goals have evolved over the last few years, so as we move forward and the proliferation of value-based healthcare grows, we will now have six key areas of focus.

| Person-centred care | Digital Health | Implementation across NHS Wales | Communication, Engagement and Education | Impact-delivering value | Research, Industry and Strategic Partnerships |

PERSON-CENTRED CARE

We are all unique individuals and each person is an 'expert in their own life' with different goals, preferences and aspirations for their care. Active involvement in our own care improves our outcomes whether that is through health behaviours or confident management of our chronic conditions. To do this we need to be able to access the information we need and be supported to make the choices about treatments that will achieve our health goals, whatever they may be and at every stage of life. We need to be able to navigate the healthcare system to access the help that we need at the right time.

We will be focussed on:

- Training and embedding shared decision making into clinical practice.
- Patient education and information to support health literacy and healthy lifestyle choices.
- Patient-focused research into patient-reported outcome measures.
- Consulting with patient organisations.
- Understanding the impact on patients of new models of care.

Tolley,Laura
01/20/2022 12:01:25

DIGITAL HEALTH

Value-based healthcare demands a data-informed approach to decision making at all levels, whether that is to support shared decision-making in the consultation, for quality improvement in a service, for resource allocation or for research.

A key aspect is the capture of patient reported outcomes. These structured and commonly codified questionnaires are important status reports about the symptom burden and quality of life of an individual on a given day. They can be an important tool to support care and therefore must be embedded technically across our healthcare information system to be accessed by patients and their clinicians in support of new models of care.

Tolley, Laura
01/20/2022 12:01:25

We will be focussed on:

- Triangulating information – outcome, costing and process data together. This is so that we can understand what is happening in our system and find solutions to increase value for patients.

- Continuing to bring clinicians and analysts together to start answering some of the key questions affecting today's NHS, so that we may become effective stewards of finite resources and improve outcomes at an individual and a population level. Leveraging good quality data. We are already addressing the digital and technical issues associated with the capture of patient reported outcomes in direct care.

- Making data available in clinical systems and be able to be extracted and linked to other data for analysis in support of service improvement. This detailed work requires partnership working between the Welsh Value in Health Centre and our key partners to ensure a seamless approach to tackling all of the relevant issues including data standards, semantic interoperability and information governance.

IMPLEMENTATION ACROSS NHS WALES

Many Health Boards have now formed their own value-based healthcare teams internally and much is to be gained through collaboration with them and sharing of good practice. Our Community of Practice is one channel that is already supporting this.

The Welsh Value in Health Centre has a role to play in providing leadership, advice and input on their selection of patient reported outcome measures (PROMs), translation requirements and licensing for the networks, as well as costing methodology.

The Welsh Value in Health Centre will also provide a 'train the trainer' approach to value-based project management for national networks interested in PROMs deployment along with advice on value-based approaches to pathway redesign.

We will be focussed on:

- Growing the Community of Practice across Wales, capturing best practice and writing case studies from which others may learn and implement their own value-based healthcare approaches.

- Ensuring a coordinated approach to national PROMs through the expertise of Cedar within the Welsh Value in Health Centre Research Group.

- Maintaining close relationships with the Finance Delivery Unit to align costing activity with the strategic aims of the programme.

- Create a consistent set of toolkits, frameworks, models and case studies to support the implementation of value-based healthcare across Wales.

- Encouraging and embedding the use of data and raising data literacy for all.

Tolley,Laura
01/20/2022 12:01:25

COMMUNICATION, ENGAGEMENT AND EDUCATION

Value-based healthcare is as much a cultural change as a technical one. It requires constant communication of the principles, so that clarity of purpose is understood and a common language, which draws together professionals from all disciplines, as well as patients and the public.

As the programme has developed, more formal approaches to education have become necessary. This has resulted in the creation of the Intensive Learning Academy for Value-Based Health and Care at Swansea University.

We will be focussed on:

- The evolution of our website as a single access point on all value-based healthcare activities in Wales, and highlighting the work of value-based healthcare teams across our Health Boards and Trusts. The website will be our content hub for all things related to the Welsh Value in Health Centre. It will also play a key role in enabling people to access our standard reporting tools (dashboards) and toolkits to support value-based healthcare implementation.

- Growing our communication channels and delivering content to our audiences that is engaging, relevant and exciting. Content that highlights the work of the Welsh Value in Health Centre and the value-based healthcare projects being delivered by Health Boards and Trusts in Wales too.

- Enhancing our schedule of events throughout the year to include webinars, seminars and conferences. This is to celebrate value-based healthcare exemplars, launch new data products, create discussion about value-based healthcare issues such as data management and technology, and to lead cultural change.

- Introducing a memorandum of understanding and close working relationships with the Intensive Learning Academy (ILA) to ensure the ethos of the Welsh Value in Health Centre is maintained and the ILA has a pipeline of Welsh case studies to draw upon and teach.

- Leading and creating the momentum around a culture of stewardship amongst all professional groups in NHS Wales.

Tolley,Laura
01/20/2022 12:01:25

IMPACT - DELIVERING VALUE

The implementation of value-based healthcare is a large cultural and transformational change that has grown from the grass roots in Wales, as a delivery mechanism for **_Prudent Healthcare_**. The principles are important in underpinning the way we reshape our services to meet the evolving needs of our population in Wales. As we learn and evolve the way all parts of the system will have a part to play, from policy through to clinical encounters. The value-based approach underpins the delivery of the **_National Clinical Framework_** in supporting the creation of a Learning Health and Care system.

This area of focus will determine the success of the value-based healthcare approach in Wales.

We will be focussed on:

- Publishing evidence of improved outcomes and/or optimised resource allocation across the whole pathway (prevention through to end of life).

- Offering support for exemplar projects which demonstrate how cultural and infrastructural change to a value-based healthcare approach can improve outcomes and create a more sustainable healthcare delivery that meets the evolving needs of our population.

- Developing new approaches to 'financing for value'.

- Undertaking evidence based evaluations of new models of care prior to scaling.

- Evidencing the use of an outcome-focussed approach to planning and service configuration.

Tolley,Laura
01/20/2022 12:01:25

RESEARCH, INDUSTRY AND STRATEGIC PARTNERSHIPS

Implementing value-based healthcare across a system is difficult and is a long-term endeavour. Strategic partnerships are necessary and helpful to create momentum for change and to provide support for overcoming barriers to delivering value, which may be universal.

There are still many unknowns worldwide regarding the implementation of value-based healthcare. In Wales, we are well placed to collaborate academically and conduct research into multiple aspects of value-based healthcare. Some of this will be led in house by our experts at Cedar, some will be conducted by the Intensive Learning Academy at Swansea University, and some will be carried out with other academic partners across Wales, the United Kingdom and worldwide.

This is important both to ensure we take an evidence-based approach to the implementation of all aspects of value-based healthcare in Wales and to maintain Wales' reputation as a leader in this field.

A key part of value-based healthcare is the optimum positioning of drugs and medical devices to support pathways of care. In an ideal world, procurement of these products should be based on the outcomes delivered. This is a true aspiration across Wales but turning enthusiasm into commitment is a problem that is being grappled with around the world. We have found it helpful to link these conversations to the research and innovation agenda.

Partnerships with Life Sciences Hub Wales, Health Technology Wales and the National Data Resource are essential to ensure that new medical devices are shown to be of high value in the Welsh context as the outcomes achieved are intrinsically linked to how clinical pathways should be configured.

Tolley,Laura
01/20/2022 12:01:25

Continued overleaf

RESEARCH, INDUSTRY AND STRATEGIC PARTNERSHIPS

We will be focussed on:

- The Welsh Value in Health Centre Research Group providing in-house capacity to lead service evaluations and research projects across Wales. This will facilitate evidence-based decision making and build strategic links with research and industry partners.

- The Welsh Value in Health Centre (Partnering for Value) group, providing advice and guidance, around a 'single front door' into Wales, a clear roadmap on how to develop, innovate and design strategic partnerships based on value.

- Continuing to work in partnership with the World Economic Forum and the Organisation for Economic Co-operation and Development (OECD).

Tolley,Laura
01/20/2022 12:01:25

Thank you

Tolley,Laura
01/20/2022 12:01:25

Canolfan Gwerth mewn Iechyd Cymru   ●●●●●●   Welsh Value in Health Centre

DIGITAL HEALTH AND CARE WALES
CHAIR'S REPORT

Agenda Item	4.1

Name of Meeting	SHA Board
Date of Meeting	27 January 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 content of this 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

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
RISP	Radiology Information System Procurement	OBC	Outline Business Case
WIS	Welsh Immunisation System	TTP	Test, Trace, Protect
DHEW	Digital Health Ecosystem Wales	IMTP	Integrated Medium-Term Plan
MS	Member of the Senedd		

1 SITUATION/BACKGROUND

1.1 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.

2 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1 Radiology Information System Procurement (RISP) – Outline Business Case (OBC)

In-line with our Standing Orders any decisions taken by the Board in private should be reported to the next Public Board meeting. At the Private Board meeting held on the 25 November 2021 the SHA Board approved the Radiology Information System Procurement (RISP) Outline Business Case (OBC). The minutes from this meeting can be found in the Board pack for today's meeting.

2.2 Covid-19 and System Pressures

I start my report by acknowledging the significant pressure the health and care system has been under since our last public Board meeting. As well as the significant increase in Covid-19 Omicron cases, system pressures have dominated discussions. The past few months continue to underline the complex and challenging issues facing our health and care system in Wales. DHCW have worked hard to respond to changing requirements particularly in relation to the Vaccination Information System (WIS) and the Test, Trace, Protect (TTP) Programme, and continuing to support the national digital infrastructure at this critical time.

2.3 Induction Meetings

I have continued to have many induction meetings since coming into post. Since the last Board meeting, I have met with:

- DHCW Board Members and staff members of DHCW
- DHCW Programme Leads

- NHS Wales Chairs and wider NHS Wales stakeholders
- Health and Care partner organisations
- Digital Health Ecosystem Wales (DHEW) partner organisations
- Voluntary Sector leaders
- Representatives of local government
- Members of the Senedd – Mark Isherwood MS introductory meeting, Russell George MS introductory meeting

These meetings are ongoing, and it will take several months to meet as many of DHCW's partners and stakeholders as possible. Inductions held with other Health Body Chairs have all been extremely positive, with all keen to work with DHCW to pilot new initiatives, and all understand the importance of standardisation. I am very grateful to those who have given their time to date.

2.4 NHS Wales Chair and Chief Executive Ministerial Meeting 25 November

A meeting with the Minister for Health and Social Services took place with all NHS Body Chairs and Chief Executives. Helen and I attended the meeting straight after our last SHA Board meeting on the 25 November 2021. The agenda focussed on a number of issues including the Covid-19 pandemic and response, winter planning, system pressures and shifting of resources. The Minister was also keen to express her thanks to all NHS staff, I would like to extend this thanks on behalf of the Board to all DHCW staff who are working hard to support the heath and care system during extremely challenging times.

2.5 DHCW Independent Member Vacancy

As I updated verbally at our last Board meeting, Siân Doyle stood down as an Independent Member of the DHCW Board with effect from the 30 November 2021. I extend my thanks to Siân for her input to the DHCW Board during her time with us. We are working closely with the Public Appointments Unit in Welsh Government to get this vacancy out to advert as soon as possible to ensure we have a full complement of Independent Members.

2.6 DHCW Digital Governance and Safety Committee Chair

As a result of Siân Doyle stepping down as an Independent Member and Chair of the Digital Governance and Safety Committee, I have since met with Committee members to discuss the Committee Chair role moving forward. I am delighted that Rowan Gardner, Independent Member has agreed to take on the Digital Governance and Safety Committee Chair role, having previously been the Vice Chair. In addition, David Selway, Independent Member has agreed to take on the Vice Chair of the Committee. I would like to thank both Rowan and David for their support in ensuring we continue to develop the Digital Governance and Safety Committee.

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

2.7 DHCW Board Briefings

A number of Board briefing sessions have taken place since the last Public SHA Board meeting. These have been very useful and generated some excellent discussions, as well as ensure we are briefed as a Board on numerous key areas, the briefings held included a focus on:

- **The DHCW Stakeholder Engagement Plan** following the approval of the Stakeholder Engagement Strategy at the September DHCW Board meeting
- **The Performance Management Framework** and approach to performance monitoring of DHCW business
- **Race Equality Action Plan** provided to Board members by Welsh Government
- **Covid-19 Inquiry** briefing provided by NHS Wales Shared Services Legal and Risk Service
- **DHCW Research and Innovation** briefing

2.8 Board Development

On the 6 January we held our Board Development Day. The session built on the previous Board Development Day held on the 4 November and explored a number of critical areas including developing DHCW's mission and vision, we broke into groups to start to articulate and develop a vision statement for DHCW, we were also able to review the draft Integrated Medium-Term Plan (IMTP) 2022/25 and finally we had a discussion to receive informal feedback from Audit Wales on the key themes from the Baseline Governance Review. I would like to thank Board members and the staff who attended the day for their engagement and input to a very productive Board Development Day.

2.9 Executive Director Appointments

I am delighted we have appointed to the two vacant Executive Director Board posts to complete the officer complement of voting Board members, more information on these appointments are included in the Chief Executive update report.

2.10 Meeting with Lee Waters, MS

On the 6 December I had a very useful and productive introductory meeting with Lee Waters, MS and the Minister for Health and Social Services. Lee has a particular interest in digital and we discussed the unique role DHCW has in leading digital transformation in health and care.

2.11 Independent Member Digital Network

As previously reported DHCW will be facilitating an all-Wales Independent Member Digital Network, the first meeting of this network is scheduled to take place on Wednesday 26 January, more information on this network and the future work of this group will come back to future Board meetings.

3   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1   The appointment to the vacant DHCW Independent Member role timeframes are dictated by the Public Appointments Unit, but it is hoped the role will be out to advert imminently.

4   RECOMMENDATION

The Board is asked to:

NOTE the content of the report.

5   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.	

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

COMMITTEE OR GROUP	DATE	OUTCOME

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

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

Tolley,Laura
01/20/2022 12:01:25

DIGITAL HEALTH AND CARE WALES
CHIEF EXECUTIVE'S REPORT

Agenda Item	4.2

Name of Meeting	SHA Board
Date of Meeting	27 January 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 content of this 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

Acronyms				
CEO	Chief Executive Officer	SHA	Special Health Authority
DHCW	Digital Health and Care Wales	TTP	Test, Trace, Protect
DC	Data Centre	WIS	Welsh Immunisation System
IMTP	Integrated Medium-Term Plan	SRO	Senior Responsible Officer
NWIS	NHS Wales Informatics Service	SCW	Social Care Wales
MS	Member of the Senedd	IMTP	Integrated Medium-Term Plan
MOU	Memorandum of Understanding	POSA	Provision of Service Agreement
SAIL	Secure Anonymised Information Linkage	FEDiP	Federation for Informatics Professionals

2   SITUATION/BACKGROUND

2.2   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.

2.3   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)

3.2   Re-establishment of the DHCW Emergency Response Structure

The significant increase in Covid-19 Omicron cases, along with the policy change regarding the vaccination booster programme has meant that DHCW has re-established its emergency response structure to ensure we are able to respond to changing requirements particularly in relation to the Vaccination Information System (WIS) and the Test, Trace, Protect (TTP) Programme, and to support the national digital infrastructure and systems whilst the health and care system is under considerable pressure and strain.

3.3   Data Centre Transition

The Data Centre Transition Project's main aim was to transition the data infrastructure held in Data Centre 1 (DC1), to a hybrid of a new data centre location and Cloud services. This aim has been achieved, via completed activities across the three main workstreams. The safe and resilient migration of the remaining services from DC1 to the new DC3 has taken place within the timeframe to migrate by the 31 December 2021. The project is now in the process of being closed. A project closure and lessons learnt report was received at the Management Board meeting held on the 14 January 2022, and this will be discussed in detail at the Digital

Governance and Safety Committee next month. I would like to take this opportunity to thank all those staff within DHCW for their hard work and dedication in progressing this project as well as all stakeholders for their support and input throughout the project.

3.4 E-prescribing Update

In August 2021 Welsh Government agreed funding for the e-Prescribing Programme to be hosted by DHCW, planning then began to establish the Programme governance arrangements and map the required deliverables for inclusion in the DHCW Integrated Medium-Term Plan (IMTP). DHCW have now appointed the Programme Director, who is due to take up post at the end of January 2022. Other key appointments have also been made including Senior Responsible Officer (SRO) & Deputy SRO, Programme lead, Lead Technical Architect and Programme Managers amongst many others. A Steering Group has been in place since the autumn, chaired by the Programme Sponsors, to oversee the setup of the governance arrangements and support early progress. The new Governance arrangements are expected to be in place from February 2022.

3.5 UK Four Nations Digital Health and Care Strategic Meeting

On the 30 November I met with colleagues from the relevant digital health and care organisations (NHS and government) for the four UK nations to share knowledge, learning and approaches to some of the key issues facing digital in health and care. We discussed a number of topics including:

- Data sharing and information governance
- Cyber security
- Workforce capability and strategy
- Supplier engagement

In addition, we agreed areas for ongoing collaboration on key priority areas. Further meetings are planned.

3.6 Executive Director Recruitment

The Executive Director of Digital Operations and Executive Director of Digital Strategy roles were advertised by recruitment partner Global Resourcing, these roles were interviewed for in December 2021, and I am pleased to confirm the successful appointment into these roles. Both appointments bring a depth of experience and fresh perspectives and will play a major role in helping DHCW take forward our ambition as an organisation. Both these appointments will take up their positions in early April 2022.

In addition to these appointments, the role of Director of People and Organisational Development will be interviewed for at the end of January 2022, and we are in the process of getting the final outstanding Director role advertised, the Director of Primary, Community and Mental Health Digital Services.

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

3.7 Security Vulnerability Incident

In December, a zero-day and easily exploited major vulnerability was announced in Log4j - a widely utilised logging system. DHCW immediately initiated activities to identify and mitigate the vulnerabilities in our systems and helped coordinate the wider response for NHS Wales. Additional vulnerabilities have since been identified with the Log4j system and DHCW teams continue to identify and mitigate as needed.

3.8 Welsh Government Joint Executive Team Meeting

A meeting with the Joint Executive Team in Welsh Government took place on Friday 10 December. The discussions covered the below topics:
- Governance and the development of the SHA Board
- This year's plan (2021/22), performance, risks, and challenges
- IMTP 2022/25 development
- DHCW's role supporting recovery
- The data promise
- The DHCW funding position

The DHCW Senior Leadership in attendance shared the achievements of the year to date, gave an overview of the current position including our key Projects and Programmes, the key challenges, and risks for the organisation and the emerging IMTP priorities for 2022/25. Overall, the feedback was positive and encouraging.

3.9 Betsi Cadwaladr University Health Board Strategic Engagement Session

On the 8 December 2021 the DHCW Senior Leadership team met with colleagues from Betsi Cadwaladr University Health Board. The session was attended by the Betsi Cadwaladr Chief Executive and members of the Executive and Senior Leadership team. The key priorities emerging from the Betsi Cadwaladr Digital Strategy and IMTP were discussed, as well as the DHCW priorities and how DHCW can best support Betsi Cadwaladr UHB over the coming months and years.

3.10 Improvement Cymru Directors Discussion

On the 12 January 2022 myself and the DHCW Directors met with John Boulton, Director of Improvement Cymru and his colleagues to discuss the collaborative opportunities for DCHW and Improvement Cymru to work together on a number of areas including linking the DHCW Research and Innovation work with Improvement Cymru as well as taking learning on the Quality Management approaches Improvement Cymru can offer. I would like to thank John and colleagues for their time to explore areas for national collaboration.

3.11 Step into Health Pledge / Armed Forces Covenant

The NHS Wales Informatics Service (NWIS) had previously signed the Step into Health Pledge

via Velindre NHS Trust. The Step into Health Pledge is about connecting employers in the NHS to talent from the Armed Forces community. I am pleased to say on behalf of DHCW I have recently signed up to the Step into Health Pledge for Digital Health and Care Wales.

In addition, NWIS were signed up to the Armed Forces Covenant as Velindre NHS Trust were signed up to this initiative. The Covenant is a voluntary pledge from organisations that wish to demonstrate their support for the Armed Forces. The pledge is made to serving members of the armed forces, reservists and veterans and covers access to services and employment. I have also signed up to the Armed Forces Covenant for Digital Health and Care Wales.

3.12 Federation for Informatics Professionals (FEDIP) Charter

The Federation for Informatics Professionals (FEDIP) in health and social care brings individuals and organisations together to unlock potential in the informatics community. I provided DHCW's support to the FEDIP charter, demonstrating our support to the informatics profession and the importance of professional development.

3.13 Senedd Health and Social Care Committee Responses

During the period since the last Board meeting DHCW have submitted two responses to the Health and Social Care Committee, the first related to 'a healthier Wales: our workforce strategy for health and social care', where we were asked our views on the role of Digital Health and Care Wales in delivering a digital-ready health and care workforce, our response was submitted to the Committee on the 16 December 2021.

The second submission related to The Committee's inquiry into 'the impact of the waiting times backlog on people in Wales who are waiting for diagnosis or treatment'. Where DHCW were asked to provide information in relation to information on waiting times dashboard/information, and any other measures that would either help to manage the waiting times backlog, or improve communication with, or the information available to, people who are currently waiting for diagnosis or treatment. DHCW worked closely with colleagues in Public Health Wales and the NHS Wales Delivery Unit (DU) to provide a response on the 13 January 2022.

3.14 Secure Anonymised Information Linkage (SAIL) Appliance Memorandum of Understanding (MOU)

DHCW and Swansea University have a longstanding relationship in respect of the provision of Trust Third Party service by DHCW to the SAIL Databank. SAIL is a wholly owned product of Swansea University. A new appliance for the provision of TTP services is being implemented, which shall serve to provide for all TTP service currently provided by DHCW to Swansea University and shall operate to provide the deidentification services for data processed under the Digital Economy Act 2017.The purpose of the MOU is to set out the intentions of the Parties and the roles and responsibilities in relation to the Appliance related to installation,

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

services to be provided, maintenance and access to data for the purposes of servicing the Appliance.

3.15 Memorandum of Understanding (MOU) and Provision of Service Agreement (POSA) with NHS Digital

DHCW has been directed by the Welsh Ministers to carry out functions in relation to the provision or promotion of effective digital platforms, systems, and services, including arrangements for the digital collection, storage, processing, analysis, use and dissemination of health service data. This involves working with NHS Digital in England to ensure information flows are appropriately managed and shared to ensure safe and effective care across the system. An MOU and POSA have been drafted to capture the related activities for both parties to ensure clarity of purpose and seamless delivery of services.

The POSA is a framework memorandum of understanding setting out the key principles of the collaboration arrangements agreed and the services to be delivered by NHS Digital to Digital Health and Care Wales/NHS Wales. The term of the POSA is from 01st April 2021 – 31st March 2024. The POSA is not intended to be contractually binding nor will it give rise to any other legally enforceable rights or obligations. The framework memorandum of understanding was considered and approved by the DHCW Management Board on the 14 January 2022.

4   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

4.2   There are no items for escalation to the Board.

5   RECOMMENDATION

The Board is asked to:
NOTE the content of the report.

6   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

Chief Executive's Report – January 2022   Page 6 of 7   Author: Chris Darling
Approver: Helen Thomas
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

6/7   89/303

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: Safe Care Effective Care	

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

APPROVAL/SCRUTINY ROUTE:

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

COMMITTEE OR GROUP	DATE	OUTCOME
Management Board	14.01.22	Approval of the MOU POSA

IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below
	Appointments to the Board will ensure oversight of all areas of the business ensuring the quality and safety of operational services.
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 is a financial implication for the appointment of the DHCW Executive Directors.
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

DIGITAL HEALTH AND CARE WALES
STRATEGIC DEVELOPMENTS UPDATE - INCLUDING INTEGRATED MEDIUM-TERM PLAN 2022-2025 PROGRESS UPDATE

Agenda Item	5.1

Name of Meeting	SHA Board
Date of Meeting	27 January 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 Discussion/Review
Recommendation	
The Board is being asked to: **DISCUSS** and **NOTE** the progress in taking forward a number of strategic developments including the DHCW three-year plan (IMTP) 2022-2025.	

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

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

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
WG	Welsh Government	IMTP	Integrated Medium-Term Plan

1 SITUATION/BACKGROUND

1.1 The Board have received updates on a number of strategic priority areas over the past two meetings including:

- The DHCW Stakeholder Engagement Strategy – approved at the September Board meeting and the Stakeholder Engagement Plan is on the agenda for today's Board meeting.
- Cloud Strategy – update provided on progressing this strategy at the September and November Board meetings.
- Architecture Strategy – update provided at the November meeting.
- National Data Resource Data Strategy – update provided at the November meeting.
- Integrated Medium Term Plan – update provided at the November Board meeting in addition to Board Development sessions held in November and January.

1.2 Producing a 3-year IMTP is a statutory requirement from Welsh Government and requires approval by the Minister for Health and Social Services. The NHS Wales Planning Framework 2022-2025 guidance was published on 09 Nov. The key objectives of the IMTP are to describe the priorities which DHCW will be working on to support the needs of patients and the NHS which can be met with available finance and resources.

1.3 This document updates Board members on progress in these strategic development areas.

2 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1 Strategic Engagement Update

Since the publication and approval of the stakeholder engagement strategy, a stakeholder engagement plan has been developed, which will be covered as agenda item 5.2, but this focus emphasises the importance and priority we are giving to collaboration and engagement as we develop as an organisation.

2.2 Cloud Strategy Update

The Cloud strategy group continues to meet weekly and has completed the strategic cloud principles that are documented in a cloud strategic paper that is being finalised. At the same time the group has spent time translating the cloud strategy into the Annual Plan with focus in

Author: Chris Darling
Approver: Helen Thomas
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

the following key areas:

- The fit and alignment to the National Data Platform and the Product approach to systems management and development.
- Cloud governance arrangements including the fit with the Welsh informatics Assurance Group (WIAG) and the importance of financial and commercial controls.
- Commercial strategies that fit the strategic principles
- The options in relation to the current data centre footprints and re-procurement

The above will enable the financial business case to be developed and finalise for submission where appropriate for funding.

2.3 Architecture Strategy Update

The main actions to establish an Open Digital Architecture commence with defining a set of Architecture Building Blocks to facilitate the open architecture. Following presentation of the Architectural Building Blocks, and an initial review period, as reported previously to the Board, the Architectural Building Blocks have been out for a further period of final consultation. All comments and feedback have been reviewed and incorporated into final versions. Assurance been provided by the National Data Resource Technical Steering Group on the 12 January 2022. The Architectural Building Blocks will go to the Welsh Technical Standards Board on the 18 January 2022 followed by the National Data Resource Board for approval, this is scheduled for the 20 January 2022.

2.4 National Data Resource Data Strategy

In September 2021, the NDR Programme Board approved the procurement of a partner to support the development of a Data Strategy. The strategy will enable the delivery of the data and analytical capabilities for Wales aligned to the NDR's strategic aims. The Data Strategy Project is in week 9 of its 12-week plan, the following components are now signed off and complete:

- As-is Assessment and Strategic Objectives
- Vision, Strategic Objectives and Target State

The following components are developed and pending approval by the Steering Group:

- Governance Models & Operating Processes
- To be architecture Design and Technology Appraisal

Four All Wales workshops have been held with regular meetings with the Strategy Steering Group comprising of stakeholder representation.
The next steps are to initiate the final phase of the strategy – Recommendations, Strategic Roadmap and High-Level Implementation plan by the week commencing 31st January 2022.

Author: Chris Darling
Approver: Helen Thomas

2.5 Integrated Medium-Term Plan 2022/25

The IMTP has been drafted but DHCW are awaiting confirmation of financial allocations before a final draft can be circulated.

The structure and key content of the plan was shared at a Board Development session on 06 Jan 2022. A robust discussion took place looking at the approach, assumptions, and risks to the plan. A dependency was noted in relation to work on the DHCW Strategy regarding the Vision and Mission text. The draft document will be circulated to the SHA Board for an early review ahead of the next Board Development Session on 03 March 2022.

Attached is a diagram showing the DHCW planning approach with key areas of activities over coming months. The original timescale for sign off of the IMTP was end January 2022 but due to further pressures from Covid-19, Welsh Government have amended the submission date to 31 March 2022.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 The current operating environment in the health and care system is highly dynamic, particularly in relation to the ongoing response to the Covid-19 pandemic and the strategic

Author: Chris Darling
Approver: Helen Thomas

development activity described in this report maybe affected if resources are moved to respond to unplanned operational pressures.

4   RECOMMENDATION

The Board is being asked to:

DISCUSS and **NOTE** the progress in taking forward a number of strategic developments including the DHCW three-year plan (IMTP) 2022-2025.

5   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 9001
If more than one standard applies, please list below:	

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

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

APPROVAL/SCRUTINY ROUTE:

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

PERSON/GROUP	DATE	OUTCOME
DHCW Board Meeting	25.11.21	Noted
Board Development Day	06.01.22	Discussed

Author: Chris Darling
Approver: Helen Thomas

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

Tolley,Laura
01/20/2022 12:01:25

Author: Chris Darling
Approver: Helen Thomas

DIGITAL HEALTH AND CARE WALES
STAKEHOLDER ENGAGEMENT ACTION PLAN

Agenda Item	5.2

Name of Meeting	SHA Board
Date of Meeting	27 January 2022

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

Executive Sponsor	Michelle Sell, Chief Operating Officer
Prepared By	David Sheard, Asst Director of Service Transformation
Presented By	Michelle Sell, Chief Operating Officer

Purpose of the Report	For Approval
Recommendation	

The Board is being asked to:

APPROVE the Stakeholder Engagement Action Plan.

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority

1   SITUATION/BACKGROUND

1.1   The Board of Digital Health and Care Wales approved their first <u>Engagement Strategy</u> on 30th September 2021. The purpose of this document is to set out an Action Plan to support the implementation of the Strategy. It covers some preparatory actions (2021/22) and details for Year one (2022/23) and with some forward planning for year two (2023/24).

2   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1   The Engagement Strategy covers external stakeholders. The content and priorities were informed by a series of external stakeholder interviews, focus groups and other activities with partner organisations. These took place between June and September 2021 and were facilitated by the Consultation Institute (as set out in Appendix 1 of the full strategy).

2.2   The Action Plan is set out in full in Appendix 1 and themes are summarised below (Table 1).

Table 1 Themes underpinning external stakeholder engagement plan

Themes	Explanatory notes	Lead (s)
A. Communications	Communications will be critical to the delivery of key elements of the plan. This will include developing key messages, promoting opportunities to engage, feeding back from engagement activities and deliberations on functions and vision.	Chief Executive / Head of Communications
B. Engagement	Specific engagement activities such as surveys, workshops, digital and non-digital approaches, co-design align to purpose and stakeholders.	Chief Operating Officer
C. Equalities and Inclusions	Digital approaches are often presented as utopia or dystopia but are neither. Whether in the delivery of services or engagement activities the needs and preferences of patients and public need to be understood.	Executive Directors Programme Leads
D. Leadership and Skills	Recognising the importance that digital capability is an enabler and requires leadership to embed at scale ensuring 'no one left behind.' This will require understanding of digital skills and taking actions to support and address.	Director of People / Executive Director of Digital Strategy (CDO)

E. Evaluation, Innovation and Research	Keeping up to date with current insights and /or commissioning any research and evaluation to support strategic delivery.	Medical Director
F. Stakeholder Management	Ongoing attention to prioritisation of stakeholders aligned to activities and active monitoring of interests and influences including any shifts in opinions.	Chief Operating Officer
G. Knowledge Exchange	Creating opportunities to share knowledge, skills and learning both to influence and to be influenced.	Board Members and Senior Leadership Team
H. Governance	Align our strategies both internally and externally with that of our partners so collectively understand direction of travel. Having mechanisms in place to monitor the delivery of the action plan and embed the principles and approaches as set out in the engagement strategy.	Chair, Chief Executive and Board Secretary

Each theme has a series of actions aligned to stakeholders, engagement approaches and identified leads with indicative timeline and resources using a standard action plan template:

Theme[1]	Actions Required[2]	Stakeholders[3]	Engagement[4] Approaches	Lead(s)[5] / Partners[6]	Timescale[7]

2.3   By March 2022 we will put in place a performance framework to assess whether we have met our engagement objectives and implemented our engagement plan for 2022/23. This will consider both process measures (what actions we took) as well as outcome measures (contribution to delivering of Annual Plan and organisational objectives). This is likely to include commissioning a sentiment survey, interviews or focus groups with external stakeholders. The outputs from discussions in 2021/22 will provide baseline information in relation to corporate reputation and strategic direction.

2.4   Developing our overarching Board Strategy and understanding our partners priorities will prompt further refinement. The plan will need to remain flexible to reflect any changes in priorities or other relevant strategies and circumstances. The Engagement Plan will, therefore,

---

[1] Actions have been grouped in the plan under a series of themes as described in Table 1.
[2] Specific actions currently identified to implement the stakeholder engagement strategy.
[3] Align actions to specific stakeholders broken down by categories and profiles as set out in the engagement strategy.
[4] Specific method(s) that will be used to engage with stakeholders. This will vary depending on the purpose and the stakeholder using digital and non-digital approaches.
[5] Senior member of Digital Health and Wales with strategic responsibility for ensuring timely delivery or adjustments.
[6] External organisations where collaboration has been agreed such as Health Education and Improvement Wales, Chief Digital Officers (Health, Welsh Government and Local Government)
[7] Each action or suite of actions has been assigned an indicative timescale aligned to planning year: Q1, Q2, Q3 and Q4

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

be regularly refreshed and annually through our appropriate board governance structures, and in partnership with stakeholders.

2.5   In year one key activities will include:

- Review existing meetings and fora to align with Stakeholder Engagement Strategy
- Align Management Board Members with Welsh Government Policy Leads
- Create the Independent Members Digital Network
- Agree Programme of work with Patients and Public Assurance Group
- Align our strategies with that of our partners to collectively understand direction of travel
- Align overarching Board Strategy to inform strategic engagement (priority, timing, and resources)
- Build links to understand the current scope of digital exclusion.
- Commission and conduct work to set a baseline measures to monitor effectiveness of engagement activities
- Develop a performance framework
- Develop Patient and Public 'Get Involved' focus groups based on the Digital Services for Patient and Public engagement work and invite public to register to be involved.
- Develop Workforce Strategy to build the knowledge and skills to improve digital capabilities and leadership
- Engage on future strategic directions (Annual Plan, Strategy refresh etc.).
- Establish secure online fora for discussion around planning and priorities
- Publish Stakeholder Engagement Strategy and Plan with any appropriate graphics (including Welsh language)
- Sign up to the Welsh National Digital Inclusion Charter

3   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1   Based on the stakeholder feedback (internally and externally) it was highlighted that further work was required to clarify some elements of the new organisation's core purpose (or functions). It was also highlighted that there is a need to develop a Vision which better reflects what we do, and it should resonate with both public and professionals alike.

3.2   Further immediate actions will be to clarify purpose/functions for the organisation, produce vision and values and confirm the model of leadership and support to ensure the strategy gets successfully delivered.

4   RECOMMENDATION

The Board is asked to:

APPROVE the Stakeholder Engagement Action Plan.

5   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	Choose an item.
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:	
Choose an item.		Outcome:
Statement: The Action Plan will support the delivery of other key work streams some of which will require Impact Assessments		

Workforce EQIA page

APPROVAL/SCRUTINY ROUTE:		
Person/Committee/Group who have received or considered this paper prior to this meeting		
COMMITTEE OR GROUP	DATE	OUTCOME
DHCW Board Development Session	8th December 2021	The plan was reviewed and discussed. A new revision incorporating the above was circulated to all attendees on 16th December 2021, prior to this submission to the Management Board
DHCW Management Board	14th January 2022	Approved

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
	Commitment is agreed to resource a DHCW Engagement lead. Stakeholder Management Software is recommended and will be investigated.
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below
	Increased use of digital solutions may have implications for the workforce.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report
	Engagement should facilitate new approaches to delivering services including working from home and the development of Community Hubs which could impact positively.

Tolley,Laura
01/20/2022 12:01:25

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

Item 5.2i Appendix 1

Digital Health and Care Wales
External Stakeholder Engagement

Draft Action Plan
2021/22 – 2023/24

Version 0.4 | 15 December 2021

Tolley,Laura
01/20/2022 12:01:25

1

1. Introduction

The Board of Digital Health and Care Wales approved their first [Engagement Strategy](#) on 30th September 2021[1]. It is set out in eight sections:

1. Strategic context
2. Methodology
3. Our engagement: purpose, scope, aims and objectives
4. What will we engage our stakeholders on?
5. Who are our stakeholders?
6. Our approach to engagement
7. Developing and delivering our engagement plan
8. Performance review

In approving the strategy, it was recognised further work was required to develop an engagement plan (section seven of the published strategy document). By March 2022 we will also put in place a performance framework to assess whether we have met our engagement objectives and implemented our engagement plan for 2022/23. This will consider both process measures (what engagement activities we took) as well as outcome measures (contribution to delivery of Annual Plan and organisational objectives). This is likely to include commissioning a sentiment survey with stakeholders. The outputs from Focus Groups and stakeholder interviews carried out in 2021/22 by the Consultation Institute will provide baseline information in relation to corporate reputation and strategic direction[2]. This will be repeated in 2022/23.

The purpose of this document is to set out an Action Plan to support the implementation of the Strategy. It covers some preparatory actions (2021/22) and details for Year one (2022/23) and with some forward planning for year two (2023/24).

As a board our strong belief is that by successfully implementing our external stakeholder engagement strategy it will contribute to meeting Digital Health and Care Wales's objectives. In turn this will contribute to the wider delivery of health and social care across Wales.

---

[1] To understand the context of the Draft Action Plan it should be considered in conjunction with the Engagement Strategy.
[2] The methodology for carrying out stakeholder focus groups and interviews is set out in Appendix one of the Engagement Strategy document.

2

Scope, aim and objectives of our stakeholder engagement strategy and action plan

The focus of our strategic engagement activities is on our external stakeholders with an overall aim to achieve a higher level of collaboration creating opportunities to both influence and be influenced. To deliver this we have set out four objectives:

- To achieve a proficient level of awareness and understanding of our work among stakeholders
- To influence the work of our stakeholders
- To provide effective opportunities for stakeholders to influence our work
- To explain where stakeholder input was effective and, where it has not

Developing our overarching Board Strategy and understanding our partners priorities will prompt further refinement. The plan will need to remain flexible to reflect to any changes in priorities or other relevant strategies and circumstances. The Engagement Plan will, therefore, be regularly refreshed as well as annually through our appropriate board governance structures, and in partnership with stakeholders. Strategic Internal engagement will also need to be discussed. The structure of the Plan is as follows:

Action Plan Headings	Description
Theme	Actions have been grouped in the plan under a series of themes as described in the Action Plan.
Actions required	Specific actions currently identified to implement the stakeholder engagement strategy.
Stakeholders	Actions aligned to specific stakeholders broken down by categories and profiles as set out in the engagement strategy.
Engagement Approaches	Specific method(s) that will be used to engage with stakeholders. This will vary depending on the purpose and the stakeholders using digital and non-digital approaches.
Lead(s)	Senior member of Digital Health and Wales with strategic responsibility for ensuring timely delivery or adjustments. Three of the identified 'leads' are currently not in position: Director of Digital Strategy, Director of People and Engagement Lead. Interim arrangements will be put in place should there be delays in making appointments.
Partner(s)	External organisations where collaboration has been agreed such as Health Education and Improvement Wales.
Timescale	Each action or suite of actions has been assigned an indicative timescale aligned to planning year: Q1 (Apr-Jun); Q2 (Jul-Sep); Q3 (Oct-Dec); Q4 (Jan-Mar).

Draft Action Plan | Preparatory Year one (2021/22)

3

Theme	Action required	Stakeholders	Engagement Approaches	Lead(s) / Partners	Timescale
Ref 1/ 1.1 A-Communications	• Ensure Communications Strategy links with Engagement Strategy.	Internal		Board Secretary Head of Communications	Year 1 Q4 (Jan–Mar)
Ref 1/1.2 A-Communications	• Establish process for ongoing discussion around Digital Health and Care Wales planning and priorities.	NHS Wales Organisations Welsh Government Patient and Public	Online fora	Board Secretary Head of Communications	Year 1 Q4 (Jan–Mar)
Ref 1/ 1.3 A-Communications	• Oversee development of key messages to support implementation of Engagement Strategy.	Internal NHS Wales Organisations Welsh Government		Chair / Chief Executive Board Secretary Head of Communications Independent Member	Year 1 Q4 (Jan–Mar)
Ref 1/ 1.4 A-Communications	• Oversee publication of Stakeholder Engagement Strategy and Plan with any appropriate graphics (including Welsh language).	NHS Wales Organisations Welsh Government Patient and Public		Chief Executive Board Secretary Head of Communications	Year 1 Q4 (Jan–Mar)
Ref 1/ 1.5 A-Communications	• Prepare for, sign up and then promote the Welsh National Digital Inclusion Charter.	Internal Patients and Public Assurance Group	Internal Newsletters Social Media	Chief Executive / Chief Operating Officer Digital Communities Wales Digital Inclusion Alliance Wales	Year 1 Q4 (Jan–Mar) Year 2 Q1
Ref 1/ 1.6 A-Communications	• Scope approach to strengthen relationships with media.	Internal		Chair / Chief Executive Board Secretary Head of Communications Independent Member	Year 1 Q4 (Jan–Mar)
Ref 1/ 2.1 B-Engagement - Strategic	• Agree programme of work with Patients and Public Assurance Group.	Patients and Public Assurance Group	Discussion at Group	Chief Operating Officer/National Clinical Informatics Lead - Public	Year 1 Q4 (Jan–Mar)
Ref 1/ 2.2 B-Engagement - Strategic	• Align Digital Health and Care Wales strategies with that of partners to collectively understand direction of travel.	NHS Wales Organisations Welsh Government	Established regular meetings	Chair / Chief Executive / Board Secretary	Year 1 Q4 (Jan–Mar) Year 2 Q1 (Apr–Jun)

4

Ref 1/ 2.3 B-Engagement - Strategic	• Align Management Board Members with Welsh Government Policy Leads.	Welsh Government	Established regular meeting	Chair / Chief Executive	Year 1 Q4 (Jan–Mar)
Ref 1/ 2.4 B-Engagement - Strategic	• Align Stakeholder Engagement Plan to existing meetings and fora.	As per Stakeholder Maps	Established regular meetings	Chief Operating Officer / Board Secretary	Year 1 Q4 (Jan–Mar)
Ref 1/ 2.5 B-Engagement - Strategic	• Create and support the Independent Members Digital Network with NHS Wales.	Internal NHS Wales Organisations Welsh Government	Established regular meeting	Chair / Independent Members / Chief Executive / Board Secretary	Year 1 Q4 (Jan–Mar) Year 2 Q1 (Apr–Jun)
Ref 1/ 2.6 B-Engagement - Strategic	• Develop approaches based on the Digital Services for Patient and Public engagement work to promote involvement and user insights.	As per Stakeholder Maps	'Get Involved' focus groups On-line feedback routes Surveys	Patients and Public Assurance Group National Clinical Informatics Lead - Public	Year 1 Q4 (Jan–Mar) Year 2 Q1 (Apr–Jun)
Ref 1/ 2.7 B-Engagement - Strategic	• Engage on future strategic direction (Annual Plan, Strategy refresh etc).	NHS Wales Organisations Welsh Government	Established regular meeting Workshops	Chair / Chief Executive / Chief Operating Officer / Board Secretary	Year 1 Q4 (Jan–Mar) Year 2 Q1 (Apr–Jun)
Ref 1/ 3.1 C-Equalities, Inclusion, and accessibility	• Build links to understand the current requirements to support digital inclusion.	Digital Communities Wales Patients and Public Assurance Group	Meetings and workshops Feedback from established groups	Chief Operating Officer National Clinical Informatics Lead - Public	Year 1 Q4 (Jan–Mar) Year 2 Q1 (Apr–Jun
Ref 1/ 5.1 F-Stakeholder Management	• Ongoing Stakeholder Mapping including.	As reflected in Stakeholder maps	Meetings and small workshops	Chief Operating Officer	Year 1 Q3 (Oct–Dec) Year 1 Q4 (Jan–Mar)
Ref 1/ 5.2 H-Governance	• Agree Job Description, Resources etc to appoint Engagement Lead.	Internal	Interview	Chief Operating Officer	Year 1 Q4 (Jan–Mar) Year 2 Q1 (Apr–Jun)
Ref 1/ 7.1 H-Governance	• Approve Stakeholder Engagement Plan.	Board Meeting	Board Development Board Meeting 27 January	Chief Operating Officer	Year 1 Q3 (Oct-Dec) Year 1 Q4 (Jan–Mar)
Ref 1/ 7.2 H-Governance	• Develop Performance Framework.	NHS Wales Organisations Welsh Government Research and Evaluation Bodies	Board Development Board Meeting 31 March	Project Group overseeing delivery	Year 1 Q4 (Jan–Mar) Year 2 Q1 (Apr–Jun)
Ref 1/ 7.3	• Establish small project group to	Internal	One to one discussions	Chief Operating Officer	Year 1 Q4 (Jan–Mar)

5

H-Governance	oversee implementation of Action Plan including measure and monitoring.		Workshops		
Ref 1/ 7.4	• Review Executive Leads overseeing sections of the Action Plan.	Executive Directors	Executive Director Meetings	Chief Executive	Year 1 Q4 (Jan–Mar)

Tolley,Laura
01/20/2022 12:01:25

6

Year two (2022/23) and Year three (2023/24)

Theme	Action required	Stakeholders	Engagement Approaches	Lead(s) / Partners	Timescale
Ref 2/ 1.1 A-Communications	• Publish Stakeholder Engagement Strategy and Plan.	NHS Wales Organisations Welsh Government Patient and Public	Direct email to named leads, information on Digital Health and Care Wales website, news item including link to register interest	Chief Executive / Board Secretary / Head of Communications	Year 2 Q1 (Apr -Jun)
Ref 2/ 1.2 A-Communications	• Develop Patient and Public 'Get Involved' focus group based on the Digital Services Patient and Public engagement work and invite public to register to be involved.	Patients and Public Assurance Group	Digital Health and Care Wales website as a channel for patients to register interest Non digital approaches (Free Post, phone)	Chief Executive / Head of Communications Engagement Lead National Clinical Informatics Lead - Public	Year 2 Q1 Apr -Jun)
Ref 2/ 1.3 A-Communications	• Establish dedicated 'Get Involved' feedback process.	Patients and Public	Digital Health and Care Wales website	Chief Executive / Board Secretary / Head of Communications	Year2 Q1 (Apr -Jun)
Ref 2/ 1.4 A-Communications	• Feedback to stakeholders about outputs from online forums.	Specific groups within NHS Wales and Welsh Government	Email to participants Digital Health and Care Wales website, news item, social media	Chief Executive / Board Secretary / Head of Communications	Year 2 Q3 (Oct-Dec) Q4 (Jan-Mar)
Ref 2/ 1.5 A-Communications	• Publish Digital Health and Care Strategy.	As set out in Stakeholder Maps (Categories and profiles)	Email direct to external leads as identified in strategy Promote via website, social, newsletter, news items	Chair and Chief Executive / Board Secretary Director of Strategy	Year 2 Q1 (Apr -Jun)
Ref 2/ 2.1 B-Engagement – strategic	• Continue programme of work with Patient and Public Assurance Group and identify and prioritise topics.	Members of Group	Discuss at Meetings Invite Independent Members to contribute	Exec Director of Strategy / Director of Planning and Performance /	Year 2 Q1 (Apr -Jun)

7

			National Clinical Informatics Lead – Public	
Ref 2/ 2.2 B-Engagement – strategic	• Independent Member Digital Network.	Independent Members of NHS Wales bodies	Virtual Meetings	Independent Members	Year 2 Q1 (Jul - Sep)
Ref 2/ 2.3 B-Engagement – strategic	• Confirm alignment of Digital Health and Care Wales Management Board members with Welsh Government Policy Leads.	Welsh Government	Discuss at Meetings	Chief Executive / Exec Director of Strategy	Year 2 Q1 (Apr - Jun)
Ref 3/ 2.4 B-Engagement – strategic	• Co-produce future draft engagement strategies and plans.	To be prioritised after Year one review	To be prioritised after Year one review	Exec Director of Strategy / Director of Planning and Performance / Board Secretary Engagement Lead	Year 3
Ref 2/ 2.5 B-Engagement – strategic	• Promote secure online forums for discussion around planning and priorities and delivering national systems and services.	Specific groups within NHS Wales and Welsh Government As above	Email invitation sent to all who have registered interest Online forums	Head of Communications	Year 2 Q1 (Apr - Jun) Q3 (Oct - Dec)
Ref 2/ 2.6 B-Engagement – strategic	• Explore options for having a National Stakeholder Advisory Group to support engagement on digital delivery of services.	Patient and Public Assurance Group Organisations with responsibilities for engagement	Initial discussions to seek views and scope out approach	Chair / Chief Executive / Exec Director of Strategy / NHS Wales organisations	Year 3
Ref 3/ 2.7 B-Engagement – strategic	• To engage on future strategic directions (Annual Plan, Strategy refresh, Workforce etc).	Strategic Partners	Regular Meetings Workshops Stakeholder Interviews One to One	Chair and Chief Executive / Exec Director of Strategy / Welsh Government	Year 2 In line with planning cycles
Ref 2/ 3.1 C-Equalities, Inclusion, and accessibility	• Build links to understand issues to support digital inclusion.	Patients and Public Assurance Group / Organisations with responsibilities for engagement	Co-produce via online workshops + one-to-one interviews and non-digital approaches	Chief Executive / Exec Director of Strategy / Director of People & OD / Engagement Lead /	Year 2 Q1, Q2, Q3, Q4

8

				National Clinical Informatics Lead – Public / Digital Communities Wales	
Ref 2/ 3.2 C-Equalities, Inclusion, and accessibility	• Identify and address issues relating to Equalities, Inclusion, and Accessibility to highlight patient and the public perspective.	Patients and the Public Digital Health and Care Wales staff Board members	Discussion as part of Digital Services Patient and Public programme	Engagement Lead National Clinical Informatics Lead – Public / Patients and Public Assurance Group Digital Communities Wales	Year 2 Q1, Q2, Q3, Q4
Ref 2/ 4.1 D-Leadership and Skills	• Build the knowledge and skills within the system to improve digital capabilities and leadership. Links with Workforce Strategy (internal and external). Report on initial findings.	Professionals / providers / / Health Education and Improvement Wales Wales Institute for Digital Information		Director of People & OD	Year 2 Q4 (Jan-Mar)
Ref 2/ 4.2 D-Leadership and Skills	• Understand user insights and preferences.	Patients and the public (patients, public, carers)	Co-design User-centred design Feedback surveys Events	Exec Director of Operations / National Clinical Informatics Lead – Public Patients and Public Assurance Group	Year 2 Q3 (Oct-Dec)
Ref 2/ 4.3 D-Leadership and Skills	• Continue to build relationship with prioritised stakeholders in a phased way.	NHS Wales organisations Welsh Government and Chief Digital Office	One-to-one meetings Participation at NHS Board meetings Events	Chair and Chief Executive (Digital Health and Care Wales Board Members) Executive Team	Year 2 Q1, Q2, Q3, Q4
Ref 3/ 4.4 E-Evaluation, Innovation and Research	• Agree frameworks for specific programmes including data gathering including insights to assess benefits,	Bespoke to Programme Identify any common issues	Quantitative and Qualitative; Internal and Commissioned.	Exec Director of Finance / Working Group for Programme Benefits	Year 3

9

	address barriers, and outcomes of digital approaches baseline.				
Ref 3/ 4.5 E-Evaluation, Innovation and Research	• Assess recognised exemplar organisations with which to measure against our reputation and success.	Health Education and Improvement Wales Centre for Digital Public Services Organisations like Digital Health and care Wales outside Wales	To be scoped	Chair / Chief Executive / Medical Director	Year 3
Ref 2/ 4.6 E-Evaluation, Innovation and Research	• Collaborate with other digital programmes in Wales and beyond.	(TEC) Cymru Health Care Research Wales Bevan Commission Research, Innovation, Improvement Centre Hubs Leads Health Technology Wales NHSX NHS Digital International	Establish Networks Review and share findings	Exec Director of Strategy / Medical Director / Working Group for Research and Innovation Wales Institute for Digital Information	Year 2 Q1,Q2, Q3, Q4
Ref 2/ 4.7 E-Evaluation, Innovation and Research	• Commission and conduct work to measure and monitor effectiveness of strategic engagement activities. Focus on reputation and strategic direction. Include repeat of Focus Groups and Stakeholder interviews carried out by Consultation Institute.	Key stakeholders in NHS Wales, Welsh Government as identified in Stakeholder Mapping External Independent (if appropriate)	Stakeholder sentiment survey; focus groups and one to one interviews Repeat of Focus Groups and Stakeholder interviews carried out by Consultation Institute	Chief Executive and Exec Director of Strategy / Engagement Lead External Partners	Year 2 Q4 (Jan-Mar)
Ref 4.8 E-Evaluation, Innovation and Research	• Identify any engagement activities related to publication of Research and Innovation Strategy.	Research and Innovation Community	Desk-top Direct email and meetings with leads Independent Members	Medical Director Research and Innovation Working Group	
Ref 2/ 5.1 F-Stakeholder Management	• Conduct further stakeholder mapping for specific projects and assigning leads and resources.	Internal (Programme/ Project Leads) Partners in Projects	Meetings and small workshops Established Project Governance	Exec Director of Strategy /	Year 2 Q2 (Jul-Sep)

10

				National Clinical Informatics Lead - Public	
Ref 2/ 5.2 F-Stakeholder Management	• Facilitate a review of stakeholder maps to assess whether interests and influences have changed and if so why.	As set out in Strategy	Email / SharePoint messages Workshop if necessary	Exec Director of Strategy / National Clinical Informatics Lead - Public	Year 2 Q3 (Oct-Dec)
Ref 2/ 5.3 F-Stakeholder Management	• Review existing meetings and forums to align with Stakeholder Action plan.	As reflected in Stakeholder maps	Meetings and small workshops	Exec Director of Strategy / Engagement Lead	Year 2 Q1 (Apr-Jun)
Ref 3/ 6.1 G-Knowledge Exchange	• Develop and facilitate national and international knowledge exchange for digital related health and care services.	Open + targeted		Exec Director of Strategy / Medical Director / Independent Members / Research and Innovation Working	Year 3
Ref 2/ 7.1 H-Governance	• Ensure engagement considerations are built in from outset and scrutinised and change in approach communicated.	Authors of Board and Committee Papers	Test of change to embed engagement in board governance papers and business proposals	Chair, Board Secretary	Year 2 Q2 (Jul-Sep)
Ref 2/ 7.2 H-Governance	• Align Digital Health and Care Wales strategies with that of our partners (where appropriate) to collectively understand direction of travel.	NHS Wales organisations	One-to-one Strategy Events Board Development sessions	Director of Strategy Board NHS Wales Organisations Welsh Government	Year 2 In line with planning cycles
Ref 2/ 7.3 H-Governance	• Revise strategic engagement (priorities timing, and resources) once Digital Health and Care overarching strategy published.	Digital Health and Care Wales Board	Board Development Session	Chief Executive Executive Director of Digital Strategy (When appointed)	Year 2 Once published?
Ref 2/ 7.4 H-Governance	• Strengthen public involvement and engagement through governance structures (Groups, committees).	Digital Health and Care Wales Committees	Discussion at meetings	Chairs of Digital Health and Care Wales Committees Board Secretary	Year 2 and 3

11

				National Clinical Informatics Lead – Public / Engagement Lead	
Ref 3/ H-7.5 Governance	• Identify and procure any external support to strengthen strategic engagement.	Digital Health and Care Wales Board	Board Development Sessions	Chair, Chief Executive, Board Secretary	Year 3

12

DIGITAL HEALTH AND CARE WALES
STRATEGIC PROCUREMENT REPORT

Agenda Item	5.3

Name of Meeting	SHA Board
Date of Meeting	27 January 2022

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

Executive Sponsor	Michelle Sell, Chief Operating Officer
Prepared By	Julie Francis, Head of Commercial Services
Presented By	Michelle Sell, Chief Operating Officer

Purpose of the Report	For Approval
Recommendation	
The Board is being asked to: **APPROVE** the Contract Extensions and Contract Award as detailed in Appendix 1 and 2 and **NOTE** the Strategic Procurement Activity which will be subject to approval in subsequent Boards.	

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

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

Acronyms	
DHCW	Digital Health & Care Wales
DPS	Dynamic Purchasing System
DQS	Data Quality System
DSPP	Digital Services for Public and Patients
ICT	Information & Communication Technology
MEAT	Most Economically Advantageous Tender
M365	Microsoft Office 365
NWIS	NHS Wales Informatics Service
OJEU	Official Journal of the European Union
PCR2015	Public Contract Regulations 2015 ("PCR2015").
SFI	Standing Financial Instructions
SO	Standing Orders
VAT	Value Added Tax

1.   SITUATION/BACKGROUND

1.1   The Commercial Services Team, within the Engagement and Digital Transformation Services Directorate, in Digital Health and Care Wales ("DHCW") manage a range of contracts supporting both National services and the internal requirements of the organisation itself. The procurement of these contracts is also led by the Team, which includes several, specialist, procurement staff from the NHS Wales Shared Services Procurement Service.

1.2   In accordance with the scheme of delegation in DHCW's Standing Financial Instructions Contracts to be awarded with a total contract value which exceeds £750,000.00 (excl. VAT) will be presented for the Board's approval.

2   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1   Appendix 1 sets out one (1) Contract Extension beyond their intended term, Appendix 2 sets out one (1) Contract Award Approval for the consideration of the Board. The proposed Contract Extension is included for the Board's approval on the basis that its effect will be to exceed the £750,000 approval threshold.

2.2   Appendix 3 sets out the Strategic Procurement Activity which will be subject to approval in subsequent Boards.

An overview of the contractual activity requiring approval is provided below:
   (i)   P665 – Programme Consultancy for Digital Services for Public and Patients ("DSPP") Contract

Author: Julie Francis
Approver: Michelle Sell

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

Extension
(ii)   P760 – Specialist Resources for Microsoft 365 and Cloud Transformation Services Contract Award

2.3   Programme Consultancy for Digital Services for Public and Patients ("DSPP") (P665)

The proposed contract modification is based on increasing the value of the Agreement (for the reasons set out below) to £990,000.00 ex VAT whilst its term remains the same, namely to September 2022.

In 2015, the Minister for Health & Social Care in Wales published a Digital Health & Care Strategy for Wales. This set out the vision to use technology and provide greater access to information to help improve the health and well-being of the people of Wales, where citizens have more control of their health and social care. To take this agenda forward, DHCW appointed a team of external consultants to develop a Business Plan set up new tasks for this Programme. The contract was intended to deliver the key tasks and objectives in the Programme Plan whilst in parallel recruitment activities would be undertaken by DHCW to establish an in-house team to meet the medium- and longer-term needs of the Programme. However, it has not been possible to recruit due to the impact of Covid on the availability of specialist internal and external resources and the need to re-prioritise Programme resources to address short-term requirements. In addition, further specialist technical resources provided under this agreement are required to deliver an essential programme of work including the development of a Covid Booster App to manage the emergent needs of the COVID pandemic.

The Contract was awarded to Spirit Public Sector via a mini competition using DHCW's Dynamic Purchasing System. The contract period was for two (2) years commencing in September 2020 and expiring in September 2022, with an option to extend for a further twelve (12) months. (i.e., a maximum contract term of September 2023).

The value of expenditure is currently being monitored and if further activity is required to support the delivery of the DSPP (i.e., more than the proposed increase of value) it is envisaged that this requirement will be factored into DHCW's Business Plan and a replacement contract will be executed via a competitive procurement process.

2.4   Specialist Resources for Microsoft 365 and Cloud Transformation Services (P760)

This is a replacement Contract conducted via a competitive procurement for specialist resources for Microsoft 365 and Cloud Transformation Services. The Contract term is for a period of three (3) years commencing 1st February 2022 and expiring 31st January 2025, with

Author: Julie Francis
Approver: Michelle Sell

the option to extend the contract for a further two (2) years, in annual increments, up to 31st January 2027.

The maximum contract value is **£6,500,000 (ex VAT)** for the term of the agreement, including extension options. This is the estimated total value to deliver the required work packages that could be called off under this Contract. All packages of work will be awarded at the discretion of DHCW.

The contract has been structured to minimize Authority risk in the following ways:

- The Terms and Conditions of Contract appliable to this are NHS Standard terms and conditions for Provision of Services, May 2018.
  - o Robust indemnity and warranty terms
  - o Time and Delivery Conditions
  - o Rejection criteria for products
  - o Protection of Data and Intellectual Property
  - o Customer remedies for Default

- The payment structure under this agreement is as follows: Work Packages are called off as and when required and will be developed and agreed between the Supplier and the DHCW Subject Matter Experts. Payment of each Work Package will be subject to DHCW approval of all deliverables.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD

3.1 Appendix 1 and 2 include one contract extension and one Contract Award recommendation for the Board's approval relating to:

3.2 **Programme Consultancy for DSPP (P665)** in respect of which:

(i) The contract extension will require a derogation of Standing Orders ("**SOs**") and Standing Financial Instructions ("**SFIs**"), however, will be undertaken in accordance with the exclusion options under Public Contract Regulations 2015, as assured by the Chief Operating Officer; and

(ii) DHCW's procurement project team comprised of key subject matter experts who have agreed the contract extension and approach, including the rationale and next steps, as assured by the Chief Operating Officer; and

(iii) Funding of the Agreement is provisioned from existing funding, as assured by the Executive Director of Finance.

3.3 **Specialist Resources for M365 and Cloud Transformation Services (P760)** in respect of which:

Author: Julie Francis
Approver: Michelle Sell

(i) The procurement has been undertaken in accordance with the requirements of the Standing Financial Instructions, including Public Contract Regulations 2015, as assured by the Chief Operating Officer; and

(ii) DHCW's evaluation team comprising key subject matter experts have approved the procurement strategy and approach, including the selection and evaluation processes and the award outcome, as assured by the DHCW Director of ICT; and

(iii) Funding of the Agreement is provisioned from additional Welsh Government revenue funding, as assured by the Executive Director of Finance.

3.4 The resources required to deliver these Services from a DHCW perspective are included within the Annual Plan.

4 RECOMMENDATION

4.1 The Board is being asked to: **APPROVE** the Contract Extensions and Contract Award as detailed in Appendix 1 and 2 and **NOTE** the Strategic Procurement Activity which will be subject to approval in subsequent Boards

Tolley,Laura
01/20/2022 12:01:25

Author: Julie Francis
Approver: Michelle Sell

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

5   IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply

CORPORATE RISK (ref if appropriate)	Not Applicable

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

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

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

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

APPROVAL/SCRUTINY ROUTE:

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

PERSON/COMMITTEE/GROUP	DATE	OUTCOME
Julie Francis – Head of Commercial Services	January 2022	Approved
Michelle Sell – Chief Operating Officer	January 2022	Approved
Claire Osmundsen-Little – Executive Director of Finance	January 2022	Approved
Helen Thomas – Chief executive Officer	January 2022	Approved

IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below
	To be assessed in relation to the specific Contracts to be awarded.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below
	To be assessed in relation to the specific Contracts to be awarded.
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below
	To be assessed in relation to the specific Contracts to be awarded.

Author: Julie Francis
Approver: Michelle Sell

WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below
	To be assessed in relation to the specific Contracts to be awarded.
SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below
	To be assessed in relation to the specific Contracts to be awarded.

Tolley,Laura
01/20/2022 12:01:25

Author: Julie Francis
Approver: Michelle Sell

AGREEMENT TO CONSIDER A CONTRACT EXTENSION TO TERM AND/OR INCREASE IN CONTRACT VALUE

Contract Title:	P665 – Transforming Digital Services for the Public and Patients ("DSPP") – Programme Consultancy
Original Contract Duration:	Two (2) Years to commence from 03 September 2020 to 02 September 2022, with the option to extend for a further twelve (12) months, up to 02 September 2023.
Original Contract Value:	£700,000.00 ex VAT
Anticipated Additional Value:	The anticipated additional value is £290,000.00 ex VAT.
Estimated Total Value (incl. extensions):	This will bring the overall contract value to £990,000.00 ex VAT.

1. Was the contract advertised to include an option to extend?

Yes, the contract was advertised to include an option to extend.

2. What extension duration was included in the Contract Notice?

The Contract Notice included an optional twelve (12) month extension. The original contract term is due to end on 02 September 2022, with the optional extension available to take us to 02 September 2023.

3. How much of an extension/increase in value do you plan to utilise?

DHCW is seeking to request an increase to the current contract value of £700,000.00 up to £990,000 ex VAT only, as the contract is still running within its initial term (i.e., until 02 September 2022). Please note that the value of expenditure is currently being monitored and in the event that further activity is required to support the delivery of the DSPP (i.e., in excess of the proposed increase of value) it is envisaged that this will be factored into DHCW's Business Plan, a competitive procurement will be undertaken, and a new contractual arrangement will be put in place.

4. Background (overview of contract)

In 2015, the Minister for Health & Social Care in Wales published a Digital Health & Care Strategy for Wales setting out the vision to use technology and greater access to information to help improve the health and well-being of the people of Wales. It describes a Wales where citizens have more control of their health and social care can access their information and interact with services online as easily as they do with other public sectors or other aspects of their lives, promoting equity between those that provide and those that use our services in line with prudent healthcare and sustainable social services.
This requirement is not unique to healthcare and indeed digital solutions are already available to many of the challenges that we are seeking to address. Pilot and/or small-scale implementations

are already underway across NHS Wales to test the capability of a number of digital solutions available within this market and importantly the rate of uptake and impact on our key stakeholders, the patients and those delivering their care. The Welsh Government allocated additional funding, within its new Digital Priorities fund, to expedite the delivery of services and ensure that they are delivered consistently to all patients wherever they are receiving services across NHS Wales and asked NHS Wales Informatics Service ("NWIS") the predecessor organisation to Digital Health and Care Wales ("DHCW"), to lead the programme delivery team.

Given the key strategic objectives of the programme and the imperative to move forward at pace, in 2020, DHCW appointed external consultants to develop a Business Plan and undertake initial set up tasks for this new Programme. The contract was intended to build upon the initial tasks to ensure that activities progress in accordance with the high-level Programme Plan and that the key objectives set out in the Plan can be met, in parallel recruitment activities will be undertaken, to establish an in-house team.

In order to secure an appropriate supplier, DHCW, via a mini competition under a Dynamic Purchasing System ("DPS") procured external consultants and awarded a contract to Spirit Public Sector Ltd. The contract was for a period of two (2) years with the option to extend for a further twelve (12) months.

5. Additional rationale for modification to the existing Agreement:

The request to increase the value is made on the basis that it has not been possible to step up the internal resources to take forward the Programme due to the ongoing Covid-19 Pandemic and the need to reprioritise Programme resources to address short-term requirements. Further specialist technical resources provided under this agreement are therefore required and it would be disproportionately costly and disruptive to an essential programme of work to seek alternative resources in the short-term. During this period the requirement to develop a Covid Booster App has also been added to the scope of the programme. This is an unforeseen development arising as a result of the pandemic and changes in the government guidelines regarding the pandemic management and the vaccine programme. Additional resources have been utilised under the scope of this agreement to ensure that this priority requirement is addressed.

The recommended approach is to modify the contract by extending it under the grounds permitted in Regulation 72(1)(b) and/or (c) of PCR2015. This allows modification of existing contracts where a change of contractor would present serious technical difficulties, or where the modification is due to unforeseen circumstances.

The additional conditions under which modifications are permitted are set out below:

- Cap on the value of the modification under Regulation 72 such that it must not exceed 50% of the original contract value; and

- No material changes to the scope of the contract.

From the perspectives of the modification aspects set out above, DHCW is content that this is appropriate for the following reasons:

- The scope of the contract shall remain in accordance with the requirements of the original contract.

- The total contract value for the DSPP contract is currently £700,000.00 ex VAT, with the anticipated additional value being £290,000.00 ex VAT. This will bring the overall contract value to £990,000.00 ex VAT i.e., it is within the 50% cap.

6. The rationale for this proposed extension/ increase of value

The rationale for the contract value increase is set out below:

Consideration	Outcome
Is it lawful to modify the contract in line with the exemptions permitted under PCR2015	In line with requirements stated within Reg. 72(1)(b) and (c) of PCR2015, the modification of the existing contract has become necessary for a number of reasons including but not limited to: **Internal resource availability:** Given the unforeseen impact on internal resources due to the COVID 19 pandemic and the associated delivery requirements imposed on the organisation in response to Government policy, there has been a need to utilise additional specialist technical resources under the Agreement with Spirit Public Sector. Additional resources were required to work on engagement and managing formal communications with external projects, directing the programme for longer than anticipated, technical expertise and data standards expertise to work on the patient platform (these resources were not available inside DHCW). The extension will enable the DSPP Programme to progress into the next stages of development with delivery partners Kainos, building on the Discovery phase. The extension will ensure that we can continue to work collaboratively with the delivery partners, ensuring appropriate skills and expertise are available to progress planning and development and prepare for the launch of the NHS Wales app. Key deliverables include: 1. Programme Leadership 2. Communications and Stakeholder Engagement 3. Delivery of a Public Communication campaign 4. Recruitment of the core team 5. Setting up the correct environment for successful delivery 6. Managing delivery 7. Additional legal support 8. Commercial and Contract Management of the delivery partners Until such time as core internal resources are made available internally include the following:

Tolley,Laura
01/20/2022 12:01:25

Commercial support:
- Definition, development and management of contractual work packages and related change controls etc.
- Procurement of external support to set up supplier onboarding/accreditation process, as approved by the DSPP Programme Board

Communications support:
- support for public facing communications activities
- internal stakeholder communication activities
- Continuous updates to web site content and to anticipate overspill into the public campaign social media channels

Pathfinder projects:
Additional capacity to ensure alignment of these prioritised external projects that can be supported by the DSPP programme, such as the MHOL replacement functionality.

The deliverables cannot be undertaken by a new supplier without losing continuity of leadership and programme governance, disrupting relationships established with DHCW and the delivery partner and risking delays to delivery of those contracts. At this stage of the programme, considerable additional resource will be joining (core team and delivery partners); stability/consistency in leadership will ensure this increase and blending of teams is as seamless as possible to support continued delivery. Any delay or disruption to the current arrangements could impact/delay the contractual arrangements in place with the Delivery partners for DSPP.

The Terms and Conditions and the agreed day rate from original tender will also remain the same.

Restrictions and Modification:
There is no material change to the scope envisaged and the additional value does not exceed the 50% cap.

7. Next Steps

This extension will be actioned by undertaking the following steps:

- The assessment that demonstrates the grounds for contract modification under Reg. 72(1)(b) of PCR2015 are satisfied will be documented.

- The publication of a contract modification notice provides economic operators within the market the opportunity to request further information, thereby ensuring an open and transparent process.

- DHCW will be required to ensure that the additional evidence is available upon request to mitigate the risk of a potential challenge.

- A review will be completed and undertaken with the DSPP Programme Board to assess the ongoing requirements for the DSPP Programme resources including Consultancy and the longer-term plans i.e., to undertake a new procurement or utilise services from an existing contract or in-house resources can be developed.

- In the event that Procurement activity is required this must commence in spring 2022.

Prepared by:	Laura Panes
Date:	10/01/2022

Agreed by Head of Commercial Services DHCW:	Julie Francis
Signature:	11/01/2022 X Julie Francis Julie Francis Head of Commercial Services Signed by: Julie Francis (JU000244)

Agreed by Chief Operating Officer DHCW:	Michelle Sell
Signature:	13/01/2022 X _MMSell_ Michelle Sell Chief Operating Officer Signed by: Amanda Murray (Am208426)

Agreed by Executive Director of Finance DHCW:	Claire Osmundsen-Little
Signature:	13/01/2022 X _signature_ Claire Osmundsen-Little Exec Director of Finance Signed by: Amanda Murray (Am208426)

Agreed by Chair of DHCW Board:	Simon Jones
Signature:	X _____ Simon Jones Chair of DHCW Board

Agreed by Independent Member	
Signature:	X _____ Independent Member

Agreed by Chief Executive Officer DHCW:	Helen Thomas
Signature:	X _____ CEO of DHCW

Tŷ Glan-yr-Afon
21 Heol Ddwyreiniol Y
Bont-Faen, Caerdydd
CF11 9AD

Tŷ Glan-yr-Afon
21 Cowbridge Road
East, Cardiff
CF11 9AD

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

Scheme Title	Specialist Resources required for Microsoft 365 and Cloud Transformation Services
Supplier	RedCortex
Contract Awarded for Use by	Digital Health and Care Wales ("DHCW")
Date Prepared	08 December 2021
Prepared By	Laura Panes, Strategic Procurement and Contracts Manager
Scheme Sponsor	Claire Osmundsen-Little, Executive Director of Finance

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

1. DESCRIPTION OF GOODS / SERVICES / WORKS

The NHS in Wales invested in Microsoft Office 365 licenses in July 2019 via an all-Wales NHS Microsoft Agreement. A national programme was established to oversee the implementation of the functionality, and the programme has been highly successful in accelerating adoption across all areas (approximately 120,000 users). As the programme nears its completion, Digital Health and Care Wales ("DHCW") are in the process of establishing a national Microsoft 365 Centre of Excellence ("CoE") to provide long-term and sustainable support and development of the platform.

In parallel to establishing the CoE, DHCW is also developing a cloud adoption strategy and seeks to:

- plan the design and implementation of new cloud services
- "drive out" value from the use of cloud via commercial partnerships with its key vendors

To support the establishment of the CoE, the development and delivery of cloud services, and the migration of applications and services from on premise environments, DHCW is seeking to provision specialist resources for Microsoft 365 and Cloud Transformations Services. The Supplier will provide flexible highly skilled resources, with a track record of successful UK public sector digital transformation programmes, excellent working knowledge of the Welsh Public Sector, NHS Wales and the ability to work bilingually is essential. The Supplier will also be fully managed and directed by DHCW Subject Matter Experts.

Tŷ Glan-yr-Afon
21 Heol Ddwyreiniol Y
Bont-Faen, Caerdydd
CF11 9AD

Tŷ Glan-yr-Afon
21 Cowbridge Road
East, Cardiff
CF11 9AD

The contract structure is via a "work-package" based approach which enables the Authority to be able to develop its detailed requirements over the term of the agreement and also to manage financial, contractual and delivery risk.

A formal contract management process will be implemented to ensure that the contract delivers the intended deliverables and benefits, and that knowledge is transferred from the supplier to the Authority during the term of the agreement.

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

1.2 Period of contract including extension options:

Expected Start Date of Contract	01/02/2022
Expected End Date of Contract	31/01/2025
Contract Extension Options (E.g. maximum term in months)	Two (2) year extension option, to be exercised in annual increments, up to 31/01/2027

2. STRATEGIC FIT

2.1 VISION AND OUR STRATEGIC PILLARS

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

Vision: Delivering information and technology for better care. We will deliver to the people of Wales first-class digital health and care services which will enable more effective, efficient, safer decision-making by providing access to content-rich, person-focused health and care data and information.	
Goal 1: Mobilise digital transformation by building on our foundations of data protection, infrastructure and information availability and flow - opening up our architecture to enable faster, consistent sharing of data with partners and suppliers	☒
Goal 2: Support the modernisation of clinical specialties and healthcare processes through delivering dedicated high-quality digital services	☒
Goal 3: Empower staff and patients by combining data from many systems to form a comprehensive digital health and care record accessible anywhere, when needed, via easy to navigate digital entry points	☒
Goal 4: Enable users to derive value from data collected from national and local systems through Big Data Analysis	☐

2.2 INTEGRATED MEDIUM-TERM PLAN		
Is this scheme included in the SHA's Integrated Medium Term Plan?	**Yes**	**No**

02920 500 500
igdc.gig.cymru | dhcw.nhs.wales

Tŷ Glan-yr-Afon
21 Heol Ddwyreiniol Y
Bont-Faen, Caerdydd
CF11 9AD

Tŷ Glan-yr-Afon
21 Cowbridge Road
East, Cardiff
CF11 9AD

	☒	☐
If not, please explain the reason for this in the space provided.		

2.3 SHAPING OUR FUTURE WELLBEING OBJECTIVES

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

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

2.4 FIVE WAYS OF WORKING (SUSTAINABLE DEVELOPMENT PRINCIPLES) CONSIDERED

Please mark with a (x) in the box the relevant principles for this scheme.
Click **here** for more information

Prevention	☒	Long Term	☒	Integration	☐	Collaboration	☐	Involvement	☐

Tolley Laura
01/20/2022 12:01:25

02920 500 500
igdc.gig.cymru | dhcw.nhs.wales

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

Tŷ Glan-yr-Afon
21 Heol Ddwyreiniol Y
Bont-Faen, Caerdydd
CF11 9AD

Tŷ Glan-yr-Afon
21 Cowbridge Road
East, Cardiff
CF11 9AD

3. PROCUREMENT ROUTE

3.1 How is the contract being procured? Please mark with a (x) as relevant.

Competition		Single source	
Three (3) Quotes	☐	Single Quotation Action	☐
Formal Tender Exercise	☐	Single Tender Action	☐
Mini Competition	☐	Direct call off Framework	☐
Find a Tender (replaces OJEU, Public Contract Regulations 2015 still apply)	☒	All Wales contract	☐

3.2 Please outline the procurement procedure.

In order to secure an appropriate supplier for this procurement, a Contract Notice ("**Notice**") was issued on 14 October 2021, in the Find a Tender Service, reference: 2021/S 000-025690. In accordance with the Open Procedure, as set out in Regulation 27 of the Public Contract Regulations 2015 ("**PCR2015**"), the Invitation to Tender ("**ITT**") was issued in parallel with the Contract Notice.

The contract is underpinned by the by the NHS Standard Terms and Conditions for Provision of Services, May 2018.

3.3 What has been the approximate timeline for procurement?

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

Activity	Date
Publish PCR15 Contract Notice, PQQ-SPD and ITT documents	14 October 2021
Closing date for Bidders to submit clarification questions	02 November 2021
Tender Closing date	17 November 2021
Stage 1 Selection Evaluation and sign off	18 to 22 November 2021
Stage 2 Award Evaluation	24 to 30 November 2021
Bidder Interviews and Presentations	06 December 2021
Evaluation, Selection Award Report endorsed by Evaluation Panel	07 to 10 December 2021
Contract Award Notification issued to NWSSP and Welsh G'ment	13 December 2021
Contract Award Notification received from WG	07 January 2022
Standstill Period commences (10 days)	10 January 2022
DHCW Board Paper submitted	10 January 2022
Standstill period concludes (Midnight)	20 January 2022
DHCW Board Approval	27 January 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

Contract award is anticipated immediately after DHCW Board Approval is received. The contract will take the form of the Terms and Conditions of Contract as tendered, the Specification and the successful supplier's Proposals, and any other relevant documentation. Documentation incorporating the foregoing will be signed by the successful supplier and the Awarding Authority. An official Purchase Order will be placed following the completion of this process. A work-package will be scoped for each subsequent piece of work to ensure that financial, contractual and delivery risk is appropriately managed, and any lessons learned from the previous work-package are built into the next piece of work.

4. BENEFITS (Quantifiable / Non-Quantifiable)

4.1   Outline benefits of preferred option

The provision of specialist resources for M365 and Cloud Services will bring a number of benefits, as detailed below:

- Support with establishment of the DHCW Centre of Excellence.
- Transition and Upskilling of staff/resources to support M365 and Cloud Services. This will be supported by an ongoing process of knowledge transfer throughout the term of the agreement.
- Continued development and support to meet best practice, including strengthening cyber security standards.
- Delivery of National 'Apps' and automations using Power Platform to improve patient care and drive business effectiveness.
- Maximising the use of functionality within the all-Wales NHS Microsoft Agreement.
- Support the delivery of M365 Strategy across NHS Wales.
- Support the design and delivery of Cloud Services Strategy across NHS Wales, including migration of applications and services from on-premise environments.

5. RISKS & MITIGATION

5.1 Please state risks of not proceeding with the scheme	5.2 Please state any mitigation to reduce the risk if the scheme is not approved
A delay in approvals and awarding the contract could mean that the existing support for M365 and Cloud Services would cease with no transition period causing significant issues to the continuity of M365 and Cloud Services.	No additional work packages or changes to M365 and Cloud Services if existing resources/capabilities cannot facilitate the changes required.

Tŷ Glan-yr-Afon
21 Heol Ddwyreiniol Y
Bont-Faen, Caerdydd
CF11 9AD

Tŷ Glan-yr-Afon
21 Cowbridge Road
East, Cardiff
CF11 9AD

6. FINANCIAL ANALYSIS

Maximum expected whole life cost relating to the award of contract	Excluding VAT £6,500,000.00		Including VAT £7,800,000.00	
The nature of spend	Capital ☐		Revenue ☒	

How is the scheme to be funded? Please mark with a (x) as relevant.

Existing budgets ☐

Additional Welsh Government funding ☒

Other ☐

[If you have selected 'Other' – please provide further details]

EXPENDITURE CATEGORY	Year 1 (exc. VAT)	Year 2 (exc. VAT)	Year 3 (exc. VAT)	Year 4 (exc. VAT) Optional	Year 5 (exc. VAT) Optional	Total (exc. VAT)	Total (inc. VAT)
Resource Costs	1,300,000	1,300,000	1,300,000	1,300,000	1,300,000	6,500,000	7,800,000
OVERALL TOTAL	1,300,000	1,300,000	1,300,000	1,300,000	1,300,000	6,500,000	7,800,000

This is the estimated total value to deliver the required work packages that could be called off under this Contract. All packages of work will be awarded at the discretion of DHCW and are subject to the agreed deliverables being met.

The Contract is structured to enable an agile and iterative approach to development through the definition of a number of work-packages or 'Call-Offs' during the contract term. An optional extension has been included to enable sufficient flexibility to the Authority.   Any such extension will be subject to the same terms and conditions and will be mutually agreed between the Parties.

7. DECLARATION OF COMPLIANCE

7.1 Procurement Approval The Head of Commercial Services / Delegated Authority has approved the procurement route and confirms that policies and procedures have been followed.	
Head of Commercial Services:	Julie Francis
Signature:	23/12/2021 X Julie Francis Julie Francis Head of Commercial Services Signed by: Julie Francis (JU000244)
Date:	23 December 2021

Tŷ Glan-yr-Afon
21 Heol Ddwyreiniol Y
Bont-Faen, Caerdydd
CF11 9AD

Tŷ Glan-yr-Afon
21 Cowbridge Road
East, Cardiff
CF11 9AD

7.2 Director Approval

The Lead Director, by providing email confirmation, to seek Board approval is making a declaration that all procurement rules, standing orders and standing financial instructions have been complied with. DHCW's Commercial Services Team retain this confirmation electronically in the tender file.

Lead Director Name:	Carwyn Lloyd Jones, Executive Director of ICT
Signature:	24/12/2021 X Carwyn Lloyd-Jones Signed by: Carwyn Lloyd-Jones (Ca000262)
Directorate:	ICT
Date:	

Executive Director of Finance Approval

The Director of Finance, by providing email confirmation, to seek Board approval is making a declaration that all budgetary and financial matters in respect of this decision have been considered and complied with.

Lead Director Name:	Claire Osmundsen-Little, Executive Director of Finance
Signature:	10/01/2022 X _(signature)_ Signed by: Amanda Murray (Am208426)
Directorate:	Finance and Business Assurance
Date:	

8. APPROVALS RECEIVED

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

	Date of Approval:
8.1 Management Board	13 January 2022

Tolley, Laura
01/20/2022 12:01:25

Tŷ Glan-yr-Afon
21 Heol Ddwyreiniol Y
Bont-Faen, Caerdydd
CF11 9AD

Tŷ Glan-yr-Afon
21 Cowbridge Road
East, Cardiff
CF11 9AD

CONFIRMATION OF DHCW BOARD APPROVAL

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

The Digital Health and Care Wales Board has approved the award of this agreement for the durations and values (including extensions and options) as set out in this paper at its meeting of 27 January 2022.	
Chair of DHCW Board:	
Signature:	
Date:	

Independent Member:	
Signature:	
Date:	

Chief Executive Officer:	
Signature:	
Date:	

Tolley Laura
01/20/2022 12:01:25

02920 500 500
igdc.gig.cymru | dhcw.nhs.wales

TITLE	ALL WALES / DHCW INTERNAL	OVERVIEW OF THE SCOPE	INDICATIVE CONTRACT VALUE	INDICATIVE TERM (YEARS)	CONTRACT START DATE	SHA BOARD DATE	CURRENT STATUS
Citrix Licencing	DHCW Internal	Renewal of Citrix Licences with option to move to cloud-based licences instead of on premise.	£1.4M	3	01/01/2021	25/11/2021	Approved at SHA Board
Evidence Summaries	All Wales	Purchasing three (3) Evidence Summaries – BMJ Best Practice, Clinical Key and Clinical Key Nursing with the option to purchase BMJ Co Morbidities.	£2.6M	2+1	01/12/2021	25/11/2021	Approved at SHA Board
e-Journals	All Wales	E Journals for NHS Wales. (e-library)	£1.7m	1	01/01/2022	25/11/2021	Approved at SHA Board
WPAS Hardware Refresh	DHCW Internal	Refresh of WPAS Hardware and ongoing support.	£875K	5	01/12/2021	25/11/2021	Approved at SHA Board
O365 Phase 3 Resources	All Wales	Provision of consultancy to support the continued roll out of the O365 suite of products across Wales.	£3.8M	3	01/02/2022	27/01/2022	Issued to Board for approval
Telephony Solution for Test Trace Protect	All Wales	Telephony solution which underpins the Test, Trace & Protect System to effectively manage the Covid Pandemic.	£1m	1+1+1	01/04/2022	31/03/2022	Procurement has been published and evaluations of bids received will commence w/c 17.01.2022. All work is progressing to plan for Award in early April 2022.
Microsoft Enterprise Agreement	All Wales	Enterprise Agreement to give over 100,000 NHS Wales staff access to Office 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 Office 365.	£80m	3+2	01/07/2022	31/03/2022	Progressing to plan
VMWare Enterprise License Agreement	DHCW Internal	Enterprise Licensing Arrangement to enable the organisation to run more applications using fewer physical servers on virtualised machines.	£1.3m	1+1	01/04/2022	31/03/2022	In plan
Welsh Hospital e-Prescribing and Medicines Administration	All Wales	Provision of a framework for Electronic Prescribing systems for Health Boards in NHS Wales.	£35m	4	01/04/2022	26/05/2022	Procurement planning stage
Dental Referral System	All Wales	Digital solution to facilitate and track dental referrals on a health board by health board basis across Wales.	£2.25m	3+1+1	01/06/2023	26/05/2022	Progressing to plan
Data Centre	All Wales	Provision of a Data Centre servcie to host NHS Wales Servcies and Infrastructure	£4m	5	01/07/2023	28/07/2022	In plan
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.	£3m	5	24/01/2022	01/12/2022	In plan
Radiology Imaging System	All Wales	Digital solution to store, access, review and report radiology images	£40m	10	15/04/2023	30/03/2023	In plan

Tollet Qaura
01/18/2022 12:01:25

DIGITAL HEALTH AND CARE WALES
GOVERNANCE ASSURANCE FRAMEWORK REPORT

Agenda Item	5.4

Name of Meeting	SHA Board
Date of Meeting	27 January 2022

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

Executive Sponsor	Chris Darling, Board Secretary
Prepared By	Sophie Fuller, Corporate Governance and Assurance Manager
Presented By	Chris Darling, Board Secretary

Purpose of the Report	For Approval
Recommendation	

The Board is being asked to:
APPROVE the Governance Assurance Framework.

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

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

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
GAF	Governance Assurance Framework	SOs	Standing Orders
SFI's	Standing Financial Instructions		

1   SITUATION/BACKGROUND

1.1   The overarching NHS governance and accountability framework incorporates the organisations Standing Orders (SOs); the Schedules of Reservation and Delegation of Powers; Standing Financial Instructions (SFIs) together with a range of other frameworks designed to cover specific aspects. These include the NHS Values and Standards of Behaviour Framework; the 'Doing Well, Doing Better: Standards for Health Services in Wales' (formally the Healthcare Standards) Framework, the NHS Risk and Assurance Framework, and the NHS planning and performance management systems.

1.2   The Digital Health and Care Wales (DHCW) Governance Assurance Framework (GAF) is designed to provide a working model for the management and oversight of the activity undertaken by DHCW in line with the relevant frameworks. It describes the governance structure and decision-making process applicable to DHCW to aid in the delivery of the DHCW strategic objectives.

2   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1   It is important to the efficient and effective running of the organisation that the Governance Assurance Framework is widely understood, and senior leaders provide oversight of adherence in their relevant area of work.

2.2   The Governance Framework has a number of objectives which outline what the DHCW governance systems and processes should deliver on behalf of the Board:

- Meeting statutory obligations
- Meeting organisational objectives
- Taking effective decisions
- Adherence to NHS Values
- Workforce Development
- Maintaining a patient/citizen user focus

Tolley,Laura
01/20/2022 12:01:25

Governance Assurance Framework Report   Page 2 of 4   Author: Sophie Fuller
Approver: Chris Darling
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

2/4   138/303

2.3   It is the responsibility of the office of the Board Secretary to provide advice and support on the Governance Assurance Framework and to undertake periodic audit as to the understanding across the organisation and the adherence to the elements within the framework.

3   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1   Further work will be undertaken to map the current operational reporting groups that provide the information feeding through the GAF. This will form an operational support document to ensure tracking can be undertaken and a link back to how these operational groups support the achievement of the IMTP.

4   RECOMMENDATION

The Board is being asked to:
APPROVE the Governance Assurance Framework.

5   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:	

DHCW QUALITY STANDARDS	N/A
If more than one standard applies, please list below: Effective reporting and structure helps uphold all the quality standards.	

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

Governance Assurance Framework Report   Page 3 of 4   Author: Sophie Fuller
Approver: Chris Darling
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

3/4   139/303

APPROVAL/SCRUTINY ROUTE:

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

COMMITTEE OR GROUP	DATE	OUTCOME
Directors Meeting	05.01.22	Supported
Management Board	14.01.2022	Endorsed
Audit & Assurance Committee	18.01.2022	Endorsed

IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below
	An effective and efficient GAF improves quality and safety across the organisation.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below
	Ineffective governance can cause legal implications for senior leaders.
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below
	There could be financial penalties involved in non-compliance in some areas as a result of poor governance.
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below
	There are clear roles and responsibilities within the GAF, but good governance is everyone's responsibility.
SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below
	Good governance and decision making should aid in identifying areas that can help with socio economic objectives.

Tolley,Laura
01/20/2022 12:01:25

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

GOVERNANCE ASSURANCE FRAMEWORK

This framework outlines the operating model for governance assurance, it describes the governance structure and decision-making process applicable to DHCW.

Document Version	1

Status	Draft

Document author:	Sophie Fuller, Corporate Governance and Assurance Manager
Approved by	Chris Darling, Board Secretary
Date approved:	
Review date:	

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	All Objectives apply

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

DHCW QUALITY STANDARDS	N/A
If more than one standard applies, please list below: Good governance applies to all standards	

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

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: 29.12.2021
Yes, applicable	Outcome: Positive
Statement:	

APPROVAL/SCRUTINY ROUTE: Person/Committee/Group who have received or considered this

COMMITTEE OR GROUP	DATE	OUTCOME
Weekly Directors	5th January	Supported
Audit and Assurance Committee	18th January	Endorsed
Management Board	14th January	Endorsed
DHCW SHA Board	27th January	

Tolley,Laura
01/20/2022 12:01:25

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below
	Clearly outlined governance arrangements support increased quality and safety
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below
	The legal ramifications of any governance arrangements are outlined.
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 governance arrangements make it clear the expectations from the workforce
SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below
	Governance arrangements ensure socio economic responsibilities are being considered throughout the decision making process.

1 DOCUMENT HISTORY

1.1 REVISION HISTORY

Date	Version	Author	Revision Summary
1.12.21	0.1	Sophie Fuller	Initial Draft

1.2 REVIEWERS

This document requires the following reviews:

Date	Version	Name	Position
04.01.21	0.1	Chris Darling	Board Secretary

1.3 AUTHORISATION

Signing of this document indicates acceptance of its contents.

Author's Name:	Sophie Fuller
Role:	Corporate Governance and Assurance Manager
Signature:	X _____ Author

Approver's Name:	Chris Darling
Role:	Board Secretary
Signature:	X _____ Approver

1.4 DOCUMENT LOCATION

Type	Location
Electronic	Integrated Management System

2 PURPOSE

The purpose of the Digital Health and Care Wales (DHCW) Governance Assurance Framework is to provide a working model for the management and oversight of the activity undertaken by DHCW. This framework describes the governance structure and decision-making process applicable to DHCW.

3 SCOPE

The framework applies to all DHCW activities.

4 THE STATUATORY FRAMEWORK FOR NHS BODIES IN WALES

The statutory framework for NHS Wales comprises three core components:
- Primary legislation: setting the statutory powers and duties of the NHS
- Statutory instruments: detailing the functions of NHS Bodies (Establishment Order)
- Standing orders (SOs): providing the rules by which Health Boards, Trusts and Special Health Authorities (SHA) work and make decisions.

These elements govern how NHS bodies in Wales are expected to run, the SOs form the basis upon which the SHA's governance assurance framework is developed and, together with the NHS Wales'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.

All Board members and staff must be made aware of the SOs and, where appropriate, should be familiar with their detailed content.

5 PRINCIPLES OF GOOD GOVERNANCE

The Welsh Government define Corporate Governance as 'In simple terms, it refers to the way in which public service bodies ensure that they are doing the right things, in the right way, for the right people, in a manner that upholds the values set for the Welsh public sector. The effectiveness of governance arrangements has a significant impact on how well organisations meet their aims and objectives.'

High profile systematic failures within the NHS that have highlighted the need to ensure integrated governance is a reality across the system. This is defined as 'Systems and processes by which health organisations lead, direct and control their functions in order to achieve organisational objectives, safety, and quality of services, and in which they relate to the wider community and partner organisations.' (Deighan and Cullen, 2004)

Integrated governance ensures decision making and risk/issue management is considered in a whole organisation way.

5.1 CITIZEN CENTRED GOVERNANCE PRINCIPLES

The Welsh Government's Citizen-Centred Governance Principles apply to all public bodies in Wales. These principles integrate all aspects of governance and embody the values and standards of behaviour expected at all levels of public services in Wales. See governance e-manual for more information.

All individuals operating within the NHS in Wales are expected to carry out their roles with dedication and a commitment to the NHS and its core values. To ensure that they do so, there are Codes of Conduct for Board

[Members and NHS Managers](#) which incorporate the Seven Principles of Public Life "the Nolan Principles".

DHCW are committed to the Nolan Principles (NP) of public life, effective internal processes should embed a culture of high standards, with leadership by example and proportionate, risk-based external scrutiny. The principles are universal:

- NP1. Selflessness – act solely in public interest
- NP2. Integrity – no collaborations for personal benefit
- NP3. Objectivity – decisions based on best evidence
- NP4. Accountability – accountable to the public, must submit to scrutiny
- NP5. Honest – must be truthful
- NP6. Leadership – model all these themselves, challenge poor behaviour

6   ORGANISATIONAL VALUES

6.1   NHS CORE VALUES

NHS Wales has six [Core Principles](#) which are:

1   We put our patients and the users of our services first
2   We seek to improve our care
3   We focus on wellbeing and prevention
4   We reflect on our experiences and learn
5   We work in partnership and as a team
6   We value all who work for the NHS

6.2   DHCW CORE VALUES

DHCW have values, inherited from its predecessor organisation - the NHS Wales Informatics Service (NWIS), that align to these principles that place trust and accountability at the core. We expect all staff to conduct themselves in line with the organisational values in pursuit of our objectives.

We **RESPECT** and treat everyone in the way we would wish to be treated	We are **PROUD** of our achievements and being part of NHS Wales	We take **PERSONAL RESPONSIBILITY** for what we do, being honest with ourselves and others
We **CARE** about the people we support and those we work with	We **LEARN** from our colleagues through the sharing of knowledge and experience to continually improve our service	We act with **INTEGRITY** to build trust

7   DHCW STRATEGIC OBJECTIVES

The DHCW strategic objectives are created in collaboration across the organisation and our NHS Wales partners with alignment to Welsh Government policy. They form the bedrock of our strategic digital development on behalf of the system as well as setting out how the organisation will continue to develop.

- Mobilising Digital Transformation
- Expanding the content, availability and functionality of the Digital Health and Care Record
- Delivering high quality digital services
- Value and Innovation for better outcomes and Value-Based care
- Embedding and developing the new digital organisation

In order to be clear on how we will achieve these objectives an Integrated Medium-Term Plan is created on an annual basis for approval by the DHCW SHA Board and Welsh Government. Details can be found on our Business Plans and Strategies Page.
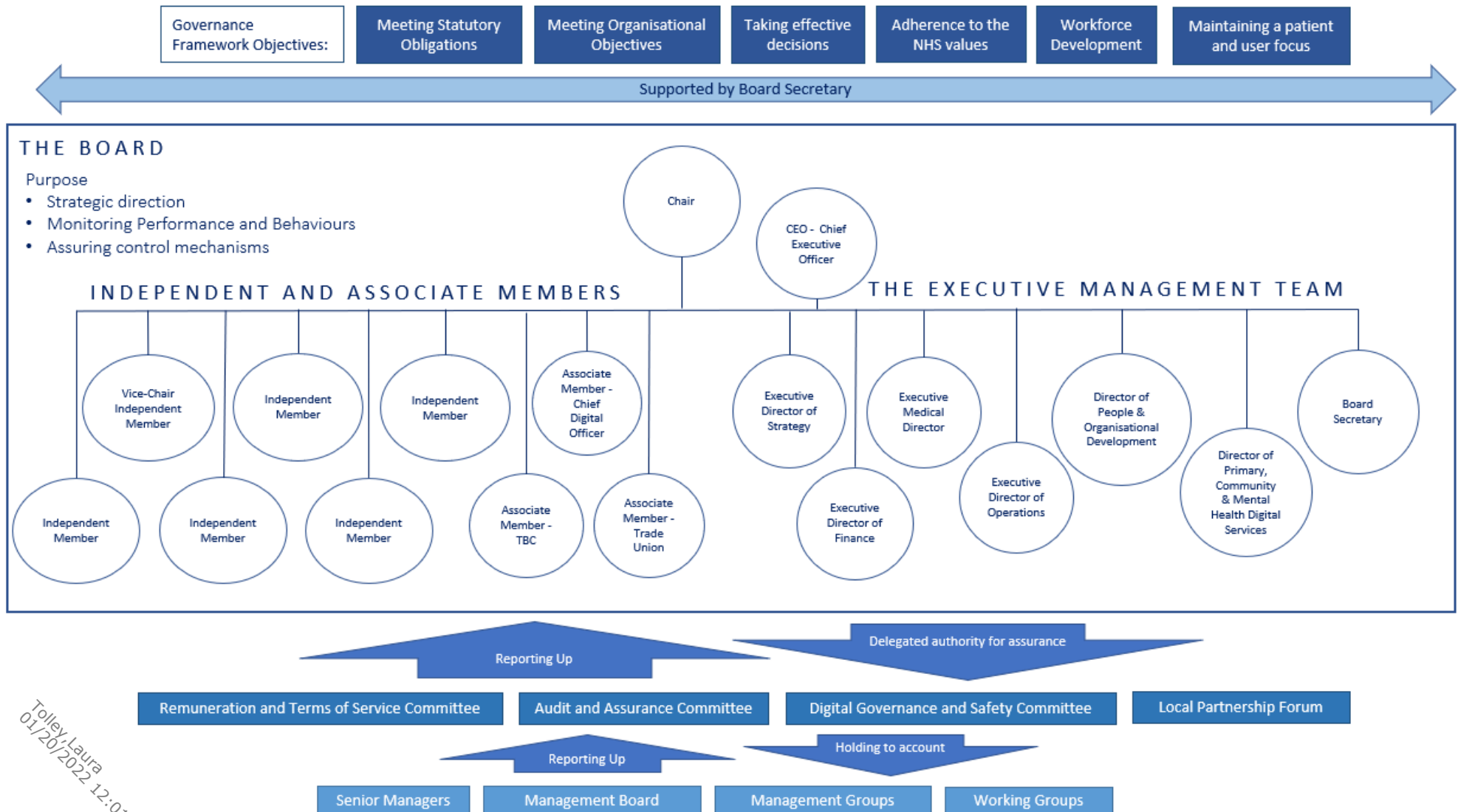
8   DHCW GOVERNANCE STRUCTURE

8.1 GOVERNANCE STRUCTURE

8.1.1 Governance Assurance Framework Objectives

The Governance Framework has a number of objectives which outline what the systems and processes should deliver on behalf of the Board:
- Meeting statutory obligations
- Meeting organisational objectives
- Taking effective decisions
- Adherence to NHS Values
- Workforce Development
- Maintaining a patient and user focus

8.1.2 Joint Intervention and Escalation Arrangements

We are held to account through the Joint Escalation and Intervention arrangements operated by Welsh Government, more information can be found here: WG Escalation and Intervention Framework. The Joint Escalation and Intervention arrangements are informed by twice-yearly tripartite meetings between Welsh Government, Audit Wales and Health Inspectorate Wales (HIW) to discuss the overall position of each NHS organization in Wales, a wide range of information and intelligence is considered to help identify any issues of particular concern in relation to quality, performance and financial management. As a result, one of the following levels of escalation is allocated to each organisation:

Special measures (SM) – organisation requires direct Welsh Government input into daily operational issues
Targeted intervention (TI) – organisation has a number of significant performance issues
Enhanced monitoring (EM) – organisation has a number of performance issues
Routine monitoring (RM) – organisation is largely meeting its targets

The most recent cabinet statement regarding escalation and intervention arrangements and status for NHS Wales's organisations can be found here: https://gov.wales/written-statement-escalation-and-intervention-arrangements-2

In order to deliver the objectives of the GAF, Section 8.2 outlines the roles and responsibilities of those accountable within the framework for providing leadership and management of the systems and processes within the Governance Assurance Framework.

8.2 THE BOARD

The establishment and membership order details the SHA Board must have:
- Chair
- Vice Chair
- not more than 5 members who are not officers of DHCW in addition to the chair and vice-chair
- not more than 5 members who are officers of DHCW which must include:
  - (i)a chief officer;
  - (ii)a finance officer;
  - (iii)a clinical officer;
- not more than 3 associate members who are not eligible to vote in any proceedings of DHCW

The Board meets as a Unitary Board on a bi-monthly basis. This means that decisions are made collectively by the Independent Members and Executive Directors. Executive Directors share collective responsibility for achievement of corporate aims and objectives and do not solely contribute to discussions and decisions in the light of their particular executive function, for example the Executive Director of Finance does not only comment on financial matters. All Directors have responsibility to constructively challenge the decisions of the Board and help develop proposals on priorities, risk mitigation, values, standards and strategy.

Independent Member have an additional role in holding the Executive to account for the delivery of strategy and the performance of the organisation. This can be discharged either at the full Board or at Committees which are established to discharge this role on behalf of the Board. The Committees also provide assurance to the Board and have some responsibilities delegated to them outlined in section 8.3.

The three Directors who are members of the Executive Team (see section 8 above) do not have Executive Director status. They do not have voting rights unlike the Chair, Independent Members and Executive Directors, however attened Board meetings and contribute fully to the discussions of the Board.

The Chair and Independent Members are appointed by "Welsh Ministers", this is currently the Minister for Health and Social Services. The Chief Executive is appointed by the Board, with the involvement of the Chief Executive, NHS Wales. Executive Directors are also appointed by the Board

The DHCW Chief Executive is the Accountable Officer for the SHA and certain responsibilities have been conferred upon her by the Chief Executive, NHS Wales. The detailed responsibilities and the relationship is explained in the Accountable Officer Memorandum for Chief Executives of NHS Special Health Authorities. The Chief Executive, NHS Wales is the Accounting Officer for NHS Wales and is accountable to the Cabinet Secretary for Health and Social Services for this role. In addition, the Chief Executive, NHS Wales is also accountable to the Permanent Secretary as the Director General of Welsh Government's Department of Health and Social Care.

The Board provides strong leadership and control including:

- Setting the strategic direction
- Establishing and upholding the organisation's governance and accountability framework, including its values and standards of behaviour
- Ensuring delivery of the organisation's aims and objectives through effective challenge and scrutiny of the SHA's performance across all areas of activity.
- Shaping the organisation's culture

The Scheme of Delegation as outlined in the SOs explains the functions reserved for the Board together with those which have been delegated to a committee, the Chief Executive or another Executive Director/Executive Team Member. The Directors may further delegate some decisions.

Section 7 of the SOs requires the Board to conduct as much of its formal business in public as possible. There may be circumstances where it would not be in the public interest to discuss a matter in public, e.g., business that relates to a confidential matter. In such cases the Chair (advised by the Board Secretary where appropriate) shall schedule these discussions accordingly and require that any observers withdraw from the meeting. In these circumstances, when the Board is not meeting in public session it shall operate in private session formally reporting any decisions taken to the next meeting of the Board in public session. Wherever possible, the reporting should take place at the end of a private session, by reconvening a Board meeting held in public session.

Section 7.2 of the SOs require the Board to agree an Annual Plan of board business and this can be found in

the meeting papers here.

8.3 COMMITTEES OF THE BOARD

In response to section 3.4.1 (establishing a Committee Structure reporting to the Board) of the SOs the following Committee structure has been established:
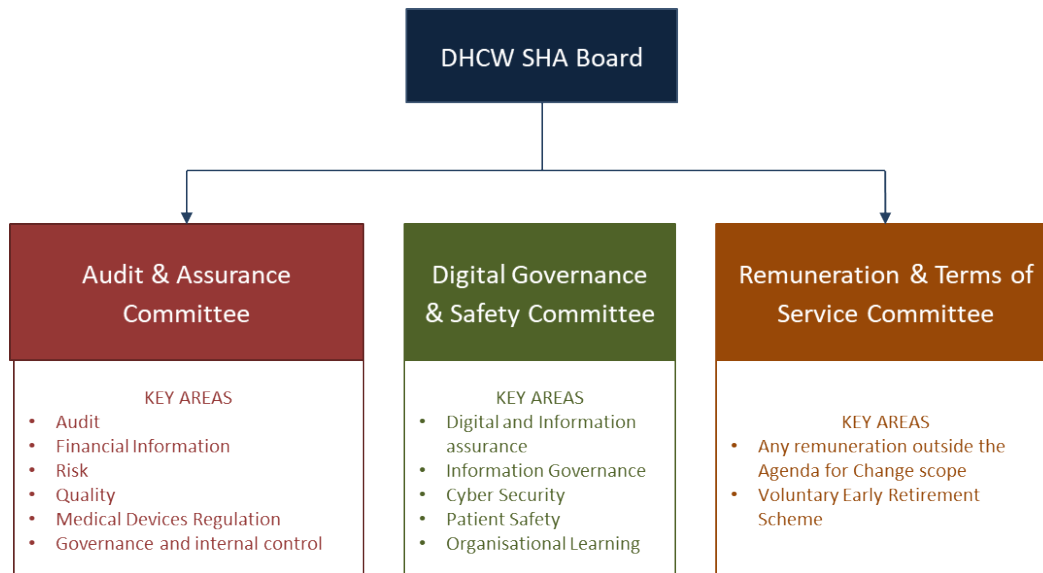
The primary function of the Committees is to advise and assure the Board and Chief Executive on whether effective arrangements are in place to support them in their decision taking and in discharging their accountabilities for securing the achievement of the SHA's objectives, in accordance with the standards of good governance determined for the NHS in Wales.

All Committees meet at least quarterly. Further information and papers can be found here. The Committees are required to conduct as much of their formal business in public as possible. Any activity conducted in private is required to be reported to the next public meeting.

The Remuneration and Terms of Service Committee is not required to meet in public. It does not publish its papers but provides al report containing a summary of the meeting and any decisions taken to the next SHA Board meeting and provides an overview of the work of the Committee via the annual Remuneration and Staff Report.

8.4 EXECUTIVE TEAM

The Executive Team is led by the Chief Executive and is responsible for the operational delivery within DHCW. This includes:
- Formulating and proposing strategy for discussion and approval by the Board
- Ensuring the delivery of the agreed strategy and implementation plan
- Managing performance and dealing with suboptimal performance within their teams
- Taking responsibility for providing the required information to the Board or its Committees
- Supporting and promoting a positive culture within the organisation and reflecting this in their own behaviour

The Directors will establish structures within their Directorates to assist them in discharging their operational responsibilities whilst ensuring good governance. This includes working groups, which are detailed in the governance structure pictogram at section 10.

Where a group meets regularly there should be agreed Terms of Reference, clarity regarding the delegated authority, a work programme and arrangements for producing action notes/minutes.

8.5   ADVISORY FORUMS AND FUNCTIONS

Section 6 of the SOs detail that DHCW may and where directed by Welsh Ministers, must appoint Advisory Group(s) to the SHA to provide advice to the Board in the exercise of its functions.

DHCW have been directed to establish a Local Partnership Forum, details of which are found in the next section.

No other Advisory Groups have been identified as required currently but can be established if agreed by the Board.

8.6   LOCAL PARTNERSHIP FORUM

The role of the Local Partnership Forum (LPF) is to provide a formal mechanism where the SHA, as employer, and trade unions/professional bodies representing SHA employees work together to improve health services for the citizens served by the SHA. It is the forum where the SHA and staff organisations will engage with each other to inform, debate, and seek to agree local priorities on workforce and health service issues; and inform thinking around national priorities on digital transformation health matters.

The LPF does not meet in public due to the sensitive nature of the discussions taking place. It does not publish its papers but provides a report containing a summary of the meeting and any decisions taken to the next SHA Board meeting and provides an overview of the work of the Committee via the annual report to the SHA Board.

8.7   GOVERNANCE ADVISORY FUNCTIONS

All staff are responsible for ensuring good governance within their area of work. To support them in this there are key individuals and teams who have a responsibility for providing advice and assistance in some of the more specialist areas. This includes:

8.7.1 BOARD SECRETARY

The Board Secretary is responsible for:

- providing advice to the Board as a whole and to individual Board members on all aspects of governance
- facilitating the effective conduct of Digital Health and Care Wales business through meetings of the Board, its Advisory Groups and Committees
- monitoring the SHA's compliance with the law, SOs and the governance and accountability framework set by the Welsh Ministers
- advising regarding the policy management and development arrangements and ensuring that documents are made available throughout the organisation
- raising concerns (whistleblowing) arrangements within Digital Health and Care Wales, ensuring that staff can raise concerns without fear of recrimination
- providing advice regarding the standards of conduct and behaviours, including managing the arrangements for the declaration of interests, gifts, hospitality and sponsorship
- providing leadership and advice on welsh language provision
- providing leadership and advice on risk management
- Communications – both internal and external.

8.7.2   EXECUTIVE MEDICAL DIRECTOR

The Executive Medical Director is the Caldicott Guardian for the organisation, additionally, they provide leadership to the organisation on the following areas:

- Putting Things Right
- Information Governance
- Patient Safety and Incident Investigation
- Information Services
- NHS e-library
- Research and Innovation
- Informatics Assurance
- Business Change

8.7.3   DEPUTY CHIEF EXECUTIVE AND EXECUTIVE DIRECTOR OF FINANCE

The Deputy Chief Executive and the Executive Director of Finance has executive responsibility for finance, quality and regulatory (including the central coordinating function of service management), and corporate services.

Their financial responsibilities are as follows:
- Implementation of the SHA's financial policies in line with the Standing Financial Instructions and co-ordinating any corrective action necessary to further these policies
- Maintaining an effective system of internal financial control including ensuring that detailed financial procedures and systems are in place
- Provision of financial advice to other members of the Board, committees and employees
- The preparation and maintenance of accounts, certificates, estimates, records and reports as the SHA may require for the purpose of carrying out its statutory duties.

Their responsibilities for quality and regulatory and corporate services are as follows:
- Ensuring the organisation maintains and improves its quality accreditations
- Provides leadership for regulatory compliance

- Hosting the Cyber Resilience Unit
- Supporting the Chief Executive in the delivery of health and Safety responsibilities
- Ensuring fire safety is appropriately managed
- Ensuring effective estates and environmental management

8.7.4   EXECUTIVE DIRECTOR OF OPERATIONS

Appointed but not yet in post.
The Executive Director of operations will be responsible for all operational service delivery (excluding Primary, Community and Mental Health Services) and related activity. This includes:

- Service performance
- Applications
- Cyber security
- ICT infrastructure (design and delivery)
- Service desk and Client Desk
- National architecture (design and delivery)
- Business Continuity planning and response
- Major incident planning and response
- Senior Information Risk Owner for the organisation

8.7.5   EXECUTIVE DIRECTOR OF STRATEGY

Appointed but not yet in post.
The Executive Director of Strategy will be responsible for developing and defining the technical strategy for DHCW in response to Welsh Government and the Chief Digital Officer policy agenda. This includes:

- Digital Strategies and product roadmaps
- Horizon Scanning
- Partner engagement and collaborative working
- Commercial Services
- Planning, Programmes
- Performance

8.7.6   DIRECTOR OF PEOPLE AND ORGANISATIONAL DEVELOPMENT

Advertised by not yet appointed / in post.
The Director of People and Organisational Development has responsibility for providing advice and support regarding employment/human resources related matters, diversity, inclusion and workforce development. They are responsible for:

- Providing Human Resources advice
- Ensuring that the SHA has an Organisational Development function to support ongoing development of the staff and the systems within which they operate
- The provision of an Occupational Health and Well-being Services
- The provision of equality, diversity and inclusion advice and support
- Strategic workforce planning
- Professional development of the NHS Wales Digital workforce

8.7.7 DIRECTOR OF PRIMARY, COMMUNITY & MENTAL HEALTH DIGITAL SERVICES

Recruitment process underway.

The Director of Primary, Community and Mental Health Digital Services has a responsibility to provide leadership on the planning, development, and delivery of the related services. This includes:

- Primary Care (GP's, pharmacists, opticians, dentists) digital systems and services
- Community Care (Social care, community services) digital systems and services
- Mental Health digital systems and services
- Cluster Development digital systems and services
- Health and Social Care Integration digital systems and services
-

9 THE DHCW GOVERNANCE SYSTEMS

The governance systems and processes consist of the formal and informal procedures that guide everyday activity, covering everything from management information systems, through to the systems at the point of contact with users of services and programme delivery.

9.1 KEY DOCUMENTS

9.1.1 STANDING ORDERS

The Board must agree Standing Orders for the regulation of the organisation's proceedings and business. These SOs are designed to translate the statutory requirements set out in the Establishment Order and the Membership and Procedure Regulations into day-to-day operating practice, and, together with the Scheme of Reservation and Delegation of Powers and Standing Financial Instructions (SFIs), they provide the regulatory framework for business operations.

9.1.2 RESERVATION AND DELEGATION OF POWERS (SCHEME OF DELEGATION)

The scheme of delegation outlines where activity can be delegated, it is for the Board to decide what it will delegate to others for them to do on its behalf.

The Board must assure itself that all matters delegated are effectively carried out. The Board does this in a number of ways, including receiving regular reports and information, speaking to Directors and their staff and reading information provided as part of news bulletins, staff briefings etc.

Because the Board retains responsibility and accountability it is very important for them to receive an accurate picture of what is happening within the organisation, together with information regarding any risks or issues.

DHCW policies and procedures provide further information regarding responsibilities which staff and managers may have for specific areas.

9.1.3 STANDING FINANCIAL INSTRUCTIONS

NHS bodies in Wales must agree Standing Financial Instructions (SFIs) for the regulation of their financial proceedings and business. Designed to achieve probity, accuracy, economy, efficiency and effectiveness in the conduct of business, they translate statutory and Welsh Government financial requirements for the NHS in Wales into day-to-day operating practice. Together with the adoption of SOs, a scheme of decisions reserved to the Board and a scheme of delegations to officers and others, they provide the regulatory framework for business operations.

The Chief Executive and the Executive Director of Finance are responsible for providing advice and guidance on any aspect of the SFIs.

The SFIs are supported by more detailed Financial Control Procedures. The Audit and Assurance Committee is responsible for approving Finance related procedures on behalf of the SHA Board.

9.1.4 POLICIES, PROCEDURES AND OTHER WRITTEN CONTROL DOCUMENTS

The DHCW SHA Board has delegated the approval of some policies, procedures and written control documents to others in the organisation, whilst some it has retained for itself. In Summary the arrangements are as follows:

Strategies	Framework
A long term plan designed to achieve particular goals or objectives **Approval retained by the Board**	Broad overview, outline, or skeleton of interlinked items/ principles/concepts which supports a particular approach to a specific objective, and serves as a structure that provides guidance which can be modified as required **Approval dependent on scope**
Policies	**Procedures**
A written statement of intent, describing the broad approach or course of action that the organisation is taking with a particular issue **Approval retained by Board unless delegated to a Committee**	A standardised method of performing a task by providing a series of actions to be conducted in an agreed and consistent way to achieve a safe, effective outcome. Document detailing how a policy is to be achieved. **Approval retained by a Committee or delegated to a group – majority delegated to groups**
Guidelines and Protocols	
Guidelines give general advice and recommendations for dealing with specific circumstances. Protocols are a written code of practice, including recommendations, roles and standards to be met, which can also include details of competencies and delegation of authority. **Approval delegated to groups, directorates, departments**	

The policy also explains the responsibilities for undertaking Equality, Health and other impact assessment, arrangements for consultation, responsibilities for making documents available, review and evaluation.

The assumption is that all documents which apply to the whole of the organisation are published on the internet unless there is a justifiable reason not to. This would be in relation to data protection/information or personal safety/security.

Further advice can be obtained by contacting: DHCW.CorporateGovermance@wales.nhs.uk

9.1.5 RISK MANAGEMENT AND BOARD ASSURANCE

The DHCW Risk Management Policy sets out the organisational intent for effective risk management. The policy also provides a high-level account of the responsibilities in the identification, assessment and management of risk. The Risk Management and Board Assurance Framework Strategy outlines further approach to risk, risk appetite and assurance on behalf of the Board in more detail.

DATIX is used throughout the SHA to drive consistency in reporting, reviewing and managing risk. The SHA operates risk registers at strategic, corporate, directorate and Project/Programme levels.

The Board Assurance Framework (BAF) specifically identifies the strategic risks. These are the risks which could threaten the organisation's ability to meet its strategic priorities. The BAF contains a much greater emphasis on controls and assurances – it advises the Board of where they can get these assurances from and how robust they are.

The DHCW Risk Appetite is reviewed and set on an Annual basis to reflect any changes to the organisational or external climate.

The Board needs to assure itself that controls are effective to manage the strategic risks. Assurance is an objective examination of evidence for the purpose of providing an assessment of the effectiveness of governance, risk management and control processes. The BAF report provides an assessment of the organisational assurance lines on a bi-monthly basis to the Board.

For each strategic risk the assurance will come from a variety of internal and external sources. External sources are extremely important, and it is essential that the Board (or relevant Committee) is aware of the sources of such information from regulatory or inspection bodies and are sighted on their conclusions. However, it should not rely on those external sources to indicate when things are not working as they should be.

The following table provides a list of potential sources of assurance. It is not an exhaustive list.

Internal	External
Standing Orders	Structured Assessment via Audit Wales
Standing Financial Instructions	WG Reports/Reviews
Scheme of delegation	WG assessment of IMTP
Compliance against legislation	Welsh Risk Pool
Annual Self-Assessment	Quality Accreditation Schemes – ISO Audits
Board and Committee Reporting	Welsh Language Commissioner
Counter-fraud reports	Future Generations Commissioner for Wales
Serious Incident Reports	Audit Reports
Annual Governance Statement	
Staff Survey	
IMTP	

9.1.6   ASSURANCE ASSESSMENT

When considering a source of assurance it is important to consider how much it can be relied upon. Considering the "Three Lines of Defence" can help. These are as follows:

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

Information may be robust but lacks independence

Second Line - Risk and Compliance
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.

The process for assessing assurance is fundamentally about taking the most relevant evidence together and arriving at informed conclusions to establish a composite sense of assurance. This will identify where there are gaps in assurance, and these are also captured in the BAF to identify where further assurance should be obtained from. This will be critical in determining for example, the future work Programmes of internal audit so resources are directed appropriately.

The level of assurance sought will also be influenced by the risk appetite agreed for the respective strategic priority/objective.

9.1.7 LEGISLATIVE ASSURANCE

DHCW keep a legislative assurance register that identifies an internal owner for each piece of legislation relevant to the organisation. This is reviewed at the monthly Quality and Regulatory meeting.

The register will be developed into the Legislative Assurance Framework for 22/23, which will provide a greater understanding of the key controls in place for each piece of legislation, the assurance level and the impact on the organisation of non-compliance.

10 DHCW GOVERNANCE SYSTEMS INFOGRAM

DHCW SHA Board

Welsh Government

Reporting Up

Reporting Out

Key Documents – Annual review/Production

Governance and Assurance
Standing Orders
Reservation and Delegation of Powers (Scheme of delegation)
Standing Financial Instructions
Senior Information Risk Owner
Annual Report
Annual Committee Reports
Annual Cycle of Business for Board and Committees
Annual Effectiveness Surveys for Board and Committees

Planning
Integrated Medium-Term Plan
Annual Plan

Performance
Annual Report

Tolley-Laura
01/20/2022 12:01:25

Key Documents – Ad-Hoc review/Production

Governance
Legislative Assurance Framework
Risk and Board Assurance Framework
Governance Assurance Framework
Policies, procedures and other written control documents

Financial
Counter Fraud Plan
Strategic Procurement Report
High Value Purchase Order Report

Communication
Communications Strategy
Stakeholder Engagement Strategy

Operation
Integrated Organisational Performance Report
Business Continuity Plans
Data Strategy
Architecture Strategy
Product Road Maps

Contributory Processes/Regulatory Monitoring

Governance
Internal Audit
External Audit
External Accreditation Audits
DHCW Internal Audit

People
Job Descriptions & Job Evaluation Process
Staff Induction
Staff Survey
Exit Interviews
Training and Organisational Development

Communication
Staff Briefings
Corporate Intranet
Staff Newsletter
Tier 3 Management meeting

Oversight and Working Groups

Management Board
Weekly Directors

Capital and Non-Pay Group
Financial Planning Pay Group
Wales Informatics Assurance Group
Quality and Regulatory Group
Recruitment Task and Finish Group
Internal Controls Meeting
Incident Review and Learning Group
Welsh Language Group
Risk Management Group
Safety, Health and Environment Group

Annual Report to include:

Annual Performance Report

Annual Accountability Statement

Annual Governance Statement

Remuneration and Staff Report

Annual Financial Accounts

11   DHCW GOVERNANCE AND REPORTING SYSTEM

Governance Framework Objectives: Meeting Statutory Obligations | Meeting Organisational Objectives | Taking effective decisions | Adherence to the NHS values | Workforce Development | Maintaining a patient and user focus

THE WELSH GOVERNMENT

Reporting Up | Holding to account

THE BOARD

Assurance Reporting
Feedback
Performance Reporting

Reporting in

Reporting Up | Delegated authority for assurance | Holding to account

Remuneration and Terms of Service Committee | Audit and Assurance Committee | Digital Governance and Safety Committee | Local Partnership Forum

Reporting Up

Senior Managers | Management Board | Management Groups | Working Groups

Tolley,Laura
01/20/2022 12:01:25

Digital Health and Care Wales Governance Assurance Framework

12   DEFINITIONS

TERM	DEFINITION
SHA	Special Health Authority
DHCW	Digital Health and Care Wales
IOPR	Integrated Organisational Performance Report
SOs	Standing Orders
SFI's	Standing Financial Instructions
LPF	Local Partnership Forum
BAF	Board Assurance Framework
GAF	Governance Assurance Framework

13   REFERENCES

DOCUMENT	VERSION
NHS (Wales) Act 2006	1
The Digital Health and Care Wales (Establishment and Membership) Order 2020	1
Standing Orders and Standing Financial Instructions	1
Debate No. 3 (good-governance.org.uk) Deighan and Cullen, 2004	3
Good Governance Guide – Academi Wales	2
WG Escalation and Intervention Framework	1
Governance e-manual	2
Code of Conduct for Board Members and NHS Managers	2

DIGITAL HEALTH AND CARE WALES
INTEGRATED ORGANISATIONAL
PERFORMANCE MANAGEMENT FRAMEWORK

Agenda Item	5.5

Name of Meeting	SHA Board
Date of Meeting	27 January 2022

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

Executive Sponsor	Michelle Sell, Chief Operating Officer
Prepared By	Alyson Smith, Head of Organisational Performance
Presented By	Michelle Sell, Chief Operating Officer

Purpose of the Report	For Approval
Recommendation	

The Board is being asked to **APPROVE** the Integrated Organisational Performance Framework.

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

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

Acronyms			
DHCW	Digital Health and Care Wales	PMF	Performance Management Framework
SHA	Special Health Authority		

1 SITUATION/BACKGROUND

1.1 DHCW is committed to making continuous improvements to achieve strategic priorities and objectives, both in the services provided and the supporting mechanisms which make service delivery possible. As a statutory body it also has a duty to ensure that core underlying organisational functions and statutory requirements are monitored, reported on and where necessary continuously improved to meet the performance targets requisite to the position we hold as part of the NHS Wales family.

1.2 This framework included in item 5.5i Appendix A sets out the proposed approach to address performance across the organisation. It was reviewed by Board members at the Board development session on the 8th December 2021 and has been updated to reflect those discussions.

2 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1 The framework considers

- Why performance matters
- The principles which underpin the performance framework
- Roles and Responsibilities
- Developing Performance Measures
- Performance Improvements
- Key outcomes and review

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 Following approval this performance framework will come into effect on 1 April 2022 and will be reviewed annually by DHCW's Management Board.

3.2 Specific aspects underpinning the delivery of the framework, including the performance report to the SHA Board will be developed in conjunction with the Board to ensure that the measures are understood and agreed.

4 RECOMMENDATION

4.1   The Board is asked to approve the Integrated Organisational Performance Framework.

5 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	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
No, (detail included below as to reasoning)	Outcome: N/A
Statement: Organisational Performance reporting equally effects all. An EQIA is not applicable.	

Workforce EQIA page

APPROVAL/SCRUTINY ROUTE:		
Person/Committee/Group who have received or considered this paper prior to this meeting		
COMMITTEE OR GROUP	DATE	OUTCOME
Board Development Session	8th December 2021	n/a
DHCW Management Board	14th January 2022	Approved

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 and 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

Tolley,Laura
01/20/2022 12:01:25

Integrated Organisational Performance Framework   Page 4 of 4   Author: Angela Hagget
Approver: Michelle Sell
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

4/4   166/303

<ID Reference>

INTEGRATED ORGANISATIONAL PERFORMANCE MANAGEMENT FRAMEWORK

The purpose of this document is to provide guidance to all staff on DHCW's approach to organisational performance management.

Document Version	1

Status	Draft

Document author:	Alyson Smith: Head of Organisational Performance
Approved by	Michelle Sell: Chief Operating Officer
Date approved:	
Review date:	

Tolley,Laura
01/20/2022 12:01:25

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	All Objectives apply

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:	
Yes, applicable		Outcome:
Statement:		

APPROVAL/SCRUTINY ROUTE: Person/Committee/Group who have received or considered this

COMMITTEE OR GROUP	DATE	OUTCOME
Board Development Session	8th December 2021	Updated
Management Board	14th January 2022	Approved
DHCW SHA Board	27th January 2022	

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Choose an item.
LEGAL	No, there are no specific legal implications related to the activity outlined in this report.

IMPLICATIONS/IMPACT	
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implication related to the activity outlined in this report
WORKFORCE IMPLICATION/IMPACT	Choose an item.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

Tolley,Laura
01/20/2022 12:01:25

TABLE OF CONTENTS

1 DOCUMENT HISTORY

1.1 REVISION HISTORY

Date	Version	Author	Revision Summary
29/11/2021	D0-1	Alyson Smith	Draft

1.2 REVIEWERS

This document requires the following reviews:

Date	Version	Name	Position
12/01/2022	D0-1	Michelle Sell	Chief Operating Officer

1.3 AUTHORISATION

Signing of this document indicates acceptance of its contents.

Author's Name:	Alyson Smith
Role:	Head of Organisational Performance
Signature:	X _____ Angela Hagget Organisational Performance Lead

Approver's Name:	Michelle Sell
Role:	Chief Operating Officer
Signature:	X _____ Michelle Sell Chief Operating Officer

1.4 DOCUMENT LOCATION

Type	Location
Electronic	

2 INTRODUCTION

Digital Health and Care Wales (DHCW) is the system leader and trusted delivery partner for digital transformation of health and care services in NHS Wales. DHCW works across NHS Wales, Welsh Government, partner organisations and suppliers to design, develop and deliver digital platforms, systems and services.

DHCW has a duty to ensure that core underlying organisational functions and statutory requirements are monitored, reported on and where necessary continuously improved to meet the performance targets requisite to the position we hold as part of the NHS Wales family.

3 PURPOSE

The purpose of DHCW's Integrated Organisational Performance Management Framework is to set the system for making continuous improvements to achieve strategic priorities and objectives, both in the services provided and the supporting mechanisms which make service delivery possible.

DHCW is publicly accountable for performance and through the open Board reporting people with an interest can understand how we are performing.

Our performance framework applies to all services managed by DHCW, to those services we deliver in partnership, and to the underlying indicators and metrics that enable us to monitor organisational performance. It is intended to facilitate collective working together to achieve the best outcomes, quality services and effectiveness for our stakeholders, and to make our working lives easier in the process.

Effective performance management will help us to achieve our strategic priorities from which this performance framework flows.

The performance framework does not cover individual performance as this is the responsibility of line managers.

4 CONTEXT

This performance framework supports a culture of continuous improvement and high performance across DHCW by:

- Working within the ethos of our Organisational Values
- Conducting performance management in a non-punitive way that enables development of aspirational, stretching but achievable objectives relating to improvement
- Utilising improvement plans, tools and techniques to support team and individual achievement
- Enabling positive staff ownership and accountability
- Developing a coherent set of performance measures and targets /standards
- Implementing rigorous performance assurance and review mechanisms across DHCW
- Supporting the Board Assurance Framework (BAF) and effective risk management

4.1 Hierarchy of Performance Management

An essential pre-requisite for delivering on our vision and strategic objectives is a clear operating model underpinned with an effective performance framework, with clear lines of responsibility and accountability at both team and individual level.

DHCW's operating model is encompassed by our Standing Orders and Standing Financial Instructions.

The performance framework outlines the areas of performance that will be managed through a hierarchy of directorates, departments and groups, overseen by the Management Board and assured by the DHCW Board as described below.
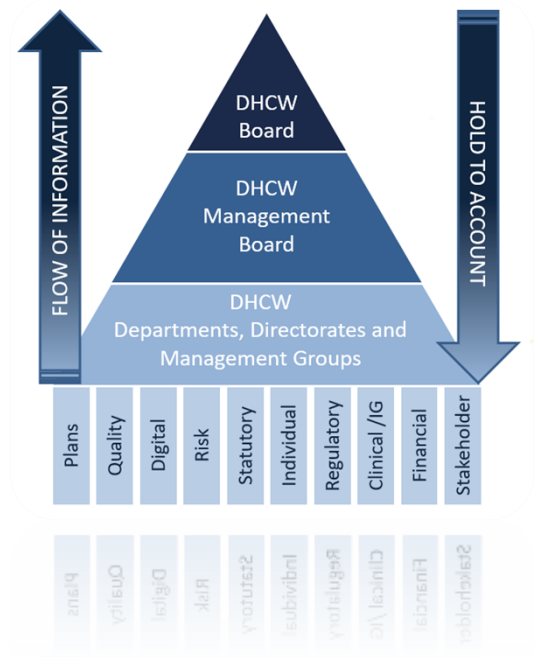
4.2 Mission, Vision and Strategic Objectives

Our Mission, Vision and Strategic Objectives are set out in our Integrated Medium-Term Plan and Annual Plan.

The strategic objectives are owned by us all as a collective Special Health Authority. Responsibility for the operational delivery of these objectives are assigned to an Chief Executive Officer to provide organisation-wide leadership and identified through the Personal Development Review (PDR) process. Links and co-dependencies to other work areas and levels across DHCW are worked through to team and individual objective setting and appraisal.

This performance framework aims to support us all as staff to ensure that at all levels of DHCW, we understand what is expected of us individually and collectively with our respective teams, and how our role contributes to delivering the overarching vision, mission, strategic objectives and performance of the SHA.

4.3 Development of DHCW's Performance Management Approach

DHCW's approach is dependent on development of Managers to ensure that they fully understand their role in the performance management and development of their teams, and what resources are available to them to support expectations. The approach to this will be documented and refined over time.

4.4 Reporting Mechanisms

Reporting will continue to develop as tools and processes are improved and refined. In the short-term reporting will be via PowerPoint /PDF slide packs, but work is underway to develop interactive dashboards that will reduce the burden of manual intervention whilst also reducing risk of manual error.

5 WHY PERFORMANCE MANAGEMENT MATTERS

Performance management is taking positive action in response (where required), to actual performance to ensure that outcomes for our people and stakeholders are better than they would be otherwise. Clear performance management arrangements are integral to our overall planning and delivery of services. Performance management is also recognising and celebrating high performance and learning lessons that can be applied elsewhere.

5.1 Motivating our Individuals and Teams

As individuals, staff members and teams, we need to know what is expected of us and what part we play in the overall success of DHCW. Effective performance management is about being positive and helping individuals to excel at what they do best. The need for regular annual appraisals and personal development reviews need to be embedded across DHCW. This assists us all to focus on our learning and development needs, so that we can reach our full potential and deliver the very best to our stakeholders. Our line managers are fundamental to fostering an environment that is positive, constructive and professional, and ensuring that our staff are engaged in two-way communications about their performance.

5.2 Improving Services and Outcomes for our Patients and Population

Performance management provides us with a way of making decisions about where to focus our resources depending on needs at any one time. Over time, performance management allows relative measurement to be made so that we can see if we are delivering our activity and outcomes, and if extra efforts need to be made in particular areas to achieve our service targets.

Whilst we are not directly involved in delivering patient outcomes, we recognise our critical position in the delivery of services which enable safer, better care by those who interact directly with patients.

5.3 Working in Partnership

As an organisation, many of us work closely with the wider NHS Wales family, public sector colleagues, patients, the public, academia and industry, as well as with other statutory and voluntary agencies. Ways of measuring success across DHCW boundaries and for integrated services is ever more important. Our Stakeholder Engagement Strategy will inform DHCW's approach in this respect.

5.4 Reputation and Profile

As the System Leader in delivering digital transformation across NHS Wales we are unique in terms of our specific objectives and scope. Demonstrating positive performance is important for maintaining high levels of stakeholder (including ourselves as staff) confidence in DHCW and maintaining a strong reputation for the high-quality delivery of services.

5.5 Using Public Monies Effectively and Efficiently

We want to ensure that our digital services are sustainable and need to ensure that 'every pound counts' towards delivery. We aim to be as efficient and productive as possible so that we have as much resource as possible available for digital delivery. Making clear links between resources and outcomes helps us

to put our performance into context so that we can demonstrate that we are delivering best value.

6 PRINCIPLES OF THE INTEGRATED ORGANISATIONAL PERFORMANCE MANAGEMENT FRAMEWORK

The following five principles underpin our performance framework:

6.1 Performance Management

Performance is centred on three main areas:

- **Plans** which clearly articulate the requirements and expected outcomes to which people, teams and departments will deliver

- The **resources** required to deliver the plans and achieve the outcomes

- The **outcomes** of achieved plans, and how they relate to the development of the individual, team, department or organisation

Performance across these three important dimensions needs to be constantly monitored and managed. This should be celebrated where we have success and mitigated where we have concerns. It is important to ensure that a healthy tension is maintained between the three dimensions, to achieve delivery in a way that delivers the outcome efficiently.

6.2 Creating a Performance Improvement Culture

This framework is intended to support the development of a culture of balanced, continuous performance improvement, delivered for the benefits of our people who contribute to better outcomes for patients and service users. Our performance improvement culture needs to be supported by clear objectives at all levels which drive and promote a culture of high performance and accountability, supported by the Performance Development Review (PDR) and appraisal process. At corporate level, the performance framework should be used as a driver for supporting cultural change and staff engagement, together with the importance of sharing learning and celebrating success and good practice across DHCW.

6.3 Transparency

The measures and evidence used to assess performance should be clear, with a focus on desired outcomes as described above. Directorates, Departments, Teams and Groups need to clearly understand what is required of them if they are to be held to account through a performance management process. They will need to know what they are expected to achieve, how their performance is being assessed and what to expect if performance falls below expected levels, including what additional support can be made available to help support them. In balance, resources need to be made available to support training and development needs where necessary.

In situations where performance does not meet expectations, the CEO along with the management

team will agree a course of action and decide whether informal mechanisms are sufficient or whether the situation needs to be escalated. Escalations will be made to the Chair and the Board will be informed at the next meeting or at the relevant Committee meeting as appropriate.

6.4 Delivery Focus

The three-way performance management approach described above needs to be integrated, action orientated and focused on delivering improved performance in line with our organisational Strategy, Integrated Medium-Term Plan and Annual Business Plan, and cascaded into Directorate, Department and Team plans, so that it can support individual Personal Development Plans and the resources required to deliver.

6.5 Proportionality and Balance

The performance management arrangements within this performance framework will seek to ensure that performance management support, interventions and actions are proportionate to the scale of the performance risk, and that an appropriate balance between challenge and support is maintained.

Issues or areas of work will be put into escalation rather than individuals or teams. However, if it is identified that management action is required in an area of work in escalation, this will be addressed through the appropriate line management arrangements with advice from the Workforce and Organisational Development team.

7 ACCOUNTABILITY

Performance management arrangements should ensure that all parties are clear where lines of accountability lie, and this performance framework helps to set this out in conjunction with DHCW's operating model. Where there is lack of clarity on accountability, this should be brought to the attention of senior management or an Executive representative so that accountability arrangements can be made clearer.

7.1 Empowerment and Delegation

Higher performance will look to earn greater levels of delegated authority, with conversely greater levels of performance management intervention and support in underperforming areas.

7.2 Enabling Positive Ownership and Accountability

A key element of this performance framework is the need to ensure that as individuals and teams we are aware of our personal accountability for the delivery of improvements in service and performance. DHCW's strategic objectives will be cascaded into objectives for all teams and individuals, with measurable targets set and agreed. This process will be underpinned by the Appraisal cycle which should be regularly monitored by line managers and is part of the organisational workforce dashboard.

At every level of DHCW, staff should be involved in the process of agreeing their plans, objectives, performance measures, targets and outcome measures (see section 4) to ensure ownership and understanding of the process. Performance improvements and objectives must be assessed to be achievable, although stretching.

Building on one of the main principles of staff empowerment, we will continue to build a positive culture of recognising and celebrating success. Furthermore, we will continue to actively encourage the establishment of situations where positive ownership of performance improvement and objectives can be demonstrated; understanding the positive impact that recognition of achievement of objectives can bring, including proactive nomination of excellent work to local and national awards schemes.

8 ROLES, RESPONSIBILITIES, BEHAVIOURS AND ACCOUNTABILITIES

As part of the NHS Wales family, we expect to engender a culture that supports and empowers staff and stakeholders. Our values and behaviours framework will be reviewed and re-launched as part of our organisational development activities. Whilst it is everyone's role to manage performance, DHCW must drive a culture of performance by providing a clear vision, set of values and behaviours, together with associated priorities, goals and objectives.

Effective performance management requires defined roles and responsibilities, and clear ownership of outcome measures. A summary of individual roles in terms of performance management responsibilities is described below.

8.1 DHCW Board

The Board sets the strategic direction for DHCW and approves the Integrated Medium-Term Plan (IMTP) for submission to Welsh Government in line with the NHS Wales Planning Framework. At a strategic level the Board scrutinizes and assures the performance of the organisation which includes the delivery of the IMTP, and delivery of the other domains included in the Integrated Organisational Performance Report.

8.2 Chief Executive Officer

The Chief Executive Officer (CEO) is the Accountable Officer for the Special Health Authority. They have overall statutory responsibility and accountability for the governance and performance management of the organisation.

Performance management of the Chief Executive is undertaken by the Special Health Authority via the Remuneration and Terms of Service Board Sub-Committee and specifically by the Chair via regular PDR.

The CEO has delegated responsibility for the detailed operation of this Performance Framework to the Director of Planning and Performance.

8.3 Executive Directors

Executive Directors' performance is reviewed by the Chief Executive through the PDR process and by the Remuneration and Terms of Service Board sub-Committee.

8.4 Directors

Directors' performance is reviewed by the Executive Directors through the PDR process.

8.4.1 Director of Planning and Performance

The Director of Planning and Performance leads the development and implementation of the Performance Framework through delegated authority to the Head of Organisational Performance who has responsibility for preparing, implementing and updating this Performance Framework. The Director will ensure that systems are in place for the measurement of metrics and KPIs which are reported via the Integrated Organisational Performance Reports and that reports are produced for scrutiny and assurance by the Executive Team and the Board.

The Director will ensure that these include transparent reporting of areas of good progress as well as areas of performance that require attention and/or escalation. The Director will also seek to ensure that governance arrangements and sustainable resources are in place to support effective performance improvement and management.

8.4.2 Head of Organisational Performance

The Head of Organisational Performance leads the Organisational Performance team who develop and oversee the approach described in the Performance Framework and provide a range of related support functions working closely with staff and management across DHCW. The team implements the Framework by:

1. ensuring the performance cycle is maintained and reporting requirements are met
2. supporting teams in planning and readiness for Directorate Reviews
3. working with teams and groups, in partnership with the Information Services team, to develop KPIs, Dashboards and Reports
4. working with Directors and leads to ensure data quality and consistency, and to monitor and report on targeted work to improve performance as required
5. maintaining a record of information assets relating to Organisational Performance

8.5 Individual Line Managers and Heads of Department

Line managers are fundamental to fostering a performance management environment that is positive, constructive and professional and for ensuring that staff are engaged in two-way communications about their performance.

Line managers need to have sufficiently regular supervision of, and one-to-one discussion with, the staff who report directly to them to ensure that staff understand expectations and how they are performing. This will enable any requirement for support or development to be positively addressed. It is important to note that managing performance is not an add-on to the other responsibilities of a line manager, but it is an essential part of the role and vital to do well.

8.6 Individual Staff Members

Importantly, as part of our shared set of values and behaviours, every employee contributes towards performance improvement and management by being encouraged and supported to identify improvement opportunities and to take the required action. Likewise, all staff contribute to DHCW and its contribution to the aims and achievements of NHS Wales in improving the health and well-being of patients and citizens. It is important that staff own the data and information that relate to their own areas and understand how that translates to performance, taking positive personal action and

responsibility to improve their own practice and performance.

As indicated above the PDR and Appraisal processes, providing for a positive two-way process with line management, will be fundamental to agreeing objectives, reviewing progress and articulating required resources and outcomes, supporting an individual's personal development to help them thrive and develop in their job as they seek to improve services.

8.7   Cross-organisational Groups

Whilst groups play a key part in the performance of the organisation, they are not managed through formal processes to determine their success or failure. However, they will be required to report on performance in key areas such as Quality and Regulatory Compliance, Risk Management, Planning and Performance Management, Lessons Learned, Service Support and Delivery, as well as others as necessary.   They will also be expected to work across DHCW to ensure that performance within their focus is developed and improved.

Where appropriate, Groups should set challenging but achievable goals to ensure that they are fit for purpose and can demonstrate performance in their contribution to DHCW.

Groups report to the Management Board via their input to the Management Board Integrated Organisational Performance Report.

9   ORGANISATIONAL PERFORMANCE MANAGEMENT MEETINGS AND REVIEWS

The purpose of organisational performance meetings is to monitor and be able to respond to issues with performance in key business areas that require oversight at the levels noted below. Good performance management should enable a 'no-surprises' approach as the majority of issues will be known and being dealt with at directorate level. Some of the requirements are cover statutory measures that are provided to Welsh Government for national performance monitoring.

9.1   Bi-monthly DHCW Board Meetings

The DHCW Board will consist of Executive Directors, the DHCW Chair and Independent Members, and will be held in public. The Board will meet every other month and will review a summarised Board Integrated Organisational Performance Report which will provide evidence of the performance of DHCW against the metrics discussed in detail in the Management Board Integrated Organisational Performance Report.

Directors will present the parts of the report that relate to their areas of expertise and will articulate remedial action to areas of concern.

9.2   Monthly Management Board

The Management Board will consist of the Chief Executive and Directors. Part of its function is to ensure that there is organisation-wide leadership adherence to strategy, management of risk, planning, performance, quality, urgent business relating to the performance of DHCW, and other topics as necessary, with a strong clinical voice in the leadership and management of organisational business. It will adopt the design principles of the Operating Model in its mode of operating, which includes setting the appropriate leadership tone and listening and learning culture.

The performance management process will provide a mechanism to escalate specific issues, where they cannot be resolved via other routes.

The performance management topics covered at Management Board are laid out in the Management Board Integrated Organisational Performance Report as described in Appendix A.

9.2.1 Management Review

The British and International quality standards that DHCW holds expect that a regular Management Review is carried out in order to ensure that top management is aware of and overseeing key quality requirements. DHCW's approach is reliant on the Management Board Integrated Organisational Performance Report covering many of the areas encompassed in the quality standards.

9.3 Directorate Performance

9.3.1 Monthly Management Meetings

Directorate performance will be reviewed monthly within the directorate through a formal and collaborative process. Directorate performance meetings will be chaired by the Director with their senior team in attendance, with both support and challenge as its ethos. The performance management process will take a holistic view of the directorate's overall performance as well as how this is affected at departmental level, holding the three domains, (plans, resources, outcomes) at the centre.

Aspects considered will include culture, leadership, people engagement, PDRs & Appraisals, statutory and mandatory training, sickness, leavers and joiners, vacancies, research, innovation, patient and stakeholder feedback where appropriate, quality, outcomes, planning and delivery of planned activity, and financial performance.

Each Director or Executive Director (as appropriate, depending on structure), will be expected to have in place regular performance review and management meetings within their own domains, with others in attendance as required.

9.3.2 Six-monthly Directorate Review

Management Board Review of performance at Directorate level ensures that issues with organisational-level performance can be identified and rectified in a consistent manner across DHCW. Directorate Reviews will follow a standard approach and will be conducted in a block of reviews twice yearly. It is expected that this process will then move to quarterly when resources allow.

Heads of Department will lead discussions in Directorate Reviews, indicating their performance against the standard areas covered, and their plans to make improvements where necessary.

The topics covered at the Directorate Review will mirror those covered in DHCW's Management Board Integrated Organisational Performance Report as described in Appendix A, as well as additional topics by approval of the CEO.

Consistent data sources will be used for the meeting, adopting a 'data pack' approach so that the focus of the meeting can be by exception and agreeing appropriate actions. The meetings will be formally minuted and action logs will be maintained in order to keep a record of progress, identify and mitigate

risks, explore future priorities and to capture and disseminate good practice.

In addition to the standard discussion on performance, the Directorate Review is an opportunity for Heads of Department to highlight to Top Management their successes and other topics of wider interest.

Cycle, inputs and outputs
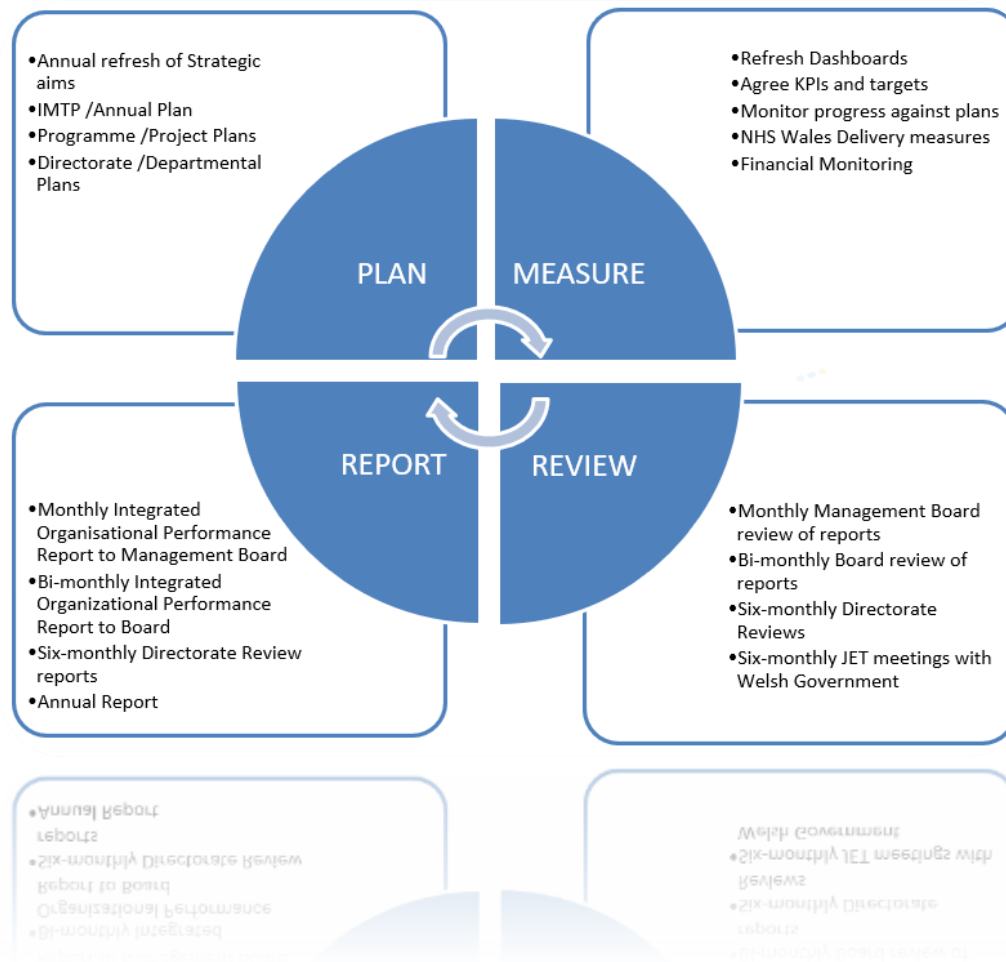
10   DEVELOPING A COHERENT SET OF PERFORMANCE MEASURES

In managing performance across any part of DHCW, the use of performance measures is important, and all staff, teams and groups are strongly encouraged to keep developing their access to data and use of business intelligence to support their understanding and continuous improvement of their services and areas of expertise.

Expert support, advice and guidance can be obtained from teams such as Organisational Performance,

Service Management, Quality & Regulatory Compliance, Corporate Governance, Patient Safety, Information Services, Information Governance, Workforce & OD and Finance. These teams can assist staff in the provision and interpretation of information underpinning delivery, and it is everyone's responsibility to seek out these services and to highlight what training, support or access they feel may be required.

The Organisational Performance approach will mature as DHCW's Board sets strategic direction so that performance can be closer aligned to strategy, and reporting can reflect a risk-based performance management approach; this framework will be updated to reflect key changes as they are developed.

Following development and approval from Management Board, the DHCW Board will approve Key Performance Indicators which will be included in the Interactive Dashboard, as these are developed.

10.1 Interactive Dashboard Approach

DHCW's integrated performance information is derived from the systems owned by teams across the organisation who are managing performance in their areas on a day-to-day basis. That information requires manual intervention and performance is appraised at different levels in advance of being included in the Integrated Organisational Performance Report.

There is a need to move away from the burden of manually collecting and making available data for analysis and reporting, to a systematised approach so that publication of management information can become more agile and the benefits of spending more time on analysis can be realised. To achieve this, DHCW will develop a method of automatically extracting performance data from key systems and holding it in a data warehouse, so that it can then be provided back to the originating teams in a way that enables the data to be analysed and reported on dynamically. This initiative will also enable development of an interactive dashboard and drill-down approach to integrated performance reporting.

10.2 Statistical Process Control Charts

The main aims of using Statistical Process Control (SPC) charts is to understand what is different and what is the norm in the monthly figures that make up DHCW's performance metrics. By using SPC charts, we can understand where the focus of work needs to be concentrated in order to make a difference. We can also determine if an improvement is improving a process, or to predict statistically whether a process can meet a target.

Where appropriate, DHCW will utilise SPC charts to articulate these insights alongside other methods of reporting.

10.3 NHS Wales Delivery Framework

Due to the nature of DHCW's business as a Special Health Authority most requirements from the NHS Wales Delivery Framework do not apply to the organisation. Where national guidance does apply the Key Performance Indicator will be included accordingly to allow for benchmarking and is included in our Integrated Organisational Performance Report for internal monitoring.

10.4 Regular Review of Performance Metrics and Indicators

As DHCW is a new NHS Wales organisation, many processes and business approaches continue to be developed to maturity. To ensure that the Key Performance Indicators, metrics and measures which make up the integrated organisational performance report are appropriate and effective a regular review will be undertaken. This will also help to benefit development of reporting capability.

11 PERFORMANCE IMPROVEMENT

In line with our vision, values and behaviours, it is important that everyone is supported to operate at their appropriate level of autonomy and able to identify what support they require for performance improvement and what challenges or blockages are facing them that they need help with to remove. It is recognised that when performance may not be where we want it, collectively we may need to provide support, whilst at other times it may be an isolated issue.

We will continue to promote and develop both a culture and a capability of continuous performance improvement through an integrated approach.

DHCW is continuing to develop its systems and processes for anticipating and responding to good and poor performance. In several areas, we use a red/amber/green (RAG) system to facilitate this process. Where RAG reports are in place, a clear methodology for determining the indicator will be developed. Often this is utilised as detailed in Appendix B, although SPC charts will reduce the usage of a RAG approach.

It is important that all avenues to explore the reasons for poor performance are fully understood and discussed at all levels, so that improvement support can be provided, if required, to help achieve more positive performance. If more fundamental issues exist there are Workforce and Organisational Development policies and procedures that can be adopted, but these should only be a last resort.

11.1 Performance Monitoring and Assurance

The process for monitoring performance, managing risk, receiving assurance and escalating concerns are outlined below. These processes commence at individual and team level, with assurance and escalation of risk managed as appropriate through to Board level. The diagram below describes the route of accountability and assurance within DHCW.

Everyone, throughout DHCW needs to assure themselves that controls are effective to manage the principal risks. The BAF provides assurance on the delivery of its objectives through robust risk management processes. The role of performance monitoring and assurance on delivery of priority objectives is a key aspect of this work.

Assurance, provided from across DHCW, with everyone playing an important role, provides Board members with the evidence that DHCW is operating effectively and achieving its desired outcomes. DHCW at every level needs to be confident that the systems and processes are operating in a way that are effective and driving the delivery of objectives by focusing on minimising risk.

Levels of escalation within the directorate structure are controlled with routine management. Levels of escalation above the directorate structure, and additional support are as follows:

Escalation Stages	Rationale	Support
Enhanced Support	Significant difficulty in delivering strategic objective or BAU Indicator	Consideration of Root Cause Analysis or process mapping to identify system issues Additional support and input from Executive Team Weekly/regular monitoring meeting Action plan in place to address issue Progress Reports to Executive Team and by exception to the Board
Targeted Support	Continued difficulty in delivering a strategic objective or BAU Indicator or further deterioration in original issue in Enhanced Support	Above arrangements continue plus additional targeted resources are put in place to address issue Review of Organisational Development requirements

12 KEY OUTCOMES AND REVIEW

The following sets out the key anticipated outcomes from the delivery of the performance framework and provides a useful baseline for staff and DHCW against which to measure progress and the effectiveness of the performance framework:

- All staff employed by DHCW will have a clear understanding of the performance framework and will believe that achieving good performance is an important part of assuring high quality delivery and understanding their own personal responsibility for their own performance.

- All staff will have a demonstrable appreciation as to how their work contributes towards the delivery of DHCW's strategic priorities.

- Performance reporting will be in place across DHCW, including at corporate, directorate and department/team level.

- There will be integrated and timely reporting with high quality commentary for performance reviews.

- Good data quality arrangements will be in in place at all levels with staff appreciating their roles and responsibilities in the production of good information.

- DHCW will enact a consistent approach to managing performance issues.

- Staff at all levels will play a key role in monitoring and managing performance.

- Positive external and internal audit reports.

- The DHCW Board can receive assurance that the Performance framework is operating effectively.

This performance framework will come into effect on 1 April 2022 and will be reviewed annually by DHCW's Management Board.

13　DEFINITIONS

TERM	DEFINITION

14　REFERENCES

DOCUMENT	VERSION

Tolley Laura
01/20/2022 12:01:25

15 APPENDIX A: SCOPE OF INTEGRATED ORGANISATIONAL PERFORMANCE REPORTS

Performance Domains	Management Board Report	SHA Board Report
Summary dashboard of performance indicators (RAG) including Cyber Security	✓	
Summary dashboard of performance indicators (RAG) excluding Cyber Security		✓
Corporate Planning performance against IMTP	✓	✓
Corporate Planning performance against Business Plan	✓	
Financial Performance	✓	
Financial Statutory Measures	✓	✓
Workforce performance, including statutory measures	✓	✓
Commercial services performance	✓	
Procurement Plan	✓	✓
Operational Service Management support and delivery, including Cyber Security	✓	
Operational Service Management support and delivery summary		✓
Clinical Assurance and Clinical Incident details	✓	
Clinical Scorecard	✓	✓
Information Governance Incident performance and Freedom of Information Request details	✓	
Information Governance Summary	✓	✓
Audit performance	✓	✓
Quality Management	✓	✓
Corporate Risk Management	✓	✓
Stakeholder Engagement	✓	✓

Tolley Laura
01/20/2022 12:01:25

16 APPENDIX B: RAG STATUS, MEANING AND MONITORING

RAG	Criteria	Detail
RED	Below 5% of target	Not meeting, or persistently not meeting outcome/objective/target and highly unlikely to meet outcome/objective/target within specified period
AMBER	Within 5% of target	Missing outcome/objective/target but on agreed performance improvement trajectory, depending on the area
GREEN	On target	Outcome/objective/target achieved

Depending on the nature of the indicator and area of performance, the procedure for managing such performance would be:

- Green rated performance – routine monitoring.

- Amber rated performance – routine monitoring possibly for a period and/or for some indicators - enhanced monitoring via an exception report at managerial level, possibly including the lead Director and/or if necessary Executive level performance meeting depending on the performance area, together with associated remedial actions and a trajectory for improvement.

- Red rated performance – escalated performance, linked-in to the lead Director and Executive led performance meetings, requiring a detailed action plan and regular reviews with agreed timescales. There may on occasion be a need to trigger an escalated performance meeting(s) with the Chief Executive, depending on the circumstances.

Performance on any indicator that is "red" should require:

- A sense from the area as to what enablers in terms of support may be required to help further support performance improvement.

- An action plan with a trajectory for improvement and designated review points.

- A risk assessment of the impact of under-performance on, amongst other impacts, the quality and safety of care provided by the Health Board.

- Discussion, action planning and assurance of progress at the Group or Department, and Executive led performance meetings to seek recovery, in order to provide additional levels of support and assurance.

- "Red" performance areas should be clearly noted in performance dashboards and, where particularly significant, highlighted in covering reports. This can support discussion at Management Board, where exception reports/action plans may need to be signed off.

- "Red" performance issues must be considered when developing, updating and cross-referring to risk registers.

DIGITAL HEALTH AND CARE WALES
INTEGRATED ORGANISATIONAL
PERFORMANCE REPORT FOR SHA BOARD

Agenda Item	6.1

Name of Meeting	SHA Board
Date of Meeting	27 January 2022

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

Executive Sponsor	Helen Thomas, Chief Executive
Prepared By	Angela Hagget, Organisational Performance Lead
Presented By	Michelle Sell, Chief Operating Officer

Purpose of the Report	For Discussion/Review
Recommendation	

The Board is being asked to:
DISCUSS and **REVIEW** the report as representative of the performance of the organisation for the period November /December 2021.

Acronyms			
DHCW	Digital Health and Care Wales	OpenEHR	Open industry specifications, models and software for e-health
ESR	Electronic Staff Record	API	Application Programming Interface: a software intermediary that allows two applications to talk to each other.
UHB	University Health Board		

1.   SITUATION/BACKGROUND

1.1   This document provides a summary of the Digital Health and Care Wales (DHCW) Integrated Organisational Performance Report. A similar report is presented to DHCW Management Board monthly where board members present and discuss performance and resulting actions or risks. The content in the Workforce and Finance sections provide details of performance against statutory requirements.

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

2.1   During November and December, the increase in Covid cases across Wales and our focus on supporting the rapidly evolving digital requirements in the key priority areas of vaccinations and Test and Trace has required additional resources to be diverted away from planned activities. This combined with the highest impact to date to our own workforce during the pandemic, the impact on local interdependencies with partner organisations within NHS Wales and responding to a potentially significant cyber threat during this period has resulted in a number of delays and Change Controls. Additional external resource has been brought in to mitigate this impact and we are conducting a detailed analysis of the impact on the plan.

2.2   **Achievements in November and December 2021, include:**
- o   During the period substantial work was completed within the Welsh Immunisation System (WIS) to support the accelerated booster programme and make the data available for the COVID Pass. This has meant that resource has been diverted from other items on the plan. The WIS system delivers near live vaccine data and intelligence, enables the ability to configure sessions based on priority group and need, it is a single point of vaccine record and includes call and recall appointment functionality.

- o   We have completed the final deployment of the new Hospital Pharmacy stock control system in Betsi Cadwaladr Health Board. Completing the roll out and bringing modern pharmacy technology to hospitals across NHS Wales. The new system provides efficiencies and consistent ways of working across hospitals, improves the accuracy of computerised dispensing and medicines stock management and contributes to safer and more consistent patient care.

- o   We have been defining our Architectural Vison, each of the architectural building blocks have been identified and a thorough review has taken place of the Building Blocks work which has involved key stakeholders totalling over 1,000 total attendees. The response was very positive. The next steps are to publish a revised version considering the feedback and, to develop the

delivery plan and Data Strategy. The API Management tool procurement has also been delivered in the period. The first deployment of our clinical data engine in Cwm Taf Morgannwg is also significant with the first use of Open EHR for allergies and patient warnings data, supplementing the data already available in our reports and documents repositories.

o   Welsh Emergency Department System (WEDS) has been piloted by Swansea Bay UHB at Neath Port Talbot Minor Injuries Unit. Users moved from paper to a totally paper-free environment. The system will improve the clinical and operational information available, allowing resources to be mapped and forecast against activities and support an efficient integrated patient pathway through the emergency department.

o   The Business Case for the Radiology Information System Procurement has now been approved by the Health Boards, Trusts and DCHW enabling the procurement to commence.

o   The final stages of the Data Centre Transition programme have been successfully completed.

o   The service desk has retained its Service Desk Institute 3-star accreditation as a customer led service desk following a successful audit. DHCW has also been successfully audited against BS 10008 Evidential Weight & Legal Admissibility.

o   Additionally, the "*Introduction of Cardiac Risk Prioritisation Reporting"* Data Standard Change Notice has been published to support the standard collection of key data in this area, Phase 2 of the Value from Health Lung Dashboard has been made available and DHCW has developed its Decarbonisation plan.

2.3   There are two corporate risks relating to the plan:

1.   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.

2.   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.

2.4   Scorecard

The Scorecard provides an 'at a glance' indicator of performance in key areas. As DHCW is a new organisation there are areas under development which will be populated over time. The details below highlight any areas where the level of performance is falling below the required level as well as those areas where we have recovered the position since the October Board. The full report provides further details on these areas.

o   **Operational Service Performance – AMBER**
KPIs were achieved across all domains except one in November and December. This is being monitored by the Operational Services Board. There were two significant IT service incidents in November, one of which was not resolved within the target fix time. There was one significant IT service incident in December, which met its target fix time.

o   **Personal Development Appraisal Reviews Compliance – AMBER**
Compliance is recovering and is now at 82.13% - below the national target of 85% but an improvement on the last reported position of 80.88%. Specific plans and targeted training continue with those areas of the organisation that need support to achieve compliance.

2.5 Workforce

The Recruitment Task Force continues to make a positive impact on recruitment, although the volume of work required continues to pose a challenge. 261 posts have been filled to date. 111 by internal applicants and 150 by external applicants.

DHCW continues to work with three recruitment agencies to support recruitment of the volume of staff needed. A new CV database is now in use.

We are actively reviewing our Annual Business Plan to understand the impact of our vacancy position and any objectives that we anticipate may not be met will be escalated to the Management Board.

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

3.1 There are no matters for escalation to the Board in this report.

4. RECOMMENDATION

The Board is being asked to:

DISCUSS and **REVIEW** the report as representative of the performance of the organisation for the period November /December 2021.

5. 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

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

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: n/a

No, (detail included below as to reasoning)	Outcome: n/a
Statement: Organisational Performance reporting equally effects all. An EQIA is not applicable.	

APPROVAL/SCRUTINY ROUTE:

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

COMMITTEE OR GROUP	DATE	OUTCOME
DHCW Management Board	13th January 2022	Approved

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 and 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

Tolley,Laura
01/20/2022 12:01:25

SPECIAL HEALTH AUTHORITY
BOARD REPORT
DECEMBER 2021

Integrated Organisational Performance Report

DIGITAL HEALTH AND CARE WALES

BOARD

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 Objectives within the Annual Plan; data is produced and verified at various levels throughout the DHCW governance structure, with final approval taking place at Management Board. This report supports the requirements of Management Review as defined in ISO 9001 and other related standards.

The approach and process for Integrated Organisational Performance is evolving within the new digital organisation, therefore this report is developing over time as requirements are further refined.

Scorecard

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

- **Operational Services – AMBER:** one of the three significant incidents did not meet their restoration target.

- **Appraisal compliance – AMBER:** has reached 82.13% in December continuing to improve following targeted activity across the organisation and ESR issues.

- **Information Governance – AMBER:** three Freedom of Information requests were not answered within the statutory timescales in November.

Tolley,Laura
01/20/2022 12:01:25

FINANCE & WORKFORCE			GOVERNANCE & QUALITY		
FINANCE Forecast Revenue Break Even to ensure the organisation's expenditure does not exceed aggregated income	Forecast to Remained 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 = 96.7%)	All audit actions are on track to be completed by their target date	ISO and BS Standards compliant with requirement	**GOVERNANCE & QUALITY**
WORKFORCE Sickness absence below threshold 6% (actual 3.17%)	Appraisals compliance target below 85% (achieved 82.13%)	Statutory and Mandatory Training compliance target above 85% (achieved 90.9%)	Clinical Risk Management	Corporate Risk Management	
OPERATIONAL SERVICE DELIVERY Commercial Services contract management compliant with KPI	Operational Service Support is stable with KPIs being achieved across all domains but one	Contribution to keeping NHS Wales working through Covid-19 pandemic	Service Level Agreement performance meetings with stakeholders conducted to schedule	Strategic engagement meetings with NHS partners conducted to schedule	**ENGAGEMENT & FEEDBACK**
Clinical Assurance and Information Governance requests and incidents resolved within KPI	One out of three significant IT Service Incidents were not managed within SLA target to restore service	Other metric under development	Customer feedback Satisfaction to Local Service Desk target above 90% (actual 94%)	Other metric under development	
OPERATIONAL SERVICE DELIVERY			ENGAGEMENT & FEEDBACK		

Plan on a Page

Achievement Summary

Risks to the Plan

Corporate Planning
Annual Business Plan

The Annual Business Plan sets out the strategy for Digital Health and Care Wales and responds to the key priorities of both Welsh Government and NHS Wales' digital transformation trajectory in the form of strategic objectives and enabling deliverables. A set of milestones is then developed to recognise the work that will be undertaken to deliver upon the strategic objectives.

This section provides a reflection on the progress of milestones, including completion of the plan, achievements, changes to the plan and 'hotspots' which need further work to resolve. The plan is overseen by the Planning & Performance Management Group (PPMG) which reports to Management Board.

REPORT

DIGITAL HEALTH AND CARE **WALES**

BOARD

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

Key | Change Control

REF	PORTFOLIOS		QTR 1 APR-JUN 2021	QTR 2 JUL-SEP 2021	QTR 3 OCT-DEC 2021	QTR 4 JAN-MAR 2022
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	Defining our Architectural Vision RAG REASON: Architecture Design staff were on Covid priorities	Procuring an Application Programming Interface Management System RAG Reason: Delayed due to conflicting priorities → Oct 21 / → Nov 21		
				Building national data stores and standards as part of the National Data Resource Programme		Building national data stores and standards as part of the National Data Resource Programme
2	Protecting Patient Data	Develop an IG and Cyber Security framework, standards and mechanisms resulting in data remaining secure and NHS Wales being trusted to host patient and service user personal information	Launch the Cyber Resilience Unit	Support Welsh Government with development of Information Governance Framework		Support Welsh Government with development of Information Governance Framework
3	Sustainable Infrastructure	Develop and maintain a high-quality national infrastructure, transitioning to the cloud for better availability, reliability, safety, security, speed and agility		Develop the Cloud Strategy RAG Reason: redrafting	New Data Centre move	
4	Digital Health Professional Empowerment	Accessing a content rich care environment, agnostic of health board and geographical boundaries by expanding the content, availability and functionality of the Digital Health and Care Record to be the front-door for real-time access to person-specific health and care data	Go live with the Nursing Care Record	Cancer Minimum Viable Product	→	
				Populating the Digital Health Record		Populating the Digital Health Record
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			Proof of Concept of new Digital Service for Patients and Public →	
6	Public Health	Develop, operate and maintain a set of high-quality national digital services to support Public Health prevention and early intervention Programmes	Respond to confirmed requirements for Test Trace and Protect			Respond to confirmed requirements for Test Trace and Protect
7	Primary and Community Care	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	New GP supplier chosen	Mental Health Core Data Set	Community data sharing across primary and secondary care	
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	Respond to Covid-19 recovery initiatives			Respond to Covid-19 recovery initiatives
				Emergency dept system available for roll out → Dec 21 / Nov 21		Intensive Care System available for roll out
9	Diagnostics	Develop, operate and maintain a set of high-quality national digital services to enable the modernisation of diagnostics		Business Case for new radiology system	All Wales Image Sharing Pilot	
				Electronic radiology requesting available for further roll out		Electronic radiology requesting available for further roll out
10	Medicines management	Develop, operate and maintain a set of high-quality national digital services to enable modernisation of medicines management	Hospital Pharmacy available for roll out	Respond to Medicines Management Review		Respond to Medicines Management Review
11	Value from Data	Driving value from data for better patient outcomes and service planning	Responding to analytical requirements from Covid-19, Essential Services and Value Based Healthcare			Responding to analytical requirements from Covid-19, Essential Services and Value Based Healthcare

Tolley, Laura 01/20/2022 12:08:25

YEAR TO DATE SUMMARY:

Our strategic objectives describe how we will deliver information and technology for better patient care. We have **3 enablers** which provide the foundations of what we do around information flow, protecting data and a sustainable infrastructure. Our **8 portfolios** cover a wider range of delivery areas supporting the digital needs of patients and NHS professionals – and ensuring the availability of data across Wales when and where is it needed.

Year to date we have seen some significant achievements in key areas but we have seen change controls to the plan due to the ongoing impact of Covid-19 and external influences.

PORTFOLIO REF	PORTFOLIO OBJECTIVE	ACHIEVING OUR STRATEGIC OBJECTIVES
01	**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	In response to the Digital Architecture Review (2019) a detailed set of building blocks have been documented during Q2 in partnership between the DHCW and National Data Resource (NDR) architect team. This vision for our Architectural Building Blocks (ABB) was presented through October with a series of planned engagement activities which will result in a plan-defining specification in Q3.

DHCW and NDR are in partnership, procuring a consultancy service to develop a Data Strategy which will take into account national requirements. Work has progressed on SNOMED-CT (terminology service) and the Clinical Data Engine has gone live in the first health board.

Impact: The Architectural Building Blocks create the foundations for data acquisition, sharing and analysis. The Data Strategy item will create a data strategy to drive work forward, to effectively utilise data and ensure that the wide-ranging work being done in the NDR Programme is aligned to a clear direction of travel. |
| 02 | **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 | The launch of the new Cyber Resilience Unit has been completed. The Unit continues to plan and coordinate Network and Information Systems (NIS) Regulations compliance baselining activity for NHS Wales. The unit will also act as an incident reporting function to Welsh Government for any NIS breaches. The various readiness activities such as developing an Information Asset Register, identifying and training Information Asset Owners continue to progress.

Impact: This work enables the next phases of protecting patient data through Information Governance and Cyber Security to proceed, therefore enabling standards and mechanisms which protect data and NHS services. |
| 03 | **Sustainable Infrastructure:** Develop and maintain a high-quality national infrastructure, transitioning to the cloud for better availability, reliability, safety, security, speed and agility | The transition of systems to the infrastructure in our new data centre is complete and the project has closed. The development of a Cloud strategy is in its latter stages of drafting.

Impact: A successful and timely transition of systems and services to new infrastructure ensures we have a sustainable technical platform where systems are up to date and supported – fundamental for the availability of patient information for clinical care. |

Tolley,Laura
01/20/2022 12.01.25

PORTFOLIO REF	PORTFOLIO OBJECTIVE	ACHIEVING OUR STRATEGIC OBJECTIVES
04	**Digital Healthcare Empowerment:** Accessing a content rich care environment, agnostic of health board and geographical boundaries by expanding the content, availability and functionality of the Digital Health and Care Record to be the front-door for real-time access to person-specific health and care data	We have gone live with our electronic Welsh Nursing Care Record in 5 Health Boards/Trusts - Hywel Dda, Velindre, Swansea Bay, Powys and Cwm Taf Morgannwg, with over 3000 monthly users. This is a key national milestone – for the first time nurses are using nationally agreed standard assessment forms completed by them electronically. Nearly 950k digital assessments and inpatient nursing notes have been created since the first go-live in April 2021. **Impact:** This is the start of a journey to remove the reliance on paper – and to free up nurses to spend more time with patients. Less duplicated data entry, fewer transcribing errors, better data. We continue to populate our national repositories with electronic documents (35 million) and test results (216 million) and now nursing assessments. This month has seen increased sharing of data across Health Board boundaries. Views of results data have increased significantly compared with last year (90% growth). We are see growth in cross boundary views of pathology tests and patient documents – 1 in 10 test results and 1 in 6 electronic documents were produced in a neighbouring health board. We had added a new data store called the Clinical Data Engine which has gone live in Cwm Taf Morgannwg with the first use of OpenEHR (an open standard specification in health) for allergies and patient warnings. **Impact**: Availability of these data stores directly improves patient care as the clinician is better informed and it releases more time for direct care as there is no need to request paper copies. It also removes the need for repeat investigations for patients. The Clinical Data Engine will mean clinical information will start to be made available to multiple systems removing the need to repeat questions to patients.
05	**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	Contracts signed for the new Digital Services for Patients and the Public (DSPP) platform, to be developed on an iterative basis. A proof of concept has begun - refining use cases and starting development. **Impact**: This enables work to begin on the NHS Wales App and underpinning technology/services to help patients participate electronically with health and care services and ultimately benefit from the convenience and speed of digital services to improve self-care and wellbeing.
06	**Public Health:** Develop, operate and maintain a set of high-quality national digital services to support Public Health prevention and early intervention Programmes	DHCW has played a digital leadership role in the Welsh Government Test Trace and Protect strategy. This includes the provision of Covid-19 electronic test requesting and results viewing solutions, a case management and contact tracing application, development of a Welsh Immunisation System and the digital Covid Pass. Multiple data integrations have enabled data to flow within Wales, the NHS Covid-19 app, laboratory systems, and other UK locations. We continue to respond to frequent new requirements – the latest being configuring systems to cope with the expansion of the booster programme. **Impact:** The DHCW Covid-19 contact tracing, testing and vaccination solutions are crucial in the policy decision making and operational management of the pandemic. Our provision and analysis of data helps the prioritising of activity on the ground.
07	**Primary and Community Care:** 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	Contract awards have taken place for the new GP Suppliers (EMIS imminent), engagement has commenced to look at cluster working within GPs and the existing interoperability standards available through the GP IT Futures (Framework) for GP Systems. Significant collaborative work across health and social care has taken place this year, nationally and locally on upgrading the Welsh Community Care Information System and working with local authorities on solutions which bring together and visualise health and social care data such as in Powys. **Impact:** These initiatives will support integrated working across primary and community care settings to progress, promoting to care close to home.

PORTFOLIO REF	PORTFOLIO OBJECTIVE	ACHIEVING OUR STRATEGIC OBJECTIVES
08	**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	Our Welsh Patient Referral Service now features electronic advice functionality so doctors in primary and secondary care can request and receive guidance about patients electronically and in some cases this means that patients do not need to come into hospital for an appointment. Our Welsh Emergency Department System had its first go live in Swansea Bay (Neath Port Talbot Minor Injuries Unit) where users moved from paper to a paper-free environment. **Impact:** Our functionality supports clinicians and other NHS Wales staff being able to work remotely and reduce the need for face to face appointments. The e-Advice functionality saw first-appointment savings in its first week. The emergency department system will allow sharing across organisations improving efficiency and safety.
09	**Diagnostics:** Develop, operate and maintain a set of high-quality national digital services to enable the modernisation of diagnostics	The new Laboratory systems (LINC) Full Business Case was approved by Welsh Government and the contract now signed. DHCW will support the interoperability design phase. The procurement has started for the new Radiology Informatics Solution. The Invitation to Tender has gone to the market. DHCW are running the procurement. **Impact:** These early stages in both programmes ensure that the next steps can progress and the move towards modernised diagnostic systems will continue.
10	**Medicines Management:** Develop, operate and maintain a set of high-quality national digital services to enable modernisation of medicines management.	The Hospital Pharmacy Stock Management Service has been rolled out to all health boards. The new stock control system has been implemented at hospital sites in Aneurin Bevan, Betsi Cadwaladr, Cardiff and Vale, Cwm Taf Morgannwg, Powys, Hywel Dda, Swansea Bay Health Boards and Velindre Trust and three prisons (HMP Swansea, HMP Cardiff and HMP Berwyn). The new Digital Medicines portfolio is being initiated with the appointment of a Senior Responsible Officer and other senior posts. **Impact:** Users have confirmed that we are supporting modernisation in medicine stock control by allowing like for like comparisons of activity such as dispensing data 'for the first time'. This is an essential factor in driving up efficiency in this area, and reducing variation. The Digital Medicines programme will include electronic prescribing for hospitals which will improve patient safety and drive efficiencies.
11	**Value from Data:** Driving value from data for better patient outcomes and service planning	We have scoped-out the requirements and service options for the development of a Research and Innovation function. We have created a number of National Data dashboards that combine and visualise a wide range of information relating to clinical outcomes, secondary care activity, case mix variables, mortality, and socio-economic factors for specific clinical areas. These innovative dashboards are being utilised by clinical teams, special interest groups, clinical networks, support functions and other stakeholders to inform better decision making. **Impact:** This provides key data and information, informing better patient outcomes and service planning, and also improves service planning for innovation.

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	NWIS 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** A recruitment Task and Finish Group has been established to focus on all outstanding vacancies and put into action a plan to get staff into position. Extra help has been identified to help speed up the administration of the recruitment process.
ALL	ALL	NWIS 0237 **IF** new requirements for digital solutions to deal with Covid-19 and recovery of services 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** The 2021/22 DHCW Plan was approved by the DHCW Board in May subject to detailed feedback from Welsh Government. Ongoing assessment of impact of new requirements being managed by the Planning and Performance Management Group and Planning team.

Tolley,Laura
01/20/2022 12:01:25

Financial Management

The following section provides insights to organisational performance against key financial revenue & capital indicators inclusive of COVID 19 Response and Digital Priority Investment Fund initiatives. Financial risks and opportunities are also articulated.

Tolley, Laura
01/20/2022 11:01:25

DIGITAL HEALTH AND CARE WALES

REPORT

BOARD

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

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

• Revenue – Operational underspend as per forecast of £0.550m after applying savings target profile.

• Capital – Current Spend of £4.9m against plan

• PSPP – DHCW have paid 96.7% 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 £0.550m – The current forecast is for an end of year underspend of £0.350m.
Remain within Capital Expenditure Limit (To ensure net Capital Spend does not exceed the Capital Expenditure Limit)		£4.9m spend for period against a capital limit of £12.4m
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 – 97%
Bank Sufficient bank balances		Balance as at 31/12 £2.4m

SUMMARY:

• The organisational forecast end of year revenue underspend remains at £0.350m. Vacancy gains are offset by pressures of both pay and non-pay relating to ICT.

• Continuing to support COVID and in December focus was on the Vaccine system enhancements to support accelerated booster campaign. Secured external supplier support for Vaccines.

• DPIF quarter 3 reviews presented non deliverable spend within WCCIS which will not be drawn down this financial year, anticipated to be £1.7m.

• In the last quarter Capital spend is forecast at £7.5m with WPAS Capital funding of £1.080m for essential replacement infrastructure has now been approved by Welsh Government included in 21-22 and orders have been raised following approval by the Board. Focus on the remaining balances within Capital spend relating to DSPP and Covid.

• PSPP target attained and sufficient cash balances in place.

Workforce

Workforce data is held in the Electronic Staff Record (ESR) and is overseen by the Workforce & Organisational Development Team (WFOD).

The following data provides insights to key performance indicators which are closely managed in all NHS Wales organisations. Our data compares each Digital Health and Care Wales directorate against these key areas:

- Sickness Absence
- Appraisals
- Statutory & Mandatory Training

DIGITAL HEALTH AND CARE **WALES**

REPORT

BOARD
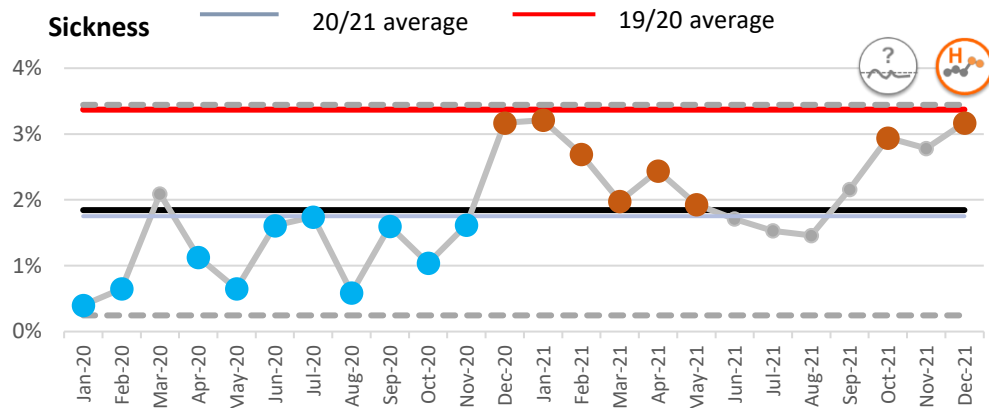
Sickness

Sickness absence has increased from 2.78% last month to 3.17% this month. This includes 21 known Covid-19 related cases which has increased substantially from 11 last month. Long term sickness has increased slightly by 0.67% to 1.82% whilst short term sickness has decreased slightly by 0.29% to 1.34% (last month was 1.63%). There are 10 recorded sickness in relation to Anxiety/Stress/Depression which remains the same as in November.
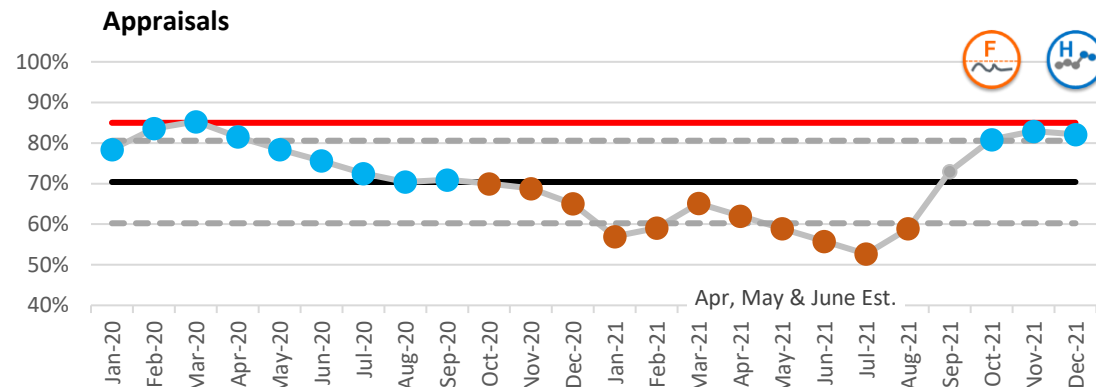
Appraisals

Appraisal completion rate is 82.13% this is a decrease of 0.8% on last month (82.93%). This is below the Welsh Government target of 85% for NHS Wales.

Statutory and Mandatory Training
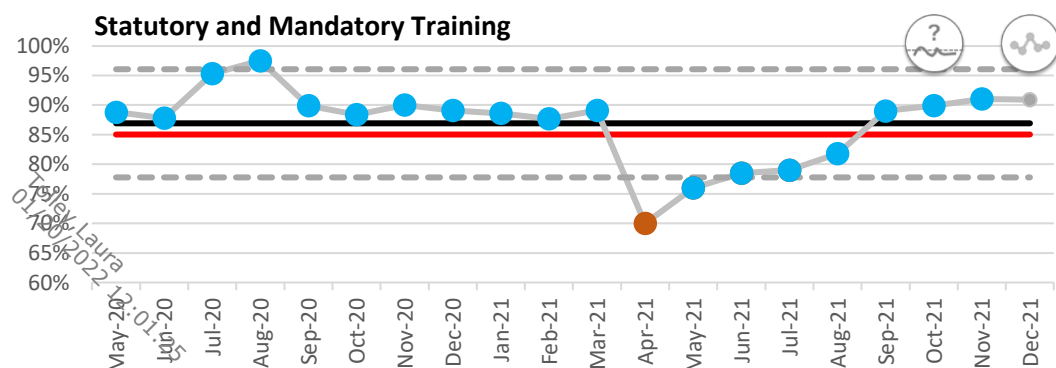
Statutory and Mandatory Training has slightly decreased by 0.5% on last month (91.4%) to 90.9% which is above the Welsh Government target for NHS Wales of 85% for NHS Wales.
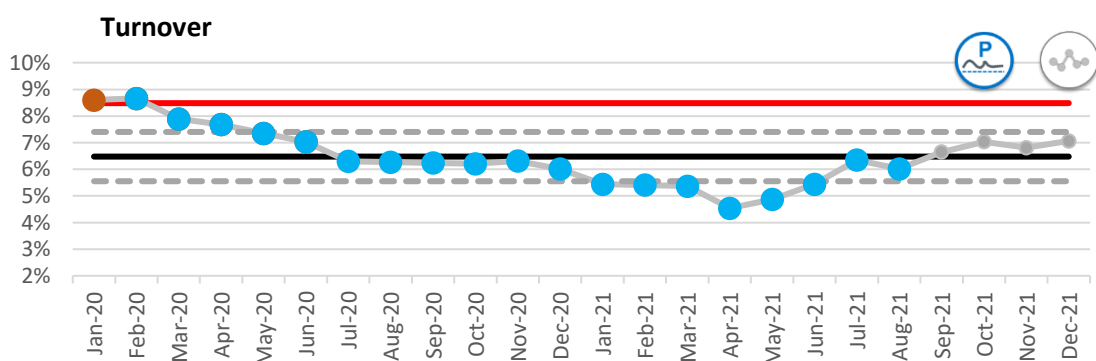
Turnover

Turnover is 7.06% (6.81% last month), a slight increase from November.

SUMMARY INDICATORS	NOV-20	DEC-20	JAN-21	FEB-21	MAR-21	APR-21	MAY-21	JUN-21	JUL-21	AUG-21	SEP-21	OCT-21	NOV-21	DEC-21
Sickness Absence	3.09%	3.30%	3.23%	2.69%	1.98%	2.44%	1.93%	1.71%	1.53%	1.46%	2.16%	2.94%	2.78%	3.17%
Appraisals*	68.76%	65.03%	56.91%	59.05%	65.15%	^	^	^	52.70%	58.90%	72.90%	80.88%	82.93%	82.13%
Statutory and Mandatory Training*	90.03%	89.12%	88.57%	87.70%	89.10%	84.50%	82.90%	81.40%	79.00%	81.80%	89.00%	89.09%	91.4%	90.9%

* Welsh Government target = 85%
^ not available

SUMMARY:

- The overall **sickness** rate (**GREEN**)

  - The overall recorded sickness absence has increased has increased from 2.78% last month to 3.17% this month.

  - Long term sickness has increased to 1.82% whilst short term sickness has decreased to 1.34%

  - There have been 32 known Covid-19 related absences (11 in November and 21 in December)

  - Anxiety/Stress/Depression continues to be the main reason for absence, followed by Gastrointestinal and infectious diseases (likely Covid-19)

- **Appraisal** completion rate **(AMBER)** is 82.13% this is a decrease of 0.8% on November month (82.93%). This is below the Welsh Government target of 85% for NHS Wales. .

- **Statutory and Mandatory Training** (**GREEN**) has slightly decreased by 0.5% on last month (91.4%) to 90.9% which is above the Welsh Government target for NHS Wales of 85% for NHS Wales..

- **Turnover** is 7.06% (6.81% last month), a slight increase from November..

- The **DHCW Recruitment Task Force** continues to focus on advertising current vacancies. 261 posts filled have been filled since 1st April 21 (111 internal and 154 external)

Recruitment Task Force weekly meetings are held and an update provided at the weekly Directors meeting.

FOCUS DURING DECEMBER

- Implemented the new Scrutiny process using Microsoft Forms

- CV database active.

PROGRESS TO DATE – WTE

- 261 posts filled since 1st April 21 (111 internal and 150 external)

- 20 vacancies are currently live on Trac

- 6.8 vacancies are at the shortlisting stage

- 16 vacancies are at the interview stage

- 67.73 vacancies are at the offer/PEC stage

- 16.53 vacancies have a confirmed start date

FOCUS NEXT MONTH

- Review of the Corporate Induction content and delivery

- Place booked on the Welsh Contact Centre Industry Jobs Fayres for Service Desk on 17th Feb at City Hall

- Meeting scheduled with NWSSP to look at the Applicant dashboard in ESR

- Job Matching sessions (postponed from Nov) booked for 15th and 16th February

Procurement Schedule

Commercial Services

Procurement and Contract Management are the domain of our Commercial Services department.

The team supports all internal procurements and contracts, as well as working with other NHS Wales organisations on major all-Wales initiatives relating to health informatics.

DIGITAL HEALTH AND CARE **WALES**

REPORT

BOARD

The following procurement contracts were 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
Citrix Licencing	DHCW Internal	Renewal of Citrix Licences with option to move to cloud-based licences instead of on premise.	£1.4M	3	01/01/2021	25/11/2021	Approved at November Board
Evidence Summaries	All Wales	Purchasing three (3) Evidence Summaries – BMJ Best Practice, Clinical Key and Clinical Key Nursing with the option to purchase BMJ Co Morbidities.	£2.6M	2+1	01/12/2021	25/11/2021	Approved at November Board
End of Year e-Journals	All Wales	E Journals for NHS Wales. (e-library)	£1.7m	1	01/01/2022	25/11/2021	Approved at November Board
WPAS Hardware Refresh	DHCW Internal	Refresh of WPAS Hardware and ongoing support.	£875K	5	01/12/2021	25/11/2021	Approved at November Board
O365 Phase 3 Resources	All Wales	Provision of consultancy to support the continued roll out of the O365 suite of products across Wales.	£6.5m	3	01/02/2022	27/01/2022	Presenting to January Board
DSPP	All Wales	Programme Consultancy for Digital Services for Public and Patients ("DSPP") – Uplift to Contract Value	£0.99m	2	01/09/2020	27/01/2022	Presenting to January Board for an increase in Contract Value (£290k)

Tolley, Laura
01/20/2022 12:01:25

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
Telephony Solution for Test Trace Protect	All Wales	Telephony solution which underpins the Test, Trace & Protect System to effectively manage the Covid Pandemic.	£1m	1+1+1	01/04/2022	31/03/2022	Progressing to plan
Microsoft Enterprise Agreement	All Wales	Enterprise Agreement to give over 100,000 NHS Wales staff access to Office 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 Office 365.	£80m	3+1	01/07/2022	31/03/2022	Progressing to plan
Welsh Hospital e-Prescribing and Medicines Administration	All Wales	Provision of a framework for Electronic Prescribing systems for Health Boards in NHS Wales.	£35m	4	01/06/2022	26/05/2022	Procurement planning stage
Dental Referral System	All Wales	Digital solution to facilitate and track dental referrals on a health board by health board basis across Wales.	£2.25m	3+1+1	01/06/2023	26/05/2022	Progressing to plan
Data Centre	All Wales	Provision of a Data Centre service to host NHS Wales Services and Infrastructure	£4m	5	01/06/2022	26/05/2022	In plan
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.	£3m	5	01/08/2022	28/07/2022	In plan
Radiology Imaging System	All Wales	Digital solution to store, access, review and report radiology images	£40m	10	15/04/2023	30/03/2023	In plan

Operational Service Management

Operational services encapsulates the software and hardware that enable patient information to be captured, stored and made available to NHS Wales staff (when and where required, regardless of geographic boundaries), in the diagnosis and treatment of patients. Certain information is also available to patients and other users.

The majority of our resource is deployed to designing, building and making available the systems and services used to make this happen.

NB: In some cases the details of Significant IT Service Incidents in this section will be abridged or re-worded to make them more readable or to protect sensitive information, however the master records remain intact.

DIGITAL HEALTH AND CARE WALES

REPORT

BOARD

SUMMARY:

- Operational Service Support is stable with KPIs being achieved across all domains but one.

- There were two Significant IT Service Incidents in November and one in December, one Incident in November was not resolved within target Service Level Agreement resolution times.

- The Service Desk abandoned call rate is below 2%. The service desk team are working extended hours to support the services related to the COVID-19 pandemic.

Tolley, Laura
01/20/2022 12:01:25

PERFORMANCE AREA	METRIC	DEC-20*	JAN-21*	FEB-21*	MAR-21*	APR-21*	MAY-21*	JUN-21*	JUL-21	AUG-21	SEPT-21	OCT-21	NOV-21	DEC-21
National Services - Critical (excluding GP Systems)	Total Calls **Resolved** as Incidents (% resolved within timescale)	1901 (87%)	1457 (91%)	1442 (93%)	1703 (95%)	1791 (92%)	1476 (94%)	1632 (95%)	1891 (89%)	1622 (95%)	2085 (95%)	1901 (90%)	1990 (94%)	1526 (92%)
	Total Calls **Resolved** as Service Requests (% resolved within timescale)	5847 (94%)	6437 (95%)	5813 (96%)	5746 (97%)	5547 (97%)	5054 (96%)	5322 (97%)	7497 (96%)	5630 (92%)	6254 (97%)	6117 (96%)	7107 (98%)	7087 (98%)
National Services – Standard (excluding GP Systems)	Total Calls **Resolved** as Incidents (% resolved within timescale)	300 (98%)	282 (98%)	288 (98%)	374 (98%)	474 (98%)	430 (97%)	441 (99%)	392 (96%)	423 (99%)	419 (97%)	419 (96%)	392 (99%)	284 (98%)
	Total Calls **Resolved** as Service Requests (% resolved within timescale)	897 (97%)	1017 (96%)	1152 (98%)	2046 (99%)	1170 (98%)	1061 (96%)	1799 (96%)	1809 (97%)	1273 (93%)	1288 (96%)	1278 (96%)	1295 (97%)	1059 (96%)
Desktop Support Service - Critical	Total Incidents **Resolved** (% resolved within timescale - Target > 90%)	1,195 (98%)	1537 (97%)	1365 (97%)	1537 (97%)	1332 (98%)	1430 (97%)	1,431 (97%)	1423 (95%)	1274 (91%)	1461 (97%)	1448 (96%)	1350 (97%)	1276 (96%)
	Total Service Requests **Resolved** (% resolved within timescale - Target > 90%)	834 (98%)	1141 (99%)	987 (97%)	1267 (99%)	1115 (99%)	1042 (97%)	1,060 (98%)	1110 (93%)	1111 (92%)	1147 (97%)	1098 (96%)	1071 (96%)	1030 (96%)

*Incidents & Service Requests resolved in the period from calls only logged in the same month.

PERFORMANCE AREA	METRIC	DEC-20	JAN-21	FEB-21	MAR-21	APR-21	MAY-21	JUN-21	JUL-21	AUG-21	SEPT-21	OCT-21	NOV-21	DEC-21
National GP Services - Critical - Vision	Calls Logged as Incidents (% resolved within timescale)	482 (99%)	509 (99%)	482 (100%)	551 (100%)	649 (100%)	554 (99%)	540 (99%)	578 (99%)	455 (98%)	562 (99%)	547 (99%)	587 (100%)	TBC
	Calls Logged as Service Requests (% resolved within timescale)	166 (99%)	245 (100%)	231 (100%)	242 (100%)	249 (100%)	222 (100%)	180 (100%)	257 (99%)	178 (100%)	194 (99%)	227 (100%)	242 (99%)	TBC
National GP Services - Critical - EMIS	Calls Logged as Incidents (% resolved within timescale)	194 (93%)	133 (91%)	248 (92%)	219 (91%)	377 (94%)	238 (84%)	260 (99%)	311 (98%)	217 (96%)	203 (98%)	175 (94%)	212 (92%)	TBC
	Calls Logged as Service Requests (% resolved within timescale)	40 (95%)	36 (100%)	30 (100%)	30 (100%)	28 (100%)	37 (100%)	61 (98%)	43 (98%)	41 (98%)	114 (98%)	41 (98%)	38 (95%)	TBC

SUMMARY:

The top table relates to national services and desktop support. Primary Care services in the lower table have an alternative reporting method, factoring in calls logged directly with suppliers that are not reportable via ServicePoint.

	DEC-20	JAN-21	FEB-21	MAR-21	APR-21	MAY-21	JUN-21	JUL-21	AUG-21	SEP-21	OCT-21	NOV-21	DEC-21
Total	4	5	6	2	5	6	4	7	7	2	4	2	1
Number which breached	0	0	0	0	0	0	0	0	0	0	2	1	0

Significant IT Service Incidents

Tolley,Laura
01/20/2022 12:01:25

Legend: Not Breached (green), Breached (red)
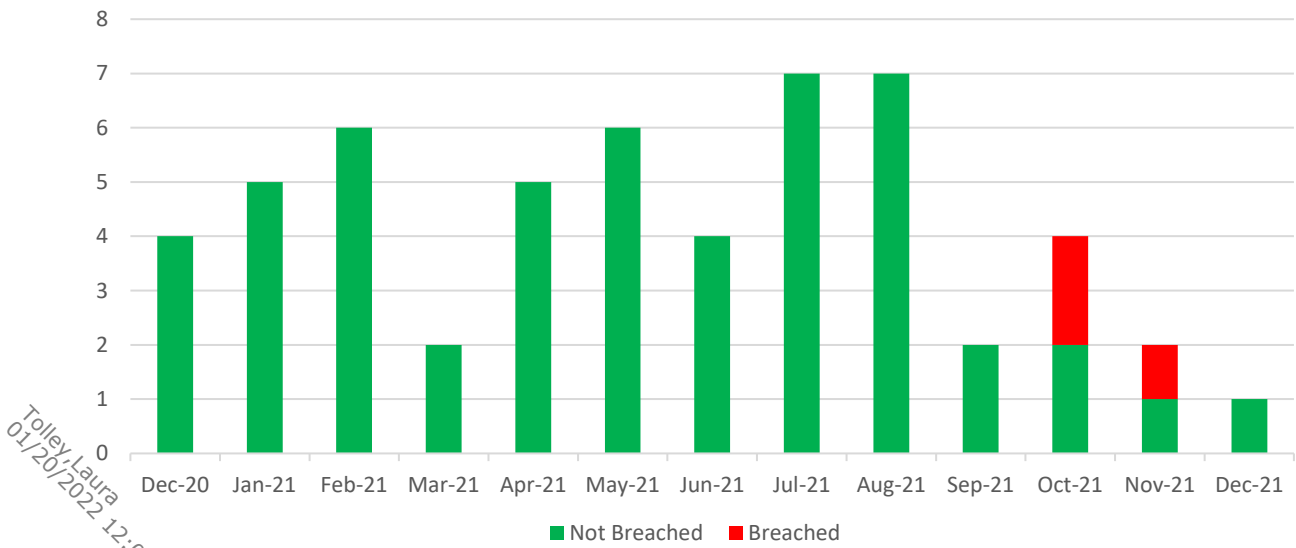
NOVEMBER SUMMARY:

There were **two** Significant IT Service Incidents reported in November:

- WRIS affecting service at both Singleton & Morriston hospitals which was resolved in under 30 minutes.

- Vision GP system with 124 sites affected. This was resolved within the SLA time of 8 hours with technical teams from the data centre (Vantage), DHCW & Cegedim collaborating in order to restore service.

DECEMBER SUMMARY:

- One Significant IT Service Incident was reported affecting users of Welsh PAS in Betsi Calwaladr Central area.

Please note: An issue has been highlighted with this slide on previous reports. These figures have been checked and updated.

SERVICE(S) AFFECTED	VISION, MY HEALTH ONLINE (MHOL) (11/11/2021)		SERVICE LEVEL: CRITICAL (VISION)/STANDARD (MHOL)	MULTIPLE P2S/ 1 HIGH PRIORITY PROBLEM	PROBLEM REF. 26081
DATE/TIME	Issue 1st detected 11/11 **04:36** 1st INPS Incident Report received: 11/11 **08:07** Incident resolved: 11/11 **13:47**				Time to resolution was 5 hours 40 minutes Incident **did** breach 4-hour SLA target
DESCRIPTION	There was a loss of service to half the Cegedim/Vision GP sites in Wales - and the associated My Health Online service. The first call was logged by a GP practice at 08:07 and the service was fully restored at 13:47. The data centre provider had a power outage to one of two power feeds. The power inputs in the affected rack were not distributed correctly across the two power distribution units, this resulted in the power to the servers failing a few hours after the data centre power outage started. This has since been rectified.				

SERVICE(S) AFFECTED	WRIS (29/11/2021)		SERVICE LEVEL: CRITICAL	P2	INCIDENT REF. 7206316
DATE/TIME	Incident reported: 29/11/ **16:03** Incident resolved: 29/11 **16:38**				Time to resolution was 35 minutes Incident **did not** breach 8-hour SLA target
DESCRIPTION	The service was unavailable for all users at both Morriston & Singleton Hospital sites. Swansea Bay University Health Board Web Server for Radis was successfully restarted which restored service.				

SERVICE(S) AFFECTED	WELSH PATIENT ADMINISTRATION SYSTEM (10/12/21)		SERVICE LEVEL: CRITICAL	P2/ 1 MEDIUM PRIORITY PROBLEM	INCIDENT REF. 7236918 PROBLEM REF. 26240
DATE/TIME	Incident reported: 10/12/2021 **05:56** Incident resolved: 10/12/2021 **06:42**				Time to resolution was 46 minutes Incident **did not** breach 4-hour SLA target
DESCRIPTION	Users in BCU Central were unable to log into WelshPAS. The incident was logged at 05.56 and the service was restored at 06:42 by switching to the standby database in the other data centre. The root cause was identified as a problem with the management card on the physical server, which caused the operating system to crash. It subsequently would not reboot without manual intervention on the physical server. The management card has since been fixed.				

OPERATIONAL PERFORMANCE
Service Desk

	JUL-20	AUG-20	SEP-20	OCT-20	NOV-20	DEC-20	JAN-21	FEB-21	MAR-21	APR-21	MAY-21	JUN-21	JUL-21	AUG-21	SEP-21	OCT-21	NOV-21	DEC-21
Total Number of calls logged	19730	17235	21434	21142	20238	17461	23337*	23033*	22545*	20044*	17749*	18473*	17786*	18017*	21266*	18694*	17915*	17542*
Total Number of TTP Calls Logged	534	316	470	972	766	1102	1945	3391	3421	2062	1641	1316	1304	1157	1312	1478	1614	1865
% All Abandoned Calls (Threshold 5%)	5.3%	4.0%	11.5%	5.9%	5.2%	4.0%	24.9%	19.2%	6.9%	3.1%	1.1%	4.5%	1.9%	1.4%	1.0%	0.5%	1.2%	1.5%

SUMMARY:

17,542 incidents and service requests were logged in December, this is lower than December 2020 (18,351) and higher than the previous three-year average of 15,210. Telephone abandoned calls rates remain within target at 1.5%, customer satisfaction remains above our target at 94% and employee satisfaction remains above target at 94%.

The First Contact and First Line Fix rates are as expected, and plans are in place to improve first contact and first line fix rates and introduce targets for both in early 2022. The service desk has retained its SDI 3-star accreditation as a customer led service desk in December 2021 and have been shortlisted for the SDI best service desk (large enterprise) finalists.

Figures updated to include all new direct calls to all teams, October '21 figures onwards retrieved from Power BI reports

First Contact and First Line Fix Rate
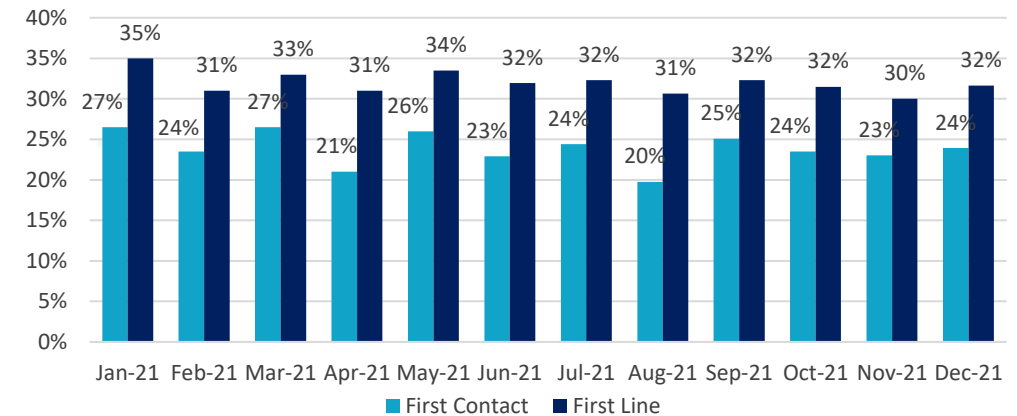
Incidents and Service Requests Received
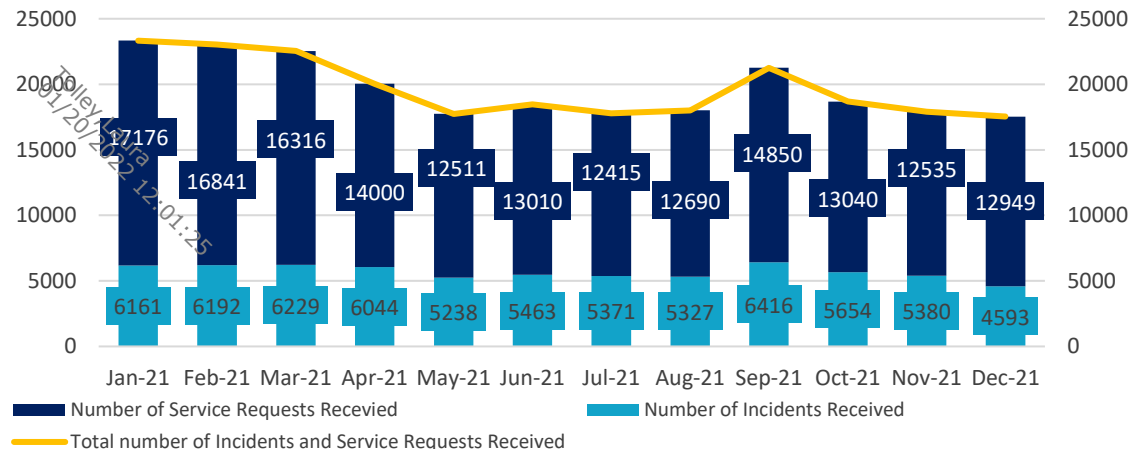
Telephone Abandoned Calls
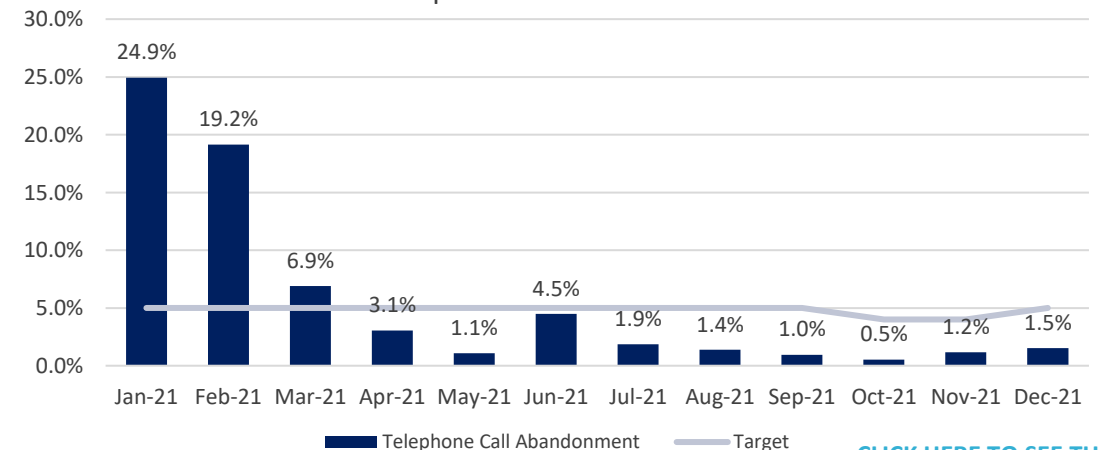
Clinical Assurance & Information Governance

Clinical Assurance and information Governance are overseen by the Clinical Informatics directorate, led by the Executive Medical Director.

The Clinical Assurance team is responsible for ensuring that services deployed into the live environment have been through a process of readiness across many domains, and to ensure that services have been assessed against patient safety criteria. The team also deals with clinical incidents and no surprise reporting, leading on root cause analysis, with the aim of putting in place practices to avoid re-occurrence of clinical incidents.

The Information Governance team is responsible for ensuring that all services meet Information Governance standards, and to manage and respond to Information Governance incidents, ensuring that reviews are carried out to identify root cause and avoid re-occurrence. The team also deals with Freedom of Information and Subject Access requests from outside of the organisation.

Trolley.aura
01/29/2022 13:01:25

DIGITAL HEALTH AND CARE WALES

REPORT

BOARD

CLINICAL ASSURANCE
Clinical Incidents/No Surprises

SUMMARY INDICATORS	DEC-20	JAN-21	FEB-21	MAR-21	APR-21	MAY-21	JUN-21	JUL-21	AUG-21	SEPT-21	OCT-21	NOV-21	DEC-21
Clinical Scorecard													
Clinical Assurance													
Clinical Incident /No Surprise Management													
Clinical Risk Management													
Serious Incident Investigation Timescales													

CLINICAL INCIDENTS SUMMARY:

- Two clinical incidents were logged in November, and three were closed.
- One new clinical incidents was logged in December

INFORMATION GOVERNANCE SUMMARY:

- In November 2021, DHCW received
  - **4** Freedom of Information Act (FOI) requests
  - **9** FOI and **1** Subject Access Request were responded to in November 2021.
  - **3** FOIs were not answered within the statutory timescales.
- In December 2021, DHCW received
  - **9** Freedom of Information Act (FOI) requests and **2** Subject Access Requests (SAR).
  - **4** FOIs and **2** SARs were responded to in December 2021.

The deadline for 1 request has been extended, in agreement with Directors and in line with the legislation, to allow DHCW to conduct a public interest test in relation to information which is exempt under Section 43 of the Act.

Response

Breach ● OnTime ● Breach ● % within target
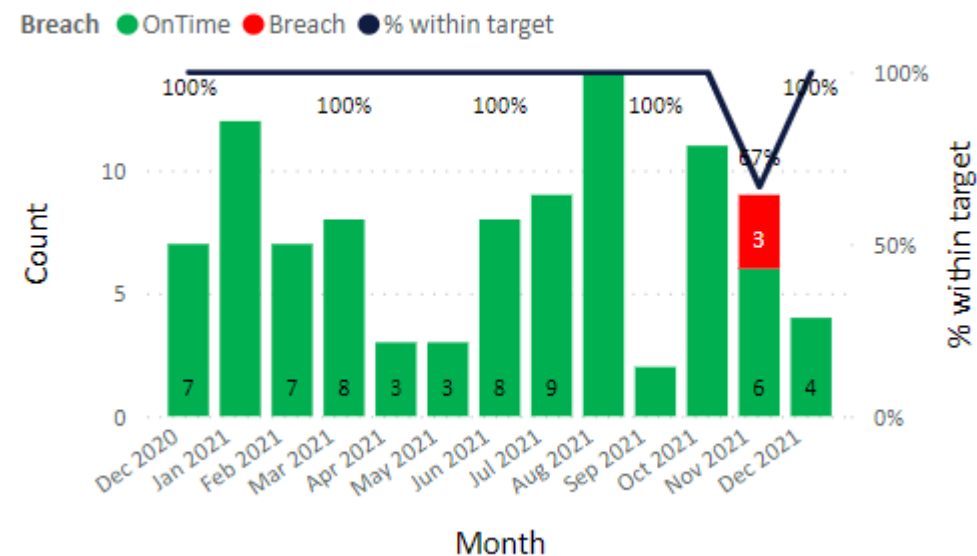
Diagram is for Freedom of Information Act requests only.

Audit

Corporate Risk Management

Quality Standards

Governance and Quality

This highlight report provides an overview of matters relating to audit, quality, governance, risk (including corporate risk) incidents logged in Datix, and service recipient feedback.

Governance and Quality are overseen by the following groups who meet monthly and feed into the Audit & Assurance Committee:

- Risk Management Group
- Quality & Regulatory Compliance Group
- Safety, Health and Environmental Group

DIGITAL HEALTH AND CARE WALES

REPORT

BOARD

NUMBER	RAG	STATUS
17		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
0		The implementation date has passed, and management action is not complete
23	Open Actions	

Following advice from Internal Audit, two actions dependent on third parties are managed via a separate log where they will be tracked. There has been progress on one and it is anticipated that this will be closed within the next month.

At the end of November 2021, 23 audit actions were open and no new actions have since been added. Eleven of these had been completed as of this date and a further five actions were completed in December 2021 bringing the total of completed actions to 17. Approval to close the 17 "green" actions will be sought at the January 2022 Audit & Assurance Committee. The remaining six are being reported as being on track for completion by their due date but it should be noted that four of these are due for completion before the end of this financial year. These are:

- ASPAR Replacement Technology (the Audit & Assurance Committee approved an extension to March 2022 (from the original target date of August 2021) in October 2021
- Replacement of Windows 7 Devices – March 2022
- Cyber Incident Response Plan Testing – March 2022
- Delivery of a Data Strategy which will define the roles of Information Services and the NDR – March 2022

KEY MATTERS FOR CONSIDERATION OF THIS MEETING

Excellent progress has been made since the last audits with a total of 17 actions being completed. 4 actions to be completed by March 2022.

Audit Wales are undertaking a Baseline Decarbonisation Review and have written to public bodies requesting evidence of their plans. DHCW have submitted a response A presentation of DHCW's Decarbonisation Strategic Delivery Plan will be provided to the next Audit and Assurance Committee which is to be held on 18th January 2022.

The following Reports will be also be presented to the Committee in January 2022 :

Internal Audit Review Reports:

- WRIS (Welsh Radiology Information Service
- Project Assurance - GP System Procurement
- Governance Arrangements Part 1
- Estates Assurance:
    - Control of Contractors (All Wales)
    - Waste Management (All Wales)
    - Fire Safety (All Wales)

Audit Wales Reports:

- Baseline Governance Review Report
- Comparing Lessons WCCIS and TTP
- NHS Staff Wellbeing Through Covid – Caring for Carers

The Audit & Assurance Committee will also receive the Health & Care Standards Report approved by the December 2021 Management Board.

CORPORATE RISKS

In December 2021, there were 23 corporate risks identified.

This includes four new risks.

Three critical

DHCW0259 – 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.

DHCW0275 - WELSH IMMUNISATION SYSTEM SERVER CAPACITY - IF the web servers linked to the vaccine booking centres and other locations that administer Covid vaccines become unavailable due to capacity concerns THEN it is possible that the system capacity would be reached RESULTING IN a slowed system, or system unavailability

DHCW0273 - WELSH LANGUAGE TWO WAY TEXT VACCINATION APPOINTMENT MESSAGE - IF the Two-Way Text Solution launches in English only THEN this is in breach of Welsh Language legislation RESULTING in reputational harm to NHS Wales/DHCW and Welsh Language citizens being disadvantaged by the offering.

and one significant.

DHCW0275 - Welsh Immunisation System Network Connection - IF there was a failure of the network connection between DHCW and the Microsoft Azure network THEN members of the public would not be able to use the rebooking services RESULTING IN reputational damage to DHCW and Welsh Government and potential patient harm through inability to book appointments

None of the existing risks changed score during the period.

Corporate Risk Profile

Month	Significant	Critical
Dec-20	9	8
Jan-21	8	7
Feb-21	13	7
Mar-21	13	8
Apr-21	11	8
May-21	12	6
Jun-21	13	5
Jul-21	13	7
Aug-21	13	5
Sep-21	13	5
Oct-21	14	5
Nov-21	14	5
Dec-21	15	8

■ Significant ■ Critical
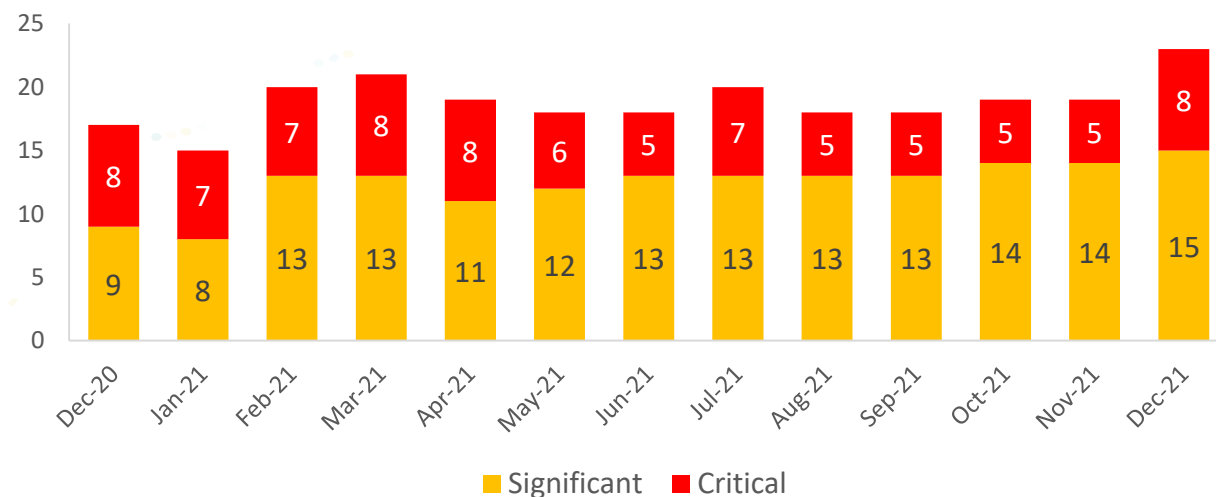
SUMMARY INDICATORS	JUL -21	AUG -21	SEP- 21	OCT -21	NOV-21	DEC-21
ISO 9001 Quality Management	Orange	Orange	Orange	Yellow	Yellow	Yellow
ISO 14001 Environmental Management	Green	Green	Green	Green	Green	Green
ISO 20000 Service Management	Green	Green	Green	Green	Green	Green
ISO 27000 Information Security Management	Orange	Orange	Orange	Orange	Green	Green
BS76000/760005 Valuing People	Green	Green	Orange	Green	Green	Green
Service Desk Institute (SDI)	Grey	Grey	Grey	Green	Green	Green
BS 10008 Evidential weight & Legal admissibility	Grey	Grey	Grey	Grey	Green	Green

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.

SUMMARY:

QUALITY SYSTEMS:

- **General:** During the month the Quality Annual Plan 2022/23 was finalised, approved by Directors and will be submitted to the Audit and Assurance Committee in January. Focus on improving the Internal Audits including delivery of an internal auditor training package and a risk based internal audit schedule has been delivered. A workshop has been arranged in January to review the system assurance process in light of the Cloud Strategy principles and adoption.

- **Summary Indicators key points:**

  - **ISO 9001: Quality Management (YELLOW):** work ahead of schedule for the external audit in January 2022.

  - **ISO 14001 Environmental Management: (GREEN):** Audit ready for January 2022

  - **ISO 20000: Service Management (GREEN):** A successful audit and certificate renewal took place in September 2021

  - **ISO 27001: Information Security Management (GREEN):** Successful audit . Future scope is being addressed and planning for certificate renewal in April.

  - **BS 76000 Valuing People/76005: Diversity & Inclusion (GREEN):** The status has changed due to the success of the recent audit.

  - **SDI: (GREEN):** 3-star customer led accreditation retained following a successful audit in December 2021, all nine concepts in the best practice standard have seen an improvement in 2021. Work to plan to attain 4 star in place

  - **BS 10008 Evidential Weight & Legal Admissibility (GREEN):**   Successful audit on 13th Dec 2021

Engagement

This section provides details of strategic engagement and user feedback gained via the Service Desk and other routes.

DIGITAL HEALTH AND CARE WALES

STRATEGIC ENGAGEMENT MEETINGS:

DATE	ORGANISATION
6th October 2021	Hywel Dda University Health Board
8th December 2021	Betsi Cadwaladr University Health Board
13th January 2022	Velindre University NHS Trust
7th February 2022	Cardiff & Vale University Health Board
9th March 2022	Health Education and Improvement Wales
Being scheduled	Public Health Wales
Being scheduled	Welsh Ambulance Service Trust
Being scheduled	Powys Teaching Health Board
Being scheduled	Cwm Taf Morgannwg University Health Board
Being scheduled	Aneurin Bevan University Health Board

SERVICE LEVEL AGREEMENT MEETINGS:

DATE	ORGANISATION
02 December 2021	Aneurin Bevan University Health Board
10 December 2021	Hywel Dda University Health Board
14 December 2021	Betsi Cadwaladr University Health Board
17 December 2021	Public Health Wales
12 January 2021	Cwm Taf Morgannwg University Health Board
03 February 2021	Powys Teaching Health Board
11 February 2022	Cardiff & Vale University Health Board
18 February 2022	Welsh Ambulance Service Trust
22 February 2022	Velindre University NHS Trust
01 March 2022	Hywel Dda University Health Board
03 March 2022	Aneurin Bevan University Health Board
15 March 2022	Betsi Cadwaladr University Health Board
22 March 2022	Swansea Bay University Health Board
2022	SLA Meetings for 2022 currently being scheduled

OBJECTIVES:

- **Joint strategic planning** and review of national digital initiatives and implementations

- **Open and proactive dialogue** on prioritisation of projects and their implementation time lines across all frameworks of delivery set by Welsh Government and NHS Wales

- **Agreement of key activities** involving strategic use of digital health technologies to support system and service improvement

- **Understanding of local drivers** for change and opportunities to work together

- **Understand dependencies** on fundamental digital services, e.g. cyber security, client devices and infrastructure

- **Coordinated progress** via national governance structures

- Ensure that structures and processes are in place to **support a collaborative approach** to national system delivery and implementation

Tolley,Laura
01/20/2022 12:01:25

SUMMARY:

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

Customer satisfaction remains above target at 94%.

Both team members went well beyond the cause to enable me remote access at a business-critical time. Helpful and supportive - GP Practice

This was not only sorted but I was given the tools to sort it myself if it happens again, my query was dealt with straightaway which made my job easier in what are very busy times - GP Practice

Quick and efficient. Keep up the good work!- Cwm Taf Morgannwg

Thank you very much for arranging VPN Token access so quickly, this is a tremendous help when recruiting new staff to sort the health boards during these busy times - NWSSP

Very good service, very helpful and patient and resolved my VPN issue, happy customer - Welsh Blood Service

Thank you for a very efficient service/query resolution - Digital Health & Care Wales

Awesome IT service, so glad that you're here when we're all doing increasing amount of digital and remote work. Thank you – Morriston Hospital

Customer Satisfaction

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

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

DIGITAL HEALTH AND CARE WALES
RISK MANAGEMENT REPORT

Agenda Item	6.2

Name of Meeting	SHA Board
Date of Meeting	27 January 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	Chris Darling, Board Secretary /Risk Owners

Purpose of the Report	For Discussion/Review
Recommendation	
The Board is being asked to: **NOTE** the status of the Corporate Risk Register including changes since the last meeting. **NOTE** the Risk and Board Assurance Milestone Plan.	

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
BAF	Board Assurance Framework		

1   SITUATION/BACKGROUND

1.1   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.

1.2   There has been progress in this area with the risk appetite having been approved by the DHCW SHA Board in November, with the risk appetite position to be reviewed again in six to twelve months' time.

2   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1   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)'.

2.2   DHCW's Corporate Risk Register currently has 23 risks on Register, 18 of which are detailed at item 6.2i Appendix A. The other 5 are cyber security related risks which are considered at every Digital Governance and Safety Committee in private session as per the Committee assignment approach.

2.3   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 ending 31 December 2021:

No risks were removed from the risk register.

A number of **changes to risk scores** have taken place over the past few months, these are as below:

- **DHCW0259 – Staff Vacancies** – increased for score of 12 to 16 – although there has been a significant increase in headcount over the past 12 months, significant further increase is required.
- **DHCW0260 – Data Centre transition** – decreased from 12 to 9 – project closure is imminent, and this corporate risk will be considered for removal.
- **DHCW0205 – Shielded Patient List** – decrease from 12 to 8 – the Shielded Patient List is no longer being used, as it was, therefore the likelihood of the risk occurring is reduced.
- **DHCW0218 – DMZ/Internet Failure at Data Centre** – decreased from 12 to 8. Improvements have been made to resilience, so likelihood reduced and will be considered for removal from the Corporate Risk Register.

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

Four **new risks** were escalated to the Corporate Risk Register:

- **DHCW0273 - Welsh Language Two Way Text Vaccination Appointment Message** – Work is being undertaken to enable bilingual two-way texting, however competing priorities might impact on the date of addressing.

- **DHCW0274 - Welsh Immunisation System Network Connection** – Planned action is mapped; work is being undertaken to define a finish date.

- **DHCW0275 - Welsh Immunisation System Server Capacity** – New server deployment is planned for January 2022.

- **DHCW0276** - **Private risk**

2.4 The Board are asked to consider the DHCW Corporate Risk Register Heatmap showing a summary of the DHCW risk profile. The key indicates movement since the last risk report.

CONSEQUENCES		RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	ALMOST CERTAIN (5)
	CATASTROPHIC (5)			**DHCW0257** ⟷ **DHCW0261** ⟷ DHCW0273: Welsh Language Two Way Text Vaccination Appointment Message ★	DHCW0204: Canisc System ⟷	
	MAJOR (4)	DHCW0205: DMZ/Internet Failures at Data Centre ⬇ **DHCW0218** ⟷	DHCW0207: Document Management Strategy ⟷ DHCW0208: Welsh Language Compliance ⟷ DHCW0272: Public Sector Pay Policy ⟷ DHCW0263: DHCW Functions ⟷ DHCW0264: Data Promise ⟷ DHCW0228: Fault Domains ⟷ DHCW0201: Infrastructure Investment ⟷ **DHCW0276** ★ DHCW0274: Welsh Immunisation System Network Connection ★	DHCW0269: Switching Service ⟷ DHCW0237: Covid-19 Resource Impact ⟷ DHCW0259: Staff Vacancies ⬆ DHCW0275: Welsh Immunisation System Server Capacity ★	
	MODERATE (3)			DHCW0268: Data Centre Transition ⬇	DHCW0267: Host Failures ⟷ **DHCW0229** ⟷	
	MINOR (2)				DHCW0260: Shielded Patient List ⬇	
	NEGLIGIBLE (1)					

★ New Risk   ⟷ Non-Mover   ⬇ Reduced   ⬆ Increased   **Private risks

2.5 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 risks are reviewed in detail by the Digital Governance and Safety Committee in a private session. The Audit and Assurance Committee is scheduled to have a focus on the DHCW0259 Staff Vacancies risk on the 18 January 2022.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 The Board is asked to note the changes in the risk profile during the reporting period as a result of the escalation of four risks to the Corporate Risk Register.

3.2 The Risk Management and Board Assurance Framework milestone plan is included at item 6.2ii Appendix B which details the progress to date for the Risk Management and Board Assurance Framework Strategy implementation.

3.3 As part of the implementation of the plan is the creation of a Board Assurance Report, mapping strategic risks to DHCW's five corporate objectives, the proposed Board Assurance Report template has been discussed at Weekly Directors on 5 January, at Management Board on 14 January and went to Audit and Assurance Committee on 18 January. The assurance mapping and work to progress the populating this report is now being progressed.

4 RECOMMENDATION

4.1 The Board is being asked to:

NOTE the status of the Corporate Risk Register including changes since the last meeting.
NOTE the Risk and Board Assurance Milestone Plan.

5 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.		

APPROVAL/SCRUTINY ROUTE:

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

COMMITTEE OR GROUP	DATE	OUTCOME
Risk Management Group	07/01/2022	Discussed and Verified
Management Board	14/01/2022	Discussed and Verified

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.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

Risk Management Report   Page 5 of 5

6.2i Appendix A DHCW Corporate Risk Register

Risk Matrix

Key – Risk Type:

Critical	Significant	Moderate	Low

		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

Risk Ref	Risk Title	Risk Description	Opened Date	Review Date	Risk Score (Initial)	Action Status	Risk Score (Current)	Current Impact score	Current Likelihood score	Risk Score (Target)	Target Impact score	Target Likelihood score	Risk Owner	Trend	Committee Assignment
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	07/01/2022	15	AIM: REDUCE Impact and REDUCE Likelihood FORWARD ACTIONS: Continue developments not yet ready to test Velindre targeting end of May 22 to migrate to WPAS and WCP. Continue with Health Boards implementation planning Development for Palliative Care & Screening & colposcopy planned for 22/23 Q1 & Q2 ACTIONS TO DATE: Since October 2020 the Cancer Informatics Programme has been running an accelerated plan in order to mitigate the risks posed by the legacy Cancer system CaNISC and deliver an integrated national solution for cancer services ahead of the original November 2022 deadline. The Canisc replacement MVP (14 workstreams) in development/completed in readiness for testing in 22/23 Q1 for All Wales Cancer services.	20	5	4	6	3	2	Executive Medical Director	Non-Mover	Digital Governance & Safety Committee

Tolley, Laura 01/26/2022 12:01:25

Risk Ref	Risk Title	Risk Description	Opened Date	Review Date	Risk Score (Initial)	Action Status	Risk Score (Current)	Current Impact score	Current Likelihood score	Risk Score (Target)	Target Impact score	Target Likelihood score	Risk Owner	Trend	Committee Assignment
						Specific developments delivered and already available for testing. Collaborative working with Programme Partners to finalise developments required for Palliative care and Screening & Colposcopy.									
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	07/01/2022	9	AIM:REDUCE Likelihood and REDUCE Impact FORWARD ACTION: Continue to monitor - 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. ACTION TO DATE: 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 priority given to this work. 01/06/2021 RMG: Escalated to Corporate Risk Register 27/04/2021 TAH: Further engagement with NDR Team to consider acceleration of the switching service replacement as part of the wider requirement for the acquisition of data into NDR. Continue to review options and escalate to Corporate register	16	4	4	6	3	2	Rachael Powell	Non Mover	Digital Governance & Safety Committee
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	11/12/2020	07/01/2022	12	AIM: REDUCE Impact and REDUCE Likelihood FORWARD ACTIONS: Continue to monitor the situation via the recruitment task force and support managers with the	16	4	4	6	2	3	Chief Operating Officer	Non Mover	Audit and Assurance Committee and Local Partnership Forum

Risk Ref	Risk Title	Risk Description	Opened Date	Review Date	Risk Score (Initial)	Action Status	Risk Score (Current)	Current Impact score	Current Likelihood score	Risk Score (Target)	Target Impact score	Target Likelihood score	Risk Owner	Trend	Committee Assignment
		impact on service deliverables and timescales RESULTING in delays to system support and new functionality for NHS Wales users.				additional resources to increase the speed of the recruitment process. ACTIONS TO DATE: A recruitment task force was established including all areas of the organisation to focus on recruitment with support from a co-ordinated communications approach. Additionally, agency support was procured to aid with the volume of recruitment required and support managers with vacancies to ensure speed of appointment.									
DHCW0237	Project	**New requirements impact on resource and plan** IF new requirements for digital solutions to deal with Covid 19 and recovery of services continue to come in, THEN staff may need to be moved away from other deliverables in the plan RESULTING in non delivery of our objectives and ultimately a delay in benefits being realised by the service.	30/03/2020	07/01/2022	16	AIM: REDUCE Impact and REDUCE Likelihood FORWARD ACTIONS: Continue to monitor new requirements for TTP and recovery from Covid. Use formal change control methods to ensure impact is mapped and impacted work is re-baselined. ACTIONS TO DATE: Lessons Learnt for Q1 and Q2 presented to Management Board for review and comment. Action plan being led by the PPMG. Improved formality with external boards around change control of dates, eg due to extra requirements. Significant increase in numbers of Requests for Change (RFCs) coming to PPMG since Sept 2021.	16	4	4	9	3	3	Chief Operating Officer	Non Mover	Digital Governance & Safety Committee
DHCW0275	Service Interruption	**Welsh Immunisation System Server Capacity** IF the web servers linked to the vaccine booking centres and other locations that adminster Covid vaccines become unavailable due to capacity concerns THEN it is possible that the system capacity would be reached RESULTING IN a	22/12/2021	07/01/2022	16	AIM: Reduce IMPACT and Reduce LIKELIHOOD FORWARD ACTIONS WIS team and DCS to plan deploying these in January. ACTIONS TO DATE Infrastructure submit build request for an additional server per site prior to 24/12.Server has been built 06/01/22 and IQ'd 07/01/2022.	16	4	4	6	3	2	Interim Assistant Director of Application Development and Support	New	Digital Governance and Safety

Tolley, Laura
01/26/2022 12:01:25

Risk Ref	Risk Title	Risk Description	Opened Date	Review Date	Risk Score (Initial)	Action Status	Risk Score (Current)	Current Impact score	Current Likelihood score	Risk Score (Target)	Target Impact score	Target Likelihood score	Risk Owner	Trend	Committee Assignment
		slowed system, or system unavailability													
DHCW0273	Business & Organisational	**Welsh Language Two Way Text Vaccination Appointment Message** IF the Two-Way Text Solution launches in English only THEN this is in breach of Welsh Language legislation RESULTING in reputational harm to NHS Wales/DHCW and Welsh Language citizens being disadvantaged by the offering.	09/12/2021	07/01/2022	15	AIM: Reduce LIKELIHOOD FORWARD ACTIONS: There are options for citizens to receive their appointment via a bi-lingual letter and a telephone booking line. Bi-lingual bi-lingual solution being worked on with a target date of the end of January 2022. ACTIONS TO DATE: Identification and risk assessment undertaken	15	3	5	3	3	1	Interim Assistant Director of Application Development and Support	New	Audit and Assurance
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	07/01/2022	16	AIM: REDUCE Likelihood FORWARD ACTIONS: Submit Second draft of Welsh Language Scheme to the Welsh Language Commissioners office. Undergo Public consultation and seek sign off from the DHCW SHA Board. ACTIONS TO DATE: Welsh Language Services Manager has been appointed and will start in mid January 2022. All Wales Welsh Language Preference System first release is	12	4	3	4	4	1	Board Secretary	Non Mover	Audit and Assurance Committee

Tolley,Laura 01/26/2022 12:01:25

Risk Ref	Risk Title	Risk Description	Opened Date	Review Date	Risk Score (Initial)	Action Status	Risk Score (Current)	Current Impact score	Current Likelihood score	Risk Score (Target)	Target Impact score	Target Likelihood score	Risk Owner	Trend	Committee Assignment
					12	ready, system to be shared with the Welsh Language Group in November for feedback.									
DHCW0207	Business & Organisational	**Document Management Strategy** IF DHCW do not update their Document Management Strategy in light of the adoption and roll-out of Microsoft 0365 THEN their processes may not be the most effective they can be RESULTING in sub-optimal use of resources.	05/06/2018	07/01/2022	12	AIM: REDUCE Likelihood FORWARD ACTIONS: Objectives are included in the IMTP for 2022/23 to develop and confirm the DHCW Document Management Strategy by March 2023. A detailed plan to describe this activity is to be produced by March 2022. The next step will be to define the operational parameters for each technology in conjunction with the new policy for sharing with the wider organisation for sense checking. ACTIONS TO DATE: A number of workshops have been undertaken to date with Trustmarque to create a draft document management policy in conjunction with department leads across the organisation	12	4	3	4	4	1	Director of Finance & Business Assurance	Non Mover	Audit and Assurance Committee

Risk Ref	Risk Title	Risk Description	Opened Date	Review Date	Risk Score (Initial)	Action Status	Risk Score (Current)	Current Impact score	Current Likelihood score	Risk Score (Target)	Target Impact score	Target Likelihood score	Risk Owner	Trend	Committee Assignment
DHCW0272	Finance	**Public Service Payment Policy** IF - the NHSWSSP invoice scanning process does not meet established processing KPI's, THEN Invoice payment could be significantly delayed, RESULTING IN - invoices remaining unpaid within 30 days and DHCW non compliance with The National Health Service (NHS) Wales Act 2006.	13/10/2021	07/01/2022	12	AIM: REDUCE Likelihood FORWARD ACTIONS: Continue to monitor situation and work with NHS Wales Shared Services Partnership on any required mitigating action. ACTIONS TO DATE: HS 131021: This is an all Wales issue that has been raised with NHS Wales Shared Services Partnership.	12	4	3	4	4	1	Executive Director of Finance	Non Mover	Audit and Assurance Committee
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	26/01/2021	07/01/2022	12	AIM: REDUCE Likelihood FORWARD ACTIONS: Continue discussions with Welsh Government colleagues to define the parameters of the functions. 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	12	4	3	4	4	1	Deputy Director of Information	Non Mover	Digital Governance & Safety Committee

Tolley,Laura
01/26/2022 12:01:25

Risk Ref	Risk Title	Risk Description	Opened Date	Review Date	Risk Score (Initial)	Action Status	Risk Score (Current)	Current Impact score	Current Likelihood score	Risk Score (Target)	Target Impact score	Target Likelihood score	Risk Owner	Trend	Committee Assignment
		data without a legal basis or consent.													
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	07/01/2022	12	AIM: REDUCE Likelihood FORWARD ACTIONS: Continue discussions with Welsh Government colleagues to define the Data Promise. ACTIONS TO DATE: The specific responsibilities for implementation of the Data Promise have been given to the Head of Digital Strategy/Technology, Digital & Transformation, WG	12	4	3	4	4	1	Deputy Director of Information	Non Mover	Digital Governance & Safety Committee
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	07/01/2022	16	AIM: REDUCE Likelihood and REDUCE Impact FORWARD ACTIONS: A Cloud Strategy Business Case is being drafted by December 2021 which will mean fault domains will be provided by the host for those services. Additional new equipment deployment will continue to	12	4	3	6	3	2	Director of ICT	Non Mover	Digital Governance & Safety Committee

Tolley, Laura
01/26/2022 12:01:25

Risk Ref	Risk Title	Risk Description	Opened Date	Review Date	Risk Score (Initial)	Action Status	Risk Score (Current)	Current Impact score	Current Likelihood score	Risk Score (Target)	Target Impact score	Target Likelihood score	Risk Owner	Trend	Committee Assignment
						increase the number of fault domains planned for the remainder of the year ACTIONS TO DATE: Fault domains installed in all new equipment installations. Additional new equipment installed to increase availability of hosted services. Fault domains were incorporated into new areas of infrastructure as part of the Data Centre Exit Project where cloud provisions is being utilised to provide some of the fault domains required.								
DHCW0267	Service Interruption	**Host Failures** IF a host fails on one of the virtual server environments THEN some guests may fail to migrate seamlessly to other hosts RESULTING IN some servers failing to recover automatically and therefore service interruption to the end users.	23/03/2021	07/01/2022	12	AIM: REDUCE Impact and REDUCE Likelihood FORWARD ACTIONS: Install new hardware and review system performance ACTIONS TO DATE: The periodic crashing issue continues. Previous recommendations from the manufacturer have not fixed the problem. Latest recommendation is to install some new hardware in the servers. This is on order and will be installed in a controlled way when they are delivered.	12	3	4	6	3	2	Director of ICT	Non Mover	Digital Governance & Safety Committee
DHCW0201 IMB	Service Interruption	**Infrastructure Investment** IF recurrent funding is not available to support the replacement of obsolete infrastructure THEN the risk of failure and under performance will increase RESULTING in service disruption.	10/08/2017	07/01/2022	12	AIM: REDUCE Likelihood FORWARD ACTIONS: A revised infrastructure Business Case and Funding Requirement needs to be developed and submitted to secure additional funding for the longer term. ACTIONS TO DATE: A number of different funding streams have been identified to date to support the requirements for upgrading legacy infrastructure for 21/22. These include the Digital Priorities Investment fund with high priority risks being addressed first.	12	4	3	4	4	1	Director of ICT	Non Mover	Digital Governance & Safety Committee

Tolley, Laura
01/26/2022 12:01:25

6.2i Appendix A DHCW Corporate Risk Register

Risk Ref	Risk Title	Risk Description	Opened Date	Review Date	Risk Score (Initial)	Action Status	Risk Score (Current)	Current Impact score	Current Likelihood score	Risk Score (Target)	Target Impact score	Target Likelihood score	Risk Owner	Trend	Committee Assignment
DHCW0274	Service Interruption	**Welsh Immunisation System Network Connection** IF there was a failure of the network connection between DHCW and the Microsoft Azure network THEN members of the public would not be able to use the rebooking services RESULTING IN reputational damage to DHCW and Welsh Government and potential patient harm through inability to book appointments	05/11/2021	07/01/2022	12	AIM:IMPACT and LIKELIHOOD FORWARD ACTIONS: Install Virtual Private Network backup. Create a second link. Install additional web interfaces. ACTIONS TO DATE: Identification of the risk and risk assessment	12	4	3	6	3	2	Director of ICT	New	Digital Governance and Safety
DHCW0260	Business & Organisational	**Data Centre Transition** IF the dates for the data centre physical transition need to moved from Quarter 2 into Quarter 3, THEN there may be a resource constraint in various teams RESULTING IN a risk of failing to deliver some items in the annual plan and the risk of increased costs.	06/05/2021	07/01/2022	12	AIM: REDUCE Impact FORWARD ACTIONS: Perform the transition of the last remaining system in Data centre 1. Project due to be closed at the Programme Board in December 2021. Undertake lessons learned and complete a closure report. ACTIONS TO DATE: The Transition plan has been completed.	9	3	3	4	1	4	Director of ICT	Non Mover	Digital & Governance Safety
DHCW0205	Clinical Risk	**Shielded Patient List** IF ISD are required to maintain the Shielded Patient List using current processes with significant manual intervention THEN the inherent risk of human error will persist RESULTING IN the possible incorrect identification of patients on the list.	08/01/2021	07/01/2022	12	AIM: REDUCE Likelihood FORWARD ACTION: Continue to monitor and respond as necessary, our mitigation remains that we manage the manual list. ACTION TO DATE: 13/10/2021 - ISBMG/RP: The SPL is not being utilised as it was and the the likelihood of something catastrophic happening in significantly reduced. Reduce risk score but leave on RR. 22/07/2021 - TAH: Infrastructure design in place and agreed with DCS. Latest date provided by NDR	8	4	2	4	4	1	Deputy Director of Information	Non Mover	Digital Governance & Safety Committee

Tolley, Laura
01/26/2022 12:01:25

Risk Ref	Risk Title	Risk Description	Opened Date	Review Date	Risk Score (Initial)	Action Status	Risk Score (Current)	Current Impact score	Current Likelihood score	Risk Score (Target)	Target Impact score	Target Likelihood score	Risk Owner	Trend	Committee Assignment
						team for completion is mid-late August. 21/04/2021 - TAH: ISD and NDR team are working with a third party supplier on development of an automation process. This should remove the requirement for manual intervention and hence human error. Continue to monitor risk until work is complete.									
DHCW0218	Service Interruption	**DMZ/Internet Failure at Data Centre** IF a failure of the DMZ network or Internet Circuit in Datacentre 1 occurred THEN DHCW patient facing digital services would be unavailable for users RESULTING in service downtime and reputational damage.	12/03/2018	07/01/2022	12	AIM: REDUCE Impact FORWARD ACTIONS: Continue to identify the 'owners' of services in the DMZ in the new datacentre to raise the risk with a target date of end of December 2021 for that to be completed. ACTIONS TO DATE: All migrations of the planned services from Data centre 1 DMZ to Azure have now completed. Improvements have been made to resilience, so likelihood reduced to 'unlikely'.	8	4	2	4	2	2	Director of ICT	Non Mover	Digital Governance & Safety Committee

6.2II APPENDIX B RISK MANAGEMENT & BAF MILESTONE PLAN

	TASK	TIMELINE	STATUS UPDATE
DHCW Approach to Risk Management and Board Assurance Framework	1. Develop Risk Management and Board Assurance Framework Strategy, to be considered via the Risk Management Group, Audit and Assurance Committee, Management Board, DHCW Board.	May 2021	Approved at Special Health Authority Board on 27th May 2021.
	2. Write and ask that new risks are articulated with; IF (this happens - cause) THEN (event) RESULTING IN (impact will be – effect). Ask that high risks and those on the corporate risk register are re-worded to use: IF, THEN, RESULTING IN.	May – July 2021	This approach has been discussed at the risk management group on the 1st June. The Corporate Risk Register will now be re-written using this approach.
	3. Arrange time on the Risk Group agenda to: • Review the draft Risk Management and BAF Strategy • Discuss/confirm proposed process to include triggers and hierarchy, how risks get into the corporate risk register and Principal risks onto the BAF (informed by the Annual Plan/IMTP) • The role of Management Board in owning the corporate risk register and initial identification of principle risks. • The role of the DHCW Board in overseeing the Principal risks and BAR • Review risk scores on risk registers • Consider how DHCW risks with potential impact on the wider health and care system are best communicated to partners	May – July 2021	The detail of the Risk and Board Assurance Framework Strategy was discussed at the risk management group on the 1st June. The risk narrative and scores were reviewed, and suggestions made at the risk management group on the 1st June for the owners of the risk to review and update where necessary.
	4. Board Risk Management and Board Assurance Training Provided. Amberwing to provide the training. *NB: DHCW Annual Plan to include Strategic Objectives to be reviewed/discussed at the Board Development Session on 01.07.2021*	1 July 2021	Session took place on 1st July 9am – 11am to include all Board member.
	5. The identification of principle risks to the organisation are considered at the Management Board (and the DHCW Risk Group) in June 2021. Facilitated by Amberwing.	22 July 2021 & 9 August	Facilitated sessions took place on 22nd July and 9th August, to include Management Board staff and Independent Board members. The output from the session was a draft principle risk analysis for each DHCW Strategic aim.
	6. Assurance and controls mapping exercise undertaken by Directorates based on the principle risks identified and agreed.	22 July 2021 – end of February 2022	The assurance mapping is planned to be finalised, and work concluded by the end of February with the aim for the first Board Assurance Report to the March SHA Board.
	7. Risk Management training to be provided to relevant DHCW staff / Directorates to cover (building on training provided to Board members): • The basics of risk management • The process for escalating risk • The triggers for escalating risk • How risk will be discussed and reviewed at the Management Board 8. The DHCW risk appetite and what this means for the organisation.	December 2021 – March 2022	Training dates being scheduled for all Directorates for once the work on the DHCW risk appetite has been commenced.
	9. Board Development session to consider and agree the DHCW Board risk appetite. Facilitated by Amberwing.	2 September 2021 – end of Jan 20221	Risk appetite has been approved at the January 2022 SHA Board meeting, this will now be included in the final Risk and Board Assurance Framework Strategy and training provided for all Directorates.
	10. Principle risks presented to DHCW Board at the March Board meeting, and first draft Board Assurance Report/update on Board Assurance Report.	March 2022	Principal risks planned for presentation to the March 2022 Board with a proposed Board Assurance Report template discussed at Management Board on the 14 January and going to Audit and Assurance Committee on 18 January for comment and feedback.
	11. DHCW risk appetite statement to be presented to Board if ready to go to the	November 2021	See action point 9.

Tolley, Laura
01/26/2022 12:01:25

6.2II APPENDIX B RISK MANAGEMENT & BAF MILESTONE PLAN

	November Board.		
	12. DHCW risk appetite statement to be added to Risk Management and BAF Strategy.	January 2022	This has been completed and included in the Strategy.
	13. DHCW objectives agreed via the IMTP process for 2022/23 – 2024/25.	March 2022	
	14. Principle risks considered and agreed against the DHCW plan for 2022/23	March – May 2022	Included in the Annual Cycle of Business for the SHA Board.

Tolley, Laura
01/26/2022 12:01:25

DIGITAL HEALTH AND CARE WALES
BASELINE GOVERNANCE REVIEW REPORT

Agenda Item	6.3

Name of Meeting	SHA Board
Date of Meeting	27 January 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	Chris Darling, Board Secretary

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

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
AG	Auditor General	NHS	National Health Service

1   SITUATION/BACKGROUND

1.1   The Auditor General (AG) has a statutory requirement to satisfy himself that NHS bodies have proper arrangements in place to secure economy, efficiency, and effectiveness in the use of their resources as set out in Section 61 of the Public Audit Wales Act 2004. To help in the discharge of this responsibility, the AG undertakes annual Structured Assessment work at each NHS body that examines arrangements relating to corporate governance, financial management, strategic planning, and other factors affecting the way in which NHS bodies use their resources.

1.2   As Digital Health and Care Wales is a newly established statutory organisation, and in discussion with the Audit and Assurance Committee Chair, it was identified that a baseline assessment via a Baseline Governance Review would be undertaken for 2021/22. This will be followed up with a Structured Assessment in 2022/23.

2   SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1   The aim of undertaking a Baseline Governance Review is to aid organisational learning and development. The work undertaken by Audit Wales aims to answer the overall question: *is DHCW making good progress in putting arrangements in place to support good governance and the efficient, effective, and economical use of resources?*

2.2   The Baseline Governance Review field work was undertaken between October – December 2021. Audit Wales have undertaken individual virtual interviews with all members of the DHCW SHA Board, as well as a number of senior leaders across the organisation to gather evidence from a wide range of sources. Feedback was not sought from partner organisations as part of the review.

2.3   In addition to interviews, DHCW have provided documentation to demonstrate the areas covered by the review, to include:
- Is DHCW well lead and well governed?
- Is there an effective approach to the annual plan with underpinning operational, workforce and financial plans?
- Are resources well managed?
  - Financial management
  - Procurement arrangements
  - Asset management
  - Workforce management

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

2.4   The outcome of the review can be seen as item 6.3i. The overall conclusion being: **"DHCW is making positive progress in putting arrangements in place to support good governance and the efficient, effective, and economical use of resources under challenging operating circumstances"**. Some of the headline feedback for the key areas reviewed is provided below:

2.5   Leadership and Governance:
- Solid foundations are in place to support the effective conduct of Board and Committee business with further work in progress.
- There is a relatively stable Board, with real opportunities to capitalise on the diverse experiences of public and commercial sector Independent Members.
- The Board and its Committees are maturing, with an orderly and organised approach to meetings evident.

2.6   Planning Arrangements:
- Robust arrangements have been laid in DHCW's Annual Plan for 2021-22, with the vision, strategic objectives, and supporting enablers clearly articulated.
- Further work is required around developing a long-term strategy for the organisation.
- There is good evidence of resource and energy being devoted to building external relationships and capturing feedback and intelligence

2.7   Managing Resources:
- Good progress is being made to embed new financial systems and processes, with the financial leadership team appearing to be a visible strength.
- there is an agile approach to programme expenditure, but the draw-down of programme funds and use of single tenders needs to be kept under review.
- There are some workforce challenges facing the organisation, with timely recruitment, staff retention, and succession planning key

2.8   No formal recommendations were made as part of the review, however, a small number of opportunities for innovation and improvement for the Board to consider were made along with several observations the Board will want to reflect on and keep under review, these have been summarised below:

2.9   Opportunities for innovation and improvement:
- DHCW has an opportunity to extend its brand as a Trusted Digital Partner; capitalising on a diverse range of experienced public and commercial sector independent members to bring new thinking and a fresh leadership approach.
- The Board could exploit the opportunities to lead innovation in new areas, for example:
  - Communication and engagement;
  - Digitally enabling health and care; and
  - Decision support tools
- DHCW is developing a distinctive house style for digestible, easy read reports and documents. This could be further tested and extended.
- DHCW may want to consider opportunities to further enhance public transparency of Board business by making recordings of Committee meetings available on its website.

- Keep under review the fact that there isn't a qualified accountant amongst the Independent Members.
- DHCW needs to progress work on the organisation's strategy to provide further clarity on its long-term vision and objectives.
- As DCHW develops its external partnerships there is an opportunity for systematic capture and use of narrative data to support programme co-design and delivery; increasing value creation and benefits realisation as a 'trusted digital partner' and leader of the new digital culture in Wales.

2.10   In addition to the above, the following areas of the review have been identified for further discussion and oversight by the Board:
- Maximise the benefit of the diversity of Board members experiences, and potentially add additional diversity through the current Board member vacancies
- Ensure the importance of maintaining a fresh outlook and culture is retained by the Board
- Maintain the progress and momentum of the DG&S Committee with the change over of Committee Chair
- Ensure clarity on leadership and accountability for critical areas e.g. cyber security, Information Governance etc., with all of DHCW's partners is vital to ensure a coordinated and timely response
- As part of the long-term strategy development ensure the right balance between national consistency and local flexibility
- Monitor impact of the emerging Stakeholder Engagement plan as it is implemented
- Ensure there is sufficient focus on care as well as health
- Monitor the draw-down of programme funds and use of single tenders
- Focus on the workforce challenges facing the organisation including: timely recruitment, staff retention, and succession planning
- Enact key aspects of the Draft People Strategy at pace building on key strategic alliances including Wales Institute of Digital Information (WIDI) to further building capacity and capability.

2.11   The learning points included in section 2.10 and the opportunities in section 2.9 will be put into an action plan for ongoing monitoring and review.

3   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1   The document at item 6.1i provides the full Baseline Governance Review findings provided by Audit Wales.

3.2   To ensure the progress made to date on establishing good governance arrangements, the DHCW Board must continue to prioritise and embed good governance arrangements.

4   RECOMMENDATION

The Board is being asked to:
NOTE the content of the report.

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

5   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:	

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

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

COMMITTEE OR GROUP	DATE	OUTCOME
Board Development	06.01.22	Discussed
Audit and Assurance Committee	18.01.22	Discussed

IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below
	Good governance practices are integral to quality and safety across the organisation.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below
	There could be legal implications should the baseline governance review highlight any serious areas of improvement for the organisation.
	Yes, please see detail below

FINANCIAL IMPLICATION/IMPACT	Non-compliance with good governance could have a financial impact for the organisation.
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

Tolley,Laura
01/20/2022 12:01:25

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

![Archwilio Cymru / Audit Wales logo]

Baseline Governance Review – Digital Health and Care Wales

Audit year: 2021

Date issued: January 2022

Document reference: 2791A2022-23

This document has been prepared for the internal use of Digital Health and Care Wales as part of work performed in accordance with statutory functions.

The Auditor General has a wide range of audit and related functions, including auditing the accounts of Welsh NHS bodies, and reporting to the Senedd on the economy, efficiency, and effectiveness with which those organisations have used their resources. The Auditor General undertakes his work using staff and other resources provided by the Wales Audit Office, which is a statutory board established for that purpose and to monitor and advise the Auditor General.

Audit Wales is the non-statutory collective name for the Auditor General for Wales and the Wales Audit Office, which are separate legal entities each with their own legal functions as described above. Audit Wales is not a legal entity and itself does not have any functions.

© Auditor General for Wales 2021

No liability is accepted by the Auditor General or the staff of the Wales Audit Office in relation to any member, director, officer, or other employee in their individual capacity, or to any third party in respect of this report.

In the event of receiving a request for information to which this document may be relevant, attention is drawn to the Code of Practice issued under section 45 of the Freedom of Information Act 2000. The section 45 Code sets out the practice in the handling of requests that is expected of public authorities, including consultation with relevant third parties. In relation to this document, the Auditor General for Wales and Wales Audit Office are relevant third parties. Any enquiries regarding disclosure or re-use of this document should be sent to Audit Wales at infoofficer@audit.wales.

We welcome correspondence and telephone calls in Welsh and English. Corresponding in Welsh will not lead to delay. Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg a Saesneg. Ni fydd gohebu yn Gymraeg yn arwain at oedi.

Contents

Tolley,Laura
01/20/2022 12:01:25

About this report

1   Recognising that Digital Health and Care Wales (DHCW) is a new NHS body established in April 2021, we agreed to undertake a **baseline governance review** rather than a full structured assessment[1] during 2021 with the aim of supporting organisational development and learning whilst still helping to discharge the Auditor General's duty under Section 61 of the Public Audit Wales Act 2004.

2   Our work took place within an environment characterised by the need for DHCW to establish itself as trusted health body with a strong brand which functions as a networked organisation within the NHS in Wales. This necessitates DHCW providing continuous high-quality business as usual services whilst also extending its remit within the new digital landscape alongside key partners.

3   The current health and care environment, and in particular the additional demands arising from the pandemic, require the Board of DHCW to establish robust corporate governance arrangements. These can provide assurance to key stakeholders that the necessary action is being taken to deliver strategic objectives and that public money is being spent wisely.

4   Our baseline governance review sought to provide early views on whether DHCW is making good progress in putting arrangements in place to support good governance and the efficient, effective, and economical use of resources, with a particular focus on:

- leadership and governance;
- planning arrangements; and
- arrangements for managing resources (finances, assets, and workforce).

5   Our work was based on a review of relevant documentation, virtual observations at Board and Committee meetings, and structured discussions with the relevant DHCW Officers and Independent Members. We did not seek feedback from DHCW's external partners as part of the review.

[1] The Auditor General has a statutory requirement to satisfy himself that NHS bodies have proper arrangements in place to secure economy, efficiency, and effectiveness in the use of their resources as set out in Section 61 of the Public Audit Wales Act 2004. To help in the discharge of this responsibility, the Auditor General undertakes annual structured assessment work at each NHS body that examines arrangements relating to corporate governance, financial management, strategic planning and other factors affecting the way in which NHS bodies use their resources.

Conclusion and key messages

6   Overall, we found that **DHCW is making positive progress in putting arrangements in place to support good governance and the efficient, effective, and economical use of resources under challenging operating circumstances.**

7   In terms of leadership and governance, we found that:

- solid foundations are in place to support the effective conduct of Board and Committee business with further work in progress.
- there is a relatively stable Board, with real opportunities to capitalise on the diverse experiences of public and commercial sector Independent Members. Opportunities to further diversify the make-up and experience of the Board exist.
- DHCW is mindful of the importance of maintaining a fresh outlook and culture, particularly as it seeks to position itself as a 'trusted digital partner'.
- the Board and its Committees are maturing, with an orderly and organised approach to meetings evident.
- DHCW has an important system leadership role to play, particularly in relation to information governance and cyber security. However, clarity on leadership and accountability for both of these critical areas of operation with all of DHCW's partners is vital.
- systems and processes of assurance are being progressed and appear to be reasonable and proportionate in the context in which DHCW is operating.

8   In terms of planning arrangements, we found that:

- robust arrangements have been laid in DHCW's Annual Plan for 2021-22, with the vision, strategic objectives, and supporting enablers clearly articulated. However, further work is required around developing a long-term strategy for the organisation.
- there is good evidence of resource and energy being devoted to building external relationships and capturing feedback and intelligence as DHCW seeks to position itself as a 'trusted digital partner'.
- DHCW needs to be mindful of the need to ensure its strategy, plans, and programmes focus on 'care' as well as on 'health'.

9   In terms of arrangements for managing resources, we found that:

- good progress is being made to embed new financial systems and processes, with the financial leadership team appearing to be a visible strength.
- there is an agile approach to programme expenditure, but the draw-down of programme funds and use of single tenders needs to be kept under review.
- there are some workforce challenges facing the organisation, with timely recruitment, staff retention, and succession planning key against the backdrop of a growing demand for digital skills and a highly competitive recruitment

market. Building on key strategic alliances, including the Wales Institute of Digital Information, will help further strengthen capacity and capability.

10   Our findings are set out in more detail in **Appendix 1**.

11   We have not made any recommendations. However, we have identified a small number of opportunities for innovation and improvement for the Board to consider. These are detailed in **Appendix 1**.

Page 7 of 18 - Baseline Governance Review – Digital Health and Care Wales

Audit Overview

Aim

To support organisational development and learning by providing early views on whether DHCW is making good progress in putting arrangements in place to support good governance and the efficient, effective and economical use of resources.

Areas of focus

- Leadership and governance
- Planning arrangements
- Arrangements for managing resources (finances, assets, workforce)

Approach

We have sought to adopt an informal approach as a critical friend to highlight what's going well, what needs more work, and share good practice. This is our own assessment of progress – we haven't sought feedback from DHCW's external partners as part of the review.

Overall conclusion

DHCW is making positive progress in putting arrangements in place to support good governance and the efficient, effective, and economical use of resources under challenging operating circumstances.

Tolley,Laura
01/20/2022 12:01:25

Key findings

Leadership and governance

- Solid foundations in place to support the effective conduct of Board and Committee business with further work in progress.

- Perception that the pace of progress has been impacted by a lack of shadow operating period, but progressive increase in pace during the third quarter (and most likely the final quarter) of this year; with no obvious detrimental impact to date. However, this will need to be kept under review in light of the present wave of COVID-19.

- Good commitment to ensuring public transparency of Board and Committee business through a range of communication and media channels, with visible leadership apparent during the pandemic.

- Papers are timely and appear to be digestible, largely appropriate in length with summaries and highlights. They have a strong visual 'house style'; which is still evolving. Opportunities to streamline papers further exist (e.g. by including appendices and linked supplemental papers.)

Key findings

Leadership and governance (continued)

- Relatively stable Board, with real opportunities to capitalise on the diverse experiences of public and commercial sector Independent Members ('best of both worlds'). The recent IM vacancy presents an opportunity to further diversify the make-up of the Board. For example, the absence of a qualified accountant amongst IMs should be kept under review.

- DHCW is mindful of Board recruitment, retention and attrition and the importance of maintaining a fresh outlook and culture.

- Observations of A&A Committee demonstrated a maturing committee. It is putting the building blocks in place and appears to have a strong focus on risk issues.

- RaTS Committee also appears to be operating as planned.

Tolley,Laura
01/20/2022 12:01:25

Page 11 of 18 - Baseline Governance Review – Digital Health and Care Wales

Key findings

Leadership and governance (continued)

- The newly established DG&S committee was noted as unique within Wales (the equivalent in Health Boards / Trusts being the Quality and Safety Committees). Observations of DG&S Committee demonstrated that development is ongoing from the foundation phase, and an orderly and organised approach were evident. However, it will be vital to maintain momentum as the IM / Committee Chair has recently moved on (new Committee Chair recently confirmed.)

- DHCW has an important system leadership role to play, particularly in relation to IG and Cyber Security. As such, DHCW is a valuable resource and point of advice both internally and for other organisations. However, clarity on leadership and accountability for both of these critical areas of operation with all of DHCW's partners is vital to ensure a coordinated and timely response.

- Evidence of the committee structure being used to good effect to oversee DHCW's system leadership role, particularly in relation to managing cyber-security threats and ensuring delivery of the 'data promise'.

- Systems and processes of assurance are being progressed and appear to be reasonable and proportionate in the context in which DHCW is operating. But it's too early to form a definitive view on the assurance of outcomes.

Tolley,Laura
01/20/2022 12:01:25

Key findings

Planning arrangements

- Robust foundations in 21/22 Annual Plan. It displays the new 'house style', and the vison and strategic objectives. The 4 national objectives and one organisational objective and the supporting enablers are well articulated.

- DHCW is expecting to deliver increasing granularity and new areas for the IMTP and 22/23 Annual Plan, but further work required around developing a long-term strategy for the organisation and the right balance between national consistency and local flexibility.

- DHCW currently re-defining internal and external partnerships as a new Board, positioning itself as a 'trusted digital partner'. Good evidence of resource and energy being devoted to building external relationships and capturing feedback and intelligence, with a Strategic Engagement Plan going the January Board meeting. But it's too early to ascertain wider impact.

- DHCW needs to be mindful of the need to ensure a focus on 'care' as well as 'health'.

Key findings

Arrangements for managing resources

- Financial leadership team a visible strength with good progress being made in embedding new systems and processes.

- Agile response on programme expenditure is noted, but need to keep an eye on the draw-down of programme funds and use of single tenders.

- There are some workforce challenges facing the organisation. Timely recruitment, staff retention, and succession planning are key against the backdrop of a growing demand for digital skills and a highly competitive recruitment market.

- Succession planning for specialist senior roles including IG, Cyber and Applications Development are important - this needs to be factored into business continuity and workforce planning processes.

- The new Director of People will need to enact key aspects of the Draft People Strategy at pace building on key strategic alliances including WIDI to further building capacity and capability.

Opportunities for innovation and improvement

- The pandemic has created a paradigm shift in health and social care delivery. DHCW already demonstrating its value in this arena and is well placed to be in the vanguard of further innovations through co-design and co-creation.

- DHCW has an opportunity to extend its brand as a 'trusted digital partner'; capitalising on a diverse range of experienced public and commercial sector independent members to bring new thinking and a fresh leadership approach.

- The Board could exploit the opportunities to lead innovation in new areas, for example:
  o communication and engagement;
  o digitally enabling health and care; and
  o decision support tools.

- DHCW is developing a distinctive house style for digestible, easy read reports and documents. This could be further tested and extended, such as the IOPR.

- DHCW may want to consider opportunities to further enhance public transparency of Board business including making recordings of Committee meetings available on its website.

Tolley, Laura
01/20/2022 12:01:25

Page 15 of 18 - Baseline Governance Review – Digital Health and Care Wales

Opportunities for innovation and improvement

- There is positive financial team leadership with good, systems and processes of financial control in place to monitor and manage delivery against financial objectives. It was noted that there isn't a qualified accountant amongst the IMs and whilst there are very experienced financial managers it would seem prudent to keep this under review.

- DHCW needs to progress work on the organisation's strategy to provide further clarity on its long-term vision and objectives, particularly in the context of supporting other bodies to recover from the impact of the pandemic.

- DHCW are currently re-defining their external partnerships (as a new Board). There is an opportunity for systematic capture and use of narrative data to support programme co-design and delivery; increasing value creation and benefits realisation as a 'trusted digital partner' and leader of the new digital culture in Wales.

Tolley,Laura
01/20/2022 12:01:25

Page 16 of 18 - Baseline Governance Review – Digital Health and Care Wales

Archwilio Cymru
Audit Wales

Audit Wales

24 Cathedral Road

Cardiff CF11 9LJ

Tel: 029 2032 0500

Fax: 029 2032 0600

Textphone: 029 2032 0660

E-mail: info@audit.wales

Website: www.audit.wales

We welcome correspondence and
telephone calls in Welsh and English.
Rydym yn croesawu gohebiaeth a
galwadau ffôn yn Gymraeg a Saesneg.

DIGITAL HEALTH AND CARE WALES
FINANCE REPORT FOR THE PERIOD ENDED DECEMBER 31ST 2021

Agenda Item	6.4

Name of Meeting	SHA Board
Date of Meeting	27 January 2022

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

Executive Sponsor	Claire Osmundsen Little Executive Director of Finance & Business Assurance
Prepared By	Mark Cox, Deputy Director of Finance
Presented By	Claire Osmundsen Little Executive Director of Finance & Business Assurance

Purpose of the Report	For Discussion/Review
Recommendation	

The Board is being asked to:
DISCUSS the contents of this finance report for 31st December 2021 and **NOTE** the forecast year end achievement of key financial targets.

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

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

Acronyms			
DHCW	Digital Health and Care Wales	DPIF	Digital Priority Investment Fund
SLA	Service Level Agreement	PSPP	Public Sector Payment Policy
WG	Welsh Government	NHS	National Health Service
S1	Statement of Non-Current Assets to transfer (e.g. buildings, Infrastructure etc)	S2	Statement of Current Assets (e.g. Debtors, Creditors etc)
MMR	Welsh Government Financial Monthly Monitoring Returns	VPN	Virtual Private Network
DSPP	Digital Services for Patients & Public	DICU	Digital Intensive Care Unit
WCCIS	Welsh Community Information Solution	WPAS	Welsh Patient Administration System

1 EXECUTIVE SUMMARY

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 for the period to December 31 2021.

The report sets out the financial position as at the end of December 2021 against updated budgets. The delegated directorate budgets have been derived from the 2021/22 Resource Plan which was drawn from the 2021/22 Annual Financial Plan and further updated allocation adjustments from Welsh Government (DPIF & COVID-19 response) and commissioners (SLA changes) as the year progresses.

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 for 21/22:

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

- **Cash:** Whilst there is no prescribed limit for cash held at the end of the month, WG encourages this to be minimised and a rule of thumb of 5% of monthly expenditure is used, however, given

Board Finance Report – December Performance   Page 2 of 19   Author: Mark Cox
Approver: Claire Osmundsen Little
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

2/19   271/303

the significant all Wales contracts the organisation carries, a more significant threshold may be appropriate for DHCW. The finance department will continue to work with Welsh Government representatives to determine the performance KPI.

1.1 General Performance

April – December position: Digital Health Care Wales is reporting the achievement of all financial targets for the first seven months of the financial year with a presented revenue underspend of £0.550m and a capital underspend of £0.051m. The organisation has met the PSPP target (recording 97% of all Non-NHS invoices paid within the stipulated 30 day deadline) whilst of the £2.1m debt registered at December 31st none are required to be escalated for arbitration.

Savings: The current savings target is expected to be met, with no risk reported.

Forecast End of Year position: DHCW is forecasting a £0.350m yearend underspend position for revenue and breakeven for capital with no identified unmitigated material 21/22 financial risks at the time of writing. The forecast is predicated upon any staff related underspends being used to procure 3rd party resource or other investment requirements. Should any gains accrue then these will be reflected within future forecast figures once identified. The yearend revenue surplus position was clarified by an Accounting Officer Letter submitted and receipted by Welsh Government at the end of November.

Cash Management - Cash balances stood at £2.4m at the end of December. As previously reported the intention to reduce carrying cash balances this figure is some £0.7m less than at recorded as at September 30th.

SHA Transition Update - The exercise to decouple assets and liabilities from the Velindre NHS Trust balance sheet has been completed with statements presenting the value of current and non-current assets and liabilities transferring from Velindre to DHCW signed by DHCW on October 1 2021. The schedules have been forwarded to Welsh Government for formal processing and review by Audit Wales. Once the exercise has been completed the final cash transfers between organisations will be actioned.

Financial Risk & Issues – The previously reported risk raised to manage prompt payment performance has now been mitigated. However, the recurrent overspend position within ICT reflected unfunded growth pressure remains on the financial radar and will be reassessed once our financial allocation for the forthcoming year is understood. An additional area of focus is DHCW disbursements to other NHS organisations totaling a planned £5.4m to other Health Boards and Trusts in 21-22. At the end of Quarter 3, there remains £3m yet to be claimed. This issue has been raised with the appropriate organisations to take action and submit invoices as a matter of urgency.

Board Finance Report – December Performance   Page 3 of 19   Author: Mark Cox
                                                                          Approver: Claire Osmundsen Little
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

3/19   272/303

Opportunities –DHCW continues to pursue savings/efficiency opportunities. During the period initiatives implemented in October within the Test, Trace and Protect digital service have resulted in £0.3m of costs being avoided.

1.2 Developments Since Last Reports

As part of the ongoing funding discussion with Welsh Government the net adjustments to DHCW capital (increase of £1.080m) and revenue (decrease of £1.466m) allocations are presented within Table 1.

Further details can be found in tables 5 & 6.

Table 1: Summary Movement In Welsh Government Allocations

	Capital Movement £000's	Revenue Movement £000's
Income		
Core Organisational	0	0
COVID-19 Response	0	0
Digital Priority Investments	1.080	-1,466
Total	1,080	-1,466

1.3 Future Developments

DHCW has a number of digital pipeline investment schemes currently in varying stages of development, review and approval to be funded via the Digital Priority Investment Scheme. At present the indicative funding requirement totals £10.2m (revenue & capital over three years). Further details on an individual scheme basis can be found in section 9.

1.4 NHS Microsoft Enterprise Agreement – Contract Renewal

As stated in reports for the November Board, in July 2022 the current three years agreement will end necessitating a re-procurement exercise. The Enterprise Agreement is transacted via a Licence Agreement Reseller which for Wales is Trustmarque, who were appointed as the NHS Wales Microsoft reseller following a competitive procurement process in 2019.

The DHCW Executive Director of Finance & Business Assurance is leading a multi-disciplinary negotiation team with a view to timely reprocurement and maximising cost avoidance.

High level performance against key targets

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

Movement indicators present a positive movement (upwards arrow), negative movement (downwards arrow) or no movement (sideways arrow).

Key	RAG
Good Performance /On Target	
Management intervention required	
Target materially missed or at risk – Director intervention required	

Table 2:Performance against KPI's

INDICATOR	CUMULATIVE PERFORMANCE	FORECAST OUTLOOK	COMMENT
Revenue Breakeven (To secure that the organisations expenditure does not exceed aggregated income)	£0.550m Underspend ⬇ Movement	£0.350m Underspend ⬌ Movement	Small period operational surplus of £0.550m a decrease of £0.045m from the September position – it is forecast for this to decrease over the final quarter to £0.350m (some 0.3% of turnover) by the end of the financial year.
Remain within Capital Expenditure Limit (To ensure net Capital Spend does not exceed the Capital Expenditure Limit)	Breakeven ⬇ Movement	Breakeven ⬌ Movement	A total of £4.9m spend (an increase of £1.2m since last board) has been recorded, which is £0.051m under the plan for the period. The current capital funding envelope of £12.4m. Capital spend is expected to accelerate during final quarter as material capital schemes are planned to complete their procurement exercises. Schemes with significant residual balances (such as DSPP) will subject to additional focus to assure financial forecast.
Public Sector Payment Policy (To pay a minimum of all non NHS creditors within 30 days of receipt of a valid invoice)	97% ⬌ Movement	95% ⬌ Movement	PSPP target achieved. Target – 95%, Actual 97%. DHCW will continue to ensure the efficient turnaround of payment and also liaise with NHS Wales Shared Services to improve invoice scanning turnaround performance.
Cash Balances Appropriate balances to meet creditor requirements	£2.4m ⬇ Movement	Positive Cash Balance ⬌ Movement	Cash balance has decreased from £3.1m to £2.4m.

1.5   Recommendation

The Board are requested to note the contents of the financial report for December 31 2022 and the forecast year end achievement of key financial targets.

2 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1 SUMMARY OF PERFORMANCE AGAINST KEY FINANCIAL TARGETS

2.1.1 April to December Revenue Performance

DHCW is reporting a revenue surplus of £0.550m net of cost improvement targets for the period to December 31st. The underspend is expected to decrease during the final quarter as spend plans are completed and further recruitment takes place. Income for both COVID-19 Response and Digital Priority Investment continues to be received on an expenditure only basis meaning that any expenditure variances against plan will have balancing income variance resulting in a neutral effect on DHCW reported bottom line position.

Table 3: Summary of Revenue Performance by Area

	Period Budget £000's	Period Actual £000's	Underspend/-Overspend £000's
Income			
Core Organisational	72,736	74,378	1,642
COVID-19 Response	8,657	8,686	29
Digital Priority Investments	9,510	9,475	-35
Total	90,903	92,539	1,636
Expenditure			
Core Organisational	72,736	73,828	-1,092
COVID-19 Response	8,657	8,686	-29
Digital Priority Investments	9,510	9,475	35
Total	90,903	91,989	-1,086
Period Surplus/(Deficit)	0	550	550

Additional costs relate to procurement of PSBA circuits which are offset by a corresponding recharge (resulting in the additional income).

2.1.2 Revenue Forecast

The forecast revenue position of £0.350m is dependent upon recruitment and agreed spend plans taking place as planned.

2.2 Capital

For the financial year 2021/22, DHCW receives capital via 3 main funding routes:

1. Discretionary – Available for delegation by DHCW 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.

3 DETAILED CAPITAL PERFORMANCE

3.1.1 April to December Capital Performance

DHCW has recorded £4.871m capital spend against a current allocated allowance of £12.374m leaving a residual balance of £7.503m to be dispensed before the end of the financial year.

Table 4 presents the residual spend within discretionary, DPIF and COVID Response areas. The focus in the final quarter of the year will be gaining assurances from each of the Programme Managers on the achievement of their spend commitments in particular the Digital Services for Patients and Public scheme.

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	2,919	2,080	2,080	0	839
Estates & Facilities	50	0	0	0	50
Total Discretionary	**2,969**	**2,080**	**2,080**	**0**	**889**
Digital Priority Investment					
Digital Services for Patients & Public Programme	2,428	51	0	51	2,428
Digital ICU	1,184	1,019	1,019	0	165
Cancer Informatics Solution	1,818	1,128	1,128	0	690
WPAS Infrastructure	1,080	0	0	0	1,080
Hospital Pharmacy System	457	225	225	0	232
National Data Resource	500	62	62	0	438
Welsh Community Care Information Solution	183	0	0	0	183
Total Digital Priority Investment	**7,650**	**2,485**	**2,434**	**51**	**5,216**

COVID-19					
Test, Trace & Protect	1,245	357	357	0	888
Vaccines	510	0	0	0	510
Total COVID-19	1,755	357	357	0	1,398
Total Capital Plan	12,374	4,922	4,871	51	7,503

3.1.2   Movement in Capital Resource Limit

The movement in the DHCW capital funding envelope (capital resource limit or CRL) since the November board report is presented below. Additional capital funding of £1.080m to support WPAS infrastructure refresh whilst movement in Digital Priority investment Fund schemes reflects disbursements to other NHS organisations upon achievement of agreed milestones or activity (e.g. system implementation) (denoted 1), agreed return to Welsh Government for spend reprofiling (denoted 2) and transfers between schemes (denoted 3).

Table 5: Movement in Capital Funding

Scheme	October Allocation £000's	December Allocation £000's	Movement £000's
Discretionary			
Total Discretionary	2,969	2,969	0
Digital Priority Investment			
Digital Services for Patients & Public Programme	2,790	2,428	-362[2]
Digital ICU	2,183	1,184	-999[2]
Cancer Informatics Solution	1,818	1,818	0
WPAS Infrastructure	0	1,080	1,080
Hospital Pharmacy System	850	457	-393[1]
National Data Resource	875	500	-375[1]
Welsh Community Care Information Solution	183	183	0
Total Digital Priority Investment	8,699	7,650	-1,049
COVID-19			
Test, Trace & Protect	1370	1,245	-125[3]
Vaccines	385	510	125[3]
Total COVID-19	1,755	1,755	0
Total Capital Plan	13,423	12,374	-1,049

3.1.3 Capital Forecast

The current forecast is for DHCW to remain within its resource limit. There will be continual review with Welsh Government to assess requirements and reprofiling of activity and spend. It is expected that once requirements for Test, Trace and Protect development activity for this financial year is confirmed by Welsh Government leads then there will be a reduction in the capital limit actioned before the March Board.

4 DETAILED REVENUE PERFORMANCE

The following section presents the detailed revenue financial performance for DHCW brigaded by Directorate (encompassing recurrent activity) and non-recurrent areas such as Digital Investment Priority Fund Schemes and COVID-19 Response. Any variances against initial plan within non recurrent schemes will have a neutral effect on DHCW bottom line as cash is only drawn down to match expenditure.

4.1 Movement in Revenue Resource Limit

The movement in DHCW revenue funding envelope (revenue resource limit or RRL) since the last board report is presented below.

Table 6: Movement in Revenue Funding

Area	Movement £000's	Note
Core		
Core Funding	0	N/A
Total Core	**0**	
Digital Priority Investment		
Welsh Community Care Information Solution	-1,250	Repatriated to WG pending outcome of strategic review
Digital Services for Patients & Public	-216	Transfer of Primary Care funding
Total Digital Priority Investment	**-1,466**	
COVID-19		
COVID-19: Test, Trace & Protect	0	N/A
COVID-19: Vaccines	0	N/A
Total COVID-19	**0**	
Total (Net) Movement	**-1,466**	

Board Finance Report – December Performance   Page 9 of 19   Author: Mark Cox
Approver: Claire Osmundsen Little
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

9/19   278/303

4.2   DHCW Directorate Financial Performance

DHCW is currently organised into seven directorates which are currently reporting a net underspend of £0.550m against plan for the first nine months. The underspend is predominately due to recruitment slippage and is after recovery of the cost improvement target for this financial year.

The underspends recorded within Board & Governance, Executive Team, Engagement & Transformation Services and Finance & Business Assurance Directorates are predominately as a result of a recruitment lag in new SHA functional roles. Application Development & Support and the Information Services Directorate continue record general operational underspends.

Figure 1: Directorate Financial Performance

DIRECTORATE CONTRIBUTIONS TO DECEMBER ORGANISATIONAL UNDERSPEND £000'S
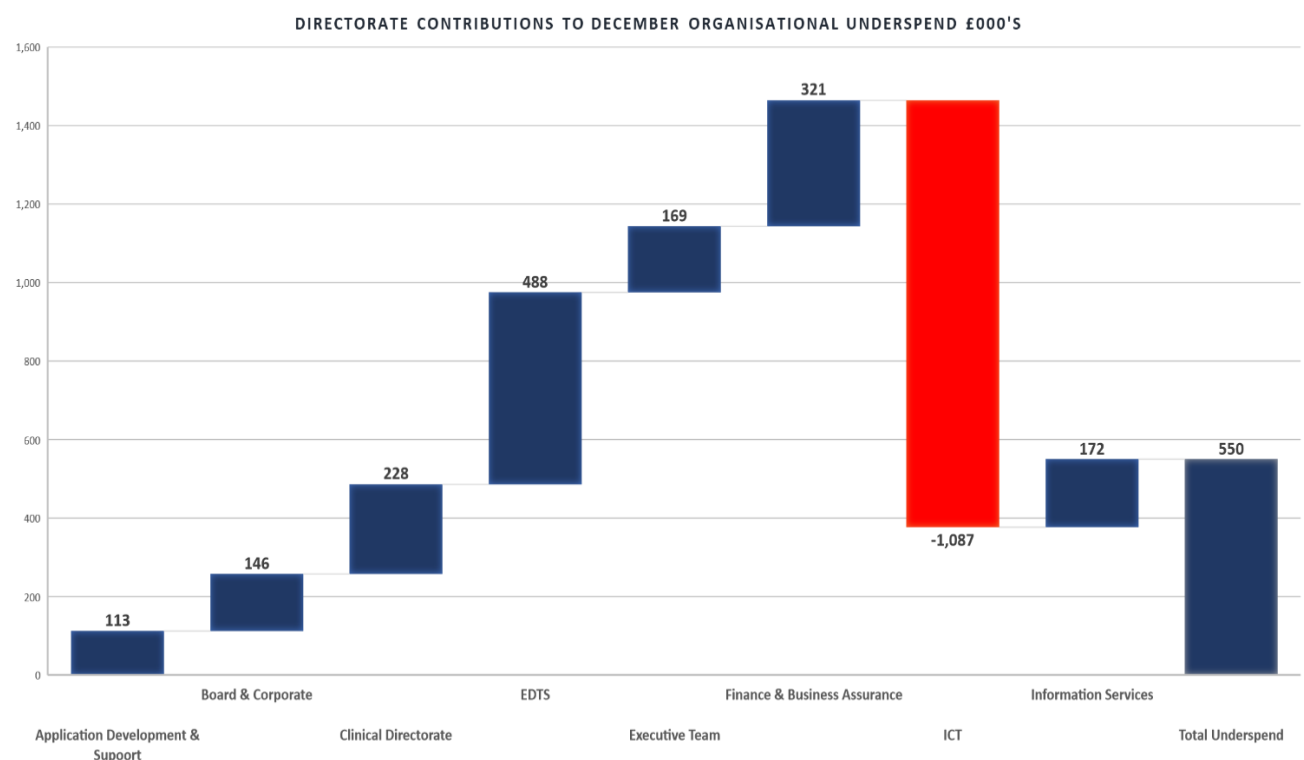
The Information Communications Technology Directorate is reporting an overspend of £1.087m for the period to December 31st as a result of requirement to support service growth and the impact of cloud adoption. The mitigation to manage the any overspend is in place this financial year whilst DHCW will look to provide for a recurrent sustainable position as part of the IMTP process.

Board Finance Report – December Performance   Page 10 of 19   Author: Mark Cox
Approver: Claire Osmundsen Little
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

10/19   279/303

4.3 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. COVID-19 spend remains particularly sensitive to impactors upon volumes whether as a consequence of policy changes or the status of the pandemic. Both solutions are subject to movement in cost profiling as a result of the material makeup of volume driven variable costs. Dependent upon volumes experience during the final quarter of the financial year it is forecast that DHCW will be some £0.2m under its currently identified ceiling allocation.

4.3.1 Test, Trace & Protect

The scheme is presenting an underspend pf £0.0245m against current plan for period, however this is expected to be offset by cloud charges and profiled increases in licence requirement.

Table 7: Test, Trace & Protect Financial Performance

TTP	Annual Budget £000's	Period Budget £000's	Period Actual £000's	Under/-Overspend £000's
Performance	5,982	4,502	4,257	-245
Pay	1,113	807	743	64
Non Pay	5,115	3,931	3,750	181
Surplus/(Deficit)	**246**	**236**	**236**	**0**
In Year Operational Expenditure Cost Reduction Due To C19	-246	-236	-236	0
Period Performance	**0**	**0**	**0**	**0**
Forecast	5,982	5,982	5,916	66

The Test, Trace & Protect alerts during December have increased by 71% (1.2m) in comparison to October levels but the increase in volume has been absorbed by a 79% reduction in unit cost (from 7.8p to 1.6p per text) as a result of the migration to a new text messaging supplier.

Figure 2:TTP SMS Alert Volumes

TTP SMS Messages (000's)

October: 1,629
November: 1,876
December: 2,789

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY
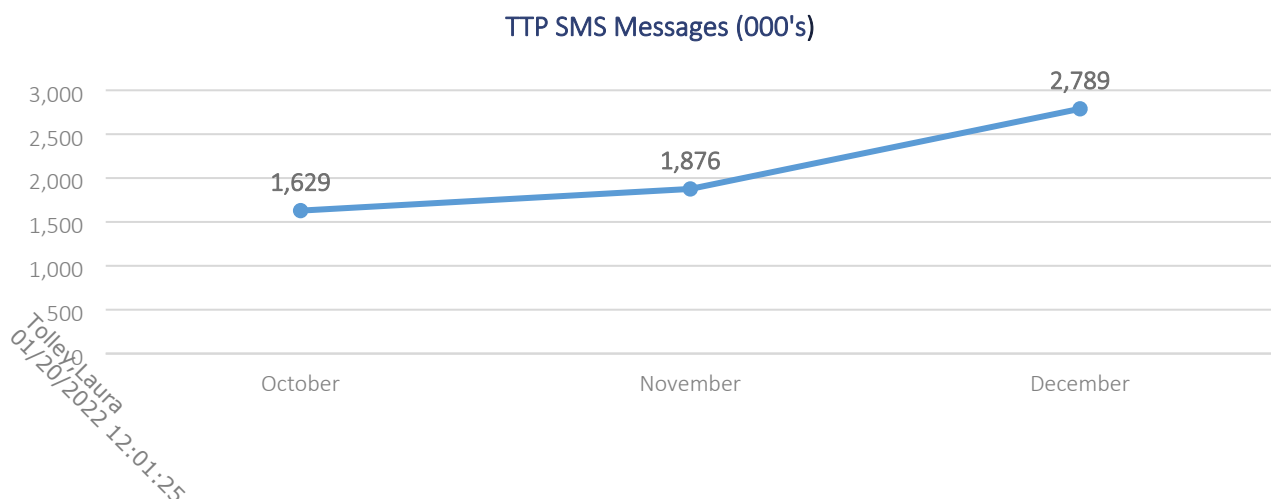
4.3.2   Vaccines

The solution is currently reporting an overspend against initial plan of £0.274m as a consequence of major scheduling volume increases during the period.

Table 8: Vaccines Financial Performance

Vaccines	Annual Budget £000's	Period Budget £000's	Period Actual £000's	Under/-Overspend £000's
Performance	5,700	4,155	4,429	274
Pay	1,544	1,036	895	141
Non Pay	4,356	3,269	3,684	-415
Surplus/(Deficit)	200	150	150	0
In Year Operational Expenditure Cost Reduction Due To C19	-200	-150	-150	0
Period Performance	0	0	0	0
Forecast	5,700	5,700	5,566	134

The vaccine scheduling solution has experienced a large increase in throughput over the last month although costs are expected to be largely offset by gains elsewhere, dependent upon quarter four activity there may be a requirement for a small amount of additional funding.

Figure 3: Vaccines Scheduling Text/Letter Volumes Profile

April 2021 – March 2022 Text/Letter Volume Profile (000's)
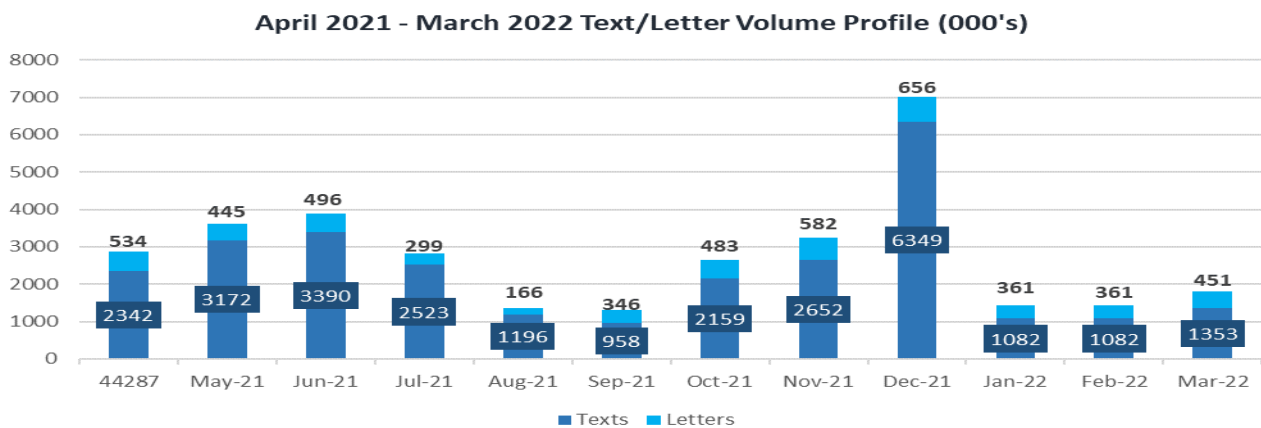
4.4   Digital Priority Investment Fund (D.P.I.F)

A total of £16.570m is currently allocated to support digital investment via DPIF and Digital Intensive Care Unit.

Figure 4 : Digital Priority Investment Fund (DPIF) Residual Spend

DPIF Revenue Performance to December £000's

Category	Spend to Date	Remaining
National Data Resource	2,788	2,033
WCCIS - Priority Investment	1,590	900
Digital Services For Patients & Public	451	1,943
BDC Datacentre Migration	1,898	302
Office 365 - National Rollout	1,208	349
Digitilisation of Nursing	1,213	210
Digital Intensive Care Unit	151	286
E-prescribing Transformation Programme	28	182
Digital Maternity Cymru: Scoping and Discovery	143	
CANISC - Clinical Functionality	155	35
Network/VPN Capacity Increases	87	33

With spend revenue spend totalling £9.569m dual balance of £7.001m remains to be spent or disbursed. Finance staff will continue to liaise with project leads, Welsh Government and the appropriate governance groups to ensure timely declaration of any movement from current forecast to enable mitigating actions to be pursued.

5   SAVINGS

The annual plan specified a savings target of £1.854m supported by a minimum 2% cost improvement target levied upon discretionary budgets as agreed as part of the budget allocation process. DHCW is currently meeting its savings target with no risk identified to date.

6   PUBLIC SECTOR PAYMENT POLICY (PSPP)

DHCW is reporting a figure of 97% achievement against a target of 95%. The previously reported risk has now been mitigated.

Board Finance Report – December Performance   Page 13 of 19   Author: Mark Cox
Approver: Claire Osmundsen Little
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

13/19   282/303

7 CASH

The cash balances at the end of December amounted to £2.4m. The balances will continue to be reviewed particularly in terms of marrying cash requirement with digital priority funded projects planned disbursements to other NHS organisations which can impact upon cashflow forecast should Health Boards not invoice to agreed timelines.

As at December 31 2021 the debtors total stood at £2.1m (some £3.3m less than October) with no disputes lodged and no aged debt exceeding 90 days.

8 RISKS AND OPPORTUNITIES

8.1 Risks

The previously identified risk to achievement of the PSPP target of 95% has now been mitigated.

8.2 Opportunities

COVID Response efficiencies (such as improved TTP licence management and shifts of text messaging supplier have now been implemented and financial gains are being recorded. DHCW is due to implement the vaccine booking solution in January which is expected to reduce transactional costs.

9 ADDITIONAL INFORMATION

9.1.1 Transfer on Current & Non-Current Assets from Velindre NHS Trust to Digital Health and Care Wales

The exercise to determine the S1 & S2 balances to be transferred from Velindre to DHCW has now been completed and submitted to Welsh Government and Welsh Audit. A Summary of the S1 and S2 values are given below showing £27,872K of Capital assets to be transferred to DHCW and £9,833K of Net Working Capital transferred. The Capital balance is yet to be reflected in the October returns until agreed with Welsh Government.

Schedule	Period Budget £000's	Balance £000's
S1	Total Property plant and equipment and Intangible Assets	27,872
S2	Total Value Net Working Capital Transferred	9,833

Welsh Audit will review the process and documentation with a revised expected completion date of January 31 2022.

Board Finance Report – December Performance   Page 14 of 19   Author: Mark Cox
Approver: Claire Osmundsen Little
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

14/19   283/303

9.1.2   DHCW Final Accounts

Regulation 20 of the Digital Health and Care Wales (Membership and Procedure) Regulations 2020 requires accounts to be prepared for each financial year. DHCW is awaiting receipt of the final Accounts Direction from Welsh Government which will detail the required accounting period and basis of preparation.

The deadline for submission of audited returns to Welsh Government is June 15 2022, a detailed timetable will be agreed to ensure the appropriate review by DHCW Board and committees.

9.1.3   Microsoft Office 365 Enterprise Agreement Renewal

As stated in reports for the November board, in July 2022 the current three-year agreement will end necessitating a re-procurement exercise. The Enterprise Agreement is transacted via a Licence Agreement Reseller which for Wales is Trustmarque, who were appointed as the NHS Wales Microsoft reseller following a competitive procurement in 2019.

The DHCW Executive Director of Finance & Business Assurance is leading a multi-disciplinary negotiation team with a view to timely re-procurement and maximising cost avoidance. Organisational requirements have now been collated with and have been submitted to Microsoft alongside concession requests for an initial quote. The expectation is that this will be received by w/c 31st January with updates regularly supplied to the Board through established channels and meetings.

10   FUTURE DEVELOPMENTS

10.1   Pipeline Digital Investment

The following section presents pipeline digital investment schemes to be funded from the Welsh Government Digital Priority Investment Fund. Cases for investment are in various stages of completion, review and are awaiting approval by the Welsh Government Digital Scrutiny Panel. Costs are indicative three-year estimates until formally agreed. It is anticipated that those approved schemes (shaded green) will have funding confirmed and be added to the overall financial plan in readiness for 2022/23 IMTP finalisation.

Digital Priority Investment Fund Scheme	Indicative 3 Year Requirement			Description	Welsh Government Status
	Capital £000's	Revenue £000's	Grand Total £000's		
O365 DHCW Centre of Excellence	0	2,021	**2,021**	The case details a requirement for funding the establishment of the Centre of Excellence to sustain and develop & support going forward.	Approved

Digital Priority Investment Fund Scheme	Indicative 3 Year Requirement			Description	Welsh Government Status
	Capital £000's	Revenue £000's	Grand Total £000's		
Welsh Emergency Department System Acceleration	830	0	**830**	This is a jointly funded WG/Health Board project that aims to improve the clinical and operational information available to clinical teams treating patients in Emergency Departments, and then make that information available elsewhere on the clinical pathway for the safer and more informed treatment of the patient. It will also improve the ability to record structured clinical data and re use that data for better operational management, audit and planning purposes.	Approved
DHCW Welsh Patient Administration System (WPAS)	264	1,992	**2,256**	This case proposes changes to the Welsh PAS structure to align the team with a product approach which will include the consolidation of functions currently working across DHCW into an integrated team. In recognition of the WPAS product and team role in helping enable service transformation there is also a requirement for additional resources in all aspects of the team's specialist areas including architecture, development, implementation and support.	Approved
Welsh Nursing Care Record	0	2,346	**2,346**	The case is to fund roll out and initial transition to live service of the digital system for patient documentation. The benefits od WCNR will include time efficiency gains, improved accuracy and reduced unnecessary duplications. It will enable nurses working in adult inpatient settings to complete assessments at a patient's bedside using standardised forms on a mobile tablet or other handheld device.	Approved
Enhancing Digital Solutions in Powys	9	565	**574**	This is a joint case with Powys THB that supports an enhanced multi-organisation digital solution to improve patient outcomes. It will allow NHS Wales patients who are treated in NHS England to have their administrative and clinical date managed and accessible through NHS Wales digital systems.	Approved

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

Indicative 3 Year Requirement					
Digital Priority Investment Fund Scheme	Capital £000's	Revenue £000's	Grand Total £000's	Description	Welsh Government Status
Digital Change Network	16	1,750	**1,766**	This case outlines a proposal to increase the capability and capacity of the National Business Change Team to drive forward, accelerated and effective roll out of digital solutions by supporting local resources to deliver, embed and sustain digital change/service transformation.	Under Consideration
DHCW Research and development	0	360	**360**	As part of the consultation for DHCW, a proposal for a Research & Innovation function was developed to incorporate existing commitments in this area alongside a refreshed ambition for improving the clinical and social care research environment through improved access to large scale data and advanced analytics.	Under Consideration
Infrastructure/ Transition to Cloud	TBC	TBC	**TBC**	DHCW has now commissioned external expertise to draft recommendations relating to cloud strategy and transition. This will then be used to inform the 22/23 Integrated Medium Term Plan and subsequent business cases to be submitted to Welsh Government.	Pending Submission
Teledermoscopy – Discovery & Scoping Proposal	TBC	TBC	**TBC**	This proposal sets out the background for the implementation of a teledermoscopy service, the requirement that the proposal intends to address via a short discovery and scoping process and asks for approval for the costs associated with that discovery and scoping phase. This proposal supports the Clinical Programme for Dermatology's "All Wales Teledermoscopy Service".	Pending Submission
Total	**1,119**	**9,034**	**10,153**		

10.2 Organisational Underlying Financial Assessment

As part IMTP preparation, a review of the underlying recurrent financial position was conducted.

DHCW finance department has produced an indicative baseline assessment to provide clarity on the organisational underlying deficit and the impact of COVID-19 on the recurrent position going into 2022/23. This included:

- The net cost impact of core delivery, decisions and investment choices within core services based on pre COVID-19 baselines. This includes the net cost impact of the non-delivery of

Board Finance Report – December Performance   Page 17 of 19   Author: Mark Cox
Approver: Claire Osmundsen Little
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

17/19

286/303

savings programmes and recurrent investment choices.

- Full year effect of 2021/22 in year recovery decisions that are recurrent commitments with no confirmed funding stream.
- The mitigating actions organisations are implementing to reduce the net cost impact such as efficiency programmes that have started in 2021/22 and have a full year impact in 2022/23.

As part of the exercise the current results presented core operational pressures totaling £5.6m over areas including:

- Reinstatement of 21/22 non recurrent savings requirement
- Committed Cloud Adoption
- ICT Growth Requirement
- SHA Establishment (including strategic management and Welsh Language requirements)

As part of the planning process dialogue with Welsh Government and internal leads will continue to construct mitigating actions.

11 RECOMMENDATION

The Board asked to **DISCUSS** the contents of this finance report for 31st December 2021 and **NOTE** the forecast year end achievement of key financial targets.

12 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

Board Finance Report – December Performance   Page 18 of 19   Author: Mark Cox
Approver: Claire Osmundsen Little
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

18/19   287/303

Statement:
N/A

APPROVAL/SCRUTINY ROUTE:

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

COMMITTEE OR GROUP	DATE	OUTCOME
Management Board	14/01/2022	Approved

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

Tolley,Laura
01/20/2022 12:01:25

DIGITAL HEALTH AND CARE WALES
LOCAL PARTNERSHIP FORUM CHAIR'S REPORT FOR BOARD

Date of Board Meeting	27 January 2022

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

Name of Committee	Local Partnership Forum
Chair of Committee	Helen Thomas, Chief Executive Officer, Andrew Fletcher Associate Board Member (Trade Union),
Lead Executive Director	Helen Thomas, Chief Executive Officer and Chris Darling, Board Secretary
Date of Last Meeting	7 December 2021
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 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)	0259, 0237

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	07.12.2021	The Chair summarised the key items to highlight at the end of the Committee meeting which were supported.

Tolley.Laura
01/20/2022 12:01:25

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

Summary of Key matters considered by the committee and any relevant decisions made:

Risk Management Report

The Local Partnership Forum **discussed** the Risk Management Report and received an update from Workforce relating to risk DHCW0259 – Staff Vacancies and DHCW0237 – COVID19 Resource Impact which was emerging as a risk in the IMTP planning process. Work on the Risk Appetite was discussed and the implications for the organisation. The Local Partnership Forum noted the update provided.

Workforce Performance Report

The Local Partnership Forum **noted** the Workforce Performance Report / Dashboard and commented on the importance of exit interviews with staff leaving, which would help identify themes around reasons for those leaving DHCW.

Policies

The Local Partnership Forum **reviewed** and **noted** the policies out to consultation as part of the policy approval process.

People & Professional Organisational Development Strategy Update

The Local Partnership Forum **noted** the work to develop a People and Professional Organisational Development Strategy.

Verbal Update from Trade Unions

Trade Union members **updated** the Local Partnership Forum on the current Trade Union positions in relation to the improved offer of the workforce package from Welsh Government.

New Ways of Working – Staff Survey Outcomes

The Local Partnership Forum **noted** the National Staff survey had been postponed until next year but the latest of the internal surveys had been published last week (week ending 3 December 2021) and an action plan had been crated to address issues resulting from feedback.

Application and Development Support Organisational Plan Update

The Local Partnership Forum **received** an update in the form of a presentation provided by the Interim Assistant Director of Application, Development and Support on the emerging product structure.

Executive Structure

The Local Partnership Forum **noted** the update that the recruitment selection process was underway for the Executive Directors of Strategy and Operations, and a confirmation of the appointed Executives would be circulated in the coming weeks. The Director of People and Organisational Development was noted as out to advert.

Office 365 Centre of Excellence Update

The Local Partnership Forum **noted** the update and the progress made on the Programme.

Integrated Medium-Term Plan (IMTP)

The Local Partnership Forum **noted** the draft plan was in the final stages of development and would be presented through a series of meetings ahead of final Board review for approval.

Baseline Governance Review

The Local Partnership Forum **noted** the Baseline Governance Review findings would be reported to the Board meeting in January 2022.

Finance Review

The Local Partnership Forum **noted** the Finance Review which outlined the organisation's current financial position in terms of development and recruitment of posts.

DHCW in Africa

The Local Partnership Forum **noted** the difficulties in fulfilling this Programme of work due to the COVID-19 restrictions on travel and agreed that the funds raised should be donated as soon as possible.

Local Partnership Forum Highlight Report   Page 4 of 5   Author: Julie Robinson
Approver: Chris Darling
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

4/5   292/303

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 Local Partnership Forum:

No delegated action taken by the forum.

Date of next committee meeting:

8 February 2022

Tolley,Laura
01/20/2022 12:01:25

DIGITAL HEALTH AND CARE WALES
AUDIT AND ASSURANCE COMMITTEE
CHAIR'S REPORT FOR BOARD

Date of Board Meeting	27 January 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	18 January 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.	

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)	

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	18.01.22	The Chair summarised the key items to highlight at the end of the Committee meeting which were supported.

Tolley,Laura
01/20/2022 12:01:25

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		

Summary of Key matters considered by the committee and any relevant decisions made:

Annual Cycle of Committee Business 2022/23 and Forward Work Plan
The Committee **Approved** the Annual Cycle of Committee Business for 2022/23 and **noted** the addition of the Cyber Resilience Unit to the Forward Work Plan.

Committee Annual Effectiveness Survey
The Committee **noted** the feedback from the Effectiveness Survey was generally positive from the eight responses received. The atmosphere is considered conducive to open and productive debate and behaviour is courteous and professional.

Annual Review of Committee Terms of Reference
The Committee **Approved** the Annual Review of Committee Terms of Reference which were reviewed with minimal changes.

Internal Audit Update
The Committee **received** the update on activity and future planned work from Internal Audit for assurance. Members were informed Internal Audit was on track to present all outstanding

reviews to the April Committee meeting. Internal Audit Reports received by the Committee included:

Welsh Radiology Information Service
The Audit and Assurance Committee **received** the review of the audit undertaken on the Welsh Radiology Information Service for **assurance**. The review received a *Reasonable* assurance rating.

GP System Procurement
The Committee **received** the GP System Procurement audit for assurance. The Committee were pleased to note the review received a *Substantial* assurance rating.

Governance Arrangements (Part 1)
Members **received** the Governance Arrangements (Part 1) audit. Members were again pleased to note the review received a *Substantial* assurance rating received.

All Wales Summaries – Estates Assurance
The Audit and Assurance Committee **received** the All-Wales Summaries – Estates Assurance reports for assurance and **noted** the learning, particularly relating to the Control of Contractors from the reviews of other Health Boards and Trusts.

Audit Wales Baseline Governance Review Report
The Committee welcomed the encouraging Baseline Governance Review Report. The overall conclusion that DHCW is making good progress in putting arrangements in place to support good governance was **noted**. It was further **noted** that 2022/23 review will take the form of a Structured Assessment.

Audit Wales NHS Staff Wellbeing Through Covid: Caring for the Carers
The Committee **received** for assurance the management response to the Caring for the Carers review. The Committee noted the DHCW staff surveys had indicated that staff were broadly satisfied with the working from home arrangements but would welcome a hybrid approach going forward.

DHCW Audit Tracker
The Committee **approved** the request for the closure of 17 audit actions on the log that are now complete. The Committee **noted** 6 of the remaining audit actions are currently on track for delivery within the timeframes.

Counter Fraud Update
Members **received** the Counter Fraud Progress Report. Progress in the training and education of staff on Counter Fraud matters was **noted** and how to maximise Counter Fraud time on prevention and education.

Governance Assurance Framework
The Committee **endorsed** the Governance Assurance Framework to be presented to the Board for approval.

Risk Management including Corporate Risk Register

The Risk and Board Assurance plan against key milestones was **noted.** Members noted there were 23 risks on the Corporate Risk Register; 18 were reviewed in the public session and 5 risk relating to cyber were considered in the private session. The Committee **received** a detailed update on the risk related to Staff Vacancies/Recruitment.

Declarations of Interests, Gifts and Hospitalities Report
The Committee **noted** continued progress on the work being done to capture all Declarations of Interests, Gifts and Hospitalities for staff band 8a and above. The Committee were **assured** that the relevant communication was provided to staff regularly to remind them of their statutory duties with regard to the Standards of Behaviour Policy.

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.

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.

Decarbonisation Strategic Delivery Plan
The Plan was **noted** by Committee members. The Committee **received** a presentation which outlined the focus of the planned work to address the commitments for delivery of decarbonisation by 2025.

Quality and Regulatory Compliance Update Report
The Committee **approved** the Quality and Regulatory Annual plan for 2022/23 and **noted** the Quality and Regulatory Update to include the four external International Organisation Standardisation (ISO) quality audits this period.

The Welsh Community Care Information System Status
The Committee **noted** the outcome of the review was still to be received.

Health and Care Standards Annual Assessment Report
The Audit and Assurance Committee **received** the Health and Care Standards Annual Assessment for **assurance.**

COVID-19 Inquiry Update Report
The Committee **noted** the latest position on a UK inquiry into Covid-19 and noted for **assurance** the work taking place to prepare for a UK wide Covid-19 Inquiry which will require input from DHCW.

The Committee received several reports via a *closed* session due to the sensitive nature of the content, including:

The Audit Tracker – Cyber Security Actions were received for **assurance.**
The Corporate Risk Register – Cyber Security Risks were scrutinised and actions **noted.**

Audit and Assurance Committee Highlight Report   Page 5 of 6   Author: Chris Darling
Approver: Marian Wyn Jones
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

5/6   298/303

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 17 actions on the log now complete.

Governance Assurance Framework
The Committee **endorsed** the Governance Assurance Framework to be presented to the SHA Board for **approval**.

Quality and Regulatory Compliance Update Report
Members **approved** the Quality and Regulatory Annual Plan.

Date of next committee meeting:

19 April 2022

Tolley,Laura
01/20/2022 12:01:25

INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

DIGITAL HEALTH AND CARE WALES
REMUNERATION AND TERMS OF SERVICE COMMITTEE CHAIR'S REPORT FOR BOARD

Date of Board Meeting	27 January 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 of the DHCW Board
Lead Executive Director	Helen Thomas, Chief Executive Officer
Date of Last Meeting	20 January 2022
Prepared By	Chris Darling, Board Secretary
Presented By	Simon Jones, Chair of the DHCW Board

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)	

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: 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
RATS Committee Chair	20/01/22	Supported

Remuneration and Terms of Service Committee Report   Page 2 of 4   Author: Chris Darling
Approver: Simon Jones
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

2/4   301/303

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 was an agreed proposal for the buy back of annual leave which will have financial implications
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below
	Annual Leave buy back will have implications on the time the DHCW workforce included will be in work. In addition the report proposes the appointment of a Deputy CEO, which is not a formal post recognized at present.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

Summary of Key matters considered by the committee and any relevant decisions made:

Forward Work-Plan
The items scheduled to be considered by the Committee before the end of March were **noted**, to include:
- Directors Objectives (where in post)
- Review of Committee Terms of Reference
- Annual Committee Effectiveness Survey
- Review of Overtime arrangements – by end of April 2022

Appointment of the Executive Director of Strategy
Members **ratified** the appointment of the Executive Director of Strategy and **approved** their remuneration and terms of service.

Appointment of the Executive Director of Operations
Members **ratified** the appointment of the Executive Director of Operations and **approved** their remuneration and terms of service.

Annual Leave Buy Back Scheme Update
The Remuneration and Terms of Service Committee **noted** the update on the previous paper presented in October 2021 regarding the option for staff to sell, up to 10 days annual leave (pro rata for part time staff) during 2021-22 leave year only. Members **noted** the new instructions from Welsh Government and the ongoing discussions taking place at a national level with Trade Unions.

Key risks and issues/matters of concern of which the board needs to be made aware:

The Executive Director posts appointed to are due to commence in April 2022, until this time the interim arrangements will continue to operate.

Delegated action taken by the committee:

Appointment of the Executive Director of Strategy and Executive Director of Operations
Members **ratified** the appointments of the two Executive Director posts and **approved** their remuneration and terms of service.

Date of next committee meeting:

To be confirmed

Remuneration and Terms of Service Committee Report   Page 4 of 4   Author: Chris Darling
Approver: Simon Jones
INTERNAL – IF PRINTED THIS BECOMES AN UNCONTROLLED COPY

4/4   303/303