Shared Services Partnership Committee - July 2021

Thu 22 July 2021, 10:00 - 13:00

Microsoft TEAMs



Agenda

10 min

10:00 - 10:10 1. Agenda

1.1. Welcome and Introductions

Margaret Foster

1.2. Apologies for absence

Margaret Foster

1.3. Declarations of Interest

Margaret Foster

1.4. Draft minutes of meeting held on 20 May 2021

Margaret Foster

SSPC Minutes Draft Part A May 2021.pdf (8 pages)

1.5. Action Log

Margaret Foster

1.5 Action Log July 2021 - Copy.pdf (1 pages)

20 min

10:10 - 10:30 2. Service Updates

2.1. Foundation Economy

Jonathan Irvine

SSPC Foundation Economy Report.pdf (6 pages)

15 min

10:30 - 10:45 3. Chair/Managing Director's Report

3.1. Chair's Report

Verbal

3.1.1. Chair's Urgent Action - Student Awards

Margaret Foster

SSPC_SAS_Jul21_v4.pdf (8 pages)

3.2. Managing Director's Update

10:45 - 11:15 4. Items for Approval 30 min

4.1. BREXIT Closure Report

Mark Roscrow

SSPC BREXIT Closure Report.pdf (8 pages)

4.2. Chair's Appointment

Gareth Hardacre

- Chair Recruitment.pdf (4 pages)
- NWSSP Appointment of Chair Information Pack for Applicants (1).pdf (10 pages)

4.3. Lease Car Salary Sacrifice

Andrew Butler

Salary Sacrifice - CO2 Emissions (002).pdf (4 pages)

4.4. Oxygen Finance

Andrew Butler

Priority Supplier Programme (003).pdf (3 pages)

4.5. Church Village Laundry Transfer

Neil Frow/Andy Butler

SSPC Laundry CTUHB SBAR.pdf (12 pages)

11:15 - 11:20 **5. Project Updates**

5.1. Laundry Update

Neil Frow/Andy Butler

- July 21 SSPC Laundry Service Level Agreement v1.pdf (41 pages)
- July 21 SSPC Laundry Risks and Actions v1.pdf (5 pages)

5.2. Oracle Upgrade - Verbal

Andrew Butler

5.3. PMO Highlight Report

Andrew Butler/Alison Ramsey

PMO Monthly Update June Final.pdf (14 pages)

11:20 - 11:50 6. Governance, Performance & Assurance 30 min

6.1. Finance Report

Andrew Butler

SSPC Finance and Corporate Services July 21.pdf (12 pages)

6.2. People & OD Report

Gareth Hardacre

- NWSSP People & OD Report July 2021 (003).pdf (16 pages)
- Welsh Language Unit Report for SLT and SSPC July 2021 Appendix A.pdf (14 pages)

6.3. Corporate Risk Register

Peter Stephenson

- SSPC Corporate Risk Register July 2021.pdf (4 pages)
- Corporate Risk Register 20210716.pdf (5 pages)

6.4. Gifts and Hospitality - Annual Report

Peter Stephenson

2020-21 Gifts and Hospitality Annual Report.pdf (2 pages)

6.5. Declarations of Interest

Peter Stephenson

SSPC 2020-21 Dol Report.pdf (6 pages)

11:50 - 11:55 7. Items for Information

7.1. Welsh Risk Pool Update

Andrew Butler

SSPC WRP Update Report.pdf (14 pages)

7.2. Medical Examiner Update

Neil Frow

Medical Examiner Service in Wales- English - Copy.pdf (4 pages)

7.3. Audit Wales PPE Update

Andrew Butler

AG to AGW re Procuring and Supplying PPE for the Covid-19 - Copy.pdf (12 pages)

7.4. Finance Monitoring Reports

Andrew Butler

- NWSSP MMR M2 Narrative.pdf (8 pages)
- NWSSP MMR M2 Table A Movement.pdf (1 pages)
- NWSSP MMR M2 Table A2 Risks.pdf (1 pages)
- NWSSP MMR M2 Table B Monthly Positions.pdf (2 pages)
- NWSSP MMR M2 Table C Savings.pdf (2 pages)
- NWSSP MMR M2 Table C3 Tracker.pdf (1 pages)
- NWSSP MMR M3 Narrative.pdf (7 pages)
- NWSSP MMR M3 Table A Movement.pdf (1 pages)
- NWSSP MMR M3 Table A2 Risks.pdf (1 pages)
- NWSSP MMR M3 Table B Monthly Positions.pdf (2 pages)
- NWSSP MMR M3 Table C Savings.pdf (2 pages)
- NWSSP MMR M3 Table C3 Tracker.pdf (1 pages)

7.5. Audit Committee Highlight Report

Peter Stephenson

29062021 SSPC Audit Committee Assurance Report - Copy.pdf (5 pages)

7.6. Health & Safety Annual Report

Peter Stephenson

H&S ANNUAL REPORT 2020-21 - Copy.pdf (39 pages)

11:55 - 12:00 8. Any Other Business

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NHS WALES SHARED SERVICES PARTNERSHIP COMMITTEE

MINUTES OF MEETING HELD THURSDAY 20th May 2021 10:00 - 12:00 Meeting held on TEAMS Part A - Public

ATTENDANCE		DESIGNATION	ORGANISATION
MEMBERS:			
Margaret Foster	(MF)	Chair	NWSSP
Neil Frow	(NF)	Managing Director	NWSSP
Huw Thomas	(HT)	Director of Finance	Hywel Dda
Pete Hopgood	(PH)	Director of Finance & IT Services	Powys THB
Geraint Evans	(GE)	Director of Workforce & OD	Aneurin Bevan
Catherine Phillips	(CP)	Director of Finance	Cardiff & Vale
Hywel Daniel	(HD)	Director of Workforce & OD	Cwm Taf
Claire Osmundser (CL)	n-Little	Director of Finance	DHCW
Sarah Morley	(SL)	Director of Workforce & OD	Velindre
Chris Turley	(CT)	Director of Finance	WAST
OTHER ATTEND	EES:		
Geoff Lang	(GL)	Head of Value and Savings Programme	BCUHB
Joanne Gubbings	(JG)	Deputy Director of Workforce & OD	Swansea Bay
Lisa Wise	(LW)	Head of HSSG Net Zero and Operation Supplies (PPE)	Welsh Government
Andy Butler	(AB)	Director of Finance & Corporate Services	NWSSP
Gareth Hardacre		Director of Workforce & OD	NWSSP
Peter Stephensor	n(PS)	Head of Finance & Business Development	NWSSP
Malcolm Lewis	(ML)	Medical Director	NWSSP
Gareth Price	(GP)	Personal Assistant	NWSSP
Mark Roscrow (item 2.1 only)	(MR)	Programme Director	NWSSP
Andrew Evans (item 2.2 only)	(AE)	Director of Primary Care Services	NWSSP
Paul Veysey (item 3.1 only)	(PV)	Solicitor, Legal & Risk Services	NWSSP
Mark Harris (item 3.2 only)	(MH)	Director of Legal & Risk Services	NWSSP

NWSSP Partnership Committee 20 May 2021

Item		Action
1. S	TANDARD BUSINESS	
		I
1.1	Welcome and Opening Remarks The Chair welcomed Committee members to the May 2021 Shared Services Partnership Committee meeting.	
1.2	Apologies Apologies were received from:	
	 Jo Whitehead, Chief Executive, BCUHB; Eifion Williams, Director of Finance, HEIW; Helen Bushell, Board Secretary, PHW Kathryn Jones, Director of Workforce & OD, Swansea Bay UHB; Steve Ham, Chief Executive, Velindre; Steve Elliott, Deputy Director of Finance, Welsh Government; Darron Du Pre, Trade Union Representative; Alison Ramsey, Director of Planning, Performance, and Informatics, NWSSP. 	
1.3	Declarations of Interest No declarations of interest were disclosed.	
1.4	Minutes of Previous Meeting Draft Minutes of meeting held on 18th March 2021 were reviewed and accepted with no issues raised.	
1.5	Action Log No actions were outstanding.	
2. D	eep Dives	
2.1	Presentation on IP5	
	Mark Roscrow, Programme Director provided an update on the facility at Imperial Park, Newport (IP5). The building was originally purchased to provide contingency for a no-deal BREXIT but has proved to be invaluable in responding to the challenges provided by COVID and in developing additional services. The site was formally acquired by NWSSP in March 2019 and the original business case (prior to COVID) envisaged a number of services moving into the facility. Many of these have been achieved (Relocation of the Cwmbran Store and the HCS South East Regional Hub; Temporary Medicines Unit and the development of office space which is now being used by the Medical Examiner Service). Some planned developments have been either delayed	

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Item		Action
	or abandoned due to the impact of COVID (Theatre Kitting; WEQAs; Health Incubators and Baby Bundles). A number of services that were never envisaged prior to COVID have now been established in IP5 (Production of PPE Packs for Primary Care; Storage of Lateral Flow Test Kits; Storage of Renal Fluids and Pulse Oximeters; Medical Records Storage; establishment of the Temporary Medicines Unit; Picking of PPE and Diluent Packs for the Vaccination Programme and more recently the collation of support for India). Members were very appreciative of the presentation, and of the efforts of staff at the site, in supporting NHS Wales and the wider public sector over the last 12 months.	
	Presentation on Primary Care Services	
2.2	Andrew Evans, Director of Primary Care Services, provided a presentation on how NWSSP could better support the objectives of the Strategic Programme for Primary Care. Traditionally, NWSSP was largely a transaction-based service but recent months and years have seen the development of a number of expert services which provide greater opportunity for use of an approach of market segmentation to being greater internal integration, and more direct tailoring of offers to meet specific segment needs. Focusing on Cluster development, Andrew highlighted a number of recognised concerns including governance and IT issues, poor evaluation of performance, and a lack of support for development. Andrew saw a number of opportunities where NWSSP could assist further with Clusters, including governance and workforce support, data management and Shared Care Interface. NWSSP would be acting on behalf of Health Boards in helping to drive this agenda, rather than looking to replace them, and could utilise standard systems and processes to tailor solutions to local circumstances. Andrew saw the next steps as working with Primary Care Directors to better understand the problems and identify the opportunities where NWSSP could help. SSPC members were appreciative of the presentation and were particularly focused in ensuring that NWSSP made use of the data at its disposal to benefit the wider NHS community.	
3. Ite	ms for Approval/Endorsement	
3.1	Scheme of Delegation	
	Paul Veysey from Legal & Risk presented a paper to request changes to the Scheme of Delegation in respect of the Existing Liabilities Scheme. At present, delegated limits require a significant proportion of payments to be authorised by the NWSSP Managing	

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	Director, which leads to delays in his absence and is inconsistent with the limits in place for Managed Claims. The paper also covered a request to further extend the COVID expenditure limits for another three months to the end of September and to increase the ESR recharge limit from £750k to £1m. The SSPC ENDORSED these requests which will now be submitted to the Velindre Trust Board on 8 th June for formal approval.	
3.2	Legal & Risk Case Management System	
	Mark Harris, Director, Legal & Risk Services, presented a paper on the award of a contract to DXC Limited for the provision of the Case Management System. Implementation of this system will deliver a host of benefits for NHS Wales, including enabling more administrative tasks to be undertaken by junior staff, and thereby freeing up the time of senior lawyers, and also providing an easier route for Health Boards to access information on cases relevant to them. The SSPC NOTED the contract award.	
3.3	PPE Strategy	
	AB introduced this item which included the recent Audit Wales review into the procurement and delivery of PPE which concluded positively, and particularly when compared to the NAO report into the arrangements in England. The task now for NWSSP, working together with Welsh Government, is to deliver a longer-term strategy for PPE provision. The aim is to have the plan in place with effect from 1 September, and to meet that goal, the draft plan needs to be with Welsh Government by the end of June. The Committee NOTED the report.	
3.4	Oracle Finance and Procurement System Upgrade	
	AB provided a verbal update on progress with the new Oracle upgrade. It was noted that an update on the results of the User testing would be presented at a STRAD meeting later that day and a decision to progress with the update would be made once the results from the user testing had been reviewed.	
3.5	Annual Governance Statement	
	PS presented the final draft Annual Governance Statement which will be formally approved at the end of June Audit Committee. The statement is largely positive, reflecting the challenging year of working in a pandemic, and for which external and internal audit reports have demonstrated that systems and controls have largely	

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	Action	
been maintained, whilst measures implemented in direct response to the pandemic (e.g. PPE provision and site safety) have been successful. There were no limited or no assurance reports and only a very small number of control weaknesses identified, which had previously been reported to the Committee. There are still a few aspects of the statement which are still in draft. The Committee ENDORSED the statement for formal approval at the June Audit Committee.		
Service Level Agreements		
PS presented a paper on changes to the SLAs in place between NWSSP and health organisations across Wales for provision of services. The SLAs require formal annual review and approval by the SSPC and the main change to the documentation was the inclusion of Digital Health and Care Wales with effect from 1 April. The SSPC APPROVED the updated SLAs.		
Audit Committee Terms of Reference		
PS presented the Terms of Reference for approval. These have already been approved by the Audit Committee at its April meeting and there were no significant changes from the previous year. The Committee APPROVED the Terms of Reference.		
naging Director Update		
Managing Director's Report – the main issues noted were:		
• Engagement with the Foundational Economy One of the key priorities in this year is to build opportunities for strengthening our engagement with the foundational economy in supply chain and procurement. Our Procurement Strategy embraces the Wales First principles nurturing local supply chains and provides opportunities via competitive tendering to promote economic regeneration, by ensuring equal opportunities via local, regional, and national strategies on all contracts for goods and services. By		
	to the pandemic (e.g. PPE provision and site safety) have been successful. There were no limited or no assurance reports and only a very small number of control weaknesses identified, which had previously been reported to the Committee. There are still a few aspects of the statement which are still in draft. The Committee ENDORSED the statement for formal approval at the June Audit Committee. Service Level Agreements PS presented a paper on changes to the SLAs in place between NWSSP and health organisations across Wales for provision of services. The SLAs require formal annual review and approval by the SSPC and the main change to the documentation was the inclusion of Digital Health and Care Wales with effect from 1 April. The SSPC APPROVED the updated SLAs. Audit Committee Terms of Reference PS presented the Terms of Reference for approval. These have already been approved by the Audit Committee at its April meeting and there were no significant changes from the previous year. The Committee APPROVED the Terms of Reference. Managing Director's Report – the main issues noted were: • Engagement with the Foundational Economy One of the key priorities in this year is to build opportunities for strengthening our engagement with the foundational economy in supply chain and procurement. Our Procurement Strategy embraces the Wales First principles nurturing local supply chains and provides opportunities via competitive tendering to promote economic regeneration, by ensuring equal opportunities via local, regional, and national	

Item		Action
	level of NHS spend within the foundational economy by the use of far more local suppliers. • HCS – Electrification of Fleet - Our Health Courier Services Team recently took delivery of six fully electric vans that are the first in a number that have been ordered and which will be a key component in the implementation of our Decarbonisation Strategy. • Annual Plan - Positive feedback has been received following the submission of the Annual Plan to Welsh Government and we are currently awaiting official confirmation of its acceptance. • Quality and Safety Committee - Arrangements have now been finalised with Velindre regarding the establishment of the Quality and Safety Committee which enables us to discharge the (Partnership) Committee's resolution on this matter from last September. • TRAMS - We are in the process of appointing a Director of Pharmacy Technical Services to help manage the Transforming Access to Medicine Service. The appointment should be completed within the next few weeks and will enable the next phase of the business case to be developed. A revised Programme Board will also be established to drive forward both the OBC and FBC. We will be writing to key individuals and Peer Groups over the coming weeks to identify potential members. The role of the SRO is likely to be held jointly with Andrew Evans, Chief Pharmacist, Welsh Government. Further updates will be provided over the next few months.	Action
5. Fir	nance, Workforce, Programme and Governance Updates	
5.1	NF provided an update on the current position with the laundries. Three of the current five NHS laundries in Wales transferred over to NWSSP on 1 April 2021 as planned. Work is now on-going to improve the facilities and arrangements for each of these laundries, and to implement the operational SLAs that have previously been agreed at Committee. Further work is being undertaken with Cwm Taf Morgannwg UHB and Hywel Dda UHB to enable the two remaining laundries to be transferred later in the year.	
5.2	Project Management Office Update	
	The Committee reviewed and noted the programme and projects	

Item		Action
	monthly summary report, which highlighted the team's current progress and position on the schemes being managed.	
5.3	Finance & People Report	
	AB reported that the final position for 2020/21 was that all financial targets had been met and NWSSP achieved a small and planned surplus of £21K (after a £2m distribution to Health Boards and Trusts), subject to external audit. The Month 1 figures for 2021/22 are reporting a break-even position. The total expenditure for Welsh Risk Pool for 2020/21 was £123.8m and the Risk Share agreement was invoked at the IMTP value of £13.8m. Total provisions have increased by £3m to £1.137bn, but there could also be an ongoing challenge with the unknown potential for claims arising from COVID.	
	GH stated that sickness absence continues to be low across NWSSP, which is attributed at least in part to the large numbers of staff having the flexibility to work from home. The growth of the Single Lead Employer model is substantially impacting headcount with over 3,500 NWSSP employees now on the payroll, and numbers anticipated to continue to rise over the coming months. GE asked whether the People Dashboard should refer to progress with the Welsh Language Standards. GH agreed to incorporate this into future reports.	GН
5.4	Corporate Risk Register	
	PS stated that there remains one red risk on the register, relating to the replacement of the NHAIS system which is due to go live in the summer. A new risk has been added following a spate of attempted bank account mandate frauds in March, but procedures have been further strengthened to protect against this.	
5.5	Issues and Complaints 2020/21 Annual Report	
	PS presented the report highlighting a slight drop in the overall number of complaints and an improvement in response times.	
6. Iten	ns for Information	
6.1	The following items were provided for information:	
	Finance Monitoring Reports	

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Item		Action		
	Audit Committee Highlight Report.			
7. AI	NY OTHER BUSINESS			
7.1	There were no further items raised.			
DATE OF NEXT MEETING: Thursday, 22nd July 2021 from 10:00-13:00 Via Teams				



Item 1.5

ACTION LOG

SHARED SERVICES PARTNERSHIP COMMITTEE (SSPC)

UPDATE FOR 22 JULY 2021 MEETING

List	Minute Ref	Date	AGREED ACTION	LEAD	TIMESCALE	STATUS
No						JULY 2021
1.	2021/05/5.3	May 2021	People & OD Update	GH	July 2021	Complete
			Report to include performance with Welsh			Included in Report.
			Language.			



AGENDA ITEM:xx

22 July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

Foundation Economy Update

ARWEINYDD:	Jonathan Irvine, Director, Procurement Services
LEAD:	
AWDUR:	Claire Salisbury, Assistant Director, Procurement
AUTHOR:	Services
SWYDDOG ADRODD:	Jonathan Irvine, Director, Procurement Services
REPORTING	
OFFICER:	
MANYLION	Jonathan.irvine@wales.nhs.uk
CYSWLLT:	
CONTACT DETAILS:	

Pwrpas yr Adroddiad: Purpose of the Report:

The purpose of this report is to update the Committee on NWSSP's role in the delivery of the NHS Wales Executive Board Foundational Economy Programme.

Llywodraethu/Governance			
Amcanion: Objectives:	Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement		
Tystiolaeth: Supporting evidence:	N/a		

Ymgynghoriad/Consultation:

Welsh Government

Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$):					
DERBYN/	ARNODI/	TRAFOD/	NODI/		
APPROVE	ENDORSE	DISCUSS	NOTE		

Argymhelliad/ Recommendation

The Committee is asked to $\ensuremath{\text{NOTE}}$ the Foundation Economy Report.

Crynodeb Dadansoddiad Effaith:			
Summary Impact Ana	-		
Cydraddoldeb ac amrywiaeth:	No Direct Impact.		
Equality and diversity:			
Cyfreithiol: Legal:	No Direct Impact.		
Iechyd Poblogaeth: Population Health:	No Direct Impact.		
Ansawdd, Diogelwch a Profiad y Claf:	No Direct Impact.		
Quality, Safety & Patient Experience:			
Ariannol: Financial:	No Direct Impact.		
Risg a Aswiriant: Risk and Assurance:	No Direct Impact.		
Safonnau Iechyd a Gofal:	Access to the Standards can be obtained from the following link:		
Health & Care Standards:	http://www.wales.nhs.uk/sitesplus/documents/10 64/24729 Health%20Standards%20Framework 2		
	015 E1.pdf Governance, Leadership and Accountability		
Gweithlu:	No Direct Impact.		
Workforce:	F		
Deddf Rhyddid	This report is subject to the requirements of the		
Gwybodaeth/ Freedom of	Freedom of Information Act.		
Information			

NWSSP Project Proposal Foundational Economy

Exploration and Delivery

Introduction

NHS Wales Shared Services Partnership (NWSSP) has been tasked to scope and support delivery of NHS Wales Executive board Foundational Economy Programme, specifically in the following areas:

- goods and services required locally (including food, tourism, retail and care);
- the objective to retain and grow economic/business activity in Wales;
- the objective to retain and grow employment/employability in Wales;
- links to decarbonisation and local sourcing;
- links to premises regeneration, town centres and high streets.

Background

In the last quarter of 2021, a high level data analysis exercise was undertaken by Welsh Government/NWSSP utilising the AdviseInc platform, whereby two years of NHS purchase order spend data was reviewed in order to identify opportunities for Health to improve upon the amount of business it places with Welsh suppliers, and support foundational economy objectives outlined above.

The data presented some potentially significant opportunities for Health to work with certain sectors to improve the position, as well as engage and collaborate with other public sector bodies in addressing the needs of the foundational economy. Six areas are now identified as follows;

- Reserved contracting e.g. textiles, furniture, living aids
- Medical & Surgical Equipment
- 500 Welsh companies supplying NHS England but not Wales
- Non-clinical; Estates, Waste, Office Equipment, and Transport
- Provisions
- Commissioning and Third Sector

This information was presented by the Welsh Government (WG) Health Directorate to the Deputy Minister for Economy and Transport, WG Economy Directorate, Welsh Local Government Association (WGLA) and Industry Wales representatives in March 2021. The presentation was well received and collective support was given to provide financial support to Procurement Services in order to accelerate delivery.

NWSSP Resources Required

One full time permanent Band 8a – Leading role within NWSSP in Sustainable Development/Foundational Economy, developing Foundational Economy (FE) strategy, advising and supporting procurement teams to deliver and engaging and reporting both internally and externally at a senior level.

• One full time permanent Band 6 – Supporting the leading role.

Project Outline

The next project phase involves assessing the areas of opportunity in greater detail. This will involve several key tasks;

Workstream One	Workstream Two	Workstream Three		
Identify and report all current FE expenditure facilitated by NWSSP Procurement Services	Delivery of additional circa £8.4m of expenditure into the FE through contract renewal programme up to 31st October 2021	Identify additional FE		
Promoti	EIO CONTRACTOR OF THE PROPERTY			
Completed by 30 th June	Completed by 31st	Completed by 30th June		
2021	March 2022	2021		
Develop and implement	an All Wales Reporting Sy	stem to capture all current		
and	and future deliverables in this area			

Some examples of action which NWSSP will/are undertaking to support better FE outcomes in these six areas and throughout its contract portfolio include the following (where appropriate);

• Inclusion of 'Social Value' criteria within Procurements – this involves the proportionate scoring of FE benefits to be derived from contractors bid submissions to recognise their importance (e.g. the approach being deployed in current food procurements)

- Further inclusion of supply chain resilience/business continuity/sustainability criteria within Procurements – focus upon mitigation of supply disruption, shortening of supply chains and the environmental/social/economic impacts of supply
- Further lotting of procurements to support SMEs in bidding for opportunities
- NWSSP Legal & Risk Services support further engagement of NWSSP's Legal & Risk function to ensure that any risks around Procurement's approach to market are considered and mitigated
- Closer working relationship with WG Economy directorate sharing of supply base location, manufacturing/distribution capabilities to facilitate better understanding of market's short, medium and long term.

Workstream two - Areas of delivery:

Category	Total Contract Value (£)	Approximate value outside of Wales (£)
Building & Engineering Products & Services	25,644,326	8,719,071
Furniture Fittings	227,583	163,859
Office Equipment Telecoms Computers &		
Stationery	28,563,736	7,140,934
Provisions	35,322,751	21,193,651
Staff Clothing	6,314,797	5,051,838
	96,073,193	42,269,353
Assume 20% shift into Wales		8,453,871

Workstream three – Initial areas of investigation:

Category	Total Contract Value
Purchased Healthcare Total	5,092,944
Staff & Patient Consulting Services &	
Expenses Total	62,148,695
Transportation Total	4,644,526

Dependencies

NWSSP recognise that procurement is dependent upon the actions and support of all key stakeholders: -

- HB/Trust Finance/budget holders,
- WG economy colleagues,
- Industry Wales,

- PSBs,
- National Procurement Service,
- Welsh supply base/industries

It is also very important to recognise the regulatory framework in which public procurement operates and it will therefore be necessary to ensure that procurement opportunities identified and delivered are done so on accordance with all legal requirements.

Price will still be one of a number of criteria for determining the outcome of competitions and it is therefore vital that FE manufacturers/supplies and service providers are in a position to offer value for money goods and services.

Specific NWSSP resource requested above is essential if NWSSP are to deliver on the next phase of this project as outlined above. Without this, the project would otherwise be incorporated into current workloads, which would hamper its progress and risk its delivery.



AGENDA ITEM:xx

22 July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

Chair's Urgent Action - Student Award Service / Student Streamlining Modernisation Through Software Design

ARWEINYDD:	Darren Rees – Interim Director of Employment
LEAD:	Services
AWDUR: AUTHOR:	Bethan Rees – Project Manager, PMO
SWYDDOG ADRODD:	Margaret Foster – Chair
REPORTING	Andy Butler – Director of Finance & Corporate
OFFICER:	Services
MANYLION CYSWLLT: CONTACT DETAILS:	Darren Rees - Microsoft Teams

Pwrpas yr Adroddiad: Purpose of the Report:

Approval of Outline Business Case - Student Award Service / Student Streamlining Service Modernisation Through Software Design to Welsh Government

Llywodraethu/Governance				
Amcanion:	Excellence – to procure & implement a software solution			
Objectives:	that enables transformation of the Student Awards Bursary Service through investment of a new & modern IT solution.			
Tystiolaeth: Supporting evidence:	Outline Business Case – Medium Value and Risk			

Ymgynghoriad/Consultation:

OBC approved via SSPC's Chair Action on 21st June 2021
Presented to and ratified by NWSSP SLT on 27th May 2021
Stakeholder engagement and workshops to inform business case and procurement specification development
Approval required to submit Outline Business Case to Welsh Government

Adduned y Pwyllgor/Committee Resolution (insert √):							
DERBYN/ APPROVE		ARNODI/ ENDORSE	✓	TRAFOD/ DISCUSS		NODI/ NOTE	
Argymhelliad/ Recommendati	on	The Committee is asked to ENDORSE the Chair's Urgent Action provided on 21 June 2021.			ir's		

Crynodeb Dadansoddiad Effaith:			
Summary Impact Ana	_		
Cydraddoldeb ac amrywiaeth: Equality and diversity:	It is essential to provide a high quality service that complies with the Future Generations Act Wales and ensures equality and bi-lingual choice for all Bursary applicants.		
Cyfreithiol: Legal:	Adherence to the Bursary terms & conditions is an essential legal requirement for all stakeholders. Auditable payment and reconciliation compliance.		
Iechyd Poblogaeth: Population Health:	Access to education is a key element to improve the population's health.		
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	A key objective for the project is to improve the student & stakeholder journey for bursary healthcare applications. Incorporating streamlined recruitment for quicker deployment of healthcare graduates		
Ariannol: Financial:	A key objective is to provide a high quality service that is value for money and supports the transition and return on investment of healthcare graduates into employment and compliance with Bursary Terms to work in Wales.		
Risg a Aswiriant: Risk and Assurance:	Data security & end of support software is a risk to the organisation if new software is not procured & implemented. Procurement Regulations prevent further extensions of contract with current provider.		
Safonnau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link: http://www.wales.nhs.uk/sitesplus/documents/10 64/24729 Health%20Standards%20Framework 2 015 E1.pdf Governance, Leadership and Accountability		
Gweithlu: Workforce:	Implementation of new software would enable service transformation including the introduction of new processes & procedures within the service.		
Deddf Rhyddid Gwybodaeth/	Outline Business Case enables a single source of information accessible across stakeholders strengthening management of Service FoIs		

Freedom of Information

Student Award & Student Streamlining Service Modernisation Through Software Design

1. CEFNDIR/BACKGROUND

This paper has been previously approved outside of the SSPC meeting via a Chair's Action on 21st June 2021 in order to meet the Welsh Government Digital Strategy meeting held during July.

Situation

The Student Award Service infrastructure has been managed by NWSSP since 2015. Under the current contract arrangements there has been no opportunity for a whole-system and service modernisation due to digital limitations.

Executive Summary

The Student Awards Service manages the bursary scheme for healthcare graduates and processes on average 9600 student applications a year with a bursary value of £24.6m per annum. A commitment has been made by Welsh Government to continue with the bursary scheme, therefore the service is required until 2029 plus.

- The current software solution is based on Windows 2008 infrastructure and comprises of out of support software, therefore the system is currently running at risk.
- Extending the support contract for a further twelve months would contravene Procurement OJEU rules & regulations.
- Current system infrastructure does not offer value for money (annual cost £135K)
- Current hosting agreement with Swansea Bay UHB requires capital investment estimated at £5k which will provide system continuity for up to twelve months to 31st March 2022.
- Service is currently operating with multiple unsupported software running at risk that prevents modernisation, removal of manual processes, quality customer, stakeholder experience.
- Current system generates duplication of process across Employment Services Teams e.g. peaks in recruitment activity and duplication of ID checking.

To support the management of both the Bursary Awards and Student Streamlining Services, a robust digital solution is required that is secure, fit

for the future, compliant with Welsh Language regulations and allows further automation of the service. To proceed with this procurement tender, a capital investment of $\pounds 460k$ is required (amount to be confirmed at Procurement). Funding for this Outline Business Case is being sought from Welsh Government.

2. CRYNODEB/SUMMARY

Assessment

The current infrastructure for delivering this service is based on Windows 2008 and is made up of multiple solutions that are running at risk and no longer support the digital needs to deliver a quality service. In addition to that, the system is hosted by Swansea Bay UHB who are required to maintain compliance with NHS Wales IT Security Policy.

- The 2020/21 spend (excluding SAS staff costs) for the Student Awards Service is £135k per annum.
- The system support contract has been renewed beyond it's original term.
 - It is illegal to continue to extend / direct award under OJEU rules & regulations.
 - To continue to extend support contract does not comply with NWSSP's SFI's & any breaches are reported to Audit Committee.
 - There is a market available with several suppliers willing to enter into a contract with NWSSP.

There are several risks that compromise the security of this software:

- End of life infrastructure based on Windows 2008.
- System comprises of software that is three years past end of life & is now running at risk.
- Resources and effort required for managing the security of this software are considerable high.
 - There is no technical resource available to manage the day to day running of the current software within NWSSP.
- The Bursary software is not compatible with Microsoft 365.
- GDPR and Welsh Language Regulation implications.

Funding

The purpose of the paper is to seek approval for the submission of the Outline Business Case to Welsh Government in order to secure support for the funding investment. Based on initial supplier submissions this is estimated to be a capital requirement of up to £460k which will be confirmed through the Procurement tendering process.

Following a Supplier Demonstration Day held in June 2020, indicative prices were requested from four suppliers who attended the event. (see table below).

The prices below are based on a cloud solution with a contract duration of five years.

Supplier	Total Cost (4 years post implementation)	Capital	Annual Revenue Cost
Α	£972,000	£372,000	£150,000
В	£191,398	£55,559.60	£33,959.5
С	£563,696	£391,944	£42,938
D	£696,355	£458,760	£59,399

This procurement exercise was significantly impacted by 2020 COVID-19 pandemic and now presents a challenging delivery time of 31 March 2022. The initial scoping work undertaken with Stakeholders and exploring the market early 2020 provides a level of confidence on awarding a contract within this timescale.

The MS Dynamix option has been explored, but following Procurement advice, due to the tight timescales and requirement for delivery by 1^{st} April 2022 this has been viewed as unachievable within the timeframe available.

3. LLYWODRAETHU A RISG/ GOVERNANCE & RISK

Approval of the Outline Business Case is critical in order to deliver on Welsh Government policy and to provide a secure, high quality Student Awards Service for Wales. In addition to that, the implementation of a new software solution will enable the transformation of the service and an improvement to the student and stakeholder journey.

4. ARGYMHELLIAD/RECOMMENDATION

The table below summarises the list of options from the Outline Business Case. The business as usual & do minimum options incorporate an assumed price increase based on previous years.

The preferred option is to procure new software and indicative prices were requested following a supplier demonstration day held to test the marketplace in June 2020. A SaaS (software as a service) option can be considered during the procurement tender process.

Option	Cost of Programme Per Annum	Annual Saving	Net Book Value - BOSS Upgrade (31/03/22)	
Business As Usual – Renew contract with incumbent supplier.	£159,342	£0	£0	£0
Do minimum – Use software without supplier support	£225,542	£51,940	£0	£0
Recommended - Procure new software & implement service improvements with interface operability	(average excl	£135,256	(£43,548)	£600,000

Following an options appraisal, consideration of inter-dependencies and limitations e.g. OJEU, NWSSP recommend to proceed at pace to procure & implement a new software solution.

A new software solution will enable the service to:

- Provide efficient management of the NHS Wales Bursary to 2029+.
- Provide a single, secure, cloud based software solution that is compatible with Microsoft 365.
- Improve the student journey & service delivery.
 - Seamless process from student bursary via streamlining through to employment.
 - Reduce bursary application times.
 - Student dashboard.
- Increase automation of the process.
 - Eliminate bursary paper applications.
 - Automate evidence checks.
 - Automate bursary calculations.
- Enable the transition of students into employment and ongoing compliance of Bursary Terms during the 18month 2 year obligation period for working in Wales
- Reporting & performance management.
- Reduce spend on
 - o IT infrastructure.
 - o Resources.

- Scanning costs.
- Reduce downtime & associated costs.
- Benefit from software with interface operability.
 - o Generate Bursary payments from NWSSP.
- Monitor compliance with NHS Wales Bursary Scheme terms & conditions.
- Meet all compliance regulations:
 - NHS Wales Bursary terms and conditions
 - NHS Wales IT Security Policies.
 - o NIS2 Directive (April 2022).
 - Alignment with National Digital Architecture & National Digital Infrastructure Review.
 - Welsh Language Regulations.
 - o GDPR.

The benefits of implementing new software are:

Benefit	Saving	Benefit Timing	Benefit Type	Benefit Owner	Beneficiary
Hosting Agreement	£57,305	Immediate	Cash Releasing	Stephen Withers	NWSSP
Software Maintenance	£51,750	Immediate	Cash Releasing	Stephen Withers	NWSSP
1 WTE Band 3 – Scanning Duties	£25,789	An agreed point in time	Cash Releasing	Stephen Withers	NWSSP
Postal Spend	£2644	Immediate	Cash Releasing	Stephen Withers	NWSSP & Students
Scanning Licences	£518	Immediate	Cash Releasing	Stephen Withers	NWSSP
2 x Admin & Clerical Band 4 *	£59,307	An agreed point in time	Cash Releasing	Stephen Withers	NWSSP
Bursary Payment Income	£600,000	An agreed point in time	Cash Releasing	Stephen Withers	NWSSP
Total	£797,313				NWSSP

^{*} Subject to consultation process.

The transformation of the service would be reliant on the procurement of new Student Bursary Awards Software. This is required to improve the bursary application experience for Healthcare Students, provide the essential tools to efficiently manage the bursary applications in Wales and importantly to meet all regulatory compliance requirements, such as GDPR and Welsh Language Regulations.





AGENDA ITEM:3.2

22 July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

Managing Director's Report

ARWEINYDD:	Neil Frow - Managing Director
LEAD:	
AWDUR:	Peter Stephenson, Head of Finance &
AUTHOR:	Business Development
SWYDDOG ADRODD:	Neil Frow - Managing Director
REPORTING	
OFFICER:	
MANYLION	Neil.frow@wales.nhs.uk
CYSWLLT:	
CONTACT DETAILS:	

Pwrpas yr Adroddiad: Purpose of the Report:

To provide the Committee with an update on NWSSP activities and issues since the last meeting in May.

Llywodraethu/Governance		
Amcanion:	To ensure that NWSSP openly and transparently reports	
Objectives:	all issues and risks to the Committee.	
Tystiolaeth:	N/a	
Supporting		
evidence:		

Ymgynghoriad/Consultation:

Shared Services Partnership Committee

Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$):							
DERBYN/ APPROVE	ARNODI/ ENDORSE		TRAFOD/ DISCUSS		✓	NODI/ NOTE	√
Argymhelliad/ Recommendation	The Partners DISCUSS the	•		is	to	NOTE	and

Connedeb Dedenceddied Effeith:			
Crynodeb Dadansoddiad Effaith:			
Summary Impact Ana	_		
Cydraddoldeb ac	No direct impact.		
amrywiaeth:			
Equality and			
diversity:			
Cyfreithiol:	No direct impact.		
Legal:			
Iechyd Poblogaeth:	No direct impact.		
Population Health:	·		
Ansawdd, Diogelwch	No direct impact.		
a Profiad y Claf:	·		
Quality, Safety &			
Patient Experience:			
Ariannol:	No direct impact.		
Financial:	F 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
Risg a Aswiriant:	This report provides an assurance that NWSSP risks		
Risk and Assurance:	are being identified and managed effectively.		
Safonnau Iechyd a	Access to the Standards can be obtained from the		
Gofal:	following link:		
Health & Care	http://www.wales.nhs.uk/sitesplus/documents/10		
Standards:	64/24729 Health%20Standards%20Framework 2		
	015 E1.pdf.		
Gweithlu:	No direct impact.		
Workforce:	The an est impact.		
Deddf Rhyddid	Open		
Gwybodaeth/	Open		
Freedom of			
Information			

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Introduction

This paper provides an update into the key issues that have impacted upon, and the activities undertaken by, NWSSP, since the date of the last meeting in May.

Financial Position

We are forecasting a break-even position for the year. We have generated additional savings during the first quarter which will be utilised on investments within NWSSP including the major TRAMS and Laundry projects with any excess redistributed to NHS Wales and Welsh Government. Welsh Risk Pool expenditure at the end of M3 was £7.5m compared to £20m at the same point in 2020/21. This is due to the cohort of claims which settled in April, and which were accrued into the 2020/21 position. The latest forecast outturn identifies that £16.495m will be required to be funded through the risk sharing agreement which is in line with 2021/22 Annual Plan.

Green Health Wales Conference

NWSSP were represented at the Green Health Wales Conference launch on the 29th of June. Following the event, we now have a follow up meeting to see how we can work with them to take forward the Decarbonisation agenda, and especially in areas such as Procurement and Specialist Estates Services.

Audit Committee

The Audit Committee met on 29th June and received a number of internal audit reports and the Annual Head of Internal Audit Report and Opinion. The overall opinion was one of reasonable assurance and during the year no limited or no assurance reports were received. Whilst Audit Wales are still to formally report on their audit, they gave a verbal assurance that no significant matters had been noted in their work-to-date. The Local Counter Fraud service which is provided by Cardiff & Vale UHB has significant capacity concerns which have been exacerbated by the long-term COVID sickness absence of the designated LCFS. Constructive meetings have been held with the Health Board and other affected Directors of Finance to resolve this problem and going forward we will be looking to invest additional resources to increase the capacity in this area.

HCS – Risk of Driver Shortages

There has been a long-term EU-wide issue with HGV driver availability. Based on intelligence from the Department for Transport the UK was previously cited to have had around 50,000 too few drivers, although more recently the figure has been revised upwards to a shortage of anything up to 120,000. The key reasons for the shortage are a lack of training and disruption to tests over lockdown, and more notably significant numbers of

eastern European drivers leaving the UK, due either to the reform of the IR35 tax laws and/or BREXIT.

This is yet to have a significant impact on NWSSP, but it is noticeable that wage rates are beginning to rise. Some UK hauliers are offering a starting salary well in excess of the AFC Band 2 level which is the banding level for our HCS drivers so this may present future risks.

Laundry Services

the Welsh Government's endorsement of the Following Transformation Programme Business Case, the programme is progressing through the next stage of the business case process. Internal appointments have been made to strengthen the internal programme team and the procurement of the external Supply Chain Partner, Construction Project Manager, Cost Advisor, Planning Consultant, Business Case Writer and Laundry Specialist consultant has also progressed and will be awarded shortly. A number of available sites have been identified in North and South West Wales to potentially accommodate the new laundries although discussions with Welsh Government and Local Authorities about the use of these sites are delaying the process.

In regard to the existing laundries an internal Laundry Service lead responsible for operational delivery has been appointed. The management of the three laundries in Glan Clywd Hospital, Llansamlet and Llanfrechfa Grange (Green Vale) transferred to NWSSP together with the TUPE transfer of staff on the $1^{\rm st}$ April. The management responsibility for the other two laundries at Church Village and Glangwili Hospital is planned to transfer to NWSSP via service level agreements in October.

An initial Health and Safety assessment of the three laundries that have transferred over identified a large number of significant issues. These are now the subject of a prioritised action plan that is being reported to the monthly meeting of the NWSSP Senior Leadership Group.

The Laundry Transformation Programme is currently subject to a Gateway 0 (Strategic Assessment) Review with interviews of a wide range of stakeholders being undertaking during week commencing 12th July. A formal Gateway assessment will follow.

PPE

We are currently working through the next iteration of the PPE plan with Welsh Government colleagues. There is a particular focus on storage arrangements as we are currently having to utilise three external provider sites in addition to our own in-house storage facilities. Reducing the reliance on external providers through extending current in-house facilities will give more resilience to the supply chain, particularly in terms of drugs.

COVID-19 Inquiry

Planning for the COVID-19 Public Inquiry was the key focus of a workshop with the Senior Leadership Group and other senior NWSSP staff held earlier this month. The workshop was led by colleagues from Legal & Risk Services and included personal experience from the on-going Infected Blood Inquiry.

TMU

We are currently exploring options to increase the range of products that can be delivered through the Temporary Medicines Unit. These include Potassium Chloride 1mmol in 1mL which is due to come on-line in August, as is also Rituximab 600mg/700mg/800mg/1000mg Infusion. Calcium Folinate 350mg in 250mL Glucose 5% will come on-line this month and other medicines are under consideration for longer-term development. The team continue to look at options of developing the service to enable this resource to be used in new and innovative ways for example in particular looking at options to free up nursing time across NHS Wales and help to release beds through facilitating the earlier discharge of patients.

BREXIT

There is a separate agenda item relating to the BREXIT closure report. In summary we are maintaining BREXIT stocks at IP5, but these will now start to be run down. The team are maintaining a watching brief on the implications of the BREXIT deal and continue to feed into and participate in Welsh Government forums and groups.

JET Meeting

We have a Joint Executive Team meeting with Welsh Government on the 26th July.

Recruitment Processes

In December 2020, WODS approved a number of recommendations made by the Responsiveness Programme team, which was established to enhance the responsiveness of our Recruitment process. 'Responsiveness' meetings with Health Boards commenced in April and most have now taken place with the remaining scheduled over the next few weeks. Initial findings from the meetings held indicate a high-level of collaborative working between NWSSP Recruitment Division and Health Boards over the past 12 months, mirroring the previous year's pre-pandemic experience. Mention was made of the strategic role which NWSSP played in bringing innovation to recruitment processes and the agility to adapt processes to meet the challenges faced by Health Boards during this unprecedented time.

Some issues were raised around the Recruitment Management System (TRAC), but these largely stem from delays in approvals from the employer side of the process, which is understandable considering the extreme pressures the services were under. We will be working with Health Boards and Divisions on streamlined approval processes within TRAC during any future crisis management periods. One area which was identified as a problem was the COVID Hub particularly developed to manage "returners". Whilst this was set up with the best intentions, the general consensus was that this was a step to far and we should have kept within current systems which were adapted to meet the challenges faced by recruiting organisations during the pandemic. A full report will be produced once all meetings have been completed.

Pre-Employment Checks

The dispensation which allowed pre-employment checks to be undertaken remotely during the pandemic has been lifted by the Home Office meaning that these checks will now need to be undertaken face-to-face with effect from the 1st of September. Arrangements have been implemented to ensure that these checks can be undertaken in both a safe and efficient manner.

Transfer to 043 VPD

Work was recently undertaken to transfer all NWSSP employees from ESR database 120VPD (Velindre) to 043VPD which has previously been used for the All Wales Bank and Single Lead Employer arrangements. This change improves NWSSP's ability to independently report on staff-related information (e.g. Statutory and Mandatory Training, Sickness Absence etc.) without the significant manual input of bringing to data sources together.

This also provides a benefit to Velindre as it will be easier for them to report on the performance of their own staff. The transfer took place on 6 June and has largely been successful with no major issues reported. Staff have now been given access back to ESR and there are just a few minor reported issues, mostly connected to learning certifications, which are currently being addressed.

Senior Appointments

There is a separate update on the agenda regarding the recruitment for the replacement of the current SSPC Chair, where the extension to her term of office expires at the end of November 2021. We are also recruiting for a new Medical Director to replace Professor Malcolm Lewis who is due to retire in September.

Neil Frow, Managing Director, NWSSP, July 2021



AGENDA ITEM:xx

22 July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

BREXIT Closure Report.

ARWEINYDD:	Neil Frow, Managing Director
LEAD:	
AWDUR:	Mark Roscrow, National Programme Director
AUTHOR:	
SWYDDOG ADRODD:	Mark Roscrow, National Programme Director
REPORTING	,
OFFICER:	
MANYLION	Mark.roscrow@wales.nhs.uk
CYSWLLT:	
CONTACT DETAILS:	

Pwrpas yr Adroddiad: Purpose of the Report:

The purpose of this report is to provide the Committee with detail on the achievements and lessons learned from BREXIT.

Llywodraethu/Governance		
Amcanion: Objectives:	Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement	
Tystiolaeth: Supporting evidence:	N/a	

Ymgynghoriad/Consultation:

NWSSP Senior Leadership Group.

Welsh Government

Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$):			
DERBYN/	ARNODI/	TRAFOD/	NODI/
APPROVE	ENDORSE	DISCUSS	NOTE

Argymhelliad/ Recommendation

The Committee is asked to $\ensuremath{\mathbf{NOTE}}$ the BREXIT Closure Report.

Crynodeb Dadansoddiad Effaith:			
	Summary Impact Analysis:		
Cydraddoldeb ac amrywiaeth:	No Direct Impact.		
Equality and diversity:			
Cyfreithiol: Legal:	No Direct Impact.		
Iechyd Poblogaeth: Population Health:	No Direct Impact.		
Ansawdd, Diogelwch a Profiad y Claf:	No Direct Impact.		
Quality, Safety & Patient Experience:			
Ariannol: Financial:	No Direct Impact.		
Risg a Aswiriant: Risk and Assurance:	No Direct Impact.		
Safonnau Iechyd a Gofal:	Access to the Standards can be obtained from the following link:		
Health & Care Standards:	http://www.wales.nhs.uk/sitesplus/documents/10 64/24729 Health%20Standards%20Framework 2		
	015 E1.pdf Governance, Leadership and Accountability		
Gweithlu:	No Direct Impact.		
Workforce:	F		
Deddf Rhyddid	This report is subject to the requirements of the		
Gwybodaeth/ Freedom of	Freedom of Information Act.		
Information			

NWSSP PMO - Project Closure Document

Project Name: BREXIT STOCK BUILD / National Supply Distribution Response/Supply Disruption Support Centre

Project ID: N/A

Project Manager/ Leader: Alison Lewis/Ian Rose/Mark Roscrow

General Project Description:

- The objective was to prepare for EU Transition which included stock build of 8-10 weeks (8 weeks stock of Health and 2 weeks stock of Social Care lines) of essential Medical Devices and Clinical Consumables (MDCC) stock which is held in IP5 Newport Distribution Centre.
- Mobilisation of IP5 Newport Distribution Centre.
- As part of the National Supply Disruption Response (NSDR) process, was for each of the four countries in the United Kingdom to have its own Devolved Administration and established process.
- The NHS Wales Supply Disruption Support Centre (SDSC) was established to deal with MDCC supply disruption and co-ordination of the process once initial efforts of business as usual resolution routes had been unsuccessful.
- A fully operational helpdesk function which was appropriately resourced by Procurement staff to deal with supply issues of Medical Device and Clinical Consumables for NHS Wales as part of the EU Transition Preparations for a No Deal Scenario.
- Ability to link in with the National distribution arrangements i.e. Express Freight

There was no formal business case or project mandate.

Benefit Realisation:

Stock Build

- Stock of 8-10 weeks created contingency stock which could be supplied to NHS in the event shortages/delays were encountered.
- Non-Stock items were added for critical Medical Devices & Clinical Consumables
 Neonatal/Special Care Baby Unit/Renal.
- Allowed facilitation of closing Cwmbran store.
- Allowed foundation of the NDC Plan to be developed and facilitated.
- Supported the Covid-19 Pandemic enablement.
- Provided support and process to Social Care for agreed stock range.
- Enabled stock rotation due to monitoring of stock.
- Financial assurance maintained throughout.

National Supply Disruption Response (NSDR)

NHS Wales had to interface into the National Supply Disruption Response systems and processes with all the requisite escalation points up to Cobra.

Developed administration was put in place and delegated into the Supply Disruption Support Centre (SDSC).

The SDSC helpdesk function was to centralise supply disruption issues of Medical Devices and Clinical Consumables (MDCC) so that they were managed in a cohesive and centralised procurement process.

Further benefits were captured as follows:

- Health Board had an agreed process for escalating supply disruption issues into Frontline Procurement teams for MDCC
- Frontline Procurement teams had single point of contact to escalate supply disruption issues into SDSC
- Standardised investigation process for SDSC staff to follow into National Supply Disruption Response (NSDR)
- Standardised escalation process for SDSC staff to follow
- Robust process established to deal with supply disruption issues
- Centralised reporting in place to ensure all stakeholders were kept up to date
- Co-ordination of processes made best use of resources
- Ability to utilise National case management system to identify supply issues effecting the four countries and track progress of escalated issues
- Sharing of lessons learnt across the four countries into the NSDR

Lessons Learnt:

What went well?

Stock Build

- Governance Brexit Mobilisation Group established and met frequently (meeting weekly in early stage) with right stakeholders
- Links into the wider Welsh Governance structure Leadership/SRO group representation and agreed reporting mechanism
- Good analytics in place to assist with identifying stock range and agree to purchase
- Supplier risk RAG rating was of help support the high-risk items
- Able to utilise staff with required expertise and knowledge of NHS
- Storage & Warehouse capacity in IP5 already had suitable racking in place which allowed the Brexit stock build
- Costing/Financial were identified in regard to any anticipated costs and recorded, good engagement and communication in regard to expenditure needed to support the purchase of Brexit stock
- Pre-agreed Shipping arrangements put in place by NSDR
- Logistic arrangements in place in the event it was required
- The process for the Systems Interface was well understood and set up within tight timescales and large volumes of stock items – across 3 regional stores
- External support for system build (Version One) went well
- Use of experienced staff in house to manage the operation of the technical stock build requirements

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- The staff expertise and knowledge of Procurement staff to identify potential medical devices and clinical consumable product range
- The involvement and engagement by NWSSP Medical Director assisted with discussions and agreement for non-stock MDDC stock items later in the delivery of the stock build

NSDR

- Governance Brexit Mobilisation Group established and met frequently (meeting weekly in early stage) with right stakeholders
- Links into the wider Welsh Governance structure Leadership/SRO group representation and agreed reporting mechanism
- Links into the National Supply Disruption Response resources to ensure consistency and understanding of escalation points
- Brexit Group set up to make decisions and discuss issues/risks
- Good level of knowledge and understanding of roles and responsibility of the SDSC Team
- Three cycles of Scenario testing completed Operation Red Hammer (March 2019), Operation Athena (October 2019), Operation Artful (November 2020) and National testing (November 2020) undertaken to test the interactions and operational processes ensured that both the systems and processed worked well – action cards attached to the document as appendices.
- Testing allowed us to streamline processes following lessons learnt and feedback from Operational Red Hammer cycle 1, Operation Athena cycle 2 and final cycle 3 Operation Artful.
- Provided training of staff who were able to follow due processes
- Fully documented processes to include NSDR procedure, guidance, and process flows
- Centralised NSDR webpage used for all documentation to be published in one place
- Access to the national case management system to check supply disruption for all the UK and ability to monitor progress
- Availability of clinical specialists leads to respond to enquiries and provide input for alternative product suitability
- Ability to adapt to home working due to Covid-19
- Telephony system set up to adapt to home working/virtual helpdesk arrangements put in place (existing staff only)
- · Rota in place to manage resource
- Escalation level of resource mapped, and resources agreed to manage up to level 4 in the event this was needed
- eEnablement team brought in to support the set-up of systems for new staff members later on into the project (September 2020)
- Senior Management Support for guidance and engagement (Head of Procurement, Velindre and Aneurin Bevan)
- Webinar session held by Programme Director with Health Board and Procurement staff to ensure awareness of systems and processes, which was recorded and publicised on the NSDR webpage and customer internet page
- Interactive Training tools developed for additional staff (up to level 4) if required (never needed)
- Good communication and engagement throughout the networks
- Excellent relationship established with DHSC team as well as other home countries colleagues.

What could we have done better?

Stock Build

- Non-stock review/agreement to purchase additional stock of critical medical devices & clinical consumables were not at the level it could have been – with very little input or feedback from Health Board apart from some Speciality areas
- Limited Clinical engagement and assistance from Clinical Collaborative Group(s) to identifying or confirming possible non-stock MDCC range of items for the stock build
- Timescales for delivery for stock items to be ordered and delivered by the deadline of 31 March 2019
- Early financial arrangements regarding the cashflow for Velindre Finance
- Limited Welsh Government engagement in clinical decision making for clinical item range and clinical escalation
- Limited engagement from speciality networks i.e. Cardiac network in critical decision-making process
- Lack of ownership and taking responsibility of speciality areas on behalf NHS Wales
- Limited output of any value from the external consultants who were brought in provide spend analysis support

NSDR

- Project Manager took full ownership of the project into operations which could of benefited in contingency arrangements being put in place as reliant on the Project Manager/Single point of failure
- Clinical engagement and ownership of agreed processes where very late in being agreed – only once NWSSP Medical Director engagement commenced (November 2020) – refer to Appendices for Process
- Unable to test the clinical escalation model robustly previous testing cycles failed due to lack of understanding from clinical speciality leads (October 2019, November 2020) – refer to Appendices for Process
- Lack of understanding and ownership for decision making from Medical Directors and clinicians – refer to Appendices for Process
- National escalation process was unclear in the management of escalating into the various groups set up to manage MDCC Shortages (Shortage Response Group, Operational Response Centre, etc) – refer to Appendices for National NSDR Process
- Telephony system adaptability and consistency of implementation to staff due to varies locations/set up and ability to increase staffing levels due to license and setup restrictions
- Inconsistent IT support model resulting in numerous HB IT teams needing to support installation of phone software was unproductive (Non NWIS Supported sites)
- Reluctance of HB IT teams to agree for phone software to be installed as these were non supported (Cardiff, Cwm Taf)
- Health Board communication didn't reach all stakeholder levels during covid
- SDSC Staffing resource was inconsistent due to covid and staff changes/job roles
- Remote arrangements for the testing scenario worked well, however the preference was a physical presence in controlled environment

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Project Handover:

Recommendation, actions for residual tasks, risks and issues

Stock Build Residual Tasks

- Post Brexit stock position is unconfirmed (July 2021) due to border issues
- Stock management of Brexit stock i.e rotation to continue until Government Decision is made (January 2022)
- Cashflow position to be maintained for Brexit Stock Build
- To identify the potential volumes/timescales of stock range for contingency stock

Stock Build Open Risks

- Continued stock holding of Brexit stock impacts on ability to deliver other areas of IMTP
- 30% reduction of usage of BAU due to services not being used due to Covid
- Possible stock write off due to reduced clinical activity due to Covid and the time stock has now been held

Stock Build Open Issues

- Decision from Welsh Government on when able to realise Brexit Stock into supply chain
- Wider storage requirement
- UK review of stock holding (pandemic)

NSDR Residual Actions

- Decommission of Sharepoint site already completed in March 2021
- Sharepoint would need to be created/duplicated in the event the process was to be used (eEnablement)
- Decommission of NSDR helpdesk being transferred into HCS operations
- Would need specific business reliance helpdesk set up or include in the national solution for single point of contact telephone system
- Formal stand down communication of the SDSC Team to be issued by Programme Director
- Rota management stand down
- Equipment handover arrangements 4 x laptop, phones, screen to be repurposed
- Follow up and determine if this the developed NSDR process should be part of our wider business resilience process
- Provide training/staff awareness to staff for business resilience processes
 be part of annual refresh/mandatory training
- Confirm arrangements for maintaining laptop connectivity to NHS Network to ensure it is fit for use
- Welsh Government to consider issues from the wider clinical engagement difficulties

No open risks or issues.

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Quality & Acceptance Criteria Confirmation System and processes were accepted. Project Closure Date: 31 May 2021 Project Closure Signed Off By: Brexit Mobilisation Group Authorisation of Document: Mark Roscrow





The report is not Exempt

Teitl yr Adroddiad/Title of Report

Update on Recruitment Process of new Chair

ARWEINYDD:	Gareth Hardacre, Director of People, OD &	
LEAD:	Employment Services	
AWDUR:	Gareth Hardacre, Director of People, OD &	
AUTHOR:	Employment Services	
SWYDDOG ADRODD:	Gareth Hardacre, Director of People, OD &	
REPORTING	Employment Services	
OFFICER:		
MANYLION	Gareth.Hardacre2@wales.nhs.uk	
CYSWLLT:		
CONTACT DETAILS:		

Pwrpas yr Adroddiad: Purpose of the Report:

To update the Committee on the arrangements and progress in recruiting a Chair to replace Margaret Foster whose tenure comes to an end on the 30^{th} November 2021.

Llywodraethu/Governance		
Amcanion: Objectives:	Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement	
Tystiolaeth: Supporting evidence:		

Ymgynghoriad/Consultation:

Consultation has been undertaken with the Director of Legal & Risk Services, to ensure that the recruitment is compliant with our Standing Orders. We have also consulted with Director of Workforce in Welsh Government, and the Public Appointments Unit (PAU); as whilst this is not a Public Appointment the process has to take account of the appointment principles outlined in the "Governance Code on Public Appointments" which came into effect on 1st January 2017 and sets out the regulatory framework for public appointments.

Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$):							
DERBYN/ APPROVE	✓	ARNODI/ ENDORSE		TRAFOD/ DISCUSS	✓	NODI/ NOTE	√
Argymhelliad/ Recommendati	on	That the Committee notes the progress made in the recruitment process and approves the arrangements for the appointment to the new Chairs position.					

Crynodeb Dadansoddiad Effaith:		
Summary Impact Ana		
Cydraddoldeb ac	No direct impact.	
amrywiaeth:		
Equality and		
diversity:		
Cyfreithiol:	No direct impact.	
Legal:	·	
Iechyd Poblogaeth:	No direct impact.	
Population Health:		
Ansawdd, Diogelwch	No direct impact.	
a Profiad y Claf:		
Quality, Safety &		
Patient Experience:		
Ariannol:	No direct impact.	
Financial:		
Risg a Aswiriant:	No direct impact.	
Risk and Assurance:		
Safonnau Iechyd a	Access to the Standards can be obtained from the	
Gofal:	following link:	
Health & Care	http://www.wales.nhs.uk/sitesplus/documents/10	
Standards:	64/24729 Health%20Standards%20Framework 2	
	<u>015 E1.pdf</u>	
	Governance, Leadership and Accountability	
Gweithlu:	No direct impact.	
Workforce:	·	
Deddf Rhyddid	Open	
Gwybodaeth/		
Freedom of		
Information		

Update on Recruitment Process of new Chair

1. CEFNDIR/BACKGROUND

The Committee received and approved a report on the 21st of May 2020, which outlined the approval of an extension to the tenure of our Chair for a further year due to the Covid 19 Pandemic – to expire on the 30th November 2021.

This paper sets out the arrangements that have been put in place for the recruitment process, and the Committee are requested to agree the formal arrangements being put in place.

2. CRYNODEB/SUMMARY

A recruitment process has been initiated as outlined by the Managing Director during previous update reports. An advertisement has been placed on NHS Jobs and Wales Online to ensure that a full and open process takes place. The recruitment pack attached at Appendix A outlines all the arrangements relating to the post and recruitment. The PAU at Welsh Government have also shared the vacancy details with their database who have registered an interest in Chair / Independent Member posts.

It is planned to convene a Stakeholder panel at the first stage of the recruitment process that will include Senior staff from NWSSP, and available Committee members not part of the final interview panel. It is recommended that the panel is chaired by an existing Committee member. It is likely that this panel will be held virtually.

The Final Interview panel is recommended to consist of our existing Chair (as our Independent member appointment); the Vice Chair; our Director of People, OD & Employment Services; and a nominated member of the SSP Committee.

It should be noted that in consultation with the existing Chair and the Managing Director, the time commitment required of the Chair has been increased to 48 days per annum (4 days per month). This reflects the increased requirements to attend additional meetings within the remit of the role. This also brings the role in line with Independent Member appointments in Health Board, thus making the role more attractive to prospective candidates. It should be noted for transparency purposes that our existing Chairs remuneration has not changed from the existing arrangements of 30 days per annum.

3. LLYWODRAETHU A RISG/ GOVERNANCE & RISK

The arrangements for the recruitment process have been shared with our Director of Legal & Risk Services, to ensure that the recruitment is compliant with our Standing Orders.

4. ARGYMHELLIAD/RECOMMENDATION

The Committee are asked to **APPROVE** the arrangements laid out in the paper for the recruitment process of our new Chair.



NHS Wales Shared Services Partnership

Appointment of Chair

Information pack for applicants

Adding value through partnership, innovation and excellence

1/10 42/2



Chair - NHS Wales Shared Services Partnership Committee

Dear Candidate,

We are delighted that you are interested in this pivotal and exciting national leadership role within NHS Wales Shared Services Partnership.

This is an extremely exciting time for an inspirational Chair to join us – we have seen extensive growth in our services and excellence in the quality of our delivery throughout the most challenging time in our history, but we don't want to stop here....we recognise we can do more, more to support our Health Board colleagues, to support the communities we serve, to make a difference to the people of Wales, in essence to add value. And we want to add this value through partnership and innovation and at scale and pace. We therefore look for a Chair who will lead us in our journey, working with Stakeholders across the sector and beyond, to pave the way for the delivery of exciting and meaningful developments across Wales.

Of paramount importance to us are our relationships. Our relationships with the public, national and international cross-sector partners, policymakers, and cross Government ministers. Consequently, a fundamental requirement to be successful in the role is to have the fine-tuned behaviours, interpersonal and influencing skills to create and maintain these mutual synergies and collaborative partnerships in order to galvanise collective action and enable the achievement of a healthy and sustainable Wales.

You will be joining an innovative, open, and ambitious organisation with 3,500 of the most amazing and talented people across all of our functions and our values of Listening and Learning, Innovating, Working Together and Taking Responsibility, are extremely important to us. With such a fertile and enabling environment, we believe that if any country can transform the health of its nation at pace – it is Wales. This is an extremely exciting time for an exceptional strategic leader to come and help us change a nation.

If you are interested in contributing to the leadership of this exciting organisation, working with us to continue embedding our innovative approaches in support of the improvement population health across all sectors, then please feel free to contact us to explore the opportunity further.

Further information about us is provided in the attached pack.

With kind regards

Neil Frow *Managing Director*

Gareth Hardacre *Director of People, Organise*

Director of People, Organisational Development and Employment

Background and context

NWSSP is an independent mutual organisation, owned and directed by NHS Wales. It was set up on 1 April 2011 to provide a range of high quality, customer-focused professional, technical, and administrative services on behalf of all Health Boards and Trusts in NHS Wales.

Adding Value through Partnership, Innovation and Excellence - NWSSP delivers a wide range of high quality, professional, technical, and administrative services to NHS Wales working with wider public services, including the Welsh Government. We are an integral part of the NHS Wales family; supporting the staff and patients of Health Boards, Trusts and Special Health Authorities in Wales. We also provide a range of services to the GP practices, dentists, opticians, and community pharmacies.

As a hosted organisation NWSSP operates under the legal framework of Velindre NHS Trust. The Managing Director is accountable to health boards and trusts through the Shared Services Partnership Committee (SSPC), which is comprised of representatives from each of the NHS organisations that use our services and from Welsh Government. We also have several sub-committees and advisory groups, which include members drawn from our partners, stakeholders, and service users.

Our services

The following is a list of our current portfolio of services:

- Audit and Assurance
- Accounts Payable
- Counter Fraud Wales
- Central E-Business Team
- Digital Workforce Solutions
- Employment Services
- E-Enablement
- Finance Academy (hosted)
- Health Courier Services
- Legal and Risk
- Laundry Services

- Lead Employer Medical, Dental and Pharmacy trainees (including GPs)
- Medical Examiner
- Primary Care Contractor Services
- Procurement and Stores
- Specialist Estates
- Surgical Materials Testing Laboratory
- Salary Sacrifice
- Welsh Risk Pool
- Welsh Infected Blood Supply

We are also supporting the post Brexit supply network from our distribution centre at IP5 in Newport, which also hosts the Temporary Medicine Unit that we have built to support our NHS Wales Covid-19 response. We are supplying pre-prepared syringes manufactured in an MRHA-approved clean room environment to health boards across Wales, which is just one of the main areas where we have been supporting NHS Wales Covid-19 efforts and also extended support to Primary Care and Social Care sectors.

We have also received approval from the Minister for Health for our exciting Trams project (which will see us produce medicines in a controlled environment to supply NHS Wales with medicines from a regional hub-based model), and Scan for Safety

project to accelerate innovation and traceability across NHS Wales. These are two significant investments in our services to deliver on a 'Once for Wales' agenda, building on the back of the existing services that we already provide.

Our committee

The committee (SSPC) is responsible for exercising NHS Wales Shared Service Partnership functions in relation to shared services, including the setting of policy and strategy and the management and provision of shared services to Local Health Boards, National Health Service Trusts and Special Health Authorities.

The purpose of the SSPC is to:

- Set the policy and strategy for NWSSP;
- Monitor the delivery of Shared Services, through the Managing Director of NWSSP;
- Seek to improve the approach to delivering Shared Services, which are effective, efficient and provide value for money for Partners;
- Ensure the efficient and effective leadership direction and control of NWSSP; and
- Ensure a strong focus on delivering savings that can be re-invested in direct patient care.

The role of the SSPC is to:

- Take into account NHS Wales organisations' plans and objectives when considering the strategy of NWSSP;
- Encourage and support the aims and objectives of NWSSP;
- Identify synergies between each of the Shared Services and ensure that future strategies incorporate synergistic opportunities;
- Foster and encourage partnership working between all key stakeholders and staff;
- Oversee the identification and sharing of financial benefits to NHS Wales' organisations on a fair basis that minimises administrative costs and financial transactional arrangements;
- Seek to identify potential opportunities for further collaboration across the wider public sector;
- Consider implications for Shared Services in relation to any reviews / reports undertaken by internal auditors, external auditors, and regulators, including Healthcare Inspectorate Wales; and
- Seek assurance, through the Managing Director of NWSSP, on the adequacy and robustness of systems, processes, procedures and risk management, staffing issues and that risks and benefits are shared on an equitable basis in relation to Shared Services.

The responsibilities of the SSPC are to:

- Produce an Integrated Medium-Term Plan, including the balanced Medium-Term
 Financial Plan for agreement by the Committee, following the publication of the
 individual Health Board, Trust and Special Health Authority Integrated Medium-Term
 Plans;
- Agree, on an annual basis, Service Improvement Plans (prepared by the Managing Director of NWSSP) for the delivery by services;
- Be accountable for the development and agreement of policies and strategies in relation to Shared Services and for monitoring the performance and delivery of agreed targets for Shared Services through the Managing Director of NWSSP;
- Take the lead in overseeing the effective and efficient use of the resources of Shared Services;
- Benchmark the performance of Shared Services against the best in class;
- Consider extended-scope opportunities for Shared Services;
- Monitor compliance of best practice within Shared Services with NHS Wales recommended best practice;
- Oversee the identification and delivery of "invest to save" opportunities;
- Explore future Shared Services organisational delivery models across the NHS and the broader public sector; and
- Embed NWSSP's strategic objectives and priorities through the conduct of its business and in so doing, and transacting its business shall ensure that adequate consideration has been given to the sustainable development principle and in meeting the requirements of the Well-Being of Future Generations (Wales) Act 2015, the Welsh Government Guidance on Ethical Procurement and the Code of Practice on Ethical Employment in Supply Chains.

The SSPC must ensure that all its activities are in exercise of these functions or any other functions that may be conferred on it. Each Health Board, Trust and Special Health Authority, shall be bound by the decisions of the SSPC in the exercise of its roles. In the event that the SSPC is unable to reach unanimous agreement in relation to the funding levels to be provided by each Health Board, Trust and Special Health Authority, then this matter shall be escalated to the Welsh Government for resolution ultimately by Welsh Ministers.

To fulfil its functions, the SSPC shall lead and scrutinise the operations, functions and decision making of the NWSSP Senior Management Team (SMT) undertaken at the direction of the SSPC.

The SSPC shall work with all its Partners and stakeholders in the best interests of its population across Wales.

The Chair – role description

The Chair of the SSPC must act in a balanced manner, ensuring that any opinion expressed is impartial and based upon the best interests of the health service across Wales.

The Chair is responsible for the effective operation of the SSPC:

- Chairing SSPC meetings;
- Establishing and ensuring adherence to the standards of good governance set for the NHS in Wales, ensuring that all SSPC business is conducted in accordance with these SSPC Standing Orders; and
- Developing positive and professional relationships amongst the SSPC's membership and between the SSPC and each Health Board, Trust and Special Health Authority's Board.

The Chair shall work in close harmony with the Chief Executives of each of the Health Boards, Trusts and Special Health Authorities (or their nominated representatives) and, supported by the Head of Finance and Business Improvement, shall ensure that key and appropriate issues are discussed by the SSPC in a timely manner with all the necessary information and advice being made available to members to inform the debate and ultimate resolutions.

The Chair is accountable to the SSPC in relation to the delivery of the functions exercised by the SSPC on its behalf and, through Velindre's Chair, as the hosting organisation, for the conduct of business in accordance with the defined governance and operating framework.

Person Specification

The Chair will demonstrate the following qualities:

Knowledge and experience

- Experience of leading and developing a successful private, public or third sector organisation at a senior level, with the ability to look ahead and provide strategic leadership;
- A proven track record in building highly effective relationships with a range of stakeholders; and
- Knowledge and understanding of the health service, specialist service provision and/or come from a clinical background.

Personal attributes and skills

- Strong interpersonal, influencing and negotiating skills;
- An effective advocate and ambassador for better health outcomes through partnership, innovation, and service excellence;
- Credible with an ability to make an impact;
- Drive and determination, with the ability to instil vision and develop defined strategies to pursue long and short-term goals;
- Excellent communication skills, with the ability to be clear and succinct and to facilitate understanding of complex issues while demonstrating respect for the views of others;
- Sound judgement, sensitivity and political awareness; and
- Capacity to be independent and resilient.

Candidates must also demonstrate:

- A clear understanding and commitment to equality issues and challenging discriminatory practices; and
- A clear understanding and commitment to Nolan's 'Seven Principles of Public Life'.

Welsh language skills are desirable. All candidates will be expected to display empathy towards the language and demonstrate leadership to strengthen bilingual service provision within the NHS in Wales.

Candidates shortlisted for interview will be required to expand on how they meet the criteria above using examples and evidence.

Term of appointment

The appointment will be made by the Shared Services Partnership Committee.

Duration of appointment

The Chair may be appointed for a period of no longer than four (4) years, and the Chair may stand for a maximum of eight (8) years.

Location of appointment

Whilst the post is based at our head office in Nantgarw, there is significant flexibility around remote working arrangements. IT facilities will be provided to support working from home.

Eligibility

A person shall be disqualified from appointment if he/she:

- Has within the preceding five years been convicted in the UK, Channel Islands
 or the Isle of Man of any offence and has received a sentence of imprisonment
 (whether suspended or not) for a period of not less than three months without the
 option of a fine;
- Is the subject of a bankruptcy restrictions order or an interim order or has made a composition or arrangement with creditors;
- Has been dismissed, other than by reason of redundancy, from paid employment with a health service body; or
- Has had his/her membership as chair, member or director of a health service body terminated, other than by reason of redundancy, voluntary resignation, reorganisation of the health service body, or expiry of the period of office for which that person was appointed.

Any other information that may materially affect your application for appointment should be declared in the application form under the 'Conflict of Interests' section.

Applicants should be persons who conduct themselves at all times in a manner which will maintain public confidence.

Applicants are required to declare whether they are aware of anything in their private or professional life that would be an embarrassment to themselves or to the Welsh Government if it became known in the event of appointment.

Time commitment

The post of Chair is based on a time commitment of four days per month and 48 days per annum. This may be the subject of review.

Remuneration

The Chair is entitled to receive a taxable remuneration of £15,840 per annum.

Expenses

You will be entitled to be reimbursed, if appropriate, against receipts for travel and subsistence expenses incurred while on Committee business.

Childcare and other dependent expenses may also be paid, on production of receipts, for additional costs incurred while undertaking Committee work.

Assistance for disabled members

Where appropriate all reasonable adjustments will be made to enable members to effectively carry out their duties.

NWSSP accepts the social definition of disability, in which it is recognised that barriers in society act to disable people who have impairments or health conditions or who use British Sign Language. We are committed to removing barriers so that all staff can perform at their best. The Equality Act 2010 uses the medical definition of disability ("a physical or mental impairment which has a substantial and long-term impact on a person's ability to carry out normal day to day activities").

We guarantee to interview anyone who is disabled whose application meets the minimum criteria for the post. By 'minimum criteria' we mean that you must provide us with evidence in your application which demonstrates that you generally meet the level of competence for the role and any qualifications, skills or experience defined as essential.

We are committed to the employment and career development of disabled people. If you would like a guaranteed interview, please contact Gareth Hardacre by email or by phone 01443 864000 to let them know.

If you have an impairment or health condition, or use British Sign Language and need to discuss reasonable adjustments for any part of this recruitment process, please contact Gareth Hardacre as above as soon as possible and a member of the team will contact you to discuss your requirements and any questions you may have.

Selection process

Although appointments to the NWSSP do not come within the remit of the Commissioner for Public Appointments these appointments are made using a process which takes into account the Commissioner's Code of Practice on Ministerial Appointments to Public Bodies as best practice.

It is the policy of the Welsh Government to promote and integrate equality of opportunity into all aspects of its business including appointments to public bodies. Applications are welcomed and encouraged from all groups and we ensure that no eligible candidate for public office receives less favourable treatment on the grounds of age, disability, gender, marital status, sexual orientation, gender reassignment, race, religion or belief, or pregnancy and maternity. The principles of fair and open competition will apply and appointments will be made on merit.

Interview process

There will be a two-stage recruitment process including a presentation with a stakeholder panel followed by a formal panel interview. These processes will take place on separate days and depending on circumstances may be conducted virtually.

Start date

1 October 2021

Further information and queries

For further information on the application process and to apply, <u>click here</u>.

Specific queries can be directed to Gareth Hardacre, Director of People, Organisational Development and Employment Services: gareth.hardacre2@wales.nhs.uk.

Application

Applications should be made by completing the online application form.

Closing date

The closing date for applications is 26 July 2021. Application forms received after this date will not be considered.



AGENDA ITEM:xx

xx July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

Salary Sacrifice - Fleet Solutions - CO2 Emissions

ARWEINYDD:	Andy Butler – Director of Finance and Corporate
LEAD:	Services
AWDUR:	Russell Ward – Head of Accounts Payable,
AUTHOR:	eEnablement & Salary Sacrifice
SWYDDOG ADRODD:	Russell Ward – Head of Accounts Payable,
REPORTING OFFICER:	eEnablement & Salary Sacrifice
MANYLION CYSWLLT:	Russell.ward@wales.nhs.uk
CONTACT DETAILS:	

Pwrpas yr Adroddiad:

Purpose of the Report:

To seek approval to reduce the Co2 emissions for all NHS Car Fleets in order that by 2030 we are net zero

Llywodraethu/C	Governance
Amcanion: Objectives:	Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement
Tystiolaeth: Supporting evidence:	Regular reporting will be undertaken via the Director's of Finance to evidence the progress being made in reducing Co2 emissions

Ymgynghoriad/Consultation:

This has been via the Energy Saving Trust

Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$):							
DERBYN/ APPROVE	√	ARNODI/ ENDORSE		TRAFOD/ DISCUSS		NODI/ NOTE	✓
Argymhelliad/ Recommendation	n	The Committee are asked to APPROVE the reduction in Co2 emissions as set out in the paper					

Partnership Committee July 2021

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The Committee are asked to Note that staff will be able to adjust the forecast vehicle mileage
The Committee are asked to Note the 12-month delay in procuring a salary sacrifice/employee benefit Portal

Crynodeb Dadansoddiad Effaith:			
Summary Impact Analys			
Cydraddoldeb ac	No impact		
amrywiaeth:			
Equality and diversity:			
Cyfreithiol:	No impact		
Legal:			
lechyd Poblogaeth:	A decarbonisation reduction will have a positive		
Population Health:	impact on the health of the population		
Ansawdd, Diogelwch a	A decarbonisation reduction will have a positive		
Profiad y Claf:	impact on the health of the population		
Quality, Safety &			
Patient Experience:			
Ariannol:	No impact		
Financial:	·		
Risg a Aswiriant:	Risk – NHS Wales fails to meet the WG		
Risk and Assurance:	decarbonisation targets		
Safonnau lechyd a	No impact		
Gofal:			
Health & Care			
Standards:			
Gweithlu:	No impact		
Workforce:			
Deddf Rhyddid	Open. The information is disclosable under the FOI		
Gwybodaeth/	and will be subject to GDPR and Health Board data		
Freedom of	protection and data security protocols.		
Information			

Salary Sacrifice - Fleet Solutions - CO2 Emissions

1. CEFNDIR/BACKGROUND

In March 2021, the Health Minister Vaughan Gething published ambitious decarbonisation plans for NHS Wales in order to tackle climate change.

This is as a consequence of Welsh Government declaring in 2019 a climate emergency to trigger more action to meet the climate change challenge and became the first Government in the world to declare such an emergency. As part of this, they

re-enforced ambitions for Wales' public sector to be reach 'net zero' for carbon emissions by 2030.

The link to the Decarbonisation Plan for your reference is: https://gov.wales/nhs-wales-ambitious-decarbonisation-plans-published

In June 2021, the Energy Saving Trust met with NWSSP to explore ways at reducing Co2 emissions in order that by 2025 the Co2 Emission limit target is down to 50g/km.

2. CRYNODEB/SUMMARY

The current Co2 Emissions across NHS Wales Salary Sacrifice Fleet for diesel / petrol cars are set at 120g/km and in order to meet the WG target, we are expected to reduce this figure to 50g/km by 2025. The 120g/km were set in 2018.

In order to achieve this reduction in Co2 emissions, the following is proposed:

- Introduce a 100g/km Co2 Emission limit from 1 October 2021 for diesel/ petrol cars (not Hybrid cars)
- Reduce this by a further 20g/km in April 2022 taking the upper limit to 80 g/km
- Reduce this by a further 20g/km in April 2023 taking the upper limit to 60g/km (this would bring us in line with the 50g/km expectation well before 2025)

These reductions in Co2 emissions can only be achieved by preventing the procurement of Petrol and Diesel cars and encouraging staff to move to Electric and Hybrid vehicles.

The table below details the current Co2 emissions for the on the road fleet of the five largest organisations administered by NWSSP, using our strategic partner NHS Fleet Solutions.

Organisation	% OTR fleet with zero g/km emissions	% OTR fleet with over 100 g/km emissions
AB	43.6%	36.3%
C&V	38.6%	42.8%
CTM	35.5%	43.5%
SB	41.0%	40.2%
WAST	63.8%	15.4%

The percentages above for zero emissions provide a good base to work from.

We have seen substantial growth in the scheme and as at the 18th June there are now 2,087 vehicles, representing a 51% increase over the last 12-months.

In addition, NHS Fleet Solutions have offered NHS Wales the option of allowing staff as a consequence of the pandemic, to amend their forecast mileage which will result in a lower cost for staff. NWSSP have agreed to take up this option and over the coming months all staff will be contacted to see if they wish to amend their forecast mileage which will represent a saving to staff.

Also, NWSSP have been investigating the feasibility of having an NHS Wales Salary Sacrifice/Employee Benefit Portal. However, due to a high number of locally agreed arrangements with different termination dates and continued uncertainty that implementing a Portal will deliver value for money for NHS Wales, due to the maturity of NHS Wales existing salary sacrifice arrangements, in particular our salary sacrifice fleet arrangements, it has been decided to delay this for a period of 12-months, in order that further investigations can be made.

3. ARGYMHELLIAD/RECOMMENDATION

The Committee are asked to **APPROVE** the proposed reduction in CO2 emissions for diesel / petrol vehicles across NHS Wales via the Salary Sacrifice arrangements as set out in this paper

The Committee are asked to **NOTE** that employees will be able to adjust their forecast mileage if the employee believes the forecast mileage agreed when the vehicle was ordered is substantially different

The Committee are asked to **NOTE** the 12-month delay in procuring a salary sacrifice/employee benefit portal



AGENDA ITEM:xx

22 July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

Priority Supplier Programme – Gain Share amendment

ARWEINYDD:	Andy Butler – Director of Finance and Corporate
LEAD:	Services
AWDUR:	Russell Ward – Head of Accounts Payable,
AUTHOR:	eEnablement & Salary Sacrifice
SWYDDOG ADRODD:	Russell Ward – Head of Accounts Payable,
REPORTING OFFICER:	eEnablement & Salary Sacrifice
MANYLION CYSWLLT:	Russell.ward@wales.nhs.uk
CONTACT DETAILS:	

Pwrpas yr Adroddiad:

Purpose of the Report:

To seek approval to amend the gain share arrangements with Oxygen Finance Limited

Llywodraethu/0	Governance
Amcanion: Objectives:	Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement
Tystiolaeth: Supporting evidence:	Oxygen Finance Limited provide monthly reports to the Head of Accounts Payable, eEnablement and Salary Sacrifice and a summarised report is also then distributed to Directors of Finance.

Ymgynghoriad/Consultation:

This has been via the Priority Supplier Steering Group

Adduned y Pwyllgor/Committee Resolution (insert √):				
DERBYN/	ARNODI/	TRAFOD/	NODI/	✓
APPROVE	ENDORSE	DISCUSS	NOTE	

Argymhelliad/	The Committee are asked to NOTE the adjustment to
Recommendation	the Gain Share Model

Crynodeb Dadansoddiad Effaith:		
Summary Impact Analysis:		
Cydraddoldeb ac	No impact	
amrywiaeth:		
Equality and diversity:		
Cyfreithiol:	No impact	
Legal:		
lechyd Poblogaeth:	100% of the rebate income is channelled back to	
Population Health:	Health Organisations, for Health Organisations to use	
·	as they decide	
Ansawdd, Diogelwch a	100% of the rebate income is channelled back to	
Profiad y Claf:	Health Organisations, for Health Organisations to use	
Quality, Safety &	as they decide	
Patient Experience:		
Ariannol:	The forecast rebate income for NHS Wales has been	
Financial:	set at £500k for financial year 2021/22. As a	
	consequence of the adjustment to the Gain Share	
	Model and the removal of certain areas from the	
	scope, the forecast rebate is likely to be closer to	
	£400k, with the remaining years of the contract also	
	being reduced	
Risg a Aswiriant:	Assurance is provided by the Priority Supplier Steering	
Risk and Assurance:	Group and the only risk identified is financial, in having	
Mon and 7 toodianoo.	a lower than anticipated rebate income	
Safonnau lechyd a	No impact	
Gofal:	The impact	
Health & Care		
Standards:		
otanianas.		
Gweithlu:	No impact	
Workforce:	•	
Deddf Rhyddid	Open. The information is disclosable under the FOI	
Gwybodaeth/	and will be subject to GDPR and Health Board data	
Freedom of	protection and data security protocols.	
Information	•	

Priority Supplier Programme – Gain Share amendment

1. CEFNDIR/BACKGROUND

In August 2017 NWSSP on behalf of NHS Wales signed a contract with Oxygen Finance Limited to implement their Early Payment Programme, which has been named as the Priority Supplier Programme.

The contract with Oxygen Finance Limited runs until March 2024 and operates on a Gain/Share Model. The Programme seeks to pay supplier invoices of onboarded suppliers by day 10 in return for a small rebate, typically 1%. NHS Wales share of the Gain/Share Model being 72.7% of the rebate monies with Oxygen Finance receiving 27.3%

When the contract was awarded, all areas of spend were included and this is what determined the Gain/Share percentages.

2. CRYNODEB/SUMMARY

The Programme has been successful in that since the contract was awarded, Health Organisations have benefited by receiving almost £890k of rebate money.

In the original finance model our rebate income for 2021/22 was forecast as being £1.2 million but this was dependant on all spends areas being in scope.

However, following reviews both internally and externally, it has recently been determined by NHS Wales that two areas of spend, namely Care and Construction are both being excluded from the Priority Supplier Programme.

Oxygen have invested heavily in the programme since its inception however and the lower coverage means that their return is much lower than was originally anticipated.

As a consequence of our decision to remove of these two commodity areas, we have revisited the Gain/Share Model with Oxygen Finance and propose to operate a 60/40 Gain/Share effective from the 1st August 2021.

3. ARGYMHELLIAD/RECOMMENDATION

The Committee are asked to **APPROVE** the proposed amendment to the Gain/Share model that will become operational on the 1st August 2021.



AGENDA ITEM:xx 22 July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

SBAR- Church Village Laundry Transfer

ARWEINYDD:	Neil Frow, Managing Director	
LEAD:		
AWDUR:	Lee Wyatt, Programme Director, Key Strategic	
AUTHOR:	Projects	
SWYDDOG ADRODD:	Neil Frow, Managing Director	
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CYSWLLT:		
CONTACT DETAILS:		

Pwrpas yr Adroddiad: Purpose of the Report:

To inform the Committee of the guiding principles and critical success factors against which the agreed transfer of the All Wales Laundry Service will be completed, and to gain their endorsement for the transfer.

Llywodraethu/Governance			
Amcanion: Objectives:	To develop a service model that is fit for purpose, complies with modern standards, provides a sustainable and resilient laundry service, and represents an operational model delivering best value for money for NHS Wales.		
Tystiolaeth: Supporting evidence:	New Standard BS EN 14065		

Ymgynghoriad/Consultation:

Completed between Feb - Jul 2020

Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$):						
DERBYN/ APPROVE	ARNODI/ ENDORSE	√	TRAFOD/ DISCUSS		NODI/ NOTE	√

Partnership Committee

1/12 59/292

Argymhelliad/ Recommendation

The Committee is asked to **NOTE** the paper and **ENDORSE** the transfer.

Crynodeb Dadansoddiad Effaith:			
Summary Impact Ana	lysis:		
Cydraddoldeb ac	Equality and Diversity issues have been fully		
amrywiaeth:	considered as part of the transfer process.		
Equality and			
diversity:			
Cyfreithiol:	Legal advice has been sought where required as		
Legal:	part of the transfer process.		
Iechyd Poblogaeth:	No direct impact.		
Population Health:	·		
Ansawdd, Diogelwch	The transfer of the laundries to NWSSP and the		
a Profiad y Claf:	subsequent investment in them should provide		
Quality, Safety &	improved quality and safety and a better patient		
Patient Experience:	experience.		
Ariannol:	The financial implications of the transfer have been		
Financial:	fully considered.		
Risg a Aswiriant:	The risks associated with the transfer have been		
Risk and Assurance:	fully considered.		
Safonnau Iechyd a	Access to the Standards can be obtained from the		
Gofal:	following link:		
Health & Care	http://www.wales.nhs.uk/sitesplus/documents/10		
Standards:	64/24729 Health%20Standards%20Framework 2		
	015 E1.pdf		
	Governance, Leadership and Accountability		
Gweithlu:	Implications for the workforce have been fully		
Workforce:	considered.		
Deddf Rhyddid	This paper is not exempt.		
Gwybodaeth/			
Freedom of			
Information			



SBAR- Church Village Laundry Transfer

Situation

This document outlines the guiding principles and critical success factors against which the agreed transfer of the All Wales Laundry Service will be completed.

Background

The All Wales Laundry Review formally commenced in May 2016, with the NHS Wales Shared Services Partnership Committee (SSPC) approving the programme initiation and subsequent review of the Laundry production units within NHS Wales.

Throughout the last four years, a number of significant milestones have been achieved and a number of key decisions have been made to support the continual development of the All Wales Laundry Programme Business case.

The key milestones and decision points already approved include decisions by the Shared Services Partnership Committee, whereby approval or endorsement was given to the following:









Nov 2018

Jan 2019

Mar 2019

Mar 2019

Production Units

Shared Services Partnership Committee **Endorsed** reduction from 5 to 3 Laundry Production Units.

Partnership Committee

Service Provision

Independent Workshop **Approved** Single provider and Centralized model.

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Service Model

Shared Services Partnership Committee **Endorsed** the Single service provider and Centralized model

Service Provision

Shared Services Partnership Committee **Approved** NHS Wales Shared Services Partnership as the Single service provider within a Centralized model

It is **important** to note throughout the process items that have been previously approved or Endorsed remain unchanged:

approved or Endorsed remain unchanged:

- The **preferred option** Three LPUs (Laundry Production Units) to provide the future service, **endorsed** by SSPC Nov 2018.
- A Single Service Provider, endorsed by SSPC March 2019
- Centralised and Single Management of the Service approved by the SSPC in March 2019 as the NHS Wales Shared Services Partnership Committee.

These decisions act as the basis for the next planned steps, which the Laundry Transfer Project running in parallel to the ongoing programme business case development will seek to execute to conclude the transfer to NWSSP (NHS Wales Shared Services Partnership) of the existing Laundry Production Units into NWSSP by April 2021.

Originally, the intention was to complete the transfer in October 2020 but due to the pandemic and winter pressures, this was delayed until April 2021. To support this transfer the establishment of a project board is taking place with focus on drafting a set of guiding principles and a number of supporting workstreams.

The **guiding principles** seek to propose high-level objectives across:

- Land & buildings
- Equipment & plant
- Finance (Transfer of expenditure to provide service, based on costs **baseline** April 19 March 20)
- Transport and logistics (Drivers & fleet)
- Products & equipment to provide the service (cages, linen & detergents etc)
- Workforce/resource to manage, operate, maintain, and deliver the service¹
- Continuation of existing service provision processes, procedures, and contracts

Workstreams to support this activity:



Critical Success Factors:

The elements identified as critical to enable the transfer are

• **Finance** – Identification and agreement of a baseline covering both pay and non-pay expenditure within an agreed timeframe that

Partnership Committee

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¹ Within known existing demarcation points in line with the scope of the laundry project i.e. excluding linen rooms for example.

excludes the pandemic influence or variation. This is key to ensuring NWSSP is able to maintain service provision and cover all expected costs based on agreed time range in scope for the baseline currently set at 2019/20.

- Workforce as per the workforce principles agreed with WODs, it is proposed that the laundry unit staff will remain employees of the health board whereby they would be governed under a Service Level Agreement by NWSSP management to work with Shared Services for the duration of the period until the decommissioning occurs. During the decommissioning period the Health Board will actively seek redeployment opportunities for the staff concerned. At the conclusion of this period the Health Board will afford the identified staff with prior consideration for HB vacancies. This will allow the ability to consider the wishes of individuals, taking into consideration their geographical and personal preferences and constraints, and entering into a dialogue over their preferred options.
- **Customers** Existing customers identified to enable continuation of existing arrangements and appropriate communication in relation to the change of ownership and management.
- **Transport** Ensuring existing fleet operations remain intact to allow continued transport of linen to existing drop/collection points
- Product & stock Ensuring the availability of existing stock/linen and products required to continue the service operation, product, and delivery of linen.
- Support Services Continuation of externally provided support services for the laundry such as engineering, maintenance, or other critical services deemed essential to support day to day laundry operation
- **Health & Safety** Evaluation and development of a special programme of Health & Safety improvements post April.

Assessment

In relation to **Church Village Laundry**, the objective is to maintain the provision of laundry services **"as is"** but to complete a number of actions to allow the seamless transfer and ongoing provision of services to existing customers.

The intention remains to maintain the service within its **current model**, with anticipated variation in terms **not** anticipated until the commissioning of the new Laundry Production Unit as stipulated by the ongoing All Wales Laundry Programme Business Case currently estimated in 2024.²

² Estimated and subject to change based on the business case process

It is proposed that all applicable assets and liabilities will transfer from CTM to NWSSP (NHS Wales Shared Services) with effect from the October 1st, 2021. It is not envisaged that land and buildings will transfer.

Land & Buildings on/in which house the Laundry

Property Location: Church Village

Transfer objective

• It is envisaged that CTM will retain ownership of buildings and Land

Constraints &/or Dependencies

None Noted – No Transfer

Transport

NWSSP HCS provide the laundry transport

Transfer objective

HCS continue to provide the transport service

Constraints &/or Dependencies

- Assessment of current arrangements and review of resource, fleet, and licensing requirements.
- Continuation of agency driver resources when required.
- Finance captured within the finance pay & non-pay baseline.

Finance to provide the service

With the support of health board finance colleagues, the Laundry costs established are based on a review of the pre COVID baseline year of 2019/20 and these costs will be discussed with the Director of Finance and the costs would be subject to a final review by the Health Board before sign off.

Overriding Principles

- There should be no detrimental financial impact on the health board and/or NWSSP as a result of the transfer.
- The 2019/20 pre Covid actual non pay costs will be used as the financial baseline for 2021/22 once adjusted for inflation.
- Any unexpected significant costs or liabilities that come to light post transfer including Covid impact will be subject to further discussion.

The process under which NWSSP will charge for Laundry Services will be quarterly in advance.

Cwm Taf laundry	£
Pay	943,290
Non Pay	1,086,763
Total costs	2,030,053
Income	(42,298)
Net annual costs	1,987,755

Key Assumptions

Staff costs

- Staff costs will transfer to NWSSP with their full budget including on costs as from key milestone date, October 1st, 2021.
- Cwm Taf will recharge NWSSP for the actual payroll costs incurred and the funding will be revised as required.
- Budgets for any vacancies will be fully funded.
- 0.2 WTE Band 6 Finance and 0.2 WTE Band 6 workforce support included

Non pay costs

- Laundry operating cost budget will transfer to NWSSP based on 2019/20 actual costs (Pre Covid) baseline adjusted for inflation.
- Operating costs will be compared to prior years and if significant variances exist individual line adjustments will be made on an exception basis, based on a monthly report supplied by CTM Laundry Management.

Income

- Laundry income will be baselined against the 2019/20 actuals.
- The proposed net cost of the service to the existing laundry providers will be based on the total operating costs less the anticipated invoiced income.
- Invoices to other laundry customers will be raised using the existing methods followed by the individual laundry units.

Overheads

• Where relevant Health Boards will not charge NWSSP for occupying and using the laundry sites unless the budget has been transferred.

- Where relevant Laundry staff will continue to have access to their existing mobile phones, laptops, PCs and peripherals and the use of photocopiers/printers and IT etc.
- Where relevant, if support is currently provided by the health board for the laundry but not included in the budget transferred to NWSSP that service will continue on an "as is" basis.

Workforce within the Laundry

The Church Village Laundry workforce in scope are those that support the laundry production including support roles such as maintenance engineering.

Constraints &/or Dependencies

- Workforce scope remains those within the LPU³ Production environment
- Identification of required budgets within the finance workstream

Plant & Machinery to provide the service

The Laundry exists with full end-to-end equipment and machinery to enable the production of Linen for the health board and its customers.

Transfer Objective

Transfer ownership of the existing plant and machinery used to provide end-to-end linen service for the Church Village LPU, novating any lease/rental agreements as necessary.

Constraints &/or Dependencies

- Provision of an asset register and subsequent agreement (5k plus Value)
- Provision of the inventory (Sub 5k value)
- Completion of an inspection report for forward risk and management purposes

Products & Equipment to provide the service

The Laundry consumes and utilise a range of products to enable day-today operation.

Transfer Objective

Transfer ownership of the existing linen products and consumables such as detergent and Linen stock to continue the provision of end-to-end linen services from the Church Village LPU and its existing customers.

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³ LPU – Laundry Production Unit

Constraints &/or Dependencies

- Annual Stocktake required.
- Procurement adjustments, novation's, and cessations.
- Budget identified for stock and product purchasing.

Existing Service provision processes, procedures, and contracts

To support and underpin day-to-day operations, a number of contractual arrangements exist to ensure the laundry can operate. Procurement teams are working through the respective detail to ensure continuation of all required contracts and process are managed to support the transfer of service.

Transfer Objective

Transfer (novate) ownership of the existing, appropriate, agreements and contracts to provide end-to-end linen services for the Church Village LPU.

Continuation of LPU specific processes e.g. Business Continuity Planning where support external to the LPU is required.

Constraints &/or Dependencies

- Dependant procurement contract novation
- Engagement with Laundry colleagues
- Dependency on Procurement teams
- Provision and Confirmation of existing agreements
- Transport evaluation
- Continuation of any externally ⁴provided maintenance or support

Service Level Agreements & Performance Data

The Laundry currently provides services to a range of customers including:

Welsh Ambulance Services NHS Trust (WAST)

Transfer Objective

A generic Service Level Agreement (SLA) and appropriate schedules will the formulated on behalf of NWSSP to form the initial basis of the continuation of existing arrangements at the same cost to the health board and any existing customers and will be approved by the SSPC (Shared Services Partnership Committee).

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⁴ Externally – External to the workforce and operation within the LPU, for example HB Estates Support, Facilities support or 3rd party contractors

This has been developed using data identified through due diligence, engagement with LPU management and where possible utilising limited existing documentation. It is important to note this will be further developed at timely intervals as the service evolves.

The SLA will be based on a fixed price for agreed linen volumes.

Should linen volumes fluctuate outside the agreed +/- tolerances they will be subject to regular reviews and appropriate annual adjustments for the agreed variable cost/saving. The SLA is in the process of being finalised with CT Teams.

In further support, Quarterly Service Reviews will be established to consider all aspect of the service from both a supplier and customer perspective in relation to how the partnership is working for both parties and any reflection on the SLA and Schedules, quality of service provided.

Constraints &/or Dependencies

- Identification/Use of existing SLAs between the HB and its customers
- Data to provide a baseline for NWSSP to develop a Service Level Agreement (SLA) which continues the existing services provided

IT and Technology

The laundry staff currently use IT equipment, systems and hardware as required by their role. This ranges from minimal electronic staff record (ESR) usage to use of MS365 applications and relevant hardware.

Laundry plant and Equipment also can potentially utilise network and other IT infrastructure as part of the day-to-day operation.

Transfer Objective

To support the transfer is it requested continuation of existing I.T. support arrangements continue until such as time whereby transfer, replacement or migration of assets can be undertaken in a safe and consistent manner.

Constraints &/or Dependencies

- Dependant on MS365 and SharePoint developments to enable migration activity into NWSSP.
- Identification of Assets.
- IT survey of laundry⁵

High Level Timeline of Planned Events

Transfer Stage 1

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⁵ Post Pandemic Restrictions

- Workforce managed under an agreed SLA
- Finance
- Fleet already provided by NWSSP
- Critical Procurement

Transfer Stage 2

Continuation of Procurement activity

To further support the establishment of regular service and finance reviews will ensure adequate budget and workforce has been transferred in line with expectations set against the baseline period of 19/20 and to allow review of any other matters that emerge post transfer and also focusing on maintaining a continuation of quality and continuity of service.

To support the continuation of the services as currently provided from the Laundry to its customers, it is also requested that underpinning support services continue to be provided until suitable transfer, novation, migration activities be scheduled as listed above and appropriate projects and schemes are initiated to execute the required activity.

These services would typically include:

- Continuation of Health board provided services
- IT Support and continued system & hardware access
- Health board provided Facilities and maintenance externally provided from the Laundry own engineering or CTM HB support teams.

Recommendation

The Committee is asked to **NOTE** the paper and **ENDORSE** the transfer.

Appendix 1 Cwm Taf laundry			
Non Pay	2019/20	net adj	Final
30210 M&SE : Disposable	153		153
32040 Hardware & Crockery	200		200
32400 Staff Uniforms & Clothing	136,363 -	136,363	0
32410 Protective Clothing	7,646 -	7,646 -	0
32420 PATIENTS CLOTHING	35		35
32510 Cleaning Materials	543		543
32520 Laundry Equipment	1,524		1,524
32530 Laundry Materials	57,525		57,525
32540 Laundry Maintenance	107,285		107,285
32710 B&L : Non-Disposable	223,315		223,315
32810 Other General Supplies & Services	482		482
33000 Printing Costs	31		31
33010 Stationery	159		159
33200 Postage & Carriage	848		848
33320 Telephone Call Charges	72		72
33610 Travel & Subsistence	905		905
33800 Leased Cars : Contract	9,159		9,159
35000 Electricity	91,573	0.400	91,573
35010 Gas	242,188	6,402	248,590
35020 Water	66,674		66,674
35030 Sewerage	34,913		34,913
35200 Rates		42,000	42,000
35820 Materials - Electrical	54		54
37640 Recharge : Minor Works	6,080		6,080
38110 WAS : Van Service	152,442	_	152,442
	1,140,170		1,044,563
Inflation uplift for 2020/21			20,891
Inflation uplift for 2021/22		_	21,309
Total non pay costs after adjustments			1,086,763
Pay	2019/20	net adj	Final
20681 Senior Manager Band 8A	64,589	•	64,589
2K121 Admin & Clerical Band 2	13,894		13,894
2K131 Admin & Clerical Band 3	30,161		30,161
2K141 Admin & Clerical Band 4	32,882		32,882
2K151 Admin & Clerical Band 5	43,895		43,895
2K161 Admin & Clerical Band 6	47,701		47,701
2M521 Domestic Band 2	4,103		4,103
2M821 Linen Services Band 2	599,281		599,281
2M831 Linen Services Band 3	52,853		52,853
	889,359		889,359
0.2 WTE Band 6 HR and 0.2 WTE Finance support			18,000
Inflation uplift for 2020/21			17,787
Inflation uplift for 2021/22			18,143
Total pay costs after adjustments		_	943,290
Total costs pa			2,030,052
Income	2019/20	net adj	Final
00924 Swansea Bay University LHB	(8,194)	8,194	(0)
01620 Welsh Ambulance NHS Trust Income	(2,983)	2,983	0
06700 Laundry Income	(12,490)	_,000	(12,490)
08100 Leased Car : Private Deductions Income	(2,245)		(2,245)
09400 VAT Recovered Income			(=,= : -)
09440 Other Income	(25,920)		(25,920)
	(51,833)		(40,656)
Inflation unlift for 2020/24	,		, ,
Inflation uplift for 2020/21			(813)
Inflation uplift for 2021/22		_	(829)
Total income after adjustments			(42,298)
Total costs less total income pa			1,987,755



AGENDA ITEM:

22 July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

All Wales Laundry Service (Operational)- Service Level Agreement

ARWEINYDD: LEAD:	Anthony Hayward Assistant Director of Laundry and Operational FM Services
AWDUR: AUTHOR:	Anthony Hayward Assistant Director of Laundry and Operational FM Services
SWYDDOG ADRODD: REPORTING OFFICER:	Neil Frow, Managing Director NWSSP
MANYLION CYSWLLT: CONTACT DETAILS:	Neil Frow, Managing Director NWSSP

Pwrpas yr Adroddiad:

Purpose of the Report:

To present the Service Level Agreement (SLA) for the NWSSP All Wales Laundry Service

Llywodraethu/Go	vernance	
Amcanion: Objectives:	To develop a service model that is fit for purpose, complies with modern standards, provides a sustainable and resilient laundry service, and represents an operational model delivering best value for money for NHS Wales.	
Tystiolaeth:	New Standard BS EN 14065	
Supporting		
evidence:		
Ymgynghoriad/Consultation:		
Completed between Feb – Jul 2020		

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Adduned y Pwyllgor/Committee Resolution (insert √):					
DERBYN/ ARNODI/ TRAFOD/ NODI/					
APPROVE	ENDORSE		DISCUSS	NOTE	✓
Argymhelliad/ Outline the recommendation of the report			·		
Recommendation • The Committee is asked to NOTE the report					

Crynodeb Dadansoddiad Effaith:				
Summary Impact Analysis:				
Cydraddoldeb ac	No direct impact			
amrywiaeth:				
Equality and diversity:				
Cyfreithiol:	No direct impact			
Legal:	·			
lechyd Poblogaeth:	No direct impact			
Population Health:				
Ansawdd, Diogelwch a				
Profiad y Claf:	No direct impact			
Quality, Safety & Patient				
Experience:				
Ariannol:	No direct impact			
Financial:				
Risg a Aswiriant:	This report provides assurance to the Committee that			
Risk and Assurance:	NWSSP has robust risk management processes in place.			
Safonnau lechyd a Gofal:	Access to the Standards can be obtained from the following			
Health & Care Standards:	link;			
	http://gov.wales/docs/dhss/publications/150402standardse			
	n.pdf			
Gweithlu:	No direct impact			
Workforce:	No diffect impact			
	Open or closed			
Deddf Rhyddid				
Gwybodaeth/	Assess if the information can be disclosed into the public			
Freedom of Information	domain, if not it will need to be presented as a part 2 agenda item.			
	agenaa item.			

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All Wales Laundry

1. CEFNDIR/BACKGROUND

Phase 1 of the All Wales Laundry Service managed by NWSSP formally became operational on 1st April 2021 with the transfer of 3 Laundry Production Units (LPU) namely, Greenvale (South East Wales), Llansamlet (South West Wales) and Glan Clwyd (North Wales).

The transfer of the remaining laundries will seek to take place in the **coming months** at an agreed date, and the laundry service provided will continue, "as is" with **no** anticipated change in service delivery arrangements.

It is also the intention of NWSSP to continue existing arrangements in full or part until successful conclusion of the All Wales Programme Business Case currently estimated to conclude in 2024.

As part of the transfer process and to provide a framework for the ongoing management of the 3 LPU's it was agreed that a Laundry Service Level Agreement would be developed.

2. CURRENT UPDATE

This update is to present to the SSPC the agreed SLA based on the existing service volumes and schedules for the existing 12 customers of the 3 LPU's that are currently managed by NWSSP.

The basis of the SLA (contained in Appendix A) has been developed based on an existing service specification between Aneurin Bevan University Health Board and Cardiff and Vale University Health Board.

With the development of the All Wales Laundry Service the SLA has been customer not LPU orientated and recognises that production whilst geographically based the service is customer focused and makes use of capacity as a whole.

The SLA has gone through 8 iterations to include comments and amendments received during its consultation; the feedback is outlined in the document control log and detailed in Appendix P contained within SLA. It has been assumed that as each version has been circulated following each amendment a nil return is a basis of no comment and therefore an agreement.

It is anticipated the document will be in operation throughout the transformation period until the new operating model is introduced.

The SLA details quality indicators, performance specifications and existing levels of service schedules, in respect of finance the agreements remain **as is** with individual organisations.

Partnership Committee

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The SLA however does employ a trigger table which is intended to be reviewed at the quarterly review meeting and to act as a catalyst for any material changes in volumes being supplied and their impact on production costs.

It is acknowledged that there is an element of further refining required with the development in some areas / systems such as customer concerns, it is the intention these developments will be in operation in the forthcoming months.

For the purpose of brevity, the attached paper only contains one example of the specific agreement with a Health Board, rather than the full set of appendices. These are available if required.

3. ARGYMHELLIAD/RECOMMENDATION

The Committee are asked to:

• NOTE the introduction of the NWSSP Laundry Service SLA

Partnership Committee

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NWSSP Laundry Services Service Level Agreement



Service Level Agreement

Provision of Laundry Services

by

NHS Wales Shared Services Partnership

April 2021 to March 2024

Document Control

Revision N°	Revision	Version	Owner
1	Addition of chapters 15, 16, 17, 18, 19 and 20	0.2	ARH
2	Comments and responses log updated (PTHB1-6)	0.3	ARH
3	Comments and responses log updated (SBUHB1-4)	0.3	ARH
4	Quarterly volumes updated (weekly inserted previously)	0.3	ARH
5	BCUHB Volumes corrected to no decimal places	0.3	ARH
6	SBUHB Volumes adjusted for sites not owned by SBUHB	0.4	ARH
7	C&V volumes adjusted for sites transferred from SBUHB	0.4	ARH
8	Breast Test Wales volumes adjusted for sites transferred from SBUHB	0.4	ARH
9	Velindre Trust delivery schedules and volume adjusted	0.5	ARH
10	ABUHB comments incorporated	0.6	ARH
11	ABUHB Delivery schedules amended	0.7	ARH

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NWSSP Laundry Services v0.8

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1. INTRODUCTION

April 1st, 2021 saw the creation of the All Wales Laundry Service provided by NHS Wales Shared Service Partnership (NWSSP). The transfer of the laundry service provision from Health Boards to NWSSP was agreed by the Shared Service Committee and is based on continuity of service through a "lift and shift" principle.

The principle of continuity is founded on the same levels of service of both a quantitative and qualitive nature as defined by either existing Service Level Agreements or in their absence implied through customer practice.

This Service Level Agreement is for the provision of laundry services by NWSSP Laundry Service to NHS Wales Health Boards and Trusts together with any external customers.

The services provided are the wash, dry and finish of linen and other items the delivery of clean linen and collection of soiled linen to and from nominated delivery points as defined within the individual customer appendices

Bedding linen, towels, exam gowns and theatre scrubs are provided as linen hire items unless otherwise stated and personal clothing, curtains and specialist items are return to sender.

The agreement is designed to be operational during the transitional period prior to the completion of the All Wales Laundry Transformational Programme.

2. SERVICE REQUIREMENT

- 2.1 NWSSP Laundry Service will be responsible for the collection of dirty articles from the storage areas as designated by individual customers, the laundering of these articles and the delivery of clean articles to the nominated delivery points. as defined within the individual customer appendices
- 2.2 Linen shall be identified as one of two classified groups by NWSSP Laundry Service
 - 2.2.1 Linen Hire items, i.e. items owned and supplied by NWSSP Laundry Services.
 - 2.2.2 Return to Sender Items (RTS) i.e. recognised items which are owned by the individual customer and which are processed by the laundry on an ad hoc basis i.e. Patients clothing and microfibre
- 2.3 NWSSP Laundry Services will ensure that sufficient stocks of Linen Hire items are available to meet the agreed delivery volumes by managing stocks in totality and where required redirecting supplies to respond to shortages created through increased demand or production issues.
- 2.4 NWSSP Laundry Services will maintain the quality of all linen hire items, repairing or condemning/replacing items as necessary.
- 2.5 NWSSP Laundry Services shall launder Return to Sender (RTS) items belonging to its customers, subject to:
 - 2.5.1 Provision of manufacturers laundering guidelines.
 - 2.5.2 NWSSP Laundry Services having processing capability to meet manufacturer's guidelines, within the parameters of current legislation and guidance for the laundering of used hospital linens.

NWSSP Laundry Services v0.8

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- 2.6 NWSSP Laundry Services will assist in the provision of additional linen during an Infectious Outbreak or Major Incident and deliver items within 12 hours from the point of request.
- 2.7 NWSSP Laundry Services will collect soiled linen and deliver agreed weekly volumes of linen hire items as defined within the individual customer appendices
- 2.8 NWSSP Laundry Services shall supply colour coded re-usable bags for the bagging of used linen. (This shall be revised, should legislation change, and require the use of a single use impermeable bag as included in CFPP 01-04. Provision of single use non-permeable bags would become the responsibility of the customer).
 - White bags Used linen
 - Red bags Used (soiled) linen
 - ** It is the responsibility of the customers to provide alginate bags (water-soluble) for the bagging of "Infected Linen".

Appendix Q contains an illustration of the type of linen bags and their required usage.

- 2.9 NWSSP Laundry Services agrees, subject to 1 months' notice, to remain flexible to the changing needs of NHS Wales.
 - Decreases or revision in delivery pattern of existing stock can be implemented with mutual agreement, within one month.
 - Increases in service requirements will be subject to discussion and agreement. Increases requiring purchase of additional linens can normally be implemented within 1 month.
 - Changes to nominated delivery points with 1 months' notice (for permanent changes, short term modifications to accommodate temporary site disruptions should have at least 1 weeks' notice)

3. DELIVERY, COLLECTION AND TRANSPORTATION.

- 3.1 All deliveries (unless otherwise stated), shall be made by method of bulk delivery to the nominated delivery point at each site.
- 3.2 Return to sender (RTS Client owned items) shall normally be delivered back to the site where it was collected, within three working days (excluding Bank Holidays) from receipt at the laundry (subject to the item being clearly labelled and able to be processed within the laundering parameters used at NWSSP Laundry Service).
- 3.3 In exceptional circumstances where a delay or non-delivery may occur the customer nominated representative will be notified within 1 hour of the delay and advised of either an expected delivery time or alternative arrangements which will be put in place. Further delays will see the escalation to service owners of both parties.

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- 3.4 NWSSP Laundry Service will deliver sufficient stock of linen hire items to meet the requirements of the individual customers as defined within the customer appendices and remove all soiled linen from the designated collection point, at the same site visit.
- 3.5 Where an additional journey is required to collect soiled linen due to not be available at the scheduled collection time, an additional charge will be made for the direct costs incurred at £2.46 pence per mile and the delivery details logged on a variation log with a copy sent to the customer representative.
- 3.6 NWSSP Laundry Service shall ensure that the Laundry delivered will be no less than 95% of that required by the customer each week for each specific site. Where this is not achieved NWSSP Laundry Service shall endeavour to agree diversion of stock from sites with surplus linen or agree priorities with customer.
- 3.7 Clean articles shall be packed and delivered in roll cages. All cages of clean linen shall be covered with a waterproof cover and should have the destination identified.
- 3.8 NWSSP Laundry Service will ensure that all containers and cages are clean and suitable for the transport of Linen and are to be safe and fit for purpose. Laundry vehicles will be of a size to comply with the constraints of the loading facilities within each Site.
- 3.9 NWSSP Laundry Service shall leave a sufficient supply of empty cages at the delivery/collection points for the dirty linen bags to be stacked on. It is the supplier's responsibility to load and unload all cages of laundry onto the vehicle, and where necessary collect and return keys for the unlocking of the storage areas. Excess cages will be removed from the site promptly.
- 3.10 Cages are the property of NWSSP Laundry Service. Cages must not be used for any other purpose.
- 3.11 NWSSP Laundry Service shall provide details of each delivery made (a delivery note for each site) which shall record the total number of articles against each article heading delivered on that delivery. This delivery note shall also be summarised and shall be referred to in all invoices and shall tally with those invoices provided to the NWSSP Laundry Service customers.
- 3.12 NWSSP Laundry Service will endeavour to ensure the security of all linen items being carried on the Laundry's delivery/collection vehicle. NWSSP Laundry Service will report any incidents to the Authorised Officer immediately.
- 3.13 All vehicles used for the transportation of clean articles shall be regularly cleaned and disinfected to minimise the possibility of cross-contamination for linen. (document to follow as part of the service modernisation)
- 3.14 Dirty and clean articles shall not be allowed to come into contact at any time. Dirty and clean articles of laundry should not be carried in the same vehicle unless effectively separated by a waterproof partition or barrier, i.e. used linen bagged appropriately, with clean linen cages being protected with a waterproof polythene cover.

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3.15 In the event of Adverse Weather, and escalation confirmed (suspension of normal service delivery) HCS/SC will revert to (after discussion and agreement with the customer) core essential services only, as highlighted in the prioritised list below.

Other services may also be provided, with agreement of the customer, and this may include support in maintaining core staffing in Critical Services with respective Health Boards.

Staff Attendances will be managed in Line with the NWSSP Adverse Weather Plan, and only used for key staff. In the interest of staff safety, where staff have the capability to work remotely, this should be encouraged

Where lease (Contract Hire) vehicles are used, an arrangement should be in place for them to be exchanged for 4x4 type vehicles to ensure business continuity in the event of adverse weather.

The HCS/SC decisions should be made locally in partnership with Senior customer representative who will identify priorities to maintain service delivery.

As a minimum, in the event of routine services being suspended, the expected business continuity at time of escalation will be a prioritised list (Not Exhaustive):

- Maintenance of Blood Banks
- Movements of Emergency Equipment
- CSSD/Theatres Support
- Key Medical Consumables e.g. Supply to HB's, Inc. Ward Stocking etc
- Key Food stocks (where held in stores)
- Key Laundry Items/Urgent Re-Stocks
- Emergency Specimens/Tissue/Organs & Mortuary
- Emergency Pharmacy e.g. CD's, HPN, Chemotherapy, Anti Virals (Inc Pandemic Distribution)
- Public Health Wales Requirements
- Renal Diagnostics
- Radioactive Isotopes

As the SLA is a bipartite agreement and will operate for both parties there is an expectation for good planning in the event adverse weather is forecast and a collaborative approach to planning and communication.

4. PROCESSING OF ARTICLES.

- 4.1 NWSSP Laundry Service shall process articles in accordance with health service guidance on laundry procedures WHG95(18). HSG (95)18: Hospital laundry arrangements for used and infected linen
- 4.2 All laundry will be processed in accordance with WHG95(18) and pressed or appropriately finished and folded, in a way that leaves articles in a clean condition and does not cause damage or undue deterioration or distortion of the fabrics. All washed linen shall be odour free, properly dried and without stains, marks, or creases.

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- 4.3 All return to sender items must have the manufacturers laundering instructions available for NWSSP Laundry Service to be able to refer to. Items must be permanently marked to indicate the site which the items belong to, and the ward, if applicable, for linen room staff to identify on return.
- 4.4 All return to sender (RTS) items shall be processed in accordance with WHG95(18) and returned within 3 working days (excluding Bank Holidays) of receipt for processing at the laundry.

5. STANDARD OF FINISH

- 5.1 Any article of laundry delivered to the any customer site after processing by the NWSSP Laundry Service, which is damaged or is not clean or disinfected and finished in all respects to the Contract Standard may be rejected by the Authorised Officer/Nominated Person.
- 5.2 NWSSP Laundry Service shall where practicably possible, inspect linen hire items and identify physically damaged/faulty items during the finishing process and either repair prior to circulation, or reject and withdraw items from circulation.
- 5.3 Any linen hire items identified with faults, or which do not meet the customers standards shall be rejected. Rejected linen shall include, but is not limited to:
 - 5.3.1 Items beyond repair
 - 5.3.2 Items which are stained or discoloured beyond the acceptable standard
 - 5.3.3 Items which are distorted, namely where there has been a deviation in the dimensions of an item from those specified by the manufacturer, for example, shrinkage
 - 5.3.4 Items that are incomplete or that have missing parts that cannot reasonably be replaced or repaired.
- 5.4 Rejected articles of linen hire linen shall be replaced free of charge by the NWSSP Laundry Service.
- 5.5 Rejected items of Return to Sender (RTS) items of linen shall be re-processed, free of charge.
- 5.6 Damage to RTS items will be investigated by NWSSP Laundry Service and the customer representative within 5 working days. Unless damage can be shown to be caused by negligence or inappropriate processing (subject to care instructions being available with the item) NWSSP Laundry Service will not be responsible for replacement.
- 5.7 Finish of all items of linen to be folded in a uniform way and stacked neatly onto a roll cage.

6. CUSTOMER CONCERNS

3.16 NWSSP Laundry Service will maintain and demonstrate an appropriate concerns procedure that ensures that customer concerns will be responded to in writing (email) within 48 hours (Monday to Friday, excluding Bank Holidays). (document to follow as part of the service modernisation)

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6.1 This procedure will demonstrate actions taken and evidence that such action resulted in customer agreed resolution, within 5 working days of implementing action.

7. SERVICE MONITORING

- 7.1 Service monitoring review meetings will be held quarterly
- 7.2 The Customer will chair the monitoring meetings.
- 7.3 Membership will include nominated representatives of customer and the NWSSP Laundry Service.
- 7.4 A written record of the meetings, actions and decisions will be circulated within 5 working days of the meeting
- 7.5 NWSSP Laundry Service will be invited to attend customer user linen group meetings as required.(document to follow as part of the service modernisation)

8. FINANCE

As part of the transitional programme the financial arrangements were agreed and are based on either a fixed cost (previous service providers) or a variable volume-based cost (previous customers). It is however acknowledged that a provision to discuss variations to the volumes provided is required to protect the interest of both parties.

The volume variation provision shall be provided in the form of a trigger activated by a potential band based on a percentage of the total volumes per customer within the existing volume envelope, this percentage shall be used as the catalyst for discussion.

Review and monitoring of trigger activations will form part of the standing agenda for a Quarterly Service Performance review with each customer and agreement made as to additional / reduction in volumes against the baseline volumes. Where individual customers require it in addition to the quarterly review meeting NWSSP Laundry Services will establish service monitoring meetings with a frequency each customer is content with.

An Annual Service Performance Review will also be held with each customer whereas part of the standing agenda the last quarter's volumes will be agreed and totalled with the 3 previous quarters to calculate the annual linen consumption against the baseline

Customers who are invoiced on a fixed cost on a monthly basis for their linen will be charged / rebated utilising the proportional bands against their respective sites at a cost associated with the variable costs elements of the service and applied against the current cost per piece.

The charge or credit will be based upon the variable element of the service provision the split of the fixed and variable cost elements for the price per piece is 68% and 32% respectively, therefore any additional charges / rebate will be applied at a rate of 32% of the current cost per piece specific to each Laundry

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Production Units cost base. The volumes and charge or credit will be identified separately and invoiced retrospectively.

Table 1 Trigger Table below illustrates the trigger and the variable parameters applied to the 2019 volume baseline to determine the trigger a material change for each of the customers.

Table 1 Trigger Table

Annual Volumes	Quarterly Volumes	% Trigger	Quarterly Variable +/-
7,000,000	1,750,000	5.0%	87,500
5,000,000	1,250,000	6.0%	75,000
3,000,000	750,000	7.0%	52,500
1,000,000	250,000	8.0%	20,000
500,000	125,000	10.0%	12,500
250,000	62,500	15.0%	9,375
100,000	25,000	20.0%	5,000
50,000	12,500	30.0%	3,750

9. Key Performance Indicators

NWSSP Laundry Service KPI's

KPI	Description	Action
A	Each delivery meets 90% of individual items ordered for individual sites ordered requirement; provided ordered requirements are no more than 120% of the average daily order for the last 8 weeks. Where shortages are identified prior to deliver NWSSP Laundry service will inform the customer by 10:00hrs on the day of delivery. Agreed remedial actions to rectify shortages must be implemented within 24 hours. A delivery note must accompany all deliveries.	Balance to be made up within the working week to ensure total weekly volume meets volume in Schedule B
В	90 % of Deliveries to be made within 2 hours of delivery times shown within the individual customer appendices No more than 5% of scheduled deliveries to be received outside of the delivery window in a 30-day period, unless evidenced to be outside the control of the NWSSP Laundry Service	Review of delivery schedules for practicability.
С	Ensure that all linen is finished in accordance with agreed service specification. Service standards to be met on 98 % of all pieces in each delivery received by the customer.	Rejected items replaced FOC
D	Provide management information and reports to customer monthly, or as varied by agreement, which shows. Delivery summary of item category by site KPI's 3.17 Complaints and resolutions	Report emailed to nominated service manager monthly

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	(document to follow as part of the service modernisation)	Contract monitoring meetings to be scheduled
	To be supported by bi-monthly review meetings between appropriate representatives of both parties.	
E	Regular microbiological and environmental monitoring to be conducted and results available on request to customer. (document to follow as part of the service modernisation) Water quality ATP tests of hard surfaces (including cages and vehicles) Environmental monitoring	Quarterly summary of results to be included with routine contract monitoring reports



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CUSTOMER KPI's

KPI	Description of KPI	Action
F	Soiled linen is collected form Wards in a timely manner to ensure that sufficient soiled linen is returned for processing	NWSSP Laundry service to monitor volumes and if a recurring issue will report at quarterly service review meetings.
G	No site logistics prevent the linen form being delivered or collected within the agreed delivery or collection time	NWSSP Laundry service to monitor volumes and if a recurring issue will report at quarterly service review meetings.
Н	Advise NWSSP Laundry service of any shortages or quality issues within 24 – 48 hours of receipt of delivery	NWSSP Laundry service to monitor volumes and if a recurring issue will report at quarterly service review meetings.
1	Linen provided is used for the purpose intended	NWSSP Laundry service to monitor volumes and if a recurring issue will report at quarterly service review meetings.
J	Any heavily soiled articles should be placed in designated red bags prior to being returned to NWSSP Laundry service for processing	NWSSP Laundry service to monitor volumes and if a recurring issue will report at quarterly service review meetings.
К	Cages provided should be for the use of transporting linen and laundry only.	NWSSP Laundry service to monitor volumes and if a recurring issue will report at quarterly service review meetings.
L	No Clinical waste to be returned to NWSSP Laundry service	NWSSP Laundry service to monitor volumes and if a recurring issue will report at quarterly service review meetings.
М	All soiled linen to be bagged in line with bagging procedure	NWSSP Laundry service to monitor volumes and if a recurring issue will report at quarterly service review meetings.

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10. Remedies or Non-Performance

Following a receipt from either the supplier or customer that the terms of the Agreement are not being, the findings will be discussed between the appropriate levels of management.

In the event the customer or supplier is not performing according to the terms of this Agreement the following procedure will apply.

Where one party considers the other party has under-performed its contractual obligations, they will initiate a meeting with the other party within 14 days. Following the meeting the party that has not performed adequately will be given 14 days to resolve the issue to the satisfaction of the other party. It is assumed that there will be joint discussions between both parties to research a mutually acceptable outcome.

Where the non-conformance has not been rectified within the agreed tie scale, the other party will have the right of recourse to arbitration.

11. Arbitration

In the event of a dispute over non-performance arising between the two parties which cannot be resolved locally, the guidance in DGM (91)39 "NHS Contracts Resolving Despites" will apply.

It is agreed that an appropriate impartial adjudicator will be appointed in this event.

12. Financial Consequences of Under Performance

If the customer is required to place remedial work, from the agreement with the supplier with another supplier as a consequence of Paragraph 9, the cost incurred will be deducted if judged appropriate by the adjudicator from the authorised agreed price.

13. Confidentiality

The customer shall keep in strict confidence all technical or commercial know-how, specifications, inventions, processes or initiatives which are of a confidential nature and have been disclosed to the customer by the supplier, its employees, agents, consultants or subcontractors and any other confidential information concerning the suppliers business or its services which the provider may obtain.

The customer may disclose such information:

- To its employees, officers, representatives, advisors, agents, or subcontractors who need to know such information for the purpose of carrying out the customers obligations under the Agreement
- As may be required by Law, court order or any governmental or regulatory authority

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14. Force Majeure

A party shall not be in breach of the Agreement, nor liable for any failure or delay in performance of any obligations under the Agreement arising from or attributes to act, events, omissions, or accidents beyond its reasonable control.

15. Severability

If any provision or part of this Agreement is held to be invalid, amendments to this Agreement may be made by the addition or deletion of wording as appropriate to remove the invalid part or provision but otherwise retain the provision and the other provisions of this Agreement to the maximum extent permissible under the applicable law.

16. Third Party Rights

No term of this Agreement is enforceable under the Contracts (Rights of Third Parties) Act 1999 by any person who is not a party.

17. Entire Agreement

This Agreement and its Appendices (which are incorporated into and made a part of this Agreement) constitute the entire agreement between the parties and supersedes all negotiations, understandings or previous agreements between the parties relating to its subject matter.

18. Notices

- 18.1 Except as otherwise expressly provided within the Agreement, no notice or other communication from one party to the other shall have any validity under this Agreement unless made in writing by or on behalf of the party concerned. Any demand, notice or other communication to be given or made in writing under this Agreement will be deemed to have been duly given or made as follows:-
 - 18.1.1 if sent by prepaid first-class post on the second working day after the date of posting; or
 - 18.1.2 if delivered by hand upon delivery at the address provided for in this Agreement; or
- 18.1.3 if sent by facsimile on the day of transmission provided that a confirmatory copy is sent by pre-paid first class post on the same working day that the facsimile is transmitted provided however that if it is delivered by hand or sent by facsimile on a day which is not a working day or after 4.00 p.m. on a working day it will instead be deemed to have been given or made on the next working day.
- 18.2 Any such demand notice or other communication will be addressed to and sent to NWSSP Laundry Service and to the customer contact at such other address or fax number as may from time to time be notified in writing by the parties as being the address for service provided.

19. Variation/Amendment

This Agreement may only be amended in writing signed by the duly authorised representatives of the parties.

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20. Law and Jurisdiction

This Agreement shall be deemed to be a contract made in Wales and shall be governed by and interpreted in accordance with the law of England and Wales, as it applies in Wales. All disputes arising under or in connection with it shall (subject to Clauses 10 and 11 above) be submitted in the first instance to the non-exclusive jurisdiction of the Courts in Wales.



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Appendix A

Aneurin Bevan University Health Board



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Schedule 1

Delivery address details Aneurin Bevan University Health Board

Site Name	Address	Linen contact & contact details	Delivery / Collection Times & Days	Delivery Point	Collection Point
Grange University Hospital (GUH)	Caerleon Road, Llanfrechfa, Cwmbran, NP44 8YN	Andrew Walsh, Facilities Manager Tel. 07879 476220 Andrew.walsh@wales.nhs.uk	Twice daily Monday – Friday 10.30 - 13.00 Saturday & Sunday - Collection of soiled linen only.	Facilities Service Corridor off Loading Bay	Used Linen Store in Service Yard
Royal Gwent Hospital (RGH)	Cardiff Road, Newport, NP20 2UB	Joe Madine, Operational Services Manager Tel. 07580 280137 Joseph.Madine@wales.nhs.uk	Twice daily Monday – Friday 06.00 - 06.30 / 11.30 - 12.30 Saturday & Sunday - Collection of soiled linen only.	Loading Bay	Loading Bay
Nevill Hall Hospital (NHH)	Brecon Road, Abergavenny, NP7 7EG	Kim White, Operational Services Manager Tel. 01873 732320 kim.white@wales.nhs.uk	Twice daily Monday – Friday 06.30 - 07.00 / 10.30 - 11.00 Saturday & Sunday - Collection of soiled linen only.	Loading Bay	Loading Bay

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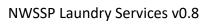
Site Name	Address	Linen contact & contact details	Delivery / Collection Times & Days	Delivery Point	Collection Point
Ysbyty Ystrad Fawr (YYF)	Ystrad Munich, Hengoed, CF82 7GP	Roy Godsall, Operational Services Manager Tel. 01443 802225 Roy.Godsall@wales.nhs.uk	Once daily Monday – Friday 08.00 - 09.00 Sunday - Collection of soiled linen only.	Linen Store in R&D Yard	R&D Yard (Left Side)
Ysbyty Aneurin Bevan (YAB)	Lime Avenue, Ebbw Vale, NP23 6GL	Roy Godsall, Operational Services Manager Tel. 01443 802225 Roy.Godsall@wales.nhs.uk	Once daily Monday – Friday 09.30 - 12.30	Facilities Service Yard	Facilities Service Yard
St Woolos Hospital (SWH)	Stow Hill, Newport, NP20 4SZ	Andrew McFarlane, Operational Services Manager Tel.01633 238428 Andrew.McFarlane2@wales.nhs.uk	Once daily Monday – Friday 05.30 - 06.30 Sunday - Collection of soiled linen only.	Springfield Unit	Springfield Unit
County Hospital	Coed-y-Gric Road, Griffithstown, Pontypool, NP4 5YA	Andrew McFarlane, Operational Services Manager Tel.01633 238428 Andrew.McFarlane2@wales.nhs.uk	Once daily Monday – Friday Monday, Wednesday & Friday 07.30 - 08.30 Tuesday & Thursday 11.30 - 12.30 Sunday - Collection of soiled linen only.	Linen Room	Facilities Service Yard

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Site Name	Address	Linen contact & contact details	Delivery / Collection Times & Days	Delivery Point	Collection Point	
Chepstow Community Hospital	Tempest Way, Chepstow, Monmouthshire, NP16 5YX Andrew McFarlane, Operational Services Manager Tel.01633 238428 Andrew.McFarlane2@wales.nhs.uk		Monday, Wednesday & Friday 11.30 - 12.30	Linen Room	Facilities Service Yard	
Rhymney Integrated Health & Social Care Centre	22 The Lawns Industrial Estate, Rhymney, NP22 5PW	Roy Godsall, Operational Services Manager Tel. 01443 802225 Roy.Godsall@wales.nhs.uk	Monday, Wednesday & Friday 11.30 - 12.30	Ward Entrance	Dirty Linen Room	
St Cadocs Hospital	Lodge Road, Caerleon, NP18 3XQ	Andrew McFarlane, Operational Services Manager Tel.01633 238428 Andrew.McFarlane2@wales.nhs.uk	Monday, Wednesday & Friday 11.00 - 12.00	R&D Loading Bay	R&D Loading Bay	
Ysbyty 'r Tri Chwm	College Road, Ebbw Vale, NP23 6GT	Roy Godsall, Operational Services Manager Tel. 01443 802225 Roy.Godsall@wales.nhs.uk	Monday, Wednesday & Friday 12.00 - 13.00	Linen Room (near catering)	Facilities Service Yard	

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Site Name	Address	Linen contact & contact details	Delivery / Collection Times & Days	Delivery Point	Collection Point
Maindiff Court Hospital	Ross Road, Abergavenny, Monmouthshire, NP7 8NF	Paul Rogers, Operational Services Manager Tel. 07976 182960 Paul.Rogers2@wales.nhs.uk	Tuesday & Thursday 11.15 - 12.15	Main Corridor off Facilities Service Yard	Facilities Service Yard
Monnow Vale Health & Social Care Centre	Drybridge Park, Monmouthshire, NP25 5BL	Paul Rogers, Operational Services Manager Tel. 07976 182960 Paul.Rogers2@wales.nhs.uk	Tuesday & Thursday 12.30 - 13.00	Main Corridor off Facilities Service Yard	Dirty Linen Store near Waste Compound



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Schedule 2

Delivery Frequency by Site Aneurin Bevan University Health Board

Cito	Delivery				Days			
Site	frequency per week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Grange University Hospital (GUH)	Twice Daily	10:00 - 12:00 13:30 - 13:00	10:00 - 12:00 13:30 - 13:00	10:00 - 12:00 13:30 - 13:00	10:00 – 12:00 13:30 – 13:00	10:00 – 12:00 13:30 – 13:00	Collection Only	Collection Only
Royal Gwent Hospital (RGH)	Twice Daily	√ 05:45 – 07:45 11.30 – 13:00	√ 05:45 – 07:45 11.30 – 13:00	05:45 - 07:45 11.30 - 13:00	√ 05:45 – 07:45 11.30 – 13:00	√ 05:45 – 07:45 11.30 – 13:00	Collection Only	Collection Only
Nevill Hall Hospital (NHH)	Twice Daily	06:30 - 08:30 10:30 - 12:30	06:30 - 08:30 10:30 - 12:30	06:30 - 08:30 10:30 - 12:30	06:30 - 08:30 10:30 - 12:30	06:30 - 08:30 10:30 - 12:30	Collection Only	Collection Only
Ysbyty Ystrad Fawr (YYF)	Once Daily	08:30 - 10:30	08:30 - 10:30	08:30 - 10:30	08:30 - 10:30	08:30 - 10:30		Collection Only
Ysbyty Aneurin Bevan (YAB)	Once Daily	10:30 - 12:30	09:30 - 11.30	√ 10:30 - 12:30	√ 09:30 - 11.30	√ 10:30 - 12:30		
St Woolos Hospital (SWH)	Once Daily	05:30 - 07:30	√ 05:30 - 07:30	√ 05:30 - 07:30	√ 05:30 - 07:30	√ 05:30 - 07:30		Collection Only

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Site	Delivery				Days			
Site	frequency per week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
County Hospital	Once Daily	√ 07:30 – 09:30	11:30 - 13:30	√ 07:30 − 09:30	11:30 - 13:30	√ 07:30 – 09:30		Collection Only
Chepstow Community Hospital	Three times a week	√ 11:30 - 13:30		11:30 - 13:30		√ 11:30 - 13:30		
Rhymney Integrated Health & Social Care Centre	Three times a week	11:00 - 13:00		11:00 - 13:00		11:00 - 13:00		
St Cadocs Hospital	Three times a week	11:00 - 13:00		11:00 - 13:00		11:00 - 13:00		
Ysbyty 'r Tri Chwm	Three times a week	10:45 - 12:45		10:45 - 12:45		√ 10:45 - 12:45		
Maindiff Court Hospital	Twice a week		11:00 - 13:00			11:00 - 13:00		
Monnow Vale Health & Social Care Centre	Twice a week		12:00 - 14:00			7 12:00 - 14:00		

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Schedule 3

Common User Item (Weekly) Aneurin Bevan University Health Board

Common User Items (Weekly)	Grange University Hospital (GUH)	Grange University Hospital (GUH) Mortuary	Royal Gwent Hospital (RGH)	Royal Gwent Hospital (RGH) Main Theatres	Royal Gwent Hospital (RGH) Endoscopy	Royal Gwent Hospital (RGH) Urology
Microfibre Mops	7,775	0	7,190	0	0	0
Thermal Spread	3,500	0	1,859	0	4	0
Sheets - Bed	8,100	0	5,625	0	0	0
Sheets - Crib	300	0	0	0	0	0
Sheets - Cot	140	0	0	0	0	0
Draw sheets	600	0	330	0	30	0
Pillowcases (Conventional)	4,500	0	2,700	0	25	0
Pillowcases (Sleep knit)	0	0	0	0	0	0
Sleep knit - Smart Sheet	0	0	0	0	0	0
Sleep knit - Top Sheet	0	0	0	0	0	0
Bath Towels	3,501	0	1,850	0	0	0
Curtains	0	0	48	0	0	0
Duvet Covers	0	0	0	0	0	0
Slide Sheet	0	0	79	0	0	0
Blankets - Adult	500	0	300	0	0	0
Blankets - Crib	420	0	0	0	0	0
Gown Op Adult	2,000	0	1,205	0	2	0
Gown Op Child	0	0	0	0	0	0
Linen Bags (Red)	625	0	750	0	0	0
Linen Bags (White)	625	0	525	0	0	0
Theatre Drape	0	0	0	0	0	0

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Common User Items (Weekly)	Grange University Hospital (GUH)	Grange University Hospital (GUH) Mortuary	Royal Gwent Hospital (RGH)	Royal Gwent Hospital (RGH) Main Theatres	Royal Gwent Hospital (RGH) Endoscopy	Royal Gwent Hospital (RGH) Urology
Slide Sheet	0	0	0	0	0	0
X-Ray Gown	2	0	28	0	0	0
X-Ray Dressing Gown	0	0	82	0	0	0
Modesty Capes	0	0	79	0	0	0
SSI Over gown	0	0	133	0	0	0
S/U Aprons	0	0	8	0	0	0
S/U Coats	0	0	21	0	0	0
Babywear	40	0	0	0	0	0
Nightwear	0	0	416	0	0	0
Patient Clothing	0	0	3	0	0	0
Oven Gloves	29	0	0	0	0	0
Laboratory Coats	13	0	0	0	0	0
Theatre Tunics	1,496	35	400	480	20	125
Theatre Trousers	1,612	35	354	371	20	125
	35,778	70	23,985	851	101	250

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Common User Items (Weekly)	Nevill Hall Hospital (NHH)	Ysbyty Ystrad Fawr (YYF)	Ysbyty Aneurin Bevan (YAB)	St Woolos Hospital (SWH)	St Woolos Hospital (SWH) Dermatology	St Woolos Hospital (SWH) Orthopaedic Unit
Microfibre Mops	3,957	3,896	1,991	1,663	0	0
Thermal Spread	2,299	950	420	320	0	30
Sheets - Bed	3,690	3,000	1,300	1,050	0	0
Sheets - Crib	0	0	0	0	0	0
Sheets - Cot	0	0	0	0	0	0
Draw sheets	300	120	0	0	0	0
Pillowcases(Conventional)	2,800	900	250	400	0	0
Pillowcases(Sleep knit)	0	0	50	0	0	0
Sleep knit - Smart Sheet	20	0	20	0	0	0
Sleep knit - Top Sheet	0	0	0	0	0	20
Bath Towels	2,650	2,400	600	1,020	0	30
Curtains	14	0	0	0	0	0
Duvet Covers	32	0	0	0	0	0
Slide Sheet	1	14	7	7	0	0
Blankets - Adult	0	0	0	204	0	0
Blankets - Crib	0	30	0	0	0	0
Gown Op Adult	1,258	640	350	300	0	110
Gown Op Child	0	0	0	0	0	0
Linen Bags (Red)	0	325	0	150	0	0
Linen Bags (White)	0	300	25	125	0	0
Theatre Drape	38	0	0	0	0	0

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Common User Items (Weekly)	Nevill Hall Hospital (NHH)	Ysbyty Ystrad Fawr (YYF)	Ysbyty Aneurin Bevan (YAB)	St Woolos Hospital (SWH)	St Woolos Hospital (SWH) Dermatology	St Woolos Hospital (SWH) Orthopaedic Unit
Slide Sheet	0	0	0	0	0	0
X-Ray Gown	146	60	2	1	0	0
X-Ray Dressing Gown	0	0	0	12	0	0
Modesty Capes	0	0	0	0	0	0
SSI Over gown	58	0	0	0	0	0
S/U Aprons	0	0	0	0	0	0
S/U Coats	0	0	0	0	0	0
Babywear	0	0	0	0	0	0
Nightwear	0	0	54	89	0	0
Patient Clothing	1	0	82	45	0	0
Oven Gloves	0	42	0	0	0	0
Laboratory Coats	56	0	0	0	0	0
Theatre Tunics	494	64	0	0	50	240
Theatre Trousers	446	43	0	0	20	235
	18,260	12,784	5,151	5,386	70	665

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Common User Items (Weekly)	Llanfrechfa Grange Hospital (A&T)	County Hospital	County Hospital Ty Siriol	Chepstow Community Hospital	Rhymney Integrated Health & Social Care Centre	St Cadocs Hospital
Microfibre Mops	117	821	0	0	368	707
Thermal Spread	0	360	150	150	30	6
Sheets - Bed	60	1,120	100	400	120	70
Sheets - Crib	0	0	0	0	0	0
Sheets - Cot	0	0	0	0	0	0
Draw sheets	0	0	0	0	0	0
Pillowcases (Conventional)	50	370	125	70	45	120
Pillowcases (Sleep knit)	0	0	0	0	0	0
Sleep knit - Smart Sheet	0	0	0	0	0	0
Sleep knit - Top Sheet	0	0	0	0	0	10
Bath Towels	150	650	350	420	180	390
Curtains	0	2	0	0	0	0
Duvet Covers	0	0	0	0	0	0
Slide Sheet	0	4	0	0	0	0
Blankets - Adult	50	0	0	0	0	150
Blankets - Crib	0	0	0	0	0	0
Gown Op Adult	0	366	0	44	0	0
Gown Op Child	0	0	0	0	0	0
Linen Bags (Red)	20	125	0	0	0	150
Linen Bags (White)	20	125	0	100	25	0
Theatre Drape	0	0	0	0	0	0
Slide Sheet	0	0	0	0	0	0

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Common User Items (Weekly)	Llanfrechfa Grange Hospital (A&T)	County Hospital	nty Hospital Ty Siriol		Rhymney Integrated Health & Social Care Centre	St Cadocs Hospital
X-Ray Gown	0	10	0	1	0	0
X-Ray Dressing Gown	0	0	0	8	0	0
Modesty Capes	0	0	0	0	0	0
SSI Over gown	0	0	0	0	0	0
S/U Aprons	0	0	0	0	0	0
S/U Coats	0	0	0	0	0	0
Babywear	0	0	0	0	0	0
Nightwear	0	1	0	2	0	0
Patient Clothing	0	0	0	84	0	0
Oven Gloves	0	0	0	0	0	0
Laboratory Coats	0	0	0	0	0	0
Theatre Tunics	0	0	0	0	0	0
Theatre Trousers	0	0	0	0	0	0
	467	3,954	725	1,279	768	1,603

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Common User Items (Weekly)	Ysbyty 'r Tri Chwm	Maindiff Court Hospital	Monnow Vale Health & Social Care Centre
Microfibre Mops	181	122	162
Thermal Spread	0	20	0
Sheets - Bed	100	0	200
Sheets - Crib	0	0	0
Sheets - Cot	0	0	0
Draw sheets	0	0	0
Pillowcases (Conventional)	20	12	30
Pillowcases (Sleep knit)	0	25	0
Sleep knit - Smart Sheet	0	10	0
Sleep knit - Top Sheet	0	10	0
Bath Towels	200	160	180
Curtains	0	0	0
Duvet Covers	17	0	0
Slide Sheet	0	0	0
Blankets - Adult	15	0	40
Blankets - Crib	0	0	0
Gown Op Adult	0	0	25
Gown Op Child	0	0	0
Linen Bags (Red)	0	0	25
Linen Bags (White)	30	0	25
Theatre Drape	0	0	0

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Common User Items (Weekly)	Ysbyty 'r Tri Chwm	Maindiff Court Hospital	Monnow Vale Health & Social Care Centre
Slide Sheet	0	0	0
X-Ray Gown	0	0	0
X-Ray Dressing Gown	0	0	0
Modesty Capes	0	0	0
SSI Over gown	0	0	0
S/U Aprons	0	0	0
S/U Coats	0	0	0
Babywear	0	0	0
Nightwear	0	0	0
Patient Clothing	1	0	0
Oven Gloves	0	0	0
Laboratory Coats	0	0	0
Theatre Tunics	0	6	0
Theatre Trousers	0	3	0
	564	368	687

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Schedule 4

Volume Monitoring Trigger Table - Aneurin Bevan University Health Board

Annual Volumes	Quarterly Volumes	% Trigger	Quarterly Variable +/-	ABUHB Annual Volumes	ABUHB Quarterly Volumes
7,000,000	1,750,000	5.0%	87,500		
5,000,000	1,250,000	6.0%	75,000	5,915,832	1,478,958
3,000,000	750,000	7.0%	52,500		
1,000,000	250,000	8.0%	20,000		
500,000	125,000	10.0%	12,500		
250,000	62,500	15.0%	9,375		
100,000	25,000	20.0%	5,000		
50,000	12,500	30.0%	3,750		

Appendix P

Service Level Agreement Comments / Responses Log



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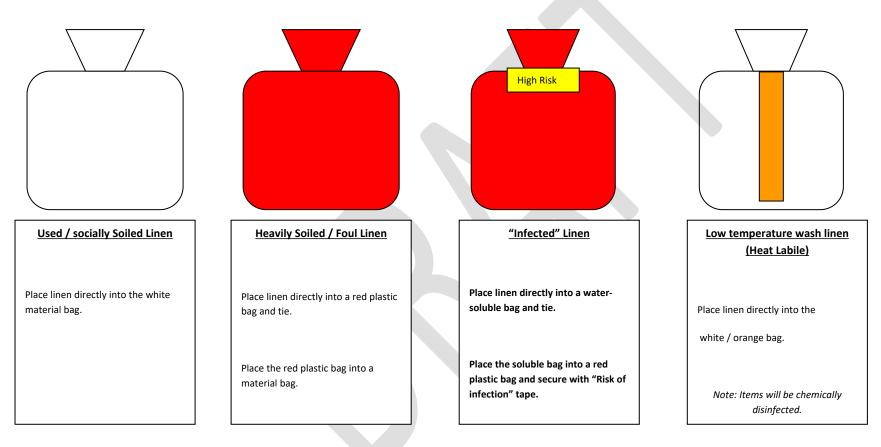
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APPENDIX P - LINEN BAG USER SPECIFICATION



Guidance on the Segregation and Bagging of Linen



Bags should only be filled up to 3/3 full.

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APPENDIX R - HSG(65) 18



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AGENDA ITEM: 22 July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

All Wales Laundry Service (Operational) Risks, Issues and Actions

ARWEINYDD:	Anthony Hayward Assistant Director of Laundry and
LEAD:	Operational FM Services
AWDUR:	Anthony Hayward Assistant Director of Laundry and
AUTHOR:	Operational FM Services
SWYDDOG ADRODD:	Noil From Managing Director NWSSD
REPORTING OFFICER:	Neil Frow, Managing Director NWSSP
MANYLION CYSWLLT:	Noil From Managing Director NIM/CCD
CONTACT DETAILS:	Neil Frow, Managing Director NWSSP

Pwrpas yr Adroddiad:

Purpose of the Report:

To provide an update on the assessment, management of the Risks, Issues and Actions within the NWSSP All Wales Laundry Service

Llywodraethu/Governance									
Amcanion: Objectives:	To develop a service model that is fit for purpose, complies with modern standards, provides a sustainable and resilient laundry service, and represents an operational model delivering best value for money for NHS Wales.								
Tystiolaeth: Supporting evidence:	New Standard BS EN 14065								

Ymgynghoriad/Consultation:

Completed between Feb – Jul 2020

Adduned y Pwyllgor/Committee Resolution (insert v):									
DERBYN/ APPROVE		ARNODI/ ENDORSE TRAFOD/ DISCUSS				NODI/ NOTE ✓			
Argymhelliad/ Recommendation				dation of the report e is asked to NOTE th		oort			

Crynodeb Dadansoddiad Effai Summary Impact Analysis:	th:				
Cydraddoldeb ac amrywiaeth: Equality and diversity:	No direct impact				
Cyfreithiol: Legal:	No direct impact				
lechyd Poblogaeth: Population Health:	No direct impact				
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	No direct impact				
Ariannol: Financial:	No direct impact				
Risg a Aswiriant: Risk and Assurance:	This report provides assurance to the Committee that NWSSP has robust risk management processes in place.				
Safonnau lechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link; http://gov.wales/docs/dhss/publications/150402standardse n.pdf				
Gweithlu: Workforce:	No direct impact				
Deddf Rhyddid Gwybodaeth/ Freedom of Information	Open or closed Assess if the information can be disclosed into the public domain, if not it will need to be presented as a part 2 agenda item.				

All Wales Laundry

1. CEFNDIR/BACKGROUND

Phase 1 of the All Wales Laundry Service managed by NWSSP formally became operational on 1st April 2021 with the transfer of 3 Laundry Production Units (LPU) namely, Greenvale (South East Wales), Llansamlet (South West Wales) and Glan Clwyd (North Wales).

The transfer of the remaining laundries will seek to take place in the **coming months** at an agreed date, and the laundry service provided will continue, "as is" with **no** anticipated change in service delivery arrangements.

It is also the intention of NWSSP to continue existing arrangements in full or part until successful conclusion of the All Wales Programme Business Case currently estimated to conclude in 2024.

As part of the transfer process and to support the ongoing management of the 3 LPU's a number of assessments have been completed to understand the inherent risks and issues within each of the units.

The assessments have taken the form of:

Building, plant, and equipment surveys
 HSG65 (Self-assessment)
 Estates Compliance assessment (NWSSP H&S Manager)
 Health and Safety Due Diligence assessment (NWSSP H&S Manager)

A risk register has been developed together with a series of actions plans to mitigate and manage points raised by the surveys and assessments. It is the intention to manage the risk register organically updating, adding, and removing entries as their change or materialise until the end of the transformational programme.

The action plans are managed through monthly Health and Safety review meeting and good progress is being made.

2. CURRENT UPDATE

This update is to advise the SSPC on the current level of risk within the service contained within the risk register and service action plans.

Table 1 – NWSSP Laundry Service Risk Matrix illustrates by risk rating the number of risks / actions currently being managed by the service.

Table 1 – NWSSP Laundry Service Risk Matrix

NWSSP Laundry Service Risk Matrix										
Assessment	Туре	Actions / Entries	Risk Rating							
			Low	Moderate	Significant	Critical				
Diele De eister	Risks	121	1	65	54	1				
Risk Register	Issues	1	0	0	0	1				
HSG65	Actions	190	33	42	115	0				
H&S Due Diligence	Actions	136	27	95	14	0				
Estates Compliance	Actions	75	25	28	22	0				
			Ī			I				
	Totals	523	86	230	205	2				

The number of entries contained within the risk registers are representative of the current condition of buildings, plant, and equipment and supports the recommendations of the PBC for the reprovision of the LPU's through significant capital investment.

The risk categorised as critical within the register is attributed to the water softener plant at Greenvale LPU and is beyond its life expectancy and has suffered multiple failures. To mitigate the risk the plant will be monitored closely as part of the maintenance regime

The issue categorised as critical is the failure of 2 of the 20 roof smoke ventilation actuators, currently quotations are being sought for their replacement. It should be noted that the cost of their replacement and the risk they represent will be balanced against the additional cost of the need to install roof edge protection and safety anchor points.

The actions generated by the HSG65, H&S Due Diligence and the Estates Compliance assessments are being managed through individual action plans each assigned a risk category and target quarter. Appendix A contains the NWSSP Laundry Service Risk Matrix – Actions by Quarter

Good progress is being made with all actions planned for the 1st quarter completed on time and 20% of the all actions completed to date.

3. ARGYMHELLIAD/RECOMMENDATION

The Committee are asked to:

NOTE the progress on the assessment, management of the Risks, Issues and Action within the NWSSP All Wales Laundry Service

Appendix A NWSSP Laundry Service Risk Matrix – Actions by Quarter

								I	NWSSP Lau	ındry Servic	e Risk Mat	rix										
		Quarter 1						Quarter 2 Risk Rating						Quarter 3					Quarter 4			
Assessment	Status		Risk Rating											Risk Rating				F	Risk Rating			Actions / Entries
		Low	Moderate	Significant	Critical	Totals	Low	Moderate	Significant	Critical	Totals	Low	Moderate	Significant	Critical	Totals	Low	Moderate	Significant	Critical	Totals	
Diele Decistes	Risks	1	65	54	1	121	-	-	-	-	0	-	-	-	-	0	-	-	-	-	0	121
Risk Register	Issues	-	-	-	-	0	-	-	-	1	1	-	-	-	-	0	-	-	-	-	0	1
	Completed	-	-	-	-	0	-	-	-	-	0	-	-	-	-	0	-	-	-	-	0	0
HSG65	On Target	-	-	-	-	0	21			-	21	11	36	78	-	125	1	6	37	-	44	190
	Slipped	-	-	-	-	0	-	-	-	-	0	-	-	-	-	0	-	-	-	-	0	0
	Completed	14	16	9	-	39	-	1	1	-	2	-	-	-	-	0	-	-	-	-	0	41
H&S Due Diligence	On Target	-	-	-	-	0	10	31	4	-	45	3	27	-	-	30	-	20	-	-	20	95
	Slipped	-	-	-	-	0	-	-	-	-	0	-	-	-	-	0	-	-	-	-	0	0
	Completed	25	15	1	-	41	-	-	-	-	0	-	-	-	-	0	-	-	-	-	0	41
Estates Compliance	On Target	-	-	-	-	0	-	13	21	-	34	-	-	-	-	0	-	-	-	-	0	34
	Slipped	-	-	-	-	0	-	-	-	-	0	-	-	-	-	0	-	-	-	-	0	0
	Completed	39	31	10		80		1	1		2				_	0	_				0	82
	On Target					0	31		25	_	100	14	63	78	_	155	1	26	37	_	64	319
Junimary			-	-	-		31	44		-		14	05	/6	-				37	_		
	Slipped	•	-	-	-	0	-	-	-	-	0	-	-	-	-	0	-	-	-	-	0	0



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NWSSP Finance & Corporate PMO Monthly Update – June 2021

Prepared by: Ian Rose

Date:

Monthly Summary	3
SLT Recommendation	3
High Level Update	
Student Awards	
L&R Case Management System	
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Annondix A	1 /

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Monthly Summary

The PMO is currently supporting **24** different schemes up one on last month, of varying size, complexity and providing a range of support from different points within the project lifecycle.

Within the PMO, we have 5 project managers supporting schemes all of which are at different points within the project or programme lifecycle.

The **24** schemes have **11** different SRO/Project Executive Leads across 8 different NWSSP directorates.

Also within the **25** schemes the breakdown of scheme size and coverage ranges from:

- 33% All Wales Typically where the scheme covers multiple Healthboards, and the schemes seek to implement products utilised on a multi healthboard or all wales basis.
- 46% Healthboard Typically supporting schemes for Healthboards but where NWSSP play a role in the service provision
- 21% NWSSP Typically serving internal purpose for one or more NWSSP directorates

The high-level update displays the current status of the schemes where PMO are engaged at any level and attached in Appendix A is the current graphical performance and data set.

Resource Update

Within the last month Rhys Owen (Project Manager) has left the organisation and the PMO has successfully recruited a new Project Manager who will join the team in the coming months, bringing a blend of private sector agile and Health board transformation experience to the team.

All work supported by Rhys has been handed to interim support to ensure continuation of progress.

New Work

Two new projects are listed for assessment and onboarding in the new period.

SLT Recommendation

SLT are asked to:

- Note the update on progress with key projects
- Consider the consequences and agree the current assessment of risk
- Provide direction on this revised format of reporting to Ian Rose, Head of PMO.

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	N₩SSP Planning, Performance & Informatics PMO							
Reporting Period	Mag - June 21-22	Date Completed	16/06/2021					
Summary	The purpose of this report is to provide a progress update.	Completed By	lan Rose					

Status St

Summary Update :





24 projects in progress. No change on last month

Green : Project on track -Time, Cost, Scope Blue : Closed/ Delivered or Closed/Withdrawn/Ceased

Amber : At risk of failing - Time, Cost or Scope Red : Failed Time, Cost or Scope - urgent attention req'd

*Agreed between Proj Man and Proj Exec/Lead/Proj Dir/SRO

Original Completion based on Scoping discussion / Revised Completion based on any exception plans or agreed date variations by appropriate board, where they are the same this would indicate an exception date has notas yet been agreed. % Completion based on overall task completion vs overall planned tasks

All Vales Project & Programmes								
Scope 7 Project Name FSRO RAG SIZE Revised Completion Original Completion Support Type								
			RAG	SIZE	Revised Completion	Original Completion		Support Type
All Vales	GMPI - existing liabilities scheme	Mark Harris	Green	Large	31/03/2021	31/03/2021	84%	Project Management
	IP5 Programme SOC	Mark Roscrow	Green	Large	31/08/2021	01/03/2020	100%	Project Management
	Medical Examiner	Andrew Evans	Amber - Cost	Large	31/08/2021	31/03/2021	72%	Project Management
	NHS Wales Staff Benefit Portal	Alison Ramsey	Paused	Medium	01/12/2021	31/12/2020	20%	Project Management
	Performers List	Neil Jenkins	Green	Medium	31/03/2022	31/03/2022	0%	Project Management
	PPE Winter plan	Andy Butler	Green	Medium	31/08/2021	31/03/2021	93%	Project Management
	Primary Care NHAIS GP Payments (MVP)	Neil Jenkins	Amber - Time	Large	30/10/2021	01/05/2020	74%	Project Management
	Single Lead Employer Phase 2 (Psychiatry/GP/Paediatrics & Higher \$		Green	LargeXorg	01/09/2021	30/09/2021	70%	Project Management
	Student Awards System Existing Stablisation and New System Spec	Darren Rees	Amber - Cost	Medium	31/03/2022	31/03/2021	20%	Project Management
	TRAMS Phase 2 OBC Developments	Neil Frow	Green	LargeXorg	31/03/2022	31/03/2022	0%	Project Management
Scope 4	Project Name	SRO	RAG		Revised Completion	Original Completion	% Completion	Support Type
Healthboa	Hywel Dda - Transfer of Transport Services	Tony Chatfield	Not Started	Small	30/06/2020	30/06/2020	To Be Rescoped	Project Management
	Ward Stock Storage Assessment	Greg Dix	Amber - Time	Small	01/10/2021	01/03/2021	10%	Project Management
	Cwm Taf Phase 2 Community Dressings	Suzanne Scott-Tho	Green	Medium	31/03/2022	31/10/2021	0%	Project Management
Scope .T	Project Name	SRO	RAG		Revised Completion	Original Completion	% Completion	Support Type
NVSSP	Corporate Health Standards	Gareth Hardacre	Green	Medium	31/10/2021	31/10/2021	71%	Project Management
	Cleric Procurement of New System / contract	Tony Chatfield	Amber - Time	Small	01/04/2021	31/12/2020	50%	Project Management
	Automatic Data Capture [ADC] devices	Graham Davies	Not Started	Medium	Not PMO Measured	Not PMO Measured	0%	Project Management
	New PMO software Requirements - Identifying a system (BC Develo	Alison Ramsey	Green	Medium	31/08/2021	31/05/2020	100%	Project Management
	NSV Codes/Review	Tony Chatfield	Not Started	Small	AWI Initial Scoping	AWI Initial Scoping	10%	Project Management
	VPD Codes	Gareth Hardacre	Green	Medium	01/09/2021	01/07/2021	55%	Project Management
	L&R Case Management System FBC	Mark Harris	Green	Medium	AWI Initial Scoping	AWI Initial Scoping	TBC	Project Management
	Change Champion		Not PMO Measured	Small	Not PMO Measured	Not PMO Measured	Not PMO Measured	Project Consultancy
	SMTL POW Building Expansion - Feasibity Study	Pete Phillips	Green	Small	30/06/2021	01/04/2021	90%	Project Management
	Agile Programme PPM Support		Not PMO Measured	Small	31/12/2021	31/12/2021	0%	Project Consultancy
		Simon Cookson	Green	Medium	31/03/2022	31/03/2022	0%	Project Management

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High Level Update

Key Individual Project/Programme Updates

Project Name Project Manager Project Exec/SRO

Student Awards Bethan Rees Lisa Williams / Darren Rees

Monthly Update (key/issues (blockages)/risks)

Status –Time (Amber) Cost (Amber) Quality (Amber)

Update

It has been agreed to continue with the BOSS software for a further year up to March 2022.

Parts of the existing system have now been migrated to new hosting to mitigate risks.

SBUHB remain the hosts of the main servers.

 An Outline Business Case has been produced covering both the refresh of existing equipment and the new procurement, and this has been submitted to NWSSP Finance.

Resources for IT Security work to mitigate the vulnerabilities of the existing system remain fragile.

Preparatory work with procurement to prepare for a tender process is now being undertaken, in parallel with the OBC approvals. Time remains a major risk with selection of a long-term software, implementation, testing, and deployment, all to be completed in advance of April 2022.

Project remains rag rated as Amber for time at this point.

Main Blockers/Observations

Five risks have been assessed as 16 or greater.

- a. Limited capacity of NWSSP IT resource could impact project.
- b. Limited funding could restrict new commercial agreement.
- Data security & end of support software could be a risk to the SAS system.
- d. GDPR risk from hosting on end of life systems (availability). Higher risk of a full Records Management breach, risks around the fragility of an unsupported system and the potential of data loss or corruption of thousands of student data records. Potential monetary penalties of several million pounds for a loss.

<u>Consequen</u>ces

The system is now suffering regular interruptions and downtime as the existing server capacity is exceeded. These are being managed on an ad hoc basis. Total system failure remains a possibility.

If a new provider is not selected, procured, and implemented by the end of March 2022, we will continue to operate at risk with little or no support from April 22 and be completely reliant on internal IT resources, which are already overstretched.

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	Project Manager	Project Exec/SRO
L&R Case Management System	Peter Elliott	Mark Harris

Monthly Update (key/issues (blockages)/risk assessments)

Status- Green

Update

A funding approval has been given by Welsh Government and a funding letter has been received.

We are now preparing contract documentation for signature.

Care is being taken to ensure that the contract does not depart from the specification, and that the contractor is fully committed to all the required deliverables. We are also liaising closely with DHCW to ensure they remain fully aligned and that the right resources are available at the right time

It is intended to sign the contact within 2 to 4 weeks, and to enable the implementation activity to proceed.

Main Blockers/Observations

Key concern is the access to NWSSP IT Security Resource, which is a single point of resilience.

There is a potential of time delay once the contractor complete system design, to obtain IT Security and IG approvals before implementation can take place. As the software contract is "Design & Build" these approvals cannot all be obtained until the "Design" part of the scope is complete.

Consequences

If timely IT Security advice is not available at key stages in the implementation, then live deployment of the system could be delayed, or vulnerabilities accidentally introduced to this sensitive data set. This could result in time delay impacting the profile of payments.

6/14 122/292



Project NameProject ManagerProject Exec/SROMedical ExaminerBethan ReesAndrew Evans (PCS)

Monthly Update (key/issues (blockages)/risks)

<u>Status</u> – <u>Amber</u> (Overall) <u>Green</u> (Time) <u>Red</u> (Cost) <u>Green</u> (Quality) <u>Update</u>

It has been proposed to close Project Management for this service.

The full management structure is in place and has taken responsibility for the service. The question of the future funding assurance letter remains unresolved, and recruitment actions are ongoing to complete the staffing establishment.

The SRO has therefore requested that PM support to the Service Management Board continues until the end of Q3, to support resolution of the remaining parts of the scope.

Main Blockers/Observations

One risk currently exists over the 15 threshold which are RED

a. A lack of confirmation confirming full funding of Welsh model could mean insufficient fund to cover costs – at present the Letter of Assurance has not been received.

Consequences

The funding letter is ultimately needed to comply with governance and assurance requirements for the service. Currently funding continues to be supplied, without the documentation in place.

Project Name	Project Manager	Project Exec/SRO		
TRAM's Stage 1	Peter Elliott	Andrew Evans (Welsh Gov)		
Monthly Update (key/issues (blockages)/risk assessments)				

Status - Closed

Update

The Scoping Project is now functionally closed.

Main Blockers/Observations

None observed

Consequences

None

7/14 123/292



Programme Name	Programme Manager	Project Exec/SRO
TRAMs Programme	Peter Elliott	Andrew Evans (Welsh Gov)
		& Neil Frow

Monthly Update (key/issues (blockages)/risk assessments)

Status- Green Update

Interim approval by the Accountable Officer was given in April for the following actions:

- Mobilisation of the SE Wales Hub OBC project
- Recruitment of the Service Director
- Ongoing staff communications and liaison
- Other preparatory work

The Service Director has now been selected, awaiting formal confirmation of his start date. As he is already mobilised as part of the Programme Team, he is already taking responsibility for key decisions related to the new service.

The Programme Board will meet for the first time on Wed 16th June to formally approve various pieces of programme documentation including the mobilisation of the following projects:

- SE Wales Hub OBC
- North and SE Wales Hubs SOC projects
- Organisational Change Project
- Education & Training Project
- Process & Digital Project

Approval has now been given to recruit two capital funded project managers to help progress these scopes of work.

The Programme Finance lead is preparing a "Programme Financial Control Approach" and a schedule, mapping Programme financial responsibilities to Organisational delegated authorities. He is actively engaged with Welsh Government and SES funding partners to ensure transparency and control in the draw down and expenditure of the capital budget.

Main Blockers/Observations

Project Manager posts have yet to be advertised, owing to actions still in progress within People & OD.

Consequences

Pace and momentum will slip, unless the required Project Management resources are provided.

8/14 124/292



Project Name Project Manager Project Exec/SRO
Laundry Transition Ian Rose Neil Frow

Monthly Update (key/issues (blockages)/risk assessments)

Status - Green Update

Three Laundries continue to operate on the agreed basis as a result of the transfer in April.

- Glan Clwyd Moto is being developed between SES and BCU Estates with no issues observed so far
- Llansamlet asset transfer continues with Legal & Risk progressing documentation and papers in readiness for signing by Velindre.
- Greenvale continues to delay the transfer of assets and also delays in payment of the Q1 agreed linen charges. This has been escalated to the Dir of Estates for payment.

Service feedback confirms operations continue as expected with little or no issues to report in relation to production and supply of linen.

Work continues on the H&S plan as a result of the output from the H&S workstream which is being managed by Laundry Operations. This will also allow an update for the SSPC in July.

Main Blockers/Observations

Confirmation of board sign off from ABUHB to enable S1 S2 process to conclude on time, Dir of Estates ABUHB is preparing a paper for board consideration.

Consequences

Delays to the proposed transfer of services and potentially impacts the S1 S2 process.

Project Name Project Manager Project Exec/SRO

Brexit / NSDR Alison Lewis Mark Roscrow

Monthly Update (key/issues (blockages)/risk assessments)

Status- Blue

<u>Update</u>

The project has now closed.

Main Blockers/Observations

All main blockers have been removed or mitigated

Consequences

None

9/14 125/292



Project Name Project Manager Project Exec/SRO

NHAIS GP Payments Gill Bailey Neil Jenkins

Monthly Update (key/issues (blockages)/risk assessments)

Update

GMS (GPs) Payment system:

Due to further delays and issues with establishing the VPN tunnel and subsequently ADFS connectivity, the Go Live date has been amended to:

- SBu September
- All other HBs October

The unavailability of DHCW Networking team (further escalation to Director of ICT on 7th June), has resulted in more lost time within the project.

A joint meeting on the 9th June to 'troubleshoot' the VPN issue has still not provided a positive outcome. BSO, NI now need to raise a support ticket with their 3rd party provider to determine root cause.

The Project Team have agreed to review the Go live timeline on the 22nd June as the next critical cut-off point. There is a clear risk that the implementation timeframe stated above will not be achieved.

Work is continuing with loading data into the new system as well as developing functionality using an agile approach:

Requirement, Development, Peer review of coding, Internal system test, Release to UAT, UAT testing, Identification of bugs, fixes. The cycle is repeated until functionality is signed-off.

Contractor Payments processed through Accounts Payable:

Emergency Dental Service payments for CVuHB and CTMuHB successfully processed at the end of May. The remaining GP categories are dependent upon the progress and implementation of new GMS (GP) Payments system.

Main Blockers/Observations

Unable to implement ADFS as reported above, availability of 'clean' data from the existing system and delays with establishing the functionality requirement.

Consequences

The project will not be implemented on time with the risk of reputational damage within the Primary Care sector as the go live date is continued to be pushed back.

10/14 126/292



Project Name	Project Manager	Project Exec/SRO
Primary Care Sustainability –	Gill Bailey	Lisa Williams
Development of OOH /111	-	
Functionality		

Monthly Update (key/issues (blockages)/risk assessments)

Update

Please note that no formal Project/Programme structure exists for this piece of work and support is provided Ad Hoc.

Update from Employment Services: Update from Employment Services: OOH/111 functionality released on 27th May.

Whilst this is not a risk to the delivery of this OOH/111 functionality, there is an ongoing concern relating to the programme which was highlighted at the recent quarterly review meeting with assurance provided this will be addressed promptly.

Support for this project has ceased but future discussion is required around the wider emerging Primary Care Sustainability Programme.

Welsh Government funds the Primary Care Sustainability agenda in its entirety.

Main Blockers/Observations

Consequences

Project Name	Project Manager	Project Exec/SRO		
Single Lead Employer - Phase 2	Rhys Owen	Malcolm Lewis		
Monthly Update (key/issues (blockages)/risk assessments)				
<u>Update</u>				

Phase 2

F1 (381) and F2 (351) foundation doctors to be on boarded in August.

Evaluation

Final Brief for advisory review shared with Programme Board and interviews with key stakeholders, led by Audit and Assurance, will take place in June.

Employment Management Agreements (EMA)

EMAs reviewed in June by host organisations, Health Boards and HEIW for EMAs in place for Foundation, Core and Specialty Medical and Dental Trainees based in Health Boards and host organisations. Minor amendments to EMAs have been made and updated versions to be shared in coming weeks.

Finance

SLE locum shift payment process currently being worked through before a pilot with the Health Boards to ensure the method works.

127/292 11/14



Main Blockers/Observations

Comms

Ongoing issue specifically at Health Board level that is monitored and managed at Programme Board. The evaluation of Phase 1 will assist with developing an Action plan to address and improve the current position.

Consequences

Comms

Where trainees are unaware of the SLE model and that they are being on-boarded onto a SLE this can then impact the progress of them completing relevant forms to ensure they are on-boarded onto the SLE in a timely manner.

Project Name	Project Manager	Project Exec/SRO
MOCP move from 120VPD to	Rhys Owen	Gareth Hardacre
043VPD		

Monthly Update (key/issues (blockages)/risk assessments)

<u>Update</u>

MOCP to 043 VPD took place on the 6th June. Data transfer completed without issue. Payroll checks completed – no anticipated disruption to service.

Pre MOCP tasks completed and Post MOCP tasks (including comms) are now currently in progress and tracked through a weekly operational project team call.

Employee access to ESR delayed until 18th June to ensure all annual leave/training etc has been checked and validated prior to handing back to users.

All professional user accounts (Employment Services) etc continue on 120 until 043 accounts can be issued.

Main Blockers/Observations

Nothing major to note at this stage

Consequences

None

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Project Name	Project Manager	Project Exec/SRO
Community Dressings Phase 2	Bethan Clift	Suzanne Scott-
CTMuHB		Thomas

Monthly Update (key/issues (blockages)/risk assessments)

<u>Update</u>

The first project team meeting of Phase 2 was undertaken with full participation from CTM Health Board nominations, PMO, Supply Chain and Health Courier Service.

The output of the initial project team meeting identified the need to review the community base locations, due to several being disbanded or relocated. The bases have now been remapped and agreed as accurate.

In order to successfully manage the change, engagement with end users is vital. Consequently, the project is being presented to the community teams of each ILG (Integrated Local Group).

Once this has taken place, a review of the storage position at each site can be undertaken. A Go live date will be dependent upon the outcome of the storage evaluation. Project Manager is in the process of updating the cost analysis as this was undertaken in March 2020.

Main Blockers/Observations

Supply Chain have identified potential resource issues as they are still supporting the Pandemic response and their senior staff are working on delivering a range of projects at the same time.

Consequences

Delay to the overall delivery of the project.

Project Name	Project Manager	Project Exec/SRO
Customer Contact Centre	Bethan Clift	Simon Cookson
Scoping		
Monthly Update (key/issues (blockages)/risk assessments)		

Update

The original scope of the project identified 19 contact centre type services, however, as the scoping stage has progressed, it has recognised that several Directorates are currently excluded from the scope.

To better identify opportunities, the team will engage with all directorates to understand and develop:

- High-level digital blueprint and directory of NWSSP.
- Service Cataloguing.
- Consolidated omnichannel matrix.
- Digital user library, to enable engagement with service users.
- Collect Customer Relationship Management (CRM) information that includes call volumes, customer feedback and WTE resource, which will be shared with Digital Public Wales for analysis.

Digital CRM asset register.

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Work is ongoing with the development of a NWSSP Optimisation Maturity Framework as well as continued discussions with DPW to develop a questionnaire for our service users.

Main Blockers/Observations

Resource

The main observation is the lack of dedicated resource from each department as pressures on BAU continue, however, it has been agreed that staff from the Service Improvement team within Employment Services can support the initial discovery stage.

Communication

Due to most Health Board communication teams only publishing Covid-19 related communications, it may prove a challenge to issue the questionnaire to our customers.

Consequences

Unable to understand what our customers/users require.

Delay to the overall delivery of the project.

Appendix A

Performance and Information

June 21 Graphs.pdf

14/14 130/292

AGENDA ITEM:XX

22nd July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

Finance and Performance Update Report

ARWEINYDD:	Andy Butler, Director of Finance &
LEAD:	Corporate Services
AWDUR:	Finance Team
AUTHOR:	
SWYDDOG ADRODD:	Andy Butler, Director of Finance &
REPORTING	Corporate Services
OFFICER:	

Pwrpas yr Adroddiad: Purpose of the Report:

The purpose of this report is to provide the SSPC with an update on finance and performance matters within NWSSP as at 30th June 2021.

Llywodraethu	Llywodraethu/Governance		
Amcanion: Objectives:	Value for Money - To develop a highly efficient and effective shared service organisation which delivers real terms savings and service quality benefits to its customers. Excellence - To develop an organisation that delivers process excellence through a focus on continuous service improvement, automation and the use of technology.		
Tystiolaeth: Supporting evidence:	-		

Ymgynghoriad/Consultation:	

1/12

Adduned y Pwy	/llgc	or/Committee	Re	solution (inser	t √)):	
DERBYN/ APPROVE		ARNODI/ ENDORSE		TRAFOD/ DISCUSS		NODI/ NOTE	√
Argymhelliad/ Recommendati	on	2. Note the influence June 2021 3. Note the performan	inan e si bene perfo nce i	cial position to 3 gnificant level efits generated lermance against ndicators to 30th ent of this update	of by N the I Jun	profession WSSP to 3 high-level to 2021.	nal 30 th key

Crynodeb Dadansoddi	
Summary Impact Ana	lysis:
Cydraddoldeb ac	No direct Impact
amrywiaeth:	·
Equality and	
diversity:	
Cyfreithiol:	No direct Impact
Legal:	
Iechyd Poblogaeth:	No direct Impact
Population Health:	
Ansawdd, Diogelwch	No direct Impact
a Profiad y Claf:	
Quality, Safety &	
Patient Experience:	
Ariannol:	Distribution to NHS Wales
Financial:	
Risg a Aswiriant:	Consolidation of Financial Risk
Risk and Assurance:	
Safonnau Iechyd a	No direct Impact
Gofal:	
Health & Care	
Standards:	
Gweithlu:	No direct Impact
Workforce:	
Deddf Rhyddid	Open
Gwybodaeth/	
FOIA	

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Dashboard Summary: Period 1st April 2021 to 30th June 2021

Summary Position

	Annual Budget	YTD Budget	YTD Expend	YTD under/ overspend
	£'000	£'000	£'000	£'000
Income	-463,479	-91,539	-92,652	-1,113
Pay	227,592	44,048	43,094	-954
Non Pay	189,601	55,967	56,594	626
WRP - DEL	108,259	7,566	7,566	0
Distribution	750	0	0	0
Underlying Underspend	0	0	1,440	1,440
	62,723	16,043	16,042	0





Covid Expenditure

	YTD	FY Forecast
	£m	£m
NWSSP Operational	1.266	5.669
NWSSP PPE	0.004	0.013
Mass Vacc - PPE	0.874	3.754
Mass Vacc - non PPE non pay	0.148	0.668
Mass Vacc - pay	0.198	0.892
Social Care/Primary Care PPE	6.683	26.735
TOTAL	9.173	37.730

2020/21 Outturn

As previously reported the outturn position for 2020/21 was a £22k surplus. Audit Wales have completed their audit and there were no audit adjustments having an impact on the outturn position.

Forecast Position 2021/22

The forecast outturn position is break-even. At 30th June, however we are reporting an underspend of £1.440m compared to £0.478m in M3 2020/21. A detailed review of the position is currently being undertaken.

Any additional savings identified will be utilised on non-recurrent investments within NWSSP including the major TRAMS and Laundry projects with any balance distributed to NHS Wales and Welsh Government.

Key Movements in month

Most of the service underspends continue in line with run rates evidenced in 2020/21.

The majority of the in-month underspend is across pay lines due to vacancies that have not been appointed to.

Over-achievement of income has also been a contributing factor primarily within Legal & Risk due to the revised process to recharge clinical negligence solicitor costs on a monthly basis to the DEL budget from 2021/22 and invoicing in month for chargeable work.

Q1 Annual Plan Refresh

As requested by Welsh Government we reviewed our annual plan and re-submitted it at the of June 2021.

The key movements in our refresh were in respect of revised income assumptions for PPE issues and Single Lead Employer recharges.

Detailed Position

Service	Annual Budget	In Month Budget	In Month Expenditure	In Month Variance	YTD Budget	YTD Expend	YTD under/ overspend
	£0k	£0k	£0k	£0k	£0k	£0k	£0k
Audit & Assurance Services	2,694	269	247	-22	807	726	-81
Corporate Services including AP	6,722	-101	-93	8	-170	-340	-170
Counter Fraud Services	455	38	37	-1	113	112	-1
CTES	406	-62	-52	10	-165	-164	1
Employment Services	10,775	917	875	-41	2,714	2,638	-75
Laundry Services	13	0	-21	-21	13	-75	-88
Legal & Risk Services	3,215	265	-5	-270	795	382	-414
Medical Examiner Service	34	6	3	-2	9	8	0
Primary Care Services	11,443	952	927	-26	2,855	2,730	-125
Procurement Services inc. HCS	18,307	2,469	2,168	-301	6,834	6,623	-211
Planning, Performance & Informatic	2,853	234	187	-47	692	578	-114
Single Lead Employer (Inc GP's)	0	0	0	0	0	0	0
SMTL	682	56	60	4	169	144	-25
Specialist Estates Services	2,999	249	240	-9	748	728	-20
WIBSS	0	0	0	0	0	0	0
Workforce and OD	2,475	213	175	-39	626	511	-116
Corporate Reserves	-63,823	-5,505	-4,747	759	-16,040	-14,600	1,440
Distribution	750	0	0	0	0	0	0
	0	0	0	0	0	0	0

Welsh Risk Pool, Risks and Capital Summary: Period 1st April 2021 to 30th June 2021

Welsh Risk Pool Position

Expenditure type	Position as at M3 2020/21	Position as at M3 2021/22
	£m	£m
Claims reimbursed & WRP Managed Expenditure	5.996	38.062
Periodical Payments made to date	0.610	0.233
Redress Reimbursements	0.383	0.680
EIDO – Patient consent	0.000	0.062
Clinical Negligence Salary Subsidy	0.000	0.137
WRP Transfers, Consent, Prompt, CTG	0.002	0.049
Movement on Claims Creditor	13.097	-31.657
Year to date expenditure	20.088	7.566

DEL Forecast Position

Month 3 2021/22	£000s
Actual spend to June 2021 (Excl Redress)	7,188
Settled cases - awaiting payment	7,153
JSM/RTM/Offer	34,995
PPO's to March 2022	14,501
Sub Total	63,837
Future Estimated Costs	60,476
Mth 3 21/22 DEL forecast	124,313

Welsh Risk Pool

The DEL expenditure to M3 is £7.6m, compared to £20m at this point last year. The IMTP forecast for the year is £124m and includes a £1m Redress forecast overspend. The updated DEL forecast at M3 confirms this forecast remains an accurate projection at this stage of the financial year.

Capital Allocation

Scheme	Allocation	YTD Spend	Balance Outstanding
	£000	£000	£000
Hardware/Software	100	0	-100
Premises/Accommodation	52	0	-52
SMTL	15	0	-15
Undistributed Discretionary Capital	433	0	-433
Discretionary Capital Total	600	0	-600
NWSSP-LARS Case Management System	348	0	-348
NWSSP-Laundry Services	550	0	-550
NWSSP-Transforming Access to Medicines	318	10	-308
IP5	633	0	-633
HQ LED	42	0	-42
Additional Capital Total	1,891	10	-1,881
TOTAL CAPITAL ALLOCATION	2,491	10	-2,481

Capital

We have £2.491m of capital funding in our CEL at the end of June against the £10.449m we included in our IMTP. Additional capital funding of £1.331m for Scan for Safety has been confirmed by Welsh Government and we await our CEL to be updated in July.

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Finance and Performance Update Report

INTRODUCTION

This report provides an update on the following to 30th June 2021:

- Cumulative Financial Position
- High Level Performance indicators

NWSSP Financial position

NWSSP had an underlying underspend position as at the 30^{th} June 2021 of £1.440m compared to £0.471m in June 2020.

Service	Annual Budget £0k	In Month Budget £0k	In Month Expenditure £0k	In Month Variance £0k	YTD Budget £0k	YTD Expend £0k	YTD under/ overspend £0k
Audit & Assurance Services	2,694	269	247	-22	807	726	-81
Corporate Services including AP	6,722	-101	-93	8	-170	-340	-170
Counter Fraud Services	455	38	37	-1	113	112	-1
CTES	406	-62	-52	10	-165	-164	1
Employment Services	10,775	917	875	-41	2,714	2,638	-75
Laundry Services	13	0	-21	-21	13	-75	-88
Legal & Risk Services	3,215	265	-5	-270	795	382	-414
Medical Examiner Service	34	6	3	-2	9	8	0
Primary Care Services	11,443	952	927	-26	2,855	2,730	-125
Procurement Services inc. HCS	18,307	2,469	2,168	-301	6,834	6,623	-211
Planning, Performance & Informatic	2,853	234	187	-47	692	578	-114
Single Lead Employer (Inc GP's)	0	0	0	0	0	0	0
SMTL	682	56	60	4	169	144	-25
Specialist Estates Services	2,999	249	240	-9	748	728	-20
WIBSS	0	0	0	0	0	0	0
Workforce and OD	2,475	213	175	-39	626	511	-116
Corporate Reserves	-63,823	-5,505	-4,747	759	-16,040	-14,600	1,440
Distribution	750	0	0	0	0	0	0
	0	0	0	0	0	0	0

NWSSP Professional Influence benefits

The main financial benefits accruing from NWSSP relate to professional influence benefits derived from NWSSP working in partnership with Health Boards and Trusts. These benefits relate to savings and cost avoidance within the health organisations.

The benefits, which relate to Legal Services, Procurement Services and Specialist Estates Services can now be allocated across health organisations for all areas other than construction procurement. This is not possible for construction procurement due to the mechanism utilised to capture the data. Detail for health boards and trusts is reported in the individual performance reports issued to health organisations quarterly.

The indicative financial benefits across NHS Wales arising in the period April 2021 – June 2021 are summarised as follows:

Service	YTD Benefit £m
Specialist Estates Services *	13.1
Procurement Services	10.9
Legal & Risk Services	16.4
Total	40.4

^{*}Does not include Building for Wales Quarter 1

PERFORMANCE

Performance Reporting - to Health Boards and Trusts

NWSSP performance reports continue to be produced and distributed on a quarterly basis. The Quarter 1 reports will be issued to the health organisations at the end of July. These reports reflect the ongoing developments in NWSSP performance reporting and incorporate feedback received to date.

Additionally, high level KPI data relating to the performance of each service for all Wales is detailed in the table below. This provides data for June 2021 (unless otherwise stated) along with comparison to the previous three periods.

KEY FINANCIAL TARGETS

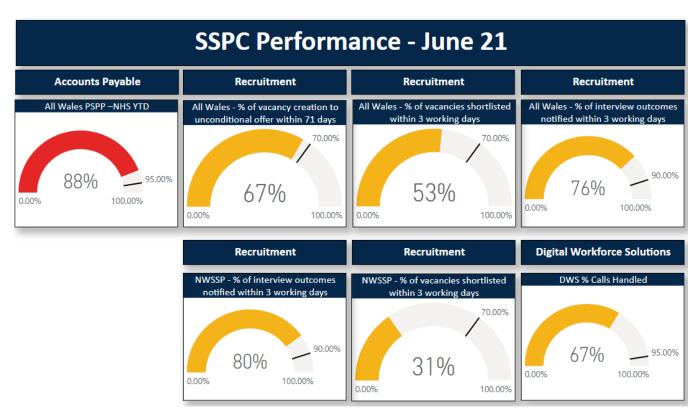
The table below provides a summary of key financial indicators for consideration.

Financial Position and Key Targets	Target		Position at 31-Mar	Position at 30-Apr	Position at 31-May	Position at
Financial Position – Forecast Outturn	Break even	Monthly	£21k surplus	Breakeven	Breakeven	Breakeven
Capital financial position	Within CEL	Monthly	CEL achieved	On Target	On Target	On Target
Planned Distribution	£0.75m	Annual	£2.00m	£0.75m	£0.75m	£0.75m
NWSSP PSPP NON-NHS % (In Month)	95%	Monthly	96.29%	95.22%	97.22%	96.89%
NWSSP PSPP NON-NHS % (Cumulative)	95%	Monthly	96.94%	95.22%	96.34%	96.54%
NWSSP PSPP NHS % (In Month)	95%	Monthly	88.51%	93.62%	90.28%	88.03%
NWSSP PSPP NHS % (Cumulative)	95%	Monthly	86.81%	93.62%	92.17%	90.46%
NHS Debts in excess of 11 weeks – Value	<£100k	Monthly	£0k	£606k	£609k	£289k

Financial Position and Key Targets	Target		Position at 31-Mar	Position at 30-Apr	Position at 31-May	Position at 30-Jun
NHS Debts in excess of 17 weeks – Value	£0	Monthly	£0k	£0	£0	£0
Variable Pay – Overtime	<£43k	Monthly	£63k	£60k	£53k	£61k
Agency % to date	<0.8%	Cumulative	0.96%	0.57%	0.48%	0.46%

KEY PERFORMANCE MEASURES

The dashboard below highlights the red/amber performance indicators for June 2021 and a brief explanation to the reason the target has been missed.



All Wales NHS PSPP – This KPI is reported directly from Welsh Government using the organisations MMR and is for information.

Recruitment KPIs – 4 of the 5 indicators measure the organisation's area of influence within the end to end recruitment timeline. To support the achievement of these targets, recruitment is currently undertaking workshops with each organisation to reflect on what worked well during COVID-19, what didn't work so well and what needs improving within the service.

The recommendations and any process changes that fall out of these workshops will be agreed with WODs. The vacancy creation to unconditional offer within 71 days KPI measures the whole timeline and will look to also improve from the above workshops.

DWS % **Calls Handled** – Performance has improved in this area due to lower volume of calls however resourcing issues within the team has had an effect on the performance. There is planned work to review staff resourcing and business processes in this area.

The table below provides a summary of key performance indicators for June 2021 which have been reviewed for 21-22, we will be looking to apply the use of Power BI in dashboard reporting during the year ahead.

				20/21			21/22		
KFA	KPIs	Target		February	March	April	May	June	Trend
Audit & Assurance									
Excellence	Audits reported % of planned audits	1%	Cumulative	56%	72%	85%	100%	1%	
Excellence	% of audit outputs in progress		Cumulative	34%	26%	15%	0%	19%	
Excellence	Report turnaround management response to draft report [15 days]	80%	Cumulative	73%	77%	76%	79%	100%	
Excellence	Report turnaround draft response to final reporting [10 days]	80%	Cumulative	100%	100%	100%	100%	100%	
	mar reporting [10 days]		Proc	urement Ser	vices				
Value for Money	Procurement savings *Current Year	£12.89m	Cumulative	£14.84m	£18.95m	Not Available	Not Available	£10,949,238	
			Ac	counts Payat	ole				
Excellence	All Wales PSPP - Non-NHS YTD	95%	Quarterly	Reported Quarterly	95.50%	Reported Quarterly	Reported Quarterly	95.40%	
Excellence	All Wales PSPP -NHS YTD	95%	Quarterly	Reported Quarterly	83.20%	Reported Quarterly	Reported Quarterly	88.30%	
Customers	Accounts Payable % Calls Handled (South)	95%	Monthly	98.90%	99.20%	99.80%	99.50%	Not Available	
			Emp	loyment Serv	rices				
Excellence	Overall Payroll Accuracy	99.60%	Monthly	Payroll 99.74%	99.61%	99.72%	99.78%	99.75%	
Customers	Payroll % Calls Handled	95%	Monthly	79.00%	72.90%	74.80%	70.00%	Not Available	
				Recruitment All Wales					
Excellence	All Wales - % of vacancy creation to	70.00%	Monthly	60.20%	64.20%	65.50%	65.90%	66.50%	
Excellence	unconditional offer within 71 days All Wales - % of vacancies approved	70.00%	Monthly	76.70%	75.30%	74.10%	74.70%	74.70%	
Excellence	within 10 working days All Wales - % of vacancies	70.00%	Monthly	56.90%	57.60%	52,20%	50.40%	53.20%	
Excellence	shortlisted within 3 working days All Wales - % of interview outcomes	90.00%	Monthly	68.10%	70.30%	72.10%	72.60%	76.20%	
LACEHETICE	notified within 3 working days	90.00 %	,	ment Respor		72.10 /0	72.00 70	70.20 70	
Excellence	Recruitment - % of Vacancies advertised within 2 working days of receipt	98.00%	Monthly	99.90%	99.90%	99.50%	99.90%	100.00%	
Excellence	Recruitment - % of applications moved to shortlisting within 2 working days of vacancy closing	99.00%	Monthly	99.60%	99.40%	99.70%	99.80%	99.90%	
Excellence	Recruitment - % of conditional offer letters sent within 4 working days	98.00%	Monthly	99.90%	99.20%	98.60%	99.70%	99.80%	
Customers	Recruitment % Calls Handled	95%	Monthly	95.10%	97.20%	97.40%	98.20%	95.80%	
			NV	VSSP as an O	rg				
Excellence	NWSSP - % of vacancies approved within 10 working days	70.00%	Monthly	100.00%	65.40%	54.30%	70.00%	79.70%	
Excellence	NWSSP - % of vacancies shortlisted within 3 working days	70.00%	Monthly	52.00%	48.00%	46.40%	64.50%	30.60%	
Excellence	NWSSP - % of interview outcomes notified within 3 working days	90.00%	Monthly	75.00%	89.70%	50.00%	54.50%	80.00%	

				20/	'21		21/22		
KFA	KPIs	Target		February	March	April	May	June	Trend
Student Awards									
Excellence	% of NHS Bursary Applications processed within 20 days	100.00%	Monthly			100.00%	100.00%	Not Available	←
Customers	Student Awards % Calls Handled	95%	Monthly	88.40%	96.60%	97.60%	95.40%	Not Available	
				Primary Care				Available	
Excellence	Primary care payments made in accordance with Statutory deadlines	100%	Monthly	100%	100%	100%	100%	100%	
Excellence	Prescription - keying Accuracy rates (Payment Month)	99%	Monthly	99.52%	99.64%	99.82%	99.68%	99.69%	
Excellence	Urgent medical record transfers actioned within 2 working days	100%	Monthly			100%	100%	100%	
	detroried Within 2 Working days			Legal & Risk					
Value for Money	Savings and Successes	£65m annual target	Monthly	£14,864,311	£6,163,085	£3,125,164	£12,382,667	£897,843	
Excellence	Timeliness of advice acknowledgement - within 24 hours	90%	Monthly	100%	100%	100%	95%	95%	
Excellence	Timeliness of advice response – within 3 days or agreed timescale	90%	Monthly	100%	100%	100%	100%	95%	
			٧	Velsh Risk Po	ol				
Excellence	Time from submission to consideration by the Learning	95%	Monthly	100%	100%	100%	100%	Not Available	
Excellence	Time from consideration by the Learning Advisory Panel to	100%	Monthly	100%	100%	100%	100%	Not Available	
Excellence	Holding sufficient Learning Advisory Panel meetings	90%	Monthly	100%	100%	100%	100%	100%	
		21.2	Specia	list Estates S	ervices				•
Value for Money	Professional Influence	£16m annual	Monthly	CTES		£332,321	£151,961	£12,626,413	/
Excellence	P1 incidents raised with the Central Team are responded to within 20	80%	Cumulative	CIES	99%	100%	100%	Not Available	
Customers	BACS Service Point tickets received before 14.00 will be processed the	92%	Monthly		100%	100%	100%	Not Available	
Digital Workforce									
Customers	DWS % Calls Handled	95%	Monthly	25.40%	81.89%	53.30%	44.90%	67.30%	
	O/ of incident manager	I I a d a		SMTL				Net	
Excellence	% of incident reports sent to manufacturer within 50 days of	Under Review	Monthly		67%	67%	100%	Not Available Not	
Excellence	% delivery of audited reports on time (Commercial)	87%	Monthly		100%	94%	100%	Available	
Excellence	% delivery of audited reports on time (NHS)	87%	Monthly		100%	Not Applicable	Not Applicable	Not Available	

COVID-19

The table below details the Covid expenditure incurred to date together with a full year forecast of our funding requirements from WG:

	YTD	Full Year Forecast
	£m	£m
NWSSP Operational	1.266	5.669
NWSSP PPE	0.004	0.013
Mass Vacc - PPE	0.874	3.754
Mass Vacc - non PPE non pay	0.148	0.668
Mass Vacc - pay	0.198	0.892
Social Care/Primary Care PPE	6.683	26.735
TOTAL	9.173	37.730

We have anticipated income from Welsh Government for all this expenditure, however we have not received formal confirmation of this funding. Welsh Government have confirmed that this funding will be approved imminently and we await this response following the Q1 plan refresh.

The NWSSP operational Covid costs are summarised as follows:

	YTD	Full Year Forecast
Pay - A&C	0.082	0.446
Pay - PS&T	0.000	0.113
Pay - E&A	0.512	1.979
Estates / Security	0.234	0.846
Insurance	0.017	0.067
Transport	0.383	2.093
Other	0.037	0.124
TOTAL	1.266	5.669

Further to the NHS Wales response to supply equipment to India to support their pandemic response, NWSSP equipment with a value of £0.521m was provided. We continue discussions with Welsh Government regarding the funding of this donation. In addition we are also working through the accounting implications of a donation of PPE to Namibia that was requested by Welsh Government.

Capital

The table below identifies the capital funding we have been allocated in our Capital Expenditure Limit at 30th June 2021 with an analysis of the spend to date against each of these schemes.

Scheme	Allocation	YTD Spend	Balance Outstanding
	£000	£000	£000
Hardware/Software Programme	100	0	-100
Stores Equipment/Upgrade	40	0	-40
SMTL IT Equipment	15	0	-15
Brecon House Automatic Fire Detection	12	0	-12
Undistributed Discretionary Capital	433	0	-433
Discretionary Capital Total	600	0	-600
NWSSP-LARS Case Management System	348	0	-348
NWSSP-Laundry Services	550	0	-550
NWSSP-Transforming Access to Medicines	318	10	-308
IP5	250	0	-250
IP5 Solar Panels	100	0	-100
IP5 LED	283	0	-283
HQ LED	42	0	-42
Additional Capital Total	1,891	10	-1,881
TOTAL CAPITAL ALLOCATION	2,491	10	-2,481

The high percentage of capital funds not yet spent is not unusual at this point in the financial year.

Welsh Risk Pool - June 2021

Resource 2021/22

Resource Utilised as at Month 3

As at the end of Month 3 £7.566m expenditure has been incurred by the WRPS and a detailed breakdown is provided below with the 2020/21 comparator.

Expenditure type	Position as at M3 2020/21	Position as at M3 2021/22	
	£m	£m	
Claims reimbursed & WRP Managed Expenditure	5.996	38.062	
Periodical Payments made to date	0.610	0.233	
Redress Reimbursements	0.383	0.680	
EIDO – Patient consent	0.000	0.062	
Clinical Negligence Salary Subsidy	0.000	0.137	
WRP Transfers, Consent, Prompt, CTG	0.002	0.049	
Movement on Claims Creditor	13.097	-31.657	
Year to date expenditure	20.088	7.566	

Expenditure is significantly lower than at this point last year and is mainly due to the cohort of claims which settled in April which were accrued into the 2020/21 position. These have reduced the 2021/22 expenditure position reported to Month 3 and can be evidenced from both the increased claims reimbursed and reduction in the claims creditor detailed in the table above.

DEL Forecast Expenditure 2021/22

The DEL forecast is set out in the table below following receipt of the Month 3 Health Board and Trust returns.

Month 3 2021/22	£000s
Actual spend to June 2021	7,188
Settled cases – awaiting payment	7,153
JSM/RTM/Offer	34,995
PPO's to March 2021	14,501
Sub Total	63,837
PI – estimate to March 2021	2,625
Highly likely – RTM planned	23,268
Possible settlements before 31/03/2021	20,472
Estimate - 40% of Probable Claims <£200K	1,993
Estimate – 40% of Certain Claims <£200K	7,350

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Month 3 2021/22	£000s
Estimate – Managed Claims	2,250
Legal & Risk - Clinical Negligence Salary costs (WG agreement)	518
Nosocomial Claims estimate	1,000
Estimate for Redress overspend 2021/22	1,000
Month 3 2021/22 DEL forecast	124,313
IMTP DEL Forecast 2021/22	123,495

The M3 DEL forecast is currently £0.818m higher than the DEL forecast included in our Annual Plan. There will be variation throughout the year as cases are brought forward from future years, whilst others are delayed into future years.

Estimated settlement dates on the database are dependent on the timely receipt of information from various external sources, e.g Health Boards, claimant solicitors, expert witnesses and barristers and subsequent findings can either cause further delays or accelerate the settlement date.

Previous year trends provide an indication of how case movements typically behave over the 12 month period. The detailed M2 and M3 DEL forecasts for 2021/22 indicate the current forecast is sufficiently close to the DEL 123.495m Annual Plan value to enable the management of the yearend position within the resource previously identified as being required. The forecast funding requirement under the Risk Share Agreement for 2021/22 therefore remains at £16.495m.

Cases are reviewed on a monthly basis for updated information held on the L&R database together with frequent dialogue throughout the year between the WRPS Finance Manager and L&R case handling solicitors. These discussions ensure the most up to date information possible is included in the monthly forecasts.

SUMMARY

The Partnership Committee are requested to note:

- 1. The 2021/22 M3 position is currently £1.140m underspent.
- 2. Capital funding for the Scan 4 Safety scheme has been confirmed by Welsh Government.
- 3. The forecast funding required under the WRP RSA remains at £16.495m.





AGENDA ITEM:xx 22 July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

People & OD Update - June 2021

ARWEINYDD:	Gareth Hardacre, Director of People & OD
LEAD:	
AWDUR:	Sarah Evans, Deputy Director of People & OD
AUTHOR:	
SWYDDOG ADRODD:	Gareth Hardacre, Director of People & OD
REPORTING OFFICER:	
MANYLION CYSWLLT:	Gareth.hardacre@wales.nhs.uk
CONTACT DETAILS:	

Pwrpas yr Adroddiad: Purpose of the Report:

The purpose of this report is to provide the NHS Wales Partnership Committee with a comprehensive update of current workforce performance across NWSSP through a range of key workforce information metrics.

The report also provides an update on current work programmes being undertaken by the People & OD Function as well as formal employee relations activity and organisational change and progress in promoting the Welsh Language within NWSSP.

Llywodraethu/Governance			
Amcanion: Objectives:	Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement		
Tystiolaeth: Supporting evidence:			

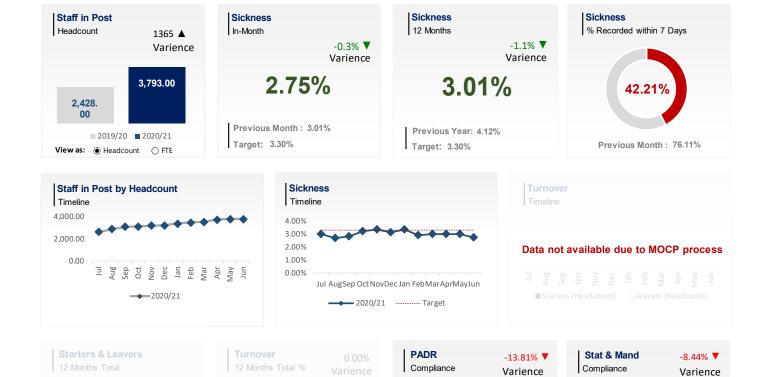
Ymgynghoriad/Consultation:	

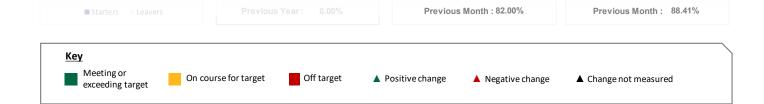
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Senior Leadership Team					
Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$):					
DERBYN/ APPROVE	ARNODI/ ENDORSE	TRAFOD/ DISCUSS	NODI/ NOTE	V	
Argymhelliad/ Recommendation					

Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:				
Cydraddoldeb ac amrywiaeth: Equality and diversity:	Update Report only – no direct impact.			
Cyfreithiol: Legal:	Update Report only – no direct impact.			
Iechyd Poblogaeth: Population Health:	Update Report only – no direct impact.			
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	Update Report only – no direct impact.			
Ariannol: Financial:	Update Report only – no direct impact.			
Risg a Aswiriant: Risk and Assurance:	Update Report only – no direct impact.			
Safonnau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link: http://www.wales.nhs.uk/sitesplus/documents/10 64/24729 Health%20Standards%20Framework 2 015 E1.pdf Governance, Leadership and Accountability			
Gweithlu: Workforce:	Update Report only – no direct impact.			
Deddf Rhyddid Gwybodaeth/ Freedom of Information	Not Exempt.			

Workforce Summary





68.19%

79.98%

Data not available due to

MOCP process

NWSSP STAFF IN POST

Data not available due to MOCP process

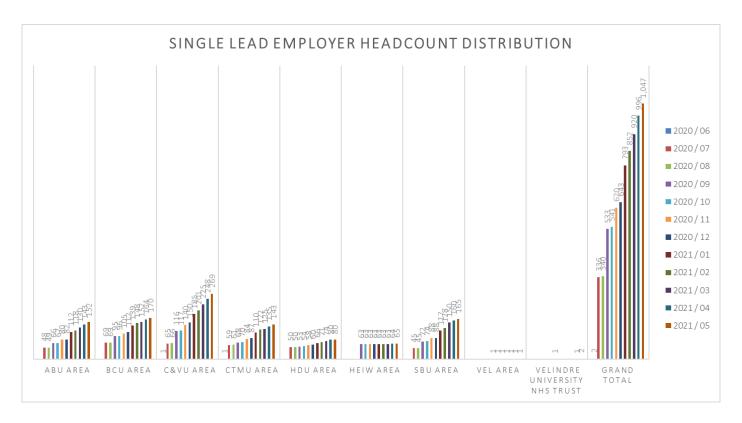
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The table below outlines the directly employed contracted full time equivalent (FTE) and headcount figures for NWSSP as at 30^{th} June 2021:

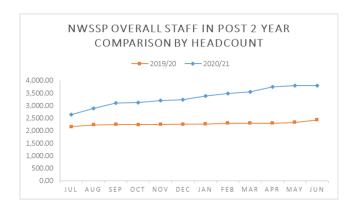
	Headcount FTE		Headcount Change			
Section	May 21	Jun 21	May 21	Jun 21	Headcount Change +/-	Headcount Change +/- %
Accounts Payable Division	131	133	125.55	127.95	2.00 ▲	1.50%
Audit & Assurance Division	52	51	49.96	47.96	-1.00 ▼	-1.96%
Corporate Division	36	36	31.36	31.64	0.00	0.00%
Counter Fraud Division	7	7	7.00	7	0.00	0.00%
Digital Workforce Division	16	19	14.93	17.93333	3.00 ▲	15.79%
E-Business Central Team Division	14	14	13.13	13.13	0.00	0.00%
Employment Division	356	349	324.71	316.86	-7.00 ▼	-2.01%
Finance Division	17	17	16.34	16.54	0.00	0.00%
Hosted Services Division	8	8	7.60	7.6	0.00	0.00%
Laundry Division	143	143	130.20	130.20	0.00	0.00%
Legal & Risk Division	134	137	124.82	126.82	2.00 ▲	1.46%
Medical Examiner Division	34	35	12.40	13.40	1.00 ▲	2.86%
People & OD Division	43	42	41.43	40.43	-1.00 ▼	-2.38%
Planning, Performance and Informatics Division	26	26	25.27	24.27	0.00	0.00%
Primary Care Division	298	298	273.69	274.69028	0.00	0.00%
Procurement Division	644	645	605.35	605.44667	1.00 ▲	0.16%
Single Lead Employer Division	1751	1749	1667.85	1665.70	-2.00 ▼	-0.11%
Specialist Estates Division	48	49	47.11	47.31	1.00 ▲	2.04%
Surgical Materials Testing (SMTL) Division	19	19	17.32	17.32	0.00	0.00%
Temporary Medicines Unit Division	11	11	11.00	11.00	0.00	0.00%
Welsh Employers Unit Division	4	5	3.80	4.80	1.00 ▲	20.00%
NWSSP Overall	3792	3793	3550.81	3547.99	1.00 ▲	0.03%

The graph below shows the distribution of the SLE headcount by Health Board area:



Nwssp Overall Headcount Trajectory

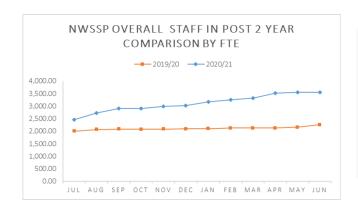
The graph below shows the rolling 12-month headcount trajectory compared to the same period for the previous year.





And the rolling 12-month FTE trajectory:

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Staff Turnover

The turnover rate for NWSSP inclusive of SLE and GP Trainees for the period 1st July 2020 to 30th June 2021 is **10.94%** compared to **12.76%** (exclusive of SLE and GP Trainees) for the same period last year.

Further work is being undertaken to provide more granular detail on the 12-month trends of starters and leavers and directorate breakdowns of this data.

Reasons for Leaving

The top three reasons for staff leaving NWSSP over the last 12 months are:

Top 3 Leaving Reasons			
Rank	Reason	Headcount	
1	Voluntary Resignation - Other/Not Known	37	
2	2 Voluntary Resignation - Promotion		
3	Retirement Age	18	

Other reasons for absence during this period include relocation (12); work/life balance (9); and end of fixed term contract (7)

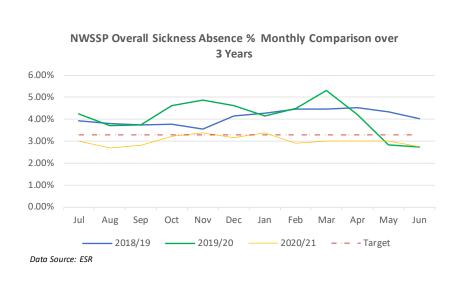
Of note, is the increase in those resigning for the purposes of better work/life balance. This is up from 3 in April 2021 to 9 in June 2021.

Of the **136** staff that left the organisation between June 2020 and May 2021, **95** staff left through voluntary resignation, equivalent to **69.9%** of all terminations. **0** dismissals occurred between May and June 2021.

SICKNESS ABSENCE

The chart below shows the average sickness absence rate for NWSSP for the three years, 2018, 2019, 2020 and 2021:

Month	Absence % (FTE)	TARGET	Abs (FTE)
Jul 20	2.99%	3.30%	1,972.71
Aug 20	2.67%	3.30%	1,958.79
Sep 20	2.83%	3.30%	2,026.30
Oct 20	3.21%	3.30%	2,387.43
Nov 20	3.38%	3.30%	2,418.39
Dec 20	3.16%	3.30%	2,337.80
Jan 21	3.36%	3.30%	2,504.52
Feb 21	2.91%	3.30%	1,980.59
Mar 21	3.00%	3.30%	2,270.95
Apr 21	2.99%	3.30%	2,177.37
May 21	3.01%	3.30%	2,258.55
Jun 21	2.75%	3.30%	2,749.57
	•		*

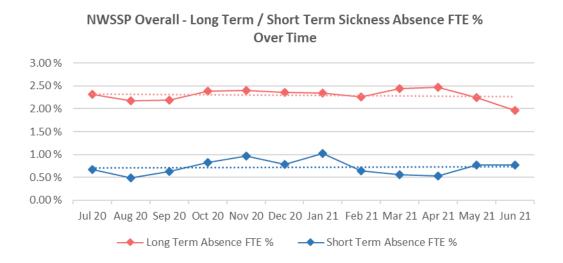


Despite seeing a slight increase in sickness absence in May 2021 (3.01%), June has seen a fall in sickness absence to its lowest level since August 2020 (June 2021 - 2.75%, August 2020 – 2.67%).

NWSSP's target is 3.30% in line with the Welsh Government target of reducing sickness absence by 1%.

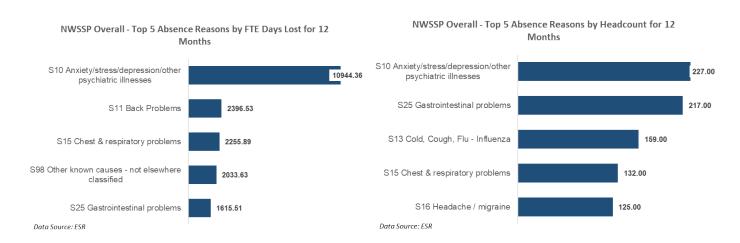
The in-month sickness absence rate for June 2021 was **2.75%**, which is a **0.3% point** <u>decrease</u> from the May 2021 position (.01%). The 12 month absence to 30th June 2021 is **1.1%** lower at **3.01%** (4.12% in June 2020).

The 12-month trend in Long Term versus Short Term Sickness absence for the period 1st July 2020 to 30th June 2021:



Reasons for Sickness Absence

The charts below show the top five reasons for sickness absence (by headcount and FTE respectively) within NWSSP for the period 1st April 2020 to 31st March 2021:



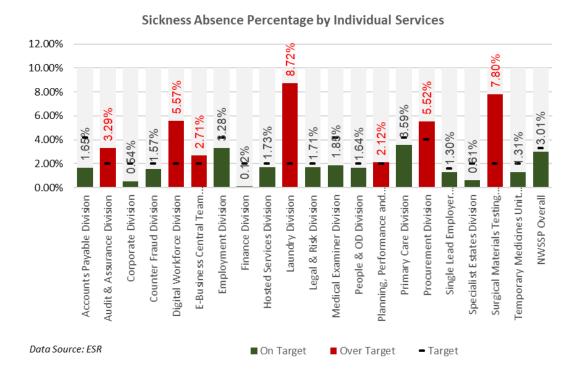
Anxiety, stress and depression continue to account for the greatest number of days lost due for sickness absence within NWSSP with just over 10,977 hours lost per annum, this accounts for a 4.3% increase on the previous 12-month figure of 10,524 hours. These hours lost could be reflective of the long-term nature of such absences.

NWSSP has numerous avenues of support for those suffering with their mental health, including the introduction of the Mental Health First Aiders Programme; the Peer Support Programme for COVID-19; and our Employee Assistance Programme.

We have again seen as shift between the hours lost to chest and respiratory; and gastrointestinal and those lost due to anxiety, stress and depression when considering the headcount.

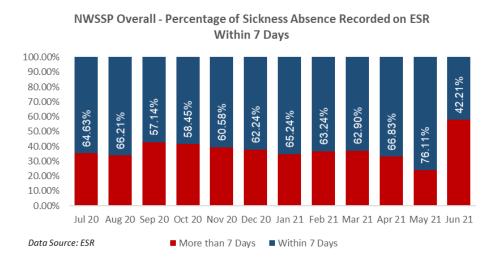
Sickness Absence by Service

The chart below shows the average sickness absence rate for each service from 1st July 2020 to 30th June 2021:



Percentage of Absence Entered Within 7 days

The graph below shows the percentage of absences entered ESR within 7 days of the first day of absence, in the period 1st July 2020 to 30th May 2021. May and June 2021 saw a substantial fall in those recording absences within 7 days. At 42.21%, this represents the lowest percentage in the rolling 12-year period. This decline is likely due to the move from VPD 120 to VPD 043 and the inability to access the system during this time.



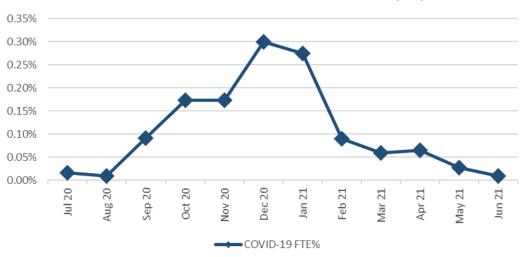
Covid-19 Absence

Covid-19 related absence continues to fall, with a reduction in related absences from 22 in February 2021 to 12 in March to 0 at the end of June 2021. Those under medical suspension remain at 1. Related absences are still occurring, so we will continue to report on this over the coming months.

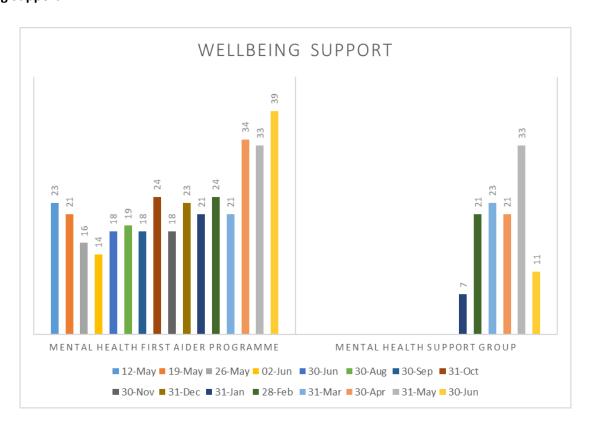
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Wellbeing Support



75.9% of our wellbeing support to date has been provided by the Mental Health First Aiders. The Mental Health Support Group continues to demonstrate early success with 116 individuals participating in the groups since its inception in January 2021.

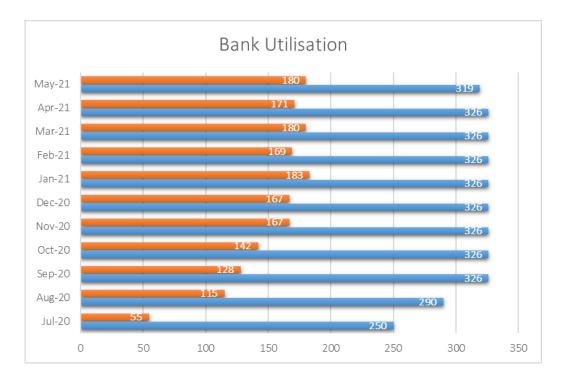
BANK AND AGENCY

Bank Usage

Following a reduction in bank usage in May 2021 (171), we have seen a rise once again in June, taking engagement of workers to 180. This is the second highest period of engagement seen since reporting began.

Extensive work is being undertaken to improve the service offered in relation to Bank & Agency and to make this more responsive and customer focused. Our aim is to deliver a service where supply is based on immediate need, to fulfil short-term gaps in resource rather than covering long term vacancies where more effective resourcing solutions can be found. A communication has therefore been released confirming that the use of bank workers is for a maximum period of 3 months, and should longer solutions be required, engagement with the Divisional Business Partnering teams is required to discuss alternative resourcing and contractual options.

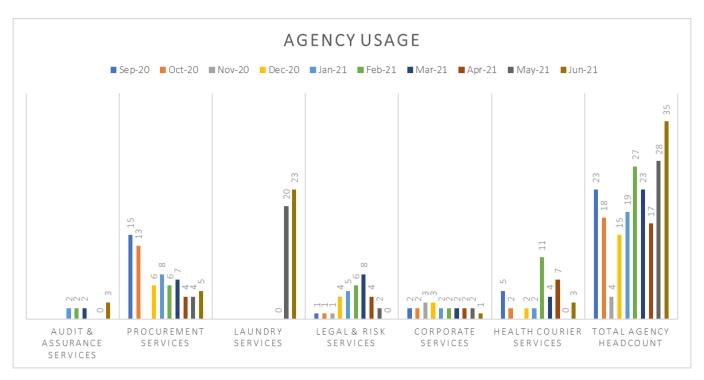
Following the implementation of Allocate Health Rostering system (provisional date of 4th October 2021), we will be undertaking a piece of work looking at the the worker experience and how this can be improved, recognising the value that our temporary workofrce provides to us as an organisation.

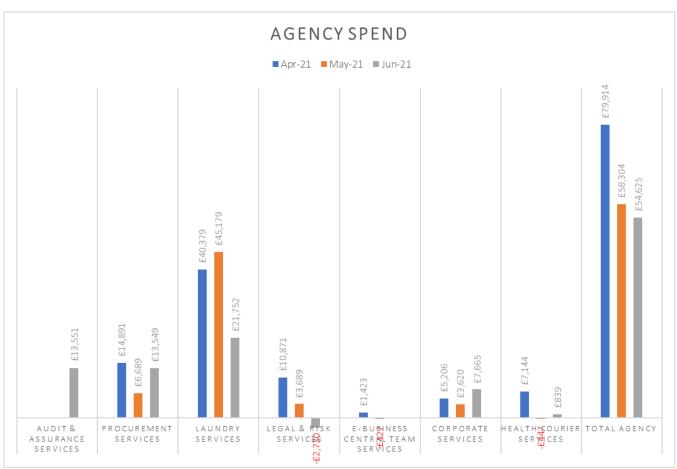


Agency Usage

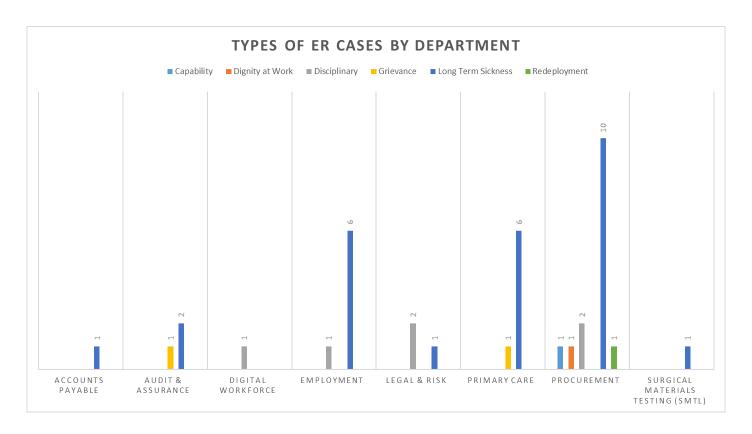
Data provided by Finance suggests that in June 2021 we engaged a total of 35 workers from Agencies, of those 23 were within Laundry accounting for 68.6% of the total placements; 5 were placed in Procurement (14.3%), 3 each in Health Courier Services and Audit & Assurance (8.6%), and 1 within Corporate Services (2.9%).

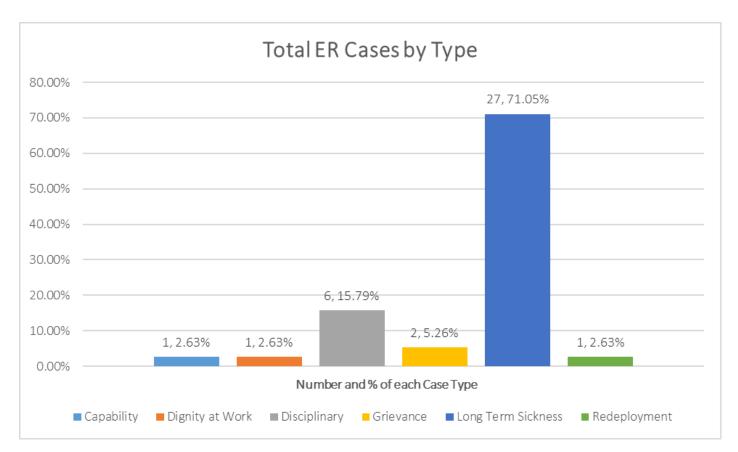
Total agency spend for the month came in at £54,625. This represents a fall in spend of £25,289 since April 2021. Work continues moving those on agency contracts to our Bank service and, for example with Laundry, to establish how we can fill the vacancies the that these roles are essentially covering.





EMPLOYEE RELATIONS ACTIVITY





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PADR Compliance % by Division



NWSSP completed **68.19%** of Appraisal Reviews as of 30th June 2021, excluding new starters for 3 months, bank workers, GP trainees and those staff who are on career break, maternity & adoption, external secondment or suspension. This represents a **12.05% point decrease** on the data recorded for 31st March 2021 where the figure sat at 80.24%. This decline is again likely due to the move from VPD 120 to VPD 043 and the inability to access the system during this time.

LEARNING COMPLIANCE

Statutory and Mandatory Training

NWSSP is currently **77.69%** compliant with the Core Skills Training Framework, which is above the recognised minimum standard for statutory and mandatory training. This figure is down 7.01% points on the previous month. The move from VPD 120 to VPD 043 and the inability to access the system during this time is the likely reason for this decline. Please note this excludes GP trainees and bank workers.

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Statutory & Mandatory Compliance % by Division



Note: Compliance based on the following competencies:

CSTF | Equality, Diversity and Human Rights - 3 Years

CSTF | Fire Safety - 2 Years CSTF | Health, Safety and Welfare - 3 Years

CSTF | Infection Prevention and Control - Level 1 - 3 Years

CSTF | Information Governance (Wales) - 2 Years

CSTF | Information Governance (vales) - 2 Years
CSTF | Moving and Handling - Level 1 - 2 Years
CSTF | Resuscitation - Level 1 - 3 Years
CSTF | Safeguarding Adults - Level 1 - 3 Years
CSTF | Safeguarding Children - Level 1 - 3 Years
CSTF | Violence and Aggression (Wales) - Module A - No specified renewal

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^{*} MAND | Cyber Awareness | Core

^{*} included in compliance percentage from December 20 SMT onwards.

WELSH LANGUAGE UPDATE

At the last NWSSP Committee Colleagues requested an update report in relation to NWSSP's progress in promoting the Welsh Language within NWSSP.

Appendix A details NWSSP's progress in the following areas: -

- Delivering welsh language support service to all departments across NWSSP
- Prioritising the Welsh language in our service planning and delivery across NHS Wales;
- Providing Welsh language services to patients, students, candidates and many other of our service users.

The report is also available on request to SLT and SSPC members in Welsh.

Key actions going forwards are:

- Greater clarity as to the key performance indicators to be reported to NWSSP and SLT Committee meetings for ongoing monitoring purposes;
- All Heads of Service/Managers need to ensure that all staff note their Welsh language skills on ESR, so that we have a higher compliance level there.

TUPE TRANSFERS & ORGANISATIONAL CHANGE PROCESSES

We have successfully transferred 3 employees (2.67 wte - 1 x band 3 and 2 x band 2) from the Receipt and Distribution Centre in Cwm Taf Morgannwg UHB into NWSSP. This Transfer was effective from 5^{th} July 2021. The new arrangements will standardise the supply chain services across Cwm Taf Morgannwg UHB and help us move towards an enhanced put away service for the Health Board.

An OCP has been completed in Greenvale Laundry to remove Sunday working. Staff no longer wanted weekend working which has successfully been achieved through this change process. This has been effective from 1st July 2021

TRANSFORMING ACCESS TO MEDICINES (TRAMS)

Colin Powell (Director of Pharmacy Technical Services) will be starting with us on 6th September 2021. Following Colin's appointment, we have reviewed the All Wales Workforce Subgroup. Our first session is due to take place on 6th August and will introduce Lee Wyatt (Programme Director), Sarah Evans (Deputy Director of People & OD) along with Colin to the Group. Our intention is to review and update the initial Workforce Principles document attached to the consultation, in readiness to share a proposal with UHB workforce Colleagues. We will then turn our attention to developing a Workforce Plan and structure and compiling the consultation documents, for the newly created Pharmacy Technical Service, to achieve staff consultation in early 2022 for the proposed management and leadership arrangements.

AGILE WORKING

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Following feedback from the staff and leader engagement sessions that we facilitated throughout June 2021, there are various amendments suggested for the agile toolkit, prior to being presented to SLG. It is planned that an updated toolkit, along with suggested KPIs are presented to SLG in August 2021 for formal approval. We are currently working with the Welsh language team to ensure the final document is ready for release in both languages. The estates utilisation workstream is ongoing and members of the agile group, IT, facilities and SES continue to meet with desk booking providers to understand what types of app are available.

DIVERSITY AND INCLUSION

People and OD are working closely with the Corporate Services Manager regarding ways to support the diversity and inclusion agenda in NWSSP. Staff will receive a link to an online survey during July to find out more about what inclusion means to them and how the organisation can support them and provide appropriate and relevant support, guidance and interventions.

A new staff network has been launched for LGBTQ+ colleagues and allies. The group is called Proud (Balch) and staff have been asked to get involved in shaping the group and contributing to the logo which will be used by the group as part of all future communications. The group is also having input into Virtual Pride Week which involves a number of virtual events taking place from 23rd-27th August and would welcome senior leadership presence and support during this week.

HEALTH & WELL-BEING

People and OD are currently visiting hard to reach areas with information and support regarding health and wellbeing resources. Visits are being undertaken in stores and laundry environments over the coming weeks and months.

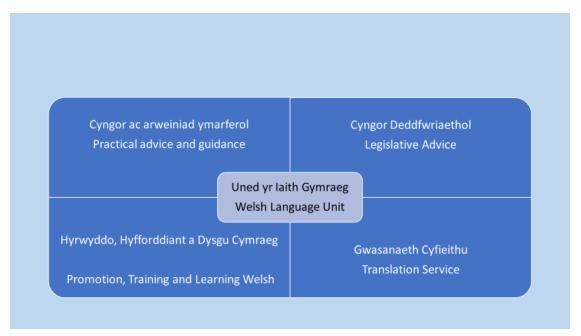
Healthy Working Relationships/Respect and Resolution Policy

We took the opportunity to hold our third Leadership Masterclass on Healthy Working Relationships in May 2021 given that the Respect and Resolution will be in place by 1st June 2021. It was pleasing to see so many attendees engaged in the session and we are working with services locally to embed and support managers with this new approach

Welsh Language Unit - April to June 2021

The Welsh Language Unit at NWSSP has been developed to deliver a Welsh language support service to all departments and to prioritise the Welsh language in our service planning and delivery across NHS Wales, to provide Welsh language services to patients, students, candidates and many other of our service users.

The priority areas fall into the following categories:



Practical Advice and Guidance:

- Welsh Language planning and prioritising;
- Researching customer feedback about our services through the medium of Welsh;
- Planning and supporting with the development of systems that support two languages, and support service areas to deliver bilingual services through systems;
- Designing and developing services that respond to demand;
- Advertising, interviewing, recruiting into vacancies;
- Connecting with Welsh communities across Wales;
- Supporting staff in NWSSP and other NHS organisations with advice and guidance;
- Advising on the procurement of services and associated goods to patients/public.

Legislation, governance and compliance:

- Lead on strategies, policies, standard operating procedures and guidance on compliance with the Welsh language standards;
- Respond to enquiries relating to the Welsh language standards;
- Report on performance in compliance with the Welsh language standards;
- Risk management of non-compliance;
- Lead on investigating complaints and provide response to complaints made.

Training, learning and promotion of the Welsh language:

- Bespoke training for departments/service areas/teams;
- Training for managers on recruiting, interviewing, appointing, PADRs & complaints;
- General training for staff across the organisation;
- Welsh language courses for members of staff at all levels of ability.
- Articles in newsletters and communications.

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Translation services:

The demand for translation services across all of our business in NWSSP continues to increase. We currently have a team of one senior translator and three translators. During May and June this year we undertook a recruitment drive, which was successful in appointing two new translators who will join the team later in the summer, one on a part-time permanent contract and one on a fixed-term, full-time contract.

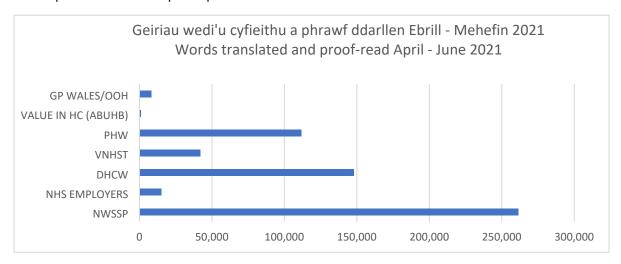
During June, the Welsh Language Services Manager has also been working with colleagues in establishing a bank of translators to support the core team when demand is beyond capacity.

We also have a contract with an external translation company to support us in meeting critical deadlines for translation work.

During the first 3 months of 2021, the team have translated 587,147 words between the following organisations:

PCGC / NWSSP	261,511
CYFLOGWYR GIG / NHS EMPLOYERS	15,114
GDIC / DHCW	148,019
YGIGF / VNHST	42,000
ICC / PHW	111,668
GWERTH GOFAL IECHYD / VALUE IN HC (ABUHB)	835
GP WALES/OOH	8,000

We've processed 865 unique requests for translation.



Welsh Language Unique Enquiries April – June 2021:

Nature of the enquiry	Number of enquiries received
Service Delivery Standards Enquiries	39
Operational Standards Enquiries	6
Procurement of Services Enquiries	5
Generic advice on Welsh language matters	72
Enquiries on service improvement (across all services)	65
Clarity on the need to translate	16
Training and learning	28

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Enquiries from other NHS organisations	48
Enquiries from Welsh Government	2
Enquiries from Welsh Commissioner	2
Total	283

Welsh Language Services Manger's Active Projects April 2021 – June 2021:

- FPPS GP Primary Care Services
- Performers List Project Primary Care Services
- ESR Welsh language portal skin People and OD
- Contact Centre Scoping Project Audit and Assurance and PMO
- Student Awards & Student Streamlining system improvement Service Improvement and HEIW
- Student Bursary/Streamlining Procurement PMO
- Review of Telephony Systems with NWSSP Planning & IT
- Review of Training module
- Review of Corporate Induction module
- Drafting of Bilingual Skills Strategy

Training and Learning:

Focused and tailored training has been provided to the Student Awards Service and for Payroll Staff based at Companies House in Cardiff during this period.

NUMBER OF VACANCIES ADVERTISED BETWEEN 01 APRIL 2021 - 30 JUNE 2021:

The total number of vacancies advertised by NWSSP during the first quarter of 2021/2022 was 175.

Welsh Essential: 6 Welsh Desirable: 151

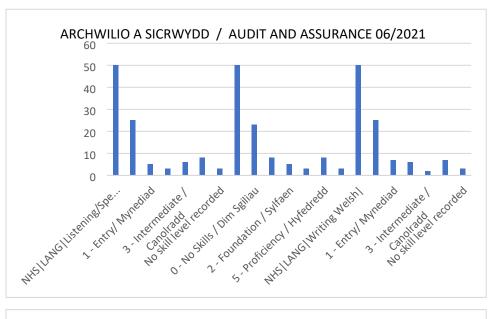
Welsh Needs to be Learnt: 0

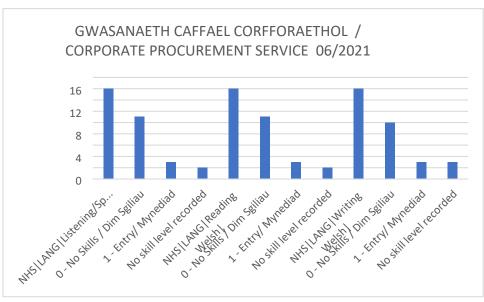
Welsh Skills Not Required: 18 (under review)

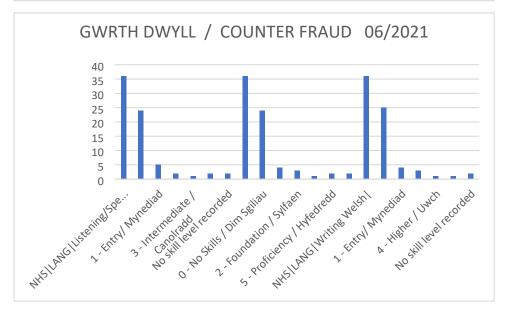
Overview of Welsh Language Skills across the organisation as recorded on ESR June 2021



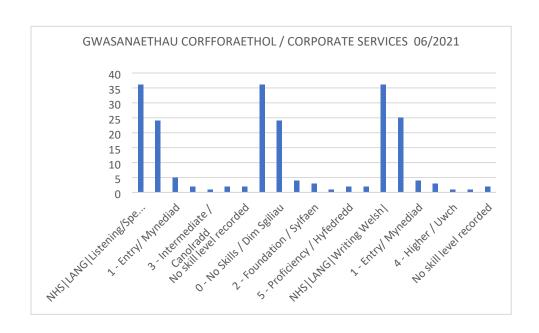
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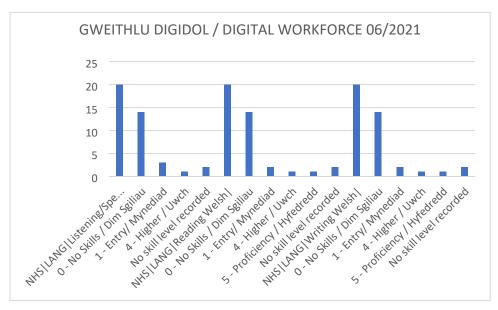


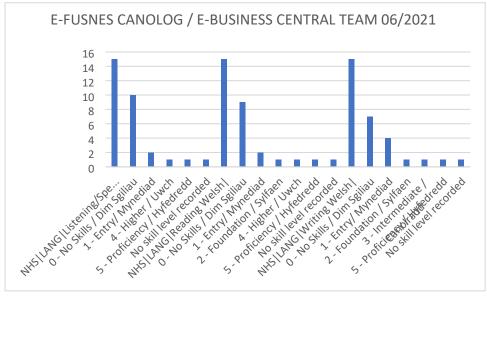




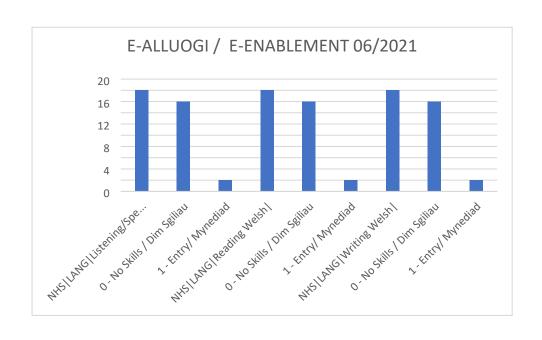
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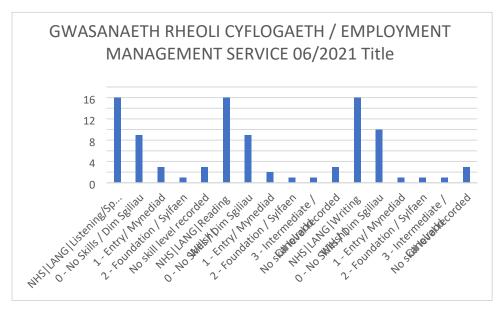


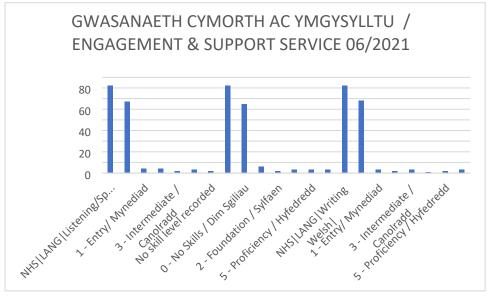




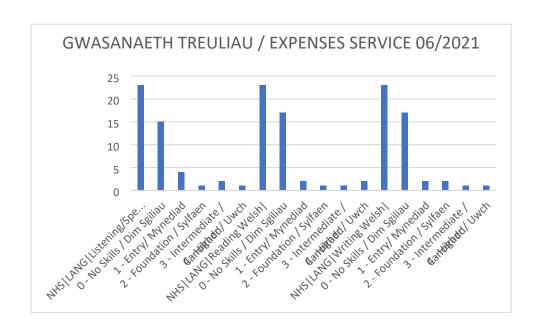
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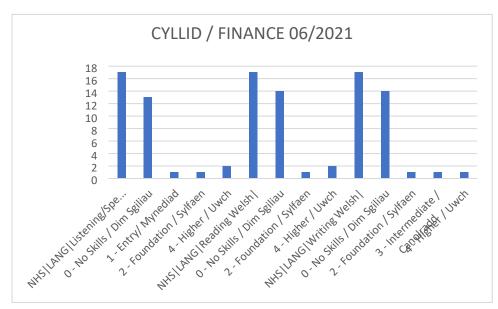


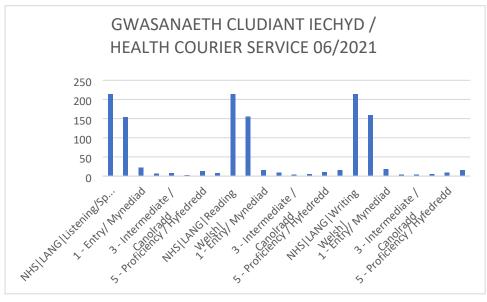




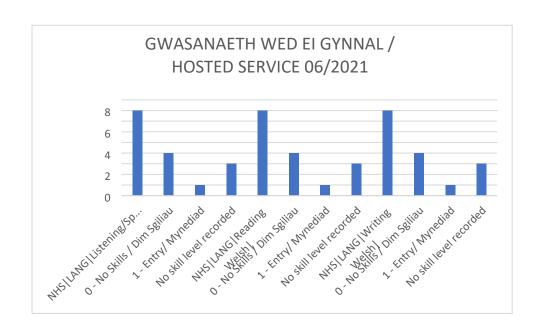
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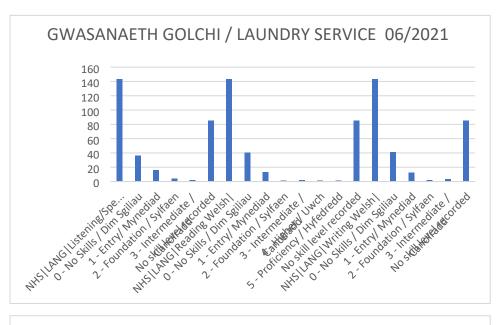


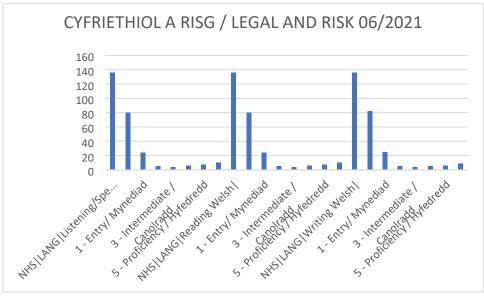




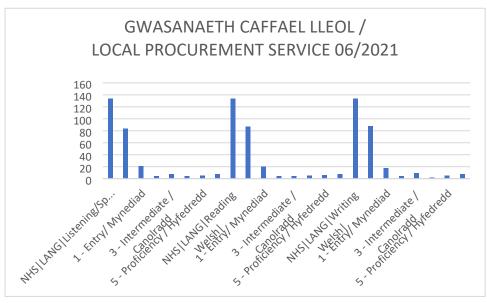
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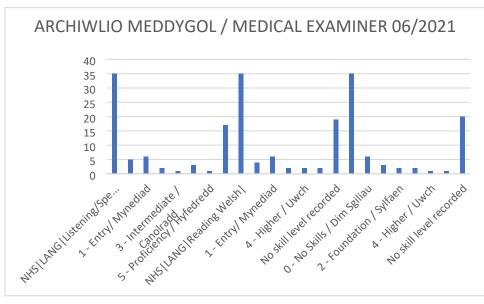


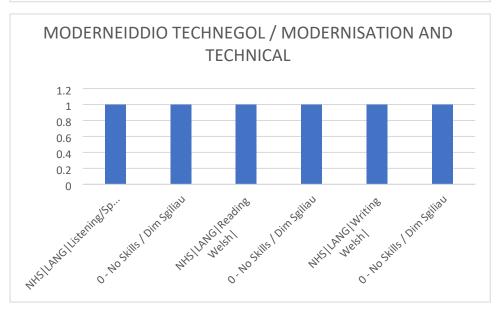




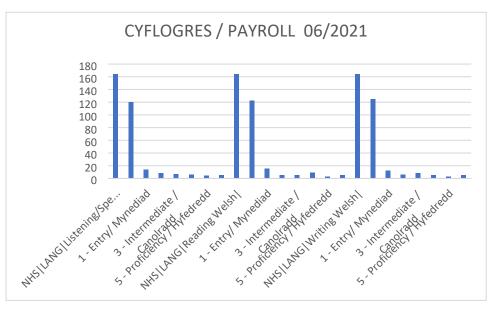
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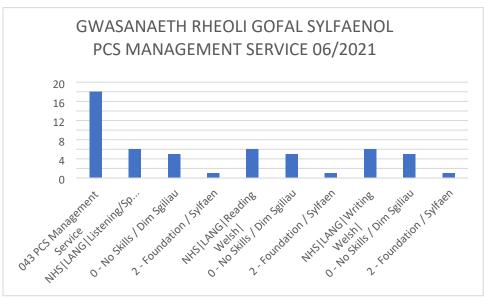


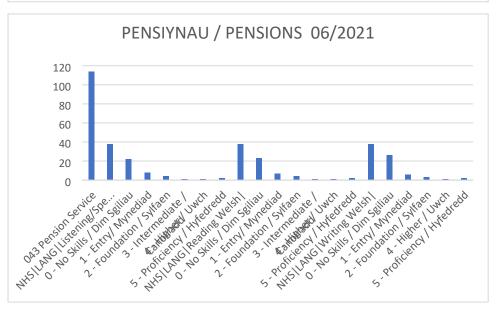




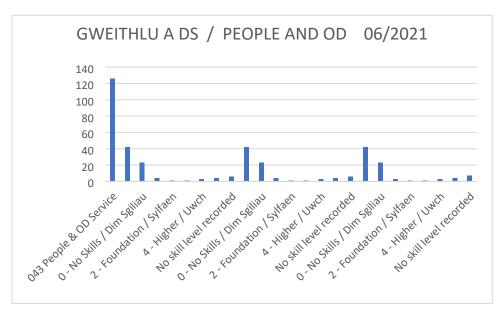
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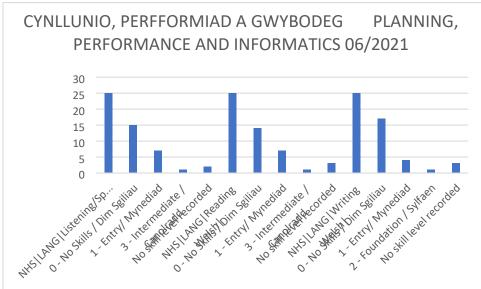


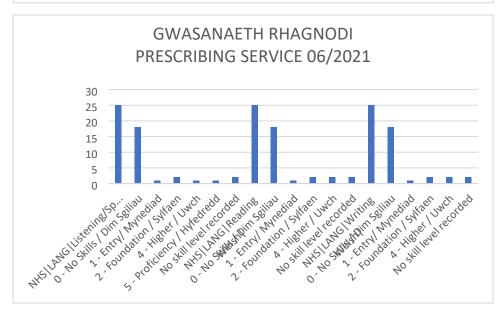




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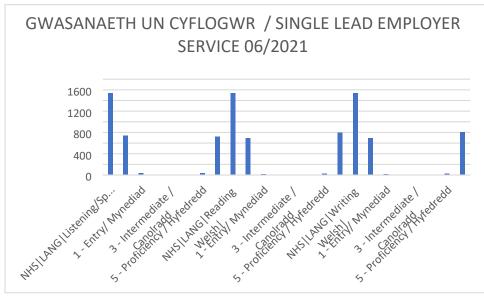


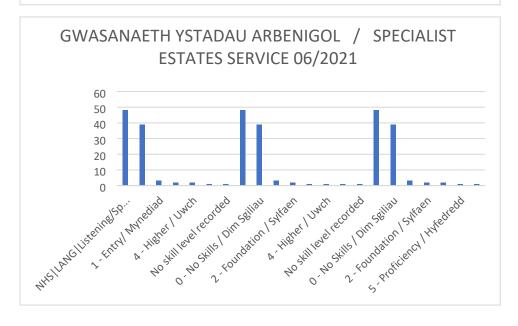




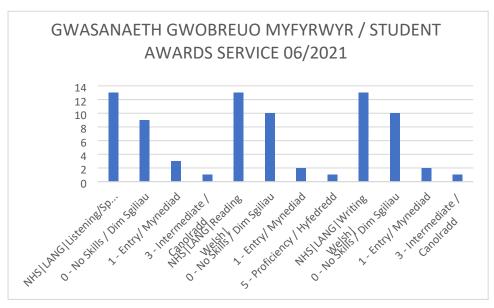
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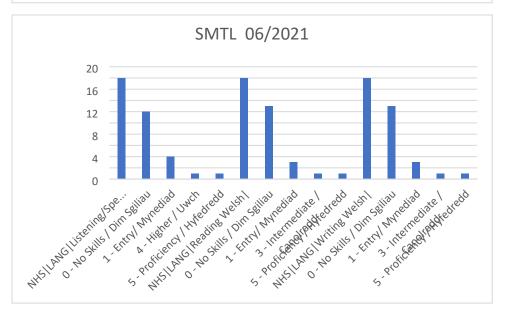




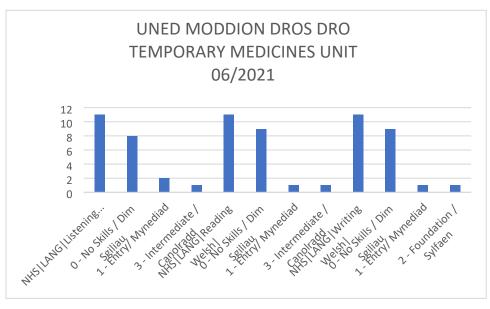
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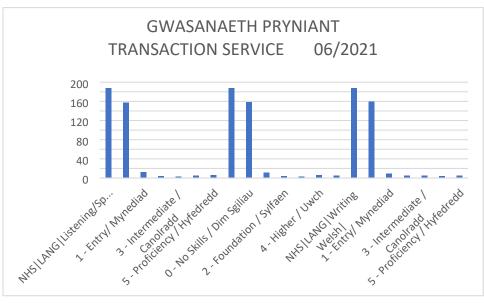


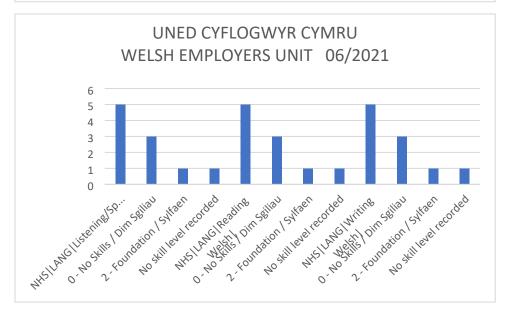




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AGENDA ITEM: 22 JULY 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

NWSSP Corporate Risk Update - July 2021

ARWEINYDD:	Peter Stephenson	
LEAD:	Head of Finance & Business Development	
AWDUR:	Peter Stephenson	
AUTHOR:	Head of Finance & Business Development	
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	01443 848552 / Andy.Butler@wales.nhs.uk	

Pwrpas yr Adroddiad: Purpose of the Report:

To provide the Partnership Committee with an update on the NHS Wales Shared Services Partnership's (NWSSP) Corporate Risk Register.

Llywodraethu/Governance		
Amcanion: Objectives:	Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement	
Tystiolaeth: Supporting evidence:		

Ymgynghoriad/Consultation:

The Senior Leadership Team (SLT) reviews the Corporate Risk Register on a monthly basis. Individual Directorates hold their own Risk Registers, which are reviewed at local directorate and quarterly review meetings.

Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$):

DERBYN/ APPROVE	ARNODI/ ENDORSE		TRAFOD/ DISCUSS		NODI/ NOTE	√
Argymhelliad/ Recommendation	The Committe	The Committee is asked to NOTE the report.				

Crynodeb Dadansoddi	Crynodeb Dadansoddiad Effaith:		
Summary Impact Analysis:			
Cydraddoldeb ac	No direct impact		
amrywiaeth:			
Equality and			
diversity:			
Cyfreithiol:	Not applicable		
Legal:			
Iechyd Poblogaeth:	No impact		
Population Health:			
Ansawdd, Diogelwch	This report provides assurance to the Committee		
a Profiad y Claf:	that NWSSP has robust risk management processes		
Quality, Safety &	in place.		
Patient Experience:			
Ariannol:	Not applicable		
Financial:			
Risg a Aswiriant:	This report provides assurance to the Committee		
Risk and Assurance:	that NWSSP has robust risk management processes		
	in place.		
Safonnau Iechyd a	Access to the Standards can be obtained from the		
Gofal:	following link:		
Health & Care	http://www.wales.nhs.uk/sitesplus/documents/106		
Standards:	4/24729 Health%20Standards%20Framework 20		
	15 E1.pdf		
	Standard 1.1 Health Promotion, Protection		
Gweithlu:	and Improvement		
	No impact		
Workforce:	Open The information is disclosed a supply the		
Deddf Rhyddid	Open. The information is disclosable under the Freedom of Information Act 2000.		
Gwybodaeth/ Freedom of	Freedom of Information ACL 2000.		
Information			

NWSSP CORPORATE RISK REGISTER UPDATE July 2021

1. INTRODUCTION

The Corporate Register is presented at **Appendix 1** for information.

2. RISKS FOR ACTION

The ratings are summarised below in relation to the Risks for Action:

Current Risk Rating	July 2021
Red Risk	1
Amber Risk	10
Yellow Risk	3
Green Risk	0
Total	14

2.1 Red-rated Risks

Risk A1 - Demise of the Exeter Software System

The replacement of the GMS systems is still on track and we are now undertaking the checking process for validation of the new system. A period of dual running is due to commence shortly to ensure the accuracy of the new system. Full go-live for all Health Boards will complete over the summer. The planned implementation of the Capita system in NHS England was also due to go-live on 1 April but Capita have asked NHS Digital for six months of continued contingency cover.

2.2 New/Deleted Risks

There has been one risk added to the register since the May meeting of the Committee. This relates to the delay in the implementation of the Oracle upgrade which resulted from a decision made at the STRAD meeting at the end of May.

3. RISKS FOR MONITORING

There are three risks that have reached their target score and which are rated as follows:

Current Risk	July	2021
Rating		

3/4

Red Risk	0
Amber Risk	0
Yellow Risk	3
Green Risk	0
Total	3

4. ASSESSMENT/GOVERNANCE & RISK ISSUES

There is a significant risk to the NWSSP if robust governance arrangements are not in place for risk management and each Director has responsibility for notifying the SMT of any risks that could have a financial impact if arrangements are not in place to manage risk. If there are insufficient communication flows to manage risk then there could be a resulting adverse effect on NWSSP and its customers.

5. RECOMMENDATION

The Committee is asked to:

NOTE to the Corporate Risk Register as at July 2021.

	Corporate Risk Register													
Ref	Risk Summary	In	Inherent Risk		Inherent Risk		erent Risk Existing Controls & Mitigations		Current Risk		Further Action Required	Progress	Trend since	Target & Date
		Likelihood	Impact	Total Score		Likelihood	impact	Total Score			last review			
						Risk	s for A	Action						
A1	The Northern Ireland model procured to replace the NHAIS system fails to deliver the anticipated benefits within required timescales impacting the ability to pay GPs (Original risk added April 2017)	4	5	20	Legal Counsel advice received. PMO Support Project and Programme Boards in place Heads of Agreement signed	3	5	15	Programme and Project Boards to review progress in lead-up to go-live date for GP payments. Consider options for extension of Local Hosting Arrangements until mid-2022 for PCRM.	Work is on-going with Northern Ireland to implement the new system to allow 3 months parallel running with a golive date in the summer. Roll-out of the Capita system in England has again been delayed with the existing service being available until at least September 2021. There is a further issue with regards to Local Hosting Hardware where support runs out at the end of December 2021, and this is required until at least the middle of 2022 when PCRM is due to be implemented. Paper taken to June SLG to assess options.	->	30-Sep-21		
A2	Risks to continuity of supplies and services to NHS Wales resulting from a no-deal Brexit (added Apr 2019) Strategic Objective - Customers	5	5	25	Storage facility in place (IP5) that has been adequately stocked to cope with a no-deal Brexit. BREXIT Mobilisation Team BREXIT Group which includes WG	2	5	10	Review of Critical Care Items being undertaken. Review of NSDR arrangements. Clinical Decision making arrangements to be	Risk Lead: Director of Primary Care Services Situation regarding paperwork is much improved and risk may well be able to be removed shortly. Risk Lead: Director of Procurement Services	→	30-Sep-21		
A3	Lack of storage space across NWSSP due to increased demands on space linked to COVID and specific requirements for IP5 (added April 2021) Strategic Objective - Service Development	4	4	16	representation. IP5 Board Additional facilities secured at Picketston	2	4	8	PCS reviewing options for medical records storage.	Discussions are on-going with Welsh Government with regards to the Strategic Outline Case for IP5. Welsh Government have also agreed to cover the running costs of the facility for the current financial year as part of the overall COVID and BREXIT contingency arrangements. We are awaiting news on further capital allocations to cover the costs of additional roller-racking for increased stock holding requirements. Risk Lead: Director of Procurement Services	→	30-Sep-21		
A4	Suppliers, Staff or the general public committing fraud against NWSSP. (added April 2019)	5	3	15	Counter Fraud Service Internal Audit WAO PPV National Fraud Initiative Counter Fraud Steering Group Policies & Procedures Fraud Awareness Training Fighting Fraud Strategy & Action Plan	4	3	12	Make better use of NFI (PS 31/03/21) Produce Action Plan from Audit Wales "Raising ourGame" report (PS Complete) Strengthen controls to prevent bank mandate fraud (AB/PS Complete)	Risk increased due to COVID-19 and significant increase in expenditure. Further Audit Wales report demonstrates that NHS Wales is in a good place for fraud prevention and detection compared to Central and Local Government but there are still further actions to be undertaken. Struggling to get access to NFI - taken through DoFs. March 21 has seen a number of actual and potential frauds around bank mandates. See separate risk below. Risk Lead: Director of Finance & Corporate Services	→	30-Sep-21		
A5	Strategic Objective - Value For Money Specific fraud risk relating to amendment of banking details for suppliers due to hacking of supplier e-mail accounts leading to payments being made to fraudsters (added April 2021) Strategic Objective - Value For Money	5	3	15	Documented process for bank mandate changes Role of Supplier Maintenance Team Authorisation by Senior Finance Staff Internal Audit Reviews Experian Bank Mandate Checker	3	3	9	Undertake review of effectiveness of current controls (AB/PS 31/07/21)	There have been a spate of fraudulent bank mandate amendments during March/April 2021 - some of which were successful. Procedures have been reviewed and enhanced. Experian software procured but coverage not as good as anticipated. Risk Lead: Director of Finance & Corporate Services	→	31-Jul-21		
A6	Risk of cyber attack exacerbated if NWSSP, or other NHS Wales organisations, run unsupported versions of software. (added Apr 2019) Strategic Objective - Service Development	5	5	25	Cyber Security Action Plan Stratia Consulting Review IGSG Information Governance training Mandatory cyber security e-learn introduced Dec 19 Internal Audit review - Reasonable Assurance (April 2020) Recent investment in training packages (March 2021)	2	5	10	Follow up progress with Cyber Security Plan (PS On-going) Move all desktop devices to Windows 10 by the Windows 7 end of support (PS 31/07/21) NL to further update the SLT in the light of the recent Audit Wales report (NL Complete) Update information on systems as part of NIS compliance (NL 31/08/21) Undertake phishing training exercises with NWSSP staff (NL 31/07/21)	Nick Lead: Director of Planning, Performance & Informatics Structure & Informatics Structure & Informatics Structure & Informatics Structure & Informatics	→	31-Jul-21		

1/5

A7	The failure to engage with appropriate specialists (e.g. H&S/Fire Safety, Information Security/IG) sufficiently early enough when considering major developments may result in actions being taken that do not consider all relevant potential issues.	4	4	16	In-house H&S and Fire Safety Expertise Role of PMO Recent appointment of Programme Director	3	4	12	PMO to ensure that Project Officers consult appropriately at outset of project. (IR-ongoing) Consider adequacy of resourcing within H&S. (AB/PS - 31/07/21)	All organisations contributing towards a Fire & Evacuation Strategy for IP5.	→	31-Jul-21
A8	Strategic Objective - Service Development Delays in the implementation of the Oracle upgrade exposes NWSSP and NHS Wales to a greater risk of system failure as disaster recovery testing will be missed for 2nd year, and prevents further systems development due to there being a change freeze in place. In addition, costs will be increased due to needing to build the environment for a third round of testing (£30k).	4	4	16	Project Risk Register	3	4	12	Actions documented in Project Risk Register	Risk Lead: Director of Workforce and OD STRAD meeting held on 28 May voted to delay implementation to October 20201 on advice of OptechBoard aand against advice of Version One and CTeS. This will affect future developments such as Scan4Safety due to the Change Freeze being in place. There is also no point in undertaking disaster recovery procedures on a system that will shortly be redundant. Risk further exacerbated by resignation of Head of CTeS.	*	31-Dec-21
A9	Strategic Objective - Service Development The transfer of the laundries to NWSSP expose a number of risks including concerns over health and safety and formality of customer relationships.	4	4	16	All-Wales Programme Business Case Programme Board Regular updates to SLG on progress with Action Plan Draft SLAs approved by SSPC Appointment of Assistant Director for Laundry	3	4	12	Arrange internal audit review of Laundry service (AB/PS - 30/06/21) Prioritised report to be submitted to July SLG.	Risk Lead: Director of Finance & Corporate Services Transfer has now taken place for 3 of the 5 laundries with the other 2 expected to transfer in the autumn of 2021. Update provided to June SLG.	→	30-Sep-21
	Strategic Objective - Service Development				Services					Risk Lead: Director of Procurement Services		
						COVI	ID-19 I	Risks				
CV1	By requiring our staff to continue working we expose them to a greater risk of being infected with COVID-19 which may cause them significant health problems.	5	5	25	All staff encouraged to work from home where possible. Risk Assessments undertaken for all staff. Social Distancing measures in place in each office. Any staff displaying any symptoms told not to come into office or go home immediately. Testing for front-line staff Weekly Site Leads' meetings to assess position in each office. Provision of hand sanitisers and soap. Enhanced Cleaning services Notices in all buildings reminding of good hygiene practices. Regular SMT walk-arounds of all sites. COVID-19 Adapt and Future Change Group	2	4	8	Continue to monitor effectiveness of current measures through Site Leads and the fortnightly Site Leads meeting. Undertake specific surveys within Directorates to assess staff preferences for future working models.	Current measures seem to be effective. Large numbers of staff are working from home and social distancing measures are in place for those staff who need to continue to come into work. Daily reporting of absences shows that the numbers of staff reporting COVID-19 like symptoms continues to be very low. The regular meetings of the Site Leads provide on the ground information in real time and the Site Leads Meeting includes direct representation from SLT so that matters can be escalated appropriately. Risk assessment exercises completed. 2nd Staff Survey reported in Dec and demonstrates that staff satisfaction with current arrangements is being sustained.	→	30-Sep-21
CV2	NWSSP are unable to procure sufficient orders of PPE, medical consumables and equipment resulting in clical staff being able to treat patients safely and effectively. This risk may be exacerbated due to the potential need to supply Social Care, Primary Contractors, Carers and even retailers and train passengers. The continuing global difficulties with China also increases this risk.	5	5	25	More flexible building opening times PPE Winter Plan Finance Governance Committee Streamlined arrangements for Trust Board and WG approvals Increased limits approved for Scheme of Delegation. Regular meetings with UK and Welsh Government. Active involvement in UK Mutual Aid Schemes. Deloitte undertook consultancy work on behalf of WG to assist in this area.	1	5	5		Risk Lead: Senior Management Team The PPE plan has been developed in consultation with key stakeholders, and includes the arrangements to distribute PPE to the wider Family Care Practitioners and Social Care sectors. As services across Wales start to open back up, demand for such equipment is increasing in line with our expectations. The Welsh Local Government Association have been a key partner in helping us to take this agenda forward with Local Authorities Risk Lead: Director of Procurement Services	→	30-Sep-21
CV3	NWSSP are unable to continue to provide business-critical services due to having insufficient numbers of staff available and able to undertake the work.	5	5	25	Identification of all business-critical services Redeployment of staff to business-critical services Increased provision of laptops and VPN Roll-out of Office 365 Use of Bomgar service for PCS Daily monitoring and reporting of absence figures. Weekly IT Update meetings. IT Update also given to weekly COVID-19 Planning & Response Group	1	5	5	Updated BCP document covering response to COVID and possible impact of future waves presented to August SMT, and September SSPC. Further investment in laptops to ensure that PCS staff are able to work remotely. Increase investment in softphones.	The daily report on staff absence shows that absence rates are falling. The investment in hardware and software has allowed large numbers of staff to work remotely with minimal problems thus far. There are good rates of uptake for the vaccination programme. Risk Lead: Senior Management Team	→	30-Sep-21

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CV4	Staff wellbeing is adversely affected through concerns arising from COVID-19 either directly in terms of their health and that of their families, or financially from loss of income of a family member. This includes the risk of "burn-out" for a number of staff working very long hours over a sustained period of time.	5	5	25	Regular communications to all staff Reminders of how to access Employee Assistance schemes Mental Health First Aiders Formal Peer Group with phone surgery times (includes Trade Union Leads) Staff Surveys Virtual Coffee Mornings with SLT	1	5	5	Implement action plan to respond to findings from staff surveys - monitored and managed through Adapt and Future Change Group.	As previously stated, absence rates are very low. Communications are regularly issued and all Directors and Managers are tasked with regularly checking the health and well-being of their staff. 2nd Staff Survey results suggest that arrangements in place still viewed as largely positive. Risk Lead: Director of Workforce and OD	->	30-Sep-21
CV5	GP Trainees, who are employed by NWSSP, are exposed to a level of risk of risk of catching COVID-19 but are outside the direct control and influence of NWSSP.	5	5	25	Risk Assessments by Education Supervisor - leads to decision on what PPE is to be provided. Tripartite Agreement	2	5	10	Confirming vaccination rates with staff individually as Health Board reports to total numbers vaccinated suggest under-reporting (March 2021)	The tripartite agreement was agreed by the Project Board on 7/9/2020 and sets out the general duties of the host organisation for all trainees employed by NWSSP including the general duty to provide a safe working environment. Vaccination of front-line staff will further mitigate this risk. Risk Lead: Director of Workforce and OD	→	30-Sep-21
						Risks fo	or Mo	nitorin	9			
M1	Disruption to services and threats to staff due to unauthorised access to NWSSP sites. (Added May 2018) Strategic Objective - Staff	5	4	20	Manned Security at Matrix CCTV Locked Gates installed at Matrix. Security Review Undertaken (reported Dec 18) Increased Security Patrols at Matrix.	1	4	4	Continue to monitor, and reissue comms to all staff to remind them of need to keep buildings and information secure. (PS 31/08/2020 - complete)	Security Review undertaken and reported to SMT in Dec 2018. No major findings and all agreed actions implemented or superceded. Risk Lead; Director Specialist Estates Services/Director of Finance and Corporate Services	→	

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Key to	Cey to Impact and Likelihood Scores									
	Impact									
		Insignificant	Minor	Moderate	Major	Catastrophic				
		1	2	3	4	5				
Likelil	hood									
5	Almost Certain	5	10	15	20	25				
4	Likely	4	8	12	16	20				
3	Possible	3	6	9	12	15				
2	Unlikely	2	4	6	8	10				
1	Rare	1	2	3	4	5				
	Critical	Urgent action by	senior ma	nagement to	reduce risk	(
	Significant	Management action within 6 months								
	Moderate	Monitoring of risks with reduction within 12 months								
	Low	No action requir	ed.							

Consequence											
Likelihood	Insignificant	Minor	Moderate	Major	Catastrophic						
Almost Certain	Yellow 5	Amber 10	Red 15	Red 20	Red 25						
Likely	Yellow 4	Amber 8	Amber 12	Red 16	Red 20						
Possible	Green 3	Yellow 6	Amber 9	Amber 12	Red 15						
Unlikely	Green 2	Yellow 4	Yellow 6	Amber 8	Amber 10						
Rare	Green 1	Green 2	Green 3	Yellow 4	Yellow 5						

Red: Critical - Urgent action and attention by senior management to reduce risk

Amber: Significant - Management consideration of risks and reduction within 6 months

Yellow: Moderate - Monitoring of risks with a view to being reduced within 12 months

Green: Low - These risks are considered acceptable

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*	New Risk
	Escalated Risk
←	Downgraded Risk
→	No Trend Change

5/5



MEETING	NWSSP Audit Committee
DATE	29 June 2021
PREPARED BY	Carly Wilce, Corporate Services Manager
PRESENTED BY	Peter Stephenson, Head of Finance & Business Development
RESPONSIBLE HEAD OF SERVICE	Andy Butler, Director of Finance & Corporate Services

TITLE OF REPORT

Annual Report of Gifts, Hospitality & Sponsorship Declarations

PURPOSE OF REPORT

The purpose of this report is to provide the Audit Committee with a summary of the Gifts, Hospitality and Sponsorship declared within the reporting period, 1 April 2020 to 31 March 2021.

1. BACKGROUND

The Velindre University NHS Trust <u>Standards of Behaviour Framework Policy</u> ("the Policy") outlines arrangements within the organisation to ensure that staff comply with requirements, including recording and declaring potential conflicts of interest and offers gifts, hospitality and sponsorship, regardless of whether these have been accepted or declined. It is important to note that any private interest(s) does not conflict with NHS duties.

Supplementary to the Policy referenced above, the NWSSP also has its own <u>Gifts and Hospitality Procedure</u>.

NWSSP Audit Committee 29 June 2021

2. GIFTS, HOSPITALITY & SPONSORSHIP

All employees of the NWSSP should consider their position very carefully before accepting any personal gifts or offers of hospitality during, or outside of, office hours. They should avoid placing themselves in a position where acceptance of such gifts or hospitality might be perceived to influence their decision in respect of purchasing goods or services, awarding contracts, or making appointments. Anyone found to be in breach of this procedure could face disciplinary action.

If staff receive any offer over the value of £25 (or several small gifts, which value over £100, received from the same or closely related source in a 12-month period), whether accepted or declined, these are required to be recorded in the Gifts and Hospitality Register, held by the Corporate Services Manager. A summary of declarations received is presented to the Audit Committee at each meeting.

During 2020/21, and undoubtedly as a direct result of the pandemic, there have been no declarations for gifts, hospitality, and sponsorship.

3. RECOMMENDATION

The Audit Committee is asked to:

• **NOTE** the report.



AGENDA ITEM:xx

22 July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

2020-21 Declarations of Interest Annual Report.

ARWEINYDD:	Peter Stephenson, Head of Finance & Business
LEAD:	Development
AWDUR:	Carly Wilce, Interim Corporate Services Manager
AUTHOR:	
SWYDDOG ADRODD:	Peter Stephenson, Head of Finance & Business
REPORTING	Development
OFFICER:	·
MANYLION	Peter.stephenson2@wales.nhs.uk
CYSWLLT:	·
CONTACT DETAILS:	

Pwrpas yr Adroddiad: Purpose of the Report:

The purpose of this report is to provide the Committee with a summary of the completion rates for each service for Conflicts of Interest for the reporting period 1 April 2020 to 31 March 2021. In addition, the Declarations of members of the SLG are also included for information at Appendix A. This report is published on the NWSSP website.

Llywodraethu	Llywodraethu/Governance							
Amcanion: Objectives:	Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement							
Tystiolaeth: Supporting evidence:	N/a							

Ymgynghoriad/Consultation:

Shared Service Partnership Audit Committee and Senior Leadership Group.

Adduned y Pwyllgor/Committee Resolution (insert √):								
DERBYN/ APPROVE		ARNODI/ ENDORSE		TRAFOD/ DISCUSS		NODI/ NOTE	✓	
Argymhelliad/ Recommendati	The Committee is asked to NOTE the Declarations Interest Annual Report.						s of	

Crynodeb Dadansoddi	
Summary Impact Ana	lysis:
Cydraddoldeb ac	No Direct Impact.
amrywiaeth:	
Equality and	
diversity:	
Cyfreithiol:	No Direct Impact.
Legal:	
Iechyd Poblogaeth:	No Direct Impact.
Population Health:	
Ansawdd, Diogelwch	No Direct Impact.
a Profiad y Claf:	
Quality, Safety &	
Patient Experience:	
Ariannol:	No Direct Impact.
Financial:	
Risg a Aswiriant:	No Direct Impact.
Risk and Assurance:	
Safonnau Iechyd a	Access to the Standards can be obtained from the
Gofal:	following link:
Health & Care	http://www.wales.nhs.uk/sitesplus/documents/10
Standards:	64/24729 Health%20Standards%20Framework 2
	015 E1.pdf
	Governance, Leadership and Accountability
Gweithlu:	No Direct Impact.
Workforce:	
Deddf Rhyddid	This report is subject to the requirements of the
Gwybodaeth/	Freedom of Information Act.
Freedom of	
Information	

2020-21 Declarations of Interest Annual Report

1. CEFNDIR/BACKGROUND

1. BACKGROUND

The <u>Velindre University NHS Trust Standards of Behaviour Framework</u> outlines arrangements within the organisation to ensure that staff comply with requirements, including recording and declaring potential conflicts of interest. It is important to note that any private interest(s) does not conflict with NHS duties.

The Nolan Principles on Public Life were established in 1994 and have recently been extended to define public office as applying to all those involved in the delivery of public services. The seven principles are as follows:

- 1. **Selflessness** You should take decisions solely in terms of the public interest. You must not act in order to gain financial or other material benefit for family or friends.
- 2. **Integrity** You should not place yourself under any financial or other obligation to any individual or organisation that might reasonably be thought to influence you in the performance of your duties
- 3. **Objectivity** You must make decisions solely on merit when carrying out public business (including the awarding of contracts)
- 4. Accountability You are accountable for your decisions and actions to the public. Consider issues on their merits, taking account of the views of others and ensure the organisation uses resources prudently and in accordance with the law.
- 5. **Openness** You should be as open as possible about all decisions and actions, giving reasons for your decisions and restricting information only when the wider public interest demands.
- 6. **Honesty** You have a duty to act honestly. Declare private interests relating to public duties and take steps to resolve any conflicts arising in a way that protects the public interest.
- 7. **Leadership** Holders of public office should promote and support the foregoing principles by leadership and example.

It is the responsibility of all individuals to ensure that they are familiar with the requirements of Nolan Principles and every public body should develop Codes of Conduct for staff and Independent Members, which reflect these Nolan Principles and its shared values. The guidance in terms of disclosing potential conflicts of interest is to err on the side of caution and disclose more rather than less. What is important is whether a relationship could be perceived as a conflict of interest, whether or not it actually is. Guidance had been revised to require staff to highlight any family relationships in their declarations made, in accordance with our Managing Personal Relationships at Work Protocol.

2. DECLARING CONFLICTS OF INTEREST

As previously agreed at a formal SLT meeting, all staff of Band 7 and above are required to complete a Declaration of Interest form, with additional staff to complete the same at the Director's discretion. The agreed requirement for each Directorate's completion is set out below:

- Finance & Corporate Services All
 - Accounts Payable division agreed Band 6 & above
- Audit & Assurance Services Band 7 & above
- Employment Services Band 7 & above
- Legal & Risk Services Band 7 & above
- Primary Care Services Band 7 & above
- Procurement Services Band 6 & above
- Specialist Estates Services Band 7 & above
- Workforce & Organisational Development Band 7 & above

It should be noted that some directorates have elected to ask all staff within their directorate, regardless of banding, to complete their declarations via ESR. This is positive progress and an example of best practice. It is intended that all directorates will mandate full completion by all staff in the reporting year 2021-22.

It is the responsibility of all individuals to ensure that they are familiar with the requirements of the Standards of Behaviour Framework, that they duly complete a declaration of any potential conflicts of interest arising. Declarations should be made at least on an annual basis and as frequently as changes may occur. Staff who does not have access to ESR are able to complete a hard copy form, which must be subsequently authorised by their Director of Service before being submitted to the Corporate Services Manager.

The table below records the current position with regards to completion across the organisation, as at 24 May 2021:

Directorate	Headcount	Percentage	Outstanding	Notes for Non-
	to Complete	Completion	Declarations	Completion
Finance & Corporate Services	95	100%	0	
Audit & Assurance Services	39	100%	0	
Employment Services	26	100%	0	
Legal & Risk Services	92	97%	3	2 Maternity Leave
Planning and Performance	24	100%	0	
Primary Care Services	310	100%	1	1 Long-Term Sick
Procurement Services	127	95%	7	
Specialist Estates Services	55	100%	0	
SMTL	22	95%	1	1 Long-Term Sick
Workforce & Organisational	48	90%	5	
Development				
Total	838	97%	17	

A summary of the declarations received for 2020-21 for each directorate will be emailed through to the Director, to develop a local Action Plan for the Management of Potential Conflicts. Directors will find a link to the guidance and templates below to use in developing best practice Action Plans.

• http://nww.sharedservicespartnership.wales.nhs.uk/conflicts-of-interest

3. RECOMMENDATION

The Committee are asked to:

• **NOTE** the Conflicts of Interest declared to date;

Appendix A – List of Declarations for SLT Members

No.	Name	Job Title	Disclosure
1.	Andy	Director of Finance and	Wife is an Audit Manager in Audit Wales.
	Butler	Corporate Services	
			Independent member of the Arts Council for Wales Audit & Risk Committee.
2.	Simon Cookson	Director of Audit & Assurance Services	Independent Member of the Audit Committee at Bristol City Council.
			Director of S Cookson Consulting Ltd – no activity since June 2014.
3.	Neil Davies	Director of SES	I have a son who is a professional sportsman. I am a shareholder in his image rights company.
			I have a son who is a Graduate Trainee with Matthews & Goodman, Commercial Property advisors. He is based in their Liverpool office.
			One of my sons works for NWSSP - Procurement Services as a Category Manager.
4.	Andrew Evans	Director of PCS	No interests to declare.
5.	Margaret Foster	NWSSP Chair	Governor Cardiff and Vale College; and Commissioner Lancet/LSE on Future of the NHS.
6.	Neil Frow	Managing Director of NWSSP	NHS Wales Representative Board Member and Vice Chair on the Welsh Government Hosted National Procurement Service (NPS) (7 years involvement) - NHS Wales NPS Contracts for common and repetitive spend areas; NHS Wales Representative on the Welsh Government Public Sector Procurement Board (6 Years Involvement); NHS Wales Representative Board Member on the Ystadau Cymru Board; Spouse is employed by Cwm Taf Morgannwg University Local Health Board.
7.	Gareth Hardacre	Director of People & OD	Wife is employee of Cardiff & Vale HB.
			Father is an elected member of a Local Authority (Caerphilly CBC).
			Ex Governor at Cardiff Met - no new liability / interest.
8.	Mark Harris	Director of Legal & Risk Services	Wife is a GP partner in a medical centre in the Aneurin Bevan area.
9.	Jonathan Irvine	Director of Procurement Services	No interests to declare.
10.	Professor Malcolm Lewis	Medical Director	Financial interest of 30% Share Ysgol Street Pharmacy Swansea. 18% Share Melys AFS Ltd., Whitland
11.	Alison Ramsey	Director of Planning and Performance	Governor on the Board and Chair of the Audit Committee of the University of South Wales.





AGENDA ITEM:xx

22 July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

Welsh Risk Pool Update

ARWEINYDD:	Andy Butler, Director of Finance & Corporate		
LEAD:	Services		
AWDUR:	Sue Saunders, WRP Principal Finance Manager		
AUTHOR:			
SWYDDOG ADRODD:	Andy Butler, Director of Finance & Corporate		
REPORTING	Services		
OFFICER:			
MANYLION	Andy.butler@wales.nhs.uk		
CYSWLLT:			
CONTACT DETAILS:			

Pwrpas yr Adroddiad:

Purpose of the Report:

The purpose of this report is to confirm the financial position and performance as at M3 and to highlight professional savings made by Legal & Risk Services (L&R).

Llywodraethu/Governance				
Amcanion: Objectives:	Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement			
Tystiolaeth: Supporting evidence:	N/a			

Ymgynghoriad/Consultation:

Directors of Finance & Welsh Government

Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$):						
DERBYN/ APPROVE ARNODI/ ENDORSE TRAFOD/ DISCUSS NOTE						

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Argymhelliad/
Recommendation

The Committee is asked to **NOTE** the Welsh Risk Pool Update Report.

	Crynodeb Dadansoddiad Effaith:				
Summary Impact Analysis:					
Cydraddoldeb ac amrywiaeth: Equality and	No Direct Impact.				
diversity:					
Cyfreithiol: Legal:	No Direct Impact.				
Iechyd Poblogaeth: Population Health:	No Direct Impact.				
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	No Direct Impact.				
Ariannol: Financial:	No Direct Impact.				
Risg a Aswiriant: Risk and Assurance:	No Direct Impact.				
Safonnau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link: http://www.wales.nhs.uk/sitesplus/documents/10 64/24729 Health%20Standards%20Framework 2 015 E1.pdf Governance, Leadership and Accountability				
Gweithlu: Workforce:	No Direct Impact.				
Deddf Rhyddid Gwybodaeth/ Freedom of Information	This report is subject to the requirements of the Freedom of Information Act.				

2

1.0 INTRODUCTION

The purpose of this report is to provide an update on year to date expenditure as at Month 3 and to highlight any significant risks to the outturn forecast.

2.0 FUNDING ARRANGEMENTS

The WRP receives two funding streams:

- 1. Departmental Expenditure Limit (DEL) to meet in year costs associated with settled claims.
 - Expenditure above the annual allocation is recouped from Health Boards and Trusts using a risk sharing agreement approved by the NWSSP Partnership Committee for core claim growth.
- 2. Annually Managed Expenditure (AME) to meet the cost of accounting for the long term liabilities of claims. This budget is based on estimates provided directly to the Welsh Government by the WRP.

3.0 DEPARTMENTAL EXPENDITURE LIMIT

The WRP utilises DEL resource through the following expenditure headings:

- Reimbursements to members
- Movement on the WRP Claims Creditor
- Payments in respect of a WRP managed claim (former HA claims)
- Payments in respect of claims settled using a Periodical Payment Order (PPO)

Resource utilised as at Month 3

The Welsh Government (WG) allocation for the year is £107m for clinical negligence and personal injury claims and a £1.259m allocation for Redress.

Redress expenditure above the WG allocation will be charged to the DEL in the first instance and to the Risk Share where no spare capacity remains. The M3 DEL forecast indicates there will be no spare capacity remaining this year and therefore a £1m estimate has been included in the DEL forecast and consequently added to the Risk Share charges for 2021/22.

As at the end of Month 3 £7.566m has been utilised by the WRPS and a detailed breakdown is provided below with the 2020/21 comparator.

Expenditure type	Position as at M3 2020/21 £m	Position as at M3 2021/22 £m
Claims reimbursed & WRP Managed Expenditure	5.996	38.062
Periodical Payments made to date	0.610	0.233
Redress Reimbursements	0.383	0.680
EIDO – Patient consent	0.000	0.062
Clinical Negligence Salary Subsidy	0.000	0.137
WRP Transfers, Consent, Prompt, CTG	0.002	0.049
Movement on Claims Creditor	13.097	(31.657)
Year to date expenditure	20.088	7.566

Expenditure is significantly lower than at this point last year and is mainly due to the cohort of claims which settled in April and were accrued into the 2020/21 position. These have reduced the 2021/22 position reported to Month 3.

The higher reimbursement value to Month 3 mostly relates to the yearend creditor as can be seen above by the £31.657m reduction in the movement on the claims creditor since the yearend date.

The M3 DEL forecast discussed later in this report still shows the forecast is on target to reach the IMTP £123.495m DEL forecast. Therefore, if the April settlements had not been included as accruals in the 2020/21 position, it is highly likely 2021/22 expenditure would significantly exceed the forecast this year with the consequent additional charge to the Risk Share Agreement.

Movement on Claims Creditors

As at the beginning of the year, the claims creditor was £138.987m and has decreased to £107.330m at the end of June. This figure represents the total of all cases that have been settled/interims agreed where:

- The Health Organisation has paid the claimant but not yet sought reimbursement from the WRP.
- Settlement has been reached in year but no payment has yet been made to the claimant.

The creditor will also include a backlog of deferred cases where the Health Board or Trust has not yet met the Learning from Events requirements placed on individual cases. The movement on creditors analysed by Health Body is set out below:

	Movement on Creditors		
	2021/22	2021/22	
	Opening	Month 3	Movement
	£m	£m	£m
SWANSEA BAY	25.806	14.839	(10.967)
ANEURIN BEVAN	22.948	18.557	(4.391)
BETSI CADWALADR	18.618	15.211	(3.407)
CARDIFF & VALE	26.600	26.606	0.006
CWM TAF MORGANNWG	29.920	16.434	(13.486)
HYWEL DDA	12.839	13.238	0.399
POWYS	0.253	0.253	0.00
PHW	0.569	0.586	0.017
WAST	1.052	1.315	0.263
VELINDRE	0.382	0.291	(0.091)
	138.987	107.330	(31.657)

There has been significant progress in reducing the Cwm Taf Morgannwg creditor since the year-end date.

4.0 ANNUALLY MANAGED EXPENDITURE at MONTH 3 2021/22 TOTAL PROVISIONS

The summary below shows total provisions remain at yearend values pending the first AME returns for 2021/22 from NHS Wales to be submitted following the Month 4 close.

The table below shows total provisions decreased by £961K in 2020/21 as case numbers remained relatively stable throughout the year. The 5-year forecast will be rolled forward following receipt of the M4 returns.

	Closing Provision 2019/20	Closing Provision 2020/21	Movement
	£m	£m	£m
Probable or certain Cases	692.759	665.079	(27.680)
Structured	441.063	467.783	26.720
Settlements/PPOs			
	1,133.822	1,132.861	(0.961)

5.0 DEL FORECAST 2021/22

The DEL forecast is set out in the table below following receipt of the Month 3 Health Board and Trust returns.

Month 3 2021/22	£000s
Actual spend to June 2021	7,188
Settled cases – awaiting payment	7,153
JSM/RTM/Offer	34,995
PPO's to March 2021	14,501
Sub Total	63,837
PI – estimate to March 2021	2,625
Highly likely – RTM planned	23,268
Possible settlements before 31/03/2021	20,472
Estimate - 40% of Probable Claims <£200K	1,993
Estimate – 40% of Certain Claims <£200K	7,350
Estimate – Managed Claims	2,250
Legal & Risk - Clinical Negligence Salary costs (WG agreement)	518
Nosocomial Claims estimate	1,000
Estimate for Redress overspend 2021/22	1,000
Month 3 2020/21 DEL forecast	124,313
IMTP DEL Forecast 2021/22	123,495

The M3 DEL forecast is currently £818K higher than the IMTP DEL forecast. There will be variation throughout the year as cases are brought forward from future years, whilst others are delayed into future years.

Estimated settlement dates on the database are dependent on the timely receipt of information from various external sources, e.g. Health Boards, claimant solicitors, expert witnesses and barristers and subsequent findings can either cause further delays or accelerate the settlement date.

Previous year trends provide an indication of how case movements typically behave over the 12-month period. The detailed M2 and M3 DEL forecasts for 2021/22 indicate the current forecast is sufficiently close to the DEL £123.495M IMTP value to enable the management of the yearend position within the resource previously identified as being required.

The assumptions in the forecast are as follows:-

- 100% provided for cases with RTM's planned or highly likely
- 40% provided for less certain high value cases
- 40% for cases with cashflows in year less than £200K
- 50% PPO assumption for high value cases

High value cases with cashflows on the L&RS database for 2021/22 over £200K are reviewed individually to track case progressions.

These are reviewed on a monthly basis for updated information held on the L&R database together with frequent dialogue throughout the year between the WRPS

Finance Manager and L&R case handling solicitors. These discussions ensure the most up to date information possible is included in the monthly forecasts.

Redress

The forecast table above does not include Redress reimbursements to date. Expenditure is charged to the £1.259m Redress WG allocation in the first instance before any excess is charged to the DEL and Risk Share where no spare DEL capacity remains.

Redress expenditure to Month 3 was £379K (after removing reimbursements relating to the yearend creditor). This compares to £383K at this point last year with an outturn for 2020/21 of £2.488m. The Redress forecast for 2021/22 is not yet available but will be reported for the September meeting.

Total Redress expenditure in 2019/20 and 2020/21 would suggest the charge for 2021/22 will exceed the £1.259m allocation again this year. A £1m estimate has been added to the DEL forecast and consequently the Risk Share to accommodate expenditure above the allocation.

A summary of the key risks associated with the above forecast is set out below:

- Identifying and estimating the timing of settlements for individual high value cases to be included in the forecast for this year;
- PPO vs lump sum settlement. Typically, high value cases settle with a Periodical Payment Order arrangement to pay for future care costs, but cases can settle with a lump sum only arrangement. This impacts the DEL as the lump sum element is charged to DEL whilst a PPO arrangement will provide payments over the lifetime of the claimant and will be charged to the AME budget for future year costs. Quite often, claimant preference is not known or hasn't been decided by the claimant, prior to the RTM settlement date.
- Further complexities might arise if a range of discount rates are introduced for different life expectancies. HM Treasury are considering the introduction of a range of discount rates. Shorter life expectancies would have a higher discount rate and therefore lower multipliers applied, reflecting the lower inflationary cost of the settlement for providing for fewer years.

6.0 RISK SHARE AGREEMENT 2021/22

Four of the five cost drivers underpinning the Risk Share percentages have been updated to take account of performance data for the three years to 2020/21.

The Lessons Learned element which comprises two parts; NHS scores for both the Management of Concerns and for Learning from Events, has not been

updated. The two scores are derived from inspections led by the Welsh Risk Pool Safety & Learning Team. The planned inspections for April 2020 were delayed by the impact of the Coronavirus pandemic.

Obtaining updated measures for 2021/22 is also problematic. Delays arising from the necessary relaxation of timescales for submissions during the pandemic lockdown period would result in skewed results. It is not appropriate to measure Health Boards and Trusts on the usual metrics for timescales when they were given authority to submit beyond the usual deadlines.

Normal timescales for submission dates will resume from the 1st October 2021 as agreed at the May Welsh Risk Pool committee. Therefore, the scores will remain the same for the financial year 2021/22 for the Audit/Lessons Learned principle, with a resumption of inspections and data collection in 2021/22 for the 2022/23 Risk Share apportionments.

Appendix 2 includes the revised Risk Share values for the current forecast of the required £16.495m included in our IMTP forecast.

7.0 CLINICAL NEGLIGENCE - ANALYSIS OF ONGOING CLAIMS

A high-level analysis of claims by probability and gross value shows the scale of the financial challenge faced by NHS Wales.

Overall, case numbers have increased by 6% since this time last year but the total value of cases has increased by almost 11%.

Probable and Certain case numbers have reduced by 44 cases or 6.5% since this time last year but the value has increased by over 13%. This gives an indication of the increasing cost of high value claims. The upward trend can be seen from the table on Page 8 which shows an increasing number of cases in both the lower and higher value ranges over the last 12-month period.

Pressure on the 2021/22 DEL budget is also being caused by higher lump sum elements and lower Periodical Payment settlements, or lump sum settlements only, so more of the settlement value is being charged in year and less over the lifetime of the claimant.

Assessment of probability	Number of claims @ June 2020	Estimated value £m	Number of claims @ June 2021	Estimated value £m
Unspecified	28	31.85	64	32.41
Remote	40	65.88	55	38.49
Possible	891	1,198.71	953	1,359.56
Probable	137	58.07	128	146.60
Certain	543	675.49	508	684.27

Total	1,704	2,057.97	1,803	2,279.35
Finalised	65	27.97	95	18.03

53% of the total number of cases have a 'possible' status with a combined liability of over £1.3bn. These cases are not currently provided for in the forecast or accounted for as a provision in the accounts because of the level of uncertainty regarding the liability and the value of claim.

Further to the table above, the analysis below shows the distribution of the number of cases across a range of values:

	Number of cases									
Probability of loss	<£25K	<£100K	<£1M	<£5M	<£15M	>£15M	Total			
Unspecified	58	2	1	0	3	0	64			
Remote	40	8	3	0	4	0	55			
Possible	208	278	301	63	81	22	953			
Probable	16	34	55	14	7	2	128			
Certain	122	141	171	37	30	7	508			
Finalised	95	0	0	0	0	0	95			
Total June 2021	539	463	531	114	125	31	1,803			
Total June 2020	464	488	507	101	117	27	1,704			

The June 2020 comparator shows that overall case numbers have increased by 99 over the last 12 months. Case numbers have increased by 17 since the start of the financial year from 1,786 open cases.

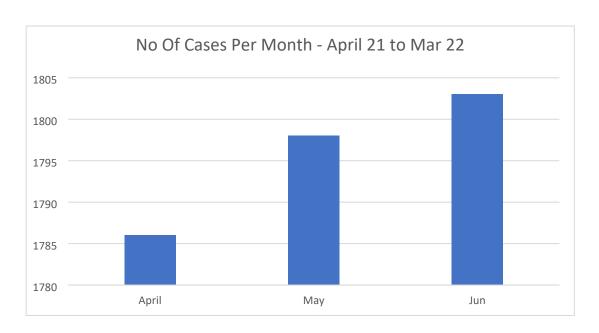
The above table shows the number of cases valued at less than £1m have increased by 74 over the past 12 months. Within this total, 50 cases are valued at less than £100K.

There are 25 cases more than at this point last year valued over £1m. Within this total, there are 13 more cases in the £1m to £5m range, 8 more cases in the £5m to £15m range and 4 more cases than at this point last year for cases valued over £15m.

There are 46 'Probable or Certain' cases with WRP liabilities over $\pmb{\pounds 5m}$ each and which have a combined WRP liability of $\pmb{\pounds 482m}$, and an average of £10.5m per case. These are expected to settle over the next 3-5 year period reflecting the increasing pressure on the core budget year on year.

The number of new matters opened since 1^{st} April 21 is 123 compared to 138 for the first three months in 2020/21. The number of closed matters is 106 compared to 108 for the first three months of 2020/21.

The table below shows case numbers since the beginning of the financial year:



Appendix 1 sets out the movement on the number of cases during the year by Health Board.

Case numbers are expected to increase to some extent this year and for the next 2–3 year period for cases relating to hospital acquired Covid 19 infections (nosocomial cases) for NHS patients and for affected NHS staff members.

The potential cost impact of these claims may be substantial and current modelling suggests a large range of outcomes from £7m to £69m over the next three-year period, depending on the number of incidents which convert to a claim and then progress to settlement.

Welsh Government are not providing additional funds for nosocomial claims expenditure and therefore 2021/22 nosocomial expenditure will be charged to the DEL and consequently the Risk Share. The DEL forecast at M3 includes a £1m estimate for nosocomial claims expenditure this year.

A business case has been submitted to Welsh Government to provide the funding to support a new team within L&RS to manage nosocomial claims.

Welsh Government expect thorough investigations into each nosocomial infection death and the same is likely to apply to other nosocomial cases which led to harm. The profile of this issue will increase, along with the financial risk if L&R is not sufficiently staffed to be able to review decisions made by NHS bodies to admit qualifying liability.

These are complex legal decisions and most Health Board claims managers will not be aware of the potential impact on the legal tests of the pandemic and the financial implications of inappropriate admissions of liability. At this point, it is unclear how many will be defensible but, without L&R being able to review these, there is a high risk of inappropriate admissions and payments being made.

The first solicitor and paralegal are due to be recruited by the end of the summer.

8.0 GMPI UPDATE

The GMPI covers claims for compensation arising from the care, diagnosis and treatment of a patient following incidents that happen on or after 1 April 2019 in relation to GMS work.

Claims are reimbursed without application of the £25K excess applied to clinical negligence claims and the total value of claims will be met by Welsh Government. The current caseload consists of the following to 30th June:-

GMPI CASELOAD 2019/20 - 2021/22 YTD

	2019/20	2020/21	2021/22 YTD	Total
General Queries	1,293	1,568	400	3,261
Concerns & Complaints	96	121	36	253
Potential claims	34	35	18	87
Letter of Claim Received	3	9	2	14

To date, fourteen letters of claim have been received. Five have been concluded, one settlement, one defended at trial and another discontinued.

9.0 PROFESSIONAL IMPACT OF LEGAL & RISK SERVICES

£16m to M3 compared to **£47m** at this point in 2020/21 and compared to **£120m** for 2020/21. The table below provides an overview of the professional influence savings recorded for 2021/22 to date and reflects significant achievements in reducing the final settlements from that of the claimant's initial estimate.

	2020/21	2021/22 to M3		
Savings	£m	£m		
Claims below £100K	2.659	1.003		

Claims above £100k	111.745	13.160
Savings in relation to costs	1.830	0.477
Repudiated Claims	2.713	1.764
Miscellaneous Savings	0.587	0.002
TOTAL	119.534	16.406

WRP FINANCE ACTIVITY

During the next few months, NWSSP Finance staff will undertake the following:

- Provide Welsh Government with the first quarter provision balances for the ELS GMPI scheme
- Confirm the GMPI forecasting of liabilities and annual charges.
- Roll forward 5-year DEL & AME forecasts from 2022/23.
- Hold the bi-annual sub-TAG WRPS group with NHS Wales representatives in October and February.

Appendix 1 – Analysis of caseload and activity for clinical negligence matters to 30th June 2021 by Health Board with 2020/21 comparative

2021/22	AB MU	BC U	A B	C Taf	H D	C& V	Pow ys	WA ST	Velin dre	PH W	Grand Total
		33	33		20	25					
Opening Month 1	320	1	4	263	6	5	10	31	23	13	1786
		33	33		21	26					
Closing M3	318	0	6	266	1	0	11	34	22	15	1803
Movement	-2	-1	2	3	5	5	1	3	-1	2	17
Total opened											
2020/2021	19	20	26	17	14	17	1	6	1	2	123
Total closed			-								
2020/2021	-21	-21	24	-14	-9	-12	0	-3	-2	0	-106

2020/21	AB MU	BC U	A B	C Taf	H D	C& V	Pow ys	WA ST	Velin dre	PH W	Grand Total
		31	29		21	24					
Opening Month 1	311	8	7	229	2	6	12	29	7	13	1674
		33	33		20	25					
Closing Month 12	320	1	4	263	6	5	10	31	23	13	1786
Movement	9	13	37	34	-6	9	-2	2	16	0	112

Total opened 2020/2021	75	12 2	11 4	85	49	75	5	11	10	3	549
Total closed 2020/2021	-66	- 10 9	- 77	-51	- 55	-66	-7	-9	6	-3	-437

Appendix 2 - Risk Share allocations are based on the updated 2021/22 percentages for four of the five cost drivers which allocate costs per NHS Wales organisation.

The Lessons Learned element remains at prior year rates for 2021/22. The Risk Share proportions are based on performance and data for the underlying cost drivers for the 3-year rolling period from 2018/19 to 2020/21.

	RSA 2021/22	2021/22 - IMTP
ANEURIN BEVAN		2,673,757
	16.21%	
SWANSEA BAY		2,641,613
	16.01%	
BETSI CADWALADR		3,132,216
	18.99%	

WAST	1.11%	374,275
VELINDRE	1.39%	183,221
PHW		229,540
POWYS	4.74%	781,434
HYWEL DDA	10.59%	1,746,752
СТМ	12.45%	2,053,352
CARDIFF & VALE	16.04%	2,645,039

Classification: Official - Sensitive



To: Welsh Government Officials
 CEOs at Health Boards and NHS Wales Trusts
 Medical Directors
 Directors of Nursing
 Directors of Therapies & Health Sciences
 British Medical Association
 General Practitioners Committee (GPC) Wales

Medical Examiner Service 4/5 Charnwood Court Heol Billingsley Parc Nantgarw CF15 7QZ

14 June 2021

Dear Colleague

Re: Implementation of the Medical Examiner Service in Wales

We are grateful to colleagues across NHS Wales for their hard work and commitment to develop the service to this point and look forward to continuing implementation with renewed energy now that some of the constraints relating to COVID 19 are starting to diminish.

Background

It was originally anticipated that Medical Examiner scrutiny of all deaths not referred directly to a coroner would be a statutory requirement in both Wales and England from April 2021. Although the impact of COVID 19 during 2020/21 has delayed both the build-up of the service and the legislative timeframe, this seems an appropriate point to:

- a) Thank you for your help and support this far, and
- b) To set out where we are with implementation across Wales currently and what our plans are for the continued build-up of the service so that we are able to scrutinise all deaths that occur in Wales, not referred directly to a coroner, by 31st March 2022.

Current Position

NHS Wales Shared Services Partnership has developed, on behalf of Health Boards and Trusts, a single Medical Examiner Service for Wales. This Service operates from four Regional Hub Offices as follows:

- **North Wales**, based in St Asaph, covering the Betsi Cadwaladr University Health Board area
- Mid & West Wales, based in Llanelli, covering the Hywel Dda and Swansea Bay University Health Board areas
- **South Wales Central**, based in Nantgarw, covering the Cwm Taf Morgannwg University Health Board and Powys Teaching Health Board areas, and
- **South East Wales**, based in Newport, covering the Cardiff & Vale and Aneurin Bevan University Health Board areas.

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These offices are staffed by teams of Medical Examiners (all of whom are senior doctors), supported Medical Examiner Officers (drawn form a range of backgrounds), all employed directly by Shared Services Partnership to ensure independence.

They are all trained, and competence assessed in their roles, and provide a professional and standardised scrutiny of deaths (Stage 1 Mortality Review) via a three-stage process:

- Review of the relevant clinical notes
- Discussions with the Qualified Attending Practitioner, and
- Conversation with the bereaved (usually via the Next of Kin).

Of the deaths scrutinised to date:

- 23% have resulted in a referral to a coroner in line with legal requirements, and
- 29% have resulted in a referral to the care provider for further investigation.

It is worth noting that some of these cases would not have been identified or referred without the Medical Examiner scrutiny. It is also worth noting that 63% of the cases referred for further investigation came from concerns raised by the family of the bereaved.

Changes in practice and behaviours are emerging because of this process and feedback from stakeholders has been very positive with ample evidence of the delivery of anticipated benefits as shown below.

Delivery of Benefits

The Medical Examiner Service for Wales can clearly demonstrate the benefits originally envisaged for the service:

- Reduced distress for the bereaved
- Improved safeguards for the public, and
- Improved quality of death certification.

This will be further enhanced during 2021 as the links between Medical Examiner Service outputs and care provider governance systems become hard wired through single, system wide processes with closed feedback loops.

Plans for Continued Service Build Up in 2021/22

During 2020/21 the Medical Examiner Service for Wales not only designed and established systems and processes to underpin the service, it also established new roles, clinical and non-clinical, to deliver it. This was achieved during a very difficult year with many constraints.

At present only around 20% of all deaths are currently being scrutinised by a Medical Examiner, with the majority of these occurring in acute care locations.

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There is a real need to accelerate implementation as quickly as possible to ensure the benefits that we know can accrue are delivered as widely as possible.

The plan for this is as follows:

Phase 3 Implementation (March 2021 – September 2021)

- Increase catchment area to cover all in patient deaths
- Work with colleagues in primary care to capture deaths in the community and in other care provider locations
- Continue to evaluate the service and processes alongside stakeholder colleagues
- Continue to work with the National Medical Examiner to ensure compliance with Good Practice Guidelines across Wales.

Phase 4 Implementation (September 2021 – January 2022)

- Increase catchment area to cover all deaths not investigated by a coroner
- Ensure robust processes are in place for activation of legislation
- Continue to work with stakeholders to resolve any ongoing or evolving issues.

Access to Clinical Notes

One of the key requirements of the medical examiner process is proportionate review of the relevant clinical notes. For deaths that occur in the community, access to notes is via the Practice clinical system, underpinned by appropriate Information Governance arrangements.

For deaths that occur in acute settings, all Health Boards and Trusts have committed to providing the relevant clinical notes (last episode only) via a "scan and send" arrangement.

This:

- Eliminates the need to move physical notes off site
- Reduces the need for avoidable travel for staff
- Reduces the time for completion of the scrutiny process, and completion of the MCCD
- Allows for the amalgamation of work at the regional level to better match daily demand and Medical Examiner Service capacity.

While we are making progress with this generally, and local Implementation Teams have been established within each Health Board area, it is noticeable that arrangements within hospitals are not yet fully embedded to enable this.

This is now the rate limiting factor in the build-up of the service and requires immediate attention at Health Board level to deliver.

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For any further information or discussion please contact:

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Yours sincerely,

Dr Alan Fletcher, National Medical Examiner Dr Jason Shannon, Lead Medical Examiner for Wales Neil Frow, Managing Director, NHS Wales Shared Services Partnership Professor Malcolm Lewis, Medical Director, NHS Wales Shared Services Partnership

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Cyfarwyddwr Cyffredinol Iechyd a Gwasanaethau Cymdeithasol/ Prif Weithredwr GIG Cymru Grŵp Iechyd a Gwasanaethau Cymdeithasol

Director General Health and Social Services/ NHS Wales Chief Executive Health and Social Services Group



Mr Adrian Crompton Auditor General for Wales Audit Wales Head Office 24 Cathedral Road Cardiff CF11 9LG

8 June 2021

Dear Adrian

Procuring and Supplying PPE for the Covid-19 Pandemic

The Welsh Government (WG) and NHS Wales Shared Service Partnership (NWSSP) welcome the findings of the Audit Wales report on *Procuring and Supplying PPE for the Covid-19 Pandemic* and offer the following joint response to the recommendations. A table summarising the action plan and delivery progress is included at Annex A.

Recommendation 1 – As part of a wider lessons learnt approach, the Welsh Government should work with other UK countries where possible to update plans for a pandemic stockpile to ensure that it is sufficiently flexible to meet the demands of a pandemic from different types of viruses.

WG accept Recommendation 1 and agree the importance of continuing to work with other UK countries to update our plans for an appropriate and flexible pandemic stockpile. WG has recently attended the first meeting of the UK Review of Emergency Preparedness Advisory Board, chaired by Department for Health and Social Care. The remit of the group includes a PPE workstream which will provide advice on the types of PPE required for each case setting for infectious disease risk and will support procurement planning and Covid-19 PPE management. The workstream is dependent on epidemiological advice on likely pathogens and scenarios but is intended to be initiated early in 2021/22. WG will draw on the advice of this group along with the expertise within WG and NHS Wales Shared Services Partnership (NWSSP) to update pandemic preparedness plans, including on PPE. Whilst dependent on UK wide activity we expect to have updated our plans by December 2021.



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In the interim, WG have advised NWSSP to continue to hold a stockpile of key PPE items and maintain a minimum stockpile holding of 24 weeks until 1st July 2021 and a 16 week minimum thereafter. The reduction from 24 weeks to 16 weeks reflects the reducing need to hold contingency for the end of the EU transition period (previously 8 weeks contingency). The 16 weeks stockpile includes contingency for BAU PPE requirements (4 weeks), Covid-19 requirements (8 weeks) and pandemic preparedness stock (4 weeks).

Recommendation 2 - In updating its own plans for responding to a future pandemic, the Welsh Government should collaborate with other public bodies to articulate a set of panpublic sector governance arrangements for planning, procuring and supplying PPE so that these do not need to be developed from scratch.

WG accept Recommendation 2 and will work with other public bodies to develop a clear framework for PPE governance arrangements based on the best practice and lessons learned during the Covid-19 pandemic.

As reflected in the AGW's report, working collaboratively with stakeholders has been at the heart of the WG and NWSSP's response on PPE procurement and supply. Best practice and lessons learnt on PPE have been collated throughout the pandemic and these included a recognition that, in some cases, governance and finance frameworks were designed as the pandemic progressed resulting in some duplication of effort. To address this WG will:

- 1) Review all the governance arrangements on PPE.
- 2) Ensure the decision-making and controls framework for PPE are agreed in advance as part of contingency planning.
- 3) The ToR will ensure there is clarity on accountability between governance groups and teams.
- 4) These arrangements will be kept under review, for example to ensure alignment with the broader Four Nations and Emergency Preparedness approach.

WG anticipate completing this work by 30th September 2021.

Recommendation 3 - Shared Services should work with NHS and social care bodies to maintain an up-to date stock management information system that provides timely data on local and national stocks of PPE that can be quickly drawn upon in a future pandemic to support projections of demand and availability as well as providing a robust source of information for briefing stakeholders.

NWSSP accept recommendation 3. Lesson learnt activity has already identified that two-way data and information sharing between policy, planners and frontline teams has been critical in ensuring procurement is aligned with demand and that there is confidence in the system. NWSSP will:

- 1) Continue to invest in and embed the Stockwatch system and roll-out to Social Care where possible.
- 2) Maintain the accuracy and timeliness of stock information within the NHS Oracle Finance & Procurement System.
- 3) Maintain the PPE supply and demand model so that this can be used again in future if need arises.
- 4) Enhance integrity of the NHS Oracle stock information through proposed rollout of Scan4Safety in health organisations.

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NWSSP consider elements 1 to 3 above to represent on-going activity and element 4 is subject to the approval of the Scan4Safety business case.

Recommendation 4 - In updating the strategic approach to PPE, Shared Services and the Welsh Government should work together to develop a clear direction in terms of:

- A return to competitive procurement and an end to emergency exemptions.
- Fuller consideration of the wider criteria usually applied to procurement, such as sustainable development and policies on modern slavery.
- The intentions and aspirations in relation to the domestic PPE market, including the balance between the potential benefits of resilience through local production capacity against the potentially increased costs compared to international manufacturers.
- The size and nature of the pandemic stockpile it intends to hold, considering the benefits and costs of holding and maintaining stock and the timing of purchases given the ongoing disruptions to the PPE market.

NWSSP and WG accept Recommendation 4 and have started work to develop a longer-term, strategic approach to PPE procurement and supply. NWSSP will:

- 1) Develop a plan that provides a strategic approach to the procurement of PPE.
- 2) Go out to tender for a compliant framework contract for the future competitive procurement of PPE.
- 3) Ensure that the new framework covers supply chain resilience, foundation economy, modern slavery, the Wellbeing of Future Generations Act and Decarbonisation.
- 4) Build on the work already undertaken by CERET to review the respective merits of local production against international purchases.
- 5) Ensure that the longer-term plan for PPE analysis the optimum stock holdings and timings of purchases.

NWSSP anticipate completing these actions by 30th September 2021.

Recommendation 5 - To increase confidence in stocks and supplies at the national level, Shared Services should work with the Welsh Government to publish details of the amount of stock it holds of each item alongside the regular publication of data on the numbers of items issued.

WG accept that ensuring confidence in PPE stocks and supplies is a critical part of ensuring confidence in the Government's pandemic response and **accept Recommendation 5.**

WG currently publish a fortnightly statistical release on PPE items issued based on management information provide to the Welsh Government by NWSSP.

WG will work with NWSSP to consider what further management information can be provided on National stock levels to provide greater transparency. The information provided will show how WG and NWSSP are performing against the commitment to hold a minimum stockpile on PPE and will need to take into consideration the fluid nature of PPE supply and demand. It is also important to note that the information will be based on the National stock levels of PPE held by NWSSP and will not take into consideration the often large volumes of PPE items held locally by Health Boards and Local Government.

WG anticipate completing these actions by 30th September 2021

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Recommendation 6 - Shared Services should: check that it has published contract award notices for all contracts where it is required to do so; review those that it has published to ensure they are accurate; and ensure that it publishes contract award notices within the required timeframe for future contracts.

NWSSP accept Recommendation 6 and have already completed reviewing existing contract awards and have taken corrective action where necessary to ensure contracts have been published as appropriate.

In addition NWSSP are reviewing and refreshing their internal operating procedures to ensure compliance with the requirements to publish notices for future contracts. NWSSP anticipate completing this work by 31st May 2021.

Recommendation 7 - The Welsh Government should review whether the Sell2Wales site needs updating to allow bodies to publish retrospective contract award notices more efficiently without relying on suppliers to sign-up.

WG accept Recommendation 7 to review whether the Sell2Wales site needs updating to allow bodies to publish retrospective contract award notices more efficiently without relying on suppliers to sign-up. WG anticipate completing the review by 30th June 2021.

Recommendation 8 Given public interest in the awarding of PPE contracts and to promote confidence in the procurement system, the Welsh Government and Shared Services should publish details of the contracts awarded under emergency exemptions in a single place that is easy to access

NWSSP and **WG** accept Recommendation 8 to publish a one-off list of the contracts awarded under emergency exceptions, the information will be held on NWSSP's website and will be completed by 30th June 2021. Future purchases will be managed through the new framework agreement.

I hope this information is helpful. Should further information be needed please contact Lisa Wise, lisa.wise@gov.wales.

Yours sincerely

Dr Andrew Goodall CBE

An Good

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Annex A - Summary of Actions and Progress

Recommendation	Who?	Agreed Action	Date for	Progress
			Completion	
R1 As part of a wider lessons learnt approach, the Welsh Government should work with other UK countries where possible to update plans for a pandemic stockpile to ensure that it is sufficiently flexible to meet the demands of a pandemic from different types of viruses.	WG	The Welsh Government accept Recommendation 1 and agree the importance of continuing to work with other UK countries to update plans for an appropriate and flexible pandemic stockpile. 1. WG will ensure appropriate representation on the DHSC led UK Review of Emergency Preparedness Advisory Board and PPE workstream. Please note the PPE workstream is dependent on epidemiological advice on likely pathogens and scenarios but DHSC have advised it is intended to be initiated early in 2021/22 to consider overlaps with Covid-19 and pandemic influenza PPE. 2. WG will draw on the advice of these groups along with the expertise within WG and NHS Wales Shared Services Partnership (NWSSP) to update pandemic preparedness plans, including on PPE.	We anticipate completing work against this action by 31st December 2021 although this is dependent on UK Government progress.	 WG representatives recently attended the first meeting of the UK Review of Emergency Preparedness Advisory Board (chaired by DHSC). The PPE workstream has yet to be established. WG have advised NWSSP to continue to hold a stockpile of key PPE items and maintain a minimum stockpile holding of 24 weeks until 1st July 2021 and a 16 week minimum thereafter. The reduction from 24 weeks to 16 weeks reflects the reducing need to hold contingency for the end of the EU transition period (8 weeks contingency). The 16 weeks stockpile includes contingency for BAU PPE requirements (4 weeks), Covid-19 requirements (8 weeks) and pandemic preparedness stock (4 weeks).
R2 In updating its own plans for	WG	The Welsh Government accept	We anticipate	Best practice and lessons Best practice and lessons
responding to a future		Recommendation 2 and will work	completing	learnt on PPE have been
pandemic, the Welsh		with other public bodies to develop	this work by	collated and shared with the

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Recommendation	Who?	Agreed Action	Date for Completion	Progress			
Government should collaborate with other public bodies to articulate a set of pan-public sector governance arrangements for planning, procuring and supplying PPE so that these do not need to be developed from scratch.		a clear framework for PPE governance arrangements based on the best practice and lessons learned during the Covid-19 pandemic. WG will: 5) Review all the governance arrangements on PPE. 6) Ensure the decision-making and controls framework for PPE are agreed in advance as part of contingency planning. 7) Ensure the ToR provide a clear RACI between governance groups and teams. 8) These arrangements will be kept under review, for example to ensure alignment with the broader 4N approach.	[30th September 2021].	PPE Procurement and Supply Group – these include a recognition that governance and finance frameworks were designed as the pandemic progressed resulting in some duplication of effort across groups. 2. WG have collated ToR for all PPE-related governance groups that were stood up during the Covid-19 pandemic.			
R3 Shared Services should work with NHS and social care bodies to maintain an up-to date stock management information system that provides timely data on local and national stocks of PPE that can be quickly drawn upon in a future pandemic to support projections of demand and availability as well as providing a robust source of information for briefing stakeholders.	NWSSP/ WG	NWSSP and WG accept this recommendation and lesson learnt activity has already identified that two-way data and information sharing between policy, planners and frontline team has been critical in ensuring procurement meets demand and that there is confidence in the system. 1. Continue to invest in and embed the Stockwatch system and roll-out to Social Care where possible.	On-going.	 NWSSP have purchased and embedded the Stockwatch system across Covid stores in the NHS and Social Care. As we return to BAU NWSSP stock information is captured within Oracle Inventory plus the additional rollout of Scan 4 Safety will capture stockholdings within the health organisations. As above. The Deloitte demand model will be maintained for future 			

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Recommendation	Who?	Agreed Action	Date for	Progress
		 Ensure accuracy and timeliness of stock information within Oracle. Enhance integrity of Oracle stock information through rollout of Scan4Safety. Maintain Deloitte demand model so that this can be used again in future if need arises. 	Completion	use if required.
R4 In updating the strategic approach to PPE, Shared Services and the Welsh Government should work together to develop a clear direction in terms of:	NWSSP	 Develop a plan that provides a strategic approach to the procurement of PPE. Go out to tender for a compliant framework contract for the future competitive procurement 	 31/08/2021 01/07/2021 	 An interim plan is in place but a longer-term strategy is being developed with a planned implementation date of 1 September 2021. Fully compliant framework
 a return to competitive procurement and an end to emergency exemptions. fuller consideration of the wider criteria usually applied to procurement, such as sustainable development and 		of PPE. 3. Ensure that the new framework covers supply chain resilience, foundation economy, modern slavery, the Wellbeing of Future Generations Act and decarbonisation.	3. 01/07/2021	contract for future competitive procurement currently out to tender and will be in place by 1 st July 2021 3. The new framework contract fully considers the points raised including supply chain
policies on modern slavery. • the intentions and aspirations in relation to the domestic PPE market, including the balance between the potential benefits of resilience through local production capacity against the		4. Build on the work already undertaken by CERET and prospective ESNR PPE pilots to review the respective merits of local production against more economic international purchases.	4. 30/09/2021	resilience, foundation economy, modern slavery, wellbeing of future generations act and decarbonisation. 4. Work is on-going to further develop the work already
potentially increased costs compared to international manufacturers. • the size and nature of the		•	5. 31/08/2021	undertaken by CERET and any ESNR PPE Pilot. 5. The plan will include this analysis with WG providing

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Recommendation	Who?	Agreed Action	Date for Completion	Progress
pandemic stockpile it intends to hold, considering the benefits and costs of holding and maintaining stock and the timing of purchases given the ongoing disruptions to the PPE market.			Completion	policy steer and NWSSP providing expertise on improving resilience.
R5 To increase confidence in stocks and supplies at the national level, Shared Services should work with the Welsh Government to publish details of the amount of stock it holds of each item alongside the regular publication of data on the numbers of items issued.	WG/ NWSSP	WG accept that ensuring confidence in PPE stocks and supplies is a critical part of ensuring confidence in the Government's pandemic response and accept Recommendation 5. WG currently publish a fortnightly statistical release on PPE items issued based on management information provide to the Welsh Government by NWSSP. In addition: 1. WG will consider what further management information can be provided on National stock levels to provide even greater transparency. 2. The information provided will show how WG and NWSSP are performing against the commitment to hold a minimum stockpile on PPE and will need to take into consideration the fluid nature of PPE supply and	30/09/2021	 Initial view is to provide a RAG rating rather than detailed stock levels based on issues during the 16 highest weeks in the pandemic. NWSSP will provide this data weekly to WG subject to agreement with WG around parameters. An initial draft of the data table is being shared with the PPE Procurement and Supply Group for comment 19 May 2021.

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Recommendation	Who?	Agreed Action	Date for Completion	Progress
R6 Shared Services should: check that it has published contract award notices for all contracts where it is required to do so; review those that it has published to ensure they are accurate; and ensure that it publishes contract award notices within the required timeframe for future contracts.	NWSSP	demand. It is also important to note that the information will be based on the National stock levels of PPE held by NWSSP and will not take into consideration the often large volumes of PPE items held locally by Health Boards and Local Government. 3. WG will liaise with NWSSP on provision of data on weekly basis. 1. Review existing contract awards and take corrective action where necessary in terms of publication. 2. Review and refresh internal operating procedures to ensure compliance with the requirements to publish notices for future contracts.	1.Complete 2.31/05/2021	 NWSSP have undertaken checks and corrective action has been taken for contracts awarded. Review of internal operating procedures is underway to ensure that any future contract awards are compliant with publishing requirements.
R7 The Welsh Government should review whether the Sell2Wales site needs updating to allow bodies to publish retrospective contract award notices more efficiently without relying on suppliers to sign-up.	WG	WG accept the recommendation to review the Sell2Wales site to publish retrospective contract award notices without relying on suppliers to sign-up.	30/06/2021	Initial conversations have been held with the WG Sell2Wales team who have set out that there are a number of reasons why it isn't possible or desirable to implement the recommendation:

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Recommendation	Who?	Agreed Action	Date for Completion	Progress
				 There are numerous fields which need adding in order to complete the contract award notice in line with FTS schema requirements (individual name, business name, address, contact details etc) and by allowing a buyer to add these manually introduces data quality issues and it's also an onerous task for the buyer. Risk regarding GDPR consent, as the manual approach would not record PN consent on Sell2Wales for audit purposes and provides an issue in relation to future challenge. Diminished Sell2Wales reporting, S2W would be unable to properly report on Suppliers being awarded contracts as this is driven by the full supplier registration profile. It sets a precedence and could impact on the number of suppliers

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Recommendation	Who?	Agreed Action	Date for	Progress
			Completion	, and the second
				registered which is a key selling point to encouraging buying org's to utilise Sell2Wales. 3. The Sell2Wales team have suggested that an alternative approach could involve the buyer (NWSSP) inviting the supplier to register through the Sell2Wales site. Once the supplier has registered the buyer can make the award at a later date. This functionality already exists in Sell2Wales but requires administrative effort from both the buyer and supplier. 4. Sell2Wales has also suggested that the Sell2Wales site could publish the listing created by NWSSP under recommendation 8.
R8 Given public interest in the awarding of PPE contracts and to promote confidence in the procurement system, the Welsh Government and Shared Services should publish details of the contracts awarded under emergency exemptions in a single place that is easy to access.	NWSSP	Ensure that all current and future PPE contract awards are appropriately publicised.	30/06/2021	 For already awarded PPE contracts a full listing will be provided on NWSSP's website. Future purchases will be managed through the new framework agreement.

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12/12 219/292



NHS WALES SHARED SERVICES PARTNERSHIP MONITORING RETURN COMMENTARY FOR PERIOD 2 – MAY 2021

This summary report provides a review of NHS Wales Shared Services Partnership's (NWSSP) performance for May 2021 and should be read in conjunction with the Monitoring Return tables submitted for Month 2.

Thank you for your letter of 26th May 2021 responding to the Month 1 monitoring return. The action points raised are addressed within this return.

Overview of Performance and Financial Position

NWSSP's financial position for Month 2 is reported at break-even. This is based on the assumption that all additional Covid 19 funding and other identified funding anticipated will be received from Welsh Government.

1. Movement of Opening Financial Plan to Forecast Outturn (Table A)

Table A has been updated in Month 2 to reflect the revised Covid-19 expenditure plan and income assumed from Welsh Government. This has resulted in the removal of the in year movements as requested (Action Points 1.1 and 1.7). The plan continues to show a break-even in year and recurrent plan.

The table has also been updated with with cumulative additional in year savings and income generation of £0.853m which are negated by the establishment of a potential reserve for reinvestment within NWSSP including the major TRAMS and Laundry projects and/or distribution to NHS Wales. Future forecast overachievement of savings have also been populated to bring the current forecast savings overachievement up to £2.000m. This will be reviewed further as we progress through the financial year. This is now correctly reported on line 31 (Action Point 1.8)

The assumption of full funding for the Covid expenditure and other anticipated income enables us to continue to report a break-even forecast outturn.

2. Overview of Key Risks & Opportunities (Table A2)

This table has been updated in Month 2 in respect of the following (Action Point 1.2):

• Staff turnover factor is less than budgeted – as a result of the large pay underspends reported to date, this risk has been reduced to zero

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- Non-achievement of income targets given the current over-achievement of income targets reported to Month 2, this risk has been reduced to zero
- Covid-19 funding not received from Welsh Government this risk has been amended to £37.074m per the total covid funding forecast. This risk remains as we have not yet received formal confirmation from Welsh Government that we can invoice for these costs.
- Medical Examiner Funding this risk has been reduced to £1.993m per the forecast funding requirements of the service in 2021/22 as confirmed to Gareth Haven. We await a formal letter of assurance in respect of this funding. We acknowledge from meetings with Welsh Government officials that this letter will be forthcoming.
- Additional WRP nosocomial covid claims this risk has been reduced to zero in month as a high level forecast to settle £1.000m of these claims is now included within the overall WRP DEL forecast with any excess to be funded under the Risk Sharing Agreement.
- An opportunity to potentially overachieve our forecast savings by a further £1.000m has been included based on our underlying position to Month 2.

3. Actual Year to Date Monthly Position (Tables B, B2 & B3)

The key points to note within the year to date and forecast position are:

- The full year income forecast has reduced from £513.043m in Month 1 to £502.431m in Month 2 due to a reduction in the income forecast from the Single Lead Employer. This is as a result of changes to the assumptions made in the forecast regarding the point of scale of new intakes, banding percentages and trainee specialty numbers.
- The NHS income profile increases throughout the year in line with the phased intake to the SLE for core and specialty trainees. This is also evidenced in the phased increase of pay costs in Table B and the Medical/Dental pay costs in Table B2. The total income and expenditure for the SLE in 2021/22 is forecast at £154.479m per the profile summarised below:

M1	M2	М3	M4	M5	M6	M7	M8	M9	M10	M11	M12	TOTAL
£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m
8.938	9.424	9.675	9.675	11.850	12.274	12.843	13.609	16.302	16.302	16.302	17.284	154.479

This SLE information is available by organisation if required (Action Point 1.4)

- Stores income (including recharges for PPE) is forecast based on the average of the M1 and 2 issues. We are sharing the split of the monthly expenditure between PPE and Non PPE with UHB/Trust collegues to inform their forecasting. In particular the use of PPE will be significantly impacted by each organisations activity levels to which they will need to apply local knowledge to determine their future demand for PPE. Given our stores issues are driven entirely by demand from NHS Wales organisations, our forecast in respect of this may alter in future months. We are currently forecasting our stores income and expenditure based on the average of the issues in Months 1 and 2 and have asked UHBs/Trusts for feedback on planned increases in activity that will impact this assumption. Given all costs are recharged in full, there will be no impact on our forecast outturn, only on respective income and expenditure forecasts.
- The other income profile increases in Months 6, 9 and 12 in line with the invoicing for the pharmacy rebate scheme, the funds from which are repatriated to NHS Wales.
- The NHS Wales bonus was paid in May. In March 2021, the NWSSP (non SLE) bonus accrual totalled £1.928m. Bonus payments totalling £1.782m were paid in month. The balance of the accrual (£0.012m for substantive staff and £0.134m for bank staff) has been re-accrued in Month 2 on the basis that claims for bonus payments from staff who believe they are due payment are only being considered from 1st June 2021. We are reviewing the bank staff we expected to incur bonus payments for with payroll to understand if they have been paid on substantive posts in other organisations. Due to the re-accrual there is therefore no impact on the Month 2 position as a result of the bonus payment (Action Point 1.3).
- The accrual for the bonus payment to SLE staff has been reduced in month by the value of the payment made and the balance re-accrued as agreed with UHB finance colleagues. We will continue to review the outstanding accrual with payroll and if it is identified that any part of the accrual should be released we will credit the relevant UHBs as part of the SLE recharge process.
- Forecast depreciation charges of £3.883m have been included per our Annual Plan. These will be reviewed fully during June and updated in line with our non-cash submission at the end of June. This figure currently does not include any depreciation impact from the transfer of the laundry assets from 1st April 2021. We are awaiting confirmation of the final asset values that transferred to enable us to calculate this and will liaise with capital accounting colleagues in AB, BCU & SBU with regards to how this is treated in the non-cash submission.

- Exceptional costs of £0.521m are reported in Month 2 in respect of the NWSSP costs of the NHS Wales Covid donation to India. The equipment provided by NWSSP was a combination of items donated by the Department of Health & Social Care in 2020/21 and capital stock items. Initial conversations have commenced with Jackie Salmon regarding whether these need to be treated as impairments. We await further guidance and will report differently if required in future months.
- £3.032m income and expenditure is included to Month 2 in relation to the WRP DEL budget. This expenditure is reported separately on line 9 Losses, Special Payments & Irrecoverable Debts. A high level review of cases has been undertaken with regards to updating the year end forecast of cases that will charged against the DEL in 2021/22,. This has indicated that the initial annual plan forecast of £124.754m (£123.495m WRP DEL and £1.259m Redress) remains an accurate projection at this point in time and includes the excess redress costs above budget and a high level forecast that £1.000m of nosocomial claims will settle in 2021/22. The profile of the balance of the income and expenditure is phased on a straight-line basis over remaining months.

Given the forecast remains at £123.495m for DEL, the element to be funded under the risk share agreement also remains at £16.495m. The RSA % have been updated using the updated cost drivers for 2021/22 and shared with NHS Wales organisations for inclusion in their updated plans. The original and revised shares are detailed in the table below (Action Point 1.5):

	20/21 RSA	21/22 using 20/21 RSA	21/22 RSA	21/22 using 21/22 RSA	Movement
		£m		£m	£m
Aneurin Bevan Health Board	17.87%	2.948	16.21%	2.674	-0.274
Swansea Bay University Health Board	16.59%	2.736	16.01%	2.642	-0.095
Betsi Cadwaladr Health Board	17.07%	2.815	18.99%	3.132	0.317
Cardiff & Vale University Health Board	15.66%	2.583	16.04%	2.645	0.062
Cwm Taf Health Board	11.87%	1.958	12.45%	2.053	0.096
Hywel Dda Health Board	9.61%	1.586	10.59%	1.747	0.161
Powys NHS Trust	6.45%	1.064	4.74%	0.781	-0.283
Public Health Wales NHS Trust	1.34%	0.222	1.39%	0.230	0.008
Velindre NHS Trust	1.18%	0.194	1.11%	0.183	-0.011
Welsh Ambulance Service NHS Trust	2.26%	0.373	2.27%	0.374	0.001
NHS Wales Shared Services Partnership	0.10%	0.016	0.20%	0.034	0.018
TOTAL		16.495		16.495	0.000

- £0.058m of agency expenditure was reported in Month 2, which is a reduction from the £0.080m reported in Month 1.
- Table B3 details the year to date and forecast Covid19 additional expenditure. This has been collated and reviewed on a service by service basis within NWSSP and will continue to be monitored at this level.

The mass vaccination and other covid expenditure sections have been populated. Other covid expenditure relates to the NWSSP operational support costs and PPE issues as part of the mass vaccination packs and the social care and primary care PPE issues. It has been assumed that the current level of resource required to support covid will be required for the remainder of the financial year. A summary of the expenditure is detailed below:

		Full Year
	YTD	Forecast
	£m	£m
NWSSP Operational	0.886	5.727
NWSSP PPE	0.004	0.014
Mass Vacc - PPE	0.553	3.303
Mass Vacc - non PPE non pay	0.107	0.684
Mass Vacc - pay	0.133	0.903
Social Care/Primary Care PPE	4.403	26.443
TOTAL	6.086	37.074

The NWSSP operational costs are summarised below:

		Full
		Year
	YTD	Forecast
Pay	0.422	2.594
Estates / Security	0.166	0.786
Insurance	0.011	0.067
Transport	0.269	2.169
Other	0.018	0.112
TOTAL	0.886	5.727

The plan values for covid expenditure and funding have been updated as requested. There have been minor adjustments to the full year forecast in month.

We continue to await confirmation with regards to the approval of these costs and when/if we can invoice Welsh Government for them.

At the end of 2020/21 we accrued a credit note to Welsh Government totalling £113.196m to provide NWSSP with the cash coverage for the increased stock balances and prepayments. We are continuing to accrue this on a monthly basis and also accrue additional in year Welsh Government income rather than reduce the value of the credit note. Detailed monitoring of the covid cash position is undertaken to review the cash surpluses from stock debtor invoices raised in excess of stock creditor invoices paid less the Welsh Government funded social care and primary care PPE. We will liaise with Welsh Government if additional cash support is required in future months.

4. Welsh NHS Assumptions (Table D)

Table D has been left blank as requested.

5. Invoiced Income Streams (Table E1)

Line 1 of this table has been populated with the budgeted income streams by organisation. This includes the forecast income from UHBs/Trusts in respect of stores issues and the SLE recharges based on the actual in month recharges and agreed SLA values for future months. As these costs are recharged based on actual expenditure incurred, these may be subject to change in future months.

Lines 2-12 have been populated with anticipated income streams for which we have yet to receive formal funding confirmation.

The values for depreciation are included per our Annual Plan, although these are likely to change dependent upon when/if new capital schemes are approved during 2021/22 and will be reviewed as part of the non-cash exercise for submission in June.

We have now agreed our SLAs for 2021/22 and are assuming a 2% inflationary uplift can be applied to these.

6. Cash Flow (Table G)

Not required for completion.

7. PSPP (Table H)

This table is not required for NWSSP.

8. Capital Expenditure Limit Management and Disposals (Tables I, & K)

Tables I and J have been populated and reconcile to our Capital Expenditure Limit of £2.491m issued on 30th April 2021. For the larger schemes an indicative expenditure profile has been included and this will be refined as soon as milestone payments are confirmed and/or further information is received. At present there are no issues foreseen in incurring this capital expenditure.

There are no disposals to report in Table K in Month 2.

9. Aged Debtors (Table M)

At 31st May 2021 there were 10 NHS invoices outstanding over 11 weeks, six of which have been paid by the submission date. Due to the year end agreement of balances deadlines, payment of the remainder of the invoices was anticipated by the end of May however these have not been forthcoming from organisations. Arbitration warning letters have been issued and we await urgent responses (Action Point 1.6).

10. GMS (Table N)

Not required for completion by NWSSP.

11. Dental (Table O)

Not required for completion by NWSSP.

12. Other Issues

The financial information provided in this return is an accurate assessment of the NWSSP financial position at this point in time and aligns to the details provided in the NWSSP Partnership Committee and Senior Leadership Team reports.

The Shared Services Partnership Committee will receive the Month 2 Financial Monitoring Return at the July meeting.

13. Authorisation of Return

ANDREW BUTLER
DIRECTOR OF FINANCE AND
CORPORATE SERVICES

10th June 2021

NEIL FROW
MANAGING DIE

MANAGING DIRECTOR

Period: May 21

Table A - Movement of Opening Financial Plan to Forecast Outturn

This Table is currently showing 1 errors

Line 14 should reflect the corresponding amounts included within the latest IMTP/AOP submission to WG Lines 1 - 14 should not be adjusted after Month 1

	End / / Volume for the dependent of the month /	In Year Effect	Non Recurring	Recurring	FYE of Recurring
		£'000	£'000	£'000	£'000
1	Underlying Position b/fwd from Previous Year - must agree to M12 MMR (Deficit - Negative Value)	0	0	0	
2	Planned New Expenditure (Non Covid-19) (Negative Value)	-6,013	-612	-5,401	-5,40
3	Planned Expenditure For Covid-19 (Negative Value)	-37,074	-37,074		
4	Planned Welsh Government Funding (Non Covid-19) (Positive Value)	3,241	612	2,629	2,62
5	Planned Welsh Government Funding for Covid-19 (Positive Value)	37,074	37,074		
6	Planned Provider Income (Positive Value)	0	0		
7	RRL Profile - phasing only (In Year Effect / Column C must be nil)	0	0	0	
8	Planned (Finalised) Savings Plan	1,811	0	1,811	1,81
9	Planned (Finalised) Net Income Generation	961	0	961	96
10	Planned Profit / (Loss) on Disposal of Assets	0	0	0	
11	Planned Release of Uncommitted Contingencies & Reserves (Positive Value)	0	0		
12		0	0		
13	Planning Assumptions still to be finalised at Month 1	0	0		
14	Opening IMTP / Annual Operating Plan	0	0	0	
15	Reversal of Planning Assumptions still to be finalised at Month 1	0	0	0	
16	Additional In Year & Movement from Planned Release of Previously Committed Contingencies & Reserves (Positive	0	0		
17	Additional In Year & Movement from Planned Profit / (Loss) on Disposal of Assets	0	0		
18	Underachievement of Month 1 Finalised Income Generation Due to Covid-19 (Negative Value)	0	0		
19	Other Movement in Month 1 Planned & In Year Net Income Generation	399	399	0	
20	Underachievement of Month 1 Finalised Savings Due to Covid-19 (Negative Value)	0	0		
21	Other Movement in Month 1 Planned Savings - (Underachievement) / Overachievement	0	0	0	
22	Additional In Year Identified Savings - Forecast	1,601	1,601	0	
23	Variance to Planned RRL & Other Income	0	0		
24	Additional In Year & Movement in Planned Welsh Government Funding for Covid-19 (Positive Value - additional)	0	0		
25	Additional In Year & Movement in Planned Welsh Government Funding (Non Covid) (Positive Value - additional)	0	0		
26	Additional In Year & Movement Expenditure for Covid-19 (Positive Value - additional/Negative Value - reduction)	285	285		
27	In Year Expenditure Cost Reduction Due To Covid-19 (Positive Value)	0	0		
28	In Year Slippage on Investments/Repurposing of Developmental Initiatives Due To Covid-19 (Positive Value)	0	0		
29	In Year Accountancy Gains (Positive Value)	0	0	0	
30	Net In Year Operational Variance to IMTP/AOP (material gross amounts to be listed separately)	0	0		
31	NWSSP Reserve for reinvestment/distribution	-2,000	-2,000		
32		0	0		
33		0	0		
34		0	0		
35		0	0		
36		0	0		
37		0			
38		0			
39		0			
40	Forecast Outturn (- Deficit / + Surplus)	285	285	0	

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	In Year Effect
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1													0	0
2	-475	-478	-482	-487	-490	-498	-505	-510	-514	-522	-525	-527	-953	-6,013
3	-3,026	-3,060	-3,098	-3,093	-3,086	-3,090	-3,096	-3,095	-3,100	-3,098	-3,104	-3,129	-6,086	-37,074
4	249	252	255	260	260	268	274	278	280	287	288	290	501	3,241
5	3,026	3,060	3,098	3,093	3,086	3,090	3,096	3,095	3,100	3,098	3,104	3,129	6,086	37,074
6													0	0
7												0	0	0
8	148	148	148	148	151	151	152	153	154	152	153	153	296	1,811
9	78	78	79	79	79	79	79	79	80	83	84	84	156	961
10													0	0
11													0	0
12													0	0
13													0	0
14	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16													0	0
17													0	0
18	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	129	123	15	15	15	15	15	15	15	15	15	12	252	399
20	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	406	195	100	100	100	100	100	100	100	100	100	100	601	1,601
23													0	0
24	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25													0	0
26	285	0	0	0	0	0	0	0	0	0	0	0	285	285
27	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30													0	0
31	-535	-318	-115	-115	-115	-115	-115	-115	-115	-115	-115	-112	-853	-2,000
32													0	0
33													0	0
34													0	0
35													0	0
36													0	0
37													0	0
38													0	0
39													0	0
40	285	0	0	0	0	0	0	0	0	0	0	0	285	285

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NHS Wales Shared Services Partnership Period:

May 21

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Tab	ole A2 - Overview Of Key Risks & Opportunities	FORECAST Y	EAR END
		£'000	Likelihood
H	Opportunities to achieve IMTP/AOP (positive values)		
1	Red Pipeline schemes (inc AG & IG)		
2	Potential Cost Reduction		
3	Total Opportunities to achieve IMTP/AOP	0	
	Risks (negative values)		
4	Under delivery of Amber Schemes included in Outturn via Tracker		
5	Continuing Healthcare		
6	Prescribing		
7	Pharmacy Contract		
8	WHSSC Performance		
9	Other Contract Performance		
10	GMS Ring Fenced Allocation Underspend Potential Claw back		
11	Dental Ring Fenced Allocation Underspend Potential Claw back		
12	Turnover factor is less than budgeted	0	Low
13	Non achievement of income targets	0	Low
14	Covid 19 funding not received from Welsh Government	(37,074)	Low
15	Medical Examiner funding not confirmed	(1,993)	Low
16	Additional WRP Covid claims - included in DEL forecast	0	High
17			0
18			
19			
20			
21			
22			
23			
24 25			
	Total Risks	(20.067)	
26	Further Opportunities (positive values)	(39,067)	
닏		4.000	
	Further over achievement of savings	1,000	Medium
28			
29			
30			
31			
32			
33			
34	Total Further Opportunities	1,000	
\vdash	ı	1	
35	Current Reported Forecast Outturn	285	
36	IMTP / AOP Outturn Scenario	285	
37	Worst Case Outturn Scenario	(37,782)	
38	Best Case Outturn Scenario	1,285	

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NHS Wales Shared Services Partnership

Table B - Monthly Positions

YTD Months to be completed from Month: 1
Forecast Months to be completed from Month: 1

Period :

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			1	2	3	4	5	6	7	8	9	10	11	12	Ī	
	A. Monthly Summarised Statement of Comprehensive Net Expenditure / Statement of Comprehensive Net Income		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total <u>YTD</u>	Forecast year- end position
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Revenue Resource Limit	Actual/F'cast													0	0
2	Capital Donation / Government Grant Income (Health Board only)	Actual/F'cast													0	0
3	Welsh NHS Local Health Boards & Trusts Income	Actual/F'cast	15,487	16,237	15,935	15,945	18,120	18,545	19,371	19,890	22,583	22,593	22,840	23,707	31,724	231,253
4	WHSSC Income	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5	Welsh Government Income (Non RRL)	Actual/F'cast	10,517	12,204	23,151	22,418	22,411	22,416	22,462	22,461	22,462	22,548	22,554	22,582	22,721	248,186
6	Other Income	Actual/F'cast	2,350	2,428	1,903	1,903	403	3,397	399	399	3,394	399	399	5,618	4,778	22,992
7	Income Total		28,354	30,869	40,989	40,266	40,934	44,358	42,232	42,750	48,439	45,540	45,793	51,907	59,223	502,431
8	Primary Care Contractor (excluding drugs, including non resource limited expenditure)	Actual/F'cast													0	0
9	Primary Care - Drugs & Appliances	Actual/F'cast													0	0
10	Provided Services - Pay	Actual/F'cast	14,054	14,687	14,990	14,997	17,166	17,599	18,176	18,947	21,640	21,661	21,666	22,642	28,741	218,225
-11	Provider Services - Non Pay (excluding drugs & depreciation)	Actual/F'cast	13,379	13,038	13,571	12,807	11,306	14,297	11,554	11,301	14,297	11,289	11,536	16,672	26,417	155,048
12	Secondary Care - Drugs	Actual/F'cast													0	0
13	Healthcare Services Provided by Other NHS Bodies	Actual/F'cast													0	0
14	Non Healthcare Services Provided by Other NHS Bodies	Actual/F'cast													0	0
15	Continuing Care and Funded Nursing Care	Actual/F'cast													0	0
16	Other Private & Voluntary Sector	Actual/F'cast													0	0
17	Joint Financing and Other	Actual/F'cast													0	0
18	Losses, Special Payments and Irrecoverable Debts	Actual/F'cast	665	2,367	12,172	12,172	12,172	12,172	12,172	12,172	12,172	12,172	12,172	12,174	3,032	124,754
19	Exceptional (Income) / Costs - (Trust Only)	Actual/F'cast		521											521	521
20	Total Interest Receivable - (Trust Only)	Actual/F'cast													0	0
21	Total Interest Payable - (Trust Only)	Actual/F'cast													0	0
22	DEL Depreciation\Accelerated Depreciation\Impairments	Actual/F'cast	256	256	256	290	290	290	330	330	330	418	418	418	512	3,883
23	AME Donated Depreciation\Impairments	Actual/F'cast													0	0
24	Uncommitted Reserves & Contingencies	Actual/F'cast													0	0
25		Actual/F'cast													0	0
26	Cost - Total	Actual/F'cast	28,354	30,869	40,989	40,266	40,934	44,358	42,232	42,750	48,439	45,540	45,793	51,907	59,223	502,431
27	Net surplus/ (deficit)	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0

B. Assessment of Financial Forecast Positions

Year-to-date (YTD)	£'000	
28 . Actual YTD surplus/ (deficit)	0	
29. Actual YTD surplus/ (deficit) last month	0	
30. Current month actual surplus/ (deficit)	0	
		Trend
31. Average monthly surplus/ (deficit) YTD	0	▶
32. YTD /remaining months	0	

Full-year surplus/ (deficit) scenarios	£'000
33. Extrapolated Scenario	0
34. Year to Date Trend Scenario	0

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	C. DEL/AME Depreciation & Impairments														
		1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year- end position
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
	DEL														
35	Baseline Provider Depreciation Actual/F'cast	98	98	98	97	97	97	96	96	96	95	95	95	196	1,159
36	Strategic Depreciation Actual/F'cast	158	158	158	193	193	193	234	234	234	323	323	323	316	2,724
37	Accelerated Depreciation Actual/F'cast													0	0
38	Impairments Actual/F'cast													0	0
39	Other (Specify in Narrative) Actual/F'cast													0	0
40	Total	256	256	256	290	290	290	330	330	330	418	418	418	512	3,883
	AME														
41	Donated Asset Depreciation Actual/F'cast													0	0
42	Impairments Actual/F'cast													0	0
43	Other (Specify in Narrative) Actual/F'cast													0	0
44	Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0

D. Accountancy Gains													_	
	1	2	3	4	5	6	7	8	9	10	11	12		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year- end position
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
45 Accountancy Gains Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0

E. Committed Reserves & Contingencies

47 Fon 48 For 49 For 50 For	number in description. recast Only	1 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total <u>YTD</u>	Forecast year- end position
46 For 47 For 48 For 50 For 50 For	recast Only					-	· ·							Total <u>YTD</u>	Forecast year end position
46 For 47 For 48 For 50 For 50 For	recast Only	£'000	£'000	5,000	£'000	£'000	£'000	9000	000	£'000	£'000	£'000	£'000	0	
46 For 47 For 48 For 50 For 50 For	recast Only													0	
47 Fon 48 Fon 49 Fon 50 For	recast Only													0	4
48 For 49 For 50 Por	recast Only														
49 For 50	recast Only recast Only recast Only recast Only recast Only recast Only													0	i .
50 For	recast Only recast Only recast Only recast Only recast Only													0	i .
	recast Only recast Only recast Only													0	i
	recast Only recast Only													0	i
51 Fore	recast Only													0	i .
52 For														0	i .
53 For	recast Only													0	1
54 For	recest Offig													0	i .
55 Fore	recast Only													0	i
56 Fore	recast Only													0	i .
57 Ford	recast Only													0	i .
58 For	recast Only													0	(
59 Fore	recast Only													0	i .
60 For	recast Only													0	i .
61 For	recast Only													0	i .
	recast Only													0	(
63 For	recast Only													0	i .
	recast Only													0	i
	recast Only													0	1
	recast Only													0	i
	recast Only													0	i .
68 For	recast Only													0	i .
	recast Only													0	1
	recast Only		·											0	1
71 For	recast Only													0	1
	recast Only													0	1
73 For	recast Only													0	1
74 Total		0	0	0	0	0	0	0	0	0	0	0	0	0	
Pha	nasing	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!										

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Period: May 21

Table C - Identified Expenditure Savings Schemes (Excludes Income Generation & Accountancy Gains)

This Table is currently showing 0 errors

		1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year	YTD as %age of FY	Asses	sment	Full In-Ye	ear forecast	Full-Year Effect of
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	10tai <u>112</u>	forecast	YTD variance as %age of YTD	Green	Amber	non recurring	recurring	Recurring
1		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000				£'000	£'000	£'000	£'000	£'000
1 CHC and Funded	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
Nursing Care	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	
3	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
4	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
5 Commissioned Services	Actual/1 cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	-
6	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
7 Medicines Management	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
8 (Primary & Secondary Care)	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	
9	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
10	Budget/Plan	26	26	26	26	27	27	28	28	28	29	29	27	52	327		327	0			
11 Non Pay	Actual/F'cast	93	(56)	26	26	27	27	28	28	28	29	29	27	37	312	11.86%	312	0	(15)	327	
12	Variance	67	(82)	0	0	0	0	0	0	0	0	0	0	(15)	(15)	(28.85%)	(15)	0			
13	Budget/Plan	122	122	122	122	124	124	124	125	126	123	124	126	244	1,484		1,484	0			
14 Pay	Actual/F'cast	461	399	222	222	224	224	224	225	226	223	224	226	860	3,100	27.74%	3,100	0	1,616	1,484	
15	Variance	339	277	100	100	100	100	100	100	100	100	100	100	616	1,616	252.46%	1,616	0			
16	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
7 Primary Care	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	
18	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
19	Budget/Plan	148	148	148	148	151	151	152	153	154	152	153	153	296	1,811		1,811	0			
20 Total	Actual/F'cast	554	343	248	248	251	251	252	253	254	252	253	253	897	3,412	26.29%	3,412	0	1,601	1,811	
21	Variance	406	195	100	100	100	100	100	100	100	100	100	100	601	1,601	203.04%	1,601	0			
22	2 Variance in month	274.32%	131.76%	67.57%	67.57%	66.23%	66.23%	65.79%	65.36%	64.94%	65.79%	65.36%	65.36%	203.04%							
2*	In month achievement against 3 FY forecast	16.24%	10.05%	7.27%	7.27%	7.36%	7.36%	7.39%	7.42%	7.44%	7.39%	7.42%	7.42%								

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NHS Wales Shared Services Partnership Period: May 21

Table C1- Savings Schemes Pay Analysis

		1	2	3	4	5	6	7	8	9	10	11	12		Full-year	YTD as %age of FY	Asses	ssment	Full In-Ye	ear forecast	Full-Year
	Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total <u>YTD</u>	forecast	YTD variance as %age of YTD Budget/Plan	Green	Amber	non recurring	recurring	Effect of Recurring Savings
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000				£'000	£'000	£'000	£'000	£'000
1 Changes in Staffing	Budget/Plan	114	114	114	114	116	116	116	117	117	114	115	117	228	1,384		1,384	0)		
2 Establishment	Actual/F'cast	453	391	214	214	216	216	216	217	217	214	215	217	844	3,000	28.13%	3,000	0	1,616	1,384	1,384
3	Variance	339	277	100	100	100	100	100	100	100	100	100	100	616	1,616	270.18%	1,616	0)		
4	Budget/Plan	8	8	8	8	8	8	8	8	9	9	9	9	16	100		100	0)		
5 Variable Pay	Actual/F'cast	8	8	8	8	8	8	8	8	9	9	9	9	16	100	16.00%	100	0	0	100	10
6	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0)		
7	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0)		
8 Locum	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	
9	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0)		
10	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0)		
Agency / Locum paid at a premium	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	
12	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0)		
13	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0)		
14 Changes in Bank Staff	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	
15	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0)		
16	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0)		
17 Other (Please Specify)	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	
18	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0)		
19	Budget/Plan	122	122	122	122	124	124	124	125	126	123	124	126	244	1,484		1,484	0			
20 Total	Actual/F'cast	461	399	222	222	224	224	224	225	226	223	224	226	860	3,100	27.74%	3,100		1,616	1,484	1,48
21	Variance	339	277	100	100	100	100	100	100	100		100	100		1,616	252.46%	1,616) ,,,,,,	.,	.,

Table C2- Savings Schemes Agency/Locum Paid at a Premium Analysis

				1	2	3	4	5	6	7	8	9	10	11	12		Full-vear	YTD as %age of FY	Asses	sment	Full In-Ye	ear forecast	Full-Year
		Мо	onth	Apr	May	Jun £'000	Jul	Aug	Sep	Oct	Nov	Dec £'000	Jan	Feb	Mar	Total <u>YTD</u>	forecast	YTD variance as %age of YTD Budget/Plan	Green £'000	Amber £'000	non recurring		Effect of Recurring Savings
1	Reduced usage of	Budget/Plan	-	£'000	£'000	£ 000	£'000	£'000	£'000	£'000	£'000	£ 000	£'000	£'000	£'000	0	0		£ 000	£000	£ 000	£'000	£'000
	Agency/Locums paid at	Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0		0	0		0		0	0	
	a premium	Variance		0	0	0	0	0	0	0	0	0	0	0		0	0		0	0	-	-	
1		Budget/Plan		0	0	0	0	0	0	0	0	0	0	0		0	0		0	0			
	Non Medical off	Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0	C	0	0		0	C	0	0	
6	contract' to 'on contract'	Variance		0	0	0	0	0	0	0	0	0	0	0	C	0	0		0	C			
7	Medical - Impact of	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	(0	0		0	C			
	Agency pay rate caps	Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0	C	0	0		0	C	0	0	
9	Agency pay rate caps	Variance		0	0	0	0	0	0	0	0	0	0	0	C	0	0		0	C			
10		Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	C	0	0		0	C			
11	Other (Please Specify)	Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0	C	0	0		0	C	0	0	
12		Variance		0	0	0	0	0	0	0	0	0	0	0	C	0	0		0	C			
13		Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	C	0	0		0	C			
14	Total	Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0	C	0	0		0	C	0	0	
15		Variance		0	0	0	0	0	0	0	0	0	0	0	C	0	0		0	C			

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Table C3 - Tracker

	£'000	Apr	Мау	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Full-year forecast	Non Recurring	Recurring	FYE Adjustment	Full-year Effect
	Month 1 - Plan	148	148	148	148	151	151	152	153	154	152	153	153	296	1.811	0	1.811	n	1.811
	Month 1 - Actual/Forecast	148	148	148	148	151	151	152	153	154	152	153	153	296	1,811	0	1.811	0	1,811
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Savings (Cash	In Year - Plan	406	0	0	0	0	0	0	0	0	0	0	0	406	406	406	0	0	0
Releasing & Cost	In Year - Actual/Forecast	406	195	100	100	100	100	100	100	100	100	100	100	601	1,601	1,601	0	0	0
Avoidance)	Variance	0	195	100	100	100	100	100	100	100	100	100	100	195	1,195	1,195	0	0	0
	Total Plan	554	148	148	148	151	151	152	153	154	152	153	153	702	2,217	406	1,811	0	1,811
	Total Actual/Forecast	554	343	248	248	251	251	252	253	254	252	253	253	897	3,412	1,601	1,811	0	1,811
	Total Variance	0	195	100	100	100	100	100	100	100	100	100	100	195	1,195	1,195	0	0	0
	Month 1 - Plan	78	78	79	79	79	79	79	79	80	83	84	84	156	961	0	961	0	961
	Month 1 - Actual/Forecast	78	78	79	79	79	79	79	79	80	83	84	84	156	961	0	961	0	961
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Plan	129	0	0	0	0	0	0	0	0	0	0	0	129	129	129	0	0	0
Net Income Generation	In Year - Actual/Forecast	129	123	15	15	15	15	15	15	15	15	15	12	252	399	399	0	0	0
Contraction	Variance	0	123	15	15	15	15	15	15	15	15	15	12	123	270	270	0	0	0
	Total Plan	207	78	79	79	79	79	79	79	80	83	84	84	285	1,090	129	961	0	961
	Total Actual/Forecast	207	201	94	94	94	94	94	94	95	98	99	96	408	1,360	399	961	0	961
	Total Variance	0	123	15	15	15	15	15	15	15	15	15	12	123	270	270	0	0	0
	In Year - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accountancy Gains	In Year - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cuito	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
-																			
	Month 1 - Plan	226	226	227	227	230	230	231	232	234	235	237	237	452	2,772	0	2,772	0	2,772
	Month 1 - Actual/Forecast	226	226	227	227	230	230	231	232	234	235	237	237	452	2,772	0	2,772	0	2,772
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Plan	535	0	0	0	0	0	0	0	0	0	0	0	535	535	535	0	0	0
Total	In Year - Actual/Forecast	535	318	115	115	115	115	115	115	115	115	115	112	853	2,000	2,000	0	0	0
	Variance	0	318	115	115	115	115	115	115	115	115	115	112	318	1,465	1,465	0	0	0
	Total Plan	761	226	227	227	230	230	231	232	234	235	237	237	987	3,307	535	2,772	0	2,772
	Total Actual/Forecast	761	544	342	342	345	345	346	347	349	350	352	349	1,305	4,772	2,000	2,772	0	2,772
	Total Variance	0	318	115	115	115	115	115	115	115	115	115	112	318	1,465	1,465	0	0	0

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NHS WALES SHARED SERVICES PARTNERSHIP MONITORING RETURN COMMENTARY FOR PERIOD 3 – JUNE 2021

This summary report provides a review of NHS Wales Shared Services Partnership's (NWSSP) performance for June 2021 and should be read in conjunction with the Monitoring Return tables submitted for Month 3.

Thank you for your letter of 24th June 2021 responding to the Month 2 monitoring return. The action points raised are addressed within this return and additional information provided where requested.

Overview of Performance and Financial Position

NWSSP's financial position for Month 3 is reported at break-even. This is based on the assumption that all additional Covid 19 funding and other identified funding anticipated will be received from Welsh Government.

1. Movement of Opening Financial Plan to Forecast Outturn (Table A)

Table A Lines 1-14 continue to reflect the position reported at Month 2 which reconciles to the Quarter 1 MDS submission. Table A continues to show a break-even in year and recurrent plan.

In month adjustments have been made to both the in year Covid 19 expenditure and funding forecasts, primarily in respect of an increase to the forecast PPE costs based on the M1-3 usage within the mass vaccination programme.

The assumption of full funding for the Covid expenditure and other anticipated income enables us to continue to report a break-even forecast outturn.

The over-achievement of savings and income generation is negated by the increase to the NWSSP reserve for reinvestment/distribution, the profile of which has also been amended but continues to total £2.000m to reconcile to the forecast overachievement of savings/income generation. We are further reviewing our financial position at the close of Quarter 1 and following the completion of our forthcoming quarterly reviews with each of our service Directors/Heads we will re-assess the savings forecast overachievement and the reinvestment requirements within NWSSP. We anticipate a level of reinvestment will be required for the major TRAMS and Laundry projects as a first call on the

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additional non-recurring savings generated, in addition to investing in our services to accelerate efficiencies and improvements. The balance of any underspend will be distributed to NHS Wales and an update on the likely additional distribution will be provided in Quarter 2.

The overachievement of income generation schemes reduces in future months due to additional non-recurrent income that we have invoiced for in Quarter 1 in respect of legal services. The forecast profile of all savings and income generation in Months 4 -12 is lower than Months 1-3 whilst we fully review our position with regard to additional potential savings or income generation opportunities to be achieved this financial year (Action Point 2.2).

2. Overview of Key Risks & Opportunities (Table A2)

This table has been updated in Month 3 in respect of the following:

 Covid-19 funding not received from Welsh Government – this risk has been amended from £37.074m to £37.730m per the amended total covid funding forecast. This risk remains as we have not yet received formal confirmation from Welsh Government that we can invoice for these costs.

In month 1 we included a risk regarding the cost of the settlement of nosocomial claims in 2021/22. This was subsequently reduced to zero in Month 2. This was reported as such due to a review of the WRP DEL forecast which identified a reduction in the forecast. This then enabled the estimated £1.000m of nosocomial infection claims that could settle this financial year to be managed within the original WRP forecast that required £16.495m to be funded under the risk sharing agreement (Action Point 2.3)

3. Actual Year to Date Monthly Position (Tables B, B2 & B3)

The key points to note within the year to date and forecast position are:

- The full year income forecast has increased from £502.431m in Month 2 to £504.725m in Month 3. This is primarily due to an increase in stores issues in June which has impacted the forecast for future months based on the average of the year to date recharges.
- The other income profile increases in Months 6, 9 and 12 in line with the invoicing for the pharmacy rebate scheme, the funds from which are repatriated to NHS Wales and have a net zero impact on our position.
- In March 2021, the NWSSP (non SLE) bonus accrual totalled £1.928m. Bonus payments totalling £1.782m were paid in May, and one further

bonus payment was made in June. The balance of the accrual (£0.012m for substantive staff and £0.133m for bank staff) has been re-accrued in Month 3 on the basis that further payments may be made. We continue to review the bank staff we expected to incur bonus payments for with payroll to understand if they have been paid on substantive posts in other organisations. Due to the re-accrual there is therefore no impact on the Month 3 position as a result of the bonus payment (Action Point 1.3).

- There were no further bonus payments made to SLE staff in June and upon request from the UHBs we have continued to re-accrue the outstanding balance. We will continue to review the outstanding accrual with payroll and UHB colleagues and if it is identified that any part of the accrual should be released we will credit the relevant UHBs as part of the SLE recharge process.
- Exceptional costs of £0.521m were reported in Month 2 in respect of the NWSSP costs of the NHS Wales Covid donation to India. Upon advice from Welsh Government, these have been reversed in Month 3. The capital stock items (£0.228m) have been included as a DEL impairment in Month 3 as requested. The balance of £0.293m relates to the value of revenue equipment provided by NWSSP that was originally donated by the Department of Health & Social Care in 2020/21. This has been excluded from the financial position in Month 3 as requested by Welsh Government colleagues and we await further guidance regarding the accounting treatment of this balance (Action Point 2.5).
- We are in the process of finalising a donation of PPE to Namibia, this hasn't been included in the forecast as the final value is as yet unconfirmed, although current estimates are in the region of £3.500m. We will reflect this in future months subject to our Audit Committee and Welsh Government approval.
- Forecast depreciation charges of £3.491m have been included which reconcile to the approved section of our non-cash submission. This figure currently only includes depreciation costs for the laundry asset transfer from BCU. We await further information from SBU & AB UHBs regarding the assets to transfer. We are currently working with the relevant UHBs to produce the S1/S2 schedules for the laundry transfer. There is a year to date catch up in Month 3 with regard to strategic depreciation charges now that we have reviewed the depreciation position in detail as part of the non-cash submission.
- £7.566m income and expenditure is included to Month 3 in relation to the WRP DEL budget. This expenditure is reported separately on line 9 – Losses, Special Payments & Irrecoverable Debts. A high level review of cases has been undertaken with regards to updating the year end forecast

of cases that will charged against the DEL in 2021/22,. This has indicated that the initial annual plan forecast of £124.754m (£123.495m WRP DEL and £1.259m Redress) remains an accurate projection at this point in time and includes the excess redress costs above budget and a high level forecast that £1.000m of nosocomial claims will settle in 2021/22. The profile of the balance of the income and expenditure is phased on a straight-line basis over remaining months. The forecast of the WRP expenditure on a monthly basis has always been amended using the straight line approach as any attempts to provide a profile based on likely settlement/payment dates would be arbitrary at best (Action Point 2.4)

Given the forecast remains at £123.495m for DEL, the element to be funded under the risk share agreement also remains at £16.495m.

- £0.060m of agency expenditure was reported in Month 3, which is in line with the expenditure reported in Month 2. The agency forecast reduces in the latter half of the financial year due to the combination of a number of agency staff due to finish in addition to planned transfers onto the NWSSP bank/recruitment to substantive posts (Action Point 2.6).
- Table B3 details the year to date and forecast Covid19 additional expenditure. This has been collated and reviewed on a service by service basis within NWSSP and will continue to be monitored at this level. An increase in expenditure offset by additional WG funding has been included from Month 3 due to increases in the value of PPE issues to the mass vaccination programme that have been reflected in the forecast expenditure for future months.

The mass vaccination and other covid expenditure sections of Table B3 have been populated. Other covid expenditure relates to the NWSSP operational support costs and PPE issues as part of the mass vaccination packs and the social care and primary care PPE issues.

A review of the forecast has been undertaken and given the assumption that NWSSP will be required to continue to provide the current level of support to Covid for the remainder of the financial year, the straight line forecast of expenditure appears appropriate at this time. We will continue to review this assumption on an ongoing basis (Action Point 2.1).

A summary of the expenditure is detailed below:

	YTD	Full Year Forecast
	£m	£m
NWSSP Operational	1.266	5.669
NWSSP PPE	0.004	0.013
Mass Vacc - PPE	0.874	3.754
Mass Vacc - non PPE non pay	0.148	0.668
Mass Vacc - pay	0.198	0.892
Social Care/Primary Care PPE	6.683	26.735
TOTAL	9.173	37.730

The NWSSP operational costs are summarised below:

		Full
		Year
	YTD	Forecast
Pay	0.594	2.539
Estates / Security	0.234	0.846
Insurance	0.017	0.067
Transport	0.383	2.093
Other	0.037	0.124
TOTAL	1.266	5.669

We continue to await confirmation with regards to the approval of these costs and when/if we can invoice Welsh Government for them.

At the end of 2020/21 we accrued a credit note to Welsh Government totalling £113.196m to provide NWSSP with the cash coverage for the increased stock balances and prepayments. We are continuing to accrue this on a monthly basis and also accrue additional in year Welsh Government income rather than reduce the value of the credit note. Detailed monitoring of the covid cash position is undertaken to review the cash surpluses from stock debtor invoices raised in excess of stock creditor invoices paid less the Welsh Government funded social care and primary care PPE. We will liaise with Welsh Government if additional cash support is required in future months.

4. Savings (Tables C & C3)

The tables have been updated with the actual savings achievement to Month 3 and a revised profile of future savings so that the over achievement of savings and income generation continue to reconcile to the £2.000m forecast.

This table is reconciled each month to our ledger position and the negative figure in Month 2 was due to an overspend within non pay in May (Action Point 2.7)

5. Welsh NHS Assumptions (Table D)

Table D has been left blank as requested.

6. Invoiced Income Streams (Table E1)

Line 1 of this table has been populated with the budgeted income streams by organisation. This includes the forecast income from UHBs/Trusts in respect of stores issues and the SLE recharges based on the actual in month recharges and agreed SLA values for future months. As these costs are recharged based on actual expenditure incurred, these may be subject to change in future months.

Lines 2-12 have been populated with anticipated income streams for which we have yet to receive formal funding confirmation.

The values for depreciation are included per the approved section of our June non-cash submission.

7. Cash Flow (Table G)

Not required for completion.

8. PSPP (Table H)

This table is not required for NWSSP.

9. Capital Expenditure Limit Management and Disposals (Tables I, & K)

Tables I and J have been populated and reconcile to our Capital Expenditure Limit of £2.491m issued on 30th April 2021. For the larger schemes an indicative expenditure profile has been included and this will be refined as soon as milestone payments are confirmed and/or further information is received. At present there are no issues foreseen in incurring this capital expenditure.

There are no disposals to report in Table K in Month 3.

10. Aged Debtors (Table M)

At 30th June 2021 there was one NHS invoice outstanding over 11 weeks which was paid in early July.

11. GMS (Table N)

Not required for completion by NWSSP.

12. Dental (Table O)

Not required for completion by NWSSP.

13. Other Issues

The financial information provided in this return is an accurate assessment of the NWSSP financial position at this point in time and aligns to the details provided in the NWSSP Partnership Committee and Senior Leadership Team reports.

The Shared Services Partnership Committee will receive the Month 3 Financial Monitoring Return at the July meeting.

14. Authorisation of Return

ANDREW BUTLER
DIRECTOR OF FINANCE AND
CORPORATE SERVICES

12th July 2021

NEIL FROW
MANAGING DIRECTOR
NWSSP

Period : Jun 21

Table A - Movement of Opening Financial Plan to Forecast Outturn

This Table is currently showing 0 errors

Line 14 should reflect the corresponding amounts included within the latest IMTP/AOP submission to WG Lines 1 - 14 should not be adjusted after Month 1

	Lines 1 - 14 should not be adjusted after Month 1	In Year	Non		FYE of
		Effect	Recurring	Recurring	Recurring
		£'000	£'000	£'000	£'000
1	Underlying Position b/fwd from Previous Year - must agree to M12 MMR (Deficit - Negative Value)	0	0	0	0
2	Planned New Expenditure (Non Covid-19) (Negative Value)	-6.013	-612	-5.401	-5,401
3	Planned Expenditure For Covid-19 (Negative Value)	-37,074	-37,074		
4	Planned Welsh Government Funding (Non Covid-19) (Positive Value)	3,241	612	2,629	2.629
5	Planned Welsh Government Funding for Covid-19 (Positive Value)	37,074	37.074		
6	Planned Provider Income (Positive Value)	0	0		
7	RRL Profile - phasing only (In Year Effect / Column C must be nil)	0	0	0	0
8	Planned (Finalised) Savings Plan	1,811	0	1,811	1,811
9	Planned (Finalised) Net Income Generation	961	0	961	961
10	Planned Profit / (Loss) on Disposal of Assets	0	0	0	0
11	Planned Release of Uncommitted Contingencies & Reserves (Positive Value)	0	0		
12		0	0		
13	Planning Assumptions still to be finalised at Month 1	0	0		
14	Opening IMTP / Annual Operating Plan	0	0	0	0
15	Reversal of Planning Assumptions still to be finalised at Month 1	0	0	0	0
16	Additional In Year & Movement from Planned Release of Previously Committed Contingencies & Reserves (Positive	0	0		
17	Additional In Year & Movement from Planned Profit / (Loss) on Disposal of Assets	0	0		
18	Underachievement of Month 1 Finalised Income Generation Due to Covid-19 (Negative Value)	0	0		
19	Other Movement in Month 1 Planned & In Year Net Income Generation	612	612	0	0
20	Underachievement of Month 1 Finalised Savings Due to Covid-19 (Negative Value)	0	0		
21	Other Movement in Month 1 Planned Savings - (Underachievement) / Overachievement	0	0	0	0
22	Additional In Year Identified Savings - Forecast	1,388	1,388	0	0
23	Variance to Planned RRL & Other Income	0	0		
24	Additional In Year & Movement in Planned Welsh Government Funding for Covid-19 (Positive Value - additional)	656	656		
25	Additional In Year & Movement in Planned Welsh Government Funding (Non Covid) (Positive Value - additional)	0	0		
26	Additional In Year & Movement Expenditure for Covid-19 (Positive Value - additional/Negative Value - reduction)	-656	-656		
27	In Year Expenditure Cost Reduction Due To Covid-19 (Positive Value)	0	0		
28	In Year Slippage on Investments/Repurposing of Developmental Initiatives Due To Covid-19 (Positive Value)	0	0		
29	In Year Accountancy Gains (Positive Value)	0	0	0	0
30	Net In Year Operational Variance to IMTP/AOP (material gross amounts to be listed separately)	0	0		
31	NWSSP Reserve for reinvestment/distribution	-2,000	-2,000		
32		0	0		
33		0	0		
34		0	0		
35		0	0		
36		0	0		
37		0	0		
38		0	0		
39		0	0		
40	Forecast Outturn (- Deficit / + Surplus)	1	1	0	0

Ī	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	In Year Effect
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1													0	0
2	-475	-478	-482	-487	-490	-498	-505	-510	-514	-522	-525	-527	-1,435	-6,013
3	-3,026	-3,060	-3,098	-3,093	-3,086	-3,090	-3,096	-3,095	-3,100	-3,098	-3,104	-3,129	-9,184	-37,074
4	249	252	255	260	260	268	274	278	280	287	288	290	756	3.241
5	3,026	3,060	3,098	3,093	3,086	3,090	3,096	3,095	3,100	3,098	3,104	3,129	9,184	37,074
6													0	0
7												0	0	0
8	148	148	148	148	151	151	152	153	154	152	153	153	444	1,811
9	78	78	79	79	79	79	79	79	80	83	84	84	235	961
10													0	0
11													0	
12													0	
13													0	0
14	0	0	0	0	0	0	0	0	0	0	0	0	0	
15	0	0	0	0	0	0	0	0	0	0	0	0	0	
16													0	
17													0	
18	0	0	0	0	0	0	0	0	0	0	0	0	0	
19	129	123	228	15	15	15	15	15	15	15	15	12	480	612
20	0	0	0	0	0	0	0	0	0	0	0	0	0	
21	0	0	0	0	0	0	0	0	0	0	0	0	0	
22	406	195	359	100	100	50	50	50	50	28	0	0	960	1,388
23													0	
24	0	0	-10	74	82	81	71	71	71	71	77	70	-10	
25													0	
26	0	0	11	-74	-82	-81	-71	-71	-71	-71	-77	-70	10	
27	0	0	0	0	0	0	0	0	0	0	0	0	0	
28	0	0	0	0	0	0	0	0	0	0	0	0	0	
29	0	0	0	0	0	0	0	0	0	0	0	0	0	
30													0	
31	-535	-318	-587	-115	-115	-65	-65	-65	-65	-43	-15	-12	-1,440	
32													0	
33													0	
34													0	
35													0	
36													0	
37													0	
38													0	
39			_	_	_	_	_	_	_	_	_		0	
40	0	0	0	0	0	0	0	0	0	0	0	1	0	1

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NHS Wales Shared Services Partnership Period:

Jun 21

This Table is currently showing 0 errors

Tak	ole A2 - Overview Of Key Risks & Opportunities	FORECAST Y	EAR END
		£'000	Likelihood
	Opportunities to achieve IMTP/AOP (positive values)		
1	Red Pipeline schemes (inc AG & IG)		
2	Potential Cost Reduction		
3	Total Opportunities to achieve IMTP/AOP	0	
	Risks (negative values)		
4	Under delivery of Amber Schemes included in Outturn via Tracker		
5	Continuing Healthcare		
6	Prescribing		
7	Pharmacy Contract		
8	WHSSC Performance		
9	Other Contract Performance		
10	GMS Ring Fenced Allocation Underspend Potential Claw back		
11	Dental Ring Fenced Allocation Underspend Potential Claw back		
12	Turnover factor is less than budgeted	0	Low
13	Non achievement of income targets	0	Low
14	Covid 19 funding not received from Welsh Government	(37,730)	Low
15	Medical Examiner funding not confirmed	(1,993)	Low
16	Additional WRP Covid claims - included in DEL forecast	0	High
17			
18			
19			
20			
21			
22			
23			
24			
25			
26	Total Risks	(39,723)	
	Further Opportunities (positive values)	(, -,	
27	Further over achievement of savings	1 000	Medium
28	- dittion over define on eavings	1,000	
29			
30			
31			
32			
33			
34	Total Further Opportunities	1,000	
	rotal i dittiel Opportunities	1,000	1
35	Current Reported Forecast Outturn	1	
JO	Current Reported Polecast Outturn	1	1
36	IMTP / AOP Outturn Scenario	1	
37	Worst Case Outturn Scenario	(38,722)	
38	Best Case Outturn Scenario	1,001	

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NHS Wales Shared Services Partnership

Table B - Monthly Positions

YTD Months to be completed from Month: Forecast Months to be completed from Month:

Period : Ju

This Table is currently showing 0 errors

		1	2	3	4	5	6	7	8	9	10	11	12	1	
	A. Monthly Summarised Statement of Comprehensive Net Expenditure / Statement of Comprehensive Net Income	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total <u>YTD</u>	Forecast year- end position
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Revenue Resource Limit Actual/F'cast													0	0
2	Capital Donation / Government Grant Income (Health Board only) Actual/F'cast													0	0
3	Welsh NHS Local Health Boards & Trusts Income Actual/F'cast	15,487	16,237	17,289	16,026	18,701	19,126	19,952	20,471	23,165	23,175	23,422	24,289	49,013	237,340
4	WHSSC Income Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5	Welsh Government Income (Non RRL) Actual/F'cast	10,517	12,204	14,362	23,254	23,255	23,347	23,349	23,348	23,350	23,350	23,363	23,431	37,083	247,130
6	Other Income Actual/F'cast	2,350	2,428	1,907	1,623	114	3,109	111	112	3,105	111	111	5,174	6,685	20,255
7	Income Total	28,354	30,869	33,558	40,903	42,070	45,582	43,412	43,931	49,620	46,636	46,896	52,894	92,781	504,725
8	Primary Care Contractor (excluding drugs, including non resource limited expenditure) Actual/F'cast			•			•							0	0
9	Primary Care - Drugs & Appliances Actual/F'cast													0	0
10	Provided Services - Pay Actual/F'cast	14,054	14,687	14,353	14,505	17,175	17,607	18,185	18,955	21,648	21,669	21,674	22,629	43,094	217,141
11	Provider Services - Non Pay (excluding drugs & depreciation) Actual/F'cast	13,379	13,038	14,684	13,113	11,610	14,690	11,936	11,685	14,681	11,672	11,927	16,926	41,101	159,340
12	Secondary Care - Drugs Actual/F'cast													0	0
13	Healthcare Services Provided by Other NHS Bodies Actual/F'cast													0	0
14	Non Healthcare Services Provided by Other NHS Bodies Actual/F'cast													0	0
15	Continuing Care and Funded Nursing Care Actual/F'cast													0	0
16	Other Private & Voluntary Sector Actual/F'cast													0	0
17	Joint Financing and Other Actual/F'cast													0	0
18	Losses, Special Payments and Irrecoverable Debts Actual/F'cast	665	2,367	4,534	13,021	13,021	13,021	13,021	13,021	13,021	13,021	13,021	13,021	7,566	124,754
19	Exceptional (Income) / Costs - (Trust Only) Actual/F'cast		521	(521)										0	0
20	Total Interest Receivable - (Trust Only) Actual/F'cast													0	0
21	Total Interest Payable - (Trust Only) Actual/F'cast													0	0
22	DEL Depreciation\Accelerated Depreciation\Impairments Actual/F'cast	256	256	508	264	264	264	271	271	271	274	275	319	1,020	3,491
23	AME Donated Depreciation\Impairments Actual/F'cast													0	0
24	Uncommitted Reserves & Contingencies Actual/F'cast			-			-							0	0
25														0	0
26	Cost - Total Actual/F'cast	28,354	30,869	33,558	40,903	42,070	45,582	43,412	43,931	49,620	46,636	46,896	52,894	92,781	504,725
27	Net surplus/ (deficit) Actual/F'cast	0	0	0	0	0	0	(0)	(0)	(0)	0	0	0	0	(0)

B. Assessment of Financial Forecast Positions

Year-to-date (YTD)	£'000	
28 . Actual YTD surplus/ (deficit)	0	
29. Actual YTD surplus/ (deficit) last month	0	
30. Current month actual surplus/ (deficit)	0	
		Trend
31. Average monthly surplus/ (deficit) YTD	0	•
32. YTD /remaining months	0	

Full-year surplus/ (deficit) scenarios	£'000
33. Extrapolated Scenario	0
34. Year to Date Trend Scenario	0

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	C. DEL/AME Depreciation & Impairments													_	
		1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year- end position
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
	DEL														
35	Baseline Provider Depreciation Actual/F'cast	98	98	98	97	97	97	96	96	96	95	95	95	294	1,159
36	Strategic Depreciation Actual/F'cast	158	158	182	167	167	167	175	175	175	179	179	179	498	2,060
37	Accelerated Depreciation Actual/F'cast												44	0	44
38	Impairments Actual/F'cast			228										228	228
39	Other (Specify in Narrative) Actual/F'cast													0	0
40	Total	256	256	508	264	264	264	271	271	271	274	275	319	1,020	3,491
	AME														
41	Donated Asset Depreciation Actual/F'cast													0	0
42	Impairments Actual/F'cast													0	0
43	Other (Specify in Narrative) Actual/F'cast													0	0
44	Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	•					-				-	-			•	

D. Accountancy Gains													_	
	1	2	3	4	5	6	7	8	9	10	11	12		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year- end position
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
45 Accountancy Gains Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0

E. Committed Reserves & Contingencies

E. Gomming Nesserves & Gommingenesis				-		-		_	-					7	
		1	2	3	4	5	6	7	8	9	10	11	12		T
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast yea end position
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		eria positi
List of all Committed Reserves & Contingencies inc above in Section A. Please specify Re	ow number in description.														
	Forecast Only													0	
47	Forecast Only													0	
48	Forecast Only													0	
49	Forecast Only													0	
50	Forecast Only													0	
51	Forecast Only													0	
52	Forecast Only													0	
53	Forecast Only													0	
54	Forecast Only													0	
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66	Forecast Only													0	
67	Forecast Only													0	
68	Forecast Only													0	
	Forecast Only													0	
70	Forecast Only													0	
71	Forecast Only													0	
72	Forecast Only													0	
73	Forecast Only													0	
74 Total		0		0	0	0	0	0	0	0	0	0	0	0	
	Phasing	#DIV/0!													

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Period : Jun 21

Table C - Identified Expenditure Savings Schemes (Excludes Income Generation & Accountancy Gains)

This Table is currently showing 0 errors

		1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year	YTD as %age of FY	Asses	sment	Full In-Ye	ar forecast	Full-Yea
		Apr £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000		forecast	YTD variance as %age of YTD	Green £'000	Amber £'000	non recurring £'000	recurring £'000	Recurring Saving £'000
1	Budget/Plan	0	0.000	0.000	0.000	0	0	0.000	0.000	0.000	0.000	0	2000	0	0		0.000	2000	2000	2000	2000
CHC and Funded Nursing Care	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	
3 Nursing Care	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	Ť	Ü	
4	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
5 Commissioned Services		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	
6	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		-	
7 Medicines Management	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
8 (Primary & Secondary	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	
Care)	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
0	Budget/Plan	26	26	26	26	27	27	28	28	28	29	29	27	78	327		327	0			
1 Non Pay	Actual/F'cast	93	(56)	47	26	27	27	28	28	28	29	29	27	84	333	25.23%	333	0	6	327	
2	Variance	67	(82)	21	0	0	0	0	0	0	0	0	0	6	6	7.69%	6	0			
3	Budget/Plan	122	122	122	122	124	124	124	125	126	123	124	126	366	1,484		1,484	0			
4 Pay	Actual/F'cast	461	399	460	222	224	174	174	175	176	151	124	126	1,320	2,866	46.06%	2,866	0	1,382	1,484	
5	Variance	339	277	338	100	100	50	50	50	50	28	0	0	954	1,382	260.66%	1,382	0			
6	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
7 Primary Care	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	
8	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
9	Budget/Plan	148	148	148	148	151	151	152	153	154	152	153	153	444	1,811		1,811	0			
Total	Actual/F'cast	554	343	507	248	251	201	202	203	204	180	153	153	1,404	3,199	43.89%	3,199	0	1,388	1,811	
1	Variance	406	195	359	100	100	50	50	50	50	28	0	0	960	1,388	216.22%	1,388	0			
2:	2 Variance in month	274.32%	131.76%	242.57%	67.57%	66.23%	33.11%	32.89%	32.68%	32.47%	18.42%	0.00%	0.00%	216.22%							
	In month achievement against FY forecast	17.32%	10.72%		7.75%	7.85%	6.28%	6.31%	6.35%	6.38%	5.63%	4.78%	4.78%	J.LL /0							

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NHS Wales Shared Services Partnership Period : Jun 21

Table C1- Savings Schemes Pay Analysis

		1	2	3	4	5	6	7	8	9	10	11	12		Full-year	YTD as %age of FY	Asses	sment	Full In-Ye	ear forecast	Full-Year
	Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total <u>YTD</u>	forecast	YTD variance as %age of YTD Budget/Plan	Green	Amber	non recurring	recurring	Effect of Recurring Savings
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000				£'000	£'000	£'000	£'000	£'000
1 Changes in Staffing	Budget/Plan	114	114	114	114	116	116	116	117	117	114	115	117	342	1,384		1,384	0			
2 Establishment	Actual/F'cast	453	391	452	214	216	166	166	167	167	142	115	117	1,296	2,766	46.85%	2,766	0	1,382	1,384	1,384
3	Variance	339	277	338	100	100	50	50	50	50	28	0	0	954	1,382	278.95%	1,382	0			
4	Budget/Plan	8	8	8	8	8	8	8	8	9	9	9	9	24	100		100	0			
5 Variable Pay	Actual/F'cast	8	8	8	8	8	8	8	8	9	9	9	9	24	100	24.00%	100	0	0	100	100
6	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			
7	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
8 Locum	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
9	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
10 Agency / Locum paid at	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
11 a premium	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
12	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
13	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
14 Changes in Bank Staff	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
15	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
16	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
17 Other (Please Specify)	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
18	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
19	Budget/Plan	122	122	122	122	124	124	124	125	126	123	124	126	366	1,484		1,484	0			
20 Total	Actual/F'cast	461	399	460	222	224	174	174	175	176	151	124	126	1,320	2,866	46.06%	2,866	0	1,382	1,484	1,484
21	Variance	339	277	338	100	100	50	50	50	50	28	0	0	954	1,382	260.66%	1,382	0			

Table C2- Savings Schemes Agency/Locum Paid at a Premium Analysis

			Month	1	2	3	4	5	6	7	8	9	10	11	12	Full	Full-year	YTD as %age of FY	Assessment		Full In-Year forecast		Full-Year
		Month		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total <u>YTD</u>	forecast		Green		non recurring		Effect of Recurring Savings
		Durdent/Dine		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000				£'000	£'000	£'000	£'000	£'000
	Reduced usage of	Budget/Plan	_	0	0	0	0	0	0	0	U	0	0	0	U	0	0		0				. ——
2 Agency 3 a premi 4 Non Me 5 contrac 6 Medical 9 Agency		Actual/F'cast		U	0	0	0	0	0	0	U	0	0	0	U	0	0		0		U	U	
3		Variance		0	0	0	0	0	0	0	0	0	0	0	Ü	0	0		0	()		. —
4	Non Medical 'off contract' to 'on contract'	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0				
		Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	C	0	0	0
6		Variance		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	C)		
7	Medical - Impact of	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	C			
		Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	C	0	0	0
9	Agency pay rate caps	Variance		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	C			1
10	Other (Please Specify)	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	C			
11		Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	C	0	0	C
12		Variance		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	C			
13		Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	C			ı T
14	Total	Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	C	0	0	C
15		Variance		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			

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Jun 21
This Table is currently showing 0 errors

Table C3 - Tracker

	£'000	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Full-year forecast	Non Recurring	Recurring	FYE Adjustment	Full-year Effect
	Month 1 - Plan	148	148	148	148	151	151	152	153	154	152	153	153	444	1,811	0	1,811	C	1,811
	Month 1 - Actual/Forecast	148	148	148	148	151	151	152	153	154	152	153	153	444	1,811	0	1,811	C	1,811
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	C	0
Savings (Cash Releasing &	In Year - Plan	406	0	0	0	0	0	0	0	0	0	0	0	406	406	406	0	C	0
Cost	In Year - Actual/Forecast	406	195	359	100	100	50	50	50	50	28	0	0	960	1,388	1,388	0	C	0
Avoidance)	Variance	0	195	359	100	100	50	50	50	50	28	0	0	554	982	982	0	C	0
	Total Plan	554	148	148	148	151	151	152	153	154	152	153	153	850	2,217	406	1,811	C	1,811
	Total Actual/Forecast	554	343	507	248	251	201	202	203	204	180	153	153	1,404	3,199	1,388	1,811	0	1,811
	Total Variance	0	195	359	100	100	50	50	50	50	28	0	0	554	982	982	0	C	0
	Month 1 - Plan	78	78	79	79	79	79	79	79	80	83	84	84	235	961	0	961	C	961
	Month 1 - Actual/Forecast	78	78	79	79	79	79	79	79	80	83	84	84	235	961	0	961	C	961
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	C	0
	In Year - Plan	129	0	0	0	0	0	0	0	0	0	0	0	129	129	129	0	C	0
Net Income Generation	In Year - Actual/Forecast	129	123	228	15	15	15	15	15	15	15	15	12	480	612	612	0	C	0
Generation	Variance	0	123	228	15	15	15	15	15	15	15	15	12	351	483	483	0	C	0
	Total Plan	207	78	79	79	79	79	79	79	80	83	84	84	364	1,090	129	961	0	961
	Total Actual/Forecast	207	201	307	94	94	94	94	94	95	98	99	96	715	1,573	612	961	C	961
	Total Variance	0	123	228	15	15	15	15	15	15	15	15	12	351	483	483	0	C	0
	In Year - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	C	0
Accountancy Gains	In Year - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	C	0
Gallis	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	C	0
	•																		
	Month 1 - Plan	226	226	227	227	230	230	231	232	234	235	237	237	679	2,772	0	2,772	C	2,772
	Month 1 - Actual/Forecast	226	226	227	227	230	230	231	232	234	235	237	237	679	2,772	0	2,772	0	2,772
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	C	0
	In Year - Plan	535	0	0	0	0	0	0	0	0	0	0	0	535	535	535	0	C	0
Total	In Year - Actual/Forecast	535	318	587	115	115	65	65	65	65	43	15	12	1,440	2,000	2,000	0	C	0
1	Variance	0	318	587	115	115	65	65	65	65	43	15	12	905	1,465	1,465	0	C	0
1	Total Plan	761	226	227	227	230	230	231	232	234	235	237	237	1,214	3,307	535	2,772	C	2,772
1	Total Actual/Forecast	761	544	814	342	345	295	296	297	299	278	252	249	2,119	4,772	2,000	2,772		2,772
1	Total Variance	0	318	587	115	115	65	65	65	65	43	15	12	905	1,465	1,465	0	C	0

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AGENDA ITEM: SSPC 22 July 2021

The report is not Exempt

Teitl yr Adroddiad/Title of Report

NWSSP Audit Committee Assurance Report - 29 June 2021

ARWEINYDD:	Peter Stephenson		
LEAD:	Head of Finance & Business Development, NWSSP		
AWDUR:	Carly Wilce		
AUTHOR:	Interim Corporate Services Manager, NWSSP		
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Pwrpas yr Adroddiad: Purpose of the Report:

The purpose of this paper is to provide the SSPC with assurance and details of the key issues considered by the NWSSP Audit Committee, at its meeting on 29 June 2021.

Llywodraethu/Governance

Amcanion:	Each of the five key Corporate Objectives
Objectives:	
Tystiolaeth:	Individual reports submitted to Audit Committee
Supporting evidence:	

Ymgynghoriad/Consultation:

Who has been consulted on the details of the report?

• NWSSP Audit Committee

Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$):

DERBYN/ APPROVE		ARNODI/ ENDORSE		TRAFOD/ DISCUSS		NODI/ NOTE	✓
Argymhelliad/		Outline the	recomr	nendation of t	he report		
Recommendation	n	 The (Commit	tee is asked to	NOTE th	ne report	
	b Dadansoddiad Effaith: y Impact Analysis:						
Cydraddoldeb ac amrywiaeth: Requality and diversity:			No direct impact				
Cyfreithiol: Legal:			No direct impact				
Iechyd Poblogae Population Healt		No direct impact					
Ansawdd, Diogelwch a Profiad No direct impact							

y Claf:

Quality, Safety & Patient Experience:	
Ariannol: Financial:	No direct impact
Risg a Aswiriant: Risk and Assurance:	This report provides assurance to the Committee that NWSSP has robust risk management processes in place.
Safonnau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link: http://gov.wales/docs/dhss/publications/150 402standardsen.pdf
Gweithlu: Workforce:	No direct impact
Deddf Rhyddid Gwybodaeth/ Freedom of Information	Open

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VELINDRE UNIVERSITY NHS TRUST AUDIT COMMITTEE FOR NWSSP ASSURANCE REPORT

1. CEFNDIR/BACKGROUND

The Velindre University NHS Trust Audit Committee for NHS Wales Shared Services Partnership (Audit Committee) provides assurance to the Shared Services Partnership Committee (SSPC) on the issues delegated to them through the Trust and NWSSP Standing Orders. A summary of the business matters discussed at the meeting held on 29 June 2021, is outlined below:

ALERT	No matters to alert/escalate.
	The makers to distribusiance.
ADVISE	NWSSP Update An update as to recent developments across NWSSP was delivered to the Audit Committee. Highlights included a recent visit from the former Minister for Health at IP5, where the Minister recognised the important role IP5 had played throughout the Pandemic in order to support the NHS Wales in terms of supply and distribution of PPE.
ASSURE	External Audit Audit Wales presented a detailed Position Statement, setting out an update as to current and planned audit work. All 2020-21 NHS audit work is complete, the Audit Wales management letter would be taken to the October Audit Committee, but there are no significant findings that needed to be brought to the Audit Committee's attention.
ASSURE	Stock Take Assurance Due to the implications of BREXIT and the COVID, stock levels are approximately 30*higher than in a normal year, and external warehousing has had to be procured to help store the excess stock. Much of it though is stored at IP5, which is a key facility in responding to the pandemic, not only through the storage and distribution of PPE and other medical equipment, but also in hosting a Lighthouse Testing Laboratory and the Temporary Medicines Unit. As a result, access to the building is severely restricted to minimise the risk of a COVID outbreak and as a consequence, Audit Wales were unable to undertake their usual physical stock checks. This has led to a technical qualification for the financial accounts of Velindre University NHS Trust, as the host of NWSSP. A paper was therefore presented to the Committee to highlight the internal controls in place to record and safeguard the stock at both NWSSP and external sites. It was also confirmed that Internal Audit would undertake a review of stock management arrangements in their plan for 2021-22.
ASSURE	Letter to Auditor General The committee reviewed the letter from Andrew Goodall to the Auditor General for Wales regarding the findings of the recent All- Wales report on Procuring and Supplying PPE. The letter reflects the positive opinions in the report and confirms that NWSSP and Welsh Government have implemented a joint action plan to address the recommendations in the report. Progress against this will be tracked by the Audit Committee.
ASSURE	Internal Audit The Internal Audit Position Statement and Head of Internal Audit Opinion and Annual report were presented to the committee, all remaining 2020-21 audit work is now complete and reports were presented to the committee for consideration. The final Internal Audit Annual Opinion and Annual Report achieved an overall rating of Reasonable Assurance. The report demonstrated the significant amount of work performed throughout the year. The Committee received the following reports for consideration: • NWSSP-PCS Final Report

Achieved Substantial Assurance, with only one low priority recommendation for action.

• P2P Final Interna Audit Report

Achieved Reasonable Assurance, with one high and six medium recommendations for action. Scope had been extended to include a greater emphasis on Accounts Payable with increased sample sizes.

Welsh Risk Pool Services

Achieved Substantial Assurance, with one medium priority recommendation for action.

• Brexit Preparations Final Report

Advisory reviews are not awarded assurance ratings, findings highlighted one opportunity for improvement.

Single Lead Employer Advisory report

Advisory reviews where a number of recommendations were made in order to strengthen and improve programme management in phase 3 of the project.

ASSURE

Counter Fraud

The Counter Fraud Position Statement was presented to the Audit Committee summarising the recent Counter Fraud work carried out to date. The Statement highlighted that all open cases were closed with exception of one, pending the outcome of an internal disciplinary investigation and a total of 12 fraud presentations had been delivered to 214 delegates, with 15 days of work being undertaken to date. The committee discussed the 75 contracted days to NWSSP annually and noted that the current level of days is insufficient to meet the risk profile of the organisation, which has been exacerbated through the long-term absence of the designated LCFS. A solution to address the resourcing issues is being progressed.

ASSURE

Governance, Risk and Assurance

The Committee received updates surrounding NWSSP COVID-19 matters, including COVID-19 Expenditure and Governance Arrangements.

Covid-19 Expenditure- The final summary of covid-19 expenditure was presented to the Committee. The Finance Governance Group was established in mid-2020 and remains in place to consider high value advance payments. To date a total of 49 contracts have been approved by the group. The report confirmed that 2020-21 final covid-19 expenditure totalled £164.737m, this is in addition to the £10,538m capital expenditure incurred.

Governance Matters - The Committee received the Governance Matters paper, which detailed the contracting activity from 8 April to 21 June 2021, and highlighted that there had been no departures from Standing Orders. 5 contracts have been let for NWSSP and 49 for NHS Wales, of which 19 were at briefing stage, 26 at ratification and 4 were extensions. No declarations have been made of gifts, hospitality or sponsorship since the last meeting and there have been no limited or no assurance audit reports. During 2020-21 the scheme of delegation was temporarily amended for COVID expenditure, and those limits were extended again by the Trust Board at its June meeting until 30 September 2021.

<u>Audit Tracking</u> - There are currently 237 recommendations, of which 227 have been implemented, with seven not yet due, one outside of NWSSP control and two recommendations classed as outstanding but which are now due for completion by the end of July.

Corporate Risk - The Corporate Risk Register highlighted one red risk, ten amber risks, and three yellow risks in the Risks for Action section of the Register. The red risk relates to the replacement of the Exeter Software System, which is now due to complete in late summer. Two new risks have been added to the register since the last meeting, these relating to the Oracle upgrade, which is delayed until October following testing that highlighted a number of issues, and fraud risk relating to amendment of banking detail for suppliers due to the hacking of supplier email accounts. Controls have been strengthened to mitigate this fraud risk and we have not seen any recent examples of fraudulent activity, following a spate in March.

ASSURE	Final Annual Governance Statement			
	The 2020-21 Final Annual Governance Statement was presented to and approved by			
	the Audit Committee.			
ASSURE	Risk Protocol			
	The Risk protocol was presented to the Audit Committee for re-approval. There were no			
	significant changes made to the document since it was last approved. The document is			
	consistent with the Velindre UHB Risk Policy, but work to introduce an All Wales			
	approach is progressing. The Audit Committee approved the Risk Protocol.			
ASSURE	Risk Appetite Statement			
	The Risk Appetite Statement for NWSSP was presented to the Audit Committee for			
	approval, no changes had been made since it was last approved in 2020, other than			
	recognising the impact of COVID on working arrangements. The Committee approved			
	the Risk Appetite Statement.			
INFORM	The following items were received for Committee information:			
	Gifts & Hospitality Annual Report 2020-21;			
	 Declarations of Interest Annual Report; and 			
	Audit Committee forward plan 2021-22			

2. ARGYMHELLIAD/RECOMMENDATION

The Committee are asked to:

• **NOTE** the Assurance Report

NHS Wales Shared Services Partnership





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Purpose of Report: Annual quality management review to

ensure continuing suitability, adequacy and effectiveness of the QMS and alignment with the strategic direction of the organisation. The report includes reference to all sites and

services within NWSSP.

Prepared by: Paula Jones, Health and Safety Manager

Reporting Period: Financial Year 2020/2021



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NWSSP HEALTH AND SAFETY ANNUAL REPORT 2020-2021

EXECUTIVE SUMMARY

This report is a statement of NHS Wales Shared Services Partnership's (NWSSP) health and safety management for the financial year 2020/2021 and its intentions with regards to 2021/2022 and beyond.

ENSURING SITES WERE COVID-19 SECURE WITHIN NWSSP

On 23rd March 2020, the Welsh Government introduced new measures to achieve social distancing and key parts of these measures were underpinned by law. NWSSP had a duty to follow these. On 7th April 2020 the Welsh Government enforced 'social distancing' at work with a law requiring employers to abide by the two metre rule where "reasonable".

The two main methods of preventing the spread of infection are **hygiene measures** and **social distancing.** Whilst staff occupy the office environment, control measures continue to be put into place to control the spread of COVID-19.

A great deal of work has been undertaken by the Health and Safety Manager in implementing measures to maintain safe working practices within NWSSP buildings in order to reduce the possibility of transmission of COVID-19 in the workplace, now and as and when lockdown restrictions are eased. The Health and Safety Manager has workedclosely throughout the pandemic with the members of the Building Management Group and issues/actions are fed back to the Adapt and Future Change group.

Going forward, being COVID-secure is the priority for NWSSP. In these difficult times the safety, health and wellbeing of everyone is of paramount importance to us.

The Building Management Group (BMG) was set up during April 2020, as a consequence of the pandemic and initially met on a weekly basis. This group comprised of the site leads from across NWSSP's estates footprint and also has Union representation. In addition, the Health and Safety Manager sat on the group to provide advice. This group continues to meet on a regular basis in 2021.



Health and Safety Management System - HSG65 Assessment Tool

Due to the restrictions of the pandemic, all site audits/visits were postponed during 2020/2021. NWSSP concentrated on ensuring that sites were Covid-19 secure.

OHSAS18001 Management System - External Certification

During December 2020 and during January 2021, an external audit was undertaken in a virtual form (not at sites). As a consequence of the audit there were two minor non conformities raised and a number of recommendations for improvement opportunities.

Internal Health and Safety Audit – Audit and Assurance Services

Overall, a **reasonable assurance** was determined in respect of COVID-19 management arrangements at NWSSP Premises.

Once for Wales Concerns Management System - Datix Cymru

During 2020 NWSSP used the Datix system version 14. During 2021 the national programme for the Once for Wales ConcernsManagement System (OFW) will launch the new Datix Cymru System.

Health and Safety Incidents

There were **61** health and safety incidents recorded on the DATIX system across the various Health and Safety categories within NWSSP.

There were **91** incidents reported on the previous year 2019/2020.

There have been no increases in incident reporting from any service groups during 2020/2021.

The top two service groups with the majority of incidents reported were:

- Procurement Services; and
- Welsh Health Courier Services.

However, there has been a decrease in incidents since the previous year within these service groups. Refer to section 7.

All categories of incidents have decreased on the previous year.

The trends remain the same within this financial year:

- Accidents;
- Manual Handling; and
- Violence and Aggression.



- Slips, trips, and falls = 6
- Contact with an Object = 11
- Manual handling = 12
- Violence and aggression = 10

See section 8 for a brief on the breakdown of the trends; health and safety objectives; lessons learnt and planned improvements into 2021/2022.

The figures noted above show a marked reduction on the prior year which inevitably is at least partially due to the pandemic and the resultant significant drop in staff being on-site.

New Projects - Laundry Services

NWSSP took over the operation and leadership of some laundry services across NHS Wales from 1st April 2021 and further sites and services are likely to be amalgamated into this service in the near future. As part of the due diligence exercise prior to transition of the services, NWSSP identified that a baseline review of H&S Standards within the laundry services would be essential in order to prioritise improvements and enhancements to processes.

An action plan has been developed to capture the findings of the due diligence exercise. Further actions to address areas to improvement will be added to the existing plan. Responsibility for oversight of the action plan is allocated to the Assistant Director of Laundry Services.

Conclusion

The management of health and safety remains key for NWSSP with appropriate resources being provided to manage this within an expanding organisation.

Our main aim continues into 2021 ensuring that our sites remain COVID-19 secure.

Improvements in health and safety are on-going across NWSSP. Both the audit programme and incident reporting are fundamental to NWSSP being able to identify, analyse and address its trends. This relies on the involvement of all staff and managers and the Health and Safety Manager is working to deliver this.



Lessons learnt are continually being communicated across NWSSP as a consequence of incidents. The continuing growth of NWSSP provides constant challenge as new services are taken on, but we are ensuring that the progress made to date within NWSSP is shared across all areas of the organisation.

Health and Safety compliance will have to be monitored closely going forward as the numbers of staff on-site begin to increase again, and particularly with the introduction of new services such as the Laundries and Transforming Access to Medicines (TRAMs).

Key Recommendations

- * To note the contents of the annual Health and Safety Report for NWSSP.
- * To note the activities and progress made with implementing Health and Safety arrangements.
- * To continue with the health and safety objectives for the next 2 years.

Author: Paula Jones, Health and Safety Manager

Date: June 2021



1. INTRODUCTION

The Health and Safety report covers the period 1st April 2020 – 31st March 2021.

NWSSP has a duty of care towards its employees located in its various locations across Wales and has a legal duty to put in place suitable arrangements to manage health and safety.

Our Values



To achieve our aims, we need a highly skilled, motivated, engaged and healthy workforce. Staff engagement and health and safety is a priority and will be delivered in an environment where staff are well managed and valued for their contribution.

The annual report outlines key developments and the work that has been undertaken during this reporting period and is an opportunity to consider work planned and the objectives for the year(s) ahead.

NWSSP's aim is to provide and maintain a safe and healthy environment for all that use our services. This is achieved through effective leadership by senior managers, participation of all staff and open and responsive communication channels.

This annual report has two main purposes:

- to promote health and safety management; and
- to provide general information on the progress being made to improve health and safety throughout NWSSP.

The annual report reflects NWSSP's compliance with the Health & Safety Policy Statement, which requires those responsible for health and safety within NWSSP premises and during NWSSP activities to:

- Comply with health and safety legislation;
- Implement health and safety arrangements;



- Comply with monitoring and reporting mechanisms appropriate to internal and external key stakeholders and statutory bodies;
- Develop partnership working and to ensure health and safety arrangements are maintained for all

The Director of Corporate and Finance leads on the overall direction of health and safety for NWSSP and in conjunction with the Health and Safety Manager continues to improve performance through monitoring progress, reviewing processes and discussions at the All Wales Health and Safety Group.



2. ENSURING SITES WERE COVID-19 SECURE WITHIN NWSSP

On 23rd March 2020, the Welsh Government introduced new measures to achieve social distancing and key parts of these measures were underpinned by law. NWSSP had a duty to follow these. On 7th April 2020 the Welsh Government enforced 'social distancing' at work with a law requiring employers to abide by the two metre rule where "reasonable".

The two main methods of preventing the spread of infection are **hygiene measures** and **social distancing.** Whilst staff occupy the office environment, control measures continue to be put into place to control the spread of COVID-19.

A great deal of work has been undertaken by the Health and Safety Manager in implementing measures to maintain safe working practices within NWSSP buildings in order to reduce the possibility of transmission of COVID-19 in the workplace, now and as and when lockdown restrictions are eased.

The Health and Safety Manager has worked closely throughout the pandemic with the members of the Building Management Group and issues/actions are fed back to the Adapt and Future Change group.

Going forward, being COVID-secure is the priority for NWSSP. In these difficult times the safety, health and wellbeing of everyone is of paramount importance to us.

The following actions have been undertaken during 2020/2021 to ensure the sites are Covid-19 secure:



Five Steps to Safer Working Together – COVID-19

NWSSP has issued the Pledge that we have compiled with the Welsh Government's guidance to managing the risk of COVID-19



We have carried out a COVID-19 risk assessments for each site and shared the results with staff



We have put in extra cleaning, handwashing and hygiene procedures in place



We have invested in technology to help people work remotely



We have taken all reasonable steps to maintain a 2-metre distance in the workplace



We will actively implement the Test, Trace, Protect programme in the workplace.

- Generic Risk Assessment a generic risk assessment was devised by the Health and Safety Manager which each site has adapted to their specific site. Initially, every 3 weeks, COVID-19 clinics were held for all site leads to discuss issues arising from COVID-19. These clinics continue to take place on a regular basis into 2021.
- Working in Close Proximity Guidance a working in close proximity guidance was devised by the Health and Safety Manager where two metre working could not be achieved at sites. A separate working in close proximity risk assessment is undertaken and this continues to be monitored into 2021.
- **Face Coverings** on 19th December 2020 it was agreed that Face coverings were made mandatory to be worn at all NWSSP sites when away from desk/workstation. (Exemptions apply).
- Generic Safe System of Work a generic Safe System of Work was devised by the Health and Safety Manager and each site has



- adapted for their specific site. This continues to be updated as and when into 2021.
- **Checklist** a generic checklist was developed to ensure that the actions stated in the safe system of work are being undertaken at sites by the Site Leads. This continues to be audited by the Health and SafetyManager.
- Posters and Signage Social Distancing and Hand Hygiene
 A number of posters and signage were placed on all the sites within NWSSP to promote social distancing and hand hygiene etc. This continues into 2021.
- Perspex Screen Protection/Mobile Screen Protection Where identified by the Covid-19 risk assessment the need for perspex type protective screening was procured for sites and continues to be monitored into 2021.
- **Space Planning Exercise** was undertaken at each site to ensure that desk occupancy adhered to the two metre rule applied by the Welsh Government. This continues to be monitored into 2021.
- Guidance and information was vitally important during these challenging times and advice was regularly updated on the H&S webpages for COVID-19. A dedicated Covid-19 health and safety webpage was set up with additional information to support staff and managers in relation to COVID-19 issues.
- **Guidance on Working From Home was issued** guidance was issued to staff who could work from home during the pandemic. In addition a number of tips and guidance has been issued to staff when working from home.
- First Aid PPE was issued to all first aiders within NWSSP to be used during the pandemic and into the foreseeable future. A powerpoint presentation was undertaken to answer any questions specifically for first aiders within NWSSP.
- Minimum Vehicle Cleaning Standards were introduced across NWSSP.
- **Contractor Handbook** was updated to take into account the control measures required for contractors on site.



- QR codes and NHS app Sites have downloaded the QR code for their site and placed in the main doorways. The NHS app has been communicated to staff to encourage them to download.
- NWSSP continues to reinforce the benefits of the vaccination programme.
- **COVID-19 Coffee Morning –a** coffee morning was undertaken in 2021 which was deemed a success with over 100 staff joining.

1.1 Building Management Group

The Building Management Group (BMG) was set up during April 2020, as a consequence of the pandemic and initially met on a weekly basis. This group comprised of the site leads from across NWSSP's estates footprint and also has Union Representation. In addition, the Health and Safety Manager sits on the group to provide advice.

The BMG considered and still meets to discuss staff health, safety and welfare issues relating specifically to the adoption of social distancing regulations and effective buildings management in relation to COVID-19.

This group continues to meet on a regular basis in 2021.



3. HEALTH AND SAFETY MANAGEMENT SYSTEM FRAMEWORK

3.1 Health and Safety Management System – HSG65 Assessment Tool

Due to the restrictions of the pandemic, all site audits/visits were postponed during 2020/2021. NWSSP concentrated on ensuring that sites were Covid-19 secure.

These audits/site visits will be reinstated in 2021/2022.

3.2 Revised Checklist for HSG65 Audits to include COVID-19 questions for approval

A revised HSG65 checklist has been prepared by the Health and Safety Manager to include questions on Covid-19 when undertaking site audits/visits in 2021/2022.



4. OHSAS18001 Management System – External Certification

NWSSP undertakes the OHSAS18001 certification in Occupational Health and Safety management for certain sites within Procurement Services. In 2016 the Procurement Services Directorate within NWSSP was successful in re-attaining the BS OHSAS 18001:2007 certification which demonstrates the proactive approach taken to ensuring that there are effective health and safety procedures in place.

The OHSAS 18001 is the recognised specification for the management of Occupational Health and Safety. It was developed in response to industry demand for a health and safety management system standard that could be externally assessed and certified. OHSAS 18001 is not a legislative requirement but it does enable organisations to identify pertinent legislation, control risks and improve performance.

The standard is designed to clarify an organisation's impact on health and safety issues, as well as help to reduce the risk of accidents and any breach in legal requirements.

During December 2020 and during January 2021, an external audit was undertaken in a virtual form (not at sites). As a consequence of the audit there were two minor non conformities raised and a number of recommendations for improvement opportunities.

In view of this certification to ISO 45001:2018 had been recommended. The Health and Safety Manager would work with the Quality Manager within Procurement on the findings.



5. Internal Health and Safety Audit – Audit and Assurance Services

An internal audit was commissioned in accordance with the agreed NWSSP audit plan for 2020/21. The review would seek to provide management assurance in relation to Covid-19 safety at NWSSP premisesacross the period from March 2020. In agreement with management, the audit undertook a sample number of NWSSP sites from core NWSSP premises. It had been agreed that due to control measures relating to the pandemic, the auditor would not visit the sites, but undertook a series of virtual sessions with the site leads. The Health and Safety Manager liaised continually with the auditor throughout the audit process.

The audit sought to provide management assurance in relation to Covid-19 safety at NWSSP premises

The review was undertaken to determine the adequacy of, and operational compliance with, the systems and procedures of NWSSP, to accord with Welsh Government law and guidance. An objective of the audit was to deliver assurance to the Audit Committee that risks material to the objectives of the areas of coverage were appropriately managed.

Accordingly, as relating to Covid-19 Premises Safety, the scope and remit of the audit included:

- Site Management Assurance: that adequate controls have been implemented for site safety of staff and visitors for example:
 - Governance assurance that appropriate leadership / direction, resource allocation, central support, communication channels and liaison were in place;
 - Procedures assurance of development of site operating procedures, including defined responsibilities, travel and visiting arrangements, records and signage;
 - Compliance with the latest Welsh Government/Public Health Wales workplace guidance, including workplace risk assessment;
 - cleaning, handwashing and hygiene procedures;
 - working from home where reasonably practicable;
 - 2 metre distancing;
 - implementation of a test, trace, and protect system.
- Delegated arrangements assurance that departmental delegations have been effectively operated, including liaison between divisional / departmental and site managers, and notification arrangements;
- Monitoring & Reporting assurance that there was monitoring of noncompliance, any HSE enforcement notices, incidents e.g. as recorded at Datix, or other issues arising including associated action; and



• Other – assurance relating to any other relevant issues as arising during the audit

Overall, a **reasonable assurance** was therefore determined in respect of COVID-19 management arrangements at NWSSP Premises.

RATING	INDICATOR	DEFINITION
Reasonable		The Board can take reasonable assurance that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Some matters require management attention in control design or compliance with low to moderate impact on residual risk exposure until resolved.

There were 6 recommendations made and all have now been actioned.









6. ONCE FOR WALES CONCERNS MANAGEMENT SYSTEM - DATIX CYMRU

During 2020 NWSSP used the Datix system version 14.

During 2021 the national programme for the Once for Wales Concerns Management System (OFW) will launch the new Datix Cymru System.

This is a modern, cloud-based version of Datix software and will replace previous versions of Datix. The Welsh Government asked NWSSP to accelerate the introduction and roll out of the system, in order to deliver the benefits of the system as soon as possible.

Benefits of the new system

- Easy to log in Nadex/Windows login can be used to access the system.
- Quicker process The flow and layout of the incident form has been undertaken making it more user friendly.
- Business Intelligence tool simpler process to access reports from the system which will improve efficiency.

This system replaces the various versions and configurations of the Datix software currently in use across NHS Wales and provides the opportunity to provide a level of consistency in our approach to incident management. Welsh Government requested that NHS Wales Shared Services Partnership (NWSSP) host the Central NHS Wales Datix Team who are responsible for system design, configuration, adaption and maintenance, and will be working with the Health and Safety Manager in 2020/2021.

The new OFW system, Datix Cymru, is due to go live 17th May 2021.

During 2021, the Health and Safety Manager will work with colleagues within NWSSP to set up the new system.



7. HEALTH AND SAFETY INCIDENT REPORTING VIA DATIX WITHIN NWSSP

7.1 Health and Safety Incidents Reported during 2020/2021

There were **61** health and safety incidents recorded on the DATIX system across the various Health and Safety categories within NWSSP.

There were **91** incidents reported on the previous year 2019/2020.

The figures noted above show a marked reduction on the prior year which inevitably is at least partially due to the pandemic and the resultant significant drop in staff being on-site.

<u>Figure 1 - Health and Safety Incidents by Service Group - 2020-2021</u>

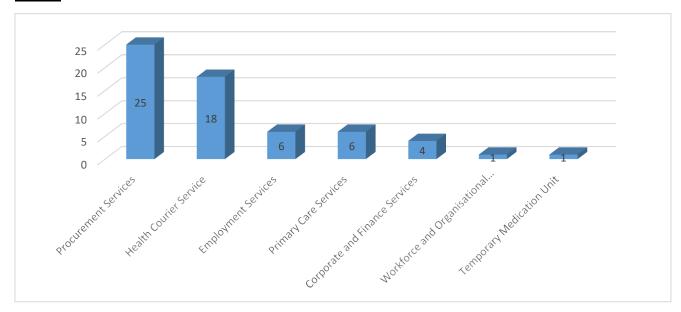
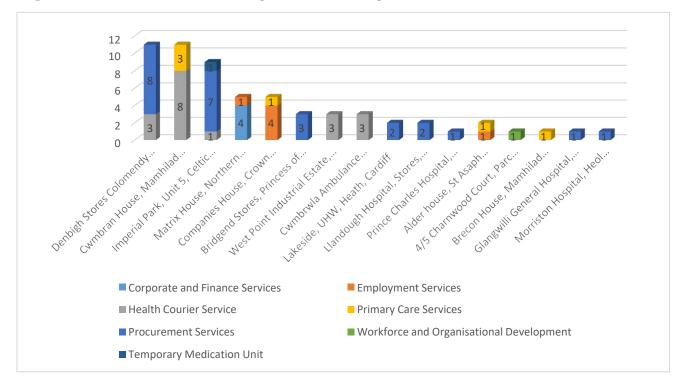




Figure 2 - Health and Safety Incidents by Site - 2020/2021



<u>Figure 3 – Health and Safety Incidents by Service Group – Period</u> <u>2017 - 2021</u>

Service Group	2017/2018	2018/2019	2019/2020	2020/2021	
Temporary Medicines Unit	-	-	-	1	Û
Primary Care Services	10	9	6	6	ightharpoons
Corporate and Finance	4	13	4	4	ightharpoons
Workforce and Organisational Development	0	3	1	1	$\hat{\Gamma}$
Procurement Services	42	34	34	25	Û
Welsh Health Courier Service	19	20	22	18	Û
Employment	16	16	16	6	Û
Specialist Estate Services	0	1	2	0	Û
Legal and Risk	0	1	1	0	Û
Surgical Materials Testing Laboratory (SMTL)	0	1	1	0	Û
Audit and Assurance	1	1	1	0	Û
Student Awards	0	0	1	0	Û
Weds	0	0	1	0	Û
NHS Counter Fraud	1	0	1	0	Û
Total	93	99	91	61	

There have been no increases in incident reporting from any service groups during 2020/2021.



The top two service groups with the majority of incidents reported were:

- * Procurement Services; and
- * Welsh Health Courier Services.

However, there has been a decrease in incidents since the previous year within these service groups.

Temporary Medicines Unit came into NWSSP during 2020.

18
16
14
12
10
7
8
6
4
2
0

Accident Ranging Langing Legang Registration of the Control of Line and Registration of the Control of Control

Figure 4 - Category of Health and Safety Incidents - 2020/2021

See figures 6, 7 and 8 for a breakdown of sub-categories for accidents, manual handling and violence and aggression incidents.

<u>Figure 5 – Category of Health and Safety Incidents – Period 2017 – 2021</u>

Category of Incidents	2017-18	2018-19	2019-20	2020-21	
Stress Related	-	-	-	1	Û
Fire Incident	5	3	7	7	⇒
Exposure/Spillage of Blood, Chemicalor Micro-Organism	3	2	3	3	⇒
Sharps (Including Needle stick)	2	3	2	2	⇒
Accidents	47	41	33	18	Û
Violence and Aggression	14	17	19	10	Û
Manual Handling (Inanimate Load)	14	25	14	12	Û
Security Incident	3	5	6	2	Û
Ill Health Incident	3	1	5	2	Û
Dignity at Work	2	0	2	1	Û
Infection Control Incident	0	2	0	3	Û
Total	93	99	91	61	



The trends remain the same within this financial year:

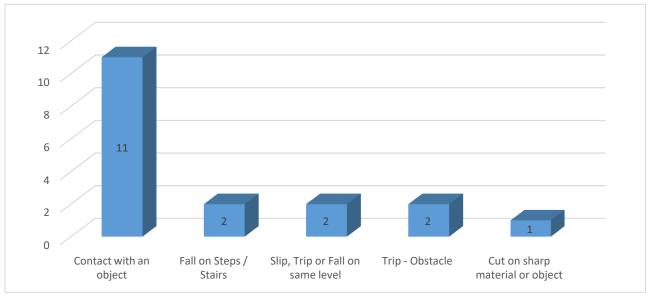
- Accidents;
 - Slips, trips, and falls = 6
 - Contact with an Object = 11
- Manual Handling; and
 - Manual handling = 12
- Violence and Aggression.
 - Violence and aggression = 10

See section 8 for a brief on the breakdown of the health and safety objectives.

All categories have decreased on the previous year. However, one work related stress incident has been reported which has not been reported in previous years.

The fire related incidents are mainly down to fire alarm activation – false alarms.

<u>Figure 6 – Breakdown of Accident Category Incidents by Sub Category – 2020/2021</u>

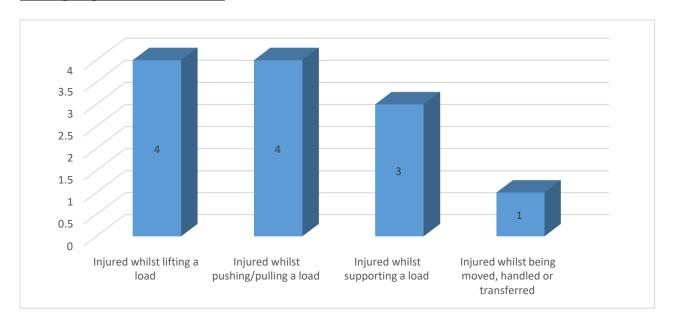


The majority of accident incidents reported incidents are contact with an object.

See section 8 for the lessons learnt and planned improvements into 2021/2022.



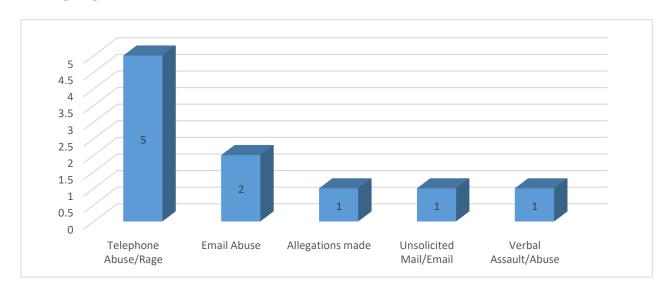
<u>Figure 7 - Breakdown of Manual Handling Incidents by Sub Category - 2020/2021</u>



The majority of manual handling incidents reported are from lifting a load or whilst pushing or pulling a load.

See section 8 for the lessons learnt and planned improvements into 2021/2022.

<u>Figure 8 – Breakdown of Violence and Aggression Incidents by Sub</u> Category – 2020/2021



The majority of violence and aggression incidents reported are from telephone abuse.

See section 8 for the lessons learnt and planned improvements into 2021/2022.



7.2 Key Performance Indicators

KPIs have now been produced to inform the NWSSP Health and Safety Groups of any issues within quarters.

The matrix contains information on health and safety incidents, including the health and safety objectives; to aid NWSSP to understand and make improvements where non-compliance is identified or standards need improving.



8. UPDATE ON HEALTH AND SAFETY OBJECTIVES

This report provides an update on the progress made in achieving set health and safety (H&S) objectives over the last four years. During 2020/2021, the main type of issues reported were consistent with prior year:

- Slips, trips, and falls = 6
- Contact with an Object = 11
- Manual handling = 12
- Violence and aggression = 10

The figures noted above show a marked reduction on the prior year which inevitably is at least partially due to the pandemic and the resultant significant drop in staff being on-site. H&S compliance will have to be monitored closely as the numbers of staff on-site begin to increase again, and particularly with the introduction of new services such as the Laundries and Transforming Access to Medicines (TRAMs).

Objective 1

Aim to reduce work related slips, trips and falls in the workplace, aspiring to a 10% reduction over two years

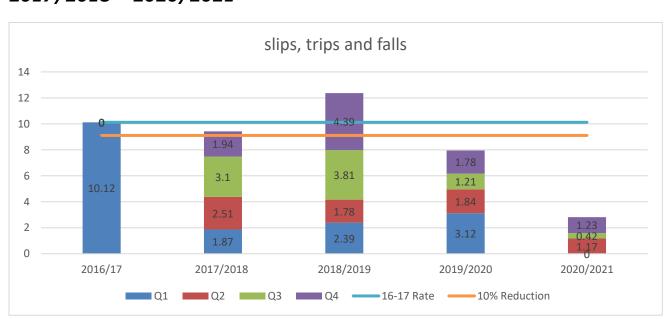


Figure 9 – Incident rate per 1,000 employees by quarter for 2017/2018 – 2020/2021

Six slips, trips and falls incidents occurred during 2020/2021, resulting in the achievement of the 10% reduction target.

Lessons Learned include:

- Use designated walkways;
- Close all IT ports in meeting rooms after use;
- Use the correct delivery area;



Not to rush when using stairs.

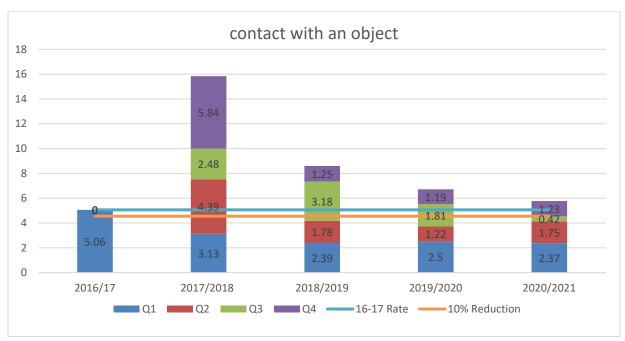
Planned Improvements for 2021/2022

- Pilot of a standard form for investigating slips, trips, and falls, leading to an improvement in the consistency of information andinvestigation outcomes, lessons learned etc.
- Training in undertaking investigations.
- Continual completion of workplace checklists at all sites to identify potential hazards and to ensure good housekeeping.
- Spill kit training where applicable.
- Maintenance of designated walking areas.
- Outside lighting will be checked on a regular basis.
- Inclement weather processes will continue to be monitored.
- Promoting the reporting of slips, trips, and falls via the Datix System.

Objective 2

Aim to reduce work related contact-with-an-object incidents in the workplace, aspiring to a 10% reduction over two years.

Figure 10 – Incident rate per 1,000 employees by quarter figures for period 2017/2018 – 2020/2021



11 contact with an object incidents occurred, which represents a continuing reduction on prior years.

Lessons Learned include:

- Requirement for refresher training undertaken on the safe system of work for roll cages, pallet trucks and tail lifts.
- Staff not to bend down in front of a cage without securing the doors in the first instance.
- Ensure pallets are secure before attempting to unload.
- Pallets/items that are identified as unstable to be re-palletised prior to moving.

26



- Roll cages to be positioned in designated areas only.
- Robust gloves to be worn when operating a tail lift.
- Staff are reminded to open boxes using safety knifes only.

Planned Improvements for 2021/22

- Risk assessments for roll cages, tail lifts, pallet trucks are revised when an incident occurs.
- Safe systems of work for roll cages, tail lifts, pallet trucks are revised when an incident occurs.
- All bank staff receive training on the relevant safe systems of work and are issued with relevant flashcards for the equipment they use.
- All sites have designated areas for roll cages.
- Promoting the reporting of contact with an object incident via the Datix System.

Objective 3

Aim to reduce manual handling incidents in the workplace, aspiring to a 10% reduction over two years

Figure 11 – Incident rate per 1,000 employees by quarter for period 2017/2018 – 2020/2021.



12 manual handing incidents occurred during 2020/2021, representing a significant reduction on prior years and achievement of the 10% target reduction.

Lessons Learned include:

- When unloading from a vehicle, check the layout and condition of flooring.
- When unloading stock, ensure stock is secured and packed suitable prior to moving.
- Vehicles should be thoroughly inspected on hand over.
- If an individual believes a load is too heavy, to decant at point.



- Ensure pallets are secure before attempting to unload.
- Pallets/items that are identified as unstable to be re-palletised prior to moving.
- Ensuring that roll cages are properly secured whilst in transit.
- Not to operate damaged roller shutter doors.
- Follow safe system of work when picking stock.
- When lifting heavy stock items, ensure correct lifting equipment is used.

Planned Improvements for 2021/22

- Enhance the use of virtual training.
- Further promotion of a safe working culture.
- Report any unsafe conditions or practices by reinforcing the message "if in doubt, avoid it and report it".
- Undertake site survey for deliveries to any new sites.
- Undertake risk assessments after an incident.
- Revise safe systems of work when an incident occurs.
- Ensure that all bank staff receive training on the relevant safe systems of work and are issued with relevant flashcards for the equipment they use.
- Ensure that all relevant staff undertake the manual handling inanimate load training in the specified timeframe.
- Promote the reporting of manual handling incidents via the Datix System.

Objective 4

Develop and enhance the health and safety and risk management knowledge and skills of managers and supervisors throughout NWSSP.

Achievements:

- A number of supervisors and managers have undertaken the elearning IOSH Working/Managing Safely course.
- Regular training is given to supervisors and managers in the use of the Datix System.
- Managers and site leads have been heavily involved in the implementation of the COVID-19 risk assessments throughout 2020/2021.

Planned Improvements for 2021/22

- Sites to carry out training needs analysis for staff during their first month of employment.
- Continue to improve the dedicated health and safety webpages.
- Lessons learned as a consequence of incidents to be promoted in the quarterly reports.



Objective 5

Continually improve the health and safety culture within NWSSP.

Achievements:

- Staff using Datix system to report incidents in a timely manner.
- H&S Procedure was revised in 2020 and issued to all staff.
- During 2020/2021 staff were updated regularly on information relating to COVID-19 via newsletters and briefing.
- Regular H&S meetings continue to be undertaken.
- All sites continue to utilise the First Month Site Induction Handbook.
- Substantial work undertaken by the H&S Manager in implementing measures to maintain safe working practices within NWSSP buildings in order to reduce the possibility of transmission of COVID-19 in the workplace.
- The H&S Manager has worked closely throughout the pandemic with the members of the Building Management Group and issues/actions are fed back to the Adapt and Future Change group.
- Five Steps to Safer Working Together COVID-19 Pledge was issued to demonstrate compliance with Welsh Government guidance to managing the risk of COVID-19.
- A dedicated H&S webpage was set up for COVID-19 related issued during 2020.
- A Safe System of Work was introduced for all sites on social distancing.
- A checklist was introduced for site leads to complete to ensure sites were COVID-19 secure.
- Home Working Guidance was produced.
- Information on hints and tips was provided to staff whilst working from home during COVID-19.
- The internal audit report undertaken in 2020 on the management of H&Sand the separate review of management of sites during COVID both provided Reasonable Assurance.
- Quarterly H&S reports, and the Annual Report, were produced to identify any trends or concerns.



Objective 6

Regularly monitor and evaluate the health and safety performance throughout NWSSP.

Achievements:

In addition to those reported under Objective 5:

- Regular meetings are held with Site Leads to discuss estates compliance and any issues are escalated.
- The H&S Manager ensures that all incidents reported on the Datix system are investigated in a timely manner and if not, these are escalated.
- Quarterly reports are produced for the purpose of SLT and All Wales H&S Meeting to identify trends.
- Progress against the Health and Safety Objectives is monitored quarterly.

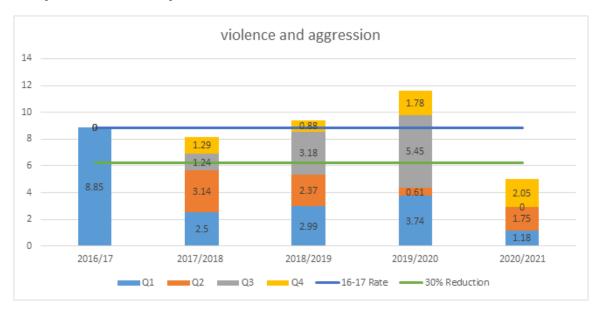
Planned Improvements for 2021/22

- Pilot of the investigation form for slips, trips, and falls.
- Investigation training.

Objective 7

Promote a zero-tolerance culture in relation to violence and aggression incidents within NWSSP, aspiring to improve incident reporting and investigations and reduce the number of incidents by 30% over two years.

Figure 12 – Incident rate per 1,000 employees by quarter for period 2017/2018 – 2020/2021.



10 violence and aggression incidents occurred during 2020/2021, which represents a significant reduction on prior years and achievement of the 30% reduction target. The majority of incidents recorded relate to telephone abuse.



Lessons learned include:

- The Medical Performance List application pathway and the systems used to process were reviewed with a view to ensuring communications are sent via Action Point for business continuity.
- Name and contact number to be taken by caller before progressing with call.
- Obtain witness statements at the scene if possible.
- Digi locks to be changed if there is an incident of violence and aggression on site.
- Report incidents in a timely manner.

Planned Improvements for 2021/22

- Callers to obtain contact details of a caller at the time of the call.
- Continue to communicate to Health Boards that NWSSP has a zero-tolerance approach to violence and aggression.
- Telephone recording service implemented within Employment Services call centre.
- Remind all staff of the importance of reporting verbally abusive phone calls to their managers and onto the Datix system.



9. REPORTING OF INJURIES DISEASES AND DANGEROUS OCCURENCES REGULATIONS (RIDDOR)

A total of **5** incidents were reported under RIDDOR in 2020/2021.

In the previous year, there were 4 incidents reported.

Figure 13 - Category of RIDDOR Incidents - 2020/2021

Datix ID	Incident Date and Site	Category of RIDDOR		
120711	28/01/2020	Over 7 day injury		
120711	Cwmbrwla Ambulance Station, Swansea	Reported to HSE on 4th February 2020.		
	Health Courier Services	Manual handling - Injured whilst lifting a load		
121376	07/07/2020	Over 7 day injury		
	Denbigh Stores Colomendy Ind Est, Denbigh	Reported to HSE on 16 th July 2020.		
	Procurement Services	Manual handling – injured whilst pushing/pulling a load.		
121509	04/08/2020	Over 7 day injury		
121309	Lakeside, UHW, Heath, Cardiff	Reported to HSE on 12 th August 2020.		
	Procurement Services	Accident – contact with an object.		
122166	11/11/2020	Over 7 day injury		
	Cwmbran House, Mamhilad Park Estate, Pontypool	Reported to HSE on 24 th November 2020.		
	Health Courier Services	Manual handling - Injured whilst lifting a load		
122574	29/01/2021	Over 7 day injury		
1223/7	Imperial Park, Unit 5, Celtic Way, Newport	Reported to HSE on 4 th February 2021.		
	Procurement Services	Accident – slip, trip and fall on same level		

9.1 RIDDOR Guidance Flow Chart Reporting Guidance

The RIDDOR guidance flowchart has been reissued as a reminder to staff.



10. PERSONAL INJURY CLAIMS

During the period April 2020 – March 2021 there have been two new claims.

11. HEALTH AND SAFETY EXECUTIVE ENFORCEMENT ACTION

During the year there have been no prosecutions, enforcement actions or intervention costs by either the Health and Safety Executive (HSE) or Environmental Health.



12. **NEW PROJECTS WITHIN NWSSP**

12.1 Laundry Services

The All Wales Laundry review was agreed by the SSPC to transfer the existing Laundry services within NHS Wales into NWSSP. Targeting April 1st 2021.

The service transition commenced and run in parallel to the Programme Business Case and future business case development. In parallel to the Programme Business Case and future business case development stages a separate, standalone, project was undertaken to manage the transfer of the NHS Wales Laundries into NWSSP. This was managed in a series of workstreams focusing on the critical areas such as¹:

- Finance, Performance, Corporate & Health/Safety
- Estates
- Workforce
- Logistics
- Procurement/Products
- I.T.

On 1st April 2021 three laundry services transferred over to NWSSP. Prior to the transfer, a number of health and safety factors needed to be identified for scrutiny in readiness for April 1st 2021.

Stage 1 of the work stream for Health and Safety commenced during January 2021 and entailed completing the required due diligence to identify existing health and safety arrangements which are in place at each individual Health Board.

As a consequence of the report, an action plan has now been put into place by the Assistant Director of the Laundry Service and initiated with the Health and Safety Manager.

The three laundry services were:

- Ysbyty Glan Clwyd Laundry Services: Betsi Cadwaladwr University Health Board;
- Llansamlet Laundry Service: Swansea Bay University Health Board;
- Llanfrechfa Grange 'Green Vale' Laundry Service: Aneurin Bevan University Health Board.



13. NWSSP HEALTH AND SAFETY PROCEDURE

The NWSSP Health and Safety Procedure was approved by the All Wales H&S meeting in December 2020.

14. **ESTATES COMPLIANCE**

The H&S Manager currently manages the estates statutory compliance for our Velindre leased sites, and also attends the Velindre NHS Trust Estates management group meetings, feeding back any issues and nonconformities.

Many of the NWSSP locations are on Trust/UHB sites and when the H&S Manager undertakes the annual site visits, issues are often addressed directly with the site managers to ensure compliance from the Health Body's perspective. This is not always easy as their priorities are patient care and not our offices on their sites.

During 2020 it was vitally important that sites ensured that the statutory estates maintenance was maintained, to ensure the safety of those who remain within the workplace.

All elements of estates compliance were continually monitored for compliance by the Health and Safety Manager.

The Health and Safety Manager for NWSSP represents NWSSP on the Velindre NHS Trust Estates/Statutory Compliance Management Group and provides updates on the collation of data for the mandatory data collection audit.

15. ASBESTOS MANAGEMENT

15.1 Identification of Asbestos - Companies House

Companies House have undertaken a re-survey on the areas where asbestos containing materials were situated within floors 3 and 4. These ACM's were currently confined to the screw holes where panelling was previously removed behind the new panelling. As these ACM's were deemed low risk, this was previously managed and maintained. It was agreed by Companies House that these would be removed and the works were undertaken in September 2019. Works completed.

As part of the major refurbishment works in reception and the staff restaurant at Companies House, some areas have been identified ashaving



asbestos containing materials (ACMs). A controlled programme of works, continued to take place during 2020 and 2021 to remove the ACMs.

This work programme has now been completed.

15.2 LEGIONELLA

Due to class room based training not being able to be undertaken due to the pandemic, on-line training was commissioned for those who require to undertake the legionella awareness training every two years.

16. FIRE MANAGEMENT

16.1 Fire Risk Assessments - NWSSP Leased Sites

During 2020/2021 fire risk assessments continued to be undertaken, where applicable by the Specialist Estates Fire Safety Advisor.

In accordance with the provisions of the Regulatory Reform (Fire Safety) Order 2005 NWSSP undertake regular fire risk assessments. A Fire Risk Assessment is an organised, methodical look at premises, the activities carried on the premises, and the likelihood of whether a fire could start and cause harm to those in the vicinity of the premises.

The purpose of the Fire Risk Assessment is to identify potential Fire Hazards, identify steps to be taken to reduce any risks to as low as reasonably practicable, and to recommend what fire precautions and management arrangements can be put in place to ensure safety if a fire does occur. The Fire Safety Advisor within the Specialist Estates Directorate undertakes fire risk assessments for the Velindre leased sites.

Following on from fire risk assessments, the Health and Safety Manager ensures that all the actions are carried out as a consequence and works with the site leads and landlords of each site.

16.2 Fire Safety Advice During COVID-19

During 2020, the fire safety advice on the health and safety webpages was issued to staff and was placed on the H&S webpages for COVID-19.

16.3 Compartmentation – Alder House, Matrix House and Brecon

The NWSSP SMT meet on 26 May 2020 to review a paper from NWSSP SES which provided advice on legal obligations in relation to fire compartmentation at the Alder House, Matrix House and Brecon House sites. Referring to the latest Fire Risk Assessments, there were no recommendations to complete remedial works to compartmentation **for**



<u>life safety purposes</u>. Status will be tracked on the NWSSP Risk log.

16.4 Revised Fire Safety Website Pages and Documentation

The Fire Safety webpages have been revised and updated to contain all the resources required on fire management.

16.5 Fire Marshal Training - On-line training

Due to class room based training not being able to be undertaken due to the pandemic, on-line training was commissioned for those fire marshals who were currently on site.

17. MANUAL HANDLING INANIMATE LOAD TRAINING DURING COVID-19

During the pandemic alternative, interim measures were required in recognition of the challenges NWSSP were facing in releasing staff to attend and the geographical complexities around attending C&V HB class room based training.

The on-line safer handling package has been devised for NWSSP staff who have an element of manual handling requirements in their role. This will be undertaken during the pandemic due to staff not being able to attend class room based session.

18. IOSH ON LINE WORKING/MANAGING SAFELY

On-line training for specific staff members continues to be undertaken.

This is in line with the health and safety objectives.

19. 101 AND 999 CALLS

The works to install the new SIP trunks that allows access to 101 and 999 was undertaken and the transition from the old supplier to the new one was undertaken.

During 2020, the issue was resolved and all sites are now able to ring 101 and 999.



20. CONSULTATION, COMMUNICATION AND CONTROL

The Director of Corporate and Finance leads on the overall direction of health and safety for NWSSP with the Health and Safety Manager continuing to improve performance through regular monitoring progress, reviewing processes and having regular discussions under the Health and Safety Committee Structure.

NWSSP has established an effective means of communication and consultation with its staff through regular health and safety specific newsletters and articles within the internal magazine, which demonstrates a proactive, positive approach to raising awareness of health and safety issues.

There is a Health and Safety Committee in place with approved terms of reference. Through this structure NWSSP communicates and consults with employees on health and safety issues. The various H&S groups in place have suitable management membership to implement actions and meetings are held on a quarterly basis. In addition, trade unions are invited to attend.

Regular health and safety reports are submitted to the Senior Leadership Team (SLT) on a quarterly basis. The SLT receives, discusses and scrutinises reports and provides updates on any issues associated with the management of health and safety risks. The SLT ensures that healthand safety issues are integrated into its Integrated Medium Term Plan (IMTP) business planning process and appropriately actioned.

20.1 NWSSP ALL WALES HEALTH AND SAFETY MEETINGS

These meetings continue to be held.

It should be noted that the Regional H&S meetings were postponed during 2020 due to the pandemic. The Building Management Group was set up and met regularly.

20.2 HEALTH AND SAFETY NEWSLETTER

Due to the pandemic the health and safety newsletter was postponed during 2020 due to communications being issued to all staff twice weekly regarding updates on the pandemic situation.



20.3 NWSSP Health and Safety Website

Within NWSSP a dedicated health and safety website has been set up for staff.

During the pandemic a separate health and safety website was also set up for specific issues arising from the pandemic.

21. POLICIES ISSUED IN 2020

The following policies had been issued by Velindre during 2020/2021

- Policy for the Safe Use of Display Screen Equipment
- Guidance on Industrial Injury Claims Form
- Medical Device and Equipment Management Policy.