

## Bundle HEIW Board (Open) 28 November 2019

### AGENDA

November Agenda HEIW (Open) V7.docx

- 1 PART ONE - PRELIMINARY MATTERS
- 1.1 Welcome and Introductions
- 1.2 Apologies for Absence
- 1.3 Declarations of Interest
- 1.4 Improvement Story - Professional Support Unit
  - 1.4 - Nov 19 brief on PSU to the board.doc
- 1.5 To receive and confirm the minutes of the Board held on 26 September 2019
  - 1.5 September Board Minutes ( Open) (D)(V3)DB.ahdocx.docx
- 1.6 Action Log
  - 1.6 - Action Log - Board (Open Session) September. DB (13.11.19) \_.docx
- 1.7 Matters Arising
- 2 PART TWO - CHAIR AND CHIEF EXECUTIVE REPORTS
- 2.1 Chair's Report
  - 2.1 - Chairs report 2019 November 2019 V2.docx
- 2.2 Chief Executive's Report
  - 2.2 - ceo report nov.ahd (21.11.11)final.docx
- 3 PART THREE - STRATEGIC ITEMS
- 3.1 South Wales Major Trauma Network
  - 3.1a - MTN Cover Paper.AH PM FINAL docx.docx
  - 3.1b - Major Trauma PBC Cover Note for Boards 1.0 - FINAL.docx
- 4 PART FOUR - GOVERNANCE, PERFORMANCE AND ASSURANCE
- 4.1 Finance Report
  - 4.1a - Nov 2019 - Board Finance Paper Month 7.docx
  - 4.1b - Nov 2019 - Board Finance Paper Month 7 Appendix 1.docx
  - 4.1c - Nov 2019 - Board Finance Report Appendix 2 - Month 07 - HEIW - Monitoring Return Tables - Day 9 V2.pdf
- 4.2 Annual Plan: Mid-Year Update
  - 4.2a - cover mid year reportvcp.docx
  - 4.2b - mid year annual report.docx
- 4.3 Communications and Engagement Strategy: Mid-Year Progress Update
  - 4.3a - HEIW communications and engagment strategy update - Nov 2019 final.docx
  - 4.3b - Appendix A HEIW Communications and Engagement Strategy April 2019.pdf
  - 4.3c - Appendix B overview HEIW core communications and engagement.pdf
- 4.4 Approve Proposed Amendments to HEIW's Standing Orders
  - 4.4a - Review of Standing Orders (11.11.19) (DB).docx
  - 4.4b - Appendix 1 - Future Ways of Working (19.09.19) (F)\_ (003).docx
  - 4.4c - Appendix 2 - Standing Orders (Draft for Nov A&AC) (clean).doc
- 4.5 Appointment of a Deputy Independent Member to the Education, Commissioning and Quality Committee
  - 4.5 - Deputy Member of the ECQC(DB 18.11.19).docx
- 4.6 To receive key issue reports from:
- 4.6.1 Education, Commissioning and Quality Committee
  - 4.6 - ECQC Chair Key Issue Report\_2019-10-21 (Open) V3.docx
- 4.6.2 Audit and Assurance Committee
- 4.7 In-Committee Decisions

5 PART FIVE - OTHER MATTERS

5.1 Any Other Rrgent Business

5.2 Summary of Key Actions

5.3 Dates of Next Meetings

5.3.1 • HEIW Board Development Session to be held on 19 December 2019 in Ty Dysgu, Nantgarw

5.3.2 • HEIW Board to be held on 30 January 2020 – venue to be confirmed

## HEALTH EDUCATION AND IMPROVEMENT WALES (HEIW)

**Board Meeting - 10.00am-1.00pm**

**to be held on Thursday, 28 November 2019  
in Conference Room, Ty Dysgu, Nantgarw**

### AGENDA

<b>PART 1</b>	<b>PRELIMINARY MATTERS</b>	<b>10.00-10.30</b>
1.1	Welcome and Introductions	Chair/Oral
1.2	Apologies for absence	Chair/Oral
1.3	Declaration of interests	Chair/Oral
1.4	Improvement Story – Professional Support Unit	Medical Director/ Professional Support Practitioner
1.5	To receive and confirm the minutes of the Board held on 26 September 2019	Chair/ Attachment
1.6	Action Log	Chair/ Attachment
1.7	Matters Arising	Chair/Oral
<b>PART 2</b>	<b>CHAIR AND CHIEF EXECUTIVE REPORTS</b>	<b>10.30-10.50</b>
2.1	Chair's Report	Chair/ Attachment
2.2	Chief Executive's Report	Chief Executive/ Attachment
<b>PART 3</b>	<b>STRATEGIC ITEMS</b>	<b>10.50-11.50</b>
3.1	South Wales Major Trauma Network	Medical Director/ Attachment
<b>PART 4</b>	<b>GOVERNANCE, PERFORMANCE AND ASSURANCE</b>	<b>11.50-12.50</b>
4.1	Finance Report	Interim Director of Finance/ Attachment
4.2	Annual Plan: Mid-Year Update	Chief Executive/ Attachment
4.3	Communications and Engagement Strategy: Mid-Year Progress Update	Director of Workforce and OD/ Attachment
4.4	Approve Proposed Amendments to HEIW's Standing Orders	Board Secretary/ Attachment

4.5	Appointment of a Deputy Independent Member to the Education, Commissioning and Quality Committee	Board Secretary/ Attachment
4.6	To receive key issue reports from the: <ul style="list-style-type: none"> <li>- Education, Commissioning and Quality Committee held on 21 October 2019</li> <li>- Audit and Assurance Committee held on 22 November 2019</li> </ul>	Chair of the Committee/ Attachment Chair of the Committee/ Oral
4.7	In-Committee Decisions	Board Secretary/ Attachment
<b>PART 5</b>	<b>OTHER MATTERS</b>	<b>12.50-1.00</b>
5.1	Any other urgent business	Chair/ Oral
5.2	Summary of key actions	Chair/Oral
5.3	Dates of Next Meetings: <ul style="list-style-type: none"> <li>• HEIW <b>Board Development Session</b> to be held on <b>19 December 2019</b> in Ty Dysgu, Nantgarw.</li> <li>• HEIW <b>Board</b> to be held on <b>30 January 2020</b> – venue to be confirmed.</li> </ul>	

In accordance with the provision of Section 1(2) of the Public Bodies (Admissions to Meetings) Act 1960 it shall be resolved that representatives of the press and other members of the public be excluded from the latter part of the meeting on the grounds that it would be prejudicial to the public interest due to the confidential nature of the business transacted. This section of the meeting is to be held in private session.



**GIG**  
CYMRU  
**NHS**  
WALES

Addysg a Gwellu Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

## **Professional Support Unit, HEIW - Dr Rhodri Stacey's personal journey November 2019**

The Medical Directorate, HEIW is responsible for all doctors and dentists in training in Wales (c.2500) and for any issues that may arise and prevent progression throughout the training process. To ensure the quality management the organisation has developed systems to respond quickly to any concerns raised.

The Professional Support Unit (PSU) was created in 2008 to support all doctors and dentists in training in Wales. PSU provides guidance and information to all parties involved in postgraduate medical and dental training.

To date PSU has provided support for +2000 training doctors and dentists and actively supports +/- 11% of trainees in Wales with 90% positive outcomes (based on outcomes for progression). The support needs vary from overcoming life's challenges, addressing exam preparation & technique, developing targeted plan with outcomes, addressing issues related to training or workplace, assisting with adjustments for health or disability, exploration of career options and support with FTP issues / Remediation.

Dr Stacey recaps a personal journey as a trainee, reflecting on his challenges and his route to a successful outcome. He provides an insight into the crucial role that PSU plays in providing holistic support services for Welsh trainees.

### **Impact of PSU**

**The patient** - The support offered to a trainee can help develop the skills they need to provide effective patient care, whether it's improving their communication or helping them work efficiently in a team setting to meet the needs of those they are treating.

**The trainee** - As trainees are assessed throughout the year, culminating in an ARCP, the PSU can provide additional support to meet their learning requirements. Trainees are learners as well as service providers and recognising the challenges this creates can benefit their progression. For example, the PSU links with specialist Occupational Health which can assess a trainee's fitness for training as well as for work.

**The stakeholder** - The PSU support educators as well as trainees, and the service works closely with the individual speciality schools to provide tailored support and aid risk management. The PSU ran a series of masterclasses to educate trainers in topics such as Supporting Trainees in Wales, Maximising Training and Being an effective Mentor/Mentee in PGMDE. The service also attends speciality inductions and ARCPs to support the schools.

**The tax-payer** - It costs hundreds of thousands of pounds to train a doctor, and this cost increases if a trainee requires an extension to training for not meeting the training requirements. Often an extension can be avoided if a trainee receives additional support to achieve these requirements. This support could be addressed by coaching to address exam anxiety or improving time management.



## HEIW

### Minutes of the Board Meeting of HEIW held on 26 September 2019 at 10:00 am at Ty Dysgu, Nantgarw **Unconfirmed**

#### Present:

Dr Chris Jones	Chair
Tina Donnelly	Independent Member
Alex Howells	Chief Executive
Stephen Griffiths	Director of Nursing
Dr Ruth Hall	Independent Member
Gill Lewis	Independent Member
Professor Pushpinder Mangat	Medical Director
Professor Ceri Phillips	Independent Member
Julie Rogers	Director of Workforce and OD
John Hill-Tout	Independent Member

#### In attendance:

Dafydd Bebb	Board Secretary
Rhiannon Beckett	Deputy Director of Finance

#### In attendance for the improvement story:

Dr Anton Saayman	Sub Dean on Postgraduate Education Support and Quality Improvement Skills
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		Action
<b>2609/1.1</b>	<b>WELCOME AND INTRODUCTIONS</b>	
	The Chair welcomed everybody to the meeting of the HEIW Board.	
<b>2609/1.2</b>	<b>APOLOGIES FOR ABSENCE</b>	
	Dr Heidi Phillips, Independent Member. Eifion Williams, Interim Director of Finance.	
<b>2609/1.3</b>	<b>Declarations of Interest</b>	
	Ceri Philips confirmed his appointment as Chair of the All Wales Medicines Strategy Group .	
<b>2609/1.4</b>	<b>Improvement Story – All Wales Single Medical Trainer Agreement</b>	
	A presentation by Dr Anton Saayman, Sub Dean for Postgraduate Education Support and Quality Improvement Skills on the All Wales Training Agreement was <b>received</b> .	

	<p>The presentation highlighted the successful adoption of a Single Medical Trainer Agreement (SMTA) in Wales for postgraduate medical training and undergraduate medical education.</p> <p>The harmonisation of undergraduate and postgraduate approaches to trainer recognition via the SMTA is a first in the UK and was a result of successful collaboration across a number of entities. It was confirmed that the SMTA ensures that Wales continues to be recognised by the GMC is leading the way in relation to the implementation of formal recognition of, and support for, its trainers.</p> <p>Dr Saayman explained that the benefits of the SMTA includes – a greater clarity for the trainer role, general consistency of approach to the delivery, management and support of training roles, a more streamlined mechanism for the management and provision of CPD activities trainers</p> <p>Going forward the aim is for the SMTA to be instrumental in improving the quality of trainers and training to achieve excellent outcomes for trainees.</p> <p>The presentation was discussed by the Board in a question and answer session.</p> <p>The SMTA was described as an excellent piece of work by the Board. Consideration was given as to whether trainers and trainees were given enough protected time to undertake training.</p> <p>The Chair thanked Dr Saayman on behalf of the Board for the presentation.</p>	
<b>Resolved</b>	<p>That</p> <ul style="list-style-type: none"> <li>- further communications be published to highlight the success of the Single Medical Trainer Agreement.</li> <li>- the Improvement Story be <b>noted</b>.</li> </ul>	<b>JR</b>
<b>2609/1.5</b>	<b>To receive and confirm the minutes of the Annual General Meeting held on 18 July 2019</b>	
<b>Resolved</b>	<p>The minutes of the AGM held on <b>18 July 2019</b> were approved as an accurate record subject to the following amendments:</p> <p>At page 1. Insert new paragraph entitled “apologies for absence” at AGM 1807/1.2 and that the following words be inserted:</p> <p><i>“It was noted that apologies had been received from Alex Howells (Chief Executive) and Eifion Williams (Interim Director of Finance).”</i></p>	<b>DB</b>

	<p>At page 2, minute AGM 1807/2.1, second paragraph, first sentence, that a capital 'W' be inserted for the word 'Welsh'.</p> <p>At page 3, minute AGM 1807 2.4, fifth paragraph that a capital 'W' be inserted for both references to the word 'Welsh'.</p>	
<b>2609/1.6</b>	<b>To receive and confirm the minutes of the Board meeting held on 18 July 2019</b>	
<b>Resolved</b>	The minutes were approved as an accurate record.	
<b>2609/1.7</b>	<b>Action Log</b>	
	<p><b>3005/3.1 Optometry – Return on Investment.</b> Ceri Phillips provided an update in respect of the work undertaken on value and return on investment arising from the business case on Optometry. He felt that the original business case required greater focus upon the return on investment. A further review of the matter had identified that the business case may have the benefit of significant reductions in outpatient referrals and referrals to GPs. Consideration was given by the Board on the methodology for presenting potential value and return on investment within HEIW's business cases.</p> <p>The Board expressed the view that adopting an aligned methodology for value and return on investment was fundamental for HEIW going forward.</p>	
<b>Resolved</b>	<p>That:</p> <ul style="list-style-type: none"> <li>- Out of Hours peer review report be circulated to board members;</li> <li>- that Alex Howells and Ceri Phillips liaise with Alan Brace at Welsh Government on how best to represent value and return on investment within business cases.</li> <li>- that a paper on value methodology within business cases be presented at November Board. The paper also to look at how this is captured in the HEIW annual report.</li> <li>- the Action Log was <b>received</b> and <b>noted</b>.</li> </ul>	<p><b>Completed</b></p> <p><b>AH</b></p> <p><b>AH</b></p>
<b>2609/1.8</b>	<b>Matters arising</b>	
	There were none.	
<b>2609/2</b>	<b>CHAIR AND CHIEF EXECUTIVE REPORTS</b>	
<b>2609/2.1</b>	<b>Chair's Report</b>	
	<p>The Chair's written report was <b>received</b>.</p> <p>In presenting the report the Chair highlighted that HEIW's agenda for September Board reflected the national agenda as set out in 'A Healthier Wales'. In particular, he welcomed the emphasis within the agenda on quality and referred to the papers on the Leadership Strategy for Health and Social Care together with the update on Urgent Primary Care Out of Hours.</p>	



	<p>The North Wales stakeholder event had been a good opportunity to meet a wide variety of stakeholders together with representatives from education and social services.</p> <p>The Chair commented upon the forthcoming first anniversary of HEIW and welcomed the good progress that had been made over the last year. He thanked the Board for their support during this period. The Chair also thanked HEIW staff and said that he looked forward with confidence to what HEIW will achieve in the future.</p>	
<b>Resolved</b>	That Chair's report be <b>noted</b> .	
<b>2609/2.2</b>	<b>Chief Executive's Report</b>	
	<p>The Chief Executive's written report was <b>received</b>.</p> <p>In presenting the report the Alex Howells highlighted the consultation on the Workforce Strategy for Health and Social Care (Workforce Strategy). It was confirmed that 170 responses had been received. The challenge now was to incorporate the responses into the final Workforce Strategy. She stated the Leadership Strategy was a key component of the Workforce Strategy and that there was now an increased focus on this area.</p> <p>It was confirmed that significant progress has been made in respect of the development of HEIW's Integrated Medium Term Plan (IMTP). The development of the IMTP had benefitted from a successful meeting of the extended senior leadership team. A further update on progress with drafting of the IMTP will be presented at the October Board Development Session with the aim of obtaining final approval at December Board.</p> <p>It was reported that HEIW's first Integrated Performance Report was on the September Board agenda. The Performance Report had been considered at the HEIW's first Quality and Delivery Meeting with Welsh Government. Welsh Government have indicated that the Performance Report will form a key basis for these meetings in future.</p> <p>It was highlighted that HEIW is heavily involved in assisting with workforce planning in respect of major trauma.</p> <p>The Board considered HEIW's role in supporting the NHS' winter plan.</p>	
<b>Resolved</b>	<p>That:</p> <ul style="list-style-type: none"> <li>- a paper on the different pieces of work undertaken by HEIW in respect of winter planning be presented at November Board;</li> <li>- the Chief Executive's report be <b>noted</b>.</li> </ul>	<b>AH</b>

<b>2609/3</b>	<b>STRATEGIC ITEMS</b>	
<b>2609/3.1</b>	<b>Update on Leadership Strategy for Health and Social Care</b>	
	<p>The Board received a written update in respect of the development of a Leadership Strategy for Health and Social Care.</p> <p>In presenting the update Julie Rogers highlighted the importance of the collective and compassionate approach outlined within the Leadership Strategy. The Leadership Strategy would emphasise a flexible approach which balanced enabling local initiatives with national alignment. It was confirmed that Welsh Government and the NHS has asked for work in respect of succession planning to be accelerated.</p> <p>In discussing the Leadership Programme the Board highlighted the following as areas for further consideration within the strategy: the need for further fertilisation between different sectors; the need to flag proper resourcing at WG level; that the NHS need to be more open and outward looking in terms of best practice; that the leadership potential of both public and patients needs to be recognised; that the Leadership Strategy explain how the NHS will enable the accreditation of prior learning and experience against leadership and management competences - including exploring a kitemark approach to accrediting leadership programmes.</p>	
<b>Resolved</b>	<p>That:</p> <ul style="list-style-type: none"> <li>- it was <b>agreed</b> to give further consideration within the Leadership Strategy to the areas highlighted in the above Board discussion;</li> <li>- the progress made to date on the leadership and succession planning programmes (which is objective six within the HEIW Annual Plan 2019/ 20) be <b>noted</b>.</li> </ul>	<b>JR</b>
<b>2609/3.2</b>	<b>Urgent Primary Care Out of Hours – update on workforce matters</b>	
	<p>The paper outlining the update in respect of Urgent Primary Care Out of Hours was <b>received</b>.</p> <p>In presenting the paper Alex Howells confirmed that this update followed on from the improvement story on Primary Care received at July Board.</p> <p>It was confirmed that workforce challenges in urgent primary care services have been increasing over recent years and have impacted on the wider unscheduled care system. Given this a workforce subgroup to support a series of workforce and education developments to support urgent primary care services was formed.</p>	

	<p>A number of the lessons learnt as a part of this process are deemed transferable for other areas of the NHS which currently have difficulty recruiting.</p> <p>It was confirmed that there would be an update on primary care at the October Board Development Session</p>	
<b>Resolved</b>	<p>That:</p> <ul style="list-style-type: none"> <li>- the progress and developments made in supporting urgent out of hours primary care services be <b>noted</b>;</li> <li>- it was <b>agreed</b> to receive an update in the Autumn on HEIW's internal work and alignment to the national work on primary care services for NHS Wales.</li> </ul>	<b>AH</b>
<b>2609/3.3</b>	<b>Update on IMTP Development</b>	
	<p>The Board received a paper providing an update on the Interim Medium Term Plan (IMTP).</p> <p>In presenting the paper Julie Rogers highlighted the work already undertaken in the development of the IMTP including engagement with staff, the stakeholder event in Llangollen and PESTLE analysis. A further stakeholder event is to be held in South Wales. She confirmed that drafting the IMTP will commence in the next two weeks with the aim of obtaining Board approval in December.</p> <p>The Board considered the challenge of creating an HEIW IMTP that is aligned to the workforce requirements of the Health Boards and Trusts. It was noted that this process will be supported by the adoption of the proposed Workforce Strategy by Health Boards and Trusts enabling a more consistent approach. The importance of HEIW successfully developing a workforce plan that responded to the needs of Wales' Health Board and Trust was emphasised and described as a fundamental component for HEIW.</p> <p>The Chair stated that, should the Executive Team determine that additional resource be required to develop the IMTP, they be encouraged to present their requirements to the Board.</p> <p>The Board welcomed the update on the IMTP which was deemed to be a good start.</p>	
<b>Resolved</b>	<p>That:</p> <ul style="list-style-type: none"> <li>- the progress undertaken to date and planned work to ensure delivery of the IMTP by the end of December 2019 be <b>noted</b>;</li> <li>- planning guidance from Welsh government in respect of the IMTP be shared with Board members.</li> </ul>	<b>AH</b>
<b>2609/3.4</b>	<b>Foundation Trainees Business Case</b>	
	The Board received a paper requesting the approval of a business case for expanding and reforming the Foundation Phase training.	

	<p>In presenting that paper Pushpinder Mangat highlighted that the proposed expansion was needed to ensure it was aligned with the natural variation in numbers of Welsh Medical students entering foundation posts and the expansion of Medical student numbers. The proposed expansion would also bring Wales' in line with similar expansion undertaken by the other nations within the UK.</p> <p>It was further emphasised that a positive experience within the Foundation phase was likely to assist with retention of Doctors within Wales.</p> <p>The business case was considered and discussed by the Board. Consideration was given to ensuring that there was sufficient focus on maintaining the quality of training as the number of Foundation places are expanded. It was clarified that final approval of the business case will be required by Welsh Government. Discussions to secure the additional funding over a number of years were already underway.</p>	
<b>Resolved</b>	<p>That:</p> <ul style="list-style-type: none"> <li>- it was agreed to approve option four within the business case for further discussion with WG;</li> <li>- It was agreed that the Education Commissioning and Quality Committee be asked to focus upon the quality of the training in respect of the increased number of foundation spaces to ensure that this does not negatively impact standards.</li> </ul>	<p><b>PM</b></p> <p><b>PM</b></p>
<b>2609/4</b>	<b>GOVERNANCE, PERFORMANCE AND ASSURANCE</b>	
<b>2609/4.1</b>	<b>Finance Report</b>	
	<p>The written Finance Report at month five was received by the Board.</p> <p>In presenting the Finance Report Rhiannon Becket highlighted that there was an underspend of £435k at month five. The deep dive undertaken at month three also anticipated a full year underspend.</p> <p>It was explained that a material element of the underspend related to students undertaking part time courses rather than the full time equivalent. While the relative cost of a part time course (versus full time) represented a saving this year, it was crucial that Welsh Government recognise that any such saving would result in additional year(s) and deferred costs at the end of such a course.</p> <p>It was confirmed that the deep dive process had been deemed to be a successful process and a rich source of information. The process will be repeated on a quarterly basis.</p> <p>The Board considered the reasons which may cause a delay in the process for processing non-NHS Creditors. It was confirmed the</p>	

	<p>process was subject to regular review and the year to date figure exceeded the 95% target rate.</p> <p>It was clarified that the £100k allocated against capital spending for the HEIW's was for the first annual budget and that this sum was deemed to be negotiable based on the content of the approved IMTP.</p>	
<b>Resolved</b>	That the finance report at month five was <b>noted</b> .	
<b>2609/4.2</b>	<b>Performance Report</b>	
	<p>The written report on the Performance Report was received by the Board.</p> <p>In presenting the Performance Report Julie Rogers highlighted that:</p> <ul style="list-style-type: none"> <li>- this was the first Performance Report and covered the period from April to June 2019 and the aim was for the content to develop and become more comprehensive over time;</li> <li>- the Performance Report contains four main sections: Projects and Programmes, Education and training Activity, Quality and Outcomes and Corporate Performance;</li> <li>- The Section on Project and Programmes highlighted three Red Risks .</li> </ul> <p>The Performance report was welcomed by the Board and described as a good start. The Board considered how best to share the Performance Report data with other health organisations.</p> <p>It was clarified that the Performance Report will be a useful tool for measuring both training and broader issues relating to quality.</p> <p>It was confirmed that detailed comments by Board Members in respect of the Performance report be shared after the meeting.</p>	
<b>Resolved</b>	<p>That:</p> <ul style="list-style-type: none"> <li>- it was <b>agreed</b> that Board members be encouraged to provide further recommendations and additions to the Performance Report following the board meeting;</li> <li>- the Board <b>note</b> the process undertaken in developing the Performance Report;</li> <li>- it was <b>agreed</b> that further consideration be given to presenting elements of the Performance Report to stakeholders.</li> </ul>	<p><b>All</b></p> <p><b>JR</b></p>
<b>2609/4.3</b>	<b>Board Assurance Framework</b>	
	<p>The written report on the Board Assurance Framework (BAF) was received by the Board.</p> <p>In presenting the BAF Dafydd Bebb confirmed that the drafting the BAF has been an iterative process where it previously been</p>	

	<p>considered by both the Board and the Audit and Assurance Committee.</p> <p>Tina Donnelly requested that the Risk Register, which forms a part of the BAF, be amended to include the date upon which a risk is inserted.</p>	
<b>Resolved</b>	<p>That:</p> <ul style="list-style-type: none"> <li>- the Board Assurance Framework be approved;</li> <li>- the Risk Register be amended to include the date upon which a risk is entered onto the register.</li> </ul>	<b>DB</b>
<b>2609/4.4</b>	<b>Corporate Risk Register</b>	
	<p>The written report on the Risk Register was received by the Board.</p> <p>In presenting the report Dafydd Bebb highlighted that there were 26 risk on the register, no red, 23 oranges and three green.</p> <p>It was confirmed that three reds had been downgraded to orange during September being:</p> <ul style="list-style-type: none"> <li>- Risk 6, on engagement with Welsh Government as the meetings with Welsh Government on Quality and Delivery meetings had commenced;</li> <li>- Risk 23, due to the progress made in procuring the Eduroam software;</li> <li>- Risk 26, due to the progress made over the summer in achieving the overall target of recruiting 80 District Nurses.</li> </ul> <p>The Board considered the process for removing Green Risks from the Risk register.</p>	
<b>Resolved</b>	<p>That:</p> <ul style="list-style-type: none"> <li>- Board members be provided with an update by email on the anticipated role out date for Eduroam;</li> <li>- the removal of a Green Risk from the Register shall require the prior approval of the Audit and Assurance Committee;</li> <li>- the Corporate Risk Register be <b>noted</b> for <b>assurance</b>.</li> </ul>	<b>PM</b> <b>DB</b>
<b>2609/4.5</b>	<b>Future Ways of Working – Education, Commissioning and Quality Committee</b>	
	<p>The Board received the written paper on the Future Ways of Working.</p> <p>In presenting the paper Ruth Hall highlighted that the Future ways of Working had been considered in detail at the Board Development Session in August. It was clarified that the paper and its recommendations reflected the deliberations made at the Board Development Session.</p> <p>She confirmed that Board approval was required for the recommendations within the paper.</p>	

	The recommendations were considered by the Board.	
<b>Resolved</b>	<p>It was agreed that:</p> <ul style="list-style-type: none"> <li>- future ways of working as detailed in paragraph 2.1 of the report be approved;</li> <li>- the Audit and Assurance Committee be directed to consider the Standing Orders amended to incorporate the Future Ways of Working, such consideration to include the relationship of the committee with the Education Commissioning and Quality Committee;</li> <li>- that the Education Commissioning and Quality Committee be directed to: <ul style="list-style-type: none"> <li>consider the amendments to its own terms of reference;</li> <li>consider the terms of reference for an internal multi-professional education group and for an external integrated group to advise on education and training priorities;</li> </ul> </li> <li>- that the Future Ways of Working be subject to review in 12 months.</li> </ul>	<p><b>DB</b></p> <p><b>DB</b></p> <p><b>DB</b></p>
<b>2609/4.6</b>	<b>Update on Welsh Language Policy</b>	
	<p>The Board received the written paper providing an update on the Welsh Language Policy (WL Policy).</p> <p>In presenting the report Dafydd Bebb reported the progress made in respect of the implementation of the WL Policy. He highlighted the adoption of bi-lingual covering papers for open meetings, instantaneous translation and that four of today's paper were presented in Welsh.</p> <p>It was confirmed that HEIW will work with both the Welsh Language Commissioner and Welsh Government to ensure that the most appropriate standards are applied to HEIW.</p>	
<b>Resolved</b>	It was agreed to note the report for <b>information</b> .	
<b>2609/4.7.1</b>	<p><b>Key Issue Report - Audit and Assurance Committee held on 15 July 2019</b></p> <p>The Board received the Key Issue Report .</p> <p>In presenting the report Gill Lewis highlighted that additional work needed to be undertaken by the Committee in respect of Declaration of Interest. She also confirmed that recommendation 8 of the WAO Management letter had only been partially accepted as a full review was to be undertaken in relation to the cases identified.</p>	

**Agenda item: [1.5]**

	The Chair confirmed that it was intended to propose Gill Lewis as the Deputy Independent Member of the Education Commissioning and Quality Committee at November Board.	
<b>Resolved</b>	<p>That:</p> <ul style="list-style-type: none"> <li>- the content of the report be noted for information;</li> <li>- the Audit and Assurance Committee look further into the declaration of interest area;</li> <li>- HEIW's Risk Appetite be considered at the board development session in December with a view to obtaining final approval on the matter at January Board;</li> <li>- the Board confirm the following appointments to the Audit and Assurance Committee:</li> </ul> <p>Gill Lewis, John Hill- Tout and Ruth Hall as members for a further period of one year;  Gill Lewis as Chair for a further period of one year;  John Hill Tout as Vice chair for a further period of one year.</p>	
<b>2609/4.8</b>	<b>In-Committee Decisions</b>	
<b>Resolved</b>	A report outlining matters reported In-Committee at the July 2019 Board meeting was <b>received</b> and <b>noted</b> .	
<b>PART 5</b>	<b>FOR INFORMATION</b>	
<b>2609/5.1.1</b>	Update on Welsh Government Document Schedules	
<b>Resolved</b>	It was agreed that the update be <b>noted</b> for <b>information</b> .	
<b>2609/6</b>	<b>OTHER MATTERS</b>	
<b>2609/6.1</b>	<b>Any other urgent business</b>	
	There were none.	
<b>2609/5.2</b>	<b>Closed</b>	
	There being no other urgent business for the open session the meeting moved into the closed session	

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Chris Jones (Chairman)

.....

Date:



## HEALTH EDUCATION AND IMPROVEMENT WALES

### ACTION LOG OPEN SESSION

26 SEPTEMBER 2019

PART 1	ACTION	OWNER	DEADLINE/UPDATE
1.4	<p>Improvement Story – All Wales Training Agreement.</p> <p>It was agreed that opportunities for further communications highlighting the success of the all Wales Training Agreement be kept under review.</p>	JR	Ongoing.
1.5	<p>To receive and confirm the minutes of the Annual General Meeting held on 18 July 2019</p> <p>The minutes were approved subject to the following amendments:</p> <p>At page 1. Insert new paragraph entitled “apologies for absence” at AGM 1807/1.2:</p> <p>“It was noted that apologies had been received from Alex Howells (Chief Executive) and Eifion Williams (Interim Director of Finance).”</p> <p>At page 2, minute AGM 1807/2.1, second paragraph, first sentence, that a capital ‘W’ be inserted for the word ‘Welsh’.</p> <p>At page 3, minute AGM 1807 2.4, fifth paragraph that a capital ‘W’ be inserted for both references to the word ‘Welsh’.</p>	DB	Completed.
1.7	<p>To Circulate Out Of Hours peer review report to board members.</p> <p>Optometry - Return on investment. It was agreed that Alex Howells and Ceri Phillips liaise with Alan Brace at Welsh Government on how best to represent</p>	<p>AH</p> <p>AH and CP</p>	<p>Completed.</p> <p>Meeting to be arranged in the New Year.</p>

	<p>value and return on investment within business cases.</p> <p>It was agreed that the paper on value methodology within business cases be presented at November Board. The paper also to consider the possibility of HEIW of creating an annual report identifying the added value inputted into the NHS system by HEIW.</p>	AH	Included within the Chief Executive's November Board Report.
2.2	It was agreed that the paper to coordinate the different pieces of work undertaken by HEIW in respect of winter planning be presented at November Board.	AH	Included within the Chief Executive's November Board Report.
3.1	Leadership Strategy for Health and Social Care you. It was agreed to explore a kitemark approach to accrediting leadership programmes.	JR	Will be considered as part of the 2020-21 objectives.
3.2	Urgent Primary Care Out of Hours. It was agreed the Board shall receive an update in the autumn on HEIW's internal work and alignment to the national work on primary care services for NHS Wales.	AH	Completed. Presented at the October Board Development Session.
3.3	IMTP Development. That planning guidance from Welsh government in respect of the IMTP be shared with Board members.	JR	Completed.
3.4	<p>Foundation Trainees Business Case. It was agreed to approve option four within the business case.</p> <p>It was agreed that the Education Committee be asked to focus upon the quality of the training in respect of the increased number of foundation spaces to ensure that this does not negatively impact standards.</p>	<p>PM</p> <p>DB</p>	<p>Promptly.</p> <p>Completed. On the FWP for the next meeting of the Education Commissioning and Quality Committee.</p>
4.2	<p>Performance Report. It was agreed that board members be encouraged provide further recommendations and additions to the performance report following the board meeting.</p> <p>It was agreed that further consideration be given to presenting elements of the performance report to stakeholders.</p>	<p>All</p> <p>JR</p>	<p>Ongoing.</p> <p>Ongoing.</p>
4.3	It was agreed that the Board Assurance Framework be approved.	DB	Completed.

	It was agreed that the risk register be amended to include the date upon which a risk is entered onto the register.	DB	Promptly.
4.4	<p>It was agreed that board members be provided with an update by email on the anticipated role update for Eduroam.</p> <p>It was further agreed that the removal of a green risk from the register shall require the prior approval of the Audit and Assurance Committee.</p>	<p>PM</p> <p>DB</p>	<p>Good progress has been made. Verbal update to be provided at Board.</p> <p>Completed. On the agenda of the Audit and Assurance Committee on 22 November.</p>
4.5	<p>It was agreed that:</p> <ul style="list-style-type: none"> <li>• Future ways of working as detailed in paragraph 2.1 of the report be approved;</li> <li>• the Audit and Assurance Committee be directed to consider the attached standing orders which have been amended to incorporate the Future Ways of Working, such consideration to include the relationship of the committee with the Education Commissioning and Quality Committee ;</li> <li>• that the Education Commissioning and Quality Committee be directed to: <ul style="list-style-type: none"> <li>• consider the amendments to its own terms of reference;</li> <li>• consider the terms of reference for an internal multi-professional education group and for an external integrated group to advise on education and training priorities</li> </ul> </li> <li>• the Future Ways of Working be subject to review in 12 months.</li> </ul>	<p>DB</p> <p>DB</p> <p>DB</p> <p>DB</p>	<p>Completed.</p> <p>Completed. On the agenda of the Audit and Assurance Committee on 22 November.</p> <p>Completed.</p> <p>Terms of reference considered at the meeting of the Education Commission and Quality Committee on 21 October.</p> <p>Completed. Added to the Board FWP for September 2020.</p>
4.7	It was agreed that the Audit and Assurance Committee look further into the declaration of interest area to ensure	DB	Completed. On the agenda of the Audit and Assurance

	<p>it is more transparent within the organisation.</p> <p>It was agreed that HEIW's risk appetite be considered at the board development session in December with a view to obtaining final approval on the matter at January board.</p> <p>It was agreed that the Board confirm the following appointments:</p> <ul style="list-style-type: none"> <li>• Gill Lewis, John Hill- Tout and Ruth Hall as members of the Audit and Assurance Committee for a further period of one year;</li> <li>• Gill Lewis as Chair of the Audit and Assurance Committee for a further period of one year;</li> <li>• John Hill Tout as Vice chair of the Audit and Assurance Committee for a further period of one year.</li> </ul> <p>It was confirmed that subject to the November Board to enable a deputy independent member of education commissioning and quality committee that Gill Lewis would be the nominee for this role.</p>	<p>DB</p> <p>DB</p> <p>DB</p>	<p>Committee for 22 November.</p> <p>Completed. Included within the FWP for December BDS.</p> <p>Completed.</p> <p>On the agenda for November Board.</p>
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Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

<b>Meeting Date</b>	<b>28 November 2019</b>	<b>Agenda Item</b>	<b>2.1</b>
<b>Report Title</b>	<b>Chair's Report</b>		
<b>Report Author</b>	Dr Chris Jones, Chairman		
<b>Report Sponsor</b>	Dr Chris Jones, Chairman		
<b>Presented by</b>	Dr Chris Jones, Chairman		
<b>Freedom of information</b>	Open		
<b>Specific action required</b>	This report is for information only.		

## **Chair's Report**

### **1. PURPOSE OF REPORT**

The purpose of this report is to update the Board on the range of activities and meetings undertaken by the HEIW Chairman, Vice Chair and Chairs of the Audit & Assurance Committee and Education, Commissioning & Quality Committee since the last Board meeting.

### **2. CHAIRMAN'S ACTIVITIES AND MEETINGS**

I have completed the round of Annual reviews with Independent Members and provided written feedback. Together with Board Members, I attended a most excellent 1<sup>st</sup> Birthday HEIW event with our staff. I attended the all Wales NHS Chairs group – discussions around board governance and Independent Member recruitment, appointment and induction. Alex Howells, Chief Executive gave an excellent update on the Workforce Strategy and Leadership Strategy – there was much interest, lively debate and support

I attended a variety of events and conferences including:-

- Launch of New Health and Social Care Qualifications – fabulous work with partners from Social Care Wales and Qualifications Wales
- All Wales Public Service Leaders' Summit, - networking +++ . Inspirational key note speech of leadership from Mark Drakeford FM
- Major Trauma network briefing – see today's agenda
- 4th National Primary Care Conference – emerging opportunities for workforce planning, education and training inputs from HEIW
- CIPFA Conference- a cross Public sector senior finance leaders conference – presented on our Work force strategy and Leadership
- Health Science, Allied Health Professionals and Pharmacy Conference and Awards 2019 – Chaired the afternoon session and awards
- Students and Parents evening Coleg y Cymoedd - really interesting opportunities to align our recruitment and training functions

I have held a series of meetings and attended a range of HEIW events including

- HEIW South Wales Stakeholder Event, Cardiff City Stadium,
- 1:1 with Strategic Programme Lead – Global Health Education,
- HEIW Leadership Conference,
- Meeting with Joanna Dundon for chair's briefing on NHS Wales e-Library for Health
- Introductory Meeting with Kate Bennett, Chair of DPIA re Welsh Asylum Seeker & Doctor Scheme,
- SAS Doctors and Dentists Conference,
- Discussions re VR NHS Recruitment,
- Met with Students at Glyndwr University,
- meeting with Internal Audit,

**Out of Hours Urgent Primary Care Peer Review** – for the second year I have been chairing the reviews and this has proven to be a valuable opportunity to meet the staff and managers working at the sharp end. The emergence of a multi professional team approach

### **3. JOHN HILL-TOUT, VICE CHAIR REPORT**

I attended the All Wales Vice Chairs meeting on the 6<sup>th</sup> November 2019. We received a presentation from Dr C Norton, Consultant Paediatrician, on the Development Strategy for Neurodevelopmental Care, which recognises that affected children and young people require a complex range of care from many agencies and professions.

We also had a discussion with Jo Jordon, the National Programme Director for Mental Health. She is in discussion with HEIW to assist each of the 4 specialty sub-groups to address their workforce plans. Discussions are also taking place with Welsh Government in relation to HEIW developing a Workforce Plan to support the Mental Health programme.

Vice Chairs also discussed Mid-Year performance indicators.

On 7<sup>th</sup> November 2019 I attended, with the Chairman, the excellent National Primary Care Conference, which offered a real insight into the work of Primary Care Clusters across Wales.

Finally, on the 13<sup>th</sup> November 2019, I had the pleasure of attending, with other colleagues, the RCN Nurse of the Year Awards at City Hall, Cardiff. HEIW sponsored the Nursing Student Award. The evening was a wonderful celebration of nursing practice in Wales

### **4. GILL LEWIS, CHAIR OF THE AUDIT AND ASSURANCE COMMITTEE**

Gill Lewis, as chair of the Audit & Assurance Committee, attended the meeting of the All Wales Audit Committee Chairs meeting on Monday 18<sup>th</sup> November 2019.

### **5. RUTH HALL, CHAIR OF THE EDUCATION COMMISSIONING AND QUALITY COMMITTEE**

Ruth Hall gave a HEIW-based presentation to Rural Health & Care Wales' annual conference on 6<sup>th</sup> November 2019, in Builth Wells, on "Skills at the heart of a Healthier Wales'. The 2-day event on rural resilience in health and care, was well attended (200), with representation from Wales and wider, including Australia. Tom Lawson contributed too.

Day 2, chaired by Vivienne Harpwood, started with a plenary mindfulness session led by a GP from Machynlleth, which was impressive. A GP from Wrexham later spoke about her practice's work to support homeless people in Wrexham, which has attracted a lot of interest including political. There was a wide choice of breakout topics and a poster display. Ruth Hall's impression overall was of big current opportunity and willingness to change in rural areas. A Healthier Wales

plays strongly to the rural agenda and its challenges. Balancing access to education, training and career opportunities across Wales' geography will bring dividends to the whole of Wales, not just locally. There's much HEIW can do to help and support this, with some work already in hand.

Ruth Hall has also attended an interactive workshop event at Cardiff University, run by Wales Centre for Public Policy, on 'Developing a Strategic Approach to Procurement', and took part in a week-long residential Welsh course at Nant Gwrtheyrn.

## **6 Chairman's Meetings: 26<sup>th</sup> September – 27<sup>th</sup> November 2019**

<b>Date</b>	<b>Meeting Title</b>
27/09/19	Launch of New Health and Social Care Qualifications
01/10/19	Meeting with Vice Chancellor of Swansea University (CEO in attendance) HEIW First Year Celebration Event
03/10/19	European Advisory Group
08/10/19	Resource Allocation Review – Technical Advisory Group
09/10/19	HEIW South Wales Stakeholder Event, Cardiff City Stadium
10-11/10/19	All Wales Public Service Leaders' Summit
14/10/19	1:1 with Strategic Programme Lead – Global Health Education
17/10/19	Out of hours urgent primary care Peer Review Discussions
21/10/19	Leadership Conference
22/10/19	Hywel Dda out of hours urgent primary care peer review
23/10/19	Joint Board Briefing – Major Trauma Network Development Meeting with Joanna Dundon for chair's briefing on NHS Wales e-Library for Health
24/10/19	European Advisory Group Telecall NHS Wales Chairs Peer Group
30/10/19	All Wales IPFR Panel
31/10/19	Introductory Meeting with Kate Bennett, Chair of DPIA re Welsh Asylum Seeker & Doctor Scheme Board Development Session
04/11/19	Visit from the Children's Commissioner
06/11/19	Cardiff & Vale out of hours urgent primary care Peer Review Visit
07/11/19	4 <sup>th</sup> National Primary Care Conference SAS Doctors and Dentists Conference Discussions re VR NHS Recruitment
13-14/11/19	Betsi Cadwallader out of hours urgent primary care peer review visit
14/11/19	Met with Students at Glyndwr University Chairman's meeting with Internal Audit
19/11/19	1:1 with Board Secretary
20/11/19	Powys out of hours urgent primary care peer review visit
21/11/19	CIPFA Conference
25/11/19	1:1 with Board Secretary
26/11/19	NHS Wales Chairs Peer Group Health Science, Allied Health Professionals and Pharmacy Conference and Awards 2019



Governance and Assurance				
<b>Link to corporate objectives</b> (please ✓)	As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand	Building a sustainable and flexible health and care workforce for the future.	With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.	Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
	✓	✓	✓	✓
	Improving opportunities for use of technology and digitalisation in the delivery of education and care.	Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales	Demonstrating value from investment in the workforce and the organisation.	
	✓	✓	✓	
<b>Quality, Safety and Patient Experience</b>				
There are no direct quality, patient safety and experience issues relating to this report.				
<b>Financial Implications</b>				
There are no direct financial implications of this report				
<b>Legal Implications (including equality and diversity assessment)</b>				
There are no direct legal implications of this report.				
<b>Staffing Implications</b>				
There are no direct staffing implications of this report.				
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>				
The range of activities outlined in the report will contribute to HEIW's approach to the Well Being of Future Generations Act. However, the contributions will be specific to each of the individual areas covered in overview in this report.				
<b>Report History</b>	N/A			
<b>Appendices</b>	N/A			



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Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

<b>Meeting Date</b>	<b>28 November 2019</b>	<b>Agenda Item</b>	<b>2.2</b>
<b>Report Title</b>	<b>Chief Executive's Report</b>		
<b>Report Author</b>	Alex Howells, Chief Executive		
<b>Report Sponsor</b>	Alex Howells, Chief Executive		
<b>Presented by</b>	Alex Howells, Chief Executive		
<b>Freedom of information</b>	Open		
<b>Specific action required</b>	This report is for information only.		

## **CHIEF EXECUTIVE'S REPORT – NOVEMBER 2019**

### **1. PURPOSE OF REPORT**

The purpose of this report is to update the Board on key activities undertaken since the last Board meeting and to set the context for a number of issues that feature more prominently within reports of Executive Directors as part of the Board's business.

### **2. KEY ACTIVITIES**

- **Workforce Strategy for Health and Social Care**

The Board received an update on progress in relation to the workforce strategy at the Board Development Session in October. The draft strategy will be considered by Social Care Wales on 16 December and in formal session at our next meeting on 19 December. The strategy will then be submitted to Welsh Government. Engagement work continues, recognising the need to continue to maintain attention on this and to start to consider implementation. This has included the Wales Partnership Forum and a specific engagement session with Education Sector partners. We also attended a recent Health, Social Services and Sport Committee along with colleagues from Social Care Wales.

- **HPMA Award**

We are delighted to report that our work on values and behaviours has been recognised with an award from the HPMA in the category of 'Improvement in Colleague Engagement and Experience.

- **Integrated Medium Term Plan**

The Board has been receiving monthly updates on the IMTP development and an update is included later on the agenda. We will be able to feedback from our first meeting with Welsh Government on 25 November. A first draft of the IMTP documentation including a draft financial framework will be on the agenda for the December Board Development Session.

- **Mid-Year Review of Annual Plan**

The Board will be aware that the Executives recently attending a Joint Executive Team meeting with WG to review progress at the mid year point. There is a paper on the agenda providing a summary of progress against our Annual Plan at this point.

- **Performance**

Although the Board is not due to have a formal performance report until January 2020 I wanted to update Board Members on fill rates for the education programmes we commission. For Postgraduate Medical and Dental Education fill rates are as follows:

<b>Dental</b>	<b>Advertised</b>	<b>Filled</b>	<b>%</b>
Foundation	76	69	91.00
Core	70	68	97.00
Specialty	22	22	100.00
<b>TOTAL</b>	<b>166</b>	<b>157</b>	<b>95</b>

For Health Professional Pre registration programmes we anticipate that fill rates will be a minimum of 95% when the final position is validated. This will equate to at least 2704 places. This compares with 2443 places filled last year, which represented a fill rate of 94% based on the previous education commissioning levels.

We will be considering detailed reports on performance against our education commissioning plan at Executive Team in the next few weeks in order to inform a paper for the Education Commissioning and Quality Committee in January.

- **Education and Training Commissioning Plan 20/21**

Linked to the above the Minister has now announced that the plan we submitted for 2020/21 has been approved, representing an increased investment of £16.4m. This is excellent news and continues the trend in increased investment we have driven over the last 6 years.

- **Major Trauma Network**

The Board will be aware that NHS organisations have been working together via the NHS Collaborative to develop a Major Trauma Network for South Wales, to secure better outcomes for patients. A Major Trauma Network Board is overseeing this and the Medical Director is our representative on this. A business case has been developed to target investment at the initial work needed to establish the Network, and this is being submitted to all Boards in November. Although we are not required to approve the business case is it included on the agenda today along with a paper summarising the workforce implications that require our input.

- **Winter Planning**

In terms of specific support we have a number of initiatives that are supporting winter pressures, including:

- The Urgent Primary Care Out of Hours Website [www.urgentprimarycare.heiw.wales](http://www.urgentprimarycare.heiw.wales) which is designed to support recruitment, attraction and induction for staff across a range of professional groups who are considering working in the OOH service. A month long digital campaign has recently been completed.
- Pharmacy – We are training further cohorts of pharmacists in managing simple ailments such as coughs and colds. This includes Point of Care testing and prescribing symptom relief treatment or antibiotics when appropriate.
- The Medical Director has reissued guidance to the NHS on how to manage the implications of winter pressures on medical trainees.

- **Improving Value**

It is clear from our first year of operation that HEIW needs to develop its capacity and expertise in developing investment proposals that demonstrate value at a system level. We have the potential to develop solutions to many workforce challenges affecting the NHS, but our approach needs to reflect the fact that the benefits and value from these are likely to be delivered in other organisations. With the support of Ceri Phillips, Independent Member, we are reviewing our business case process to capture this more valued based approach, and this will underpin the proposals that we include within the IMTP.

- **Optometry Postgraduate Education Business Case**

HEIW submitted a 'Developing Cluster Based Optometry Services - Commissioning of Postgraduate Modules' Business Case to Welsh Government. Confirmation has been received that the funding has been approved in support of the business case previously considered by the Board.

- **India**

HEIW accompanied a team from NHS Wales and BAPIO on a recruitment initiative to Dehli and Chennai in India. Recruitment was conducted over 4 days in total. HEIW was able to provide support with the administrative roles, interviewing candidates and generally supporting the overall process. There were many positives from this visit including the ability of BAPIO to facilitate connections with Health Care and Educational Institutions in India. There were areas where HEIW could contribute significantly in the future in terms of even better governance and process. There was a parallel visit from the Cabinet Secretary which added a positive political element to the recruitment visit.

- **SAS Doctor Conference**

2 SAS conferences are held each year. One in North Wales and one in the South. At this conference held in Cardiff, there were presentations from the Medical Director of HEIW, DCMO and the HEIW lead for Global Engagement and SAS doctor support. There are clear areas for improvement in relation to support structures, induction, lack of recognition of skills and lack of mentorship. It was clear that they were looking to HEIW for more support in a number of areas.

- **Training Programme Directors (TPD)**

Training Programme Directors (TPD) undertake a fundamental role in organising training attachments, ARCPs and rotations for our trainees. They provide a significant time commitment to this work and troubleshooting with difficulties that arise on a day to day basis. We are planning to standardise and professionalise the way that we engage with our TPDs. At present it is sometimes difficult to mandate the TPDs to prioritise HEIW work as many undertake this role in addition to their other duties. We have adopted a scaled

method of re-imbursement for their time based on the number of trainees that they support. This aligns us to practice across the UK.

- **Finance**

As noted in the finance report on the agenda we continue to work closely with Welsh Government to utilise the underspend we have, and to support investment in additional activities to deliver our Annual Plan

- **Risk Register**

The Corporate Risk Register (CRR) is HEIW's vehicle for providing assurance on the Board Assurance Framework as it is aligned with the objectives of the Annual Plan for 2019/20 together with the Remit letter. The CRR was considered at the Audit and Assurance Committee on 22 November. There are twenty nine risks on the Corporate Risk Register, of which the following two are red: Cyber Security and the terms for the repayment of the NHS Bursary.

### **3. RECOMMENDATION**

The Board is asked to note this report.

Governance and Assurance				
<b>Link to corporate objectives</b> (please ✓)	As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand	Building a sustainable and flexible health and care workforce for the future.	With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.	Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
	✓	✓	✓	✓
	Improving opportunities for use of technology and digitalisation in the delivery of education and care.	Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales	Demonstrating value from investment in the workforce and the organisation.	
	✓	✓	✓	
<b>Quality, Safety and Patient Experience</b>				
There are no direct quality, patient safety and experience issues relating to this report.				
<b>Financial Implications</b>				
There are no direct financial implications of this report				
<b>Legal Implications (including equality and diversity assessment)</b>				
There are no direct legal implications of this report.				
<b>Staffing Implications</b>				
There are no direct staffing implications of this report.				
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>				
The range of activities outlined in the report will contribute to HEIW's approach to the Well Being of Future Generations Act. However, the contributions will be specific to each of the individual areas covered in overview in this report.				
<b>Report History</b>	N/A			
<b>Appendices</b>	N/A			



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<b>Meeting Date</b>	<b>28 November 2019</b>	<b>Agenda Item</b>	<b>3.1</b>
<b>Report Title</b>	<b>Business Case for Major Trauma Network</b>		
<b>Report Author</b>	Pushpinder Mangat, Medical Director		
<b>Report Sponsor</b>	Pushpinder Mangat, Medical Director		
<b>Presented by</b>	Pushpinder Mangat, Medical Director		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	<p>This report is to inform the Board of HEIW of the Business Case that has been submitted simultaneously to all Health Boards across Wales regarding creation of the Major Trauma Centre (MTC) in Cardiff and the Major Trauma Network (MTN) across Wales.</p> <p>Included in this Cover paper is a summary of HEIW's involvement in the development of this business case.</p>		
<b>Key Issues</b>	<p>HEIW Input into:</p> <ul style="list-style-type: none"> <li>• Education Training Plan</li> <li>• MTN Workforce Group</li> <li>• Scrutiny of MTN requirements in IMTPs</li> </ul>		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
		✓	
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>note</b> this report</li> </ul>		



## **Business Case for Major Trauma Network**

### **1. INTRODUCTION**

This report is to inform the Board of HEIW of the Business Case that has been submitted simultaneously to all Health Boards across Wales regarding creation of the Major Trauma Centre (MTC) in Cardiff and the Major Trauma Network (MTN) across South Wales, West Wales and South Powys.

### **2. BACKGROUND**

In March 2018, each of the six health boards serving the populations of South Wales, West Wales and South Powys formally agreed to recommendations for the development of a Major Trauma Network for the region, in line with the recommendations of an Independent Panel and following a period of formal consultation. North Wales and North Powys are served by the Trauma Centre in Stoke.

Since that time, a significant programme of work has been undertaken to develop the configuration of the network and the clinical and operational model. This has been enabled and supported through strong and effective clinical leadership and engagement and taking account of patient experiences.

Health Boards are now being asked to approve the business case that has been developed to assess implications of the proposed service change.

### **3. ROLES FOR HEIW**

The development of the Major Trauma Network has implications for the size, shape and skills of the workforce across all aspects of the service – from the Major Trauma Centre itself to the rehabilitation services within the region. This has been informed through learning from experiences in England where Major Trauma Networks have existed for a number of years. The proposed clinical model will require significant additional workforce as described in the cover paper (section 5). There will also be a need for careful workforce planning of roles that cross the network.

The Medical Director is a member of the Major Trauma Network Board meetings and other associated meetings and functions and the Deputy Director of Workforce and OD is a member of the MTN Workforce Group. This has enabled us to ensure that the needs of the MTN are being included in the IMTPs of the Health Boards. These need to include future multi-professional training requirements and numbers that HEIW will need to consider in its commissioning processes.

An analysis of the skills gap across a range of professional groups is being undertaken to assist in identifying other training needs which may benefit from

HEIW support. Examples include Advanced Practice in Trauma management and Masters Modules.

Additional training needs for paramedic staff are currently being identified.

Specific questions about the need for Advanced Trauma Life Support courses (as described in the Surgical training curriculum) or accepting the more specific European Trauma Course and future need of plastic surgery trainees are the subject of ongoing discussion with the Medical Deanery.

An extra Trainee in Rehabilitation has been commissioned for 2020.

HEIW will have future roles in developing skills in the following essential aspects of Trauma Management:

- Trauma Triage
- Trauma Team working
- Trauma Team Leadership
- Damage Control Surgery
- Rehabilitation Skills

Additional desirable educational elements in the future will include:

- Prehospital Trauma
- Scribe Course
- Nursing Trauma Ward Course
- Paediatric Trauma
- Trauma Reception Airway Course
- T&O Course
- MedTRIM Course
- European Trauma Course
- Damage Control Orthopaedics
- Trauma Theatre Course

#### **4. GOVERNANCE AND RISK ISSUES**

Lack of Clarity on future workforce requirements of the MTC and MTN will remain an ongoing risk to HEIW during the phased implementation of the plan.

#### **5. FINANCIAL IMPLICATIONS**

There will be a need to invest in additional training for Medical and health professional staff which will be included in the education commissioning process.

#### **6. RECOMMENDATION**

That the Board notes the progress being made in developing the Major Trauma Network.

Governance and Assurance				
<b>Link to corporate objectives</b> (please ✓)	As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand	Building a sustainable and flexible health and care workforce for the future.	With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.	Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
	✓	✓		✓
	Improving opportunities for use of technology and digitalisation in the delivery of education and care.	Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales	Demonstrating value from investment in the workforce and the organisation.	
<b>Quality, Safety and Patient Experience</b>				
Workforce issues will have a direct impact Quality, Safety and Patient Experience				
<b>Financial Implications</b>				
No direct implications for HEIW				
<b>Legal Implications (including equality and diversity assessment)</b>				
No direct implications for HEIW				
<b>Staffing Implications</b>				
No direct implications for HEIW				
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>				
No direct implications for HEIW but successful implementation of the Major Trauma Network will have a significant impact on trauma outcomes.				
<b>Report History</b>	Discussed at Executive Team			
<b>Appendices</b>	Appendix 1 - Major Trauma Network Programme Business Case Cover Paper			



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# A Major Trauma Network for South Wales, West Wales and South Powys *Programme Business Case*

**Date:** 18/11/19

**Version:** 1.0 (Final)

## **Purpose:**

In March 2018, each of the six health boards serving the populations of South Wales, West Wales and South Powys formally agreed to recommendations for the development of a Major Trauma Network for the region, in line with the recommendations of an Independent Panel and following a period of formal consultation.

Since that time, a significant programme of work has been undertaken to develop the configuration of the network and the clinical and operational model. This has been enabled and supported through strong and effective clinical leadership and engagement, and taking account of patient experiences.

This work has culminated in the production of a Programme Business Case which describes the totality of the requirements for NHS Wales to establish the South Wales Trauma Network ('the network'), serving the population of South Wales, West Wales and South Powys. The case outlines the requirements for the network to become operational and, also, the trajectory of development over a five-year period.

Boards are asked to:

1. Receive and discuss the Programme Business Case for the network.
2. Note that there has been significant scrutiny of the case, including three formal Gateway Reviews and professional peer review by UK clinical experts.
3. Approve the overall network model described in the case (clinical, operational and governance), including the:
  - a. role of the Operational Delivery Network (ODN)

b. role of the health board, as a provider of respective component of service model.

4. Note the importance of the repatriation policy and the importance of the ODN having the authority to implement this, completion of which will form a critical activity in planning network implementation.
5. Note that there will be other business cases over the next two to three years to further develop the major trauma centre and trauma units.
6. Approve the content of the Programme Business Case, subject to confirmation of the NHS resource allocation for 2020/21, the IMTP prioritisation process, and point 7 below.
7. Note that final commissioning decisions on prehospital services, the major trauma centre, relevant specialist services and the ODN, will be taken at meetings of the Welsh Health Specialist Services Committee (WHSSC) and the Emergency Ambulance Services Committee (EASC).

## 1 Introduction

The Programme Business Case (PBC) describes the requirements for NHS Wales to establish the South Wales Trauma Network, serving the population of South Wales, West Wales and South Powys. The PBC outlines the requirements for the network to become operational and, also, the trajectory of development over a five-year period of implementation.

This PBC represents the culmination of significant work to develop the configuration of the network and the clinical and operational model. This has been enabled and supported through strong and effective clinical leadership and engagement, and taking account of patient experiences.

## 2 Background

In March 2018, each of the six health boards in the region formally agreed to recommendations for the development of a Major Trauma Network for South Wales, West Wales and South Powys, in line with the recommendations of an Independent Panel and following a period of formal consultation:

1. A major trauma network for South and West Wales and South Powys with a clinical governance infrastructure should be quickly developed.
2. The adults' and children's major trauma centres should be on the same site.
3. The major trauma centre (MTC) should be at University Hospital of Wales, Cardiff.
4. Morriston Hospital, Swansea, should become a large trauma unit (TU) and should have a lead role for the major trauma network.
5. A clear and realistic timetable for putting the trauma network in place should be set.

Since that time, a significant programme of work has been undertaken, overseen by a Trauma Network Board, which has led to the production of the PBC and initial preparations for implementation of the network.

## 3 Network Structure

The structure of the South Wales Trauma Network will be comprised of the following elements:

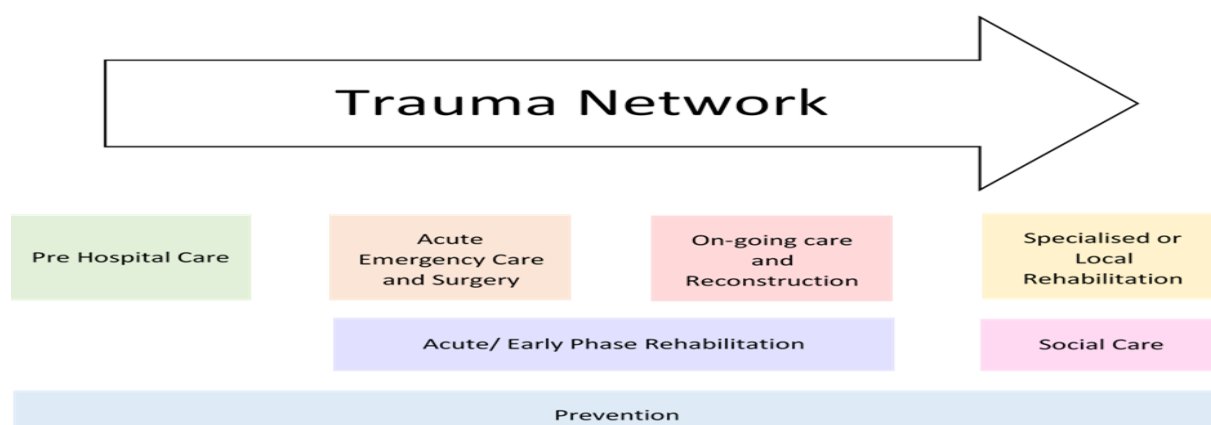
- An **Operational Delivery Network (ODN)**, to be hosted by Swansea Bay University Health Board, which will provide the management function for the network. It will be a collaboration between all providers of trauma care services in the region, and its governance arrangements will provide appropriate authority to ensure operational delivery.

- A **pre-hospital triage tool** will ensure major trauma patients are conveyed directly by the Welsh Ambulance Service (WAST) or the Emergency Medical Retrieval and Transfer Service Cymru (EMRTS), or other emergency providers, to the MTC or TUs.
- An **adults' and children's MTC at University Hospital of Wales (UHW)**, Cardiff. It will have access to all specialist services relevant to major trauma and take responsibility for the acute care of all major trauma patients in the region via an automatic acceptance policy and manage the transition of patients to rehabilitative care.
- An **adult and paediatric TU, with specialist services, at Morriston Hospital**, Swansea. It will provide specialist support to the MTC and provide specialist surgery for patients who do not have multiple injuries, for burns, plastic, spinal and cardiothoracic surgery.
- **Six adult and paediatric TUs** at the following locations:
  - UHW, Cardiff
  - Royal Gwent Hospital, Newport and Nevill Hall Hospital, Abergavenny (until the Grange University Hospital is fully operational, planned for April 2021, at which point it will become the single designated TU for Aneurin Bevan University Health Board)
  - Prince Charles Hospital, Merthyr Tydfil and Princess of Wales Hospital, Bridgend
  - Glangwili General Hospital, Carmarthen.

The TUs will provide care for injured patients and have systems in place to rapidly move the most severely injured patients to hospitals that can manage their injuries, in most cases the MTC. They will also receive patients back who require ongoing care in hospital.

- **Rural trauma facilities** at Bronglais General Hospital, Aberystwyth, and Withybush General Hospital, Haverfordwest, which will maintain the ability to assess and treat major trauma patients, given their unique geographical locations.
- A **Local Emergency Hospital** at Royal Glamorgan Hospital, Llantrisant. This hospital will not routinely receive acute trauma patients but, should this occur, it will ensure appropriate initial management and transfer to the MTC or nearest TU.

## 4 Clinical and Operational Model



Detailed work has been undertaken to develop the **clinical and operational model** for the network and to estimate changes in **patient flows**. There will be an increase of approximately 300 patients being treated per annum at the University Hospital of Wales due to its planned status as the MTC for the network (full details of estimated changes in patient flow across the network are provided in Chapter 4 of the PBC).

The planning work has led to the adoption of the NHS England quality indicators and service specification. Assessments have been undertaken to review current services against these indicators and the estimated changes in patient flows, which has informed the resource requirements for each component part of the network:

- **Pre-hospital services** (chapter 6) – Five indicators and investment required for new and additional journeys, additional training, establishment of a major trauma desk within the clinical contact centre, and for a transfer and discharge service. These requirements were endorsed by EASC in September 2019.
- **Major Trauma Centre** (chapter 7) – 52 indicators for adult services and 46 for children's services. 38 are currently not met, which form the basis for the required investment, five of which are not essential for 'Day 1' and implementation of which will be phased. Investment is sought for:
  - Emergency Department – quality of immediate response and stabilisation from 24/7 consultant trauma team lead, dedicated nursing and seven day paediatric trauma team lead until 10pm.
  - Theatres – additional theatre availability to improve timeliness of access to theatres.
  - Critical Care – additional capacity for predicted increase in demand.
  - Poly Trauma Unit – dedicated ward for acute admission and early targeted rehabilitation in readiness for discharge to local care.
  - Trauma and orthopaedics – additional surgical capacity to meet increased activity flow.



- Hyper acute rehabilitation service – to provide early rehabilitation plans for trauma patients with intensive rehabilitation needs.
- Specialist services – new local plastic surgery availability on site to deliver improved outcomes (through collaboration with Swansea Bay University Health Board).
- MTC directorate – senior leadership to drive improvements in rehabilitation, clinical practice, and audit and outcomes.
- **Trauma Units** (Chapter 8) – 26 indicators, many are already being met or could be met through the provision of network policies and internal re-organisation of resources. The initial focus for additional resources is on key enabling posts to improve clinical governance, data collection and patient flow. Further resources will be required to meet standards in Years 2 and 3. The TU at Morriston Hospital will have a role in providing specialist services support to the network. The PBC includes costs for locating up to four plastic surgeons at the MTC.
- **Operational Delivery Network** (chapter 5) – investment required to manage the network and coordinate operational delivery.

Essential to the effective operation of the network will be **patient repatriation**, that is arrangements for patients to return to a suitable local hospital as soon as the acute phase of their trauma care is completed. This will enable patients to continue their treatment closer to home, reduce impact on family and carers, and help provide capacity for the MTC to automatically accept new patients. An automatic acceptance policy is proposed for repatriation of major trauma patients from the MTC, but within the context of supporting interventions. The policy is under development, draft principles for which are:

1. Acceptance of the principle that origin health boards are responsible for their patients, irrespective of where they are being treated.
2. Automatic acceptance will be treated in the same way in both directions (i.e. to the MTC and back to the TU).
3. Any delay in repatriation will lead to a delay in automatically accepting new patients to the MTC.
4. Key features of an All Wales Repatriation Policy will be included.
5. The ODN is given operational authority within the escalation procedures for delayed transfers of care.

There will be an opportunity to pilot the policy before the network goes live.

**Rehabilitation services** are vital to the care of patients following major trauma. Major trauma practitioners and rehabilitation coordinators will be new roles in the health boards and will be vital in ensuring seamless care and key points of contact for patients returning from specialist care to a TU or the community. A consultant in rehabilitation medicine will operate in

each health board on a weekly basis, playing a key role in coordinating the team, managing complex patients and facilitating discharge. In Years 2 and 3, and subject to approval of additional business cases, there will be further enhancement of local and community based rehabilitation including core therapy roles as well as some specialist roles, providing both in-reach and out-reach services. For complex patients who return from specialist care (e.g. traumatic brain injury, spinal injuries), a training and education programme for medical and nursing staff will ensure the skill set of the rehabilitation multidisciplinary team at TUs will be identical to the skill set of that based at the MTC.

**Prevention** is an essential component of an inclusive major trauma system and the network will be able to make a significant contribution to injury prevention programmes through data sharing, research and educational initiatives. The ODN will be responsible for ensuring attention to prevention activities and the benefits realisation plan described in the PBC commits the network to the development of an injury prevention strategy, in partnership with Public Health Wales.

## 5 Network Workforce

The PBC identifies significant additional workforce requirements, the majority of which will work within the MTC. This requires collaboration within system-wide arrangements. The network has developed workforce principles to mitigate the risk of destabilising services as a consequence of establishing the MTC. These principles include shared job plans, portfolio roles and rotational posts across the network.

Staff Group	WTE
Medical Staff	43.3
Healthcare Support Workers	37.65
Registered Nurses	85
Allied Health Professionals, Scientists and Technicians etc.	27.5
Administrative and Clerical staff	15
<b>Total</b>	<b>208.45</b>

## 6 Revenue and Capital Costs

The totality of the revenue and capital costs included in the PBC is set out in the tables below. This has been informed by significant scrutiny of the network requirements through the programme arrangements and, also, independently through clinical peer review and Gateway Reviews. Learning lessons from the establishment of major trauma networks in other parts of the UK has been of particular importance. This has informed the scale of the MTC requirements and also the enabling requirements for the pre-hospital services, trauma units and the rehabilitation pathway. This will ensure the maximum benefit for the most seriously injured patients, the majority of whom will go to the MTC. There are some elements of the MTC

NHS Wales Health Collaborative	South Wales Major Trauma Network Programme Business Case
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case that are phased and, also, the resource requirements for the TUs reflect a more phased approach.

### Summary of revenue costs

	2019/20	2020/21	2021/22	2022/23	2023/24
	£000s	£000s	£000s	£000s	£000s
MTC	£922	£10,579	£11,222	£11,222	£11,222
Specialist Services	£150	£910	£910	£910	£910
Trauma Units	£287	£1,278	£1,278	£1,278	£1,278
Operational Delivery Network	£119	£496	£508	£513	£515
Pre-Hospital Care	£58	£1,201	£635	£640	£640
<b>Total</b>	<b>£1,536</b>	<b>£14,465</b>	<b>£14,553</b>	<b>£14,562</b>	<b>£14,564</b>

### Summary of health board and trust funding shares

(Reflects local Trauma Unit / Rehabilitation costs plus share of Major Trauma Centre, Specialist Services and WAST Pre-hospital care)

	2019/20	2020/21	2021/22	2022/23	2023/24
	£000s	£000s	£000s	£000s	£000s
Aneurin Bevan	£353	£3,549	£3,571	£3,573	£3,574
Cwm Taf Morgannwg	£308	£2,743	£2,758	£2,759	£2,760
Cardiff and Vale	£247	£2,808	£2,826	£2,828	£2,829
Hywel Dda	£262	£2,462	£2,477	£2,479	£2,479
Powys	£27	£225	£226	£226	£226
Swansea Bay	£281	£2,678	£2,695	£2,696	£2,697
WAST (2019/20 funded by WG, Year 1 onwards by health boards)	£58	£0	£0	£0	£0
<b>Total</b>	<b>£1,536</b>	<b>£14,465</b>	<b>£14,553</b>	<b>£14,562</b>	<b>£14,564</b>

## 7 Value, Cost Effectiveness and Benchmark Cost Comparison

The value of investment in major trauma is centred on the benefits from reducing mortality and in reducing the levels of disability in people who have experienced major trauma. Major trauma is one of the major causes of premature death. The NCEPOD report (2007) highlighted that 75 % of major trauma involved young men. Reducing mortality and improving function in this patient group, therefore, has the ability to produce material health gain for any investment. The National Audit Office report (2010) highlighted the potential to reduce mortality by 15 to 40%. This has subsequently been evidenced by the real world experience data from the introduction of the major trauma networks in England, which demonstrated a 19% improvement in case-mix adjusted mortality (Moran 2018).

There is international evidence that investment in major trauma is cost effective. The NHS Confederation (2010) reported the work of Nicholl (Sheffield University Health Economics) which indicated that, based on a

10% improvement in mortality, a health economy could invest £5m per annum per million population and achieve a quality gain cost effective at within the £20,000 per QALY standard. A comprehensive study from the United States (Mackenzie 2010) compared the outcomes in Level 1 trauma centres with non-trauma centres and quantified the cost effectiveness at \$36,961 per QALY. When adjustments are made to translate into much lower UK health system costs, investment in major trauma compares well against common investment priorities such as hip and knee surgery.

The lack of a comprehensive baseline cost for the MTC makes comparison with other UK benchmarks problematic. However, the incremental unit cost for the MTC across ISS 9 to 15 and >15 (ISS being a score to measure injury severity) has been assessed to start at £15,190 in Year 1 falling to £13,573 by Year 3. The full cost of MTC activity delivered by an NHS England MTC for the North Wales population, based on real world data, has been calculated as £18,650 per case with a range of £23,576 for ISS>15 and £12,083 for ISS 9<15. It is anticipated that, if all baseline costs were included, the full cost of the new MTC would probably exceed the benchmark, but any financial gap will narrow when, as predicted, activity grows and wider system efficiencies from existing TUs begin to be realised.

## 8 Programme Assurance

Development of the clinical and operational model and the production of the PBC have been coordinated and overseen by the Trauma Network Board, with commissioner scrutiny provided by WHSSC and EASC. There was intensive scrutiny throughout the summer and autumn of 2019, including benchmarking of the MTC financial case against a lead English MTC, Gateway Reviews in July, September and October, and professional peer review by UK clinical experts in August. These have collectively informed the final PBC and the resource requirements to enable the establishment of the South Wales Trauma Network.

## 9 Next steps

Subject to approval of the content of the PBC and confirmation of funding, the South Wales Trauma Network is planned to go live in spring 2020. Some implementation has already commenced with recruitment to key enabling posts. The Gateway Review undertaken in October 2019 reported growing confidence that a go-live at or around April 2020 would be achievable, with a number of elements of the model being introduced in the first few months after this.

The Trauma Network Programme Board will be refocused on implementation, with a leaner membership once the PBC is approved. There will be some parallel running of the programme team and the new ODN, and full handover to the ODN prior to go-live. Arrangements are planned to hold critical readiness reviews for the MTC and TUs, which will focus on

recruitment and, within the MTC, on capital works. Also, the automatic acceptance policy for repatriation will need to be in place. This will inform decisions on the date from which the network will become operational, which will be signed off by WHSSC, as the lead commissioner.

## 10 Recommendations

Boards are asked to:

1. Receive and discuss the Programme Business Case for the network.
2. Note that there has been significant scrutiny of the case, including three formal Gateway Reviews and professional peer review by UK clinical experts.
3. Approve the overall network model described in the case (clinical, operational and governance), including the:
  - a. role of the Operational Delivery Network (ODN)
  - b. role of the health board, as a provider of respective component of service model.
4. Note the importance of the repatriation policy and the importance of the ODN having the authority to implement this, completion of which will form a critical activity in planning network implementation.
5. Note that there will be other business cases over the next two to three years to further develop the major trauma centre and trauma units.
6. Approve the content of the Programme Business Case, subject to confirmation of the NHS resource allocation for 2020/21, the IMTP prioritisation process, and point 7 below.
7. Note that final commissioning decisions on prehospital services, the major trauma centre, relevant specialist services and the ODN, will be taken at meetings of the Welsh Health Specialist Services Committee (WHSSC) and the Emergency Ambulance Services Committee (EASC).



<b>Meeting Date</b>	<b>28 November 2019</b>	<b>Agenda Item</b>	
<b>Report Title</b>	<b>Report of the Director of Finance</b>		
<b>Report Author</b>	Rhiannon Beckett		
<b>Report Sponsor</b>	Eifion Williams		
<b>Presented by</b>	Eifion Williams		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	To provide the HEIW Board with a Financial Report for October 2019 (Month 07).		
<b>Key Issues</b>	HEIW has a statutory duty to break even at year end and consequently this report should assist Executives and Budget Holders in managing the financial position through the 2019-20 financial year.		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
	✓		
<b>Recommendations</b>	The Board is asked to <b>note</b> the financial position reported for HEIW at Month 07 (31 <sup>st</sup> October 2019) and the summarised explanation of key variations by Directorate.		

# **REPORT OF THE DIRECTOR OF FINANCE**

## **1. INTRODUCTION**

The report sets out the financial position as at 31<sup>st</sup> October 2019, reported against updated budgets derived through the 2019-20 Financial Plan and full year core allocation received from Welsh Government. The reported financial position of HEIW as at Month 07 is £1,234,090 underspent, and the forecast year end position reported to Welsh Government is financial balance.

## **2. BACKGROUND**

This report provides an update on the cumulative financial position as at 31<sup>st</sup> October 2019 and details the reasons for any financial variation to date against the budgets set. Since August continuous review of the student numbers recruited, bursary take up and levels of attrition reveals that there will be an underspend against the projected commissioning budget established for the current year. Further variation from the receipt of more detailed information from each University for their recruitment in 2019/20 may alter their student funding requirement for the September 2019 intake. The likely outturn position without further action will be a significant underspend at year end.

## **3. GOVERNANCE AND RISK ISSUES**

HEIW has a statutory financial duty to break even at year end and Welsh Government will monitor the reported position in terms of this duty and against the financial plan submitted for 2019-20.

This report provides a high-level analysis and summary of spend in the first seven months of 2019-20.

## **4. FINANCIAL POSITION**

HEIW is reporting a cumulative underspend of £1,234,090 against profiled budgets as at 31<sup>st</sup> October 2019 with a break even forecast outturn reported to Welsh Government. This position was reported to Welsh Government on day 5 in accordance with the Welsh Health Circular and the required more detailed monitoring return will be submitted on day 9. The monitoring submission is attached as Appendix 2

The table below shows the high-level variance for the Executive Directors.



	Year to Date			Previous Month	
	Budget	Actual	Variance	Variance to Date	Movement
	£	£	£	£	£
<b>INCOME:</b>					
Welsh Government	(120,298,116)	(120,298,116)	0	0	0
Other Income	(330,363)	(369,503)	(39,140)	(43,486)	4,346
<b>Total Income</b>	<b>(120,628,479)</b>	<b>(120,667,619)</b>	<b>(39,140)</b>	<b>(43,486)</b>	<b>4,346</b>
<b>Expenditure</b>					
Board & Executive	970,639	953,612	(17,027)	(12,735)	(4,292)
Finance & Corporate Services, Digital and IT	5,019,909	4,657,552	(362,357)	(91,342)	(271,015)
Medical & Pharmacy	50,988,813	51,950,446	961,633	311,100	650,533
Nursing	62,510,184	60,851,267	(1,658,917)	(1,061,127)	(597,790)
Human Resources and Organisation Development	1,138,934	1,020,652	(118,282)	(100,135)	(18,147)
<b>Sub-Total Expenditure</b>	<b>120,628,479</b>	<b>119,433,529</b>	<b>(1,194,950)</b>	<b>(954,239)</b>	<b>(240,711)</b>
<b>Total</b>			<b>(1,234,090)</b>	<b>(997,725)</b>	<b>(236,365)</b>

The following table provides a further breakdown of the financial variance by Directorate.

Directorate	Income £	Expenditure			Total £
		Pay £	Non Pay £	Commissioning £	
Board and Executive		(11,312)	(5,715)		(17,027)
Chief Executive Reserve			0		0
Finance & Corporate Services, Digital and IT	0	(73,460)	(288,896)		(362,357)
Medical & Pharmacy	(39,140)	(79,225)	310,758	730,100	922,494
Nursing	0	(67,466)	122,379	(1,713,830)	(1,658,917)
Human Resources and Organisation Development		(102,546)	(15,737)		(118,282)
<b>Total</b>	<b>(39,140)</b>	<b>(334,008)</b>	<b>122,789</b>	<b>(983,731)</b>	<b>(1,234,090)</b>

The analysis attached as Appendix 1 provides the key reasons for the underspend, by Directorate. The key reasons for the underspend variances are vacancies against budgeted staffing levels for Pay Budgets and lower placements than planned in commissioned training placements budgets. The overspend in the Medical and Pharmacy Non- Pay budget is associated with a number of issues including higher than budgeted relocation expenses, specialist professional support services and the expansion in GP training places. It is expected that the financial position of HEIW will be managed to deliver a balanced position at year end in conjunction with Welsh Government. The circa £2m costs of the GP Expansion Programme in 2019/20 will now be funded by this underspend position, in addition further non-recurring initiatives of some £1m will be discussed with Universities and Health Boards for funding this year. Some £0.6m of funding that is not required this year due to a number of P/T students extending their courses from 3 years to 4 years will be returned to Welsh Government in this month, and the balance of the underspend will be returned closer to the year end. The Executive and Board will be kept briefed on the management plan to achieve year-end balance throughout the remainder of the year.



## 5. RECOMMENDATION

The Board is asked to **note** the financial position reported for HEIW at Month 07 (31<sup>st</sup> October 2019) and the summarised explanation of key variations by Directorate.

Governance and Assurance				
<b>Link to corporate objectives</b> (please ✓)	As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand	Building a sustainable and flexible health and care workforce for the future.	With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.	Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
	Improving opportunities for use of technology and digitalisation in the delivery of education and care.	Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales	Demonstrating value from investment in the workforce and the organisation.	
<b>Quality, Safety and Patient Experience</b>				
There are no implications for Quality, Safety and Patient Experience				
<b>Financial Implications</b>				
The financial implications are set out above in the body of the report.				
<b>Legal Implications (including equality and diversity assessment)</b>				
HEIW has a statutory responsibility to break even at year end the report sets out the financial position for October 2019. There are no equality and diversity implications of this report.				
<b>Staffing Implications</b>				
There are no staffing implications of this report.				
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>				
The report briefly describes how HEIW are seeking to adopt a sustainable approach to financial management that will enable HEIW to meet its long-term objectives.				
<b>Report History</b>	The report references and updates the previous finance update shared with the HEIW Board in September 2019.			
<b>Appendices</b>	Appendix 1 – Key Variances by Directorate Appendix 2 – HEIW Month 07 (31 <sup>st</sup> October 2019) Monitoring Return			

## **REPORT OF THE DIRECTOR OF FINANCE**

The following analysis of the key reasons for the underspend, by Directorate, is provided below:

### **1. Board and Executives**

- An underspend of £11,312 on pay is as a result of less than full time salary costs for the current interim Director of Finance, the Welsh Language admin officer working less than full time and the Information Governance officer appointed at 0.4wte against a full-time budget.
- An underspend on Non-Pay £5,715 is due to lower than budgeted travel and subsistence costs in month 7 and room hire being less than anticipated due to hosting arrangements.

### **2. Finance, Corporate Services, Digital and IT.**

- The underspend of £73,460 on pay budgets is predominantly as a result of six vacancies within the Digital team, two posts have been appointed to but there is no agreed start date yet. The underspend is partly offset by the costs of two agency staff with a third and fourth due to start in November. There are also agency staff covering vacancies within the Planning team creating an adverse variance due to the premium associated with agency fees. A favourable pay variance within the Finance team is as a result of two vacant posts within Finance which have now been job evaluated prior to being advertised in the near future.
- There is a reported favourable variance of £288,896 in Non-Pay. One off costs incurred in respect of lift repairs, privacy glass wraps for meeting rooms and ongoing repairs associated with water damage are offset by ongoing savings on utilities. The significant movement in month of £231,000 is related to recognition of the likely underspend on the NWIS contract for the first time. It has become apparent that the elements of the planned spend in 2019/20 were brought forward at the end of 2018/19 by NWIS with no corresponding adjustment to the 2019/20 contract value. Additionally, NWIS have notified that some elements of the planned work programme will not be delivered in this financial year and for some areas of work the estimated costs are lower than originally budgeted. The total impact on the 2019/20 position is believed to be an underspend of £396k with seven twelfths of this value reflected in the year to date position.

### **3. Medical and Pharmacy**

- A favourable variance against the Other Income target in the Medical budgets of £39,139 consists predominantly of £58k in respect of additional invoiced income from WG for the piloting of Advanced Skills for Managing Acute Minor Ailments scheme for pharmacists offset by underachievement against income targets in secondary care and GP training.

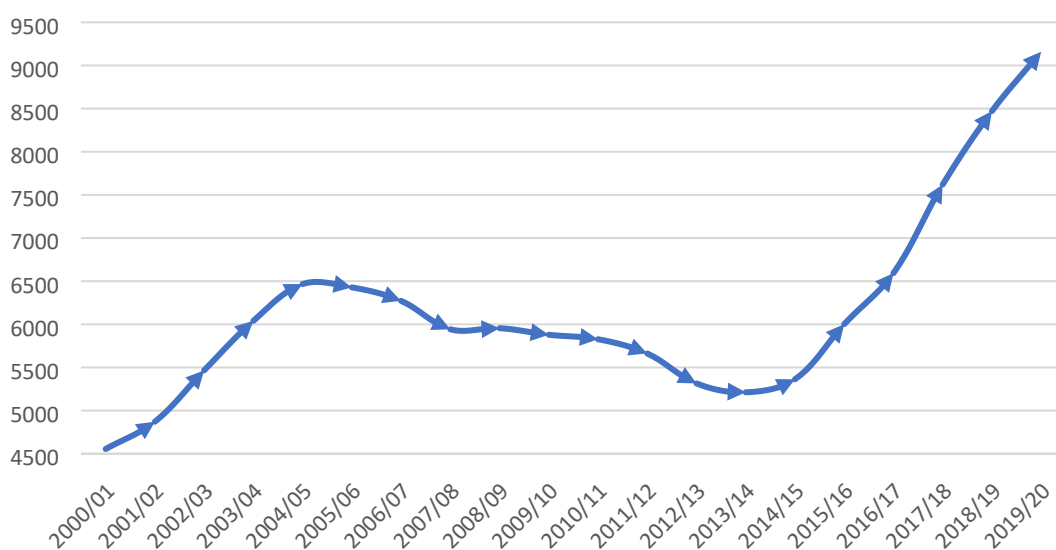
- The underspend against Pay budgets of £79k is due to a number of factors that include maternity leave and vacancies since April. There are currently a number of posts within administration and clerical grades across a number of business units including QIST, PGES, Specialty training, dental and RSU. In GP training, there are a significant number of vacancies for GP appraisers which results in a favourable £70k variance and at Medical and Dental consultant level there is an underspend of £20k due to the secondment of the Director of General Practice with the backfill resulting in a vacancy at deputy Director level. The vacancies identified are partially offset by agency costs of £87k.
- The overspend of £310,758 against Non-Pay budgets consists of a number of elements. An adverse variance of £236k relates to higher trainee relocation fees as reported in previous months. Additional pressures, also identified in previous months, in respect of spend on supernumerary posts and Hamnet Street professional support costs totalling £118k at month 7; and Oriel licence fees of £16k that were not included in budget setting. An adverse variance against budget in respect of travel and subsistence of £30k and overspend associated with catering £24k. Cost pressures are partly offset by favourable variances in respect of the budgets for conferences, seminars, training expenses and evaluation costs, which has yet to be commissioned.
- Within Commissioning budgets, there is a £730k overspend in total. This is as a result of several factors including reduced expenditure in the current co-hort undertaking the Welsh Clinical Academic Training qualification due to early completion producing a favourable variance of £174k. There is also a £187k favourable variance due to salary allocations and placements for hospital training grade posts in Wales being less than budgeted; and a further underspend of £65k as a result of a lower number of supported GPs returning to the workplace via the supported placement mechanism. These favourable variances are offset by a significant movement in respect of GP training with £1,189k above budget for the new intake of trainees, half of whom are ST1's undertaking in practice placements in accordance with the new GP training model. The new ST1's account for approximately half of the overspend, the remaining overspend is a result of more trainee's being in the system than budgeted for due to interruption of study. It has been agreed with Welsh Government that the cost of the enhanced and expanded GP training scheme in 2019/20 will be born from the current year underspending of HEIW.

#### **4. Nursing**

- The underspend on Pay of £67,466 relates predominantly to the ongoing delay in appointment to three senior posts. As previously indicated the underspend is increasing at a rate of £19,500 per month. Although interviews have been held for one of the posts it is unlikely that any salary costs will be incurred for a number of months due to recruitment process and likely notice period. The recruitment process for the two remaining posts has not commenced.

- Non-Pay budgets are mainly provided for commissioning expenditure on education and training contracts, student salary and bursary costs along with disability payments, training, travel and subsistence and expenses. In total, an underspend of £1,713,83 is reported in month 7 for Non- Pay and Commissioning budgets for the following reasons:
  - The Commissioning budget established is based on the existing student cohort in the system and the anticipated commissioned student numbers for 19/20. The budget is profiled across the academic year with a step up in August to reflect the numbers continuing into years 2 and 3 and recruitment to year 1. The reported October position includes updated numbers for year 2 and 3 based on latest returns from Universities and the variation in recruitment to year 1. The financial impact of the revised numbers is an underspend of some £1.4m. The numbers recruited into year 1 have been validated in month 7, but due to the 10-week cooling off period associated with the bursary package the contract value payable to each University may still vary until the end of December. The latest assessment of the bursary position is an underspend of £337k. Through ongoing dialogue with Welsh Government related to how to manage the emerging in year position it was agreed to return £619k, the full year variance created by take up of part time courses immediately through an allocation adjustment in month. This was actioned with three eighths of the adjustment reflected in the year to date position.
  - While there is an underspend against commissioning budgets, it must be born in mind that of the September 2019 places available, 98% of these have been filled. For nursing programmes there is a second intake in the spring of 2020 and unfilled nursing places from September 2019 will be offered at that time.
  - There are several issues from a commissioning perspective which have influenced the recruitment process:
    - there has been a significant growth in commissioned places since 2014/15 (see figure below)
    - there has been a reduction in the number of students applying from within Wales and England
    - uncertainty regarding the future of the NHS Bursary Scheme
- Given the above, it should be noted that HEIW has significantly more students in training in 2019/20 than has been the case previously for NHS in Wales. The current underspend should be temporary based on the factors outlined previously.

## Total number of students in training



- Other non-pay budgets related to travel and subsistence and other expenses of the Nursing team are of minimal value. However also included in month the 7 position is the consultancy and other costs of the strategic review of education contracts, expected to total c£200k. Although a non-recurrent funding stream had been agreed with WG for this work, due to the extended project timescales and emerging in year position it has been agreed to fund this year internally to ensure that support is available for 2020/21 and 2021/22 if applicable. The resource requirement for the extended project is being worked through to inform the financial plan and WG allocation process. There is therefore an overspend of £122,378 reported to date on non-pay budgets.

## 5. Human Resources and Organisation Development

- The underspend of £102,545 on Pay budgets in October is due to 10 vacancies across the core budgets within the Directorate partly offset by the costs of three agency staff. As previously reported, where development funding had been provided to fund posts which have not been appointed to, funding of some £46k has been re-allocated to offset the unavoidable cost pressure of unreclaimable VAT on the TY Dysgu lease and telephone maintenance contract. The core vacancies are at various stages of recruitment with two new starters in the Communication and Engagement team in month and one in the People team and Workforce Intelligence and two very recent appointments in Leadership and Succession without agreed start dates as yet. Another appointment in the Careers team was an internal candidate, the remaining 3 roles are currently out to advert.
- A Non-Pay favourable variance of £15,736 is still predominantly due to the decision not to go ahead with i-view and the subsequent release of accrued cost of £10k, an underspend on travel and subsistence £1.7k, advertising and staff recruitment £3k and conferences and seminars.

The balance sheet as at 31<sup>st</sup> October 2019 is shown below:

	2019/20 Opening Balance £000s	31 <sup>st</sup> October 2019 £000s	Movement £000s
<b>Non-Current Assets:</b>			
Fixed Assets	2,989	2,706	(283)
<b>Current Assets:</b>			
Trade and other receivables	801	452	(349)
Cash & bank	6,240	1,534	(4,706)
<b>Total Assets</b>	<b>10,030</b>	<b>4,692</b>	<b>(5,338)</b>
<b>Liabilities:</b>			
Trade and other payables	(6,315)	(18,642)	(12,327)
<b>Provisions</b>	<b>(30)</b>	<b>(30)</b>	<b>0</b>
<b>Total Liabilities</b>	<b>(6,345)</b>	<b>(18,672)</b>	<b>(12,327)</b>
	<b>3,685</b>	<b>(13,980)</b>	<b>(17,655)</b>
Financed by:			
General Fund	3,685	(13,980)	(17,655)
<b>Total Funding</b>	<b>3,685</b>	<b>(13,980)</b>	<b>(17,655)</b>

- The movement on non-current assets reflects depreciation charged during 2019. The total capital allocation for 2019/20 is £100k, which has not yet been utilised. Proposals are being prepared and will shortly be submitted to the Executive Team for consideration.
- Trade and other payables total £18.6m, an increase of £12.3m since the start of the financial year. The main reasons for the increase include:
  - The value of invoices approved and awaiting payment on the system in line with the 30-day payment policy reduced by £1.0m to £0.8m. Of this value, £0.8m was paid on the 4<sup>th</sup> November.
  - Invoices for the NWIS SLA for the first half of 2019/20 were received during October but there was a query on the total value charged. An accrual has been included in the month 7 position, increasing the overall NWIS creditor balance by £2.2m. The 2 SLA invoices were paid on 12<sup>th</sup> November following receipt of the credit notes from Velindre.
  - Accruals for the Medical division in the month total £6.5m. Significant balances include the costs for the GP Training Scheme for September and October of £3.4m and Medical Commissioning accruals of £1.9m (both relate to NHS Wales organisations).
  - Accruals in month 7 for the Non-Medical division total £6.9m, including £2.6m for NHS Wales (student salary reimbursement, HCSW) and £4.3m for non-NHS Wales costs (Primarily university invoices including reimbursement of bursaries, travel costs etc.).

- Resource allocation of £17.5m was received from Welsh Government in October 2019 and the overall cash balance at the end of the month was £1.5m.
- The movement in general fund reflects the difference between costs incurred and accrued for the first seven months of the financial year (£120.2m) and the actual cash funding required and received from Welsh Government (£101.3m) less the reported underspend (£1.2m). This is a phasing issue and does not affect the total value of the available revenue resource allocation for the year.

All NHS bodies are expected to meet the Public Sector Payment Policy, which requires NHS organisations to pay 95% of all invoices within 30 days and is based on a cumulative position. For the period from the 1<sup>st</sup> April to the 31<sup>st</sup> October 2019, HEIW paid 94.9% of non-NHS invoices within this target.

During October work was focussed on reducing the number of invoices on hold. As many of these were over the 30-day target this has impacted upon the year to date performance. However, as the number of invoices on hold have been cleared from the system this should result in a positive impact on performance in future months. A training session was also held during the month to improve the use and understanding of the invoice tracking systems that have been developed to improve the payment process.

Target	Unit	Current Month	Year to Date	Year-end Forecast
<b>Public Sector Payment Policy</b> To pay a minimum of 95% of all non-NHS creditors within 30 days of receipt of goods/invoice	%	88.9	94.9	>95%

## VALIDATION SUMMARY 2019-20

Your organisation is showing as :	HEIW
Period is showing :	OCT 19
TABLE A : MOVEMENT	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE A1 : UNDERLYING POSITION	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE B : MONTHLY POSITIONS	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE B1 : NET EXPENDITURE PROFILES	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE B2 : PAY & AGENCY/LOCUM	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE C, C1 & C2 : SAVINGS SCHEMES	HEIW IS CURRENTLY SHOWING 1 ERRORS FOR THIS TABLE
TABLE C3 : SAVINGS TRACKER	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE E : RESOURCE LIMITS	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE F: RISKS	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE G : STATEMENT OF FINANCIAL POSITION	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE H : MONTHLY CASHFLOW	HEIW IS CURRENTLY SHOWING 1 ERRORS FOR THIS TABLE
TABLE J : CAPITAL RESOURCE LIMIT	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE K: CAPITAL IN YEAR SCHEMES	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE L : CAPITAL DISPOSALS	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE N : GENERAL MEDICAL SERVICES	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE O : GENERAL DENTAL SERVICES	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
<b>TOTAL ERRORS FOR YOUR OCT 19 RETURN IS</b>	<b>2 ERRORS ON 2 DIFFERENT TABLE/S</b>



# HEIW

Period : Oct 19

Summary Of Main Financial Performance

Revenue Performance

		Actual YTD £'000	Annual Forecast £'000
1	Under / (Over) Performance against Resource Limit	1,235	0

Table A - Movement of Opening Financial Plan to Forecast Outturn

This Table is currently showing 0 errors

Line 11 should reflect the corresponding amounts included within the latest IMTP submission to WG

Lines 1 - 11 should not be adjusted after Month 1

		In Year Effect £'000	Non Recurring £'000	Recurring £'000	FYE of Recurring £'000
1	Underlying Position b/fwd from Previous Year - as per 3 year plan (Surplus - Positive Value / Deficit - Negative Value)	0	0	0	0
2	New Cost Pressures - as per 3 year plan (Negative Value)				
3	<b>Opening Cost Pressures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
4	Identified Savings Plan (Positive Value)	0	0	0	0
5	Savings / Mitigating Actions Yet To Be Identified (Positive Value)				
6	Welsh Government Funding (Positive Value)				
7	Net Income Generated (Positive Value)	0	0	0	0
8	Planned Accountancy Gains (Positive Value)	0	0	0	0
9	Release of Uncommitted Contingencies & Reserves (Positive Value)				
10					
11	<b>Opening Financial Plan</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
12	Cost Pressures b/fwd from Previous Year - unidentified within 3 year plan (Negative Value)				
13	Opening Plan Savings - Forecast (Underachievement) / Overachievement	0	0	0	0
14	Additional In Year Identified Savings - Forecast (Positive Value)	0	0	0	0
15	Additional In Year Identified Accountancy Gains (Positive Value)	0	0	0	0
16	Additional Net Income Generated (Positive Value)	0	0	0	0
17	Non Identification of Savings / Mitigating Actions Yet To Be Identified in Opening Plan	0	0	0	0
18	Release of Previously Committed Contingencies & Reserves (Positive Value)	0			
19	Additional In Year Welsh Government Funding (Positive Value)	0			
20		0			
21		0			
22		0			
23		0			
24		0			
25		0			
26		0			
27		0			
28		0			
29		0			
30		0			
31		0			
32		0			
33		0			
34		0			
35		0			
36		0			
37		0			
38	<b>Forecast Outturn (- Deficit / + Surplus)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

[illegible]

Table A1 - Underlying Position

This Table is currently showing 0 errors

Section A - Traditional Analysis		IMTP Underlying Position b/f £'000	Future IMTP Underlying Position c/f £'000
1	Previous Year's Outturn / Current Year's Forecast Outturn		0
2	Non Recurring Savings (Negative Value)		0
3	Non Recurring Mitigating Actions (Negative Value)		
4	Non Recurring RRL Income - Allocated (Negative Value)		
5	Non Recurring RRL Income - Anticipated (Negative Value)		
6	Non Recurring Other Income/Disposals (Negative Value)		
7	Non Recurring Accountancy Gains (Negative Value)		0
8	Non Recurring Cost Avoidance - Outside of Savings Plan (Negative Value)		
9	Full Year Effect of Recurring Savings Adjustment (Full Year less In Year) (Positive Value)		0
10	Full Year Effect of New Cost Pressures Adjustment (Full Year less In Year) (Negative Value)		
11	Other Non Recurring Factors (Negative Value) - please specify in narrative		
12	Other Non Recurring Factors (Positive Value) - please specify in narrative		
13	<b>Total</b>	<b>0</b>	<b>0</b>

Section B - By Spend Area		IMTP Underlying Position b/f £'000	Full Year Effect of Actions		Subtotal £'000	New, Recurring, Full Year Effect of Unmitigated Pressures (-ve) £'000	IMTP Underlying Position c/f £'000
1	Pay - Administrative, Clerical & Board Members				0		0
2	Pay - Medical & Dental				0		0
3	Pay - Nursing & Midwifery Registered				0		0
4	Pay - Prof Scientific & Technical				0		0
5	Pay - Additional Clinical Services				0		0
6	Pay - Allied Health Professionals				0		0
7	Pay - Healthcare Scientists				0		0
8	Pay - Estates & Ancillary				0		0
9	Pay - Students				0		0
10	Non Pay - Supplies and services - clinical				0		0
11	Non Pay - Supplies and services - general				0		0
12	Non Pay - Consultancy Services				0		0
13	Non Pay - Establishment				0		0
14	Non Pay - Transport				0		0
15	Non Pay - Premises				0		0
16	Non Pay - External Contractors				0		0
17	Health Care Provided by other Orgs – Welsh LHBs				0		0
18	Health Care Provided by other Orgs – Welsh Trusts				0		0
19	Health Care Provided by other Orgs – WHSSC				0		0
20	Health Care Provided by other Orgs – English				0		0
21	Health Care Provided by other Orgs – Private / Other				0		0
22	<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Section C - By Directorate		IMTP Underlying Position b/f £'000	Full Year Effect of Actions		Subtotal £'000	New, Recurring, Full Year Effect of Unmitigated Pressures (-ve) £'000	IMTP Underlying Position c/f £'000
1	Primary Care				0		0
2	Mental Health				0		0
3	Continuing HealthCare				0		0
4	Commissioned Services				0		0
5	Scheduled Care				0		0
6	Unscheduled Care				0		0
7	Children & Women's				0		0
8	Community Services				0		0
9	Specialised Services				0		0
10	Executive / Corporate Areas				0		0
11	Support Services (inc. Estates & Facilities)				0		0
12	<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

**HEIW**

Table B - Monthly Positions

Period : Oct 19

This Table is currently showing 0 errors

A. Monthly Summarised Statement of Comprehensive Net Expenditure			1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year-end position
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Revenue Resource Limit	Actual/F'cast	16,450	16,598	17,241	17,068	16,881	18,126	17,834	18,006	18,309	19,569	17,457	22,055	120,198	215,594
2	Miscellaneous Income - Capital Donation/Government Grant Income	Actual/F'cast													0	0
3	Miscellaneous Income - Other (including non resource limited income)	Actual/F'cast	61	42	86	67	18	52	144	45	47	45	52	107	470	766
4	<b>Income Total</b>		<b>16,511</b>	<b>16,640</b>	<b>17,327</b>	<b>17,135</b>	<b>16,899</b>	<b>18,178</b>	<b>17,978</b>	<b>18,051</b>	<b>18,356</b>	<b>19,614</b>	<b>17,509</b>	<b>22,162</b>	<b>120,668</b>	<b>216,360</b>
5	Primary Care Contractor (excluding drugs, including non resource limited expenditure)	Actual/F'cast													0	0
6	Primary Care - Drugs & Appliances	Actual/F'cast													0	0
7	Provided Services - Pay	Actual/F'cast	1,034	1,090	1,191	1,142	1,047	1,219	1,207	1,207	1,204	1,202	1,202	1,276	7,930	14,021
8	Provider Services - Non Pay (excluding drugs & depreciation)	Actual/F'cast	1,096	1,266	1,087	1,162	901	1,219	1,242	1,661	1,362	1,275	1,209	2,057	7,973	15,537
9	Secondary Care - Drugs	Actual/F'cast													0	0
10	Healthcare Services Provided by Other NHS Bodies	Actual/F'cast													0	0
11	Non Healthcare Services Provided by Other NHS Bodies	Actual/F'cast													0	0
12	Continuing Care and Funded Nursing Care	Actual/F'cast													0	0
13	Other Private & Voluntary Sector	Actual/F'cast	14,321	14,225	14,992	14,745	14,577	15,137	15,252	15,387	15,997	17,342	15,303	19,036	103,249	186,312
14	Joint Financing and Other	Actual/F'cast													0	0
15	DEL Depreciation/Accelerated Depreciation/Impairments	Actual/F'cast	40	41	40	40	40	40	40	40	40	43	43	43	281	490
16	AME Donated Depreciation/Impairments	Actual/F'cast													0	0
17	Non Allocated Contingency	Actual/F'cast													0	0
18	Profit/Loss Disposal of Assets	Actual/F'cast													0	0
19	<b>Cost - Total</b>	Actual/F'cast	<b>16,491</b>	<b>16,622</b>	<b>17,310</b>	<b>17,089</b>	<b>16,565</b>	<b>17,615</b>	<b>17,741</b>	<b>18,295</b>	<b>18,603</b>	<b>19,862</b>	<b>17,757</b>	<b>22,412</b>	<b>119,433</b>	<b>216,360</b>
20	<b>Net surplus/ (deficit)</b>	Actual/F'cast	<b>20</b>	<b>19</b>	<b>17</b>	<b>46</b>	<b>334</b>	<b>563</b>	<b>237</b>	<b>(244)</b>	<b>(247)</b>	<b>(248)</b>	<b>(248)</b>	<b>(250)</b>	<b>1,235</b>	<b>0</b>

### B. Assessment of Financial Forecast Positions

Year-to-date (YTD)	£'000	
21. Actual YTD surplus/ (deficit)	1,235	
22. Actual YTD surplus/ (deficit) last month	998	
23. Current month actual surplus/ (deficit)	237	
		Trend
24. Average monthly surplus/ (deficit) YTD	176	▲
25. YTD /remaining months	247	

Full-year surplus/ (deficit) scenarios	£'000
26. Extrapolated Scenario	2,420
27. Year to Date Trend Scenario	2,117

### C. DEL/AME Depreciation & Impairments

[illegible]

#### D. Accountancy Gains

[illegible]

#### E. Committed Reserves & Contingencies

[illegible]

Table B1 - Net Expenditure Profile Analysis

This Table is currently showing 0 errors

## A. PROVIDER PAY EXPENDITURE ANALYSIS

Pay - Expenditure Profiles	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	£'000	£'000
1 Total Gross Pay Expenditure - Plan	1,068	1,078	1,242	1,206	1,219	1,219	1,231	1,243	1,234	1,231	1,231	1,302	8,263	14,504
2 Establishment - Actual/Forecast Gross	1,021	1,050	1,108	1,092	1,032	1,135	1,144	1,152	1,149	1,147	1,152	1,226	7,582	13,408
3 Variable - Actual/Forecast Gross													0	0
4 Agency/Locum Paid at a Premium - Actual/Forecast Gross	13	40	83	50	15	84	63	55	55	55	50	50	348	613
5 Committed Reserves - Actual/Forecast Gross													0	0
6 Other - Actual/Forecast Gross													0	0
7 Total Gross Expenditure - Actual/Forecast	1,034	1,090	1,191	1,142	1,047	1,219	1,207	1,207	1,204	1,202	1,202	1,276	7,930	14,021
8 Gross Expenditure Variance	(34)	12	(51)	(64)	(172)	0	(24)	(36)	(30)	(29)	(29)	(26)	(333)	(483)
9 Total Workforce Savings - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10 Establishment Savings - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11 Variable Pay Savings - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12 Agency/Locum Paid at a Premium Savings - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13 Other Workforce Savings - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14 Total Workforce Savings - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15 Pay Savings Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16 Pay Accountancy Gains - Plan													0	0
17 Pay Accountancy Gains - Actual/Forecast													0	0
18 Pay Accountancy Gains Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19 Net Expenditure - Plan	1,068	1,078	1,242	1,206	1,219	1,219	1,231	1,243	1,234	1,231	1,231	1,302	8,263	14,504
20 Net Expenditure - Actual/Forecast (as per Table B)	1,034	1,090	1,191	1,142	1,047	1,219	1,207	1,207	1,204	1,202	1,202	1,276	7,930	14,021
21 Net Expenditure - Variance	(34)	12	(51)	(64)	(172)	0	(24)	(36)	(30)	(29)	(29)	(26)	(333)	(483)

## B. NON PAY (excluding drugs &amp; depreciation) EXPENDITURE ANALYSIS

Non Pay - Expenditure Profiles	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	£'000	£'000
22 Total Gross Non Pay Expenditure - Plan	1,086	1,107	1,138	1,191	1,119	1,189	925	1,631	1,332	1,245	1,179	1,902	7,755	15,044
23 Non Pay - Actual/Forecast Gross	1,096	1,266	1,087	1,162	901	1,219	1,242	1,661	1,362	1,275	1,209	2,057	7,973	15,537
24 Non Pay Other - Actual/Forecast Gross													0	0
25 Committed Reserves - Actual/Forecast Gross													0	0
26 Total Expenditure - Actual/Forecast	1,096	1,266	1,087	1,162	901	1,219	1,242	1,661	1,362	1,275	1,209	2,057	7,973	15,537
27 Non Pay Expenditure Variance	10	159	(51)	(29)	(218)	30	317	30	30	30	30	155	218	493
28 Total Non Pay Savings - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29 Non Pay Savings - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30 Non Pay Savings Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31 Non Pay Accountancy Gains - Plan													0	0
32 Non Pay Accountancy Gains - Actual/Forecast													0	0
33 Non Pay Accountancy Gains Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
34 Net Expenditure - Plan	1,086	1,107	1,138	1,191	1,119	1,189	925	1,631	1,332	1,245	1,179	1,902	7,755	15,044
35 Net Expenditure - Actual/Forecast (as per Table B)	1,096	1,266	1,087	1,162	901	1,219	1,242	1,661	1,362	1,275	1,209	2,057	7,973	15,537
36 Net Expenditure - Variance	10	159	(51)	(29)	(218)	30	317	30	30	30	30	155	218	493

### C. DRUGS EXPENDITURE ANALYSIS

[illegible]

**D. PRIMARY CARE CONTRACTOR (excl drugs, incl Non Resource Limited) EXPENDITURE ANALYSIS**

[illegible]



# E. CONTINUING HEALTHCARE/ FUNDED NURSING CARE EXPENDITURE ANALYSIS

Continuing Healthcare / Funded Nursing Care - Expenditure Profiles	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
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	year-end position £'000
67 Total Continuing Healthcare / Funded Nursing Care Gross Expenditure - Plan													0	0
68 Continuing Healthcare / Funded Nursing Care - Actual/Forecast Gross													0	0
69 Committed Reserves - Actual/Forecast Gross													0	0
70 Total Gross Continuing Healthcare / Funded Nursing Care Expenditure - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
71 Gross Continuing Healthcare / Funded Nursing Care Expenditure Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
72 Total Continuing Healthcare / Funded Nursing Care Savings - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
73 Continuing Healthcare / Funded Nursing Care Savings - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
74 Continuing Healthcare / Funded Nursing Care Savings Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
75 Continuing Healthcare / Funded Nursing Care Accountancy Gains - Plan													0	0
76 Continuing Healthcare / Funded Nursing Care Accountancy Gains - Actual/Forecast													0	0
77 Continuing Healthcare / Funded Nursing Care Accountancy Gains Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
78 Net Expenditure - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
79 Net Expenditure - Actual/Forecast (as per Table B)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
80 Net Expenditure - Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0

# F. COMMISSIONED SERVICES (Health Care & Non HealthCare) EXPENDITURE ANALYSIS

Commissioned Services - Expenditure Profiles	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
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	year-end position £'000
81 Total Gross Commissioned Services Expenditure - Plan	14,318	14,308	14,982	14,675	14,757	16,292	14,998	15,169	15,781	17,126	15,087	18,820	104,329	186,312
82 HealthCare Services Provided by Other NHS Bodies - Actual/Forecast Gross													0	0
83 Non HealthCare Services Provided by Other NHS Bodies - Actual/Forecast Gross													0	0
84 Other Private & Voluntary - Actual/Forecast Gross	14,321	14,225	14,992	14,745	14,577	15,137	15,252	15,387	15,997	17,342	15,303	19,036	103,249	186,312
85 Joint Financing & Other - Actual/Forecast Gross													0	0
86 Committed Reserves - Actual/Forecast Gross													0	0
87 Total Gross Expenditure - Actual/Forecast	14,321	14,225	14,992	14,745	14,577	15,137	15,252	15,387	15,997	17,342	15,303	19,036	103,249	186,312
88 Gross Expenditure Variance	3	(83)	10	70	(180)	(1,155)	254	218	216	216	216	216	(1,080)	0
89 Total Commissioned Services - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
90 Commissioned Services Savings - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
91 Commissioned Services Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
92 Commissioned Services Accountancy Gains - Plan													0	0
93 Commissioned Services Accountancy Gains - Actual/Forecast													0	0
94 Commissioned Services Accountancy Gains Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
95 Net Expenditure - Plan	14,318	14,308	14,982	14,675	14,757	16,292	14,998	15,169	15,781	17,126	15,087	18,820	104,329	186,312
96 Net Expenditure - Actual/Forecast (as per Table B)	14,321	14,225	14,992	14,745	14,577	15,137	15,252	15,387	15,997	17,342	15,303	19,036	103,249	186,312
97 Net Expenditure - Variance	3	(83)	10	70	(180)	(1,155)	254	218	216	216	216	216	(1,080)	0

This Table is currently showing 0 errors

Table B2 - Pay Expenditure Analysis

A - Pay Expenditure

	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
REF	TYPE	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Administrative, Clerical & Board Members	598	605	710	698	617	714	712	713	713	711	724	4,654	8,227
2	Medical & Dental	362	403	388	355	366	433	407	424	415	415	416	2,714	4,798
3	Nursing & Midwifery Registered	6	10	11	11	(11)	0	0	0	6	6	6	27	52
4	Prof Scientific & Technical	55	59	67	65	62	62	72	56	56	56	113	442	780
5	Additional Clinical Services	13	13	15	13	13	10	16	13	13	13	16	93	163
6	Allied Health Professionals												0	0
7	Healthcare Scientists												0	0
8	Estates & Ancillary												0	0
9	Students												0	0
10	TOTAL PAY EXPENDITURE	1,034	1,090	1,191	1,142	1,047	1,219	1,207	1,207	1,204	1,202	1,276	7,930	14,019

Analysis of Pay Expenditure

11	LHB Provided Services - Pay	1,034	1,090	1,191	1,142	1,047	1,219	1,207	1,207	1,204	1,202	1,276	7,930	14,021
12	Other Services (incl. Primary Care) - Pay												0	0
13	Total - Pay	1,034	1,090	1,191	1,142	1,047	1,219	1,207	1,207	1,204	1,202	1,276	7,930	14,021
		0	0	0	0	0	0	0	0	0	0	0		

B - Agency / Locum (premium) Expenditure  
- Analysed by Type of Staff

	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
REF	TYPE	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Administrative, Clerical & Board Members	13	40	83	50	15	84	63	55	55	55	50	348	613
2	Medical & Dental												0	0
3	Nursing & Midwifery Registered												0	0
4	Prof Scientific & Technical												0	0
5	Additional Clinical Services												0	0
6	Allied Health Professionals												0	0
7	Healthcare Scientists												0	0
8	Estates & Ancillary												0	0
9	Students												0	0
10	TOTAL AGENCY/LOCUM (PREMIUM) EXPENDITURE	13	40	83	50	15	84	63	55	55	50	50	348	613
11	Agency/Locum (premium) % of pay	1.3%	3.7%	7.0%	4.4%	1.4%	6.9%	5.2%	4.6%	4.6%	4.6%	4.2%	3.9%	4.4%
		0	0	0	0	0	0	0	0	0	0	0		

C - Agency / Locum (premium) Expenditure  
- Analysed by Reason for Using Agency/Locum (premium)

	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
REF	REASON	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Vacancy	13	40	83	50	15	84	63	55	55	55	50	348	613
2	Maternity/Paternity/Adoption Leave												0	0
3	Special Leave (Paid) – inc. compassionate leave, interview												0	0
4	Special Leave (Unpaid)												0	0
5	Study Leave/Examinations												0	0
6	Additional Activity (Winter Pressures/Site Pressures)												0	0
7	Annual Leave												0	0
8	Sickness												0	0
9	Restricted Duties												0	0
10	Jury Service												0	0
11	WLI												0	0
12	Exclusion (Suspension)												0	0
13	TOTAL AGENCY/LOCUM (PREMIUM) EXPENDITURE	13	40	83	50	15	84	63	55	55	50	50	348	613

Period : Oct 19

**Table C - Identified Expenditure Savings Schemes (Excludes Income Generation and Accountancy Gains)**

**This Table is currently showing 1 errors**

Some errors will be resolved when complete rows have data or associated tables are completed

[illegible]

Table C1- Savings Schemes Pay Analysis

	Month		1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY YTD variance as %age of YTD Budget/Plan	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings £'000
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar				Green	Amber	non recurring	recurring	
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000				£'000	£'000	£'000	£'000	
1	Changes in Staffing Establishment	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
2		Actual/F'cast	0	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	Variable Pay	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
5		Actual/F'cast	0	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	Locum	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
8		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 a premium	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
11		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	Changes in Bank Staff	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
14		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	Other (Please Specify)	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
17		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	Total	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
20		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
21		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	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	Total YTD	Full-year forecast	YTD as %age of FY YTD variance as %age of YTD Budget/Plan	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings £'000
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar				Green	Amber	non recurring	recurring	
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000				£'000	£'000	£'000	£'000	
1	Reduced usage of Agency/Locums paid at a premium	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
2		Actual/F'cast	0	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	Non Medical 'off contract' to 'on contract'	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
5		Actual/F'cast	0	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	Medical - Impact of Agency pay rate caps	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
8		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	Other (Please Specify)	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
11		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	Total	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
14		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			

This Table is currently showing 0 errors

Table C3 - Savings Tracker

Summary of Forecast Savings (£000's)	Cash-Releasing Saving (Pay)	Cash-Releasing Saving (Non Pay)	Cost Avoidance	Savings Total	Income Generation	Accountancy Gains
Planned Care	0	0	0	0	0	0
Unscheduled Care	0	0	0	0	0	0
Primary and Community Care (Excl Prescribing)	0	0	0	0	0	0
Mental Health	0	0	0	0	0	0
Clinical Support	0	0	0	0	0	0
Non Clinical Support (Facilities/Estates/Corporate)	0	0	0	0	0	0
Commissioning	0	0	0	0	0	0
Across Service Areas	0	0	0	0	0	0
CHC	0	0	0	0	0	0
Prescribing	0	0	0	0	0	0
Medicines Management (Secondary Care)	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Table E - Resource Limits

1. BASE ALLOCATION

	STATUS OF ISSUED RESOURCE LIMIT ITEMS				Total Revenue Resource Limit £'000	Recurring (R) or Non Recurring (NR)	Total Revenue Drawing Limit £'000	Total Capital Resource Limit £'000	Total Capital Drawing Limit £'000	WG Contact and Date Item First Entered Into Table
	HCHS £'000	Pharmacy £'000	Dental £'000	GMS £'000						
1 LATEST ALLOCATION LETTER/SCHEDULE REF:	10									
2 Total Confirmed Funding	215,045				215,045		215,045	100	100	

2. ANTICIPATED ALLOCATIONS

3 Non-Cash Depreciation	480				480	R				Month 1 - Email rec'd 11/11 - Awaiting re
4 Workforce Modernisation Manager (KG)	60				60	NR	60			Richard Dudley - Month 1
5 Non-Cash Depreciation	10				10	R				Month 5 - Email rec'd 11/11 - Awaiting re
6 Pharmacy Equipment					0			46	46	Month 7 - Approval received - Awaiting re
7					0					
8					0					
9					0					
10					0					
11					0					
12					0					
13					0					
14					0					
15					0					
16					0					
17					0					
18					0					
19					0					
20					0					
21					0					
22					0					
23					0					
24					0					
25					0					
26					0					
27					0					
28					0					
29					0					
30					0					
31					0					
32					0					
33					0					
34					0					
35					0					
36					0					
37					0					
38					0					
39					0					
40					0					
41					0					
42					0					
43					0					
44					0					
45					0					
46					0					
47					0					
48					0					
49					0					
50					0					
51					0					
52					0					
53					0					
54					0					
55					0					
56 Total Anticipated Funding	550	0	0	0	550		60	46	46	

3. TOTAL RESOURCES & BUDGET RECONCILIATION

57 Confirmed Resources Per 1. above	215,045	0	0	0	215,045		215,045	100	100	
58 Anticipated Resources Per 2. above	550	0	0	0	550		60	46	46	
59 Total Resources	215,595	0	0	0	215,595		215,105	146	146	

## HEIW

Period : Oct 19

**Table D - Income/Expenditure Assumptions**

### Annual Forecast

	LHB/Trust	Contracted Income £'000	Non Contracted Income £'000	Total Income £'000
1	Swansea Bay University	0	0	0
2	Aneurin Bevan University	0	0	0
3	Betsi Cadwaladr University	0	0	0
4	Cardiff & Vale University	0	0	0
5	Cwm Taf Morgannwg University	0	0	0
6	Hywel Dda University	0	0	0
7	Powys	0	0	0
8	Public Health Wales	0	0	0
9	Velindre	0	0	0
10	Wales Ambulance Services	0	0	0
11	WHSSC	0	0	0
12	EASC	0	0	0
13	HEIW	0	0	0
14	<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>

Contracted Expenditure £'000	Non Contracted Expenditure £'000	Total Expenditure £'000
0	11,671	<b>11,671</b>
0	9,188	<b>9,188</b>
0	14,288	<b>14,288</b>
0	18,593	<b>18,593</b>
0	11,277	<b>11,277</b>
0	6,779	<b>6,779</b>
0	520	<b>520</b>
0	1,154	<b>1,154</b>
0	22,147	<b>22,147</b>
0	672	<b>672</b>
0	0	<b>0</b>
0	0	<b>0</b>
0	0	<b>0</b>
<b>0</b>	<b>96,289</b>	<b>96,289</b>

This Table is currently showing 0 errors

Table F - Overview Of Key Risks / Opportunities Affecting Forecast Outturn

		FORECAST YEAR END			
		Worst Case	Likelihood	Best Case	Likelihood
		£'000		£'000	
	Current Reported Forecast Outturn	0		0	
	<b>Risks (negative values)</b>				
1	Non delivery of Saving Plans/CIPs				
2	Continuing Healthcare				
3	Prescribing				
4	Pharmacy Contract				
5	WHSSC Performance				
6	Other Contract Performance				
7	GMS Ring Fenced Allocation Underspend Potential Claw back				
8	Dental Ring Fenced Allocation Underspend Potential Claw back				
9	GP Expansion	(1,789)	Medium		
10	Relocation Expenses	(404)	Medium		
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
	<b>Opportunities (positive values)</b>				
23	Take up of Bursary Funding	597	High	256	Medium
24	Retention of Students	1,596	High	1,596	Medium
25	Recruitment of students		High	699	Medium
26					
27					
28					
29					
30	<b>Total Risks /Opportunities</b>	<b>0</b>		<b>2,551</b>	
31	<b>Total Amended Forecast</b>	<b>0</b>		<b>2,551</b>	



HEIW

Period : Oct 19

This table needs completing from Month 3 onwards

This Table is currently showing 0 errors

Table G - Statement of Financial Position For Monthly Period

	Opening Balance Beginning of Apr 19 £'000	Closing Balance End of Oct 19 £'000	Forecast Closing Balance End of Mar 20 £'000
<b>Non-Current Assets</b>			
1 Property, plant and equipment	2,989	2,707	2,645
2 Intangible assets	0		0
3 Trade and other receivables	0		0
4 Other financial assets	0		0
5 Non-Current Assets sub total	2,989	2,707	2,645
<b>Current Assets</b>			
6 Inventories	0		0
7 Trade and other receivables	801	457	801
8 Other financial assets	0		0
9 Cash and cash equivalents	6,240	1,534	3,479
10 Non-current assets classified as held for sale	0		0
11 Current Assets sub total	7,041	1,991	4,280
12 TOTAL ASSETS	10,030	4,698	6,925
<b>Current Liabilities</b>			
13 Trade and other payables	6,121	18,452	5,290
14 Other financial liabilities			
15 Provisions	30	30	0
16 Current Liabilities sub total	6,151	18,482	5,290
17 NET ASSETS LESS CURRENT LIABILITIES	3,879	(13,784)	1,635
<b>Non-Current Liabilities</b>			
18 Trade and other payables	194	194	171
19 Other financial liabilities			
20 Provisions			
21 Non-Current Liabilities sub total	194	194	171
22 TOTAL ASSETS EMPLOYED	3,685	(13,978)	1,464
<b>FINANCED BY: Taxpayers' Equity</b>			
23 General Fund	3,685	(13,978)	1,464
24 Revaluation Reserve			
25 Total Taxpayers' Equity	3,685	(13,978)	1,464

	Opening Balance Beginning of Apr 19	Closing Balance End of Oct 19	Closing Balance End of Mar 20
<b>EXPLANATION OF ALL PROVISIONS</b>			
26 Anticipated Legal Costs	30	30	0
27			
28			
29			
30			
31			
32			
33			
34			
35 Total Provisions	30	30	0

## ANALYSIS OF WELSH NHS RECEIVABLES (current month)

36 Welsh NHS Receivables Aged 0 - 10 weeks
37 Welsh NHS Receivables Aged 11 - 16 weeks
38 Welsh NHS Receivables Aged 17 weeks and over

£'000
1
0
0

## ANALYSIS OF TRADE &amp; OTHER PAYABLES (opening, current &amp; closing)

	£'000	£'000	£'000
39 Capital	0	0	0
40 Revenue	6,315	18,646	5,461

# HEIW

Period : Oct 19

This Table is currently showing 1 errors

Table H - Monthly Cashflow Forecast

		April £'000	May £'000	June £'000	July £'000	Aug £'000	Sept £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £,000	Total £,000
	<b>RECEIPTS</b>													
1	WG Revenue Funding - Cash Limit (excluding NCL)	17,300	14,000	14,500	14,000	8,500	15,500	17,500	16,500	17,000	20,000	21,500	36,627	212,927
2	WG Revenue Funding - Non Cash Limited (NCL)													0
3	WG Revenue Funding - Other (e.g. invoices)	3		100					44		44		44	235
4	WG Capital Funding - Cash Limit												146	146
5	Sale of Assets													0
6	Income from other Welsh NHS Organisations				28		54	18						100
7	Other - (Specify in narrative)	210	35	64	42	614	270	70						1,305
8	<b>TOTAL RECEIPTS</b>	<b>17,513</b>	<b>14,035</b>	<b>14,664</b>	<b>14,070</b>	<b>9,114</b>	<b>15,824</b>	<b>17,588</b>	<b>16,544</b>	<b>17,000</b>	<b>20,044</b>	<b>21,500</b>	<b>36,817</b>	<b>214,713</b>
	<b>PAYMENTS</b>													
9	Primary Care Services : General Medical Services													0
10	Primary Care Services : Pharmacy Services													0
11	Primary Care Services : Prescribed Drugs & Appliances													0
12	Primary Care Services : General Dental Services													0
13	Non Cash Limited Payments													0
14	Salaries and Wages	838	1,085	1,136	1,223	1,052	1,112	1,208	1,208	1,208	1,208	1,208	1,502	13,988
15	Non Pay Expenditure	12,288	13,537	13,515	15,670	15,011	14,292	15,547	16,494	16,048	17,359	18,617	34,964	203,340
16	Capital Payment												146	146
17	Other items (Specify in narrative)													0
18	<b>TOTAL PAYMENTS</b>	<b>13,126</b>	<b>14,622</b>	<b>14,651</b>	<b>16,893</b>	<b>16,063</b>	<b>15,404</b>	<b>16,755</b>	<b>17,702</b>	<b>17,256</b>	<b>18,567</b>	<b>19,825</b>	<b>36,612</b>	<b>217,474</b>
19	Net cash inflow/outflow	4,387	(587)	13	(2,823)	(6,949)	420	833	(1,158)	(256)	1,477	1,675	205	
20	Balance b/f	6,240	10,627	10,040	10,053	7,230	281	701	1,534	376	120	1,598	3,273	
21	Balance c/f	10,627	10,040	10,053	7,230	281	701	1,534	376	120	1,598	3,273	3,479	

Table I - PSPP

This table needs completing on a quarterly basis

NOTE: Data to 1 decimal place

30 DAY COMPLIANCE		YEAR TO DATE			FORECAST YEAR END		
PROMPT PAYMENT OF INVOICE PERFORMANCE		Target %	Actual %	Variance %	Target %	Forecast %	Variance %
1	% of NHS Invoices Paid Within 30 Days - By Value	95.0%	94.6%	-0.4%	95.0%	95.0%	0.0%
2	% of NHS Invoices Paid Within 30 Days - By Number	95.0%	85.7%	-9.3%	95.0%	88.0%	-7.0%
3	% of Non NHS Invoices Paid Within 30 Days - By Value	95.0%	99.7%	4.7%	95.0%	95.0%	0.0%
4	% of Non NHS Invoices Paid Within 30 Days - By Number	95.0%	96.1%	1.1%	95.0%	95.0%	0.0%

10 DAY COMPLIANCE		YEAR TO DATE			FORECAST YEAR END		
PROMPT PAYMENT OF INVOICE PERFORMANCE			Actual %			Forecast %	
5	% of NHS Invoices Paid Within 10 Days - By Value						
6	% of NHS Invoices Paid Within 10 Days - By Number						
7	% of Non NHS Invoices Paid Within 10 Days - By Value						
8	% of Non NHS Invoices Paid Within 10 Days - By Number						

This Table is currently showing 0 errors

Table J - 2019/20 Capital Resource Limit Management

£'000 100

Approved CRL issued at : 23/10/19

Ref:	Performance against CRL	Year To Date			Forecast		
		Plan £'000	Actual £'000	Variance £'000	Plan £'000	F'cast £'000	Variance £'000
	<i>Gross expenditure (accrued, to include capitalised finance leases)</i>						
	All Wales Capital Programme:						
	Schemes:						
1				0			0
2				0			0
3				0			0
4				0			0
5				0			0
6				0			0
7				0			0
8				0			0
9				0			0
10				0			0
11				0			0
12				0			0
13				0			0
14				0			0
15				0			0
16				0			0
17				0			0
18				0			0
19				0			0
20				0			0
21				0			0
22				0			0
23				0			0
24				0			0
25				0			0
26				0			0
27				0			0
28				0			0
29				0			0
30				0			0
31				0			0
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				0			0
41				0			0
42	Sub Total	0	0	0	0	0	0
	Discretionary:						
43	I.T.			0			0
44	Equipment			0			0
45	Statutory Compliance			0			0
46	Estates			0			0
47	Other	0	0	0	100	100	0

Ref:	Performance against CRL	Year To Date			Forecast		
		Plan £'000	Actual £'000	Variance £'000	Plan £'000	F'cast £'000	Variance £'000
48	Sub Total	0	0	0	100	100	0
	Other Schemes:						
49				0			0
50				0			0
51				0			0
52				0			0
53				0			0
54				0			0
55				0			0
56				0			0
57				0			0
58				0			0
59				0			0
60				0			0
61				0			0
62				0			0
63				0			0
64				0			0
65				0			0
66				0			0
67				0			0
68				0			0
69	Sub Total	0	0	0	0	0	0
70	Total Expenditure	0	0	0	100	100	0
	Less:						
	Capital grants:						
71				0			0
72				0			0
73				0			0
74				0			0
75				0			0
76	Sub Total	0	0	0	0	0	0
	Donations:						
77				0			0
78	Sub Total	0	0	0	0	0	0
	Asset Disposals:						
79				0			0
80				0			0
81				0			0
82				0			0
83				0			0
84				0			0
85				0			0
86				0			0
87				0			0
88				0			0
89				0			0
90	Sub Total	0	0	0	0	0	0
91	Technical Adjustments			0			0
92	CHARGE AGAINST CRL	0	0	0	100	100	0
93	PERFORMANCE AGAINST CRL (Under)/Over		(100)			0	

This Table is currently showing 0 errors

Table K - In Year Capital Scheme Profiles

Ref:	All Wales Capital Programme: Schemes:	Project Manager	2019-20 Forecast		Capital Expenditure Monthly Profile												Total £'000	Risk Level
			Min. £'000	Max. £'000	April £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000		
1																	0	
2																	0	
3																	0	
4																	0	
5																	0	
6																	0	
7																	0	
8																	0	
9																	0	
10																	0	
11																	0	
12																	0	
13																	0	
14																	0	
15																	0	
16																	0	
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25																	0	
26																	0	
27																	0	
28																	0	
29																	0	
30																	0	
31																	0	
32																	0	
33																	0	
34	Sub Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Discretionary:																		
35	Schemes identified and costed. To be approved through exe	TBC	100	100										30	30	40	100	Low
36																	0	
37																	0	
38																	0	
39																	0	
40	Sub Total		100	100	0	0	0	0	0	0	0	0	0	30	30	40	100	
Other Schemes:																		
41																	0	
42																	0	
43																	0	
44																	0	
45																	0	
46																	0	
47																	0	
48																	0	
49																	0	
50																	0	
51																	0	
52																	0	
53																	0	
54																	0	
55																	0	
56																	0	
57																	0	
58																	0	
59																	0	
60																	0	
61	Sub Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
62	Total Capital Expenditure		100	100	0	0	0	0	0	0	0	0	0	30	30	40	100	

Table L - Capital Disposals

This Table is currently showing 0 errors

A: In Year Disposal of Assets

	Description	Date of Ministerial Approval to Dispose (Land & Buildings only)	Date of Ministerial Approval to Retain Proceeds > £0.5m	Date of Disposal	NBV	Sales Receipts	Cost of Disposals	Gain/ (Loss)	Comments
		MM/YY (text format, e.g. Apr 2019)	MM/YY (text format, e.g. Apr 2019)	MM/YY (text format, e.g. Feb 2020)	£'000	£'000	£'000	£'000	
1								0	
2								0	
3								0	
4								0	
5								0	
6								0	
7								0	
8								0	
9								0	
10								0	
11								0	
12								0	
13								0	
14								0	
15								0	
16								0	
17								0	
18								0	
19								0	
	Total for in-year				0	0	0	0	

B: Future Years Disposal of Assets

	Description	Date of Ministerial Approval to Dispose (Land & Buildings only)	Date of Ministerial Approval to Retain Proceeds > £0.5m	Date of Disposal	NBV	Sales Receipts	Cost of Disposals	Gain/ (Loss)	Comments
		MM/YY (text format, e.g. Apr 2020)	MM/YY (text format, e.g. Apr 2020)	MM/YY (text format, e.g. Feb 2021)	£'000	£'000	£'000	£'000	
20								0	
21								0	
22								0	
23								0	
24								0	
25								0	
26								0	
27								0	
28								0	
29								0	
30								0	
31								0	
32								0	
33								0	
34								0	
35								0	
36								0	
37								0	
38								0	
	Total for future years				0	0	0	0	

[illegible]

Invoices paid since the end of the month		
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Total outstanding as per MR submission date	0.00	0.00
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HEIW

Period : Oct 19

Table N - General Medical Services  
Table to be completed from Q1

This Table is currently showing 0 errors

Operating Expenditure - ring fenced GMS budget

SUMMARY OF GENERAL MEDICAL SERVICES FINANCIAL POSITION		WG Allocation	Current Plan	Forecast Outturn	Variance	Year to Date
	LINE NO.	£000's	£000's	£000's	£000's	£000's
Global Sum	1					
MPIG Correction Factor	2					
Total Global Sum and MPIG	3				0	0
Quality Aspiration Payments	4					
Quality Achievement Payments	5					
Total Quality	6				0	0
Direct Enhanced Services (To equal data in Section A (i) Line 29 )	7				0	
National Enhanced Services (To equal data in Section A (ii) Line 42 )	8				0	
Local Enhanced Services (To equal data in Section A (iii) Line 95 )	9				0	
Total Enhanced Services (To equal data in section A line 96)	10		0	0	0	0
LHB Administered (To equal data in Section B Line 114 )	11				0	
Premises (To equal data in section C Line 150 )	12				0	
IM & T	13				0	
Out of Hours (including OOHDF)	14				0	
Dispensing (To equal data in Line 166 )	15				0	
Total	16	0	0	0	0	0
SUPPLEMENTARY INFORMATION						
Directed Enhanced Services Section A (i)	LINE NO.	£000's	£000's	£000's	£000's	£000's
Learning Disabilities	17				0	
Childhood Immunisation Scheme	18				0	
Mental Health	19				0	
Influenza & Pneumococcal Immunisations Scheme	20				0	
Services for Violent Patients	21				0	
Minor Surgery Fees	22				0	
MENU of Agreed DES						
Asylum Seekers & Refugees	23				0	
Care of Diabetes	24				0	
Care Homes	25				0	
Extended Surgery Opening	26				0	
Homeless	27				0	
Oral Anticoagulation with Warfarin	28					
TOTAL Directed Enhanced Services (must equal line 7)	29		0	0	0	0
National Enhanced Services A (ii)	LINE NO.	£000's	£000's	£000's	£000's	£000's
INR Monitoring	30				0	
Shared care drug monitoring (Near Patient Testing)	31				0	
Drug Misuse	32				0	
IUCD	33				0	
Alcohol misuse	34				0	
Depression	35				0	
MS	36				0	
Sexual health	37				0	
Minor injury services	38				0	
First response services	39				0	
Services to the homeless	40				0	
Intra partum care	41				0	
TOTAL National Enhanced Services (must equal line 8)	42		0	0	0	0
Local Enhanced Services A (iii)	LINE NO.	£000's	£000's	£000's	£000's	£000's
ADHD	43				0	
Asylum Seekers & Refugees	44				0	
Cardiology	45				0	
Care Homes	46				0	
Care of Diabetes	47				0	
Chiropody	48				0	
Counselling	49				0	
Depo - Provera (including Implanon & Nexplanon)	50				0	
Dermatology	51				0	
Dietetics	52				0	
Drugs Misuse	53				0	
Extended Minor Surgery	54				0	
Zoladex (inc Gonaderlins)	55				0	
Homeless	56				0	
HPV Vaccinations	57				0	
Immunisations (inc Pertussis excluding DES - Childhood Imm & Influenza & Pneumococcal Imm)	58				0	
Learning Disabilities	59				0	
Lithium / INR Monitoring	60				0	
Local Development Schemes	61				0	
Mental Health	62				0	
Methadone	63				0	
Minor Injuries	64				0	
MMR	65				0	
Multiple Sclerosis	66				0	
Muscular Skeletal	67				0	
Nursing Homes	68				0	
Orthopaedic (Upper Limb GPwSi/Clinical Assessments)	69				0	
Osteopathy	70				0	
Phlebotomy	71				0	
Physiotherapy (inc MT3)	72				0	

Referral Management	73				0	
Respiratory (inc COPD)	74				0	
Sexual Health Services	75				0	
Shared Care	76				0	
Smoking Cessation	77				0	
Student Patient Registration	78				0	
Substance Misuse	79				0	
Suturing	80				0	
Swine Flu	81				0	
Transport/Ambulance costs	82				0	
Vasectomy	83				0	
Weight Loss Clinic (inc Exercise Referral)	84				0	
Wound Care	85				0	
	86				0	
	87				0	
	88				0	
	89				0	
	90				0	
	91				0	
	92				0	
	93				0	
	94				0	
<b>TOTAL Local Enhanced Services (must equal line 9)</b>	<b>95</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>TOTAL Enhanced Services (must equal line 10)</b>	<b>96</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
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**GENERAL MEDICAL SERVICES**  
**Operating Expenditure**

		WG Allocation £000's	Current Plan £000's	Forecast Outturn £000's	Variance £000's	Year to Date £000's
<b>LHB Administered</b>	<b>Section B</b>	<b>LINE NO.</b>				
Seniority		97				
Doctors Retainer Scheme Payments		98				
Locum Allowances consists of adoptive, paternity & maternity		99				
Locum Allowances : Cover for Sick Leave		100				
Locum Allowances : Cover For Suspended Doctors		101				
Prolonged Study Leave		102				
Recruitment and Retention (including Golden Hello)		103				
Appraisal - Appraiser Costs		104				
Primary Care Development Scheme		105				
Designated Area Allowance		106				
Initial Practice Allowance		107				
Assistant's Allowance		108				
Associate Allowance		109				
Supply of syringes & needles		110				
Pneumococcal Campaign		111				
Pneumococcal Catch-up		112				
Other (please provide detail below, this should reconcile to line 135)		113				
<b>TOTAL LHB Administered (must equal line 11)</b>		<b>114</b>			<b>0</b>	<b>0</b>

	LINE NO.	£000's	£000's	£000's	£000's	£000's
<b>Analysis of Other Payments (line 113)</b>						
Additional Managed Practice costs (costs in excess of Global Sum/MPiG)	115					
CRB checks	116					
GP Ambulance bookings	117					
GP Locum payments	118					
GP Locums Employers Superannuation	119					
LHB Locality group costs	120					
Managing Practice costs (LHB employed staff working in GP practices to improve GP services)	121					
Primary Care Initiatives	122					
Salaried GP costs	123					
Stationery & Distribution	124					
Training	125					
Translation fees	126					
	127					
	128					
	129					
	130					
	131					
	132					
	133					
	134					
<b>TOTAL of Other Payments (must equal line 113)</b>	<b>135</b>					<b>0</b>

	LINE NO.	£000's	£000's	£000's	£000's	£000's
<b>Premises</b>						
Notional Rents	136					
Actual Rents: Health Centres	137					
Actual Rents: Others	138					
Cost Rent	139					
Clinical Waste	140					
Borrowing Costs	141					
Rates, Water, sewerage etc	142					
Health Centre Charges	143					
Improvement Grants	144					
N/Contract Premises Items	145					
District Valuers Fees	146					
Maintenance Allowance	147					
Legal Fees	148					
All other Premises (please detail below which should reconcile to line 158)	149					
<b>TOTAL Premises (must equal line 12)</b>	<b>150</b>				<b>0</b>	<b>0</b>

Analysis of Other Premises (Line 149)	LINE NO.	£000's	£000's	£000's	£000's	£000's
	151					
	152					
	153					
	154					
	155					
	156					
	157					
<b>TOTAL of Other Premises (must equal line 149)</b>	<b>158</b>					<b>0</b>

**Memorandum item**

Enhanced Services included above but in dispute with LMC (TOTAL)	159					
Enhanced Services included above but not yet formally agreed LMC	160					

**GENERAL MEDICAL SERVICES**  
**Dispensing**

		WG Allocation £000's	Current Plan £000's	Forecast Outturn £000's	Variance £000's	Year to Date £000's
<b>Dispensing Data</b>	<b>LINE NO.</b>					
<b>Cost of Drugs and Appliances, after discounts and plus container allowance (and plus VAT where applicable)</b>						
Dispensing Doctors	161					
Prescribing Medical Practitioners - Personal Administration	162					
Dispensing Service Quality Payment	163					
<b>Professional Fees and on-cost</b>						
Dispensing Doctors	164					
Prescribing Medical Practitioners - Personal Administration	165					
<b>TOTAL DISPENSING DATA (must equal line 15)</b>	<b>166</b>				<b>0</b>	<b>0</b>

<b>Where WG allocation and Current plan differ this section must be completed</b>		Allocation	Plan
<b>Movements between Allocation and Current Plan</b>	<b>167</b>		
Difference		0	
	168		
	169		
	170		
	171		
	172		
	173		
	174		
	175		
	176		
	177		
	178		
	179		
	180		
	181		
	182		
	183		
	184		

HEIW

Period : Oct 19

Table O - General Dental Services

This Table is currently showing 0 errors

Table to be completed from Q1

Operating Expenditure from the revenue allocation for the dental contract

SUMMARY OF DENTAL SERVICES FINANCIAL POSITION		WG Allocation	Current Plan	Forecast Outturn	Variance	Year to Date
Expenditure / activities included in a GDS contract and / or PDS agreement	LINE NO.	£000's	£000's	£000's	£000's	£000's
Gross Contract Value - Personal Dental Services	1				0	
Gross Contract Value - General Dental Services	2				0	
Emergency Dental Services (inc Out of Hours)	3				0	
Additional Access	4				0	
Business Rates	5				0	
Domiciliary Services	6				0	
Maternity/Sickness etc.	7				0	
Sedation services including GA	8				0	
Seniority payments	9				0	
Employer's Superannuation	10				0	
Oral surgery	11				0	
OTHER (PLEASE DETAIL BELOW)	12				0	
<b>TOTAL DENTAL SERVICES EXPENDITURE</b>	<b>13</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
OTHER (PLEASE DETAIL BELOW) - Activities / expenditure <u>not</u> included in a GDS contract and / or PDS agreement. This includes payments made under other arrangements e.g. GA under an SLA and D2S, plus other or one off payments such as dental nurse training	LINE NO.		£000's	£000's	£000's	£000's
Emergency Dental Services (inc Out of Hours)	14					
Additional Access	15					
Domiciliary Services	16					
Sedation services including GA	17					
Continuing professional development	18					
Occupational Health / Hepatitis B	19					
Refund of patient charges	20					
Design to Smile	21					
Other Community Dental Services	22					
Gwen Am Byth-oral health in care homes	23					
Dental Foundation Training/Vocational Training	24					
DBS/CRB checks	25					
Health Board staff costs associated with the delivery / monitoring of the dental contract	26					
Oral Surgery	27					
Orthodontics	28					
Special care dentistry e.g. WHC/2015/002	29					
Oral Health Promotion/Education	30					
	31					
	32					
	33					
	34					
	35					
	36					
	37					
	38					
	39					
	40					
	41					
	42					
<b>TOTAL OTHER (must equal line 12)</b>	<b>43</b>			<b>0</b>		<b>0</b>
RECEIPTS						
<b>TOTAL DENTAL SERVICES INCOME (Enter as a negative value)</b>	<b>44</b>				<b>0</b>	



**GIG**  
CYMRU  
**NHS**  
WALES

Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

<b>Meeting Date</b>	<b>28 November 2019</b>	<b>Agenda Item</b>	<b>4.2</b>
<b>Report Title</b>	<b>Mid-Year Review of Annual Plan</b>		
<b>Report Author</b>	Chris Payne, Deputy Director Planning, Performance & Digital		
<b>Report Sponsor</b>	Alex Howells, Chief Executive		
<b>Presented by</b>	Alex Howells, Chief Executive		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	This report is to provide the Board with an update against commitments in the Annual Plan for 19/20 at the mid-year point.		
<b>Key Issues</b>	<ul style="list-style-type: none"> <li>Overall good progress being made in year against commitments, a number of which have been considered by the Board at formal or development meetings.</li> <li>A number of commitments will feed into the IMTP which is currently in development.</li> <li>The main areas where significant progress will not be made until 20/21 include SIFT and digital.</li> </ul>		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
			✓
<b>Recommendations</b>	Members are asked to: <ul style="list-style-type: none"> <li><b>Note</b> this report</li> </ul>		

## **Mid-Year Report on Annual Plan 2019/20**

### **1. INTRODUCTION**

This report is to update the Board on progress against commitments in the Annual Plan at the mid-year point.

### **2. BACKGROUND**

The Annual Plan has been approved by both the Board and Welsh Government.

As a number of items relate to strategic developments separate papers and updates have been provided through the course of the year to both formal Board meetings and Board Development Sessions.

The information included in this report was also share with Welsh Government as part of the Joint Executive Team meeting in October.

### **3. GOVERNANCE AND RISK ISSUES**

Any risk issues are dealt with in relation to individual projects and developments. There are no additional risks arising from this report.

### **4. FINANCIAL IMPLICATIONS**

The Finance Report on the Board agenda outlines the mid-year financial position associated with the delivery of this plan

### **5. RECOMMENDATION**

That the Board notes the report.

Governance and Assurance				
<b>Link to corporate objectives</b> (please ✓)	As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand	Building a sustainable and flexible health and care workforce for the future.	With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.	Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
	✓	✓	✓	✓
	Improving opportunities for use of technology and digitalisation in the delivery of education and care.	Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales	Demonstrating value from investment in the workforce and the organisation.	
	✓	✓	✓	
<b>Quality, Safety and Patient Experience</b>				
A number of objectives relate to this specific area.				
<b>Financial Implications</b>				
Objectives being undertaken in line with budget allocations. Where relevant additional resources have been obtained with agreement through Welsh Government				
<b>Legal Implications (including equality and diversity assessment)</b>				
<b>Staffing Implications</b>				
N/A.				
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>				
A number of objectives being progressed support the main areas identified through the Wellbeing of Future Generations (Wales) Act 2015.				
<b>Report History</b>	None			
<b>Appendices</b>	Progress update against Annual plan			

## **Mid-Year Review of Annual Plan 2019/20**

We set out some ambitious objectives and programmes of work in our first plan as Health Education and Improvement Wales. At the mid-year point we have reviewed all of the commitments and summarised this in the attached mid-year report. This highlights progress and areas where we need to focus more attention in the second half of the year. The financial position associated with delivery of the plan is set out in a separate agenda item.

Overall we are making good progress in implementing our Annual Plan. Whilst we have continued to focus on building solid foundations for the organisation, we believe we have also been able to shift our time and attention to the plans that we need to deliver to support improvement across the health and care system.

Some of the achievements in relation to our organisational foundations include the following:

- Significant progress in embedding our approach to diversity and equality into our policies, procedures and culture as an organisation
- Establishment of an Education Commissioning and Quality Committee to support the Board in relation to its central education functions
- Good progress in embracing Welsh Language in the organisation and a positive meeting with the Welsh Language Commissioner
- Resolution of internal recruitment backlog to enable vacancies to be filled
- Implementation of communications and engagement strategy, including a series of roadshows at NHS sites across Wales to target staff engaged in education and training as well as our trainees and students.
- Establishment of a partnership forum

**Some of the key areas of progress in relation to our annual plan include:**

- Extensive engagement and consultation in the development of the Workforce Strategy for Health and Social Care
- Acceleration of work on succession planning and leadership development and in particular a “movement” in support of compassionate leadership
- An approved education and training plan designed to secure further investment in shortage areas and improve solutions for critical service challenges in 20/21
- A strategic review of health professional education informed by stakeholder engagement to align with the needs of the Workforce Strategy
- Key investments in education, training and workforce development that will make a tangible difference to services and patient care – Pharmacy pre -registration training, Optometry post graduate education, GP trainees, Foundation doctors.

Progress against each of the Strategic Objectives is outlined in the following sections:



## **Strategic Objective 1**

***As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand***

### **1A Implement an internal and external communication and engagement strategy**

Effective communication and engagement is critical to the success of HEIW, the delivery of our functions and supporting A Healthier Wales. The HEIW Communications and Engagement Strategy (Phase 2 April 2019 – March 2020) is based on our vision, purpose, strategic objectives, values and feedback from staff and stakeholders. It describes how we will communicate and engage effectively with staff, key stakeholders and partners to:

- create an inclusive and respectful working environment;
- build on existing and establish new partnerships understanding each other's needs, and working together to build a sustainable and flexible health and care workforce in Wales, and
- raise the profile of HEIW and awareness of HEIW's role in education, training, leadership, workforce planning and digitalisation.

A detailed update on the implementation of the strategy is included on the November Board agenda. Examples of work undertaken to date include:

#### **Internal:**

- Regular bilingual CEO staff bulletin sent directly to all HEIW staff engaging with them regarding ongoing work, future plans, operational and corporate change, and opportunities to get involved.
- Regular intranet bulletins providing staff with corporate, operational and social news with opportunities to get involved. (Average 71 views per bulletin).
- Targeted off-site corporate email for HEIW staff based across Wales (not in HQ) providing them with corporate information relevant to them.
- All staff away days supporting collaborative working, learning and development.
- Monthly CEO staff open forum – an opportunity for staff to meet with the CEO and other executive directors to ask questions, problem solve, share ideas, discuss ongoing work and future plans.
- Lunch and learns – with video conferencing for off-site staff to take part.
- Regular staff inductions for colleagues new to the organisation.
- Invitation to off-site colleagues to meet Board members after board meetings at various locations across Wales.
- Staff survey: 48% response rate including sessional staff.
- Regular team meetings.

#### **External:**

- Regular bilingual CEO stakeholder bulletins sent to over 1,000 stakeholders updating them on HEIW work and providing opportunities to contribute and shape HEIW work going forwards.
- Regular bilingual use of social media as an information, engagement, sharing and discussion tool including Twitter, Facebook, You Tube and LinkedIn. As well as producing HEIW original content we also use our social media accounts to share information from partner organisations including recruitment, new services and health and well-being messages.

- HEIW Roadshow 2019 - visiting Health Boards and Trusts across Wales meeting with healthcare trainees, students, educators and those responsible for education. These are providing an opportunity for us to introduce HEIW and ourselves, and to listen and gain feedback on education experiences to inform future provision of healthcare education in Wales. Roadshows to date have been attended by approximately 300 people.
- Bilingual HEIW national stakeholder events – one in North Wales and one in South Wales – attended by approximately 200 people representing regulators, NHS Wales, social care, education, private sector, professional bodies and Welsh Government. These events provided us with the chance to meet face to face with partners and stakeholders and inform them of our ongoing work such as the workforce strategy for health and social care, and how our work contributes to achieving A Healthier Wales. In addition, they have provided partners and stakeholders with an opportunity to contribute to our IMTP and future work. This has been particularly beneficial helping us to ensure our work aligns with that of partner organisations and also identifying further openings for collaborative working.
- Bilingual Board meetings at sites across Wales providing an opportunity for staff and stakeholders from across Wales to attend and meet the Board.
- Over 300 planned external communication / engagement activities such as advisory groups, peer groups, forums, learning events, reviews, meetings, ensuring regular dialog and collaboration with partners and stakeholders directly informing and shaping our work.

## **1B Developed and implemented a People and OD strategy for the new integrated organisation**

We have undertaken a series of HR roadshows for staff across Wales and with internal working groups have developed the principles for the People and OD Strategy. The principles have been reviewed and refined by the Executive Team and shared with the Trade Unions and internal groups (i.e. the Culture Group, Operational Management Group and the Senior Leadership Team) for consultation and review. It is anticipated that over the next quarter the document will be finalised in the light of the Workforce Strategy for Health and Social Care and submitted for final approval by the Executive Team with a view to launching and implementing the strategy in the spring. The new individual performance management/appraisal framework has also been implemented based on our values and behaviours framework. HR capacity has been a challenge during the first half of the year, and in year milestones have been adjusted to take account of this.

## **1C Established a comprehensive framework of policies, processes and systems for the new organisation including Welsh Language, wellbeing and diversity requirements**

A very constructive meeting was held with the Welsh Language Commissioner in August who was pleased with the progress made by HEIW regarding internal Compliance issues and we will be working with the Commissioner to ensure that the most appropriate Welsh Language Standards are applied to HEIW. The Welsh Language Services Manager has been heavily involved with the current Education Commissioning process, with a number of conversations and meetings ongoing with Education providers regarding Welsh language provision over the next decade.

We have put in place a robust policy framework. This is underpinned by a policy register which ensures that policies are reviewed on a regular basis and kept up to date.

Significant progress is being taken forward in embedding our approach to diversity and equality into our policies, procedures and culture as an organisation. This includes:

#### Staff engagement

- HEIW Inclusion Champions
- HEIW Diversity and Inclusion Group
- Time to Change Champions

#### Accreditations

- Stonewall Diversity Champion
- Time to Change – Employee Pledge
- Disability Confident
- Dying to Work TUC
- Anti-Violence Collaboration
- Communication Access Symbol – 1st organisation in Wales to make a commitment to adopting Communication Access Symbol

#### Training and processes

- Equality Impact Assessment development – including provision of training with 20 staff have been trained to date by Diverse Cymru; development of an Integrated EIA Proforma and we are in the process of developing a process and guidance which will be completed by end of year
- Development and delivery of Unconscious Bias training delivered to 30 staff to date

#### Strategy

- Currently working as part of a collaborative partnership with a number of Public Sector Bodies to develop Strategic Equality Plan 2020-24

Delivery against other commitments included establishment of an Operational Forum, a health and safety plan, and establishment of an internal IT support team.

## **Strategic Objective 2**

### ***Building a sustainable and flexible health and care workforce for the future***

#### **2A Publish a transformational workforce strategy for health and social care as per 'A Healthier Wales'.**

The Board has received regular updates during the course of the year on the development of the workforce strategy, including the engagement and consultation phases. In light of recent discussions with Welsh Government once the Boards of both HEIW and Social Care Wales have considered and approved the draft strategy in December 2019, the document will be submitted to Welsh Government who will finalise and launch the strategy.

#### **2Bi Developed and improved the education and training available to Health Professionals and healthcare staff.**

The workforce modernisation team continues to develop and improve the education and training available to Health Professionals and healthcare staff. They are currently managing the Primary Care Health Care Assistant (PC HCA) Development Group and its workstreams to progress the education and training agenda for non-registered & non-clinical staff. Work continues to manage the existing qualification review (L3) Certificate and Diploma in Primary Care and quality assurance which should be completed in Q3.

The Qualification development for 'sign posting' staff involves finalising the report of research commissioned from USW, preparing for publication in approved journals and consideration of recommendations for future actions. "A Task & Finish group has been established with core members identified and an invitation issued for additional members to join the group to ensure all Wales input. The L2/3 qualification development has been initiated with a December 2019 deadline for publication.

The Qualification development for (L4) Wellbeing Advisors is progressing satisfactorily while the Qualification development for (L2) non-clinical staff: Reception/admin is also ongoing with a deadline at the end of Q3. Work is progressing to scope availability of existing education and training opportunities and a task and finish group will be convened to develop this qualification.

Software (C&V UHB) that is able to track, manage and deliver work-based learning in primary care from a central hub that facilitates a positive learning environment and assists the assessment process will be trialled by the end of Q3.

#### **2Bii Developed and improved the education and training available to Dental Teams**

The dental team devised a number of actions that they wished to implement to improve the education and training available to Dental Teams across Wales. One of these actions was to align the Quality Improvement Educators to LHBs. This was implemented in Q1. The team have also developed Regional Lead educators and this was implemented in North Wales in Q1 with plans to complete this in South Wales to follow. Plans were also put in place to reduce the number of dental educators in each region and this is being phased in. Work has also been undertaken to consolidate the current CPD topic plan, which has now been implemented in the North Wales Region. During Q1 the team continued to complete the Hands-on facilities decommissioning process as part of the clinical skills strategy with the decommissioning of the Facility in Ysbyty Gwynedd.

One of the significant pieces of work to be undertaken by the Dental team was the implementation of the new GDC standards. During Q1, meetings were arranged with all relevant stakeholders (LHBs) to take place in Q2 and Q3 to identify the gaps in compliance with the GDC standards and to develop interventions to resolve any gaps. By the end of Q4 the team will have undertaken a local benchmark of HEIW's position against the GDC standards.

Arrangements have also been agreed in relation to a single lead employer arrangement for dental trainees, supported by NHS Shared Services Partnership. This will improve trainee experience and enable them to focus on training.

## **2Biii Developed and improved the education and training available to Doctors in Training**

The Board received a paper in January 2019 on the quality management system for postgraduate medical education, and we continue to review this on a monthly basis to focus attention on appropriate training issues. This has been particularly important in light of the Cwm Taf Maternity Services Review.

We have developed plans to professionalise the training infrastructure in PGME through a more consistent and transparent approach to Training Programme Director roles, and anticipate implementing changes to this over the next 6 months.

One of the key points raised by doctors in training are the difficulties they experience when they are required to move between health boards during their rotations in Wales. This includes the multiple amounts of employment paperwork to be completed during their training; the absence of continuous service with one employer making it difficult to access employee benefits such as childcare vouchers, the duplication of information needed in relation to occupational health services and application for mortgages and other financial products and tax issues. We have been developing proposals for a single lead employer based on the model in place for General Practice Trainees. Discussions are ongoing with NWSSP and HEIW to determine the likely cost of implementing the model. Once the preferred single lead employer has been agreed, an implementation group will be established to introduce a single lead employer for August 2020 commencement for high priority specialties.

## **2Biv Developed and improved the education and training available to Pharmacists**

The Board will recall that in February 2019, HEIW submitted a business case to Welsh Government to implement at pace a new model of Pre-Registration Pharmacist Training in Wales. This programme will deliver a one-year pre-registration pharmacist training programme with meaningful multi-sector experience delivered through quality assured training sites. Key changes include the introduction of a centralised recruitment process, central employment of trainees, centralised training programme and enhanced quality management processes. This is the first phase of a change strategy to move towards a MPharm undergraduate degree programme designed to transform the pharmacy workforce in Wales. One of the anticipated benefits will be the transformation of a model that produces registrants to work in either hospital or community practice, to a multi-sectoral programme that will develop registrants who can move flexibly between sectors, including primary care and take up new roles being developed across all sectors. The intention is to implement the change by the August 2020 intake of trainees. In addition, the number of places was increased from 120 to 200, supporting the shift in focus needed to underpin A Healthier Wales.

The key milestones for Q1 and Q2 have largely been met. In terms of the recruitment and training of staff to manage this programme, the recruitment of the four regional leads did not progress as planned due to a recruitment backlog, but these posts have now been appointed.

Work is progressing well to develop and implement the curriculum and the training necessary to support the multi-sector placements. Q2 has also seen the completion of a quality management structure and the planning to ensure that the quality assurance framework is completed in Q3.

## **2C Developed a single comprehensive framework encompassing advanced and consultant practice, extend skills and postgraduate career development**

We have secured a Director of Workforce & OD to Chair the all-Wales Steering group which will oversee and guide this programme of work over the next 18 months. The group has membership across professions and a partnership forum has also been established. The team have established links with HEE to share, align and learn from similar work/research regarding advanced practice and extended practice. A basic literature review has initially been undertaken to identify national and international evidence/best practice and further profession specific literature added to the review by members of the group. The importance of this work in supporting a prudent approach to workforce will be further highlighted through the workforce strategy.

## **2D Worked with partners to scope careers activity across health and opportunities to widen access**

HEIW has also been working with Social Care Wales to promote NHS Wales and Care careers at a range of events and meetings including 2 recent Skills Cymru events reaching over 10,000 people, the majority being school age. Work to review best practice across UK and beyond has commenced to inform future strategy and to develop an on-line presence. HEIW is working closely with the Welsh Government Widening Access team, in readiness to take over this agenda in Q4, April 2020. We have established a cross directorate HEIW internal group to pool expertise and experience in developing career opportunities and development for our own staff.

By the end of Q4, the Careers team will have established a well-attended, fully bi-lingual (including agenda and action points) Careers Network with membership across health, care, education and government to take forward this agenda in a consistent manner.

Going forward in Q3 and Q4, Regional Advisor events are scheduled for November and December aimed at anyone providing careers education, information, advice and guidance. A large network event will be held in February with stakeholders to inform a careers strategy which establishes health (and social care) as a reputable brand and the sector of choice for our future workforce.

## **2E Developed and implemented the 2020/21 Education and Training Commissioning Plan for health professionals**

This is the first year HEIW has developed a national education and training plan for the health workforce. This plan is for one year (2020/21) and looks at future education and training needs for the medical and wider health professional workforce. The recommendations are based on an assessment of service and workforce need, as identified by HEIW having considered a wide range of available evidence including: NHS organisation's IMTPs, specific workforce supply modelling, changes in employment with increasing numbers of staff working less than full time and increasing use of agency staff. It is proposed to increase a number of student positions for the wider healthcare workforce, this includes: adult and mental health nursing, midwifery, radiography, physiotherapy and healthcare science. Across the medical workforce it is proposed to increase the number of trainees across a range of service areas including; emergency medicine, intensive care medicine, clinical radiology and old age psychiatry. The

plan was discussed at both the Education Commissioning and Quality Committee and the Board in the summer prior to submission to Welsh Government. The Minister for Health and Social Services has recently approved the plan and the focus on the remainder of the year will be on working with Universities and Health Boards to implement the increase in commissioned places.

During 19/20 we have also commenced a strategic review of health professional education contracts to inform a re-procurement exercise. This has been a key item on the Education Quality and Commissioning Committee agenda. The renewal of the current contracts has provided us with the opportunity to review, and consider, the configuration of education provision in Wales with significant stakeholder input. KPMG have completed the first phase of this work and we have recently shared this with stakeholders. The Director of Nursing is now visiting each Executive Team across NHS Wales to discuss the findings of the review and seek feedback. The timescale for the next steps have been adjusted to take account of the Welsh Government's consideration of future bursary arrangements.

### **Strategic Objective 3**

#### ***With Social Care Wales shaping the workforce to deliver care closer to home***

##### **3A Implemented an increase in the number of GP Training places offered in Wales**

Another business case considered by the Board at the end of 18/19 related to the expansion and redesign of GP training in Wales. We have successfully implemented an increase in the number of GP training places from 136 to over 180 and in doing so have increased the time spent training in primary care. This change to the model of GP training is being introduced in a phased manner with Gwent, Cardiff, Wrexham, Dyffryn Clwyd and Bangor being the first GP Training Schemes to adopt this model. Plans are currently underway to roll out the revised model across Wales for the next recruitment round for posts commencing in August 2020 and February 2021. In parallel with this, the educational infrastructure in terms of the number of GP practices and associated staffing requirements is being increased. This outcome will see an increase in the number of GPs working in NHS Wales who will be able to contribute to the delivery of a sustainable and flexible primary care service.

To date, the key milestones for Q1 and Q2 have been met. An initial increase in training practices in Cardiff has commenced with 16 doctors from 8 practices commencing the Prospective Trainer Course shortly. In the next few weeks letters will be sent to practices across Wales seeking expressions of interest in becoming a training practice. The internal staffing infrastructure within HEIW has expanded with the addition of one new Associate Dean, one new Programme Director has been appointed in Cardiff and one in Gwent and two new administrative posts have been filled.

Discussions are underway with Welsh Government with regard to estates and additional provision is being made for indemnity cover.

##### **3B Developed a workforce plan for the new primary care model based on enhanced and extended multidisciplinary teams**

The HEIW Primary Care workstream has been developed to support matrix working that will underpin delivery of key components of the Primary Care Workforce and Organisational Development (PC WOD) workstream of the Strategic Programme for Primary Care. The Board received a briefing on this work at the Board Development Session in October. The workstream is chaired by the Chief Executive and is encompassing:

- Emerging workforce model
- Workforce planning for clusters
- Education and training capacity in primary care
- Changes in GP, GDP, optometrist and pharmacy training
- Primary and community nursing roles
- Health Care Support Worker Development
- Wellbeing Advisors
- Social Prescribing and care navigation
- Leadership
- Compendium of best practice
- Welsh Language



### **3C Created a framework to expand education and training in primary and community care settings across all professional groups**

This work is linked with the previous objective and will be progressed in the next half of the year as it is a key objective for the new Head of Allied Health Professionals when appointed. This work is critical to the availability of an education infrastructure and appropriate clinical placements to meet future demand. This needs to link to emerging concepts of primary care academies being developed by Health Boards.

### **3D Worked with Social Care Wales to address priority workforce requirements including those arising from Regional partnership Boards, to deliver A Healthier Wales**

The transformation fund proposals developed by Regional Partnership Boards are still in development and the workforce implications are not yet clear. HEIW's input to RPBs has been limited to date in part due to capacity and in part due to the mechanisms for involvement in this work. We look forward to being involved in a learning event in January which will enable us to review the workforce models that are being developed and identify where and how we can add value. The workforce strategy will also prioritise this work which will need to be included in the development of our IMTP.

#### **Development of a joint health and social care Induction framework**

An induction programme has been developed in collaboration with Social Care Wales, Hywel Dda and local FE provision. The programme has been finalised and the first managers meeting has been delivered. The first cohort of learners were recruited and commenced the pilot induction programme within the Carmarthenshire area. A Managers briefing has been undertaken for the Pembrokeshire cohort. At Q2, the second cohort of learners in the Pembrokeshire area were being recruited.

In Q3, plans have been made to undertake a Managers briefing for Ceredigion. In early Q4, the third cohort of learners will be recruited and commence pilot induction programme within the Ceredigion area. Between March and December 2020, an evaluation of the pilot will be undertaken and will make recommendations for future delivery models.

#### **Strategic Objective 4**

***Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges***

#### **4Ai Developed workforce solutions to support NHS Organisations in improving care in Unscheduled Care including urgent OOH Primary Care**

The Board received a paper outlining HEIW support provided to Urgent OOH Primary Care in September. In addition to our input to the peer review process specific work has included:

- Website to facilitate attraction, recruitment and induction
- Competency framework for urgent care practitioners.
- Clinical Leadership programme.
- Maximise the role of HCSW.
- Behavioural Science Approach to help empower teams in managing risk.
- Training on Verification of Death (VOD).
- Increasing the role of Community Pharmacy.

In addition work has been progressed to support the workforce model in Emergency Medicine, with increases in the number of EM trainees, establishment of leadership roles to improve quality of training, and continued support for the Emergency Care Practitioner Model. This work will be accelerated in early 2020 with the appointment of a project manager for unscheduled care workforce issues.

#### **4Aii Developed workforce solutions to support NHS Organisations in improving care in Cancer/Diagnostics**

The Board received a briefing on our work to support the implementation of the Single Cancer Pathway (SCP) in August. The Chief Executive and Director of Nursing are involved in the national mechanisms for SCP and HEIW is actively working in three key areas:

- Imaging
- Pathology
- Endoscopy

Key areas of work across these areas include developing a clear workforce plan for these service areas including the identification and implementation of appropriate education and training programmes.

In regard to the National Endoscopy Programme, an education and training sub group has been established which is chaired by HEIW Director of Nursing. A training framework has been scoped for a colonoscopy education programme which was considered by the group in Q2. Welsh Government has confirmed funding for WIMAT and the endoscopy sub group is now working with the demand and capacity group to identify how the training programme can be delivered. Additional resource to support this work is currently being secured to develop and implement detailed plans.

#### **4Aiii Developed workforce solutions to support NHS Organisations in improving care in Access (Eye Care)**

This development was shared with the Board at the Board Development Session in June and is aimed to improve education available to optometrists to increase the scope of work undertaken in the community to reduce demand in secondary care. The team have completed a piece of work mapping by cluster of practices with Medical retina, IP and Glaucoma Higher Certificate qualified optometrists in Wales to ensure coverage of future services and hospital

placements. A total of 14 places were secured on for Independent Prescribing (Therapeutic Prescribing) course. Funding has been accepted and all 14 places have been allocated. A total of 10 places were to be secured on Medical retina course but had not yet been allocated during Q2.

Negotiations have been taking place with the HBs and contract discussions are underway to secure NHS contracts in each health board for named optometrists to begin placements for the Higher Certificate in Glaucoma and is due for completion by the end of Q4.

Welsh Government has recently confirmed financial support for this project.

#### **4Aiv Developed workforce solutions to support NHS Organisations in improving care in other national priority areas**

We are actively involved in discussions about workforce challenges in relation to the Major Trauma Network, CAMHS, critical care and mental health. Emerging priorities will be taken forward in next year's IMTP. There is a paper on the Major Trauma Network on the November agenda.

#### **4B Reshaped our professional development resources and programmes to address key priorities identified by staff, NHS organisations and key policy matters (including prevention)**

Having brought three organisations together as HEIW, it is a key strategic objective for us to ensure consistency of our approach to managing our professional development resources and programmes. To achieve this we have commissioned a single course management system and learning platform for HEIW. This will dramatically improve the way in which we capture both qualitative and quantitative data on Education and Training for all Healthcare Professionals across Wales. It will facilitate organisational links with a whole raft of NHS systems e.g. Workforce Development, Career Progression and Quality Improvement. Effective evaluation will evidence the improvements and changes in clinical practice that result from high quality targeted learning provided to the NHS workforce and beyond. This investment in the workforce will allow HEIW to support, develop and validate the skills of the NHS workforce. It will support the development of pathways for career progression. All of this will help with workforce development by having an accessible system, with personal profiles supporting the workforce to tailor individual learning. The procurement for this system is now underway and it is anticipated that this system will be available in Q3. Planning is currently underway to roll this out across HEIW.

#### **4C Introduced an International Recruitment system to attract a range of overseas health professionals into NHS Wales and identified opportunities to offer further professional support and development for SAS doctors.**

Proposals are being developed to establish our role in relation to international recruitment and potentially a wider approach to global engagement and staff exchange programmes. A recent visit to India to observe an international recruitment process was undertaken to inform the capacity and approach we would need to expand this approach. This will require investment and close links with HEE who are working extensively in this area.

Linked with the above we have committed to developing and extending the development and support provided to SAS grade doctors in line with what is available for trainees. This is in line with the SAS grade doctor charter.

#### **4D Developed a range of resources to support new ways of working**

Within health a total of 10 behavioural science programmes have been delivered to Multidisciplinary Teams; feedback has been extremely positive and there is demand for more. The Board had a briefing on this in 2018/19. This year in partnership with Social Care Wales, the Delivery Unit and a 1000 Lives, HEIW developed a business case for funding to accelerate the wider adoption of a Behavioural Science approach to complex care and “stranded” patients. Work is continuing with this and discussions are being held with Health and Local Authority in Gwent area to agree test sites. Two consultants have agreed to combine their programmes for delivery in test areas.

The Physicians Associate evaluation is underway, and an application has been submitted to extend this from Masters to PhD in order to include the patient perspective.

Medical Associate Professions (MAPs) - work has commenced on establishing the demand for the Anaesthesia Associates in NHS Wales, links made with the Royal College of Anaesthetists, Faculty of AAs and with Birmingham University who run the programme. The first task and finish group meeting was held in November with membership including clinical and WOD representatives from the service.

Delegation - In partnership with Social Care Wales, a survey of staff is to be undertaken in relation to delegation and the results will inform future engagement events/implementation.

## **Strategic Objective 5**

### ***Improving opportunities for use of technology and digitalisation in the delivery of education and care***

#### **5A Developed a plan to maximise the use of e-resources in the education and training environment**

HEIW are working in conjunction with NHS Wales e-Library for Health in taking forward this work which includes

- ❖ The e-Library team will develop a three-year plan that will outline key areas for development and improvement to the e-Library Service. This will include exploration of new e-Library services, systems and ways of working in order to continually develop the service
- ❖ The e-Library team will work with Health Education and Improvement Wales Colleagues to develop a plan to maximise the use of the e-resources in education and training

The Board received a briefing on this at the last Board Development Session. Developments to date include:

- ❖ Sites across NHS Wales visited to present the e-Library and its e-resources to many health and care professionals through attending conferences, roadshows and open days
- ❖ Significant increase in usage of the e-resources including e-journals, databases and guidelines, based on recent data collection as per the e-Library Annual Report 18/19
- ❖ Our suppliers have provided training to library and information professionals across NHS Wales and Welsh Government, and end users
- ❖ E-Libraries have been present at a wide range of HEIW engagement events

#### **5B Scoped digital content and capacity building of current training and education programmes.**

Work on this objective has not progressed significantly but will be a key output from the strategic review of education referred to earlier, and is a priority action in the Workforce Strategy.

#### **5C Scope opportunity for integrated digital platform**

Initial internal scoping has been undertaken to consider the need for an integrated digital platform, however digital capacity has been limited in 19/20 for strategic issues. The development of the performance report has further evidenced the benefits of taking forward such a platform. Internal scoping has identified the need for dedicated support to undertake further detailed scoping and research, and this will be progressed during the second half of the year, recognising the need to understand what platforms are already in place within NHS Wales.

#### **5D Developed a clear plan for simulation**

A project group was established in Q1 and has been working on scoping out current simulation facilities, services and gaps in the NHS. This includes simulation for all professional groups. NHS Health Boards have been invited to nominate their Simulation Leads to join an all Wales

Simulation Leads network. This group will meet for the first time in Q3 at an inaugural All Wales Simulation Leads workshop and we hope to progress recruitment for a Clinical lead for Simulation.

In the next half of the year discussions will take place regarding the future links with WIMAT and the Imaging Academy in support of this agenda.

## **Strategic Objective 6**

### ***Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales***

#### **6A Developed a health and care leadership strategy with Social Care Wales and Academi Wales for health and care**

Building on early progress in 2018/29 a review of leadership development across NHS Wales was undertaken in Q1 and a review will be undertaken by Social Care Wales by the end of Q3. The reviews will be used to inform the development of the strategy, to identify gaps in senior leadership development and inform future commissioning/development of national leadership programmes designed to support existing leaders as well as create a new generation of leaders. The team have developed a project plan and governance arrangements to oversee development and delivery of this objective. An update on this work was provide to the Board at its September meeting.

To maximise stakeholder engagement, HEIW hosted a collective leadership engagement conference in Cardiff. Keynote speakers included Andrew Goodall, Professor Michael West and colleagues from England and Northern Ireland. A total of 300 delegates attended including representatives from health, Social Care Wales, Academi Wales, strategic partners and academic establishments. The conference engaged the views and ideas of stakeholders to ensure a co-productive approach to the leadership strategy and resulting delivery framework.

An overarching steering group has been established including representatives from NHS, Social Care Wales, Welsh Government, Academi Wales and Local Government and will oversee the production of a leadership strategy that delivers systems, change, leadership capability and capacity to deliver *A Healthier Wales*. It will also map the existing leadership and management resources and identify priority programmes for health and care and share intelligence on wider sector developments. A governance model is being finalised to ensure effective engagement and communication of decisions and progress. The aim is to develop the strategy for discussion and comment by the end of Q3 with a view to publishing the strategy in early Q4.

#### **6B Map leadership and management resources and identify priority programmes for health and care.**

During Q1, the team researched and scoped the leadership and management resources for Health and Social Care Wales. A digital leadership portal that can cross organisational boundaries has been procured that will enable HEIW to create a 'managers resource library' by collating and standardising the vast range of management development materials already in existence across NHS Wales. This will also provide an opportunity to review, refresh and host the NHS Wales Core Competence Framework for Managers and Supervisors, in partnership with Academi Wales and NHS Wales. These materials can be made available as e-learning for self-directed learning, or version controlled electronic resources for use in face to face training. This will provide assurance and portability of management competence across NHS Wales.

HEIW will be reviewing 'inherited' clinical leadership programmes with a view to putting forward proposals for a unified clinical leadership programme in early 2020 and opening for applications later in the year. This will include the Medical Leadership programme (MLP) hitherto run by Academi Wales which transferred to HEIW mid-cohort during Q1. Medical Leadership Fellows have traditionally accessed the Academi Wales programme as part of their fellowship programme and alternative arrangements are being made to ensure the new

cohort have access to appropriate leadership development during the transition. For the first time two pharmacy leadership fellows who have been appointed to join medical trainees undertaking the programme.

## **6C Implemented a succession planning and talent management framework for NHS Wales.**

HEIW has committed to accelerating the pace around the implementation of succession planning for Tier 1 and Tier 2 senior leadership roles in NHS Wales. Agreement to the approach has been secured from NHS Chief Executives, NHS Chairs and the NHS Executive Board. Plans for Q3 include the facilitation of a workshop to define the succession planning process for these roles; identification of the Executive and Director roles across NHS Wales, hot spots and priorities; reviewing and enhancing (where required), the competence, values and behaviour frameworks for senior roles in NHS Wales. There will also be a requirement to develop a process to identify aspiring talent across NHS Wales; develop/commission executive leadership development programme(s); populate talent pool. It is envisaged that the talent pool, alumni and programme will be in place by the end of Q4.

Having identified the need to secure a digital solution to facilitate the talent management and succession planning arrangements use will be made of a cloud-based talent management (TM) solution. This approach will enable NHS Wales to develop intelligence and maturity with regards to the functional and user specification of the talent management solution required to manage succession planning for Tier 1 and 2 posts. It will also provide intelligence to inform and influence the talent management solution that is required through the ESR workforce solution re-procurement.

## **6D Implemented an alumni leadership network**

Following a successful procurement exercise, digital software has been sourced and a digital leadership portal is currently being developed to enable the creation of Alumni networks. The following milestones are scheduled from October to December 19:

- ✦ Creation of a collective leadership alumni network that will include participants from the HEIW Leadership conference on 21st October. Membership of this network will enable access to a range of collective leadership resources and videos from the event
- ✦ Creation of a series of themed leadership networks that promote inclusion in the development of core leadership products through on-line forums
- ✦ Creation of a clinical fellows alumni network
- ✦ Creation of a range of collective leadership master classes, webinars and other alumni events with push notifications to alert anyone registered with the Leadership Portal



## ***Strategic Objective 7***

### ***Demonstrating value from investment in the workforce and the organisation***

#### **7A Developed value-based methodologies to monitor and evaluate the impact of education and development**

In developing our investment appraisal processes, over the remainder of the financial year 2019/20, mechanisms will be put in place to ensure a values-based approach is implemented within all additional funding requests both internal and external to the organisation. HEIW acknowledges the importance of quantifying and monitoring the benefits to the system of the investment requested. Work is to be taken forward to develop appropriate costings to support the implementation of the process.

#### **7B Developed a plan for future allocation of SIFT**

This objective is still under construction awaiting WG confirmation of direction required. In the next few months the Director of Finance is reviewing the Scott Report recommendations and the position in Scotland and England.

## Remit Letter Actions

### **1. Mid/West Wales Academic Fellows Scheme**

In 2016, Swansea University School of Medicine launched a Rural Health Academic Fellows Programme. The programme recruits 2 fellows (qualified GPs/other specialists) a year who work as supernumerary GPs or specialists in approved, allocated rural practices and/or hospitals for 3 days a week. The other 2 days are dedicated to pursuing academic work, under the guidance of a Swansea University School of Medicine Senior Clinical Academic.

A small research group has been developed that will devise a research plan to review the Mid/West Wales Academic Fellows Scheme to evaluate the impact on the existing rural scheme. Interviews will be undertaken with key individuals (including Swansea University staff, associated GP Practices and the Fellows currently and previously on the scheme) to check whether the current format of the scheme is fit for purpose and identify ways in which the scheme could be improved and offer value for money. It is intended that the findings will be reviewed and the evaluation will be drafted and shared with contributors for feedback. The evaluation report will then be reviewed and updated prior to submission to the Senior Executive Team for approval and submit it to Welsh Government.

### **2. Career framework and supporting education framework for general practice nurses**

As HEIW is developing a career framework for the health professional workforce as identified in objective 2C, it has been agreed that this will be incorporated into work of that group. Following the appointment of the Head of Nursing and Midwifery Transformation during quarter 3 the appointee will be tasked to identify any short-term education priorities HEIW should consider.

### **3. Lead work with NHS organisations to determine cost effective ways to deliver the additional 80 district nurses funded through the compact between Welsh Government and Plaid**

The team have engaged with the Health Boards to determine who within their community workforce had begun the Specialist Practitioner Qualification (SPQ) but had not completed the course. A plan was developed to backfill staff to expedite their progress through the programme to gain the (SPQ). The team continue to evaluate ongoing uptake against the original plan and additional work has been undertaken with the Health Boards and universities to explore alternative options. A full-time programme (with backfill) has now been offered and uptake has increased to an anticipated level of 55 additional district nurses. Engagement with the Health Boards has identified full extent of training activity across the Community nursing workforce which demonstrates there is considerable training being undertaken. It has also identified that one of the main factors inhibiting additional release of staff is the capacity to maintain services whilst staff are released for study.

### **4. Support Health Boards to use coding (ESR) in a consistent way in line with the national coding manual**

The Data Controller responsibility for ESR sits with NWSSP. We have met with NWSSP to share with them the remit letter action assigned to us and to agree a way forward. As a consequence of discussions, a joint plan has been put in place to re-invigorate the Data Quality group within the Hire to Retire programme board led by NWSSP. During Q3 it is intended to identify the current position in relation to district nursing, to assess the level of quality and to identify areas where ESR data naming conventions are agreed but are yet to be actioned. This will provide the foundation to develop programme of work to update areas identified in remit letter objective 2 above. An agreed process to empower Workforce Information Managers with the accountability, support and resource to enact changes agreed via the Data Quality control group will also be established.

**5. Offer a workforce perspective and advise on workforce implications arising from key Government documents such as the Valleys Taskforce and Dementia Action Plans**

The Deputy CEO is a member of the Valleys Task Force, workforce sub-group. This objective will be progressed as various key documents are published.

**6. Advise on arrangements to routinely collect NHS vacancy information for all staff groups, and work with WG policy and statistical officials to produce an accurate statistical statement via WG's Knowledge and Analytical services.**

As noted at 4 above, the Data Controller responsibility for NHS Wales sits with NWSSP. Discussions have taken place between NWSSP and HEIW to agree a way forward on this action. During Q3, the team will have scoped current practice in collecting vacancy information from all NHS Wales organisations. We will then analyse the feedback to identify areas of commonality and good practice. Working in partnership with NWSSP we will develop an agreement for the collection of data within clear and robust parameters for the purposes of the statistical statement for 2019-20. We will be working with Welsh Government's Knowledge and Analytical services to agree parameters for an accurate statistical statement for 2019-20 and to agree the data for the collection of data to inform the statistical statement. During Q4 we will then be in a position to identify areas for further improvement and to develop plans to increase the accuracy of the statistical statement, including the resource implications.



**GIG**  
CYMRU  
**NHS**  
WALES

Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

<b>Meeting Date</b>	<b>28 November 2019</b>	<b>Agenda Item</b>	<b>4.3</b>
<b>Report Title</b>	<b>Progress update: HEIW communications and engagement strategy</b>		
<b>Report Author</b>	Angharad Price, Head of Communications and Engagement		
<b>Report Sponsor</b>	Julie Rogers, Director WOD		
<b>Presented by</b>	Julie Rogers, Director WOD		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	To update Board Members on progress implementing the HEIW communications and engagement strategy.		
<b>Key Issues</b>	This paper provides a high-level summary of progress against the HEIW communications and engagement strategy (objective 1a in the HEIW annual plan 2019/20) from April 2019 – September 2019.		
	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
	√		√
<b>Recommendations</b>	Board Members are asked to: <ul style="list-style-type: none"> <li>Note the progress made to date on the work to achieve objective 1a.</li> </ul>		



GIG  
CYMRU  
NHS  
WALES

Adding a Cwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

## HEIW Communications and Engagement Stats

April - September 2019

27

Press Releases

153

Intranet Articles

### SOCIAL

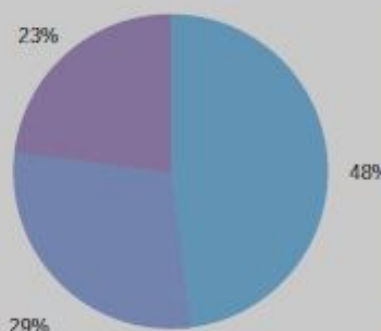


Followers: 3,907  
(up by 64%)  
Likes: 3,000+  
Retweets: 2,000+



Followers: 663  
(up by 45%)  
Likes: 501  
Shares: 780

### STAFF SURVEY



48% HEIW  
response  
rate  
29% NHS  
Wales  
response  
rate



100% rated staff  
events good or  
very good

7

Roadshows

300

Attendees

### NATIONAL STAKEHOLDER EVENTS

229

Attendees

96% of attendees  
rated the events  
very or somewhat  
satisfied



Representatives from NHS Wales, Social Care, Education,  
Private Sector, Professional Bodies, Welsh Government



GIG  
CYMRU  
NHS  
WALES

Addysg a Gwella Tech yd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

## Feedback...

"My thoughts and feelings were listened to. Hopeful for my future in this field." - *Betsi Cadwaladr roadshow 2019*

"We need to make it easier to step on and off the career pathway without detriment to the career." - *Hywel Dda roadshow 2019*

"Excellent, informative day, very useful information" - *BCUHB, north Wales stakeholder event*

"Excellent that HEIW are embracing the Welsh language - da iawn" - *Velindre University NHS Trust, south Wales stakeholder event*

"External speakers brought realism and experience and the stalls promoted work across the functions" - *All staff event, June 2019*

"Fantastic news. Dental nurses are so keen to take in additional roles and expand their own skills" - *Making prevention work in practice, FaceBook*

"Well done leading the way! I am sure these professionals will make a significant contribution to the NHS workforce. Certainly much needed in General Practice." - *New career pathways for pharmacy technicians, Twitter*

"Great afternoon delivering Unconscious Bias workshops at #STEME conference for @HEIW\_NHS Very positive and honest discussions #unconsciousbias" - *STEME conference, Twitter*

## **Progress update: HEIW communications and engagement strategy**

### **1. INTRODUCTION**

- 1.1 This paper provides an overview of the key activity undertaken to date directly associated with implementation of the communications and engagement strategy. It shows a significant amount of investment and activity in this area by, or through, our core team. In addition, we are aware that individual teams and departments throughout the organisation have undertaken engagement activity as part of their normal business. During the next year, we will be exploring ways to capture departmental activity more effectively so that we are able to produce a fully comprehensive report on our activity.
- 1.2 Attached to this paper is a copy of the HEIW communications and engagement strategy together with a breakdown of the 300+ core communication and engagement activities undertaken by HEIW to date.

### **2. BACKGROUND**

#### **Communications and Engagement Team**

- 2.1 In autumn 2018 a review was carried out to understand the communications and engagement requirements of the organisation and establish what resources would be required. At the time of the review the communications and engagement team was made up of four posts only two of which were permanent in the structure.
- 2.2 Following the review and discussions with similar organisations including NHS Education Scotland and Social Care Wales, business cases were submitted to the executive team to increase the number of posts within the team and to secure recurrent funding. As of November 2019 the communications and engagement team has filled all vacancies and now consists of:
  - Head of Communications and Engagement (F/T)
  - Communications and Engagement Manager (F/T)
  - X2 Senior Communications and Engagement Officers (F/T)
  - Communications Officer (P/T)
  - Communications and Engagement Admin Assistant (F/T)

#### **Communications and Engagement Strategy**

- 2.3 The HEIW communications and engagement strategy has our organisational purpose, objectives and values at its heart and is shaped by feedback from staff and stakeholders. It provides a framework for core communications and engagement activity by staff, and representatives of HEIW, aligned to the achievement of HEIW's strategic objectives and functions. The strategy was approved by the Board in March 2019.
- 2.4 Following Board approval the strategy was shared with stakeholders via the CEO stakeholder bulletin and website. For staff, the strategy and its purpose was highlighted at a senior leadership team meeting, via the CEO staff bulletin, intranet and via a communications and engagement market stall at a staff event.



### **3 SUMMARY OF PROGRESS FROM 1 APRIL 2019 – 30 SEPTEMBER 2019.**

#### **External**

##### **3.1 Press releases**

We have produced 27 press releases covering priority areas in the strategy and a range of topics including: the quality of nurse training in Wales, Welsh winners of education and training awards, new HEIW initiatives including first in the UK, HEIW investments and contributions to healthcare workforce, education and training.

All our press releases are bilingual, appear on our intranet and website, and are promoted via our social media accounts and CEO stakeholder bulletin. In today's media world the emphasis is very much on frontline services and 'click-bate' stories. We're aware that because of this many of our press releases are not of interest to the mainstream media. We've therefore been sharing them with specialist publications as well in order to reach stakeholders and a wider audience.

So far this year we've received coverage in a number of publications including: Leader Live, Pharmaceutical Journal, Chemist and Druggist, Wales 24/7, Western Mail, Training Matters Magazine, Nursing in Practice, Nursing Times, Dental Nursing and British Dental Journal.

We have also issued a number of press releases either jointly with or including partner organisations such as BMA Cymru, Swansea University, NWIS, Cardiff University, Social Care Wales, Welsh Government, Qualifications Wales and Swansea Bay Health Board.

##### **3.2 CEO stakeholder bulletin (bilingual)**

CEO Alex Howells sends out regular bulletins to over 1000 stakeholders updating them on HEIW work and providing opportunities to contribute and shape HEIW work going forwards.

##### **3.3 Social Media**

HEIW has both English and Welsh Facebook and Twitter accounts and our presence in the social media world continues to grow. Since April our Twitter following is up by 64% and our Facebook following by 45%. This is as a result of our proactive work creating original content (500+ Tweets, 300+ Facebook posts) including themes within the strategy, as well as engaging in discussions with followers, responding quickly to queries and sharing content from trusted partners on topics such as service change, health and wellbeing, campaigns, CPD and recruitment.

An example of a successful Twitter campaign is our promotional campaign of our Professional Support Unit. As a result of the intensive two-month twitter campaign the unit saw referrals double on the same time the previous year. (We are continuing to promote the service regularly along with other HEIW events and services.)



### **3.4 HEIW as an All-Wales organisation**

As an All-Wales organisation we are committed to including all our staff, stakeholders and partners regardless of geographical location. We have invested time and resources in ensuring our stakeholder events are not just held in the south, the newly introduced roadshows covered all areas including three sites in the north, conferences such as STEME are held in north and south Wales, and that we are visibly supporting mid-wales events (two rural healthcare events/conferences). We have supported our Board to travel around Wales – including meetings in west and north Wales, and ensured staff in all areas of Wales have had the opportunity to observe or present at Board development sessions in their local area as well as to meet execs and/or members in the wings of the meetings. Some further examples of directly supported activity across Wales are set out below:

### **3.5 National Stakeholder events**

We have invested in holding two national events – one in the North and one in the South. Feedback from North Wales delegates acknowledged the effort of HEIW to engage in North Wales with one comment referring to how nice it was to talk to someone face to face rather than by video conferencing. Others said:

- Fantastic Opportunity to learn and engage in north Wales
- We welcome you
- Great location.

The two national events, attended by approximately 200 delegates representing regulators, NHS Wales, social care, education, private sector, professional bodies and Welsh Government, provided us with the chance to meet with partners and stakeholders and inform them of our ongoing work and how our work contributes to achieving 'A Healthier Wales'. In addition, they provided partners and stakeholders with an opportunity to contribute to our IMTP and future work.

Feedback from delegates told us 96% were very satisfied or somewhat satisfied with the events. Individual comments reflected the willingness of delegates to interact and contribute to HEIW work and included 'thank yous' for the opportunity to take part. In addition, many commented on how they would have liked more time for discussions. Having a member of HEIW staff on every table was also well received.

In particular, at the South Wales event HEIW was praised for embracing the Welsh Language following Julie Rogers and Dr. Chris Jones' bilingual presentations.

### **3.6 Roadshows**

In May we began our executive led HEIW Roadshow visiting Health Boards and Trusts in North, Mid, South West and South East Wales meeting healthcare trainees, students, educators and those responsible for education. The Roadshow is providing us with an opportunity to introduce HEIW and ourselves, and to gain feedback on education experiences to inform future provision of healthcare education in Wales.

To date, approximately 300 people have attended one of the roadshow stops and topics of conversation have included: nurse recruitment, study leave, workforce culture, training capacity, flexible routes to nursing, integrated training, healthcare science representation and career progression.

Overall feedback on the Roadshow has been very positive with many commenting on how informative and enjoyable they have been. Also, how it says a lot about HEIW that we are willing to go out and meet people. One reoccurring theme has been that this approach is new to some people and it might take a bit of getting used to – some people are wary of organisations and bodies coming out to visit them – we hope to change this.

The Roadshows are continuing this autumn and into early 2020. Building on the success of the events, we plan to roll these out again in 2020-21.

### **3.7 HEIW core business communications and engagement**

As well as corporate specific communication and engagement activities such as the Roadshow and CEO Bulletin, HEIW departments are continuing to communicate and engage with their target audiences as part of our core business.

From April 2019 – September 2019 departments held over 60 learning and information events across the whole of Wales targeting a range of professions including pharmacists, SAS doctors and dentists, GPs, trainees, appraisers, regulators, nurses, AHPs and health care students.

In addition, Appendix B attached to this paper outlines the 300+ engagement and communication activities carried out across Wales by HEIW directorate and the stakeholders involved.

#### **Internal**

### **3.8 Staff survey**

The NHS Wales staff survey was carried out in HEIW at the beginning of 2019 with a response rate of 48% – the All Wales response rate is 29%. The results were made available in May and the overall engagement rate for HEIW was 3.88 out of 5 - the All Wales rate is 3.82. Although the engagement category in the survey doesn't cover exclusively the type of engagement referred to in the strategy, this is still a useful guide for our work going forwards.

### **3.9 Intranet**

Alongside face-to-face team and 121 meetings the intranet is a key internal communication and engagement tool. As well as being a mechanism for storing, accessing and sharing documents centrally it also holds all key corporate and operational documents. In addition, the homepage is used to post bulletins containing information, news, operational processes, updates, social announcements and much more to keep staff informed. Since April we have issued 153 bulletins with an average view rate of 71.

### **3.10 Email**

Email is another effective communication and engagement tool when used appropriately. Best practice shows that more is less when it comes to emails – the less emails you send the more likely they are to be read. In HEIW we limit HEIW wide emails to business critical information and the CEO's staff bulletin only. (These are also put on the intranet for future reference and easy access.)

Our method of everything on the intranet and only business critical information in emails has been supported by staff. In a communications and engagement survey at our March staff away day the majority of staff (78%) voted for this as their preferred method.

However, we do understand the intranet isn't the best method of communication and engagement for our off-site staff, including those in North Wales, who may not have access to the intranet or only work for HEIW on a sessional basis and therefore don't have time for searching the intranet or reading lots of emails. For these colleagues we have set up a process whereby we send a corporate email to them containing a summary of the latest HEIW corporate news and information only. This email is only sent when we have relevant information for this audience so as not to overwhelm them with irrelevant information and emails. On introducing this process we were contacted by a GP trainer who felt this approach would be helpful.

### **3.11 CEO staff bulletin (bilingual)**

CEO Alex Howells issues a regular update to staff to ensure they are aware of key work being undertaken by HEIW, future plans, opportunities to get involved, operational changes and key events. This communication is emailed to all HEIW staff and a copy put on the intranet.

### **3.12 Staff events**

Following the March staff event we have held a further staff event in June and a 1<sup>st</sup> year celebration event in October. These events are providing staff with a regular opportunity to come together, network with colleagues they don't often see, find out what everyone is doing, contribute to plans and celebrate success. Over 200 staff have attended these events with 100% rating them as good or very good.

We have also supported colleagues in engagement events such as the extended senior leadership team planning day, designed to engage staff from across the organisation in the development of our first IMTP. Other examples include actively supporting staff groups such as the culture and social committees, helping to promote events, training and opportunities such as free flu jabs and charitable activities.

### **3.13 Staff open forum**

In September we reintroduced the monthly staff open forum with the Chief Executive and other executive directors. The aim of these forums is for staff to have an opportunity to discuss what's going on in HEIW, contribute and share information. They were a feature of the shadow period and have recently been reintroduced following staff appetite for the informal 'ask the CEO' sessions to be reintroduced. The September forum was attended by 45 people.

## **4. CONCLUSION AND NEXT STEPS**

A lot of communications and engagement work has been undertaken over the past few months with positive results. However, we recognise we have a long road ahead with many challenges to face before we come close to nationally establishing HEIW, gaining audience understanding and brand awareness.

As outlined in the communications and engagement strategy, successful communications and engagement relies on everyone being proactive and taking responsibility. We have responsibility for making information available but rely on our audience to proactively seek that information. The same applies to engagement with all parties needing to be proactive and willing to participate.

There have been times during the period covered by this report when people have been reluctant or unable to communicate and engage with us. This can be for a number of reasons from not understanding why they would want to engage with us or not having the time. However, this is to be expected and we will continue to proactively communicate and engage with colleagues, partners and stakeholders; implementing the HEIW communications and engagement strategy and making appropriate changes in response to feedback. In addition, we will build on the activities to date supporting colleagues to carry out HEIW functions and achieve strategic objectives.

Our key priorities for the remainder of the year:

- HEIW promotional campaign
- HEIW generic information stand at key national events
- Continue preparations for the development of the HEIW website and merger of content from legacy organisations
- Supporting and enabling core work
- Support and enabling individual key projects as outlined in the annual plan such as the workforce strategy for health and social care, and the leadership strategy.

## 5. GOVERNANCE RISKS AND ISSUES

There are no risks or issues arising from this update report.

## 6. FINANCIAL IMPLICATIONS

None.

## 7. RECOMMENDATIONS

Board members are asked to note the content of this paper.

Governance and Assurance				
<b>Link to corporate objectives (please ✓)</b>	As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand	Building a sustainable and flexible health and care workforce for the future.	With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.	Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
	✓	✓	✓	✓
	Improving opportunities for use of technology and digitalisation in the delivery of education and care.	Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales	Demonstrating value from investment in the workforce and the organisation.	
	✓	✓	✓	

<b>Quality, Safety and Patient Experience</b>	
The paper is based on the importance of effective and efficient stakeholder engagement and partnership working to the success of HEIW	
<b>Financial Implications</b>	
There are no financial implications with this paper.	
<b>Legal Implications (including equality and diversity assessment)</b>	
There are no direct legal implications.	
<b>Staffing Implications</b>	
None.	
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>	
The engagement and partnership work carried out by HEIW is critical to the success of the organisation's objectives which directly contribute to A Healthier Wales and in turn the Wellbeing of Future Generations (Wales) Act 2015.	
<b>Report History</b>	N/A
<b>Appendices/Annexes</b>	A: HEIW communications and engagement strategy. B: Overview of core communication and engagement activity.



GIG  
CYMRU  
NHS  
WALES

Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

# HEIW communications and engagement strategy

Phase 2 April 2019 - March 2020

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**Together as a team**  
we will proactively  
communicate and engage



**Ideas that improve**  
together we will seek  
solutions and be creative

**Respect for all**  
we will respect and  
consider all views  
and opinions



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## Introduction

Much has been achieved within HEIW and with our partners since we launched on 1<sup>st</sup> October. We have built on the existing relationships of our legacy organisations and developed new ones as HEIW. It's now the beginning of the new financial year and we have launched our first annual plan. The plan has been shaped by our staff, our stakeholders and partners. It identifies the priorities for our first year, in the context of the challenges our partners are facing, and sets out what actions we are going to take to enhance and enable the health and care workforce in Wales.

In addition it reflects and supports the implementation of A Healthier Wales, the Welsh Government's response to the Parliamentary Review of Health and Social Care, which sets out an ambitious plan for a whole system revolution and provides essential context for all NHS plans going forward. It challenges HEIW along with other NHS organisations to develop sustainable plans and actions to deliver care closer to home, through strengthening primary and community services, and refocusing on prevention. It also emphasises the importance of quality improvement in a transformational system, and the need to maximise the opportunities of digital and other technology.

## Background

In 2014, the Welsh Government commissioned a review of investment of health professional education and workforce development. That review was led by Mel Evans who subsequently published a report in 2015 which made a number of recommendations – one of which was to establish a single body for the commissioning, planning, and development of education and training for the NHS workforce in Wales. Further work was then undertaken by Professor Robin Williams to scope out detailed proposals for the new single body. Following the publication of Prof Williams's report in November 2016, the Welsh Government confirmed the new organisation would come into being in October 2018.

A detailed [written statement](#) was published by Vaughan Gething, Cabinet Secretary for Health, Wellbeing and Sport in July 2017 outlining the status, functions and name of the new body.

## Our vision, purpose and functions

Our vision is **"Transforming the workforce for a healthier Wales"**.

Our purpose is to integrate and grow expertise and capability in planning, developing, shaping and supporting the health workforce. We will do this by working closely with our partners, to ensure that both the NHS and the wider care system have the right staff with the right skills to deliver world class health and care to the people of Wales.

A comprehensive communications and engagement strategy is critical to the organisation's success and delivery of its functions which include:

- working closely with partners and key stakeholders, plan ahead to ensure the health and care workforce meets the needs of the NHS and people of Wales now and in the future;



- being a reputable source of information and intelligence on the Welsh health and care workforce;
- commissioning, designing and delivering high quality, value for money, education and training in line with standards;
- using education, training and development to encourage and facilitate career progression;
- supporting education, training and service regulation by playing a key role in representing Wales, and working closely with regulators;
- developing the healthcare leaders of today and the future;
- providing opportunities for the health and care workforce to develop new skills;
- promoting health and care careers in Wales and Wales as a place to live;
- supporting the professional workforce and organisation development profession with Wales; and
- continuously improving what we do and how we do it.

## **Aim of strategy**

This strategy covers our first full year of operation commencing 1<sup>st</sup> April 2019. It replaces an earlier draft version supported by the Board in August 2018, with a focus on the transition period. It is an active document, continuously responding and adapting to the challenges of 21<sup>st</sup> century healthcare as well as feedback from staff and stakeholders.

It is based on the organisation's vision, purpose, strategic objectives, values and behaviours, plus feedback from staff and stakeholders.

## **What this strategy will do:**

- summarise how HEIW will communicate and engage effectively with staff, stakeholders and partners to build on existing and establish new working relationships.
- outline our approach to communications and engagement, and how this will align with the organisation's vision, purpose, strategic objectives, values and behaviours.
- identify key messages to support communication and engagement in priority areas.
- set out how communications and engagement will be evaluated.

## **How this strategy will achieve this:**

Through responsive communications and engagement this strategy will support the achievement of the organisation's corporate objectives by:

- Creating an inclusive and respectful working environment where staff are valued and informed, ensuring the workforce are confident to share ideas in the knowledge this will inform organisational decisions;
- Build on existing and develop new effective working relationships with key stakeholders and partner organisations, understanding each other's needs, and working together to build a sustainable and flexible health and care workforce in Wales.
- Raising the profile of HEIW within Wales and further afield, including recognising the expertise of staff and celebrating successes;
- Promoting awareness and understanding of the breadth of HEIW's role including education and training, leadership, workforce planning and digitalisation.
- Promoting, raising awareness of and increasing participation in HEIW educational and training services and programmes;
- Supporting and promoting healthcare careers and career progression in Wales;
- Breaking down barriers to healthcare training, education and careers, such as finance or limited opportunities, by making learning, training and careers in Wales as easily accessible as possible;
- Supporting and promoting the design and implementation of digital technology to meet the education and training needs of the health and care workforce.
- Gathering, sharing and acting on intelligence, evidence, feedback, lessons learnt and insights into the needs of patients, healthcare organisations and their workforces in all parts of Wales.

## **What is communication and what is engagement?**

These two terms are often interchanged but they do mean different things. Communication provides people with information; it is about the transfer of information from A to B. Engagement is more about a two-way relationship; interacting, including people, discussion, sharing, listening and responding. Without communication you can't carry out engagement – you have to pass the information or question on. As the result of good communication and engagement you will have good relationships and positive outcomes.

## **Role of communications and engagement team**

The communications and engagement team provides leadership, expertise, and professional advice to support HEIW effectively engage and communicate with staff and stakeholders. The team has a lead role in protecting HEIW's reputation and brand, and developing effective communication and engagement channels. In addition, its role also provides assurances that enable HEIW to meet its legal duties in relation to communication and engagement. The team itself has a specific corporate role, but communication and engagement is the responsibility of all staff and also the HEIW Board.

## **Who we will communicate and engage with - stakeholders and partners**

We recognise for specific topics of communication / engagement, stakeholders and partners will vary. This is a general list of HEIW stakeholders and partners, which will be refined depending on the subject for communication or engagement.

- HEIW workforce
- Health and care students and trainees including nurses, medics, allied health professionals, healthcare support workers, pharmacists
- Service users – including trainees and students
- Health and care workforce - current and future
- Education providers including Universities, trainers and mentors
- Health Boards and Trusts
- Professional bodies
- Regulators
- Trade Unions
- Social Care Wales
- Welsh Government
- Partnership boards
- Academi Wales
- Media – specialist publications and main stream media
- Patients / carers
- Public
- Third sector
- Career organisations
- Schools

## **Key priorities and messages**

It is important to recognise we have only recently moved from shadow form into the early stages of formal establishment. From a communication and engagement perspective significant changes such as this take time to bed in. Consistency around messaging is critical. However, we are very much aware our work over the next year will continuously inform our messages and direction. We will be responsive to this including, in respect of the Workforce Strategy for Health and Social Care, and adjust our messages accordingly. Our current key priorities and over-arching messages are:

### **1. HEIW Workforce**

- Together we all make HEIW and are fundamental to our success.
- Every member of staff is an HEIW ambassador and representative.
- By investing in, valuing and looking after each other, success will follow.
- Our work and behaviours will reflect our values at all times.
- We will embed people in each other's work to fully integrate what we do and ensure we optimise all the skills, knowledge and experience within the organisation.
- We will share our ideas and our successes.
- We will take a collective leadership approach - motivate, encourage, empower, decision makers.
- We will appreciate and acknowledge what staff have done and do on a daily basis.

### **2. Raise awareness of and promote role and benefits of HEIW**

- HEIW Vision – Transforming the workforce for a healthier Wales.
- An independent statutory body with legal powers to carry out work in its own right, and legal duties to comply with specific regulations and carry out specific duties.
- 11<sup>th</sup> member of the NHS Wales family; sits alongside Health Boards and Trusts, and has an all Wales remit.
- HEIW has power, influence and strategic presence to be a system leader, looking at consistent and sustainable ways of addressing education, training and workforce issues from an all Wales perspective.
- Provides a platform for workforce, education and training agenda to be discussed and be at heart of decision making.

### **3. Build the reputation of HEIW based on the foundations of the legacy organisations.**

- We will build HEIW on the foundations laid by the excellent work of the legacy organisations.
- We will deliver what we said we would do, and on time.
- Our affiliation with Universities and healthcare organisations across Wales will ensure all we do is for the benefit of everyone in Wales.

### **4. Build on existing and establish new strong and effective working relationships with partners and stakeholders**

- Our partners and stakeholders are extremely important to us.
- Working together, understanding each other's needs, and how we can best support each other is critical if we are to succeed individually and as a system.
- We will always communicate, engage and work closely with our partners and stakeholders.

- We will share our learning and the evidence we gather with partners to support successful outcomes for staff services and patients.

## **5. Education and training**

- More generalist, more flexible and with more access routes to enable modernisation of the workforce.
- Support NHS organisations with opportunities to “grow their own”, particularly in rural areas.
- To equip staff to provide the best care possible we all need to invest in education and training. We need to think about education and training first rather than last as it feeds the answers.
- Support staff to use all their skills and experience to work at top of their skills set in line with Prudent Healthcare Principles.
- Change the way we think and do things by supporting the development of the multi professional teams, with the patient or service user at the centre.
- Allow more people earning to do learning.

## **6. Workforce planning**

- We have to be realistic, no one can know exactly what the workforce needs in years to come will be, so flexibility and adaptability is key.
- Workforce planning remains the responsibility of Health Boards and Trusts, and we are not here to take that away. We will support and help to improve abilities to workforce plan.
- Encourage everyone to look for new solutions to workforce issues. We have a role in helping to implement them e.g. access to education supporting structure in place.
- Ensure workforce planning takes into account emerging opportunities and challenges from the digital technology agenda as laid out in the Topol review.
- We can deliver sustainable improvement and step up change to deliver workforce and address all Wales issues.
- Investment in the workforce needs to be assessed on the basis of value not cost, and should be a primary consideration in discussions and decisions, not last.
- Ensure workforce is employed not just on academic achievements but competencies.

## **7. Recruitment and retention**

- We will promote the NHS as a great place to work, with great opportunities for all.
- We will focus our attention on the needs of the workforce in parallel with the needs of the patient.
- Wellbeing of staff is a central theme. To retain staff and encourage people to join NHS we will work with partners to enable staff to develop within the system. We'll be thinking creatively about enabling staff to progress while they're employed.
- We have people who aspire, we need to open doors to get them there.

## **8. Careers**

- NHS organisations and other partners are already doing a lot to promote careers in Wales. We will add value by working alongside our partners to promote the diverse range of careers within healthcare, as well as taking an active role in national campaigns.

## How we will communicate and engage

Priority	Actions	How
<b>1. HEIW workforce</b>	<ul style="list-style-type: none"> <li>• Promote successes and achievements</li> <li>• Promote work and activities of staff social committee.</li> <li>• Promote wellbeing initiatives.</li> <li>• Raise awareness of awards staff can enter</li> <li>• Engage with staff when planning and making decisions allowing them to contribute.</li> <li>• Learn about HEIW, what the organisation does and the staff who form it.</li> <li>• Sharing ideas, information, and learning with each other</li> <li>• Support and equip staff to confidently communicate and engage as HEIW ambassadors</li> </ul>	<ul style="list-style-type: none"> <li>• Regular internal bulletins and press releases. Copies on social media.</li> <li>• Staff awards</li> <li>• Acknowledging a job well done</li> <li>• Regular staff bulletins, section on intranet.</li> <li>• Urgent corporate messages on intranet and sent by email.</li> <li>• Targeted corporate comms round-up email for those staff based off-site.</li> <li>• CEO staff bulletin</li> <li>• CEO open forum</li> <li>• Take time to talk to colleagues and support each other.</li> <li>• Cascading from Senior Leadership Team meetings.</li> <li>• Team meetings.</li> <li>• 1 – 1s</li> <li>• Staff events.</li> <li>• Staff proactively seeking information and engaging with each other.</li> <li>• Lunch and learn.</li> <li>• Staff induction</li> <li>• Staff surveys</li> <li>• Communications representatives to support staff alongside comms team.</li> <li>• Maximise use of digital technology such as Skype and Webinars to communicate and engage with colleagues across Wales.</li> <li>• Exec team drop-in session for staff following Board meetings taking place across Wales.</li> </ul>
<b>2. Role of HEIW 3. Reputation of HEIW</b>	<ul style="list-style-type: none"> <li>• Review legacy websites and develop new HEIW website</li> <li>• Develop social media accounts to maximise on</li> </ul>	<ul style="list-style-type: none"> <li>• Digital Team to design website to meet the needs of departments and stakeholders</li> <li>• Comms Team – to create</li> </ul>

	<p>engagement, sharing of information, promoting services and acknowledging success across Wales</p> <ul style="list-style-type: none"> <li>• Regular CEO newsletter</li> <li>• Promote the work of HEIW, success and achievements</li> <li>• Mention HEIW</li> </ul>	<p>corporate website content.</p> <ul style="list-style-type: none"> <li>• Departments to develop own relevant content for their section with support from comms and digital teams.</li> <li>• Communications representatives in each department to facilitate the flow of information between departments and comms team</li> <li>• Communications team to create interesting and relevant content based on information provided by departs.</li> <li>• CEO stakeholder bulletin for sharing via email, website and social media</li> <li>• Produce proactive press releases, articles for specialist publications and social media., Contribute to NHS Wales CEO bulletin</li> <li>• stakeholder events</li> <li>• Board meetings.</li> <li>• At meetings with stakeholders and when presenting at events, conferences, etc.</li> <li>• Communications and engagement team to assist colleagues with appropriate communication and engagement materials</li> <li>• Attend events with HEIW information stand</li> </ul>
<b>4. Relationships with partners and stakeholders</b>	<ul style="list-style-type: none"> <li>• Proactively work at maintaining existing relationships and seek out new and appropriate relationships.</li> <li>• Work with communications and engagement teams in partner organisations on joint projects</li> <li>• Use social media platforms to engage in two-way discussions</li> </ul>	<ul style="list-style-type: none"> <li>• Meetings, peer groups, workshops and events.</li> <li>• Host regular HEIW events</li> <li>• Hold Board Meetings at sites across Wales and invite stakeholders and public to attend.</li> <li>• Meet regularly with Heads of Communications.</li> <li>• HEIW Head of Communications and Engagement part of NHS Wales Heads of Comms group</li> </ul>

		<ul style="list-style-type: none"> <li>• Comms team to promote social media and facilitate discussions.</li> </ul>
<b>5. Education and training</b> <b>6. Workforce planning</b> <b>7. Recruitment and retention</b> <b>8. Careers</b>	<ul style="list-style-type: none"> <li>• Proactively meet with partners and stakeholders to discuss education, training, and workforce issues and solutions.</li> <li>• Review plans and programmes of other organisations and joint national programmes to inform HEIW planning and work.</li> <li>• Work jointly with partners and stakeholders to inform national programmes and strategies</li> <li>• Regularly update stakeholders and service users on HEIW plans, programmes and initiatives.</li> <li>• Gain feedback from students and trainees on their education and training experience to inform future work.</li> <li>• Gather feedback from the workforce to influence future plans and strategies</li> <li>• Work with partners and stakeholders on national career programmes such as Train Work Live</li> <li>• Actively promote Wales as a place to live and have an NHS career.</li> <li>• Actively promote over 350 NHS Wales careers</li> <li>• Promoting job vacancies in NHS Wales</li> </ul>	<ul style="list-style-type: none"> <li>• HEIW representation at peer groups</li> <li>• Meetings with representatives from partner organisations</li> <li>• Attendance at events / conferences</li> <li>• HEIW Assistant Director of Workforce to be HEIW lead for Train Work Live supported by comms team and representatives from relevant departments.</li> <li>• Careers officers and communications team to work together on promotional careers programme.</li> <li>• Communications team to support Health Boards and Trusts by sharing their job vacancies on social media.</li> <li>• HEIW roadshow around Wales to meet students and trainees plus trainers, educators and education leads in HBs and Trusts.</li> <li>• Use the results of the NHS Wales staff survey to gather workforce intelligence.</li> <li>• Use, meetings, groups, CEO bulletin, news articles and social media to inform, promote and engage on solutions.</li> </ul>



## **Guiding principles on which all communications and engagement will be based.**

*Effective communication and engagement is everyone's responsibility.*

It will be:

Open	Honest	Clear	Reliable	Relevant
Timely	Consistent	Two-way	Responsive	Flexible
Purposeful	Appropriate	Inclusive	Accessible	

## **Language and tone**

Depending on the information, audience and method of engagement this will vary. For example, with social media our tone would be informal and chatty – social media is all about being social, friendly, and approachable. On the other hand, an official communication regarding a serious matter would be more formal in tone and language but still be clear and easy to understand. However, it should always be positive, optimistic and constructive reflecting our values, people principles and be bilingual.

## **How we will evaluate**

Successful communication and engagement rely on everyone proactively taking part. On the one hand it is the responsibility of the message / information creator to ensure content is relevant and accessible to their audience. On the other hand, we rely on the audience to proactively seek out information / messages, and read them. The same applies when engaging, both parties have to be proactive and participate. With this in mind we have to be realistic when evaluating our communications and engagement, and use this information to inform appropriate developments and improvements.

<b>Outputs</b>	<b>Outtakes</b>	<b>Outcomes</b>
Media  No. of press releases / articles	Website hits  Social Media engagement - impressions, likes, followers, shares, retweets  Responses / Feedback  Published by 3 <sup>rd</sup> party	Recommendations, endorsements, supportive quotes, subversion, questions, suggestions.  Behavioural change or action e.g. increase in sign up.
Staff events	Attendance  Survey / responses / feedback	Awareness  Engagement – taking part.  Comments / suggestions  Response to calls to action  Feedback / response themes being used to support improvements and

		developments.
Social Media No. of Tweets / Facebook posts	Engagement - impressions, likes, dislikes, followers, shares, retweets  Comments / responses  Reach – message penetration	Recommendations, endorsements, supportive quotes, subversion, questions, suggestions.  Behavioural change or action e.g. increase in sign up. Registrations.  Decrease in behaviour
Intranet	Views	Responses to calls to action e.g. sign up for staff event  Behavioural change
Staff survey	Number of responses  Comments	Increase in results regarding communications and engagement  Feedback / response themes being used to support improvements and developments.
HEIW promotional stand No. of events attended Size of audience	Feedback from attendees	Recommendations, endorsements, supportive quotes, subversion, questions, suggestions.  Feedback / response themes being used to support improvements and developments.
HEIW events	Attendance  Survey / responses / feedback	Awareness  Engagement – taking part.  Comments / suggestions  Response to calls to action  Feedback / response themes being used to support improvements and developments.

### Conclusion – next steps.

This strategy sets out our intentions and expectations in 2019 – 20 with effect from April 2019. It is a flexible document which will be adapted as a result of future developments and feedback. It is the intention this document will be replaced in April 2020 with a revised strategy in line with the HEIW IMTP 2020 - 2023.

**HEIW Communications and Engagement Team. (March 2019).**

Communication / Engagement Activity	MEDICAL		
	Stakeholders	HEIW rep	Frequency
Faculty Team Conference	NHS Assistant Medical Directors / Uni faculty leads / NHS Medical Education managers / Uni Faculty Programme Directors / NHS & Uni Faculty Programme Directors / NHS GP Programme Directors / AWHILES Librarians	Quality Unit	Annually
Faculty Team Appraisals	NHS Assistant Medical Directors / Uni faculty leads / NHS Medical Education managers / Uni Faculty Programme Directors / NHS & Uni Faculty Programme Directors / NHS GP Programme Directors / AWHILES Librarians	Quality Unit	Annually
Faculty Lead / Medical Education Manager Forum	Uni Faculty Leads (All) / NHS Education Managers	Quality Unit	Twice per year
Trainer Recognition Group	Uni Faculty Leads (Trainers)	Quality Unit	Quarterly
STEME Conference	Trainers	Quality Unit	Annually
Quality Conference	Trainers	Quality Unit	Alternate years
New Trainer Induction	Trainers	Quality Unit	Annually
GMC Trainer Survey	Trainers	Quality Unit	Annually
GMC Trainee Survey	Trainees	Quality Unit	Annually
Trainee Engagement Forum	Trainees	Quality Unit	Twice per year
Medical Commissioning Meetings	NHS Executive Teams	Quality Unit	Annually
AMD Forum	Assistant Medical Directors	Quality Unit	Twice per year
Lay Representatives Forum	Lay Representatives	Quality Unit	Annually
Meeting	Cardiff Undergraduate Medical School	Quality Unit	Ongoing throughout year
Meeting	Swansea Undergraduate Medical School	Quality Unit	Ongoing throughout year

Medical Education Collaboration Group	Cardiff Undergraduate Medical School / Swansea Undergraduate Medical School	Quality Unit	Twice per year
Meeting	Health Inspectorate Wales	Quality Unit	Twice per year
Meeting	GMC - local office	Quality Unit	Twice per year
Meeting	Deanery Foundation School	Quality Unit	As required
Meeting	Deanery GP Unit	Quality Unit	Quarterly
Meeting	BMA	Quality Unit	As required
Targeted Visits	Health Boards	Quality Unit	Approximately 30 per year
Quality Leads Meeting	GMC	Quality Unit	Twice per year
GMC Surveys Steering Group	GMC	Quality Unit	Twice per year
Wales Concordat	Professional regulators and inspection bodies Representation from a range of stakeholders including Medical Schools HIW	Quality Unit	Twice per year
Quality Committee	LEP Rep Trainee Rep, Specialty Rep. Membership within the Terms of Reference	Quality Unit	Twice per year
Quality Assurance Meeting	GMC	Quality Unit	TBC
NHS Wales Library Service Conference	Senior NHS Wales Librarians	Quality Unit	Annual
NHS Wales Annual Study Day for library support staff	Library support staff	Quality Unit	Annual
AWHILES Business Meetings	NHS Wales library service	Quality Unit	Quarterly
Meeting	Welsh Dental Committee	Dental Unit - David Thomas & Kirstie Moons	Three times per year (+ sub committees )
Meeting	Dental Policy branch WG	Dental Unit- David Thomas/Richard Herbert/Kirstie Moons	Ad hoc
Meeting	Chief Dental Officer	Dental Unit-David Thomas	monthly

3 way meeting	Dean - Cardiff Dental School, Chief Dental Officer & Dean of Dental Postgrad	Dental Unit - David Thomas	quarterly
Faculty Meetings	AWFDCP, Bangor University	Dental Unit - Kirstie Moons	quarterly
National committee	COPDEND	Dental Unit - David Thomas	quarterly
Tripartite meeting	General Dental Council, Dental Schools Council, Copdend	Dental Unit - David Thomas	quarterly
Dental Foundation Training & Dental Core Training meetings	Educational Supervisors, Training Programme Directors	Dental Unit - Richard Herbert/Will McLaughlin/ Gabrielle Lloyd/Helen O'Hara/Ceri Negrotti	Twice per year
Dental Quality and Safety Forum	Welsh Government, Public Health Wales, 1000 Lives, QIST	Dental Unit - Kirstie Moons	Twice per year
Dental Practice Advisers	WG, Public Health Wales, LHB	Dental Unit - David Thomas, Richard Herbert	Twice per year
British Dental Association Welsh Council	BDA, PHW, LDC, GDP	Dental Unit - Kirstie Moons	Twice per year
LHB Oral health strategy group	LHBs PHW GDPs HEIW	Dental Unit	Quarterly
General Dental Service Reform Steering Group	WG, PHW, LHBs, CDS, BDA	Dental Unit - Kirstie Moons	Twice per year
National Advisory Group Care Home Programme	WG, CDS, PHW, LHBs, 1000 Lives	Dental Unit - Kirstie Moons	Twice per year
Local Dental Committees	local dental practioners	Dental Unit - Richard Herbert, David Thomas	Ad Hoc
GDC Speciality Training Working Group	GDC, Copdend, RCS Ed, RCS Eng, HEE	Dental Unit - David Thomas	Quarterly
Human Factors Advisory Board for Dentistry	HEE, GDC, BDA, FGDP, Copdend, Professional bodies	Dental Unit, Kirstie Moons	Twice per year
Meeting	Various Training providers	Dental Unit Dental Unit - David Thomas, Ceri	annual
Committee Meeting	Speciality Training Chairs	Negrotti, Fran Yuen Lee	Annual

Committee meeting	Training Programme Directors for DFT & DCT	Dental Unit - Richard Herbert/Will McLaughlin/Gabrielle Lloyd/Helen O'Hara/Ceri Negrotti	Twice per year
Regional Meetings	Dental Administrators	Dental Unit - Kate Lyons/Ceri Negrotti	Twice per year
Stakeholder Reference Group	Healthcare Inspectorate Wales	Dental Unit - Kirstie Moons	Twice per year
Written communications	Dental profession in Wales	Dental Unit	Regularly
Training Events	Dental profession in Wales	Dental Unit	Regularly
Dental Care Professionals Symposium	Dental profession in Wales	Dental Unit - Kath Hayes/Kirstie Moons	Annual
Dental Rural Conference	Dental profession in Wales	dental unit - Kirstie Moons/Kate Lyons	Annual
Newsletter	Dental profession in Wales	Dental Unit	Quarterly
BCUHB locality meeting	Pharmacy Leads	Pharmacy Unit	Ad Hoc
Meeting	Community Pharmacy Wales	Pharmacy Unit	Ad Hoc
BCUHB locality meeting	Pharmacy Education & Training Leads	Pharmacy Unit	Ad Hoc
South West Wales locality meeting	HB community pharmacies representatives	Pharmacy Unit	Quarterly
South West Wales locality meetings / events	Managed sector / primary care	Pharmacy Unit	Ad Hoc
RPS conference	Royal Pharmaceutical Society members	Pharmacy Unit	Annual
Meeting	City and Guilds	Pharmacy Unit	Annual
Quality Skills Alliance (QSA)		Pharmacy Unit	Monthly
Reviews	Employers - pharmacy technicians	Pharmacy Unit	Every eight weeks
Meeting	All Wales Medical Directors	Medical	Monthly
Meeting	Heads of Medical Schools	Medical	Quarterly
Meeting	GMC external liaison advisor	Medical	Quarterly

Meeting	BMA and BMA Junior Doctors Committee	Medical	Quarterly
Meeting	Primary Care Assistant Medical Directors	Medical	Monthly
Major Trauma Network		Medical	
Ciurriculum Oversight Group		Medical	
Meeting	Heads of Medical Schools	Secondary Care	Quarterly
Newsletter	STC Chairs	Secondary Care	Quarterly
Newsletter	Programme Directors	Secondary Care	Quarterly
Training Programme Directors Development Day	Programme Directors	Secondary Care	Three days per year
GMC Doctors in Training		Secondary Care	
Meeting	Medical Workforce Managers	Secondary Care	Quarterly
Speciality Training Committee	Head of Schools, Training Programme Directors and specialty leads	Secondary Care	Quarterly
Education Supervisor Days	Educational Supervisors	Secondary Care	2 - 3 times per year
Trainee days / bootcamps	Specialty Trainees	Secondary Care	2 - 3 times per year
TPD trainer days	Training Programme Directors	Secondary Care	Bi-annually
WCAT meeting with Universities	WCAT Training Programme Directors, WCAT university leads and university HR	Secondary Care	three times per year
Academic Trainee Day	Academic Trainees	Secondary Care	Annually
Trainee representative meetings	Trainee Reps	Secondary Care	Quarterly
Dean's Think Tank for Trainees		Secondary Care	
Quarterly Trainee Newsletter	Trainees	Secondary Care	To be established
Trainee representatives engagement day	Trainees	Secondary Care	To be established
Section meeting	Improvement Cymru	QIST	Monthly
QIST Conference		QIST	Annual
Meeting Swansea			
Undergraduate Medical School		QIST	Regularly
Meeting Cardiff			
Undergraduate Medical School		QIST	Regularly
Regional Meetings	GP Trainers & GP Programme Directors	GP Associate Deans	Annual

Regional Meetings	Practice Managers (GP Training Practices)	GP Senior Admin staff	Annual
Email updates	GP Trainers and Trainees	GP	Monthly
Meeting	GP Programme Directors	GP Director, Deputy & Associate Deans	Twice per year
Further Training Practice Network	Trainers from the FTP Network	GP Associate Deans & Deputy Director	Twice per year
GP stakeholder committee	WG, GPC Wales, RCGP, Trainers, Trainees, Programme Directors,	GP	Twice per year
UK Conference GP Directors of Postgrad Education for GP (COGPED)	GP Directors across the UK	GP Director	4 per year
Meeting	GMC Wales Office	Revalidation Support Unit	Twice per year
Meeting	BMA Director Wales	Revalidation Support Unit	Twice per year
Meeting	Chief Medical Officer, WG	Revalidation Support Unit	Twice per year
Wales Revalidation Oversight Group	BMA, <b>Academy of Medical Royal Colleges (AOMRCs)</b> , GMC, CHCs	Revalidation Support Unit	Twice per year
GP Appraisal Management meetings	GP Appraisal Co-ordinators, AMDs	Revalidation Support Unit	Quarterly
RO Support Network Meeting	Responsible Officer Support - Medical Directors	Revalidation Support Unit	Twice per year
Revalidation Appraisal Implementation Group (RAIG)	HB and non-NHS Revalidation & Appraisal Teams	Revalidation Support Unit	Twice per year
Appraisal Lead Forum Meeting	HB and non-NHS Revalidation & Appraisal Teams	Revalidation Support Unit	Twice per year
Newsletter	All Medical Appraisers in Wales	Revalidation Support Unit	Quarterly
GP CPD and multi-professional events	GPs and allied health professionals	Revalidation Support Unit	Regularly
RSU Annual Review	Sent to all internal and external stakeholders	Revalidation Support Unit	Annual
Dental Appraisal System Pilot	Chief Dental Officer, GDC, BDA and Dental Clinical Directors	Revalidation Support Unit	Regularly
Revalidation review visits	All HBs and designated bodies in Wales	Revalidation Support Unit	Quarterly



Annual Medical Appraiser Survey	Medical Appraisers	Revalidation Support Unit	Annual
Appraisee post-appraisal survey	All doctors active on Medical Appraisal & Revalidation System (MARS)	Revalidation Support Unit	Annual
National Appraisal Conference Primary Care	Medical Appraisers, Appraisal Leads, HB Revalidation Teams, GMC Wales	Revalidation Support Unit	Annual
Regional Appraisal Conference North and South - Secondary Care, PHW	Medical Appraisers, Appraisal Leads, HB and non-HB Revalidation Teams	Revalidation Support Unit	Annual
Regional Appraisal Summary Quality Assurance Event - North and South - Primary and Secondary Care	Medical Appraisers, Appraisal Leads, HB and non-HB Revalidation Teams	Revalidation Support Unit	Annual
Annual National Appraisal Summary Quality Assurance Event - Primary and Secondary Care		Revalidation Support Unit	Annual
Workforce Modernisation Network	ADoN & ADoTh	Workforce Modernisation	Quarterly
HB Physician Associate representatives	Workforce business partners medical supervisors	Workforce Modernisation	Quarterly
Chief Nursing Officers Conference	Registered and unregistered nurses, WG	Workforce Modernisation	Annual
Meeting	Chief Nursing Officer, WG	Workforce Modernisation	Every six weeks
National Strategic Primary Care Programme	Directors of Primary Care and peer groups	Workforce Modernisation	Quarterly
National Primary Care Conference		Workforce Modernisation	Annual
Urgent Primary Care (OOH) Conference		Workforce Modernisation	Annual
NHS Wales Clinical Modernisation Forum	Asistant Directors of nursing and therapies, advanced practitioners midwives, non-medical consultants	Workforce Modernisation	Quarterly

## NURSING

Communication / Engagement Activity	Stakeholders	HEIW rep	Frequency
Meeting	All Wales Directors of Nursing	Nursing	Monthly
Meeting	All Wales Directors of Therapies and Health Sciences	Director of Nursing as executive lead for Therapies and Health Sciences	Monthly
National Endoscopy Board		Nursing	Monthly
Allied Health Professions Policy Officers		Nursing / T&HS	Twice a year
Meeting	Director of Nursing - C&V UHB	Nursing	Monthly
Meeting	Royal College of Nursing	Nursing	Regular
Meeting	Social Care Wales	Nursing / T&HS	Regular
Strategic Education Steering Group		Nursing	
Single Cancer Pathway Dementia Learning Group		Nursing	Monthly
Meeting HEFCW		Nursing	Twice a year
Professional Nursing and Midwifery Forum		Nursing	Monthly
Advanced Therapies Programme Board			Quarterly
Qualifications Operatioal Group		Nursing	Inermittment
All Wales TAG Meetings		Nursing	Monthly
SLC Level 4 & 5 Speech, Language & Communication Unit Development		Nursing	Weekly
Health & Social Care Project Board		Nursing	Monthly
Healthcare Science Workshops		Nursing / T&HS	Twice a year
Meeting Universities		Nursing / T&HS	Regular

Meeting Nursing and Midwifery Council		Nursing	Regular
Meeting Royal College of Midwives	RCM	Nursing / T&HS	Regular
	HCSW Operational Group	Nursing	monthly
	NHS, HEIs - Cardiff, Univeristy of South Wales, Cardiff Met, Swansea, Bangor, Wrexham and the Open University	Education and Commissioning	Once a year
Contract Negotiation	NHS, HEIs - Cardiff, Univeristy of South Wales, Cardiff Met, Swansea, Bangor, Wrexham and the Open University	Education and Commissioning	Once a year
Contract Performance	NHS, HEIs - Cardiff, Univeristy of South Wales, Cardiff Met, Swansea, Bangor, Wrexham and the Open University	Education and Commissioning	Once a year
Contract Quality Meetings	NHS, HEIs - Cardiff, Univeristy of South Wales, Cardiff Met, Swansea, Bangor, Wrexham and the Open University	Education and Commissioning	Once a year
Annual Contract - dental, pharmacy, clinical psychology	NHS, Cardiff and Bangor Universities	Education and Commissioning	Annually
	NHS, HEIs - Cardiff, Univeristy of South Wales, Cardiff Met, Swansea, Bangor, Wrexham	Education and Commissioning	Each uni twice per year
Operational meetings	NHS, HEIs - Cardiff, Univeristy of South Wales, Cardiff Met, Swansea, Bangor, Wrexham and the Open University	Education and Commissioning	Twice yearly
Education Partnership Forum	NHS, Aberystwyth and Trinity St David's	Education and Commissioning	As required
Non contracted universities in Wales	NHS, Student representatives from all groups plus universities	Education and Commissioning	Quarterly
Health Student Forum	University Heads of School	Education and Commissioning	As required

University Heads of programmes		Education and Commissioning	Annually
Mentors / Practice Education Facilitators		Education and Commissioning	Annually
Bevan Commission and exemplars meetings WG policy leads	NHS, Bevan Commission	Education and Commissioning	Quarterly
	NHS, Qualifications	Education and Commissioning	Regular
HCSW Education Board	Wales, City and Guilds, Agored	Education and Commissioning	Every two weeks
Meetings	Directors of Therapies and Health Sciences	Education and Commissioning	As required
Meetings	Directors of Finance	Education and Commissioning	As required
Meetings	Directors of Nursing	Education and Commissioning	Monthly
Meetings	Primary Care Leads	Education and Commissioning	Quarterly
Postgraduate funding meetings	NHS Wales and Universities	Education and Commissioning	2 -3 per year
Healthcare Science Network	WG/HB leads	Education and Commissioning	Bi Monthly
Pathology Workforce and Education Group	HB leads	Education and Commissioning	Bi Monthly
Geonomics Partnership Wales Education and Training Group	HB leads/HEI	Education and Commissioning	6 weekly
Psychology Education Advisory Committee Board of Study	C&V/service users/HB's/trainees	Education and Commissioning	Quarterly
Geonomics at Swansea University	HBs/HEI	Education and Commissioning	Once per term
Board of Study Clinical Science and Radiation at Swansea University	HBs/HEI	Education and Commissioning	Once per term
National Endoscopy Programme Education and Development Sub Group	HB's	Education and Commissioning	Monthly

Student Streamlining Implementation Group	HB's/HEI's	Education and Commissioning	Monthly
Higher Education Funding Council for Wales		Education and Commissioning	Bi Annual
Nursing Now Group	HB's/HEI's	Education and Commissioning	Quarterly
WG Allied Health Professionals Policy Officers		Education and Commissioning	Twice a year
Cellular Pathology Sub Group	HB's/HEI's	Education and Commissioning	To be agreed first meeting Sept
Coleg Cymraeg Cenedlaethol AGM	HEIW/HEI's/Coleg	Education and Commissioning	Annual
Meeting, email, telephone	National School of Healthcare Science	Education and Commissioning	Regular
meeting, email,, telephone	University of West of England	Education and Commissioning	Regular
meeting, email,, telephone	HEE West Midlands	Education and Commissioning	Regular
Apprenticeship Steering group	Social Care Wales, Apprenticeship Providers	Education and Commissioning	Three monthly apx
All Wales Induction Framework	Social Care Wales. Further Education and Training Providers	Education and Commissioning	Six monthly apx
Care Network Wales	Local Authorities, Awarding Bodies, Education and Training Providers	Education and Commissioning	Monthly apx
Colegiau Cymru meeting Credit and Qualifications Framework for Wales	Qualifications Wales, Further Education Providers, Social Care Wales, Awarding Bodies	Education and Commissioning	Every three months apx
Advisory Group	Welsh Government, HEFCFW, Qualifications Wales, Social Care Wales,	Education and Commissioning	Annual
HCSW Operational Group	HBs and Trusts	Education and Commissioning	Monthly apx

HFE Meeting	Social Care Wales, Care Network Wales, Education Workforce Council	Education and Commissioning	Three monthly apx
Joint Induction Framework Pilot Steering Group	Hywel Dda Health Board, Third Sector organisations, Local Authorities, Hywel Dda Health Board, Third Sector organisations, Local Authorities,	Education and Commissioning	Three monthly apx
Joint Induction Framework Pilot Working Group	Hywel Dda Health Board, Third Sector organisations, Local Authorities,	Education and Commissioning	Monthly apx
QSAG		Education and Commissioning	Two monthly apx
WRMC		Education and Commissioning	Three monthly apx
National Eye Care Board	NHS	Eye Care	Bi-annually
Joint Committee Board	NHS	Eye Care	Quarterly
EHEW Service Advisory Board	HBs and multi- professional	Eye Care	Quarterly
Meeting Welsh Government	NHS, WG	Eye Care	Monthly
Optometry Wales - professional engagement body		Eye Care	Monthly
Association of Optometrists		Eye Care	Quarterly
Planned Care Board - Ophthalmology and NHS		Eye Care	Quarterly
Ophthalmic Strategic Advisory Board		Eye Care	Quarterly
Wales Optometry Committee		Eye Care	Quarterly
Wales Optometry Postgraduate Education Centre Board		Eye Care	Quarterly
College of Optometrists - CPD Group		Eye Care	Annually

## WORKFORCE & OD

Communication / Engagement Activity	Stakeholders:	HEIW rep	Frequency
All Wales Workforce and OD Directors Peer Group	NHS	WOD	Monthly
Welsh Partnership Forum	Trade Unions	WOD	
Meeting All Wales Heads of Communications Group	NHS Wales Heads of Communications	Communications and Engagement	Quarterly
Meeting WG Heads of Communications Group	WG Communications and NHS Wales Heads of Communications	Communications and Engagement	Quarterly
WG & NHS Heads of Communications Conference Call	WG Communications and NHS Wales Heads of Communications	Communications and Engagement	Weekly
A Healthier Wales Communications and Engagement Group - WG	WG, NHS, LA, RPB	Communications and Engagement	Quarterly
All Wales Primary Care Communications and Engagement Group Meeting / Email / Telephone Call	WG and NHS Wales representatives	Communications and Engagement	Quarterly
Social Care Wales Meeting / Email / Telephone Call	Social Care Wales	Communications and Engagement	Regular
College of Biomedical & Life Sciences	Cardiff University - Head of Communications	Communications and Engagement	Regular
Meeting / Email / Telephone Call Swansea University - NHS Wales Health and Wellbeing Network (HWB)	Recruitment & International Medical School	Communications and Engagement	Regular
NHS Staff Council, Health, Safety and Wellbeing Partnership Council	NHS	WOD	Every six weeks
	NHS, Trade Unions	Representing NHS Wales HWB Network	Quarterly

NHS Wales Managing Attendance at Work (MAAW) Project Group	NHS, Trade Unions	WOD	Every six weeks
MAAW e-learning task and finish group	NHS, Trade Unions	WOD	Fortnightly
NHS Wales Occupational Health Project Group	NHS, Trade Unions	WOD	Every six weeks
NHS Wales Occupational Health Services Review Task and Finish Group	NHS, Trade Unions	WOD	Fortnightly
Wellbeing Matters Evaluation and Update Task and Finish Group	NHS, Trade Unions	WOD	Fortnightly
Health Needs Assessment Task and Finish Group	NHS, Trade Unions	WOD	Fortnightly
Communication and Implementation Group (HWB network)	NHS, Trade Unions	WOD	Fortnightly
NHS Wales Staff Survey Project Group	NHS, WG, Trade Unions	Representing NHS Wales HWB Network	Monthly
NHS Wales Colleague Experience Theme	NHS, NHS Employers, Trade Unions.	Representing NHS Wales HWB Network and HEIW	As required
Work policy negotiating groups	Trade Unions, WG, Professional organisations e.g. BPS, DCP	Representing HWB and MAAW	
NHS Wales Health and Wellbeing conference		WOD	Annual
NHS Wales workforce information managers	NHS	Workforce Data and Analytics	Monthly
NHS workforce data dashboard / reporting	NHS, WG, Office of National Statistics	Workforce Data and Analytics	Monthly
NHS Wales Absence Management Monitoring Group	NHS	Workforce Data and Analytics	Monthly
NHS Wales Heads of Information	NHS	Workforce Data and Analytics	Monthly



NHS Wales Measuring College Experience group	NHS	Workforce Data and Analytics	Monthly
All Wales workforce efficiency group	NHS	Workforce Data and Analytics	Monthly
NHS Wales Strategic pay modelling and analysis	NHS	Workforce Data and Analytics	Monthly
Publication of workforce planning tool	NHS Wales	Workforce Data and Analytics	Annual
Primary Care Wales National Workforce Reporting System Group	NHS	Workforce Data and Analytics	
National ESR Data Warehouse User Group	NHS	Workforce Data and Analytics	Bi-monthly
NHS Wales Careers Network	NHS	Careers	Quarterly
	HEI career advisers, Department Work and Pensions, Job Centre Plus, Careers Wales	Careers	Regularly
Careers partnerships All Wales Assistant Directors of Organisational Development	NHS	WOD	Monthly
Joint Assistant Directors of Workforce and OD	NHS	WOD	Quarterly
NHS Workforce planning network	NHS	Workforce Planning	Bi-monthly
Joint Workforce Strategy Steering Group	NHS, Social Care Wales, WG, LA.	Workforce Planning	Monthly
Workforce Strategy Operational Management Group	NHS, Social Care Wales	Workforce Planning	Monthly
Clinical Modernisation Forum		Workforce Planning	Monthly
Critical Care Implementation Group		Workforce Planning	Monthly
NHS Wales Planners		Workforce Planning	Twice a year

We Care Stakeholder Advisory Group Planning Programme for Learning Steering Group	Social Care Wales	Workforce Planning	Quarterly
		Representing workfroce planning	Bi-monthly
Meeting Organisation leads for leadership	All Wales Assistant Directors of Workforce and OD	Leadership	Monthly
		Leadership	Quarterly
Leadership steering group	NHS Wales, Social Care Wales, Academi Wales	Leadership	Monthly
Leadership network	NHS Wales, Social Care Wales	Leadership	To be established
Leadership conference	NHS Wales, Swansea University	Leadership	Annual
Student Leadership Academi	NHS Wales, Social Care Wales, WG	Leadership	Quarterly
1000 Lives IQT Network	NHS Wales, NHS Wales, NES, NHS	Leadership	Quarterly
UK nations Collective Leadership Network Event	England, H&SC N Ireland, HSE Rep of Ireland	Leadership	Bi-annual
Finance Academy L&D steering Group	NHS Wales	Leadership	Bi-monthly
All Wales Medical Workforce Managers Group	Medical staffing leads	WOD	Bi-monthly

# CEO AND CHAIRMAN

Communication / Engagement Activity	Stakeholders	HEIW rep	Frequency
NHS Wales Collaborative Executive Group	NHS	CEO	Monthly
Chief Executive Management Team	NHS	CEO	Monthly
NHS Wales Executive Board	NHS. WG	CEO	Monthly
Welsh NHS Confederation Management Board	NHS	CEO	
All Wales Chairs & CEOs Ministerial Meeting	NHS. WG.	CEO	Quarterly
All Wales Chairs & CEOs	NHS	CEO	Quarterly
National Programme for Unscheduled Care Board	NHS	CEO	Bi-monthly
Meetings, email, telephone calls Social Care Wales	Social Care Wales	CEO	Regular
111 Urgent Primary Care OOH	NHS	CEO	Monthly
Transformation Programme Advisory Board		CEO	Every three months
UK Advisory Forum for Wales	GMC	CEO	Yearly
Collaborative Leadership Forum	NHS	CEO	Quarterly
Cancer Implementation Group	NHS	CEO	Quarterly
Director of Workforce, WG	WG	CEO	Ad hoc
Welsh Partnership Forum	NHS	CEO	Every four months
Meeting - Four Nations	NHS Wales, Scotland, England and Northern Ireland	CEO	Two per year
Meeeting Chief Medical Officer, WG	Wales Audit Office	CEO	Quarterly
	WG	CEO	Quarterly

Resource Allocation Review - Technical Advisory Group Welsh NHS Confederation	NHS	Chairman	Monthly
Management Board Collaborative Leadership Forum	NHS	Chairman	Quarterly
European Advisor Group		Chairman	Quarterly
Chairs Peer Group	NHS	Chairman	Bi-monthly
All Wales Chairs Ministerial	NHS WG	Chairman	Monthly
All Wales Chairs and CEOs	NHS	Chairman	Quarterly
All Wales Chairs and CEOs Ministerial	NHS WG	Chairman	Quarterly
Transport for Wales - IRT Programme Board		Chairman	Quarterly
Ministerial Taskforce for the South Wales Valleys		Chairman	Monthly
111/OOH Implementation	NHS	Chairman	Bi-monthly
Progreamme Board Urgent Primary Care Service Workforce and Education	NHS	Chairman	Bi-monthly
Health and Social Care Brexit Ministerial Stakeholder Advisory Forum	NHS WG	Chairman	Quarterly
All Wales GP OOH Forum	NHS	Chairman	As required
Meeting Chief Medical Officer, WG	Wales Audit Office WG	Chairman Chairman	Bi-monthly Quarterly Quarterly

## FINANCE, CORPORATE SERVICES, DIGITAL AND PLANNING

Communication / Engagement Activity	Stakeholders	HEIW rep	Frequency
All Wales Directors of Planning Peer Group	NHS	Planning	Monthly
All Wales Directors of Finance Peer Group	NHS	Finance	Monthly
Finance Academy Board	NHS Wales, Professional Accounting Bodies	Finance	
NHS Wales Infrastructure Management Board	NHS	Digital	Monthly
eLibrary Management Board	NHS. Cardiff Uni.	Digital	Monthly/Quarterly
Software apps	NHS Wales	Digital	Regular
NWIS SLA performance management	NHS. NWIS	Digital	Quarterly
HICOM SLA performance management	NHS	Digital	Quarterly
All Wales Assistant Directors of Planning	NHS	Planning	Monthly
IMTP	NHS organisations	Planning	Regular
Informatics Planning & Delivery Group	NHS	Digital	Monthly
All Wales NHS Management Advisory Group	NHS	Corporate services	Quarterly
Liaison with Suppliers & Contractors regarding establishment and management of specific service & maintenance contracts	Suppliers and Contractors	Corporate services	regular
Liaison with H&S consultant	H&S consultant	Corporate services	bimonthly
Deputy Board Secretaries Peer Group Network	NHS Wales	Corporate services	Monthly
FOI community of practice peer group	NHS Wales	Corporate services	Bi-annual
Mwy na Geiriau/ More than Just Words Forum	NHS Wales	Corporate services	Quarterly
NHS Welsh Language Managers	NHS Wales and Welsh Government	Corporate services	Quarterly
Grwp Deddf	Public Sector Bodies in the south	Corporate services	Quarterly
Seren Network		Corporate services	Regular
Welsh language open days and events		Corporate services	Regular



**GIG**  
CYMRU  
**NHS**  
WALES

Addysg a Gwellu Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

<b>Meeting Date</b>	<b>28 November 2019</b>	<b>Agenda Item</b>	
<b>Report Title</b>	<b>Approve proposed amendments to HEIW's Standing Orders</b>		
<b>Report Author</b>	Dafydd Bebb, Board Secretary		
<b>Report Sponsor</b>	Dafydd Bebb, Board Secretary		
<b>Presented by</b>	Dafydd Bebb, Board Secretary		
<b>Freedom of Information</b>	Open		
<b>Purpose of the report</b>	To invite the Board to review the proposed amendments to HEIW's Standing Orders (SOs).		
<b>Key Issues</b>	<ul style="list-style-type: none"> <li>September Board approved the paper on Future Ways of Working (<b>Appendix 1</b>) which required amendments to HEIW's SOs;</li> <li>the Board is also invited to consider an amendment to the SOs in respect a sub-heading for the Delegated Financial Limits;</li> <li>the proposed amended SOs are attached at <b>appendix 2</b>;</li> <li>it is a requirement that any amendments to the SOs must first be reviewed by the Audit and Assurance Committee (A&amp;AC);</li> <li>The proposed amendments were considered at the A&amp;AC held on 23 November and a verbal update of the Committee's deliberation will be received by the Board.</li> </ul>		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
			<b>Approval</b> ✓
<b>Recommendations</b>	<p>Members are asked to:</p> <p>consider the Standing Orders as outlined in <b>appendix 2</b> and, subject to receiving a verbal update from the A&amp;AC, approve the same.</p>		

## **Approve proposed amendments to HEIW's Standing Orders**

### **1. INTRODUCTION**

The purpose of the report is to invite the Board to approve the proposed amendments to HEIW's Standing Orders (SOs).

### **2. BACKGROUND**

The September Board Meeting of HEIW approved the recommendations of the paper on Future Ways of Working (**Appendix 1**).

The purpose of the Future Ways of Working paper is to clarify the working relationship between the Board, the Education Commissioning and & Quality Committee (EC&QC) and the Audit & Assurance Committee (A&AC).

The adoption of the Future Ways of Working at September Board has resulted in the proposed amendments to the SOs.

The Board is also requested to approve an amendment to a sub-heading within the Delegated Financial Limits (p 50). The Sub-heading currently reads " Education and Training Contracts with Universities". It is noted that it is not and was never HEIW's intention that such a limit be applied to Universities only. Given this it is proposed that the words "with Universities" be deleted.

The proposed amendments relating to the terms of reference of the EC&QC were considered by the EC&QC at its meeting on 21 October where they were recommended to Board for approval.

HEIW's SOs require that any proposed amendment to the SOs are considered by the A&AC. The proposed amendments were considered at the meeting of the A&AC on 22 November.

A verbal update in respect of the outcome of the A&AC's deliberations will be provided at November Board.

The above amendments are incorporated in the attached SOs at **appendix 2**.

### 3. GOVERNANCE AND RISK ISSUES

Clarifying the working relationships between the Board, the EC&QC, and the A&AC will ensure that each organisational body undertakes an appropriate range and level of work. Ensuring that respective governance and accountability mechanisms are clearly defined will reduce the risk of overlap and gaps within the governance structure.

### 4. FINANCIAL IMPLICATIONS

There are no financial implications for the Board to consider.

### 5. RECOMMENDATION

Members are asked to:

- consider the Standing Orders as outlined in **appendix 2** and, subject to receiving a verbal update from the A&AC, approve the same.

Governance and Assurance				
Link to corporate objectives (please ✓)	As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand	Building a sustainable and flexible health and care workforce for the future.	With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.	Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
	✓			
	Improving opportunities for use of technology and digitalisation in the delivery of education and care.	Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales	Demonstrating value from investment in the workforce and the organisation.	
Quality, Safety and Patient Experience				
Clarifying the working relationships between the Board, the EC&QC, and the A&AC will reduce the risk of overlap and gaps within the governance structure and support HEIW in making fully informed decisions. Informed decisions are more likely to impact favourably on the quality, safety and experience of patients and staff.				



<b>Financial Implications</b>	
No financial implications for the Board to be aware of.	
<b>Legal Implications (including equality and diversity assessment)</b>	
It is essential that HEIW complies with its Standing Orders.	
<b>Staffing Implications</b>	
No staffing implications for the Board to be aware of.	
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>	
na	
<b>Report History</b>	The paper on Future Ways of Working - relationship between the EC&QC, the Board and the A&AC, was approved at September Board. The proposed amendments relating to the terms of reference of the EC&QC were considered by the EC&QC at its meeting on 21 October. The proposed amendments to the SOs were considered by the A&AC held on 22 November.
<b>Appendices</b>	<b>Appendix 1</b> - The paper on Future Ways of Working adopted at September Board. <b>Appendix 2</b> – Proposed SOs.



**GIG**  
CYMRU  
**NHS**  
WALES

Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

Meeting Date	26 September 2019		Agenda Item	
Report Title	Future ways of working - relationship between the Education Commissioning and Quality Committee, the Board and the Audit and Assurance Committee			
Report Author	Dafydd Bebb, Board Secretary			
Report Sponsor	Dafydd Bebb, Board Secretary			
Presented by	Ruth Hall, Chair Education Commissioning and Quality Committee			
Freedom of Information	Open			
Purpose of the Report	To clarify the future ways of working for the Education Commissioning and Quality Committee (EC&QC) in respect of its role with the Board and the Audit and Assurance Committee (A&AC).			
Key Issues	<p>Clarification of the EC&amp;QC's future ways of working is required to ensure that decision making is undertaken at the appropriate level and to avoid any overlaps or gaps in the governance structure.</p> <p>The proposed 'Future Ways of Working' are detailed in para 2.1 of this paper.</p> <p>Subject to Board approval it is proposed that HEIW's Standing Orders (SOs) will be amended to incorporate the approach detailed within the Future Ways of Working.</p> <p>While the Board will formally approve amendments to the SOs they shall first require the consideration of the Audit Committee.</p>			
Specification Required	Information	Discussion	Assurance	Approval
				✓
Recommendations	<p>Members are asked to approve:</p> <ul style="list-style-type: none"><li>the Future Ways of Working (detailed in para 2.1 below);</li><li>that the A&amp;AC be directed to consider the attached SOs which have been amended to incorporate the Future Ways of Working;</li><li>that the EC&amp;QC be directed to:  consider the amendments to its own terms of reference; consider the terms of reference for an internal multi-professional education group and for an External Integrated Group to advise on education and training priorities</li></ul> <ul style="list-style-type: none"><li>that the proposed Future Ways of Working be subject to review in 12 months.</li></ul>			

# **Education Commissioning and Quality Committee Future Ways of Working**

## **1. INTRODUCTION**

The purpose of the Future Ways of Working, detailed in paragraph 2.1 below, is to clarify the working relationship between the Board, the Education Commissioning and Quality Committee (EC&QC), and the Audit & Assurance Committee (A&AC).

This will ensure the EC&QC undertakes an appropriate range and level of work and that governance mechanisms are clearly defined. It is proposed that HEIW's Standing Orders (SOs) (Appendix 1) together with the EC&QCs forward work programme are amended to incorporate the Future Ways of Working.

## **2. Background**

The Future Ways of Working of the EC&QC were considered at a development session on 1 July and Board Development Session (BDS) on 29 August. The proposed ways of working are captured in paragraph 2.1 below.

These aim to draw on the full strength and expertise of the Board while enabling its Committees to review matters in detail and build an in depth knowledge amongst its members.

### **2.1 Future ways of working**

#### *2.1.1 Relationship between the EC&QC and Board*

Strategic decision making shall be reserved for the Board. Both the EC&QC and the Board (through the BDS) shall make recommendations to the Board in respect of strategic matters relating to education commissioning and education quality.

The EC&QC shall seek assurance on behalf of the Board in respect of performance, quality and value of education contracts (e.g. recruitments, retention and student satisfaction), assessment of post graduate trainees and assessment of how well they are being educated by Trusts and Health Boards. The EC&QC shall also seek assurance in respect of Quality Improvement training. The EC&QC will highlight any issues out of the ordinary to the Board.

The Board shall retain the role of seeking updates and assurance in respect of the Revalidation process.

The EC&QC shall scrutinise the specification of tender documents relating to education contracts and make recommendations to the Board. Final approval of the specification documents shall be retained by the Board.

The terms of reference for the EC&QC currently delegates final approval of training plans, including investment and disinvestment, (before it is recommended to Welsh Government for approval) to the EC&QC. This will need to be amended so that the EC&QC may recommend to the Board only.

The forward work programme of the EC&QC shall reflect the Future Ways of Working and be subject to Board approval.

#### *2.1.2 Relationship between the EC&QC and the A&AC*

The EC&QC shall seek assurance and provide scrutiny on behalf of the Board:

- for ensuring the optimum quality of education within the available resource;
- in respect of risk and direct the Audit Committee to material issues of concern;
- on value for money on expenditure on training and education contracts.

The A&AC shall seek assurance and provide scrutiny on behalf of the Board:

- to ensure that the EC&QC follows the correct processes for ensuring value for money;
- to ensure the contracting and tendering process for education and training contracts has been followed;
- on any areas highlighted by the EC&QC within its terms of reference that requires governance action by the A&AC

Both Committees shall work closely on areas of mutual interest to ensure that overlaps and gaps are avoided.

#### *2.1.3 Relationship between the EC&QC and internal and external stakeholders*

The EC&QC shall establish an Internal Multi-professional Education Group to ensure the co-ordination and oversight of all education activity across HEIW. This will have representation from all directorates. The draft terms of reference for this Internal Group shall be considered at the next meeting of the EC&QC and then considered for approval at November Board.

The EC&QC shall make appropriate arrangements for the establishment of an External Integrated Group to advise on education and training priorities. This

group may establish task and finish groups to undertake specific work on areas of identified need. The draft terms of reference for this External Group shall be considered at the next meeting of the EC&QC and then considered for approval at November Board.

This External Integrated Group will be tasked with identifying future education training requirements and considering future proposals and new education opportunities which would be considered by the EC&QC prior to submission to the full Board.

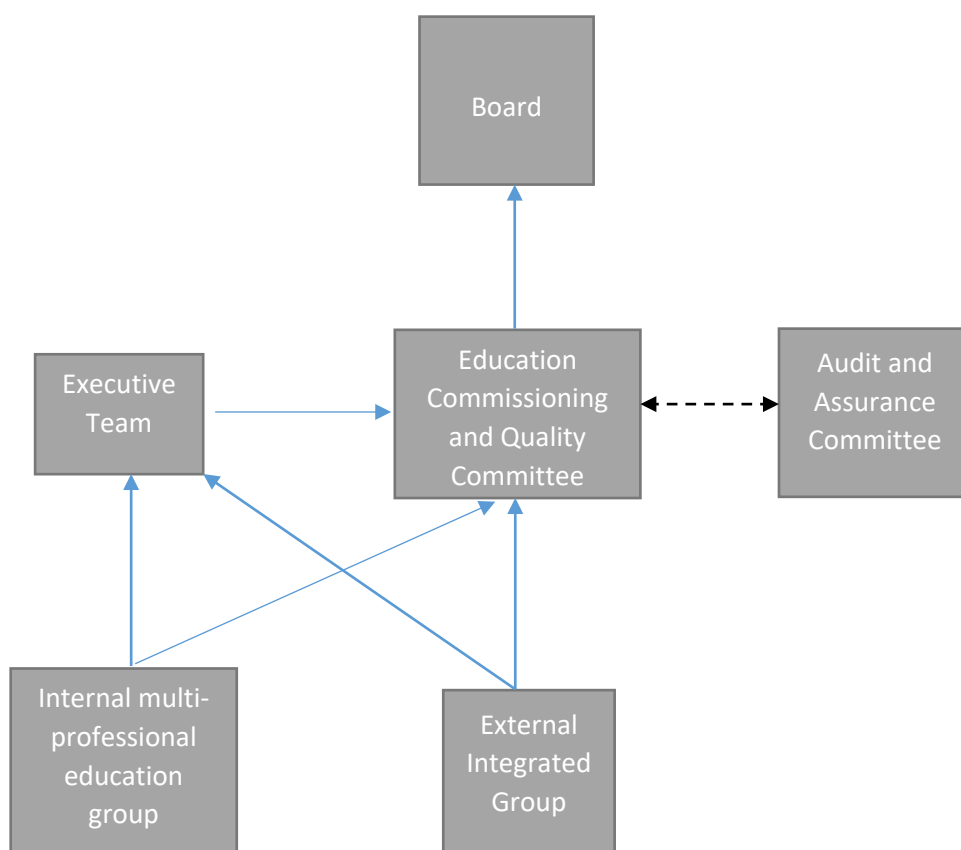
The communication strategy of HEIW will need to consider how it will enhance the overall approach to commissioning.

#### 2.1.4 Membership of the EC&QC

Given that the EC&QC has only 2 independent members, an independent member be nominated to act as a substitute for an absent member of the Committee. Such a substitute when called upon will as a full member of the Committee.

Diagram 1

The relationships between the Board, EC&QC the A&AC, Executive and the internal and external groups are illustrated below:



### 3. GOVERNANCE AND RISK ISSUES

Clarifying the working relationships between the Board, the EC&QC, and the A&AC will ensure the EC&QC undertakes an appropriate range and level of work. Ensuring that respective governance and accountability mechanisms are clearly defined will reduce the risk of overlap and gaps within the governance structure.

### 4. FINANCIAL IMPLICATIONS

There are no direct financial implications.

### 5. RECOMMENDATION

Members are asked to approve:

- the Future Ways of Working (detailed in para 2.1 below);
- that the A&AC be directed to consider the attached Standing Orders which have been amended to incorporate the Future Ways of Working;
- that the EC&QC be directed to:

consider the amendments to its terms of reference;  
consider the terms of reference for an internal multi-professional education group and for an External Integrated Group to advise on education and training priorities

- that the proposed future ways of working be subject to review in 12 months.

Governance and Assurance				
Link to corporate objective (please ✓)	As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand	Building a sustainable and flexible health and care workforce for the future.	With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.	Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
	✓	✓		✓
	Improving opportunities for use of technology and digitalisation in the delivery of education and care.	Reinvigorating leadership development and succession planning across health and social care in partnership with	Demonstrating value from investment in the workforce and the organisation.	

		Social Care Wales and Academi Wales		
	✓		✓	
<b>Quality, Safety and Patient Experience</b>				
Clarifying the working relationships between the Board, the EC&QC, and the Audit & Assurance Committee (Audit Committee) will reduce the risk of overlap and gaps within the governance structure and support HEIW in making fully informed decisions. Informed decisions are more likely to impact favourably on the quality, safety and experience of patients and staff.				
<b>Financial Implications</b>				
There are no direct financial implications.				
<b>Legal Implications (including equality and diversity assessment)</b>				
There are no direct legal implications.				
<b>Staffing Implications</b>				
There are no direct staffing implications.				
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>				
n/a				
<b>Report History</b>	The Future Ways of Working were considered at the August BDS.			
<b>Appendices</b>	Appendix 1 - Draft HEIW Standing Orders amended to include the approach outline within the Future Ways of Working.			



**GIG**  
CYMRU  
**NHS**  
WALES

Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

## Standing Orders

**Executive Sponsor & Function:**

Board Secretary

**Document Author:**

Dafydd Bebb

**Approved by:**

HEIW Board

**Approval Date:**

30 May, 2019

**Date of Equality Impact Assessment:**

19 March, 2019

**Equality Impact Assessment Outcome:**

No impact

**Review Date:**

October, 2019

**Version:** Final and approved.



## Foreword

The Health Education and Improvement Wales 'HEIW' Regulations 2017 provides that HEIW must make standing orders for the regulation of its proceedings and business, including provision for the suspension of all or any of the standing orders.

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

These documents form the basis upon which HEIW's governance and accountability framework is developed and, together with the adoption of the HEIW's Values and Standards of Behaviour framework, is designed to ensure the achievement of the standards of good governance set for health organisations in Wales.

All HEIW Board members and officers must be made aware of these Standing Orders and, where appropriate, should be familiar with their detailed content. The Board Secretary will be able to provide further advice and guidance on any aspect of the Standing Orders or the wider governance arrangements within HEIW.

Further information on governance in the NHS in Wales may be accessed at [www.wales.nhs.uk/governance-emanual/](http://www.wales.nhs.uk/governance-emanual/)

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## Section A – Introduction

### Statutory framework

- i) Health Education and Improvement Wales (HEIW) is a Special Health Authority (SHA) that was established on 05 October 2017 and became operational on the 01 October 2018, following a six month period in shadow form under The Health Education and Improvement Wales (Establishment and Constitution) Order 2017 (SI No. 913 (W. 224)) “the Establishment Order”.
- ii) The principal place of business of HEIW is – Ty Dysgu, Cefn Coed Parc, Nantgarw, Cardiff. CF15 7QQ.
- iii) All business shall be conducted in the name of HEIW, and all funds received in trust shall be held in the name of HEIW as a corporate Trustee.
- iv) HEIW is a corporate body and its functions must be carried out in accordance with its statutory powers and duties. HEIW’s functions are set out in the Establishment Order and in Directions issued by Welsh Ministers.
- v) In addition to Directions the Welsh Ministers will issue an annual remit letter and may from time to time issue guidance which HEIW must take into account when exercising any function.
- vi) Under powers set out in paragraph 3(3) of Schedule 5 to the NHS (Wales) Act 2006, the Welsh Ministers has made **the Health Education and Improvement (Wales) Regulations 2017 (S.I. 2017/909 (W.221))** (“the Constitution Regulations”) which make provision concerning the membership and procedures of HEIW.
- vii) In carrying out its duties it will co-operate with others.
- viii) Section 72 of the NHS Act 2006 places a duty on NHS bodies, including an SHA to co-operate with each other in exercising their functions.
- ix) Section 82 of the NHS Act 2006 places a duty on NHS bodies, including an SHA, and local authorities to co-operate with one another in order to secure and advance the health and welfare of the people of England and Wales.
- x) The Welsh Language (Wales) Measure 2011 makes provision with regards to the development of standards relating to the Welsh language. The Welsh Language Standards (No 7) Regulations 2018 for the health sector do not currently apply to HEIW. It will apply at a future date but in the interim HEIW

will develop a Welsh Language policy/scheme to deliver commitments relating to Welsh language.

- xi) As a SHA, HEIW is also bound by any other statutes and legal provisions which govern the way that NHS bodies do business. The powers of NHS bodies established under statute shall be exercised by NHS bodies meeting in public session, except as otherwise provided by these SOs.
- xii) HEIW shall issue an indemnity to any Chair and Independent Member in the following terms: “A Board or Committee member, who has acted honestly and in good faith, will not have to meet out of their personal resources any personal liability which is incurred in the execution of their Board function. Such cover excludes the reckless or those who have acted in bad faith”.

### **NHS framework**

- xiii) In addition to the statutory requirements set out above, NHS bodies including SHAs must carry out all business in a manner that enables them to contribute fully to the achievement of the Welsh Government’s vision for the NHS in Wales and its standards for public service delivery. The governance standards set for the NHS in Wales are based upon the Welsh Government’s Citizen Centred Governance principles. These principles provide the framework for good governance and embody the values and standards of behaviour that is expected at all levels of the service, locally and nationally.
- xiv) Adoption of the principles will better equip NHS bodies to take a balanced, holistic view of their organisations and their capacity to deliver high quality, safe healthcare services for all its citizens within the NHS framework set nationally.
- xv) The overarching NHS governance and accountability framework incorporates these SOs; the Schedules of Reservation and Delegation of Powers; SFIs together with a range of other frameworks designed to cover specific aspects. These include the NHS Values and Standards of Behaviour Framework; the *‘Doing Well, Doing Better: Standards for Health Services in Wales’* (formally the Healthcare Standards) Framework, the NHS Risk and Assurance Framework, and the NHS planning and performance management systems.
- xvi) The Welsh Ministers, reflecting their constitutional obligations, have stated that sustainable development should be the central organising principle for the public sector and a core objective for the restructured NHS in all it does. The Well-being of Future Generations (Wales) Act 2015 explains what is meant by sustainable development and requires bodies that are designated as ‘public bodies’ under section 6 of the 2015 Act to set well-being objectives and contribute to the achievement of well-being goals.

- xvii) Full, up to date details of the other requirements that fall within the NHS framework – as well as further information on the Welsh Government’s Citizen Centred Governance principles - are provided on the NHS Wales Governance e-manual which can be accessed at [www.wales.nhs.uk/governance-emanual/](http://www.wales.nhs.uk/governance-emanual/). Directions or guidance on specific aspects of business are also issued in hard copy, usually under cover of a Ministerial letter.
- xviii) HEIW will from time to time agree and approve policy statements which apply to the Board members and/all or specific groups of staff employed by HEIW. The decisions to approve these policies will be recorded in the appropriate Board minute and, where appropriate will be considered to be an integral part of HEIW’s SOs and SFIs. Details of the key policy statements will be included in Schedule 2.
- xix) HEIW shall ensure that an official is designated to undertake the role of the Board Secretary (the role of which is set out in paragraph xxv below).

### **Applying Standing Orders**

- xx) The SOs of HEIW (together with SFIs and the Values and Standards of Behaviour Framework), will, as far as they are applicable, also apply to meetings of any formal Committees established by HEIW including any Advisory Groups, sub-Committees, joint-Committees and joint sub-Committees. These SOs may be amended or adapted for the Committees as appropriate, with the approval of the Board. Further detail on the Committees may be found in Schedule 3 of these SOs.
- xxi) Full details of any non compliance with these SOs, including an explanation of the reasons and circumstances must be reported in the first instance to the Board Secretary, who will ask the Audit and Assurance Committee to formally consider the matter and make proposals to the Board on any action to be taken. All Board members and HEIW officers have a duty to report any non compliance to the Board Secretary as soon as they are aware of any circumstance that has not previously been reported. **Ultimately, failure to comply with SOs is a disciplinary matter that could result in an individual’s dismissal from employment or removal from the Board.**

### **Variation and amendment of Standing Orders**

- xxii) Although these SOs are subject to regular, annual review by HEIW, there may, exceptionally, be an occasion where it is necessary to vary or amend the SOs during the year. In these circumstances, the Board Secretary shall advise the Board of the implications of any decision to vary or amend SOs, and such a decision may only be made by the Board if:

- The variation or amendment is in accordance with regulation 15 of the Constitution Regulations and does not contravene a statutory provision or direction made by the Welsh Ministers;
- The proposed variation or amendment has been considered and approved by the Audit and Assurance Committee and is the subject of a formal report to the Board; and
- A formal notice of motion under Standing Order 5.5.14 has been given.

## Interpretation

- xxiii) During any Board meeting where there is doubt as to the applicability or interpretation of the SOs, the Chair of HEIW shall have the final say, provided that his or her decision does not conflict with rights, liabilities or duties as prescribed by law. In doing so, the Chair shall take appropriate advice from the Board Secretary and, where appropriate the Chief Executive or the Director responsible for finance (in the case of SFIs).
- xxiv) The terms and provisions contained within these SOs aim to reflect those covered within all applicable legislation. The legislation takes precedence over these SOs when interpreting any term or provision covered by legislation.

## The role of the Board Secretary

- xxv) The role of the Board Secretary is crucial to the ongoing development and maintenance of a strong governance framework within HEIW, and is a key source of advice and support to the HEIW Chair and other Board members. Independent of the Board, the Board Secretary acts as the guardian of good governance within HEIW:
- Providing advice to the Board as a whole and to individual Board members on all aspects of governance;
  - Facilitating the effective conduct of HEIW business through meetings of the Board, its Advisory Groups and Committees;
  - Ensuring that Board members have the right information to enable them to make informed decisions and fulfil their responsibilities in accordance with the provisions of these SOs;
  - Ensuring that in all its dealings, the Board acts fairly, with integrity, and without prejudice or discrimination;
  - Contributing to the development of an organisational culture that embodies public services values and standards of behaviour; and
  - Monitoring HEIW's compliance with the law, SOs and the governance and accountability framework set by the Welsh Ministers.
- xxvi) As advisor to the Board, the *Board Secretary's* role does not affect the specific responsibilities of Board members for governing the organisation.



The Board Secretary is directly accountable for the conduct of their role to the Chair and Chief Executive, and reports on a day to day basis to the Chief Executive.

- xxvii) Further details on the role of the Board Secretary within HEIW, including details on how to contact them, are available at [www.heiw.nhs.wales](http://www.heiw.nhs.wales)

## Section B – Standing Orders

### 1. HEALTH EDUCATION AND IMPROVEMENT WALES

- 1.0.1 **HEIW's principal role is to take a strategic approach to developing the Welsh health workforce for now and for the future. Its functions include:**

**Workforce intelligence** – HEIW will be the central, recognised source for information and intelligence about the Welsh health workforce;

**Workforce planning** – HEIW will provide strategic leadership for workforce planning, working with health boards/trusts and the Welsh Government to produce a forward strategy to transform the workforce to deliver new health and social models of service delivery;

**Education commissioning, planning and delivery** – HEIW will utilise its funding to ensure value for money and the provision of a workforce which reflects future healthcare needs;

**Quality management** – HEIW will quality manage education and training provision ensuring it meets required standards, and improvements are made where required;

**Supporting regulation** – HEIW will play a key role representing Wales in liaison with regulators, working within the policy framework established by the Welsh Government. HEIW will also undertake, independently of the Welsh Government, specific regulatory support roles;

**Leadership development** – HEIW will establish the strategic direction and delivery of leadership development for staff within NHS Wales at all levels;  
**Careers and widening access** – HEIW will provide the strategic direction for health careers and the widening access agenda, delivering an ongoing agenda to promote health careers;

**Workforce improvement** – HEIW will provide a strategic leadership role for workforce transformation and improvement, and deliver within its functions an ongoing programme to meet that role;

**Professional support for workforce and organisational development (OD) in NHS Wales** – HEIW will support the professional workforce and OD profession within Wales.

- 1.0.2 HEIW was established by the Health Education and Improvement Wales (Establishment and Constitution) Order 2017 (SI No. 913 (W. 224)). HEIW must ensure that all its activities are in exercise of those functions or other

statutory functions that are conferred on it through directions issued by the Welsh Ministers.

- 1.0.3 To fulfil this role, HEIW will work with all its partners and stakeholders in the best interests of the population of Wales.

## **1.1 Membership of Health Education and Improvement Wales Board**

- 1.1.1 The membership of the HEIW Board shall be no more than 12 members comprising the Chair (appointed by the Cabinet Secretary for Health and Social Services), the Chief Executive and officer and non-officer members. A Vice Chair may also be appointed by the Board from the existing Independent Board Members.
- 1.1.2 For the purposes of these SOs, the members of the HEIW Board shall collectively be known as “the Board” or “Board members”; the officer and non-officer members (which will include the Chair) shall be referred to as Executive Directors and Independent Members respectively; and the Chief Officer and the Chief Finance Officer shall respectively be known as the Chief Executive and the Director of Corporate Services and Finance. All such members shall have full voting rights. There may also be Associate Members who do not have voting rights.

### *Officer Members [to be known as Executive Directors]*

- 1.1.3 A total of 5 (including the Chief Executive), appointed by the Board.

### *Non Officer Members [to be known as Independent Members]*

- 1.1.4 A total of 7 (including the Chair), appointed by the Cabinet Secretary for Health and Social Services.

### *Associate Members*

- 1.1.5 A total of up to 3 Associate Members may be appointed by the Board to assist in carrying out its functions subject to the agreement of the Cabinet Secretary for Health and Social Services. They will attend Board meetings on an ex-officio basis, but will not have any voting rights.

### *Use of the term ‘Independent Members’*

- 1.1.6 For the purposes of these SOs, use of the term ‘Independent Members’ refers to the following voting members of the Board:

- Chair

- Vice Chair (if appointed)
- Non Officer Members

Unless otherwise stated.

## **1.2 Tenure of Board members**

- 1.2.1 Independent Members and Associate Members appointed by the Cabinet Secretary for Health and Social Services shall be appointed for a period specified by the Welsh Ministers, but for no longer than 4 years in any one term. These members can be reappointed but may not serve a total period of more than 8 years. Time served need not be consecutive and will still be counted towards the total period even where there is a break in the term.
- 1.2.2 Any Associate Member appointed to the Board under 1.1.5 will be for a period of up to one year, with a maximum term of four years if re-appointed.
- 1.2.3 Executive Directors' tenure of office as Board members will be determined by their contract of appointment.
- 1.2.4 All Independent Board members' tenure of appointment will cease in the event that they no longer meet any of the eligibility requirements, so far as they are applicable, as specified in Schedule 1 of the Constitution Regulations. Any member must inform the Chair as soon as is reasonably practicable to do so in respect of any issue which may impact on their eligibility to hold office. The Chair will advise the Minister in writing of any such cases immediately.
- 1.2.5 HEIW will require Independent Board members to confirm in writing their continued eligibility on an annual basis.

## **1.3 The Role of the HEIW Board and responsibilities of individual members**

### Role

- 1.3.1 The principal role of HEIW is set out in SO 1.0.1. The Board's main role is to add value to the organisation through the exercise of strong leadership and control, including:
  - Setting the organisation's strategic direction
  - Establishing and upholding the organisation's governance and accountability framework, including its values and standards of behaviour
  - Ensuring delivery of the organisation's aims and objectives through effective challenge and scrutiny of HEIW performance across all areas of activity.

### Responsibilities

- 1.3.2 The Board will function as a corporate decision-making body, Executive Directors and Independent Members being full and equal members and sharing corporate responsibility for all the decisions of the Board.
- 1.3.3 Independent Members appointed to the Board must do so in a balanced manner, ensuring that any opinion expressed is objective and based upon the best interests of delivering education and improvement in the health service.
- 1.3.4 Associate Members, whilst not sharing corporate responsibility for the decisions of the Board, are nevertheless required to act in a corporate manner at all times, as are their fellow Board members who have voting rights.
- 1.3.5 All Board members must comply with their terms of appointment. They must equip themselves to fulfil the breadth of their responsibilities by participating in appropriate personal and organisational development programmes, engaging fully in Board activities and promoting HEIW within the communities it serves.
- 1.3.6 **The Chair** – The Chair is responsible for the effective operation of the Board, chairing Board meetings when present and ensuring that all Board business is conducted in accordance with these SOs. The Chair may have certain specific powers delegated by the Board and set out in the Scheme of Delegation.
- 1.3.7 The Chair shall work in close harmony with the Chief Executive and, supported by the Board Secretary, shall ensure that key and appropriate issues are discussed by the Board in a timely manner with all the necessary information and advice being made available to the Board to inform the debate and ultimate resolutions.
- 1.3.8 **The Vice-Chair** – The Vice-Chair shall deputise for the Chair in their absence for any reason, and will do so until either the existing chair resumes their duties or a new chair is appointed.
- 1.3.9 **Chief Executive** – The Chief Executive is responsible for the overall performance of the executive functions of HEIW. They are the appointed Accountable Officer for HEIW and shall be responsible for meeting all the responsibilities of that role, as set out in their Accountable Officer Memorandum.
- 1.3.10 **Lead roles for Board members** – The Chair will ensure that individual Board members are designated as lead roles or “champions” as required by the

Welsh Ministers or as set out in any statutory or other guidance. Any such role must be clearly defined and must operate in accordance with the requirements set by HEIW, the Welsh Ministers or others. In particular, no operational responsibilities will be placed upon any Independent Member fulfilling such a role. The identification of a Board member in this way shall not make them more vulnerable to individual criticism, nor does it remove the corporate responsibility of the other Board members for that particular aspect of Board business.

## **2. RESERVATION AND DELEGATION OF HEIW FUNCTIONS**

2.0.1 Subject to any directions that may be given by the Welsh Ministers, the Board shall make arrangements for certain functions to be carried out on its behalf so that the day to day business of HEIW may be carried out effectively and in a manner that secures the achievement of its aims and objectives. In doing so, the Board must set out clearly the terms and conditions upon which any delegation is being made.

2.0.2 The Board's determination of those matters that it will retain, and those that will be delegated to others shall be set out in a:

- i Schedule of matters reserved to the Board;
- ii Scheme of delegation to committees and others; and
- iii Scheme of delegation to officers.

All of which must be formally adopted by the Board in full session and form part of these SOs.

2.0.3 HEIW retains full responsibility for any functions delegated to others to carry out on its behalf. Where HEIW has a joint duty, it remains fully responsible for its part, and shall agree through the determination of a written Partnership Agreement the governance and assurance arrangements for the partnership, setting out respective responsibilities, ways of working, accountabilities and sources of assurance of the partner organisations.

### **2.0.4 Shared and Hosted Services Arrangements**

Where HEIW uses a shared or hosted service provided by another NHS organisation to undertake part and/or support it in delivering its functions, the ultimate responsibility remains with HEIW.

From 1<sup>st</sup> June 2012 the function of managing and providing Shared Services to the health service in Wales was given to Velindre NHS Trust. The **Velindre National Health Service Trust Shared Services Committee (Wales) Regulations 2012** (S.I. 2012/1261 (W.156)) ("the

Shared Services Regulations”) require the Trust to establish a Shared Services Committee (known for operational purposes as the Shared Services Partnership Committee) which will be responsible for exercising the Trust’s Shared Services functions. The Shared Services Regulations prescribe the membership of the Shared Services Committee in order to ensure that all LHBs and Trusts in Wales have a member on the Shared Services Committee and that the views of all the NHS organisations in Wales are taken into account when making decisions in respect of Shared Services activities.

A Senior Management Team, led by the Director of Shared Services, is responsible for the delivery of Shared Services in accordance with an Integrated Medium Term Plan agreed by the Shared Services Committee. The Director of Shared Services holds Accountable officer status, and retains overall accountability in relation to the management of Shared Services.

A Memorandum of Co-operation and Hosting Agreement is in place between all LHBs and Trusts setting out the obligations of NHS bodies to participate in the Shared Services Committee and to take collective responsibility for setting the policy and delivery of the Shared Services to the health service in Wales. Responsibility for the exercise of the Shared Services functions will not rest with the Board of Velindre NHS Trust but will be a shared responsibility of all NHS bodies in Wales.

The Regulations for the Shared Services Committee presently do not encompass Strategic Health Authority members. HEIW will therefore have observer status on the Committee, until such time as the regulations are amended. Shared Services Partnership was established to provide shared services to the health service in Wales, and therefore can provide shared services to HEIW in accordance with agreed Service Level Agreements, until such time as HEIW becomes a full member of the Shared Services Committee, Memorandum of Co-operation and Hosting Agreement.

## **2.1 Chair’s action on urgent matters**

- 2.1.1 There may, occasionally, be circumstances where decisions which would normally be made by the Board need to be taken between scheduled meetings, and it is not practicable to call a meeting of the Board. In these circumstances, the Chair and the Chief Executive, supported by the Board Secretary as appropriate, may deal with the matter on behalf of the Board - after first consulting with at least two other Independent Members. The Board Secretary must ensure that any such action is formally recorded and reported to the next meeting of the Board for consideration and ratification.
- 2.1.2 Chair’s action may not be taken where either the Chair or the Chief Executive has a personal or business interest in an urgent matter requiring decision. In

this circumstance, the Vice-Chair or the Executive Director acting on behalf of the Chief Executive will take a decision on the urgent matter, as appropriate.

## **2.2 Delegation of Board functions**

2.2.1 The Board shall agree the delegation of any of their functions except for those set out within the 'Schedule of Matters reserved to the Board' to Committees and others, setting any conditions and restrictions it considers necessary and following any directions or regulations given by the Welsh Ministers. These functions may be carried out:

- i By a Committee, sub-Committee or officer of HEIW

2.2.2 The Board shall agree and formally approve the delegation of specific executive powers to be exercised by Committees, sub-Committees, joint-Committees or joint sub-Committees which it has formally constituted.

## **2.3 Delegation to officers**

2.3.1 The Board may delegate certain functions to the Chief Executive. For these aspects, the Chief Executive, when compiling the Scheme of Delegation to Officers, shall set out proposals for those functions they will perform personally and shall nominate other officers to undertake the remaining functions. The Chief Executive will still be accountable to the Board for all functions delegated to them irrespective of any further delegation to other officers.

2.3.2 This must be considered and approved by the Board (subject to any amendment agreed during the discussion). The Chief Executive may periodically propose amendment to the Scheme of Delegation to Officers and any such amendments must also be considered and approved by the Board.

2.3.3 Individual Executive Directors are in turn responsible for delegation within their own directorates/departments/localities in accordance with the framework established by the Chief Executive and agreed by the Board.

## **3. COMMITTEES**

### **3.1 HEIW Committees**

3.1.1 The Board may, and where directed by the Welsh Ministers must, appoint Committees of HEIW either to undertake specific functions on the Board's behalf or to provide advice and assurance to the Board in the exercise of its functions. The Board's commitment to openness and transparency in the conduct of all its business extends equally to the work carried out on its behalf



by Committees. The Board shall, wherever possible, require its Committees to hold meetings in public unless there are specific, valid reasons for not doing so.

#### Use of the term 'Committee'

3.1.2 For the purposes of these SOs, use of the term 'Committee' incorporates the following:

- Board Committee
- joint-Committee
- sub-Committee
- joint sub-Committee

### **3.2 Sub-Committees/ Advisory Groups**

3.2.1 A Committee appointed by the Board may establish a sub-Committee and/or advisory groups to assist it in the conduct of its business provided that the Board approves such action. Where the Board has authorised a Committee to establish sub-Committees they cannot delegate any executive powers to the sub-Committee unless authorised to do so by the Board.

### **3.3 Committees established by HEIW**

3.3.1 The Board shall establish a Committee structure that it determines best meets its own needs, taking account of any regulatory or Welsh Government requirements. As a minimum, it must establish Committees which covers the following aspect of Board business:

- Audit and Assurance;
- Remuneration and Terms of Service, and
- Education, Commissioning and Quality Committee.

3.3.2 In designing its Committee structure and operating arrangements, the Board shall take full account of the need to:

- Embed corporate standards, priorities and requirements, e.g., equality and human rights across all areas of activity; and
- Maximise cohesion and integration across all aspects of governance and assurance.

3.3.3 Each Committee established by or on behalf of the Board must have its own SOs or detailed terms of reference and operating arrangements, which must be formally approved by the Board. These must establish its governance and ways of working, setting out, as a minimum:

- The scope of its work (including its purpose and any delegated powers and authority);
- Membership and quorum;
- Meeting arrangements;
- Relationships and accountabilities with others (including the Board its Committees and Advisory Groups)
- Any budget and financial responsibility, where appropriate;;
- Secretariat and other support;
- Training, development and performance; and
- Reporting and assurance arrangements.

3.3.4 In doing so, the Board shall specify which aspects of these SOs are not applicable to the operation of the Committee, keeping any such aspects to the minimum necessary. Detailed terms of reference and operating arrangements for the Committees established by the Board are set out in Schedule 3.

3.3.5 The membership of any such Committees - including the designation of Chair; definition of member roles and powers and terms and conditions of appointment (including remuneration and reimbursement) - will usually be determined by the Board, based on the recommendation of HEIW Chair, and subject to any specific requirements, directions or regulations made by the Welsh Ministers. Depending on the Committee's defined role and remit, membership may be drawn from the HEIW Board, its staff (subject to the conditions set in Standing Order 3.3.6) or others not employed by HEIW.

3.3.6 Executive Directors or other HEIW officers shall not normally be appointed as Committee Chairs. Designated HEIW officers shall, however, be in attendance at such Committees, as appropriate.

### **3.4 Other Committees**

3.4.1 The Board may also establish other Committees to help HEIW conduct its business.

### **3.5 Confidentiality**

3.5.1 Committee members and attendees must not disclose any matter dealt with by or brought before a Committee in confidence without the permission of the Committee's Chair.

### **3.6 Reporting activity to the Board**

3.6.1 The Board must ensure that the Chairs of all Committees operating on its behalf report formally, regularly and on a timely basis to the Board on their

activities. Committee Chairs' shall bring to the Boards specific attention any significant matters under consideration and report on the totality of its activities through the production of minutes or other written reports.

#### **4. WORKING IN PARTNERSHIP**

- 4.0.1 HEIW shall work constructively in partnership with others to plan and secure the provision and delivery of health education and improvement, in accordance with its statutory duties and any specific requirements or directions made by the Welsh Ministers.
- 4.0.2 The Chair shall ensure that the Board has identified all its key partners and other stakeholders and established clear mechanisms for engaging with and involving them in the work of HEIW.
- 4.0.3 The Board shall keep under review its partnership arrangements to ensure continued clarity around purpose, desired outcomes and partner responsibilities. It must ensure timely action to change, adapt or end partnerships where they no longer serve a useful purpose, in accordance with its statutory duties; any specific requirements or directions made by the Welsh Ministers; and the agreed terms and conditions for the partnership.

#### **5. MEETINGS**

##### **5.1 Putting Citizens first**

- 5.1.1 HEIW's business will be carried out openly and transparently in a manner that encourages the active engagement of its citizens, community partners and other stakeholders. HEIW, through the planning and conduct of meetings held in public, shall facilitate this in a number of ways, including:
- Active communication of forthcoming business and activities;
  - The selection of accessible, suitable venues for meetings;
  - The availability of papers in English and Welsh languages and in accessible formats, such as Braille, large print, easy read and in electronic formats in accordance with its Welsh language and equality requirements and commitments;
  - Requesting that attendees notify HEIW of any access needs sufficiently in advance of a proposed meeting, and responding appropriately, e.g., arranging British Sign Language (BSL) interpretation at meetings; and
  - Where appropriate, ensuring suitable translation arrangements are in place to enable the conduct of meetings in either English or Welsh,

- and
- In accordance with legislative requirements, e.g., Disability Discrimination Act, as well as its Communication Strategy and Welsh language requirements.

5.1.2 The Chair will ensure that, in determining the matters to be considered by the Board, full account is taken of the views of partners and stakeholder and interests of the communities served by HEIW.

## **5.2 Annual Plan of Board Business**

5.2.1 The Board Secretary, on behalf of the Chair, shall produce an Annual Plan of Board business. This plan will include proposals on meeting dates, venues and coverage of business activity during the year, taking account that ordinary meetings of the Board will be held at regular intervals and as a minimum six times a year. The Plan shall also set out any standing items that will appear on every Board agenda.

5.2.2 The plan shall set out the arrangements in place to enable HEIW to meet its obligations whilst also allowing Board members to contribute in either English or Welsh languages, where appropriate.

5.2.3 The plan shall also incorporate formal Board meetings, regular Board Development sessions and, where appropriate, the planned activities of the Board's Committees.

5.2.4 The Board shall agree the plan for the forthcoming year by the end of March, and this plan will be included as a schedule to these SOs.

### Annual General Meeting (AGM)

5.2.5 HEIW must hold an AGM in public no later than the 30<sup>th</sup> September each year. Public notice of the intention to hold the AGM shall be given at least 10 days prior to the meeting, and this notice shall also be made available through community and partnership networks to maximise opportunities for attendance. The AGM must include presentation of the Annual Report and audited accounts, together with (where applicable), an audited abridged version of the annual accounts and, if applicable funds held on trust accounts, and may also include presentation of other reports of interest to citizens and others, such as HEIW's annual Equality Report. A record of the meeting shall be submitted to the next ordinary meeting of the Board for agreement.

## **5.3 Calling Meetings**

5.3.1 In addition to the planned meetings agreed by the Board, the Chair may

call a meeting of the Board at any time. Individual Board members may also request that the Chair call a meeting provided that at least one third of the whole number of Board members, support such a request.

- 5.3.2 If the Chair does not call a meeting within seven days after receiving such a request from Board members, then those Board members may themselves call a meeting.

## **5.4 Preparing for Meetings**

### **Setting the agenda**

- 5.4.1 The Chair, in consultation with the Chief Executive and Board Secretary, will set the Agenda. In doing so, they will take account of the planned activity set in the annual cycle of Board business; any standing items agreed by the Board; any applicable items received from the Board's Committees; and the priorities facing HEIW. The Chair must ensure that all relevant matters are brought before the Board on a timely basis.
- 5.4.2 Any Board member may request that a matter is placed on the Agenda by writing to the Chair, copied to the Board Secretary, at least 12 calendar days before the meeting. The request must set out whether the item of business is proposed to be transacted in public and shall include appropriate supporting information. The Chair may, at their discretion, include items on the agenda that have been requested after the 12 day notice period if this would be beneficial to the conduct of board business.

### **Notifying and equipping Board members**

- 5.4.3 Board members shall be sent an Agenda and a complete set of supporting papers at least 7 calendar days before a formal Board meeting. This information may be provided to Board members electronically or in paper form, in an accessible format, to the address provided, and in accordance with their stated preference. Supporting papers may, exceptionally, be provided, after this time provided that the Chair is satisfied that the Board's ability to consider the issues contained within the paper would not be impaired.
- 5.4.4 No papers will be included for consideration and decision by the Board unless the Chair is satisfied (subject to advice from the Board Secretary, as appropriate) that the information contained within it is sufficient to enable the Board to take a reasonable decision. Equality impact assessments (EIA) shall be undertaken on all new or revised policies, strategies, guidance and or practice to be considered by the Board, and the outcome of that EIA shall accompany the report to the Board to

enable the Board to make an informed decision.

- 5.4.5 In the event that at least half of the Board members do not receive the Agenda and papers for the meeting as set out above, the Chair must consider whether or not the Board would still be capable of fulfilling its role and meeting its responsibilities through the conduct of the meeting. Where the Chair determines that the meeting should go ahead, their decision, and the reason for it, shall be recorded in the minutes.
- 5.4.6 In the case of a meeting called by Board members, notice of that meeting must be signed by those members and the business conducted will be limited to that set out in the notice.

#### Notifying the public and others

- 5.4.7 Except for meetings called in accordance with Standing Order 5.3, at least 7 days before each meeting of the Board a public notice of the time and place of the meeting, and the public part of the agenda, shall be displayed bilingually (in English and Welsh):
- At HEIW's principal sites;
  - On the HEIW website, together with the papers supporting the public part of the Agenda; as well as
  - Through other methods of communication as set out in HEIW's communication strategy.
- 5.4.8 When providing notification of the forthcoming meeting, HEIW shall set out when and how the Agenda and the papers supporting the public part of the Agenda may be accessed, in what language and in what format, e.g., as Braille, large print, easy read, etc.

## **5.5 Conducting Board Meetings**

#### Admission of the public, the press and other observers

- 5.5.1 HEIW shall encourage attendance at its formal Board meetings by the public and members of the press as well as officers or representatives from organisations who have an interest in HEIW business. The venue for such meetings shall be appropriate to facilitate easy access for attendees and translation services; and appropriate facilities wherever practicable to maximise accessibility such as an induction loop system.
- 5.5.2 The Board and its Committees shall conduct as much of its formal business in public as possible. There may be circumstances where it would not be in the public interest to discuss a matter in public, e.g., business that relates to a confidential matter. In such cases the Chair

(advised by the Board Secretary where appropriate) shall schedule these issues accordingly and require that any observers withdraw from the meeting. In doing so, the Board shall resolve:

That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest in accordance with Section 1(2) F (c.67).

- 5.5.3 In the circumstances, when the Board is not meeting in public session it shall operate in private session, formally reporting any decisions taken to the next meeting of the Board in public session. Wherever possible, that reporting shall take place at the end of a private session, by reconvening a Board meeting held in public session.
- 5.5.4 The Board Secretary, on behalf of the Chair, shall keep under review the nature and volume of business conducted in private session to ensure such arrangements are adopted only when absolutely necessary.
- 5.5.5 In encouraging entry to formal Board Meetings from members of the public and others, the Board shall make clear that attendees are welcomed as observers. The Chair shall take all necessary steps to ensure that the Board's business is conducted without interruption and disruption. In exceptional circumstances, this may include a requirement that observers leave the meeting.

#### Addressing the Board, its Committees and Advisory Groups

- 5.5.6 The Board will decide what arrangements and terms and conditions it feels are appropriate in extending an invitation to observers to attend and address any meetings of the Board, its Committees and Advisory Groups, and may change, alter or vary these terms and conditions as it considers appropriate. In doing so, the Board will take account of its responsibility to actively encourage the engagement and, where appropriate, involvement of citizens and stakeholders in its work and to demonstrate openness and transparency in the conduct of business.

#### Chairing Board Meetings

- 5.5.7 The Chair of HEIW will preside at any meeting of the Board unless they are absent for any reason (including any temporary absence or disqualification from participation on the grounds of a conflict of interest). In these circumstances the Vice Chair shall preside. If both the Chair and vice-chair are absent or disqualified, the Independent Members present shall elect one of the Independent Members to preside.

- 5.5.8 The Chair must ensure that the meeting is handled in a manner that enables the Board to reach effective decisions on the matters before it. This includes ensuring that Board members' contributions are timely and relevant and move business along at an appropriate pace. In doing so, the Board must have access to appropriate advice on the conduct of the meeting through the attendance of the nominated Board Secretary. The Chair has the final say on any matter relating to the conduct of Board business.

#### Quorum

- 5.5.9 At least six Board members, at least two of whom are Executive Directors and four are Independent Members (including the Chair), must be present to allow any formal business to take place at a Board meeting.
- 5.5.10 If the Chief Executive or an Executive Director is unable to attend a Board meeting, then a nominated deputy may attend in their absence and may participate in the meeting, provided that the Chair has agreed the nomination before the meeting. However, Board members' voting rights cannot be delegated so the nominated deputy may not vote or be counted towards the quorum. If a deputy is already a Board member in their own right, e.g., a person deputising for the Chief Executive will usually be an Executive Director, they will be able to exercise their own vote in the usual way but they will not have any additional voting rights.
- 5.5.11 The quorum must be maintained during a meeting to allow formal business to be conducted, i.e., any decisions to be made. Any Board member disqualified through conflict of interest from participating in the discussion on any matter and/or from voting on any resolution will no longer count towards the quorum. If this results in the quorum not being met that particular matter or resolution cannot be considered further at that meeting, and must be noted in the minutes.

#### Dealing with motions

- 5.5.12 In the normal course of Board business items included on the agenda are subject to discussion and decisions based on consensus. Considering a motion is therefore not a routine matter and may be regarded as exceptional, e.g. where an aspect of delivery is a cause for particular concern, a Board member may put forward a motion proposing that a formal review of that service area is undertaken by a Committee of the Board. The Board Secretary will advise the Chair on the formal process for dealing with motions. No motion or amendment to a motion will be considered by the Board unless moved by a Board



member and seconded by another Board member (including the Chair).

**5.5.13 Proposing a formal notice of motion** – Any Board member wishing to propose a motion must notify the Chair in writing of the proposed motion at least 12 days before a planned meeting. Exceptionally, an emergency motion may be proposed up to one hour before the fixed start of the meeting, provided that the reasons for the urgency are clearly set out. Where sufficient notice has been provided, and the Chair has determined that the proposed motion is relevant to the Board's business, the matter shall be included on the Agenda, or, where an emergency motion has been proposed, the Chair shall declare the motion at the start of the meeting as an additional item to be included on the agenda.

**5.5.14** The Chair also has the discretion to accept a motion proposed during a meeting provided that the matter is considered of sufficient importance and its inclusion would not adversely affect the conduct of Board business.

**5.5.15 Amendments** - Any Board member may propose an amendment to the motion at any time before or during a meeting and this proposal must be considered by the Board alongside the motion.

**5.5.16** If there are a number of proposed amendments to the motion, each amendment will be considered in turn, and if passed, the amended motion becomes the basis on which the further amendments are considered, i.e., the substantive motion.

**5.5.17 Motions under discussion** – When a motion is under discussion, any Board member may propose that:

- The motion be amended;
- The meeting should be adjourned;
- The discussion should be adjourned and the meeting proceed to the next item of business;
- A Board member may not be heard further;
- The Board decides upon the motion before them;
- An ad hoc Committee should be appointed to deal with a specific item of business; or
- The public, including the press, should be excluded.

**5.5.18 Rights of reply to motions** – The mover of a motion (including an amendment) shall have a right of reply at the close of any debate on the motion or the amendment immediately prior to a vote on the proposal.

**5.5.19 Withdrawal of motion or amendments** – A motion or an amendment

to a motion, once moved and seconded, may be withdrawn by the proposer with the agreement of the seconder and the Chair.

5.5.20 **Motion to rescind a resolution** – The Board may not consider a motion to amend or rescind any resolution (or the general substance of any resolution) which has been passed within the preceding six months unless the motion is supported by the (simple) majority of Board members.

5.5.21 A motion that has been decided upon by the Board cannot be proposed again within six months except by the Chair, unless the motion relates to the receipt of a report or the recommendations of a Committee/Chief Executive to which a matter has been referred.

### Voting

5.5.22 The Chair will determine whether Board members' decisions should be expressed orally, through a show of hands, by secret ballot or by recorded vote. The Chair must require a secret ballot or recorded vote if the majority of voting Board members request it. Where voting on any question is conducted, a record of the vote shall be maintained. In the case of a secret ballot the decision shall record the number voting for, against or abstaining. Where a recorded vote has been used the Minutes shall record the name of the individual and the way in which they voted. Associate Members may not vote in any meetings or proceedings of the Board.

5.5.23 In determining every question at a meeting the Board members must take account, where relevant, of the views expressed and representations made by individuals and organisations who represent the interests of stakeholders.

5.5.24 The Board will make decisions based on a simple majority view held by the Board members present. In the event of a split decision, i.e., no majority view being expressed, the Chair shall have a second and casting vote.

5.5.25 In no circumstances may an absent Board member or nominated deputy vote by proxy. Absence is defined as being absent at the time of the vote.

## **5.6 Record of Proceedings**

5.6.1 A record of the proceedings of formal Board meetings (and any other meetings of the board where the Board members determine) shall be

drawn up as ‘minutes’. These minutes shall include a record of Board member attendance (including the Chair) together with apologies for absence, and shall be submitted for agreement at the next meeting of the Board, where any discussion shall be limited to matters of accuracy. Any agreed amendment to the minutes must be formally recorded.

- 5.6.2 Agreed minutes shall be circulated in accordance with Board members’ wishes, and, where providing a record of a formal Board meeting shall be made available to the public both on HEIW’s website and in hard copy or other accessible format on request, in accordance with any legislative requirements, e.g., Data Protection Act 2018, General Data Protection Regulations and HEIW’s Communication Strategy and Welsh language requirements.

## **5.7 Confidentiality**

- 5.7.1 All Board members (including Associate Members), together with members of any Committee or Advisory Group established by or on behalf of the Board and HEIW officials must respect the confidentiality of all matters considered by the Board in private session or set out in documents which are not publicly available. Disclosure of any such matters may only be made with the express permission of the Chair of the Board or relevant Committee, as appropriate, and in accordance with any other requirements set out elsewhere, e.g., in contracts of employment, within the Values and Standards of Behaviour framework or legislation such as the Freedom of Information Act 2000, etc.

## **6. VALUES AND STANDARDS OF BEHAVIOUR**

- 6.0.1 The Board must adopt a set of values and standards of behaviour for HEIW that meets the requirements of the NHS Wales Values and Standards of Behaviour framework. These values and standards of behaviour will apply to all those conducting business by or on behalf of HEIW, including Board members, HEIW officers and others, as appropriate. The framework adopted by the Board will form part of these SOs.

### **6.1 Declaring and recording Board members’ interests**

- 6.1.1 ***Declaration of interests*** – It is a requirement that all Board members must declare any personal or business interests they may have which may affect, or be perceived to affect the conduct of their role as a Board member. This includes any interests that may influence or be perceived to influence their judgement in the course of conducting the Board’s business. Board members must be familiar with the Values and Standards of Behaviour Framework and their statutory duties under the Constitution Regulations. Board members

must notify the Board of any such interests at the time of their appointment, and any further interests as they arise throughout their tenure as Board members.

- 6.1.2 Board members must also declare any interests held by family members or persons or bodies with which they are connected. The Board Secretary will provide advice to the Chair and the Board on what should be considered as an 'interest', taking account of the regulatory requirements and any further guidance, e.g., the Values and Standards of Behaviour framework. If individual Board members are in any doubt about what may be considered as an interest, they should seek advice from the Board Secretary. However, the onus regarding declaration will reside with the individual Board member.
- 6.1.3 **Register of interests** – The Chief Executive, through the Board Secretary will ensure that a Register of Interests is established and maintained as a formal record of interests declared by all Board members. The register will include details of all Directorships and other relevant and material interests which have been declared by Board members.
- 6.1.4 The register will be held by the Board Secretary, and will be updated during the year, as appropriate, to record any new interests, or changes to the interests declared by Board members. The Board Secretary will also arrange an annual review of the Register, through which Board members will be required to confirm the accuracy and completeness of the register relating to their own interests.
- 6.1.5 In line with the Board's commitment to openness and transparency, the Board Secretary must take reasonable steps to ensure that the citizens served by HEIW are made aware of, and have access to view the HEIW's Register of Interests. This may include publication on the HEIW website.
- 6.1.6 **Publication of declared interests in Annual Report** – Board members' declared directorships of companies or positions in other organisations likely or possibly seeking to do business with the NHS shall be published in HEIW's Annual Report.

## **6.2 Dealing with Members' interests during Board meetings**

- 6.2.1 The Chair, advised by the Board Secretary, must ensure that the Board's decisions on all matters brought before it are taken in an open, balanced, objective and unbiased manner. In turn, individual Board members must demonstrate, through their actions, that their contribution to the Board's decision making is based upon the best interests of HEIW and the NHS in Wales.

- 6.2.2 Where individual Board members identify an interest in relation to any aspect of Board business set out in the Board's meeting agenda, that member must declare an interest at the start of the Board meeting. Board members should seek advice from the Chair, through the Board Secretary before the start of the Board meeting if they are in any doubt as to whether they should declare an interest at the meeting. All declarations of interest made at a meeting must be recorded in the Board minutes.
- 6.2.3 It is the responsibility of the Chair, on behalf of the Board, to determine the action to be taken in response to a declaration of interest, taking account of any regulatory requirements or directions made by the Welsh Ministers. The range of possible actions may include determination that:
- i The declaration is formally noted and recorded, but that the Board member should participate fully in the Board's discussion and decision, including voting. This may be appropriate, for example where the Board is considering matters of strategy relating to a particular aspect of healthcare and an Independent Member is a healthcare professional whose profession may be affected by that strategy determined by the Board;
  - ii The declaration is formally noted and recorded, and the Board member participates fully in the Board's discussion, but takes no part in the Board's decision;
  - iii The declaration is formally noted and recorded, and the Board member takes no part in the Board discussion or decision;
  - iv The declaration is formally noted and recorded, and the Board member is excluded for that part of the meeting when the matter is being discussed. A Board member must be excluded, where that member has a direct or indirect financial interest in a matter being considered by the Board.
- 6.2.4 In extreme cases, it may be necessary for the member to reflect on whether their position as a Board member is compatible with an identified conflict of interest.
- 6.2.5 Where the Chair is the individual declaring an interest, any decision on the action to be taken shall be made by the Vice Chair, on behalf of the Board.
- 6.2.6 In all cases the decision of the Chair (or the Vice Chair in the case of an interest declared by the Chair) is binding on all Board members. The Chair should take advice from the Board Secretary when determining the action to take in response to declared interests; taking care to ensure their exercise of judgement is consistently applied.
- 6.2.7 ***Members with pecuniary (financial) interests*** – Where a Board member, or

any person they are connected with<sup>1</sup> has any direct or indirect pecuniary interest in any matter being considered by the Board, including a contract or proposed contract, that member must at the meeting and as soon as practicable after its commencement, disclose the interest and must not take part in the consideration or discussion of that matter or vote on any question related to it. The Board may determine that the Board member concerned shall be excluded from that part of the meeting.

6.2.8 The Constitution Regulations define 'direct' and 'indirect' pecuniary interests and these definitions always apply when determining whether a member has an interest. These SOs must be interpreted in accordance with these definitions.

6.2.9 **Members with Professional Interests** - During the conduct of a Board meeting, an individual Board member may establish a clear conflict of interest between their role as a HEIW Board member and that of their professional role outside of the Board. In any such circumstance, the Board shall take action that is proportionate to the nature of the conflict, taking account of the advice provided by the Board Secretary.

### **6.3 Dealing with officers' interests**

6.3.1 The Board must ensure that the Board Secretary, on behalf of the Chief Executive, establishes and maintains a system for the declaration, recording and handling of HEIW officers' interests in accordance with the Values and Standards of Behaviour Framework.

### **6.4 Reviewing how Interests are handled**

6.4.1 The Audit and Assurance Committee will review and report to the Board upon the adequacy of the arrangements for declaring, registering and handling interests at least annually.

### **6.5 Dealing with offers of gifts<sup>2</sup> and hospitality**

6.5.1 The Values and Standards of Behaviour Framework adopted by the Board prohibits Board members and HEIW officers from receiving gifts, hospitality or benefits in kind from a third party which may reasonably give rise to suspicion of conflict between their official duty and their private interest, or may reasonably be seen to compromise their personal integrity in any way.

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<sup>1</sup> In the case of persons who are married to each other or in a civil partnership with each other or who are living together as if married or civil partners, the interest of one person shall, if known to the other, be deemed for the purpose of this Standing Order to be also an interest of the other.

<sup>2</sup> The term gift refers also to any reward or benefit.

- 6.5.2 Gifts, benefits or hospitality must never be solicited. Any Board member or HEIW officer who is offered a gift, benefit or hospitality which may or may be seen to compromise their position must refuse to accept it. This may in certain circumstances also include a gift, benefit or hospitality offered to a family member of a Board member or HEIW officer. Failure to observe this requirement may result in disciplinary and/or legal action.
- 6.5.3 In determining whether any offer of a gift or hospitality should be accepted, an individual must make an active assessment of the circumstances within which the offer is being made, seeking advice from the Board Secretary as appropriate. In assessing whether an offer should be accepted, individuals must take into account:
- **Relationship:** Contacts which are made for the purpose of information gathering are generally less likely to cause problems than those which could result in a contractual relationship, in which case accepting a gift or hospitality could cause embarrassment or be seen as giving rise to an obligation;
  - **Legitimate Interest:** Regard should be paid to the reason for the contact on both sides and whether it is a contact that is likely to benefit HEIW;
  - **Value:** Gifts and benefits of a trivial or inexpensive (below £25), e.g., diaries/calendars, are more likely to be acceptable and can be distinguished from more substantial offers. Similarly, hospitality in the form of a working lunch would not be treated in the same way as more expensive social functions, travel or accommodation (although in some circumstances these may also be accepted);
  - **Frequency:** Acceptance of frequent or regular invitations particularly from the same source would breach the required standards of conduct. Isolated acceptance of, for example, meals, tickets to public, and sport, cultural or social events would only be acceptable if attendance is justifiable in that it benefits HEIW ; and
  - **Reputation:** If the body concerned is known to be under investigation by or has been publicly criticised by a public body, regulators or inspectors, acceptance of a gift or hospitality might be seen as supporting the body or affecting in some way the investigation or negotiations and it should always be declined.
- 6.5.4 A distinction may be drawn between items offered as hospitality and items offered in substitution for fees for broadcasts, speeches, lectures or other work done. There may be circumstances where the latter may be accepted if

they can be used for official purposes.

## **6.6 Register of Gifts and Hospitality**

- 6.6.1 The Board Secretary, on behalf of the Chair, will maintain a register of Gifts and Hospitality to record offers of gifts and hospitality made to Board members. Executive Directors will adopt a similar mechanism in relation to HEIW officers working within their Directorates.
- 6.6.2 Every Board member and HEIW officer has a personal responsibility to volunteer information in relation to offers of gifts and hospitality, including those offers that have been refused. The Board Secretary, on behalf of the Chair and Chief Executive, will ensure the incidence and patterns of offers and receipt of gifts and hospitality are kept under active review, taking appropriate action where necessary.
- 6.6.3 When determining what should be included in the Register, individuals shall apply the following principles, subject to the considerations in Standing Order 6.5.3:
- **Gifts:** Generally, only gifts of material value should be recorded. Those with a nominal value, e.g., seasonal items such as diaries/calendars would not usually need to be recorded.
  - **Hospitality:** Only significant hospitality offered or received should be recorded. Occasional offers of ‘modest and proportionate<sup>3</sup>’ hospitality need not be included in the Register. Further detail is provided in the framework policy on standards of behaviour.
- 6.6.4 Board members and HEIW officers may accept the occasional offer of modest and proportionate hospitality but in doing so must consider whether the following conditions are met:
- Acceptance would further the aims of HEIW;
  - The level of hospitality is reasonable in the circumstances;
  - It has been openly offered; and,
  - It could not be construed as any form of inducement and will not put the individual under any obligation to those offering it.
- 6.6.5 The Board Secretary will arrange for a full report of all offers of Gifts and Hospitality recorded by HEIW to be submitted to the Audit and Assurance

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<sup>3</sup>Examples of ‘modest and proportionate’ hospitality that need not be included in a Hospitality register include a working sandwich lunch or a buffet lunch incidental to a conference or seminar attended by a variety of participants.



Committee (or equivalent) at least annually. The Audit and Assurance Committee will then review and report to the Board upon the adequacy of the HEIW's arrangements for dealing with offers of gifts and hospitality.

## **7. SIGNING AND SEALING DOCUMENTS**

- 7.0.1 The common seal of the HEIW is primarily used to seal legal documents such as transfers of land, lease agreements and other important/key contracts. The seal may only be fixed to a document if the Board or Committee of the Board has determined it shall be sealed, or if a transaction to which the document relates has been approved by the Board or Committee of the Board.
- 7.0.2 Where it is decided that a document shall be sealed it shall be fixed in the presence of the Chair or Vice Chair (or other authorised independent Member) and the Chief Executive or Deputy Chief Executive (or another authorised individual) both of whom must witness the seal.

### **7.1 Register of Sealing**

- 7.1.1 The Board Secretary shall keep a register that records the sealing of every document. Each entry must be signed by the persons who approved and authorised the document and who witnessed the seal. A report of all sealings shall be presented to the Board at least bi-annually.

### **7.2 Signature of Documents**

- 7.2.1 Where a signature is required for any document connected with legal proceedings involving HEIW, it shall normally be signed by the Chief Executive, except where the Board has authorised another person or has been otherwise directed to allow or require another person to provide a signature.
- 7.2.2 The Chief Executive or Deputy Chief Executive nominated officers may be authorised by the Board to sign on behalf of HEIW any agreement or other document (not required to be executed as a deed) where the subject matter has been approved either by the Board or a Committee to which the Board has delegated appropriate authority in each instance in accordance with the delegated authority.

### **7.3 Custody of Seal**

- 7.3.1 The Common Seal of HEIW shall be kept securely by the Board Secretary.

## **8. GAINING ASSURANCE ON THE CONDUCT OF HEIW BUSINESS**

- 8.0.1 The Board shall set out explicitly, within a Risk and Assurance Framework, how it will be assured on the conduct of HEIW business, its governance and the effective management of the organisation's risks in pursuance of its aims and objectives. It shall set out clearly the various sources of assurance, and where and when that assurance will be provided, in accordance with any requirements determined by the Welsh Ministers.
- 8.0.2 The Board shall ensure that its assurance arrangements are operating effectively, advised by its Audit and Assurance Committee.
- 8.0.3 Assurances in respect of the Shared Services arrangements shall primarily be achieved by the reports of the Director of Shared Services to the Shared Services Partnership Committee, and reported back by the Chief Executive as agreed. Where appropriate, and by exception, the Board may seek assurances direct from the Director of Shared Services. The Director of Shared Services and the Shared Services Partnership Committee shall be under an obligation to comply with any internal or external audit functions being undertaken by or on behalf of HEIW.

### **8.1 The role of Internal Audit in providing independent internal assurance**

- 8.1.1 The Board shall ensure the effective provision of an independent internal audit function as a key source of its internal assurance arrangements, in accordance with the Public Sector Internal Audit Standards (PSIAS) and any other requirements determined by the Welsh Ministers.
- 8.1.2 The Board shall set out the relationship between the Head of Internal Audit (HIA), the Audit and Assurance Committee (or equivalent) and the Board. It shall:
- Approve the Internal Audit Charter (incorporating the definition of internal audit) and adopt the Internal Auditing Standards (incorporating the code of ethics);
  - Ensure the HIA communicates and interacts directly with the Board, facilitating direct and unrestricted access;
  - Require Internal Audit to confirm its independence annually; and
  - Ensure that the Head of Internal Audit reports periodically to the Board on its activities, including its purpose, authority, responsibility and performance. Such reporting will include governance issues and significant risk exposures.

### **8.2 Reviewing the performance of the Board, its Committees and Advisory Groups**

- 8.2.1 The Board shall introduce a process of regular and rigorous self-assessment and evaluation of its own operations and performance and that of its Committees and if established, Advisory Groups. Where appropriate, the Board may determine that such evaluation may be independently facilitated.
- 8.2.2 Each Committee and, where appropriate, Advisory Group must also submit an annual report to the Board through the Chair within 6 weeks of the end of the reporting year setting out its activities during the year and including the review of its performance and that of any sub-Committees it has established.
- 8.2.3 The Board shall use the information from this evaluation activity to inform:
- The ongoing development of its governance arrangements, including its structures and processes;
  - Its Board Development Programme, as part of an overall Organisation Development framework; and
  - The Board's report of its alignment with the Assembly Government's Citizen Centred Governance Principles.

### **8.3 External Assurance**

- 8.3.1 The Board shall ensure it develops effective working arrangements and relationships with those bodies that have a role in providing independent, external assurance to the public and others on HEIW's operations, e.g., the Auditor General for Wales.
- 8.3.2 The Board may be assured, from the work carried out by external audit and others, on the adequacy of its own assurance framework, but that external assurance activity shall not form part of, or replace its own internal assurance arrangements, except in relation to any additional work that the Board itself may commission specifically for that purpose.
- 8.3.3 The Board shall keep under review and ensure that, where appropriate, HEIW implements any recommendations relevant to its business made by the National Assembly for Wales's Public Accounts Committee and other appropriate bodies.
- 8.3.4 HEIW shall provide the Auditor General for Wales with any assistance, information and explanation which the Auditor General thinks necessary for the discharge of their statutory powers and responsibilities.

## **9. DEMONSTRATING ACCOUNTABILITY**

- 9.0.1 Taking account of the arrangements set out within these SOs, the Board shall demonstrate to the communities it serves and to the Welsh Ministers a clear

framework of accountability within which it:

- Conducts its business internally;
- Works collaboratively with NHS colleagues, HE and FE establishments, regulators, partners, service providers and others; and
- Responds to the views and representations made by those who represent the interests of the communities it serves and other stakeholders, including its officers and healthcare professionals.

9.0.2 The Board shall, in publishing its strategic and operational level plans, set out how those plans have been developed taking account of the views of others, and how they will be delivered by working with their community and other partners.

9.0.3 The Board shall also facilitate effective scrutiny of the HEIW's operations through the publication of regular reports on activity and performance, including publication of an Annual Report.

9.0.4 The Board shall ensure that within HEIW, individuals at all levels are supported in their roles, and held to account for their personal performance through effective performance management arrangements.

## **10. REVIEW OF STANDING ORDERS**

10.0.1 The Board Secretary shall arrange for an equality impact assessment to be carried out on a draft of these SOs prior to their formal adoption by the Board, the results of which shall be presented to the Board for consideration and action, as appropriate. The fact that an assessment has been carried out shall be noted in the SOs.

10.0.2 These SOs shall be reviewed annually by the Audit and Assurance Committee [or equivalent], which shall report any proposed amendments to the Board for consideration. The requirement for review extends to all documents having the effect as if incorporated in SOs, including the equality impact assessment.

# Schedule 1

## **SCHEME OF RESERVATION AND DELEGATION OF POWERS**

**This Scheme of Reservation and Delegation of Powers forms part of, and shall have effect as if incorporated in the Standing Orders**

### **Introduction**

As set out in Standing Order 2, the Board - subject to any directions that may be given by Welsh Ministers - should make appropriate arrangements for certain functions to be carried out on its behalf so that the day to day business of HEIW may be carried out effectively, and in a manner that secures the achievement of the organization's aims and objectives. The Board may delegate functions to:

- i) a committee, e.g. Remuneration and Terms of Service Committee;
- ii) a sub-committee, Any such delegation would, subject to the Boards authority, usually be via a main committee of the Board;
- iii) a joint committee or sub-committee, e.g., with other Health Bodies, or Universities established to take forward matters relating the development of the health workforce in Wales ; and
- iv) Officers of HEIW (who may, subject to the Board's authority, delegate further to other officers and, where appropriate, other third parties, e.g. shared/support services, through a formal scheme of delegation)

And in doing so, must set out clearly the terms and conditions upon which any delegation is being made. These terms and conditions must include a requirement that the Board is notified of any matters that may affect the operation and/or reputation of HEIW.

The Board's determination of those matters that it will retain, and those that will be delegated to others are set out in the following:

- Schedule of matters reserved to the Board;
- Scheme of delegation to Committees and others; and
- Scheme of delegation to Officers.

## **DECIDING WHAT TO RETAIN AND WHAT TO DELEGATE: GUIDING PRINCIPLES**

The Board will take full account of the following principles when determining those matters that it reserves, and those which it will delegate to others to carry out on its behalf:

- Everything is retained by the Board unless it is specifically delegated in accordance with the requirements set out in Standing Orders or Standing Financial Instructions
- The Board must retain that which it is required to retain (whether by statute or as determined by Welsh Government) as well as that which it considers is essential to enable it to fulfil its role in setting the organisation's direction, equipping the organisation to deliver and ensuring achievement of its aims and objectives through effective performance management
- Any decision made by the Board to delegate functions must be based upon an assessment of the capacity and capability of those to whom it is delegating responsibility
- The Board must ensure that those to whom it has delegated powers (whether a committee, partnership or individuals) remain equipped to deliver on those responsibilities through an ongoing programme of personal, professional and organisational development
- The Board must take appropriate action to assure itself that all matters delegated are effectively carried out
- The framework of delegation will be kept under active review and, where appropriate, will be revised to take account of organisational developments, review findings or other changes
- Except where explicitly set out, the Board retains the right to decide upon any matter for which it has statutory responsibility, even if that matter has been delegated to others
- The Board may delegate authority to act, but retains overall responsibility and accountability
- When delegating powers, the Board will determine whether (and the extent to which) those to whom it is delegating will, in turn, have powers to further delegate those functions to others.

## **HANDLING ARRANGEMENTS FOR THE RESERVATION AND DELEGATION OF POWERS: WHO DOES WHAT?**

### **The Board**

The Board will formally agree, review and, where appropriate revise schedules of reservation and delegation of powers in accordance with the guiding principles set out earlier.

### **The Chief Executive**

The Chief Executive will propose a Scheme of Delegation to Officers, setting out the functions they will perform personally and which functions will be delegated to other officers. The Board must formally agree this scheme.

In preparing the scheme of delegation to officers, the Chief Executive will take account of:

- the guiding principles set out earlier (including any specific statutory responsibilities designated to individual roles)
- their personal responsibility and accountability to the Chief Executive, NHS Wales in relation to their role as designated Accountable Officer
- associated arrangements for the delegation of financial authority to equip officers to deliver on their delegated responsibilities (and set out in Standing Financial Instructions).

The Chief Executive may re-assume any of the powers they have delegated to others at any time.

### **The Board Secretary**

The Board Secretary will support the Board in its handling of reservations and delegations by ensuring that:

- a proposed schedule of matters reserved for decision by the Board is presented to the Board for its formal agreement;
- effective arrangements are in place for the delegation of HEIW functions within the organisation and to others, as appropriate; and
- arrangements for reservation and delegation are kept under review and presented to the Board for revision, as appropriate.

### **The Audit & Assurance Committee**

The Audit & Assurance Committee will provide assurance to the Board of the effectiveness of its arrangements for handling reservations and delegations.

### **Individuals to who powers have been delegated**

Individuals will be personally

- equipping themselves to deliver on any matter delegated to them, through the conduct of appropriate training and development activity; and
- exercising any powers delegated to them in a manner that accords with HEIW's values and standards of behavior.

Where an individual does not feel that they are equipped to deliver on a matter delegated to them, they must notify the Chief Executive of their concern as soon as possible in so that an appropriate and timely decision may be made on the matter.

In the absence of an officer to whom powers have been delegated, those powers will normally be exercised by the individual to whom that officer reports, unless the Board has set out alternative arrangements.

If the Chief Executive is absent their nominated Deputy may exercise those powers delegated to the Chief Executive on their behalf. However, the guiding principles governing delegations will still apply, and so the Board may determine that it will reassume certain powers delegated to the Chief Executive or reallocate powers, e.g., to a Committee or another officer.



## **SCOPE OF THESE ARRANGEMENTS FOR THE RESERVATION AND DELEGATION OF POWERS**

The Scheme of Delegation to officers referred to here shows only the "top level" of delegation within HEIW. The Scheme is to be used in conjunction with the system of control and other established procedures within HEIW.

## SCHEDULE OF MATTERS RESERVED TO THE BOARD<sup>1</sup>

THE BOARD		AREA	DECISIONS RESERVED TO THE BOARD
1	FULL	GENERAL	The Board may determine any matter for which it has statutory or delegated authority, in accordance with Standing Orders
2	FULL	GENERAL	The Board must determine any matter that will be reserved to the whole Board.
3	FULL	OPERATING ARRANGEMENTS	Adopt the standards of governance and performance to be met by HEIW, including standards/requirements determined by professional bodies/others, e.g., Royal Colleges
4	FULL	OPERATING ARRANGEMENTS	<p>Approve, vary and amend:</p> <ul style="list-style-type: none"> <li>• Standing Orders (SOs);</li> <li>• Standing Financial Instructions (SFIs);</li> <li>• Schedule of matters reserved to HEIW;</li> <li>• Scheme of delegation to Committees and others; and</li> <li>• Scheme of delegation to Officers.</li> </ul> <p>In accordance with any directions set by Welsh Ministers.</p>
5	FULL	OPERATING ARRANGEMENTS	Approve HEIW's Values and Standards of Behavior Framework
6	FULL	OPERATING ARRANGEMENTS	Approve HEIW's framework for performance management, risk and assurance
7	FULL	OPERATING ARRANGEMENTS	Approve the introduction or discontinuance of any significant activity or operation. Any activity or operation shall be regarded as significant if the Board determines it so based upon its contribution/impact on the achievement of HEIW's aims, objectives and priorities

<sup>1</sup> Any decision to reserve a matter, and the manner in which that retained responsibility is carried out will be in accordance with any regulatory and/or Welsh Government requirements

THE BOARD		AREA	DECISIONS RESERVED TO THE BOARD
8	FULL	OPERATING ARRANGEMENTS	Ratify any urgent decisions taken by the Chair and the Chief Executive in accordance with Standing Order requirements
9	FULL	OPERATING ARRANGEMENTS	Ratify in public session any instances of failure to comply with Standing Orders and Standing Financial Instructions
11	FULL	OPERATING ARRANGEMENTS	Approve policies for dealing with complaints
12	FULL	OPERATING ARRANGEMENTS	Approve individual compensation payments in line with Standing Financial Instructions
13	FULL	OPERATING ARRANGEMENTS	Approve individual cases for the write off of losses or making of special payments above the limits of delegation to the Chief Executive and officers
14	FULL	OPERATING ARRANGEMENTS	Approve proposals for action on litigation on behalf of HEIW
15	FULL	OPERATING ARRANGEMENTS	Authorise use of the HEIW's official seal
16	FULL	OPERATING ARRANGEMENTS	Seek updates and assurance in respect of the Revalidation Process.
17	FULL	ORGANISATION STRUCTURE & STAFFING	Ratify appointment, discipline and dismissal of the Chief Executive
18	FULL	ORGANISATION STRUCTURE & STAFFING	Approve the appointment, discipline and dismissal of the Executive Directors and any other Board level appointments
19	FULL	ORGANISATION STRUCTURE & STAFFING	Require, receive and determine action in response to the declaration of Board members' interests, in accordance with advice received, e.g. from Audit & Assurance Committee

THE BOARD		AREA	DECISIONS RESERVED TO THE BOARD
20	FULL	ORGANISATION STRUCTURE & STAFFING	Approve, review, and revise HEIW's top level organisation structure and corporate policies
21	FULL	ORGANISATION STRUCTURE & STAFFING	Appoint, review, revise and dismiss Board committees, including any joint committees directly accountable to the Board
22	FULL	ORGANISATION STRUCTURE & STAFFING	Appoint, equip, review and (where appropriate) dismiss the Chair and members of any committee, joint committee or Group set up by the Board
23	FULL	ORGANISATION STRUCTURE & STAFFING	Appoint, equip, review and (where appropriate) dismiss individuals appointed to represent the Board on outside bodies and groups
24	FULL	ORGANISATION STRUCTURE & STAFFING	Approve the terms of reference and reporting arrangements of all committees, joint-committees and groups established by the Board
25	FULL	STRATEGY & PLANNING	Determine HEIW's strategic aims, objectives and priorities
26	FULL	STRATEGY & PLANNING	Approve HEIW's annual business plan and three year plan setting out how HEIW will meet the requirements set out in the remit letter.
27	FULL	STRATEGY & PLANNING	Approve HEIW's Risk Management Strategy and plans
28	FULL	STRATEGY & PLANNING	Approve HEIW's communication plan

THE BOARD		AREA	DECISIONS RESERVED TO THE BOARD
29	FULL	STRATEGY & PLANNING	Approve HEIW's partnership and stakeholder engagement and involvement strategies
30	FULL	STRATEGY & PLANNING	Approve the HEIW's key strategies and programmes related to: <ul style="list-style-type: none"> <li>• Workforce and Organisational Development</li> <li>• Health education and training;</li> <li>• Research/evaluation;</li> <li>• Quality of education and training programmes;</li> <li>• Leadership and career development for staff within NHS Wales;</li> <li>• Workforce transformation &amp; improvement;</li> <li>• Infrastructure, including IM &amp;T, Estates and Capital;</li> <li>• Supporting delivery of 'A Healthier Wales including development of a high level strategic workforce plan for Wales in partnership with Social Care Wales.</li> </ul>
31	FULL	STRATEGY & PLANNING	Approve HEIW's budget and financial framework (including overall distribution of the financial allocation)
32	FULL	STRATEGY & PLANNING	Proposed commissioning, specification and contract variations on education and training agreements before submission of recommendation to Welsh Government for Cabinet Secretary approval in accordance with delegations set on in the Financial
33	FULL	STRATEGY & PLANNING	Approve individual contracts (other than NHS contracts) above the limit delegated to the Chief Executive set out in the Financial Delegations
34	FULL	STRATEGY & PLANNING	Approve the National Annual Education and Training Plan before submission of recommendation to the Welsh Government for approval.

THE BOARD		AREA	DECISIONS RESERVED TO THE BOARD
35	FULL	STRATEGY & PLANNING	Approve the forward work programme for the Education Commissioning and Quality Committee.
36	FULL	PERFORMANCE & ASSURANCE	Approve HEIW's internal audit and assurance arrangements
37	FULL	PERFORMANCE & ASSURANCE	Receive reports from HEIW's Executive on progress and performance in the delivery of HEIW's strategic aims, objectives and priorities and approve action required, including improvement plans
38	FULL	PERFORMANCE & ASSURANCE	Receive assurance reports from the Board's committees, groups and other internal sources on HEIW's performance and approve action required, including improvement plans
39	FULL	PERFORMANCE & ASSURANCE	Receive reports on HEIW's performance produced by external auditors, regulators and inspectors that raise issue or concerns impacting on HEIW's ability to achieve its aims and objectives and approve action required, including improvement plans, taking account of the advice of Board Committees (as appropriate)
40	FULL	PERFORMANCE & ASSURANCE	Receive the annual opinion of HEIW's Chief Internal Auditor and approve action required, including improvement plans
41	FULL	PERFORMANCE & ASSURANCE	Receive the annual audit report from HEIW's external auditor and approve action required, including improvement plans
42	FULL	PERFORMANCE & ASSURANCE	Receive the annual opinion on HEIW's performance against appropriate Health and Care Standards for Wales and approve action required, including improvement plans
43	FULL	REPORTING	Approve HEIW's Reporting Arrangements, including reports on activity and performance to partners and stakeholders and nationally to the Welsh Government
44	FULL	REPORTING	Receive, approve and ensure the publication of HEIW reports, including its Annual Report & Accounts

ADDITIONAL AREAS OF RESPONSIBILITY DELEGATED TO CHAIR, VICE CHAIR AND INDEPENDENT MEMBERS			
	CHAIR		
	VICE CHAIR		
	CHAMPION/ NOMINATED LEAD		

## **DELEGATION OF POWERS TO COMMITTEES AND OTHERS<sup>3</sup>**

Standing Order 2 provides that the Board may delegate powers to Committees and others. In doing so, the Board has formally determined:

- the composition, terms of reference and reporting requirements in respect of any such Committees; and
- the governance arrangements, terms and conditions and reporting requirements in respect of any delegation to others

In accordance with any regulatory requirements and any directions set by the Welsh Ministers.

Any delegated powers to Board Committees are set out in the Terms of reference of the relevant committee, which are appended to these SOs for the following Committees:

- Audit and Assurance Committee
- Remuneration and Terms of Service Committee
- Education, Commissioning and Quality Committee

The scope of the powers delegated, together with the requirements set by the Board in relation to the exercise of those powers are as set out in i) Committee Terms of Reference, and ii) formal arrangements for the delegation of powers to others. Collectively, these documents form the Board's Scheme of Delegation to Committees.

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<sup>3</sup>As defined in Standing Orders



## SCHEME OF DELEGATION TO EXECUTIVE DIRECTORS, OTHER DIRECTORS AND OFFICERS

The HEIW Standing Orders and Standing Financial Instructions specify certain key responsibilities of the Chief Executive, the Director of Finance and other officers. The Chief Executive's Job Description, together with their Accountable Officer Memorandum sets out their specific responsibilities, and the individual job descriptions determined for Executive Director level posts also define in detail the specific responsibilities assigned to those post holders. These documents, together with the schedule of additional delegations below and the associated financial delegations set out in the Standing Financial Instructions form the basis of the LHB's Scheme of Delegation to Officers.

DELEGATED MATTER	RESPONSIBLE OFFICER(S)
Representation in statutory partnerships	Chief Executive
Performance Management arrangements	Deputy Chief Executive and Director of Workforce & OD
Receipt and opening of quotations	Director of Finance and Corporate Services
Land, Buildings and assets	Deputy Chief Executive and Director of Workforce & OD
Facilities Management	Deputy Chief Executive and Director of Workforce & OD
Sustainable Development	Deputy Chief Executive and Director of Workforce & OD
Health, Safety & Fire	Deputy Chief Executive and Director of Workforce & OD
I M & T	Deputy Chief Executive and Director of Workforce & OD
Senior Information Risk Owner (SIRO)	Board Secretary
CRB checks	Deputy Chief Executive and Director of Workforce & OD
Data Protection	Board Secretary

<b>DELEGATED MATTER</b>	<b>RESPONSIBLE OFFICER(S)</b>
Equality & Human Rights	Deputy Chief Executive and Director of Workforce & OD
Issuing tenders and post tender negotiations	Chief Executive/ Director of Finance and Corporate Services
Budgetary delegation arrangements	Director of Finance and Corporate Services
Banking arrangements	Director of Finance and Corporate Services
Ex-gratia payments	Director of Finance and Corporate Services
Losses and special payments	Director of Finance and Corporate Services
Professional advice on supply of goods and services	Director of Finance and Corporate Services
External Communications incl. Media enquiries	Chief Executive, supported by Board Secretary
Healthcare Standards	Executive Director of Nursing/ Medical Director
Risk Management	Board Secretary
Legal Claims	Director of Finance and Corporate Services
Caldicott Guardian	Medical Director
Freedom of Information Act	Board Secretary
Welsh Language	Board Secretary
Legal advice	Board Secretary

<b>DELEGATED MATTER</b>	<b>RESPONSIBLE OFFICER(S)</b>
Receipt and opening of tenders	Board Secretary
Civil Contingencies /Emergency Planning	Deputy Chief Executive and Director of Workforce & OD
Variation of Funded Establishment	Chief Executive
Responsible Officer for medical trainees	Medical Director

This scheme only relates to matters delegated by the Board to the Chief Executive and their Executive Directors, together with certain other specific matters referred to in Standing Financial Instructions.

Each Executive Director is responsible for delegation within their department. They should produce a scheme of delegation for matters within their department, which should also set out how departmental budget and procedures for approval of expenditure are delegated.

## Delegated Financial Limits

Post	Education and Training Contracts	Education and Training Invoices	Revenue (Other Than Education & Training Contracts)
Board	Above £5m		No Limit
Chief Executive	up to £5m	No Limit (subject to Appropriate Contract Approval)	£250,000
Deputy Chief Executive (when acting in that capacity)	up to £5m	No Limit (subject to Appropriate Contract Approval)	£250,000
Director of Finance & Corporate Services	up to £2m	£2m	£100,000
Director of Nursing & Medical Director within delegated budget area		£500,000	£50,000
Executive Directors within delegated directorate budget area			£50,000
Deputy Director of Finance		£50,000	£50,000
Delegated Budget Managers (within delegated budget area)			£25,000
Delegated Budget Managers (within delegated budget area)			£10,000
Delegated Budget Managers (within delegated budget area)			£5,000
Delegated Budget Managers (within delegated budget area)			£1,000

## Schedule 2

### KEY GUIDANCE, INSTRUCTIONS AND OTHER RELATED DOCUMENTS

**This Schedule forms part of, and shall have effect as if incorporated in the  
HEIW Standing Orders**

#### HEIW Framework

The HEIW governance and accountability framework comprises these SOs, incorporating schedules of Powers reserved for the Board and Delegation to others, together with the following documents:

- ***SFIs***
- ***Values and Standards of Behaviour Framework***
- ***Risk and Assurance Framework***
- ***Key policy documents agreed by the Board including:***
  - ***Policies, procedures and other written control documents policy and procedure;***
  - ***Welsh Language Scheme;***

These documents must be read in conjunction with the SOs and will have the same effect as if the details within them were incorporated within the SOs themselves.

#### NHS Wales framework

Full, up to date details of the guidance, instructions and other documents that together make up the framework of governance, accountability and assurance for the NHS in Wales are published on the NHS Wales Governance e-Manual which can be accessed at [www.wales.nhs.uk/governance-emanual/](http://www.wales.nhs.uk/governance-emanual/). Directions or guidance on specific aspects of HEIW business are also issued in hard copy, usually under cover of a Ministerial Letter.

# Schedule 3

## BOARD COMMITTEE ARRANGEMENTS

**This Schedule forms part of, and shall have effect as if incorporated in the HEIW Standing Orders**

The HEIW Shadow Board has agreed initially to set up two committees:

Audit and Assurance Committee; and  
Remuneration and Terms of Service Committee

The Terms of Reference and Operating arrangement for each Committee is detailed below:

### **Audit and Assurance Committee**

The **Audit and Assurance Committee** is responsible for reviewing the system of governance and assurance established within HEIW and the arrangements for internal control, including risk management, for the organisation and, in particular, advises on the Annual Governance Statement signed by the Chief Executive.

The Committee also keeps under review the risk approach of the organisation and utilises information gathered from the work of the Board, its own work, the work of other Committees and also other activity in the organisation in order to advise the Board regarding its conclusions in relation to the effectiveness of the system of governance and control

The Committee also has the role of providing *assurance* to the Board in relation to the arrangements for creating, collecting, storing, safeguarding, disseminating, sharing, using and disposing of information in accordance with its stated objectives, legislative responsibilities, e.g., the Data Protection Act, General Data Protection Regulations and Freedom of Information Act; and any relevant requirements and standards determined for the NHS in Wales.

### **Remuneration and Terms of Service Committee**

The **Remuneration and Terms of Service Committee** has the purpose of providing advice to the Board on remuneration and terms of service for the Chief Executive, Executive Directors and other senior staff within the framework set by the Welsh Government and provide *assurance* to the Board in relation to HEIW arrangements for the remuneration and terms of service, including contractual arrangements, for all staff, in accordance with the requirements and standards determined for the NHS in Wales.

## Education, Commissioning and Quality Committee

The **Education, Commissioning and Quality Committee** has the purpose to:

- **Advise** and **assure** the Board and the Chief Executive (who is the Accountable Officer) on whether effective arrangements are in place to plan, commission, deliver and quality manage education systems and provide assurance on behalf of the organisation.
- Where appropriate, **advise** the Board and the Chief Executive on where, and how, its education systems and assurance framework may be strengthened and developed further.
- Recommend to the Board education training plans including investment in new programmes and disinvestment in others. .
- Recommend to the Board on strategic matters relating to Education Commissioning and Education Quality.
- **Recommend** the specification of tender documents in respect of Education to the Board

# **Standard Terms of Reference and Operating Arrangements for all Committees of the Board**

**Date:** 1 October 2018

**Version:** Draft 1.0

**Review Date:** Annually

## **1. Introduction:**

Section 3.1 of the HEIW standing orders provide that “The Board may and, where directed by the Welsh Government must, appoint Committees either to undertake specific functions on the Board’s behalf or to provide advice and assurance to the Board in the exercise of its functions. The Board’s commitment to openness and transparency in the conduct of all its business extends equally to the work carried out on its behalf by committees”.

In line with Section 3.3 of the standing orders, the Board shall as a minimum nominate annually committees which cover the following aspects of Board business:

- Audit and Assurance;
- Remuneration and Terms of Service; and
- Education, Commissioning and Quality Committee

This document includes content common to all committees and should be read alongside the specific terms of reference and operating arrangements for each committee.

The provisions of Section 5 of the Standing Orders have also been taken into account when developing the committee Terms of Reference. This relates to transparency of meetings, planning board/committee business, setting agenda’s etc.

## **2. Authority:**

Each Committee is authorised by the Board to investigate or have investigated any activity within its terms of reference. In doing so, the Committee shall have the right to inspect any books, records or documents of the Authority relevant to the Committee’s remit, ensuring staff confidentiality, as appropriate. It may seek relevant information from any:

- employee (and all employees are directed to co-operate with any reasonable request made by the Committee); and
- any other Committee, sub-committee or group set up by the Board to assist it in the delivery of its functions.

Each Committee is authorised by the Board to obtain outside legal or other



independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers it necessary, in accordance with the Board's procurement, budgetary and other requirements.

### **3. Sub-Committees and Groups**

Each Committee may, subject to the approval of the Board, establish sub-committees or groups to carry out on its behalf specific aspects of Committee business.

### **4. Membership and Attendees:**

#### **4.1 Secretariat**

As determined by the Board Secretary.

#### **4.2 Member Appointments**

- The second and third paragraph of this section 4.2 shall not be applicable to the Remuneration and Terms of Service Committee as section 4.1 of the same Committee's Terms of Reference shall take precedence.
- The membership of each Committee shall be determined by the Board, based on the recommendation of the Chair - taking account of the balance of skills and expertise necessary to deliver each Committee's remit and subject to any specific requirements or directions made by the Welsh Government. The Board shall ensure succession planning arrangements are in place.
- Members shall be appointed to hold office for a period of one year at a time, up to a maximum of their term of office. During this time a member may resign or be removed by the Board. The Board should, as a matter of good practice, review the membership of each Committee every two years in order to ensure each Committee is refreshed on a regular basis whilst maintaining continuity.
- Committee members' terms and conditions of appointment, (including any remuneration and reimbursement) will be in accordance with their terms of appointment to HEIW. Where a member has been co-opted to fulfil a specific function and where they are not Independent Members or employees of HEIW this will be determined by the Board, based upon the recommendation of the Chair and on the basis of advice from the Remuneration and Terms of Service Committee.

#### **4.3 Support to Committee Members**

The Board Secretary, on behalf of each Committee Chair, shall:

- Arrange the provision of advice and support to committee members on any aspect relating to the conduct of their role; and

- Ensure the provision of a programme of organisational development for Committee members as part of the overall Organisational Development programme developed by the Deputy Chief Executive.

#### **4.4 Withdrawal of individuals in attendance**

Each Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

Members and attendees will also withdraw from the meeting, as appropriate, where there is a conflict of interest or a potential conflict of interest.

### **5. Relationships and accountabilities with the Board and its Committees/Groups<sup>4</sup>**

Although the Board has delegated authority to the Committees for the exercise of certain functions, as set out within each Committee's terms of reference, it retains overall responsibility and accountability for ensuring a strategic approach to developing the Welsh health workforce for now and for the future through the effective governance of the organisation.

Each Committee is directly accountable to the Board for its performance in exercising the functions set out in each Committee's terms of reference.

Each Committee, through its Chair and members, shall work closely with the Board's other Committees, including joint (sub) committees and groups to provide advice and assurance to the Board through the:

- joint planning and co-ordination of Board and Committee business; and
- sharing of information.

Through acting in accordance with the preceding paragraph, each Committee shall contribute to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance framework.

- Each Committee shall embed HEIW values, corporate standards, priorities and requirements through the conduct of its business.

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<sup>4</sup> Reference to the Board's Committees/Groups incorporates its sub committees, joint committees and joint sub committees as well as other groups, such as Task and Finish Groups, where this is appropriate to the remit of the Committee.

## **6. Reporting and Assurance Arrangements:**

Each Committee Chair shall:

- bring to the Board's specific attention any significant matters under consideration by their Committee
- ensure appropriate escalation arrangements are in place to alert the Chair, Chief Executive (and Accountable Officer) or Chairs of other relevant committees of any urgent or critical matters that may affect the operation and/or reputation of HEIW.
- report formally, regularly and on a timely basis to the Board on the Committee's activities. This includes verbal updates on activity, the submission of Committee minutes and written reports when appropriate, as well as the presentation of an annual report;

The Board may also require the Committee Chair to report upon the Committee's activities at public meetings, or to community partners and other stakeholders, where this is considered appropriate. This could be where the Committee's assurance role relates to a joint or shared responsibility.

The Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous self assessment and evaluation of each Committee's performance and operation including that of any sub committees established and groups.

<b>Terms of Reference and Operating Arrangements Audit and Assurance Committee</b>
<b>Date:</b> 1 October 2018
<b>Review Date:</b> Annually
<p><b>1. Introduction</b></p> <p>In line with Section 3 of the Standing Orders, the Board shall nominate annually a committee which covers Audit. This remit of this Committee will be extended to include Assurance and Corporate Governance and will be known as the <b>Audit and Assurance Committee</b>.</p> <p>The detailed terms of reference and operating arrangements set by the Board in respect of this Committee are detailed below.</p> <p>These terms of reference and operating arrangements are to be read alongside the standard terms of reference and operating arrangements applicable to all committees.</p>
<p><b>2. Purpose</b></p> <p>The purpose of the Audit and Assurance Committee (“the Committee”) is to:</p> <ul style="list-style-type: none"> <li>• <b>Advise</b> and <b>assure</b> the Board and the Chief Executive (who is the Accountable Officer) on whether effective arrangements are in place, through the design and operation of HEIW’s assurance framework, to support them in their decision taking and in discharging their accountabilities for securing the achievement of its objectives, in accordance with the standards of good governance determined for the NHS in Wales</li> <li>• Where appropriate, the Committee will <b>advise</b> the Board and the Chief Executive on where, and how, its systems and assurance framework may be strengthened and developed further</li> <li>• <b>Approve</b> on behalf of the Board policies, procedures and other written control documents in accordance with the Scheme of Delegation</li> </ul>
<p><b>3. Delegated Powers</b></p> <p>With regard to its role in providing advice to the Board, the Committee will comment specifically on the:</p> <ul style="list-style-type: none"> <li>• adequacy of HEIW’s strategic governance and assurance framework, systems and processes for the maintenance of an effective system of governance, internal control, and risk management across the whole organisation’s activities, designed to support the public disclosure statements that flow from the assurance processes, including the Annual Governance Statement, providing reasonable assurance on:</li> </ul>

- the organisations ability to achieve its objectives
- compliance with relevant regulatory requirements and other directions and requirements set by the Welsh Government and others
- reliability, integrity, safety and security of the information collected and used by the organisation
- the efficiency, effectiveness and economic use of resources
- the extent to which the organisation safeguards and protects all its assets, including its people.

In undertaking its work and responsibility the Committee will comment specifically on:

- Board's Standing Orders, and Standing Financial Instructions (including associated framework documents, as appropriate)
- accounting policies, the accounts, and the annual report of the organisation, including the process for review of the accounts prior to submission for audit, levels of error identified, the ISA 260 Report 'Communication with those charged with Governance' and managements' letter of representation to the external auditors
- Schedule of Losses and Special Payments
- planned activity and results of internal audit, external audit and the Local Counter Fraud Specialist (including strategies, annual work plans and annual reports)
- adequacy of executive and management's response to issues identified by audit, inspection and other assurance activity
- anti fraud policies, whistle-blowing (raising concerns) processes and arrangements for special investigations
- issues upon which the Board, its Committees or the Chief Executive may seek advice
- contracting and tendering process
- provide assurance and undertake scrutiny of ensuring value for money

The Committee will support the Board with regard to its responsibilities for governance (including risk and control) by **reviewing** and **approving** as appropriate:

- all risk and control related disclosure statements, in particular the Annual Governance Statement together with any accompanying Head of Internal Audit statement, external audit opinion or other appropriate independent assurances, prior to endorsement by the Board
- the underlying assurance processes that indicate the degree of the achievement of corporate objectives, the effectiveness of the management of principal risks and the appropriateness of the above disclosure statements
- the policies for ensuring compliance with relevant regulatory, legal and code of conduct and accountability requirements
- the policies and procedures for all work related to fraud and corruption as set out in National Assembly for Wales Directions and as required by the Counter Fraud and Security Management Service

In carrying out this work the Committee will primarily utilise the work of Internal Audit, External Audit and other assurance functions, but will not be limited to these audit functions. It will also seek reports and assurances from directors and managers as appropriate, concentrating on the overarching systems of good governance, risk management and internal control, together with indicators of their effectiveness.

This will be evidenced through the Committee's use of effective governance and assurance arrangements to guide its work and that of the audit and assurance functions that report to it, and enable the Committee to review and form an opinion on the:

- comprehensiveness of assurances in meeting the Board and the Chief Executives assurance needs across the whole of HEIW activities;
- the reliability and integrity of these assurances

To achieve this, the Committee's programme of work will be designed to provide assurance that:

- there is an effective internal audit function that meets the standards set for the provision of internal audit in the NHS in Wales and provides appropriate independent assurance to the Board and the Chief Executive through the Committee
- there is an effective counter fraud service that meets the standards set for the provision of counter fraud in the NHS in Wales and provides appropriate assurance to the Board and the Chief Executive through the Committee
- there is an effective improvement function that provides appropriate assurance to the Board and the Chief Executive

- there are effective arrangements in place to secure active, ongoing assurance from management with regard to their responsibilities and accountabilities, whether directly to the Board and the Chief Executive or through the work of the Board's committees
- the work carried out by key sources of external assurance, in particular, but not limited to HEIW's external auditors, is appropriately planned and co-ordinated and that the results of external assurance activity complements and informs (but does not replace) internal assurance activity
- the work carried out by the whole range of external review bodies is brought to the attention of the Board, and that the organisation is aware of the need to comply with related standards and recommendations of these review bodies, and the risks of failing to comply
- systems for financial reporting to the Board, including those of budgetary control, are effective
- results of audit and assurance work specific to HEIW, and the implications of the findings of wider audit and assurance activity relevant to the HEIW's operations are appropriately considered and acted upon to secure the ongoing development and improvement of the organisations governance arrangements

The Committee will review and agree the programme of work on an annual basis, and will recommend it to the Board for approval.

#### **4. Access**

The Head of Internal Audit and the Auditor General and his representatives shall have unrestricted and confidential access to the Chair of the Audit and Assurance Committee at any time, and vice versa.

The Committee will meet with Internal and External Auditors and the nominated Local Counter Fraud Specialist without the presence of officials on at least one occasion each year.

The Chair of the Audit and Assurance Committee shall have reasonable access to Executive Directors and other relevant senior staff.

## **5. Membership, Attendees and Quorum**

### **5.1 Members**

A minimum of three members, comprising:

Chair	Independent Member
Members	Independent Member x 2

The Chair of the organisation shall not be a member of the Audit and Assurance Committee, but may be invited to attend by the Chair of the Committee as appropriate.

### **5.2 Attendees**

In attendance:

Executive Director of Finance and Corporate Services  
Board Secretary  
Head of Internal Audit (or representative)  
Local Counter Fraud Specialist  
Representative of the Auditor General for Wales  
Head of Finance

In addition to this others from within or outside the organisation who the Committee considers should attend, will be invited taking account of the matters under consideration at each meeting.

The Chief Executive shall be invited to attend, at least annually, to discuss with the Committee the process for assurance that supports the Annual Governance Statement.

### **5.3 Quorum**

At least **two** members must be present to ensure the quorum of the Committee, one of whom should be the Committee Chair (or Vice Chair where appointed).

## **6. Frequency of Meetings**

Meetings shall be held no less than quarterly and otherwise as the Chair of the Committee deems necessary – consistent with HEIW's annual plan of Board Business. The External Auditor or Head of Internal Audit may request that the Chair convene a meeting if they consider this necessary.



## **7. Relationships and accountabilities with the board and its Committees/Groups:<sup>5</sup>**

The Audit and Assurance Committee must have an effective relationship with other committees or sub-committees of the Board so that it can understand the system of assurance for the Board as a whole. It is very important that the Audit and Assurance Committee remains aware of its distinct role and does not seek to perform the role of other committees.

The Committee will consider the assurance provided through the work of the Board's other committees and sub groups to meet its responsibilities for advising the Board on the adequacy of HEIW's overall framework of assurance.

## **8. Reporting and Assurance Arrangements**

The Committee shall provide a written, annual report to the Board and the Chief Executive on its work in support of the Annual Governance Statement, specifically commenting on the adequacy of the assurance framework, the extent to which risk management is comprehensively embedded throughout the organisation, the integration of governance arrangements and the appropriateness of self assessment activity against relevant standards. The report will also record the results of the committee's self assessment and evaluation.

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<sup>5</sup> Reference to the Board's Committees/Groups incorporates its sub committees, joint committees and joint sub committees as well as other groups, such as Task and Finish Groups, where this is appropriate to the remit of this Audit and Assurance Committee

<b>Remuneration and Terms of Service Committee</b> <b>Terms of Reference and Operating Arrangements</b>	
<b>Date:</b> 1 October 2018	<b>Version:</b> Draft 1.0
<b>Review Date:</b> Annually	
<b>1. Introduction</b>  <p>In line with Section 3 of the Standing Orders and HEIW's Scheme of Delegation, the Board shall nominate annually a committee to be known as the Remuneration and Terms of Service Committee. The detailed terms of reference and operating arrangements set by the Board in respect of this committee are set out below.</p> <p>These terms of reference and operating arrangements are to be read alongside the standard terms of reference and operating arrangements applicable to all Committees.</p>	
<b>2. Purpose</b>  <p>The purpose of the Remuneration and Terms of Service Committee ("the Committee") is to provide:</p> <ul style="list-style-type: none"> <li>• <b>advice</b> to the Board on remuneration and terms of service and performance for the Chief Executive, Executive Directors and other senior staff within the framework set by the Welsh Government</li> <li>• <b>assurance</b> to the Board in relation to HEIW's arrangements for the remuneration and terms of service, including contractual arrangements, for all staff, in accordance with the requirements and standards determined for the NHS in Wales.</li> </ul> <p>The Committee shall have no powers to exercise on behalf of the Board.</p>	
<b>3. Delegated Powers</b>  <p>With regard to its role in providing advice and assurance to the Board, the Committee will comment specifically upon the:</p> <ul style="list-style-type: none"> <li>• remuneration and terms of service for the Chief Executive, Executive Directors, members of the Executive Team and other Very Senior Managers (VSMs); ensuring that the policies on remuneration and terms of service as determined from time to time by the Welsh Government are applied consistently</li> <li>• objectives for Executive Directors and members of the Executive Team and their performance assessment</li> <li>• performance management system in place for those in the positions mentioned above and its application</li> <li>• proposals regarding termination arrangements, including those under the Voluntary Early Release Scheme, ensuring the proper calculation and scrutiny of termination payments in accordance with the relevant Welsh Government guidance.</li> </ul>	

## **4. Membership, Attendees and Quorum**

### **4.1 Members**

Chair: HEIW Chair

Members: Every Independent Member of HEIW

**4.2 By Invitation** As required but usually to include:  
Chief Executive  
Deputy Chief Executive  
Director of Finance and Corporate Services  
Board Secretary

The Committee Chair may invite the following to attend all or part of a meeting to assist it with its discussions on any particular matter:

- any other official;
- and/or any others from within or outside the organisation

### **4.3 Quorum**

At least **three** members must be present to ensure the quorum of the Committee, one of whom must be the Chair (or Vice Chair where appointed).

## **5. Frequency of Meetings**

The Chair of the Committee, in agreement with Committee Members, shall determine the timing and frequency of meetings, as deemed necessary. It is expected that the Committee shall meet at least once a year, consistent with the annual plan of Board Business.

## Education, Commissioning and Quality Committee Terms of Reference and Operating Arrangements

**Date:** 30 May 2019

**Review Date:** Annually

### 1. Introduction

In line with Section 3 of the Standing Orders, the Board shall nominate annually a committee which covers education, education commissioning and quality management of education provision and contracts. This Committee will be known as the Education, Commissioning and Quality Committee.

The terms of reference and operating arrangements set by the Board in respect of this Committee are detailed below.

These terms of reference and operating arrangements are to be read alongside the standard terms of reference and operating arrangements applicable to all HEIW committees.

### 2. Purpose

The purpose of the Education, Commissioning and Quality Committee (“the Committee”) is to:

- **Advise** and **assure** the Board and the Chief Executive (who is the Accountable Officer) on whether effective arrangements are in place to plan, commission, deliver and quality manage education systems and provide assurance on behalf of the organisation.
- Where appropriate, **advise** the Board and the Chief Executive on where, and how, its education systems and assurance framework may be strengthened and developed further.
- Recommend to the Board education training plans including investment in new programmes and disinvestment in others. .
- Recommend to the Board on strategic matters relating to Education Commissioning and Education Quality.
- **Recommend** the specification of tender documents in respect of Education to the Board

### **3. Delegated Powers**

With regard to its role in providing advice to the Board, the Committee will:

- i. Provide assurance to the Board as to the effective management and improvement of the quality of HEIW's education and related research activities.
- ii. Recommend to the Board areas for investment/disinvestment in education and training plans taking into account value based commissioning.
- iii. Recommend to the Board the national annual education and training plan.
- iv. Alert the Audit and Assurance Committee and the Board to any matters requiring governance action, and oversee such action on behalf of the Board.
- v. Oversee the development, implementation and updating of strategies, policies, structures and processes for the governance of education and training which shall including taking a forward looking and strategic view.
- vi. Seek assurance of the effective performance, monitoring, management and value of education and training programmes and contracts, including the identification and management of related risk.
- vii. Monitor compliance of education and training activities with:
  - a. statutory and regulatory requirements, including equity, equality legislation and Welsh language requirements and;
  - b. with NHS Wales policy and other relevant policies and HEIW's priorities in relation to equity, equality and diversity, person-centred care and participation, and educational quality.
- viii. Monitor HEIW's compliance with delegated responsibilities given to it by health regulators i.e. GMC, GDC and GPhC as delegated to HEIW.
- ix. Promote collaboration within HEIW and with external agencies in relation to educational and training governance which shall include wellbeing.

- x. To work collaboratively with other HEIW Board standing committees.
- xi. Scrutinise the specification of education tender documents.
- xii. Recommend the specification of tender documents to the Board for Education.
- xiii. Recommend undertaking research on Education, Quality and Commissioning to the Board.
- xiv. Engage with Board Development Sessions with regards to making recommendations on strategic matters relating to Education Commissioning and Education Quality.
- xv. Seek assurance in respect of risk areas within its area of responsibility and highlight material areas of concern to the Audit and Assurance Committee.
- xvi. Highlight any issues out of the ordinary to the Board.

The Committee will review and agree its forward work programme on an annual basis, and will recommend it to the Board for approval.

#### **4. Membership, Attendees Quorum and Term**

##### **4.1.1 Members**

A minimum of two members, comprising:

- Chair - Independent Member
- Members - 1 Independent Member in addition to the Chair

The Chair of the organisation shall not be a member of the Committee, but may be invited to attend by the Chair of the Committee as appropriate.

##### **4.1.2 Deputy Independent Member**

The Board may appoint a Deputy Independent Member for the Committee. Where a member of the Committee is unable to attend a Committee meeting, then the nominated Deputy may attend in his or her absence as a member of the Committee. If a Deputy attends a Committee as a member of the Committee then the Deputy shall be included for the calculation of a quorum and may exercise voting rights.

## **4.2 Attendees**

In attendance:

- Director of Nursing
  - Medical Director
  - Director of Finance and Corporate Services
  - Board Secretary
  - Head of Education, Commissioning and Quality

In addition to this, others from within or outside the organisation who the Committee considers should attend, will be invited taking account of the matters under consideration at each meeting.

The Chief Executive shall be invited to attend, at least annually, to discuss with the Committee the process for assurance that supports the Annual Governance Statement.

## **4.3 Quorum**

At least **two** members must be present to ensure the quorum of the Committee, one of whom should be the Committee Chair (or Vice Chair where appointed).

## **4.4 Terms**

Immediately following the establishment of HEIW the Members shall be appointed for an initial period of two years. Thereafter Members shall be appointed for a term of one year.

## **5. Frequency of Meetings**

Meetings shall be held no less than quarterly and otherwise as the Chair of the Committee deems necessary – consistent with HEIW's annual plan of Board Business.

## **6. Relationships and accountabilities with the Board and its Committees/ Groups**

The Committee must have an effective relationship with other committees or sub-committees of the Board so that it can understand the system of assurance for the Board as a whole. It is very important that the Committee remains aware of its distinct role and does not seek to perform the role of other committees.

The Committee will maintain effective working relationships with HEIW'S Audit and Assurance Committee (AAC), and with HEIW's other Board committees and subcommittees. To strengthen liaison with the AAC, one Independent Member will serve on both committees.



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Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

<b>Meeting Date</b>	<b>28 November 2019</b>	<b>Agenda Item</b>	<b>4.5</b>
<b>Report Title</b>	Appointment of a Deputy Independent Member to the Education Commissioning and Quality Committee		
<b>Report Author</b>	Dafydd Bebb, Board Secretary		
<b>Report Sponsor</b>	Dafydd Bebb, Board Secretary		
<b>Presented by</b>	Dafydd Bebb, Board Secretary		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	The purpose of the report is to request that the Board consider and confirm the appointment of a Deputy Independent Member of the Education Commissioning and Quality Committee (EC&QC).		
<b>Key Issues</b>	<ul style="list-style-type: none"> <li>• November Board has been asked to consider the approval of amended Standing Orders (SOs);</li> <li>• the amended SOs incorporate the recommendations that were adopted at September Board in respect of the Future Ways of Working paper;</li> <li>• subject to Board approval, it is anticipated that the amended SOs will include the creation of a Deputy Independent Member role for the EC&amp;QC;</li> <li>• members are asked to consider the nomination of Gill Lewis as the Deputy Independent Member of the EC&amp;QC.</li> </ul>		
	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
			<b>Approval</b>
			✓
<b>Recommendations</b>	Members are asked to: <ul style="list-style-type: none"> <li>• <b>approve</b> the appointment of Gill Lewis as the Deputy Independent Member of the Education Commissioning and Quality Committee.</li> </ul>		



## Appointment of a Deputy Independent Member to the Education Commissioning and Quality Committee

Governance and Assurance				
<b>Link to corporate objectives</b> (please ✓)	As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand	Building a sustainable and flexible health and care workforce for the future.	With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.	Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
	✓			
	Improving opportunities for use of technology and digitalisation in the delivery of education and care.	Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales	Demonstrating value from investment in the workforce and the organisation.	
<b>Quality, Safety and Patient Experience</b>				
Ensuring greater scrutiny and assurance in respect of the HEIW's areas of responsibility in respect of the education, training and quality is a key factor in the quality, safety and experience of patients receiving care.				
<b>Financial Implications</b>				
No direct financial implications.				
<b>Legal Implications (including equality and diversity assessment)</b>				
No direct legal implications.				
<b>Staffing Implications</b>				
No direct staffing implications.				
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>				
No direct long term implications.				
<b>Report History</b>	na			
<b>Appendices</b>	na			



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Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

<b>Meeting Date</b>	<b>28 November 2019</b>	<b>Agenda Item</b>	<b>4.6</b>
<b>Report Title</b>	<b>Committee Chair's Report – Education, Commissioning and Quality Committee</b>		
<b>Report Author</b>	Kay Barrow, Corporate Governance Manager		
<b>Report Sponsor</b>	Dafydd Bebb, Board Secretary		
<b>Presented by</b>	Ruth Hall, Chair		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	The purpose of the report is to outline discussions undertaken by the Education, Commissioning and Quality Committee.		
<b>Key Issues</b>	<p>This report focuses on the key issues raised at the Education, Commissioning and Quality Committee meeting held on 21 October 2019.</p> <p>The Board is asked to note the summary from the Chair for assurance.</p>		
<b>Specific Action Required</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
			✓
<b>Recommendations</b>	Members of the Board are asked to <b>note</b> the report for Assurance.		

## **Committee Chair's Report – Education, Commissioning and Quality Committee**

### **1. INTRODUCTION**

The purpose of the report is to provide an update on matters considered by the Education, Commissioning and Quality Committee. The Board is asked to note the summary report from the Chair.

### **2. BACKGROUND**

The Board will be aware that three committees have been established under HEIW's standing orders: the Audit and Assurance Committee; the Remuneration and Terms of Service Committee and the Education, Commissioning and Quality Committee. Each committee will present reports to the Board during the course of the year outlining key discussions, issues and risks discussed during meetings.

### **3. REPORT FROM COMMITTEE CHAIR**

The Board is asked to **receive** and **note** the Education, Commissioning and Quality Committee Chair's summary of the meeting held on 21 October 2019.

### **4. GOVERNANCE AND RISK ISSUES**

Any governance risks and issues are managed via the committee meetings and exception reports will be provided to the Board by the respective chairs.

### **5. FINANCIAL IMPLICATIONS**

There are no financial implications for the Board to consider/approve.

### **6. RECOMMENDATION**

Members of the Board are asked to:

- **note** the content of the report for assurance.

<b>Governance and Assurance</b>				
<b>Link to corporate objectives</b> (please ✓)	As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand	Building a sustainable and flexible health and care workforce for the future.	With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.	Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
	✓			
	Improving opportunities for use of technology and digitalisation in the delivery of education and care.	Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales	Demonstrating value from investment in the workforce and the organisation.	
<b>Quality, Safety and Patient Experience</b>				
Ensuring the Board carries out its business appropriately through its Committees and aligned with its standing orders is a key factor in enabling the quality, safety and experience of patients receiving care.				
<b>Financial Implications</b>				
No financial implications for the Board to be aware of.				
<b>Legal Implications (including equality and diversity assessment)</b>				
It is essential that the Board complies with its standing orders, which includes receiving updates from its committees.				
<b>Staffing Implications</b>				
No staffing implications for the Board to be aware of.				
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>				
The report outlines work undertaken by the Committee to advise and assure the Board in relation to education, education commissioning and quality management of education provision and contracts. The Committee governance structure aims to identify issues early to prevent escalations; work closely with the Audit and Assurance Committee and integrate into the overall Board arrangements.				
<b>Report History</b>	This report shall be a standing item on the Board's agenda.			
<b>Appendices</b>	Chair's summary – Education, Commissioning and Quality Committee (Appendix 1).			

## Appendix 1

Meeting Date	28 November 2019	Agenda Item	
Freedom of Information Status	Open		
Reporting Committee	Education, Commission and Quality Committee		
Report Author	Kay Barrow, Corporate Governance Manager		
Chaired by	Ruth Hall		
Lead Executive Director(s)	Stephen Griffiths and Professor Pushpinder Mangat		
Date of last meeting	21 October 2019		
Summary of key matters considered by the committee and any related decisions made:			
<b>Terms of Reference:</b> The Committee reviewed and approved the revisions to its Terms of Reference arising from the Board’s review of the Future Ways of Working Report. However, it noted that the Committee’s role to ensure value needed to align with the work being undertaken by Professor Ceri Phillips, and that this work would be brought back to the Committee as part of a wider focus on value scheduled in the Committee’s Forward Work Programme for July 2020.			
The Committee requested to be sighted on the future workforce plans emerging throughout NHS Wales and would be considering a specific agenda item on the Emerging Approaches from Workforce Planning and impact on training programmes scheduled in the Committee Forward Work Programme for January 2020.			
<b>Review of the Health Professional Education:</b> An update was received in relation to the current progress and the revised timelines resulting from the delay to the Welsh Government decision relating to the NHS Bursary Scheme.			
A summary of the key themes emerging from the KPMG Review, including those areas that required further work, was also given. The Committee welcomed the approach to increasing commitment to Welsh language provision as a part of the commissioning process.			
<b>Review of the Medical Deanery Visits:</b> The Committee supported the changes to the process, the more inclusive approach and the emphasis on multi-professional working.			
<b>Quality Assurance Review of Post Graduate Medical Education:</b> The Committee noted the update in relation to ongoing concerns and escalation where required.			
<b>GMC National Trainee Survey:</b> The Committee received the survey, recognising the challenges and actions being taken to address them. It was noted that the GMC would be providing a response to the survey following discussion of the emerging key themes with the Deanery.			
The Committee was advised that discussions were ongoing with the Executive Team in relation to the professionalising of the role of the Training Programme			

Directors. The reporting of complaints relating to trainees was highlighted as a major concern. The Committee requested that the Medical Director review Scotland's approach to handling complaints.

**Forward Work Programme:** The Committee reviewed its Work Programme and agreed that it would be updated to reflect the agreed actions arising from the meeting.

It was agreed that a Gantt Chart would be helpful, detailing the engagement and procurement process relating to the Healthcare Education Contracts; also that Committee Members be invited to attend identified programme meetings as observers, where appropriate to their IM role and responsibilities.

**Key risks and issues/matters of concern of which the Board needs to be made aware:**

None identified.

**Delegated action by the Committee**

Following the Committee's approval of its revised **Terms of Reference**, it recommended that the revised Standing Orders be scrutinised by the Audit and Assurance Committee at its November meeting.

Further to the update received by the Committee in relation to the **Review of the Health Professional Education**. The Director of Nursing agreed to discuss with the Chair of the Audit and Assurance Committee whether a joint meeting of the Committee with Procurement and Legal & Risk is required.

**Main sources of information received**

- Review of Committee Terms of Reference
- Review of Health Professional Education
- Review of Medical Deanery Commissioning Visits
- Quality Assurance Review of Post Graduate Medical Education (PGME)
- GMC National Trainee Survey
- Future Ways of Working Board Report – For Information
- Forward Work Programme

**Highlights from sub-groups reporting into this committee**

N/A

**Matters referred to other Committees**

None identified.



**GIG**  
CYMRU  
**NHS**  
WALES

Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

<b>Meeting Date</b>	<b>28 November 2019</b>	<b>Agenda Item</b>	<b>4.7</b>
<b>Report Title</b>	<b>Matters reported In-Committee</b>		
<b>Report Author</b>	Kay Barrow, Corporate Governance Manager		
<b>Report Sponsor</b>	Dafydd Bebb, Board Secretary		
<b>Presented by</b>	Dafydd Bebb, Board Secretary		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	To set out key issues discussed at the In-Committee Board Meeting held on 26 September 2019.		
<b>Key Issues</b>	In accordance with Standing Orders, HEIW is required to report any decisions made in private session to the next available public meeting of the Board. The report sets out the decisions made by the Board In-Committee on 26 September 2019.		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
	✓		
<b>Recommendations</b>	Members are asked to: <ul style="list-style-type: none"> <li>• <b>Note</b> the report for information.</li> </ul>		

## DECISIONS MADE DURING THE IN-COMMITTEE BOARD MEETINGS ON 26 SEPTEMBER 2019

### 1. INTRODUCTION

The purpose of the report is to report on items considered by the in-committee Board meetings on 26 September 2019.

### 2. BACKGROUND

The Board shall conduct as much of its formal business in public as possible. There may be circumstances where it would not be in the public interest to discuss a matter in public. In such cases, the Chair (advised by the Board Secretary where appropriate) shall schedule these issues accordingly and require that any observer withdraw from the meeting. In doing so, the Board shall resolve:

*“that representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest”*

In these circumstances, when the Board is not meeting in public session it shall operate in private session, formally reporting any decisions taken at the next meeting of the Board in public session.

### 3. GOVERNANCE AND RISK ISSUES

The following items were discussed in the **in-committee meeting of the HEIW Board on 26 September 2019:**

- **Chair’s Report** – The Board received a verbal update from the Chair and the following action was agreed:
  - HEIW to review its contribution to the NHS Confederation’s consultation on the Future Generations Act.
- **Chief Executive’s Report** – The Board received a verbal update from the Chief Executive and the following action was agreed:
  - The Independent Members of the Board to receive a formal invitation to the HEIW first anniversary celebration event on 1 October 2019.
- **Director of Finance Report** – The Board received and noted the verbal update in relation to HEIW’s financial position.
- **International Recruitment** – The Board received a verbal update and noted the progress in relation to the NHS Wales and BAPIO recruitment visit to India.
- **Executive Director Recruitment** – The Board received a verbal update in relation to the recruitment of the Director of Finance and Corporate Services and agreed, in principle, the following action:
  - A further report be considered at the next meeting of the RATS Committee and that final approval be obtained from the Board.



- **Key Issue Report from the Audit & Assurance Committee Closed Session**  
– The key issues report on the recent Audit & Assurance Committee Closed Session held on 15 July 2019 was considered and noted for assurance.
- **Key Issue Report from the Remuneration and Terms of Service (RATS) Committee** – The key issues report on the recent RATS Committee meeting held on 29 August 2019 was considered and noted for assurance.
- **Brexit** – The Board received and noted the verbal update in relation to the NHS Wales Brexit preparedness.
- **Update on Pay Awards** – The Board received a verbal update in relation to the pay awards agreed by Welsh Government for Executives; Medical and Dental staff; and GP and Dental Educators. The following action was agreed:
  - That a written update in respect of pay awards be circulated to Board members as soon as possible and to be presented at the next meeting of the RATS Committee in November 2019.

#### 4. FINANCIAL IMPLICATIONS

There are no financial implications in noting the update. However, any resource implications would have been detailed in the original requests for ratification.

#### 5. RECOMMENDATION

Members are asked to **note** the report for information.

Governance and Assurance				
Link to corporate objectives (please ✓)	As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand	Building a sustainable and flexible health and care workforce for the future.	With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.	Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
	✓			
	Improving opportunities for use of technology and digitalisation in the delivery of education and care.	Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales	Demonstrating value from investment in the workforce and the organisation.	
Quality, Safety and Patient Experience				
Ensuring that the Board and its Committee make fully informed decisions is dependent on the quality and accuracy of the information presented and considered by those making decisions. Informed decisions are more likely to impact favourably on the quality, safety and experience of patients and staff.				

<b>Financial Implications</b>	
There are no direct resource implications related to this report. However, any resource implications would have been detailed in the original requests for ratification.	
<b>Legal Implications (including equality and diversity assessment)</b>	
There are no legal implications contained within this report. However, specific impact, where relevant, will have been considered within individual reports referenced within this update.	
<b>Staffing Implications</b>	
There are no direct implications on workforce in this report. However, specific impact, where relevant, will have been considered within individual reports referenced within this update.	
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>	
There are no direct implications on the Act. However, specific impact, where relevant, will have been considered within individual reports referenced within this update.	
<b>Report History</b>	This report is provided at each meeting of the Board.
<b>Appendices</b>	None.