

Bundle HEIW Board 26 September 2019

AGENDA

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6.1 Any Other Urgent Business

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6.3 Dates of Next Meetings

HEALTH EDUCATION IMPROVEMENT WALES (HEIW)

Board Meeting - 10.00am-1.00pm

**to be held on Thursday, 26 September 2019
in the Conference Room, Ty Dysgu, Nantgarw**

AGENDA

PART 1	PRELIMINARY MATTERS	10.00-10.30
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 – All Wales Training Agreement	Dr Anton Saayman, Sub Dean (Postgraduate Education Support and Quality Improvement Skills Training)
1.5	To receive and confirm the minutes of the Annual General Meeting held on 18 July 2019	Chair/ Attachment
1.6	To receive and confirm the minutes of the Board held on 18 July 2019	Chair/ Attachment
1.7	Action Log	Chair/ Attachment
1.8	Matters Arising	Chair/Oral
PART 2	CHAIR AND CHIEF EXECUTIVE REPORTS	10.30-10.50
2.1	Chair's Report	Chair/ Attachment
2.2	Chief Executive's Report	Chief Executive/ Attachment
PART 3	STRATEGIC ITEMS	10.50-11.50
3.1	Update on Leadership Strategy for Health and Social Care	Director of Workforce and OD/ Attachment
3.2	Urgent Primary Care Out of Hours – update on workforce matters	Chief Executive/ Attachment
3.3	Update on IMTP Development	Director of Workforce and OD/ Attachment

3.4	Foundation Trainees Business Case	Medical Director/ Attachment
PART 4	GOVERNANCE, PERFORMANCE AND ASSURANCE	11.50-12.50
4.1	Finance Report	Deputy Director of Financial Management/ Attachment
4.2	Performance Report	Director of Workforce and OD/ Attachment
4.3	Board Assurance Framework	Board Secretary/ Attachment
4.4	Corporate Risk Register	Board Secretary/ Attachment
4.5	Future Ways of Working – Education, Commissioning and Quality Committee	Board Secretary/ Attachment
4.6	Update on Welsh Language Policy	Board Secretary/ Attachment
4.7	To receive key issue reports from the: - Audit and Assurance Committee held on 15 July 2019	Chair of the Committee/ Attachment
4.8	In-Committee Decisions	Board Secretary/ Attachment
PART 5	FOR INFORMATION	
5.1	Update on Welsh Government Document Schedules – For Information	Board Secretary/ Attachment
PART 6	OTHER MATTERS	12.50-1.00
6.1	Any other urgent business	Chair/ Oral
6.2	Summary of key actions	Chair/Oral
6.3	Dates of Next Meetings: <ul style="list-style-type: none"> • HEIW Board Development Session to be held on 31 October 2019 in Ty Dysgu, Nantgarw. • HEIW Board to be held on 28 November 2019 – venue to be confirmed. 	

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.

A Medical Trainer Agreement (Secondary Care and Undergraduate Education) for Wales

1. GMC arrangements for the formal recognition of trainers in secondary care, a key component of the GMC's regulatory framework, apply to both postgraduate trainers (Educational Supervisors and Named Clinical Supervisors) and undergraduate trainers (those responsible for overseeing students' progress at medical school and Lead co-ordinators at each Local Education Provider).
2. To be recognised for formal Trainer status on the GMC's List of Registered Medical Practitioners as an Educational Supervisor (ES) or Named Clinical Supervisor (NCS) in Wales, postgraduate trainers were required to sign the Educational Supervision Agreement or pilot Named Clinical Supervision Agreement and meet Agreement requirements.
3. Both Agreements have been subject to full evaluation by the Wales Deanery in conjunction with CUREMedE (School of Social Sciences, Cardiff University). Evaluations demonstrated that trainers were highly supportive of an Agreement and considered it professionalised and supported the trainer roles, impacting positively on delivery of roles and quality of supervision, thereby raising standards of postgraduate training and ultimately, quality of patient care.
4. Commitment to the harmonisation of undergraduate and postgraduate approaches to trainer recognition in Wales via extension of the next iteration of an Agreement to the two undergraduate trainer roles has been secured from Cardiff and Swansea Universities' Medical Schools.
5. BMA Cymru Wales has also endorsed the concept of a single Medical Trainer Agreement.
6. The new Medical Trainer Agreement (Secondary Care & Undergraduate Education) was launched on 13 November 2018 (exactly 5 years after the launch of the Educational Supervision Agreement) and supersede the Educational Supervision Agreement and pilot Named Clinical Supervision Agreement.
7. Agreements are between an individual trainer, a Local Education Provider (NHS Wales Health Board or Trust) and an Education Organiser (HEIW, Cardiff University's School of Medicine or Swansea University Medical School) and define the role, responsibilities and rights of the three parties and identify the mechanisms to support the provision of high quality medical education and training.
8. Agreements are administered via 'TAG' (Trainer Agreement Gateway) – an e-agreement system which will also hold records of all recognised trainers. This will ensure the process for managing Agreements is more efficient for all parties.
9. Medical Directors acknowledged and supported the development of the single Medical Trainer Agreement as they were responsible for signing the Agreement on behalf of their Health Board or Trust and are key to supporting and delivering LEP responsibilities as defined in the Agreement.
10. As the fundamental responsibilities of the trainer, LEP and Education Organiser are no different in undergraduate medical education and postgraduate medical training, the single Medical Trainer Agreement did not contain any new commitments or responsibilities for LEPs.
11. Neither should there be any new resource implications for LEPs (for example Cardiff and Vale University Health Board already allocates protected time to ES, NCS and undergraduate trainer roles and many undergraduate trainers have employment contracts with Cardiff University).
12. Benefits for Local Education Providers and wider NHS Wales include –
 - Consistency of approach to the delivery, management and support of trainer roles within and between Local Education Providers (and Education Organisers) and more streamlined mechanisms for their management and provision of, for example, CPD activity for trainers

- A training environment that will support trainers committed to high quality training provision leading to increased enthusiasm for, and uptake of, trainer roles and ultimately yielding a 'professionalised', highly trained, motivated and supported cohort of trainers across Wales who strive continuously for improvement in the quality of training
 - A vehicle providing support for effective recognition and consideration of trainer roles within the NHS clinician whole-practice appraisal and job planning processes
 - Enhanced links, communication and accountability between the Wales Deanery and Local Education Providers responsible for delivering medical education and training in Wales
 - Provision of the foundation for a pan-Wales system of quality management of trainers by virtue of consistency of requirements of trainers as defined in the Agreement forming the basis of 'standards' trainers are expected to achieve (informing mechanisms for selection, remediation, addressing unprofessional behaviours and deselection of trainers)
 - Creation of a 'community of practice' comprising trainers across NHS Wales with a shared interest in excellence in training
13. Harmonisation of undergraduate and postgraduate approaches to trainer recognition via a single Medical Trainer Agreement is a first in the UK and ensure that Wales continues to be recognised by the GMC as leading the way in relation to implementation of formal recognition of, and support for, its trainers.
 14. The overall plan for this work has been shared with, and endorsed by, the Wales Deanery's Management Executive, Quality Committee and Trainer Recognition Group and there is clear impetus for this direction of travel across the three Education Organisers and our NHS Wales stakeholders.
 15. The MTA is instrumental in securing future Local Quality Control, feeding into the HEIW Deanery QMF and improving the quality of medical undergraduate and postgraduate medical education in Wales.

Anton Saayman (Sub Dean) & Caroline Groves (Quality Unit Lead)

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Minutes of the HEIW Annual General Meeting
The held on 18 July 2019 at 2.00pm
in Board Room, Ystwyth Building, Hafan Derwen,
St David's Park, Carmarthen, SA31 3BB

Present:

Dr Chris Jones	Chair
Julie Rogers	Deputy CEO/Director of Workforce and OD
John Hill-Tout	Vice Chair
Tina Donnelly	Independent Member
Dr Ruth Hall	Independent Member
Gill Lewis	Independent Member
Professor Ceri Phillips	Independent Member
Stephen Griffiths	Director of Nursing
Professor Pushpinder Mangat	Medical Director
Dafydd Bebb	Board Secretary

In attendance:

Kay Barrow	Corporate Governance Manager (Secretariat)
Angharad Price	Head of Communications
Huw Owen	Welsh Language Manager
Rhiannon Beckett	Deputy Director of Finance
Rob Heritage	IT Manager
Lisa Gostling	Director of Workforce and OD, Hywel Dda
Amanda Glanville	Senior Workforce Advisor, Hywel Dda
Shelley Dony	Future Workforce Development Manager, Hywel Dda

PART 1	PRELIMINARY MATTERS	Action
AGM 1807/1.1	Welcome	
	The Chair welcomed everybody to the Annual General Meeting of the HEIW Board and, in particular, to colleagues from Hywel Dda University Health Board. He also passed on the thanks of the Board for hosting HEIW.	
AGM 1807/1.2	Introductory Remarks	
	The Chair opened the Annual General Meeting highlighting the positive Board meeting that had taken place earlier in the day. This had provided an opportunity for staff to showcase examples of the added	

	<p>value of HEIW as a facilitator, and its collaborative work with colleagues from Health Boards and its partners. He was pleased to see the work of HEIW as an enabler and the hard work of a committed workforce.</p> <p>He explained that the Annual Report sets out the successes of HEIW since its establishment.</p>	
PART 2	ANNUAL REPORT	
AGM 1807/2.1	Chief Executive Overview	
	<p>Julie Rogers commented that the Annual Report was a reflection of the first 6 months of operation. The achievements thus far were testament to the staff and the legacy from the predecessor organisations. She thanked staff and partners for the success in the establishment of HEIW as an NHS education body. HEIW has built a foundation which it can now focus on going forwards, to ensure it impacts positively on the health and wellbeing of the people of Wales.</p> <p>She advised that the feedback from the recent Joint Executive Team meeting with Welsh Government was positive. The Internal Audit Reviews carried out on the key systems and controls have highlighted areas of good practice but also areas of learning and improvement.</p> <p>The report highlights the delivery of HEIW's key priorities and Welsh Government expectations from transition into operation. The smooth transition of education and workforce staff to the new NHS body was predicated on good communication and early engagement on culture and values.</p> <p>Looking ahead, HEIW is in a good place with an approved Annual Plan for 2019-20 including a number of key deliverables to achieve the vision of transforming the workforce for a healthier Wales. HEIW continues to be focussed on driving the development of a collaborative workforce strategy, as well as improvements in education and training, workforce development, and leadership.</p>	
Resolved	The Board noted the Chief Executive's overview.	
AGM 1807/2.2	Director of Finance Overview	
	<p>Rhiannon Beckett explained that HEIW must comply fully with the Treasury's Financial Reporting Manual. The Primary Statement of in-year income and expenditure is the Statement of Comprehensive Net Expenditure, which shows the net operating cost incurred by HEIW, which is funded by the Welsh Government. HEIW has an annual requirement to achieve a balanced year-end position against the Resource Limits set for the year.</p>	

	The accounts had been prepared for the accounting period 5/10/2018 to 31/03/2019. This reflected an eighteen month period from when HEIW was established and not its 'go live' date as an operational entity. As HEIW was a shadow organisation for twelve months, expenditure for that period had been accounted for by the hosting organisations and Welsh Government. . The year-end financial position for 2018/19 was a surplus of £68k, with net operating costs for the financial period of £105.650m.	
Resolved	The Board noted the Director of Finance's overview.	
AGM 1807/2.3	To receive and approve the Annual Report for 2018/19	
Resolved	The Board received and approved the Annual Report for 2018/19.	
AGM 1807/2.4	Questions/Discussion	
	<p>Lisa Gostling, Director of Workforce and Organisational Development for Hywel Dda University Health Board was pleased to share the success of the Hywel Dda apprenticeship scheme. She explained that HEIW had given the Health Board practical support which had enabled it to expand the opportunities and successfully launch its Health Care Apprenticeship scheme.</p> <p>The Board heard about the Health Care Apprenticeship programme which was open to applicants of all ages and academic background, and provides an opportunity for an individual to train to become a fully Registered Nurse through work-based learning. The apprenticeship enables an individual to complete a Foundation Apprenticeship in Health Care Support Services (level 2), progress to an Apprenticeship in Clinical Health Care Support (level 3), before embarking on part-time university education, starting at level 4. Positive feedback had also been received during the Apprenticeship Assessment Day regarding the video on the Hywel Dda website of a male nurse talking about his nursing career.</p> <p>Hywel Dda colleagues advised that earlier that day they had offered 26 apprenticeships and that they were hoping to fill a total of 46 places.</p> <p>Stephen Griffiths commented that it was encouraging to see that the apprenticeship programme would provide a significant number of nurses going into the system from 2027 onwards following completion of training.</p> <p>In answer to a question about welsh language training, it was confirmed that the apprentices would receive welsh language training throughout their programme of study.</p> <p>In answer to a question about the success of the programme and the spreading of the process, Lisa Gostling advised that Hywel Dda was keen to share their experiences and learning with others.</p>	

	In terms of the next steps, Lisa Gostling asked for HEIW's support in the development of a learning pathway for Physiotherapy. Stephen Griffiths agreed that HEIW would continue to work with Hywel Dda and would be happy to explore this further.	
PART 3	MEETING CLOSES	
AGM 1807/3.1	Close	
Resolved	There being no further questions, the Chair closed the Annual General Meeting.	

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Chris Jones (Chairman)

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Date:



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**Minutes of the HEIW Public Board Meeting
held on 18 July 2019 at 10:00 am
in the Board Room, Ystwyth Building, Hafan Derwen
St David's Park, Carmarthen, SA31 3BB**

Present:

Dr Chris Jones	Chair
Julie Rogers	Deputy CEO/Director of Workforce and OD
John Hill-Tout	Vice Chair
Tina Donnelly	Independent Member
Dr Ruth Hall	Independent Member
Gill Lewis	Independent Member
Professor Ceri Phillips	Independent Member
Dr Heidi Phillips	Independent Member
Stephen Griffiths	Director of Nursing
Professor Pushpinder Mangat	Medical Director

In attendance:

Dafydd Bebb	Board Secretary
Kay Barrow	Corporate Governance Manager (Secretariat)
Angharad Price	Head of Communications
Huw Owen	Welsh Language Manager
Rhiannon Beckett	Deputy Director of Finance
Charlette Middlemiss	Head of Workforce Modernisation

PART 1	PRELIMINARY MATTERS	Action
1807/1.1	Welcome and Introductions	
	The Chair welcomed everybody to the meeting of the HEIW Board and extended his gratitude to Hywel Dda University Health Board for co-ordinating the hosting arrangements. The Chair informed the Board that Alex Howells, Chief Executive, was on annual leave and that Julie Rogers, Deputy Chief Executive/Director of Workforce and OD would be acting as Chief Executive during her absence.	
1807/1.2	Apologies for Absence	
	It was noted that apologies had been received from Alex Howells (Chief Executive) and Eifion Williams (Interim Director of Finance).	

1807/1.3	Declarations of Interest	
	Julie Rogers declared an interest in agenda item 4.4 which related to a former employee.	
Resolved	The Board noted the Declaration of Interest.	
1807/1.4	HEIW's Impact on Primary Care	
	<p>A presentation by Charlette Middlemiss about HEIW's impact on Primary Care was received.</p> <p>An overview was provided of the work that had been facilitated by HEIW with a number of Health Boards. The focus of the work was on developing solutions to workforce challenges, particularly those that had been highlighted during the Peer Review process undertaken within urgent primary care (out of hours) services during the latter part of 2018. The Peer Review process had helped to emphasise how the role of urgent primary care services was increasingly supporting both urgent and unscheduled care and managing patient demand/flow.</p> <p>Charlette Middlemiss commented that the Peer Review had highlighted some important work that had taken place both locally and nationally over the last two years to enhance these services however, it had also revealed the deteriorating image of urgent primary care as a place to work and for career development.</p> <p>The Board heard about the work of the Task and Finish Group, established following the Peer Review, to take forward a number of critical actions to improve urgent primary care services across NHS Wales. The programme of work taken forward reviewed the workforce challenges within primary care services across Wales and looked at developing sustainable workforce solutions for these services.</p> <p>An overview of a number of workforce and education initiatives to support the development of clinical teams was provided. This included the marketing and recruitment campaign; development of the Urgent Primary Care Practitioner; development of a Clinical Leadership Programme; Urgent Primary Care Multi-Disciplinary Team (MDT) training and pilot; maximising the role of the Health Care Support Worker (HCSW) and the development of a 'Once for Wales' eLearning Training resource to improve the provision of Verification of Death.</p> <p>It was highlighted that the integration between 111, NHS Direct, and urgent primary care services will increasingly offer significant opportunities for wider system resilience and capacity.</p> <p>The Board discussed the presentation and the following points were highlighted:</p> <ul style="list-style-type: none"> • a good example of the added value in the collaborative work of HEIW with Health Board colleagues; 	

	<ul style="list-style-type: none"> the co-ordination, leadership, direction and drive by the HEIW team to facilitate, harness the resource and the engagement with urgent primary care services across NHS Wales; the work of HEIW as an enabler to help shift care closer to home and facilitating enhanced practice. <p>The Board thanked Charlette Middlemiss for her extremely insightful presentation which had highlighted opportunities where HEIW has participated in and also helped facilitate workforce solutions.</p>	
Resolved	<p>The Board:</p> <ul style="list-style-type: none"> agreed that the Urgent Primary Care (Out of Hours) Peer Review Report be shared with Board Members; agreed that the 'Close Down' Report from the Task and Finish Group be shared with Board Members; requested that their thanks be passed to the Team. 	<p>JR</p> <p>JR</p> <p>JR</p>
1807/1.5	To receive and confirm the minutes of the Board held on 30 May 2019	
	The minutes of the meeting held on 30 May 2019 were confirmed as an accurate record.	
1807/1.6	Action Log	
	<p>The Action Log was received.</p> <p>The Board considered the Action Sheet from the meeting held on the 30 May 2019 and the following updates were provided:</p> <ul style="list-style-type: none"> 3005/1.4 Trainee and Trainer Achievements: There was no July meeting of the Junior Doctors Round Table. A new cohort of trainees was due to commence and a programme of Junior Doctor Interest Group sessions was being developed. 	
Resolved	The Board agreed that the list of Junior Doctor Interest Group dates and venues be provided, so that those Board Members interested in attending can be geographically co-ordinated.	PM
	<ul style="list-style-type: none"> 3005/3.1 Update on Optometry – Return on Investment: It was clarified that a meeting had taken place to progress the work in relation to the return on investment methodology and its application to the business case. 	
Resolved	The Board agreed that an update be provided at a future Board meeting.	CP
	<ul style="list-style-type: none"> 3005/4.1 Final Accounts 2018/19: For clarification purposes, the following amendment to the wording of the resolved action - the words 'excluding Independent Members' to be added so that the resolved action reads: 'Pension Benefits of Board Members, excluding Independent Members, from previous non NHS Organisations to be updated, if received prior to the Auditor General signing of the Accounts'. 	
Resolved	The Board agreed that the resolved action be amended accordingly.	KB

	<ul style="list-style-type: none"> • 3005/4.8 Integrated Performance Management Framework: The 'live' reporting to be presented at the August Board Development Session and at the September Board. 	
Resolved	The Board agreed that Performance Management be added to the Agenda for the August Board Development Session.	DB
	<ul style="list-style-type: none"> • 3005/4.10 Update on Policies: The Board noted the update and that the sharing of a schedule of Welsh Government wider policy related documentation with Board members was to be explored. 	
Resolved	The Board agreed that a mechanism for Board Secretary explore an effective way to share a schedule of Welsh Government wider policy related documentation with Board members.	DB
1807/1.7	Matters Arising	
	There were no matters arising from the previous meeting.	
PART 2	CHAIR AND CHIEF EXECUTIVE REPORTS	
1807/2.1	Chair's Report	
	<p>The Chair's report was received.</p> <p>In presenting the report, the Chair commented that over the past two months he had experienced the breadth of the organisation and its key partners during his attendance at meetings and events.</p> <p>The HEIW Roadshow in North Wales had been a good opportunity to meet staff in the work place, and also trainers and trainees across all specialties. The ability to hold meetings and events across the length and breadth of Wales assists HEIW to meld its presence across NHS Wales and with its key partners. He expressed his pride in the way people were working across boundaries seamlessly in an integrated manner.</p> <p>The Chair was pleased to be part of the Annual Review of Competency and Progression (ARCP) process, listening to the experiences of specialist trainees.</p> <p>The Chair explained the creation of 30 fellowship places (15 new starters and 15 leavers) and how it would be an opportunity for Board Members to be involved in the interview process.</p> <p>Tina Donnelly provided an overview of the Librarians Conference that she had attended on behalf of the Chair, and how they perceived that they were an underutilised resource, particularly for research. The Chair commented that he had visited the Velindre Library which was a virtual resource, and demonstrated how Librarians were actively involved on ward rounds and in research.</p> <p>Ruth Hall provided an overview of the Health and Social Care Leadership Event she had attended on behalf of the Chair which had</p>	

	<p>focussed on the implications of Brexit; reflections from Dr Andrew Goodall on the impact of the Transition Fund Projects; discussion session on the Workforce Strategy and progress relating to 'A Healthier Wales'.</p> <p>The Chair highlighted his attendance at the Child Health Seminar which had promoted 'The Right Way: A Children's Rights Approach in Wales'. He explained that HEIW would need to take forward the adoption and promotion of the publication. Tina Donnelly explained that there were links with Local Authorities and the work of the Children's Commissioner, with good examples of the youth working in Rhondda Cynon Taff, Bridgend and Cwm Taf Morgannwg that could be explored for a Board Development Session.</p>	
Resolved	<p>The Board:</p> <ul style="list-style-type: none"> • agreed to invite Librarians to present at a Board Development Session in the autumn. • agreed to share Tina Donnelly's report following her attendance at the Librarians Conference. • agreed to share Ruth Hall's report following her attendance at the Health and Social Care Leadership Event in Llandudno • agreed that the Chair write to the Children's Commissioner to start the process of HEIW adopting, promoting and taking forward the publication 'The Right Way: A Children's Rights Approach in Wales'. • agreed that 'The Right Way: A Children's Rights Approach in Wales' to be a topic for a Board Development Session. 	<p>DB</p> <p>DB</p> <p>DB</p> <p>Chair</p> <p>DB</p>
1807/2.2	Chief Executive's Report	
	<p>The Chief Executive's report was received.</p> <p>In presenting the report, Julie Rogers highlighted the ongoing work in relation to the development of the Workforce Strategy for Health and Care. This was a key deliverable for HEIW as part of the Annual Plan for 2019/20. The consultation document on the Workforce Strategy was expected to be out over the summer period. The Board would have an opportunity to contribute to the consultation at the Board Development Sessions in August and October. The final Workforce Strategy would be presented to the Board at its meeting in November 2019.</p> <p>Julie Rogers advised that HEIW had received its Remit Letter from Welsh Government to be delivered in addition to the commitments and priorities set out in the 2019-20 Annual Plan. The letter set out the expectations in relation to 6 additional areas of work with key partners.</p> <p>Stephen Griffiths updated the Board in relation to the strategic review of health professional education and the associated contracting process. He explained the recent Welsh announcement regarding the</p>	

	<p>Bursary extension for 2020/21 pending an announcement on the longer term position. This has wider implications and risks for HEIW and the contracting timeline as HEIW would now need to move the timescale and, as such, existing contracts would need to be extended for a further year with new contracts to be in place for 2022/23. The Board raised concerns about the delay in terms of the uncertainty with the outcome of the consultation process and the funding model. However, it was confirmed that HEIW would use the additional time available after completion of the KPMG report to further engage and ensure that the recommendations are achievable and measurable.</p> <p>Concerns were raised in relation to the Bursary position and the implications should the Welsh Government decide to stop the NHS Bursary.</p> <p>The Board was encouraged by the feedback from the recent Joint Executive Team Meeting and noted the update on HEIW working with its partners.</p>	
Resolved	The Board noted the report.	
PART 3	STRATEGIC ITEMS	
1807/3.1	NHS Wales Education, Commissioning and Training Plan 2020/21	
	<p>The Board received the NHS Wales Education, Commission and Training Plan for 2020/21.</p> <p>In presenting the report, Stephen Griffiths highlighted that the Plan had been developed based on HEIW's assessment of the workforce training needs. Engagement had taken place with a wide range of key stakeholders and framed as a transitional plan with a new approach taking place for the next year.</p> <p>The Plan had been presented at the All Wales Chief Executives Meeting and the National Executive Board, and had received positive feedback with the suggestion that the approach be framed on not only the cost but also on the benefits evaluation/realisation. The Joint Executive Team had also supported the Plan as a key component to ensure capacity and opportunities for workforce transformation.</p> <p>The Board considered and discussed the Plan. A question was raised in relation to the implementation of new ways of working and changing roles, and the impact on the workforce numbers for each staff group. Stephen Griffiths advised that the assessment of training needs had included a review of the Integrated Medium Term Plans (IMTP) for NHS organisations over the past 3 years. Analysis of those workforce plans had highlighted a rising trend in less than full time working amongst a large proportion of the staff groups. Consequently, the</p>	

	<p>number of trained staff required to fill the equivalent of a full time post would increase.</p> <p>It was highlighted that the draft Plan had also been reviewed by the Education, Commissioning and Quality Committee and had changed since its presentation at the June Board Development Session. There was a change programme that accompanied the transition plan and, it was emphasised that from 2020 onwards, HEIW would need to demonstrate transition/change in future Plans that aligned to the NHS Wales Workforce Strategies.</p> <p>It was confirmed that there was a programme of work around variable pay expenditure related to agency expenditure to backfill service gaps that was being led by the All Wales Directors of Workforce and OD which linked to the National Efficiency Board.</p>	
Resolved	<p>The Board:</p> <ul style="list-style-type: none"> • agreed to recommend to Welsh Government that it considers increasing the education and training places across a range of staff groups as set out in Section 7 of the Plan. • agreed that an update on the work of the National Efficiency Board relating to agency staff to be provided. 	<p>SG</p> <p>JR</p>
PART 4	GOVERNANCE, PERFORMANCE AND ASSURANCE	
1807/4.1	Finance Report	
	<p>The Board received the report.</p> <p>In presenting the report, Rhiannon Beckett provided an update in relation to the month 3 financial position 2019/20 which was year to date underspend of £54.6k. She explained that a deep dive process would be undertaken within the Directorates to better understand the reasons for the variations to the forecasted expenditure and for corrective action to be put into place.</p>	
Resolved	The Board noted the Month 3 financial position.	
1807/4.2	Risk Management Policy	
	<p>The Board received the Policy.</p> <p>In presenting the policy, Dafydd Bebb highlighted that, following the Board's direction in May, the policy had been presented to the Audit and Assurance Committee at its July meeting. He explained that the Committee had asked for the Board to consider its risk appetite, and the degree of risk exposure it was willing to accept in the pursuit of its objectives. The Board acknowledged that there was a need for the Board to convey the level of risk tolerance to the wider organisation.</p> <p>Gill Lewis explained that the Committee had also requested that the Executive Team to review each risk on the Risk Register to provide</p>	

	<p>clarity of impact and how it would be addressed, and also for the page numbering to be corrected.</p> <p>In terms of Risk Management Training, the Board emphasised that whilst risk was the responsibility of everyone, there was a need to ensure that staff were properly trained in order to understand their obligations within the organisation.</p>	
Resolved	<p>The Board:</p> <ul style="list-style-type: none"> • approved the Policy subject to ensuring that the page numbering was corrected and the addition of enhanced content relating to the organisation's risk appetite. • agreed that once amended, the Policy be published on the intranet and disseminated throughout HEIW for full implementation. • agreed that an assessment of Risk Management training needs to be undertaken by the Executive Team and for an update to be provided to the Board either via the Chief Executive's Report or a specific risk update report. 	<p>DB</p> <p>DB</p> <p>DB</p>
1807/4.3	To Receive Key Issue Reports from the:	
1807/4.3.1	<p>Audit and Assurance Committee held on 29 May 2019</p> <p>The Board received the key issues report.</p> <p>In presenting the report, Gill Lewis highlighted that the meeting had mainly focussed on the approval of the Annual Accounts for 2018/19 and the associated reporting. She advised that the Reasonable Assurance received for the Head of Internal Audit Opinion was to be commended.</p> <p>A number of internal audit reports were considered, of which, the workforce review of casual workers had received Limited Assurance and would require a follow up review during 2019/20.</p>	
Resolved	The Board noted the report.	
1807/4.3.2	<p>Audit and Assurance Committee held on 15 July 2019</p> <p>Due to the timing of the Committee meeting and reporting to the Board, this item was deferred to the next Board meeting.</p>	
Resolved	The Board agreed to receive a written report at the next Board meeting.	GL
1807/4.3.3	<p>Education, Commissioning and Quality Committee held on 1 July 2019</p> <p>The Board received the key issues report.</p>	

	<p>In presenting the report, Ruth Hall highlighted that the meeting had considered and discussed the NHS Wales Education, Commissioning and Training Plan 2020/21 in detail.</p> <p>It was confirmed that the Committee had also held a separate Development Session to review the working relationships and reporting arrangements to the Board for the various Committees to ensure that there was no overlap or gaps in the governance model. She explained that a report on Ways of Working would be presented to the August Board Development Session and to the September Board.</p>	
Resolved	The Board noted the report.	
1807/4.4	In-Committee Decisions	
	The Board received the report which provided the key issues discussed 'in committee' at the May and June Board meetings.	
Resolved	The Board noted the report.	
PART 5	OTHER MATTERS	
1807/5.1	Any Other Urgent Business	
	There being no other urgent business for the open session, the Board resolved to move into the closed session.	
1807/5.2	Dates of Next Meetings	
	<p>The dates of the next meetings were confirmed as:</p> <ul style="list-style-type: none"> • HEIW Board Development Session to be held on 29 August 2019 in Ty Dysgu, Nantgarw. • HEIW Board to be held on 26 September 2019 in Ty Dysgu, Nantgarw. 	

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Chris Jones (Chairman)

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Date:

HEIW Board (Open)
18 July 2019
Action Log

(The Action Sheet also includes actions agreed at previous meetings of the Open HEIW Board and are awaiting completion or are timetabled for future consideration for the Committee. These are shaded in the first section. When signed off by the Board these actions will be taken off the rolling action sheet.)

Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
3005/4.10	Update on Policies			
	<ul style="list-style-type: none"> Policy reviews to be scheduled into the Board Forward Programme. 	Board Secretary	End of August 2019	Completed. Forward Work Programme updated.
3005/4.11	Risk Management Policy			
	<ul style="list-style-type: none"> Report Checklist to include ratification process for policies 	Board Secretary	End of August 2019	Completed. Policy approval checklist has been updated to include reference to the ratification process.
3005/4.14	Education, Commissioning and Quality Committee and Board Governance Arrangements			
	<ul style="list-style-type: none"> The Board to further consider the relationship and reporting arrangements to the Board for Committees during the Summer. 	Board Secretary	August 2019	Completed.

Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
1807/1.4	Improvement Story - HEIW's Impact on Primary Care			
	<ul style="list-style-type: none"> Urgent Primary Care (Out of Hours) Peer Review Report to be shared with Board Members 	Director of Workforce & OD	Promptly	Completed.
	<ul style="list-style-type: none"> Share 'Close Down' report from Task and Finish Group with Board Members. 	Director of Workforce & OD	September 2019	Report on Urgent Primary Care (Out of Hours) work is an item on the September Board Agenda.
	<ul style="list-style-type: none"> The thanks of the Board to be passed to the Team. 	Director of Workforce & OD	Promptly	Completed.
1807/1.6	Action Log			
	<ul style="list-style-type: none"> 3005/1.4 Trainee and Trainer Achievements: The list of Junior Doctor Interest Group dates and venues be provided, so that those Board Members interested in attending can be geographically co-ordinated. 	Medical Director	October 2019	Dates are being arranged and will be circulated when finalised.
	<ul style="list-style-type: none"> 3005/3.1 Optometry – Return on Investment: An update to be provided on the methodology, and its application to the business case, at a future Board meeting. 	Ceri Phillips	September 2019	A verbal update will be provided at the September Board meeting.
	<ul style="list-style-type: none"> 3005/4.1 Final Accounts 2018/19: For clarification, amendment to the wording of the resolved action relating to Board Member Pension Benefits ("excluding Independent Board Members"). 	Secretariat	Promptly	Completed

Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
	<ul style="list-style-type: none"> 3005/4.8 Integrated Performance Management Framework: Demonstration of 'Live' Dashboard at the August Board Development Session. 	Director of Workforce and OD	August 2019	Completed.
	<ul style="list-style-type: none"> 3005/4.10 Update on Policies: Explore an effective way to share a schedule of Welsh Government wider policy related documentation with Board members to include, and not be limited to, Ministerial Decisions, Ministerial Letters, Welsh Health Circulars, Policy Reviews/Updates, etc. 	Board Secretary	September 2019	Completed. Item on agenda for September Board.
1807/2.1	Chair's Report			
	<ul style="list-style-type: none"> Invite Librarians to present at a Board Development Session in the Autumn. 	Board Secretary	October 2019	Completed.
	<ul style="list-style-type: none"> Share Tina Donnelly's report following her attendance at the Librarians Conference. 	Board Secretary	Promptly	Completed.
	<ul style="list-style-type: none"> Share Ruth Hall's report following her attendance at the Health and Social Care Leadership Event in Llandudno 	Board Secretary	Promptly	Completed.
	<ul style="list-style-type: none"> Chris Jones to write to the Children's Commissioner to start the process of HEIW adopting, promoting and taking forward the publication 'The Right Way: A Children's Rights Approach in Wales'. 	Chair	End of July 2019	Completed.

Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
	<ul style="list-style-type: none"> The Right Way: A Children's Rights Approach in Wales' to be a topic for a Board Development Session. 	Board Secretary	TBC	Chair and the Executive Team to meet the Children's Commissioner on 4 November. Commissioner to be invited to attend BDS in Q1 of 2020.
1807/2.2	Chief Executive's Report			
	<ul style="list-style-type: none"> The Chair to add the concerns relating to the Bursary position to his Appraisal meeting with the Minister. 	Director of Nursing	30 July 2019	Completed
1807/3.1	NHS Wales Education, Commissioning and Training Plan 2020/21			
	<ul style="list-style-type: none"> HEIW to recommend to Welsh Government that it considers increasing the education and training places across a range of staff groups as set out in Section 7 of the Plan. 	Director of Nursing	Completed	Recommendations submitted to Welsh Government. Comments from Welsh Government expected by the end of September 2019.
	<ul style="list-style-type: none"> An update on the work of the National Efficiency Board relating to variable pay expenditure linked to agency usage to be provided. 	Director of Workforce and OD	October 2019	Briefing to be presented at the October Board Development Session.
1807/4.2	Risk Management Policy			
	<ul style="list-style-type: none"> Board approved the Policy subject to ensuring that the page numbering was corrected and the addition of enhanced content relating to the organisation's risk appetite. 	Board Secretary	End of July 2019	Completed.

Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
	<ul style="list-style-type: none"> Once amended, the Policy to be published on the intranet and disseminated throughout HEIW for full implementation and Board Members informed. 	Board Secretary	September 2019	Completed.
	<ul style="list-style-type: none"> An assessment of Risk Management training needs to be undertaken by the Executive Team. An update to be provided to the Board either via the Chief Executive's Report or a specific risk update report. 	Board Secretary	December 2019	The Board and Senior Leadership Team have received training in respect of risk via an external consultant. Training on risk to remaining staff to be rolled out by the Board Secretary by the end of December 2019.
1807/4.3.2	Key Issues Report from Audit and Assurance Committee held on 15 July 2019.			
	<ul style="list-style-type: none"> Written report to be presented at the next Board Meeting. 	Gill Lewis	September 2019	Completed.

Promptly – within 3 working days.

Chairman's Report September 2019

On the 5th August 2019 I attended the Ministerial meeting with the All Wales NHS Chair and Chief Executives. Wide ranging discussions included:-

- How organisations are embedding Well-being of Future Generations Act to shape the organisations approach and work going forward in the context of A Healthier Wales, and the proposed Quality Bill.
- The work of HEIW and Social Care Wales on the workforce strategy was highlighted as was the Leadership Strategy.

The All Wales NHS Chairs Peer Group Meeting 27/8/19 included the development of a Succession Plan for Boards, discussion and debate on the proposed Quality Bill, an update on Independent Member Induction Programme, and a presentation on the work undertaken reviewing Resource Allocation.

Together with Tina Donnelly I visited the Huggard Centre in Cardiff, a leading centre for rough sleepers and has been in existence for 30 years. Their Day Centre and Hostel at Hansen Street in Cardiff is open every day of the year and over the past 12 months they worked with more than 1,200 people, seeing on average 24 new people every month.

I attended the [Medical Trauma and Resilience Management \(MEDTRiM\) course](#) on the 25th August 2019 here at Ty Dysgu, and led by Dr Mark Stacey. MedTRiM is a pro-active, peer delivered cognitive based resource for supporting those exposed to trauma adapted by Dr Mark Stacey and Andy McCann from the trauma resilience training used by the Military. It is designed to address practical strategies for dealing with a significant catastrophic event, and provided an introduction to a panoply of individual wellbeing skills (the Bakers' Dozen). About 30 delegates attended mostly from the medical profession. I really learnt a lot think that the methodology is very relevant and timely and could well be one of the tools that could help in the compassionate leadership agenda. It was really great to listen to the participants engage and share their personal feelings and experiences.

On the 11th September 2019 I was pleased to attend the Medical Leadership event in Swansea and hear first-hand through presentations and one to one discussions how this is improving and supporting Clinical Leadership across Wales.

In terms of Board Governance, Independent Members reviews and appraisals are underway. I have completed my end of year appraisal with the Minister, and together with Ruth Hall, Gill Lewis and Tina Donnelly I have supported the ongoing work on the Education Commissioning and Quality Sub-Committee.

There have been productive and informative opportunities to meet and engage with external partners across Wales during the last month. Together with John Hill-Tout, I attended the Social Care Conference in Cardiff, and Ruth Hall and I attended the HEIW Roadshow in Llangollen. At both these events it is clear that team HEIW are fully engaged and active, and are building our organisations reputation for strong partnership building.

Items from John Hill-Tout, Vice Chair

Since the last Board, I have attended two meetings of Vice Chairs and the main issues considered have been:-

- ***Primary Care***

Including the delivery milestones for 2019/2020 and Primary Care's contribution to planning for the forthcoming winter. The National Strategic Lead for the Primary Care Strategy reports a close working relationship with HEIW, through our own Primary Care Initiative, on workforce issues.

- ***Mental Health***

Vice Chairs have focussed on the delivery of performance standards for access to services by patients.

- ***Child and Adolescent Mental Health Services***

LHBs are reporting increased demand for these services, together with staff shortages, which are leading to difficulties in meeting performance targets for access to services by children and young people. HEIW has been asked to assist and a paper was discussed at the recent Vice Chairs meeting which set out our plans for assisting in the medium term, including the development of new staffing models.

I also attended, with the Chairman, the excellent National Social Care Conference on 12th September 2019. There were thought provoking presentations from members of the public who use both health and social care services, and the day also included a meeting for Chairs, Vice Chairs, and Chief Executives, organised by the Welsh NHS Confederation, to learn about the innovative social prescribing models offered to patients in Tower Hamlets.

Dr Ruth Hall, Chair of Education Commissioning and Quality Sub Committee

I attended Coleg Llandrillo Celebration Event for the Level 4 Certificate in Higher Education Healthcare Practice programme in Llandudno. The event acknowledges the hard work and achievements of the students and recognises the success of the programme for both students and for Betsi Cadwaladr University Health Board (BCUHB).

An inspiring morning, humbling to see the achievements of these students and how much it meant to them, also a success story for North Wales.

There were positive references to HEIW – recognising our support and encouragement.

Key points:

- Significant variety of different career pathways followed by previous students, so the programme opens a wide field of opportunities; need for aim to keep students locally employed;
- The importance of the quality of the 'product' of these career pathways;
- Mentoring arrangements for clinical and learning aspects strongly valued and need to build/ maintain mentoring capacity;
- Joint working with other professional groups, nursing especially.

I also attended HEIW Stakeholder event in Carmarthen – an enjoyable and informative event. Two key issues I heard frequently were:-

- Protected learning time;
- Greater recognition of education (giving/ receiving) as part of every doctors professional life.

Chairman's Meetings during 15 July – 25 September 2019

Date	Meeting Title
16/07/19	Urgent Primary Care Workforce & Educational Working Group Meeting with Internal Audit
17/07/19	Met with Valley Heads further to meeting with the Deputy Minister for Economy & Transport Visit to Velindre Library for an introduction on the VR situation, the library's role and what's on offer to staff and students. The work being done with students and trainee grade doctors. A demonstration of the palliative care educational videos and the wellbeing apps available ACP meeting at Velindre
18/07/19	HEIW Board Remuneration of Terms of Service Committee HEIW Annual General Meeting
23/07/19	WCPP Public Services Reference Group NHS Wales Chairs Peer Group
24/07/19	Met with Keith Lloyd at Swansea University re Welsh Domiciled/West Wales Students Visit to Swansea Uni re New Simulation Facilities
25/07/19	Resource Allocation Review – Technical Advisory Group MeDTRiM Course
29/07/19	Discussion with Tom Yapp re NHS in Schools
30/07/19	Introductory meeting between CEO & Chairs of HEIW & Board of CHCs Joined the Exec Team at their visit to the Clinical Suite at the University of South Wales
31/07/19	Met with Nik Sheen re Eye Care All Wales IPFR Panel - Chaired
05/08/19	Joint meeting between All Wales Chairs & CEOS Ministerial Meeting with All Wales Chairs & CEOs
06/08/19	Two @ The Top Individual Session WAST Peer Review Follow Up with Richard Bowen and Martin Woodford Chair Appraisal with Minister for Health & Social Services
07/08/19	Visit to Huggard Centre which is Wales' leading centre for rough sleepers and has been in existence for 30 years. Their Day Centre and Hostel at Hansen Street in Cardiff is open every day of the year and over the past 12 months they worked with more than 1,200 people. In fact they are seeing, on average, 24 new people every month.

Date	Meeting Title
	Met with Grace Quantock
13/08/19	Met with Pushpinder Mangat and Keshav Singal re India Recruitment
21/08/19	Met with Keith Lloyd, Swansea University
27/08/19	NHS Wales Chairs Peer Group
28/08/19	All Wales IPFR Panel
29/08/19	Remuneration of Terms of Service Committee
	Board Development Session
02/09/19	Welsh NHS Confederation Management Board
	Health & Social Care Brexit Ministerial Stakeholder Advisory Forum
	Welsh NHS Confed Policy Sub-Group Workshop on National Assembly Elections 2021
09/09/19	Introductory meeting with Darren Hughes, Director of NHS Confed – Chair and CEO
10/09/19	Resource Allocation Review – Technical Advisory Group
11/09/19	Medical Leadership Programme of Service Improvement Work
12/09/19	Social Care Conference – attended afternoon of 11 th and 12 th September
	Chairs & CEO meeting with Sir Sam Everington to learn about the innovative social prescribing models offered to patients in Tower Hamlets
16/09/19	Chair and CEO meeting with Audit Office
17/09/19	NHS Collaborative Leadership Forum
18/09/19	North Wales Stakeholder Event to meet with staff and provide an overview of HEIW's role in supporting health and care in Wales and the workforce strategy for health and social care. An update on education and a summary of the key challenges and priorities of the IMTP.
23/09/19	NHS Chairs Meeting
	NHS Chairs Ministerial Meeting with Vaughan Gething
24/09/19	Cross Party Group chaired by John Griffiths, AM re Building a Better Wales - Lessons from Europe.
25/09/19	Master Class with Margaret Wheatley - one of the world's leading experts on Leadership
	All Wales IPFR Panel - Chaired



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Meeting Date	26 September 2019	Agenda Item	2.2
Report Title	Chief Executive's Report		
Report Author	Alex Howells, Chief Executive		
Report Sponsor	Alex Howells, Chief Executive		
Presented by	Alex Howells		
Freedom of information	Open		
Specific action required	This report is for information only.		

CHIEF EXECUTIVE'S REPORT – SEPTEMBER 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

We will have completed the consultation phase on the strategy by the end of September and have taken the opportunity during this phase of work to continue to raise the profile of the key themes and our suggested priorities with a range of stakeholders across Wales. We are on track to produce a final strategy by November.

Leadership Strategy

A key component of the workforce strategy is the development of a leadership strategy based on a collective and compassionate approach to leadership and culture. Work to develop the strategy, and the tools and resources to deliver this, has been progressing in parallel with the development of the workforce strategy. We have had an overwhelming to the leadership conference which is planned for 21st October. A summary of this work is included in the Board paper which follows later on the agenda.

Integrated Medium Term Plan

We have included an update on the development of the IMTP on the Board agenda. This has been informed by a further workshop involving the extended senior leadership team, where we heard from individual teams about their plans for the next 3 years. This has enabled us to make clearer links with the strategic aims and also between similar programmes of work across the organisation. We are now testing our emerging plans with a range of stakeholders, and this will inform a draft IMTP for the Board Development Session in October.

Integrated Performance Report

Our first integrated performance report is on the agenda. We have discussed the development of the performance framework and performance reporting a number of times at board meetings and board development sessions, and have recognised that this will remain "under construction" during 2019/20. The measures and indicators that are relevant to our organisation are in the main different to those used by other organisations in the NHS, and this includes the frequency of reporting which is often based on academic cycles.

Development of Education and Training Commissioning Plan 20/21

The Education and Training Commissioning Plan was supported by NHS CEOs and the NHS Executive Board, and is now awaiting a decision by the Minister for Health and Social Services.

Post Graduate Medical Training – Expansion of Foundation Phase

One of the papers on the Board agenda today relates to a business case for expanding the number of foundation phase doctors from next year. This is required in order to meet the increased output from medical schools and the increased number of GP trainees. This is another component in the development of a more sustainable medical workforce plan for NHS Wales in the future.

Feedback from HEIW Roadshows 2019

This month we visited Glangwili Hospital in Hywel Da University Health Board and met with 36 members of staff, students and trainees from a variety of professions. A number of very enthusiastic conversations took place mainly on a 1-1 basis with HEIW colleagues rather than as part of the question and answer session. Feedback regarding the roadshow itself was very positive especially that HEIW is making the effort to go out and meet people. Planning is under way for two more roadshows to Powys, and Cardiff and Vale, in November.

Finance

A paper outlining the month 5 position is on the agenda. This has been informed by a “deep dive” by the finance team to understand variances against budgets, and in particular to inform actions regarding in year under spend positions.

Risk Register

The Corporate Risks Register is on the agenda. There are 26 risks on the on the Register. There are currently no red risks, 23 amber risks and three green risks.

4. RECOMMENDATION

The Board is asked to note this report.



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Meeting Date	26 September 2019	Agenda Item	3.1
Report Title	Leadership Development and Succession Planning update		
Report Author	Helen Thomas, Assistant Director of Leadership & Succession		
Report Sponsor	Julie Rogers, Director of Workforce & OD		
Presented by	Julie Rogers, Director of Workforce & OD		
Freedom of Information	Open		
Purpose of the Report	To provide a progress update on the Leadership Development and Succession Planning programmes.		
Key Issues	This paper provides a summary of progress against the leadership and succession planning programmes - objective 6 in the HEIW annual plan 2019/20.		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
	✓		✓
Recommendations	Board Members are asked to: <ul style="list-style-type: none"> Note the progress made to date on the work streams to achieve Objective 6. 		

PROGRESS UPDATE AGAINST: REINVIGORATING LEADERSHIP DEVELOPMENT AND SUCCESSION PLANNING

1. INTRODUCTION

- 1.1. Implementation of 'A Healthier Wales' will be dependent upon excellent leaders who will ensure that the culture of wellbeing, continuous improvement, openness and psychological safety within our workforce and our organisations flourishes. This will require a collective and compassionate approach to leadership that nurtures everyone's capacity to lead, creates a shared purpose and reflects person centred values.
- 1.2. The leadership development approach in Wales is being informed by evidence based research and the engagement of credible experts. It will promote an inclusive, multi-disciplinary approach to leadership development that reflects the lived reality of working with teams. The leadership strategy we will develop with partners will set clear expectations to drive leadership development activity and leadership behaviour across the whole system – nationally and locally, within health and potentially within social care.
- 1.3. Looking at this from a HEIW perspective, our establishment has provided a new focus for this work to be delivered once for Wales, at pace and in line with the ambition to transform our healthcare workforce in Wales. Work began in this key area of transformation in spring 2019, but as noted in the following pages we are not working from a blank page – we have the benefit of previous work, of developments in other nations and significant learning. Objective 6 of the HEIW 2019-20 Annual Plan sets out the initial projects:
 - Developing a leadership strategy for Health & Social Care Wales, in partnership with Social Care Wales and Academi Wales
 - Implementing a succession planning and talent management framework for NHS Wales
 - Mapping the leadership and management resources and identify priority programmes for health and care
 - Implementing a digital leadership portal and alumni network(s)

2. BACKGROUND

- 2.1. A presentation outlining the progress to date and proposed timeline for delivery of the leadership strategy and underpinning project outputs was delivered at the Board Development Session on 27th June 2019. The report confirmed that HEIW had secured agreement from Welsh Government and NHS Wales to embed a collective and compassionate approach into the development of the leadership strategy for Wales and associated projects. This approach, developed and fostered by Professor Michael West, Kings Fund, is already providing the foundations for leadership development in health care across other parts of the United Kingdom and Ireland. Social Care Wales are supportive of a compassionate and collective leadership approach for the development of a leadership strategy for health and care and have undertaken some engagement with the social care sector, primarily in the context of the workforce strategy. A lead Director of Social Services has been nominated to

sit alongside both organisations as a member of the Leadership Steering Group.

2.2. Compassionate leadership at its simplest requires leaders to:

- Attend – give time and listen with fascination
- Understand – find out what and why
- Empathise – care about the other person
- Help – support/take appropriate action

Collective leadership requires a focus on teams, systems and inclusivity. Compassionate and collective approaches are as relevant to clinical leaders as they are to the workforce more generally. Feedback from the engagement stage of developing the national workforce strategy shows there is an appetite from respondents for a collective and compassionate approach to leadership along with a culture that promotes psychological safety, prioritises the health and well-being of the workforce, is inclusive and multi professional. We also know that some of the other NHS Wales organisations are actively engaging with this approach, for example Velindre. But above all, there is clear evidence of the link between these approaches – which focus on the wellbeing of the workforce, as envisaged in the quadruple aim, and the quality of care to patients as well as quality improvement.

2.3. This paper provides a mid-year summary of progress against key milestones, including actions taken to accelerate delivery of workstreams.

3. LEADERSHIP STRATEGY UPDATE

3.1. Establishment of a Leadership Steering Group

An overarching steering group has been established to run parallel to the Joint Workforce Strategy Steering Group. The steering group includes representatives from NHS, Social Care Wales, Welsh Government, Academi Wales and Local Government and was established to:

- Oversee the production of a leadership strategy that delivers systems, change, leadership capability and capacity to deliver 'A Healthier Wales'
- Map the existing leadership and management resources and identify priority programmes for health and care
- Share intelligence on wider sector developments

A governance model is being finalised to ensure effective engagement and communication of decisions and progress.

3.2. Review of existing leadership development

A review of leadership development across NHS Wales was undertaken during May 2019. A similar review will be undertaken by Social Care Wales and completed by December 2019. 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.

One of the programmes within scope of the review is the Medical Leadership programme (MLP). Hitherto run by Academi Wales, for NHS Wales, it transferred to HEIW mid-cohort in April 2019. The current cohort, which comprises individuals from the HEIW Clinical Fellows programme as well as clinicians from around NHS Wales, will complete their programme at the end of this month. During 2019-20, 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. Medical Clinical Fellows have traditionally accessed the Academi Wales programme as part of their fellowship programme; as it is not intended to run the MLP next year alternative arrangements are being sourced to ensure the new cohort have access to appropriate leadership development during the transition.

3.3. Leadership engagement conference

The engagement of key stakeholders is critical to the development and deployment of the leadership strategy. To maximise stakeholder engagement, HEIW is hosting a collective leadership engagement conference on 21st October 2019 in Sophia Gardens, Cardiff.

Andrew Goodall, Chief Executive NHS Wales and Director General for HSS, Welsh Government, will be a keynote speaker at the conference and will set the context for this important work. Professor Michael West will also be delivering a key note speech and will share the evidence base for creating a collective leadership culture across health and social care. Michael will be supported by colleagues from England and Northern Ireland who will share how they approached the implementation of collective leadership across health and social care communities.

300 people have been invited to attend the conference with representation primarily from health, but also inclusive of Social Care Wales, Academi Wales, strategic partners and academic establishments. The conference has been designed to engage the views and ideas of stakeholders through crowd sourcing activities. Networks and squads (task and finish groups) will be established at the conference to ensure a co-productive approach to the leadership strategy and resulting delivery framework. This will be supported by the HEIW Programme Manager for timely delivery and robust governance. Engagement activity with the social care sector has yet to be determined, but will be led by Social Care Wales, with input from HEIW and Academi Wales as appropriate.

3.4. Development of a digital leadership portal

The development of a digital leadership portal that can cross organisational boundaries is a key deliverable for 2019-20. An exercise to explore potential suppliers of both a digital portal and a course booking solution was undertaken by HEIW (June through to August 2019) resulting in the identification of a preferred supplier.

A procurement process has been finalised with contract award for a 12 month pilot anticipated by the end of September 2019. This will enable the following activities to be commenced in October through to March 2020:

- Design and branding of the portal
- Training for key users and development of a user responsibility protocol
- Creation of a leadership content library
- Creation of networks and alumni's to support talent and leadership development pools.

3.5. Develop and host a suite of management development resources

The procurement and development of a digital leadership portal provides an opportunity 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.

A project plan will be developed throughout September 19 in partnership with the Workforce and OD Colleague Experience work stream outlining dependencies and delivery dates.

3.6. Engagement of credible experts and opportunities to maximise UK resources

The Five Nations UK Leadership Network is providing us with access to credible experts and evidence based research, which is essential for the development of our leadership strategy. Additionally, through the network we have been able to secure a range of resources that can be adapted to meet many of our requirements, including open source cultural and leadership tools developed by The Kings Fund (TKF) and NHS England. The network is helping to foster a consistent approach to leadership development across the UK nations and continued sharing of best practice including:

- **Development of a collective leadership assessment tool** – to provide valid testing on whether the leadership strategy is successfully enabling collective leadership cultures across health and social care Wales. It would also enable development of norms for staff groups and teams in NHS Wales so benchmarking could be undertaken.
- **NHS England cultural and leadership tools** - Over 40 open source cultural and leadership products have been developed by TKF and NHS England. HEIW have secured permission to review, adapt, adopt and host the tools for health and social care Wales to enable delivery of the strategy.
- **Collective leadership development for teams**
Team resources have been developed by colleagues in Ireland aimed at developing collective team based working. The materials are intuitive and have been successfully evaluated. Several NHS Wales organisations have expressed an interest in working with HEIW to pilot and test these collective team based tools.

Wales is represented at this network through HEIW and Social Care Wales.

4. SUCCESSION PLANNING AND TALENT MANAGEMENT UPDATE

4.1. Succession planning for NHS Wales Tier 1 and 2 senior leadership roles

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. Resource has been identified to escalate this work stream and progress the following at pace:

- 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. This can build on the work undertaken by NHS Scotland (NES) who already have these well-defined, as well as the work undertaken by Academi Wales. The NHS England Interim People Plan has also highlighted this work as a priority over the next 6 months and so there is an opportunity to use our networks to share and learn from each other.
- Develop a process to identify aspiring talent across NHS Wales
- Develop/commission executive leadership development programme(s)
- Populate talent pool
- Launch development programme (s) & alumni

It is envisaged that the talent pool, alumni and programme will be in place by April 2020.

4.2. Development of a digital talent and succession planning solution

The NHS Wales national succession planning strategy 2017-27 outlined the following process for effectively managing talent and ensuring a pipeline of future senior leaders:

- Step 1 - Identify staffing needs
- Step 2 - Create talent pools
- Step 3 - Identify succession pool candidates
- Step 4 - Develop successor candidates
- Step 5 - Utilise national reporting capability
- Step 6 - Identify candidates for vacancies from talent pools

We have identified the need to secure a digital solution to facilitate the talent management and succession planning arrangements. Following exploration, we secured a free proof of concept (PoC) trial with a provider [Oracle] for their cloud based talent management (TM) solution. The NHS Wales Finance Academy and Cardiff & Vale UHB participated in the trial which involved defining the TM system to reflect their existing processes. This system was successfully demonstrated August 2019 in a mock environment.

Following this demonstration and further support, the next steps will involve:

- Access to the pilot site for further testing
- Site visits to organisations utilising Oracle TM to validate effectiveness and benchmark talent management processes
- Development of an outline business case for a 12 month contract

This approach will enable NHS Wales to develop intelligence and maturity with regard 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.

4.3. Re-establishment of NHS Wales Graduate Leadership Programme

Recruitment to the HEIW Graduate Leadership Programme Manager and Project Support posts will complete in September 2019, with the aim of marketing the programme in spring 2020, opening the programme for applications in September 2020 and successful individuals starting the programme in January 2021. This timeline aligns with the commencement of both the Finance graduate scheme and Academi Wales public sector graduate scheme and will maximise networking and joint learning opportunities. It will also allow the sharing of backroom resources and deliver better value for money. The programme is a key element of the succession planning strategy and will provide a key source of future senior leaders.

4.4. Developing the profession - Workforce & OD Succession Planning

Despite significant work being undertaken over the last three years to develop the workforce and OD profession within NHS Wales, limited progress has been made. This is one of HEIW's core functions and we have an opportunity to progress this project in partnership with HPMA Wales and the workforce & OD community.

A proposal and project plan will be developed throughout the autumn outlining the role and contribution of HEIW in supporting this national work stream.

5. GOVERNANCE AND RISK ISSUES

- 5.1. The programme of work in respect of Objective 6 has been established and will be updated to reflect the priorities or changes to timescales as the programme progresses. The programme is overseen by a Leadership Steering Group, chaired by the HEIW Director of Workforce & OD, and also by the HEIW Executive Team through normal accountability arrangements. The programme milestones are contained in the HEIW performance dashboard, which will be regularly reported to Executive Team and to Board. Social Care Wales are represented on the Leadership Steering Group and co-chair as required.
- 5.2. The risks associated with this programme of work are contained within the programme and regularly reviewed within HEIW.

6. FINANCIAL IMPLICATIONS

- 6.1. There are no financial implications arising from this update. However, additional financial costs are anticipated, specifically with regards to procurement of digital systems and educational resources. HEIW has led on these developments and funding has been set aside from within HEIW's development monies to cover these in 2019-20.
- 6.2. There will need to be investment in this area beyond the current year, both for systems and capacity to deliver this ambitious programme, but also in the case of NHS Wales to re-establish effective, transformative and sustainable leadership development in Wales. Further discussions will be needed in both organisations, as well as jointly with Welsh Government, in relation to future costs and investment proposals. There have been no discussions at this stage about what funding is available to Social Care Wales or, for example, the current levels of investment in leadership development within the social care sector.

7. RECOMMENDATION

All projects are currently progressing to target. Action was required however to expedite the Director and Executive succession planning programme of work for NHS Wales. This included the identification of a WTE resource within HEIW to meet revised timescales.

- 7.1. Board Members are invited to:
 - Note the summary update including the actions taken to ensure delivery against targets

END

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				
N/A				
Financial Implications				
Business cases will be prepared as required when financial implications are known.				
Legal Implications (including equality and diversity assessment)				
N/A				
Staffing Implications				
There is a likelihood that additional resources to support key work streams within this significant agenda will be required. Any additional resources will be submitted through a business case process.				
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)				
The requirement for a new generation of compassionate and engaged leaders able to promote and facilitate effective leadership and team working across boundaries is essential for creating the conditions for continually improving integrated care.				
Reinvigoration of leadership and succession planning for senior leadership roles is a key priority for health.				
Report History	N/A			
Appendices	N/A			



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Cymru (AaGIC)
Health Education and
Improvement Wales (HEIW)

Meeting Date	26 September 2019	Agenda Item	3.2
Report Title	Update on Urgent Primary Care Out of Hours Services		
Report Author	Charlette Middlemiss, Head of Workforce Modernisation		
Report Sponsor	Alex Howells, CEO		
Presented by	Alex Howells, CEO		
Freedom of Information	Open		
Purpose of the Report	To update the Board on work led by HEIW between September 2018 and May 2019 to support the development and delivery of urgent primary care services across NHS Wales.		
Key Issues	<p>Working in partnership with NHS colleagues HEIW chaired a workforce subgroup to progress a series of workforce and education developments to support urgent primary care services between September 2018 and May 2019.</p> <p>This experience has enabled HEIW to start to shape its remit as a systems leader to transform the workforce for a Healthier Wales.</p> <p>The initiatives highlight the benefits resulting from the establishment of HEIW and the opportunity for matrix working to pull together the expertise and good practice from within the legacy organisations.</p> <p>Primary care is a thread running through a number of HEIW's strategic objectives and will need to continue as a priority within HEIW's IMTP.</p>		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
	✓		✓
Recommendations	<p>The Board is asked to:</p> <ul style="list-style-type: none"> note the progress and developments made in supporting urgent primary care services; agree 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. 		

Update on Urgent Primary Care Out of Hours Services

1. INTRODUCTION

Workforce challenges in urgent primary care services have been increasing over recent years and this has a significant impact on the effective operation of the wider unscheduled care system. The establishment of HEIW has provided an opportunity to pull together the expertise and good practice within Wales Deanery, WEDS and WCPPE to help address this service priority.

In July 2018 Andrew Goodall asked Judith Paget to lead work on delivering improvements to the provision of urgent primary care. Judith Paget established a national group to manage this agenda. The workforce issues underpinning all areas of service change were acknowledged as being a key driver for improvement. To support the workforce and educational components, Alex Howells established and chaired a workforce sub-group to support development of clinical teams working in urgent primary care services.

Priorities for the sub-group were set within the wider context of other relevant groups/work streams, for example national work on transformational models and the urgent primary care peer review process.

2. BACKGROUND

- 2.1 The Task and Finish group set the agenda for the programme of work by making certain assumptions about issues impacting currently on urgent primary care services. These included:
 - not currently having a sufficient GP workforce to provide effective and responsive urgent primary care out of hours services;
 - need to build an Multi-Disciplinary Team (MDT) approach, and use prudent principles to ensure GPs are only doing what only they can do and utilise other members of the team for the other work;
 - urgent primary care out of hours services are not always perceived to be a great place to work, and staff across many professional groups may not feel confident about working in this setting.
- 2.2 The Task and Finish group progressed a number of workforce and education initiatives between September 2018 and May 2019, with many of these based on taking a once for Wales approach to existing good practice, both within Wales and beyond.
- 2.3. The work programme was managed by the HEIW modernisation team and the delivery of initiatives was supported by adopting matrix working, which facilitated access to specific expertise and resource from across the wider HEIW team.
- 2.4 HEIW also supported the Peer Review process for urgent out of hours primary care, under the Chairmanship of Dr CDV Jones, with the experience and outcomes from visiting each HB helping to influence developments and priorities.

3. SITUATION

The following is a summary of developments completed by the task and finish group:

Introduction and induction to urgent primary care. This development aimed to attract GPs and the wider professional team into urgent primary care service. A web-based resource and associated marketing campaign was developed and is a communication conduit and a central access point to attract staff who may not have considered working in urgent primary care services previously. The website contains national information and has the flexibility to enable providers to promote their local service opportunities.

A soft launch of this resource was held at the urgent primary care Conference in June 2018. The live web-site and marketing campaign, that complements the Welsh Government's GP Wales recruitment portal, will both be launched in September in readiness for anticipated winter pressures. These resources will be promoted by the Minister for Health and Social care through his social media platform and at the forthcoming national primary care conference.

Competency framework. This resource defines the core and supplementary skills and competencies for each clinical role within urgent primary care and supports career progression and workforce flexibility. HEIW is leading work to develop the underpinning education and qualifications required for each level of practice.

Clinical Leadership programme. A two-day programme was developed and delivered in June with a follow up day in the autumn. 19 representatives from urgent primary care services from across Wales attended the bespoke course with a programme focused on: key themes arising from the peer review, organisational cultures and essential skills for influencing in Healthcare. Evaluation of the course was very positive.

Maximise the role of Health Care Social Worker (HCSW). The pilot in Cardiff and Vale had shown that a broader role for HCSWs would be helpful in ensuring value for money within the service - i.e. combining clinical, reception/admin and driving. It is noted that this model would work well, particularly for home visit and supported by the all Wales Educational Framework for HCSW. A report on the pilot has been produced along with a recommendation that 'Development / implementation of a dual role for the HCSW working within the urgent primary care setting' – highlighting / supporting training opportunities and clarity of role definition.

Behavioural Science Approach to help empower teams in managing risk. ABUHB piloted the 'Care Aims' training with one of their urgent primary care MDTs. The training focussed on MDT clinical decision making in the context of managing clinical risk and provided a powerful platform to facilitate team work. The participants found the course thought-provoking and helped establish improved understanding between team members. The training was received positively and evaluated well.

Training on Verification of Death (VOD). An All Wales group of clinicians completed the development of an eLearning resource to support clinicians in undertaking VOD in any circumstances. This resource is available via ESR and aims to support a change in clinical practice by reducing the need for medical staff

to carry out this clinical function. The resource has been issued to NHS Wales and has the endorsement of WG Professional Policy Leads. Delivering more timely and compassionate care at the end of life for patients and their families is anticipated from this development.

Increasing the role of Community Pharmacy. A pilot of a community pharmacy enhanced service for UTI treatment has commenced in Hywel Dda and Swansea Bay utilising the skills of community pharmacist independent prescribers. In addition, the community pharmacist independent prescribers across Wales are offering the Common Ailments plus services. The NWIS work plan for development of Choose Pharmacy platform includes the scoping of an approved process for pharmacy technicians to access the platform and provide enhanced services as appropriate.

Close-down report. The workforce sub group produced a close-down report for the national urgent primary care group and was stood down in May 2018. The clinical leads in urgent primary care, many of whom were members of the sub group, have established a workforce and education clinical group to progress other initiatives to further improve the provision of urgent primary care across Wales. HEIW are continuing to support this work.

4. NEXT STEPS

Primary care is a thread running through a number of HEIW's strategic objectives. As a systems leader HEIW are adopting a two-pronged approach to support the primary care agenda in Wales. Nationally HEIW is managing the workforce and OD work stream of the All Wales primary care strategic programme; at a local level, in line with the operational plan for 2019/20, an internal work stream chaired by the CEO has adopted a matrix working approach involving key directorates. Whilst work is progressing at pace this agenda will need to continue as a priority within HEIW's IMTP fulfilling our remit for transforming the workforce for a Healthier Wales.

5. RECOMMENDATION

4.1 The Board is asked to:

- note the progress and developments made in supporting urgent primary care services;
- agree 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.

Governance and Assurance				
Link to corporate objectives <i>(please ✓)</i>	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				
N/A				
Financial Implications				
n/a				
Legal Implications (including equality and diversity assessment)				
N/A				
Staffing Implications				
N/A				
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)				
Report History	N/A			
Appendices	none			



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Cymru (AaGIC)
Health Education and
Improvement Wales (HEIW)

Meeting Date	26 September 2019	Agenda Item	3.3
Report Title	HEIW IMTP Development Update		
Report Author	Chris Payne		
Report Sponsor	Julie Rogers		
Presented by	Julie Rogers		
Freedom of Information	Open		
Purpose of the Report	To provide the Board with details of the work undertaken to date and planned over the coming months, to support the development, approval and submission of the first HEIW IMTP for 2020-2023.		
Key Issues	<ul style="list-style-type: none"> • Timescale to achieve IMTP completion. • Appropriate engagement with stakeholders and partners 		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
			✓
Recommendations	Members are asked to: <ul style="list-style-type: none"> • Note the progress undertaken to date and planned work to ensure delivery of the IMTP by the end of December 2019 		

HEIW IMTP Development Update

1. INTRODUCTION

This paper provides the Board with details of the work undertaken to date and planned in relation to the development, approval and submission of the first Integrated Medium term plan for HEIW.

2. BACKGROUND

HEIW has an approved Annual Plan for 2019-20, but is required to develop an IMTP for 2020-2023 in line with the NHS Planning cycle. Given the unique role of HEIW in both supporting and influencing workforce plans and developments across NHS Wales, engagement with other NHS organisations is critical. We have therefore actively commenced engagement with our NHS partners at both a planning and executive level with a view to ensuring as far as possible alignment and interface with LHB and Trust IMTPs.

This paper provides an update on progress against the indicative timescale previously approved (attached), and highlights key future engagement events which will further enhance the plan development.

3. GOVERNANCE AND RISK ISSUES

As a relatively new organisation the planning process in HEIW is still evolving, and staff across the organisation are becoming more familiar with the NHS planning cycle and approach. We can positively report that there are no governance and risk issues arising at this stage. The development of the plan is proceeding to target and in line with the milestones we laid out previously, although timescales remain tight. At the time of writing, progress is as follows:

Information and analysis

During June, we collected information to inform the planning process, highlighting the opportunities and challenges through a PESTLE analysis. This included a desktop analysis of Health Board and Trust IMTPs and plans, Welsh Government policies and national strategic workforce plans.

Priority Setting & Strategic Aims

In July, we held an internal planning workshop with an extended senior leadership team to test the analysis undertaken, to review the current strategic objectives and to seek suggestions for future activities, as well as outline ideas for priorities over the next three years. Following a range of staff interactions at directorate and senior management level, and learning from our first year, we are proposing the following revised strategic aims:

Proposed Strategic Aims 2020-2023

1. **Sustainable Workforce** - to lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of A Healthier Wales.
2. **Excellent Education & Training** - to improve the quality and accessibility of education and training for all health care staff to support implementation of A Healthier Wales
3. **Capacity & Capability to Lead** - to lead the development of system leadership capacity through a culture of compassion and a purposeful approach to succession and talent management.

4. **Supporting Quality & Safety** - to lead transformation and modernisation of the multi-professional health care workforce in line with national priorities.
5. To be an excellent employer and a great place to work.
6. To be recognised as an excellent partner, influencer and leader.

Priority Shaping and Drafting

During September, the Planning Team will be starting to shape the priorities and deliverables that will support implementation of the revised strategic objectives, taking account of Welsh Government guidance on the IMTP Framework in September.

On the 12th September, a Senior Leadership away day was held which focused on the opportunities available across the organisation to support achieving our strategic aims. This process identified a number of key themes which we will further define and develop into key projects and programmes. These will form the main element of our IMTP. These themes are contained in the presentation at annex 1.

On the 18 September 2019, a HEIW stakeholder event was held in North Wales in Llangollen Pavilion during which time was spent on testing and sharing our initial proposals and thoughts on actions to be included in our IMTP. A further event will take place on the 9 October 2019 in South Wales in Cardiff City Football Stadium – a significant part of the event will again be dedicated to shaping the HEIW draft IMTP, and we are encouraging a wide cross section of senior staff to attend to enable valuable dialogue on our proposed aims.

On 25th September 2019, the Planning Team will work with the Executive Team over a half day to refine the proposals and themes gathered from all of the engagement events. Feedback will be provided to the senior leadership teams to enable them to develop the selected proposals further, including where appropriate identifying costings and benefits. This further work will provide a robust platform to begin the drafting of the IMTP in October.

Welsh Government Engagement

From September, monthly engagement meetings are diarised with Welsh Government to provide an opportunity to discuss IMTP development and progress, and also to provide an opportunity to consider areas of plan alignment.

Draft Plan

By the end of October the first draft plan will be developed to include finance, workforce and digital requirements. This will be submitted to Board for consideration on 28th November. The final IMTP will be presented for approval at December Board, prior to submission to Welsh Government in January 2020.

4. FINANCIAL IMPLICATIONS

The development of the Integrated Medium Term Plan is being supported through existing resources. The financial implications of emerging proposals will be assessed and reviewed as part of the IMTP development process.

5. RECOMMENDATION

It is recommended that the Board:

- Note the progress undertaken to date and planned work to ensure delivery of the IMTP by the end of December 2019.

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				
N/A				
Financial Implications				
There are no financial implications for Executives to consider/approve at this stage.				
Legal Implications (including equality and diversity assessment)				
N/A				
Staffing Implications				
N/A				
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)				
Key policies impacting on HEIW will be taken account of throughout our IMTP				
Report History	26 th June 2019 – Board Development Session (HEIW) 18 th July 2019 – Public Board Meeting (Hywel Dda)			
Appendices	Appendix A – IMTP Delivery timetable			



HEIW Integrated Medium Term Plan
(IMTP) 2020-23
Introduction
18th September 2019

Strategic Objectives – 2019/20

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

2. Building a sustainable and flexible health and care workforce for the future.

3. With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.

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

5. Improving opportunities for use of technology and digitalisation in the delivery of education and care.

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

7. Demonstrating value from investment in the workforce and the organisation.

2019-20 Annual Plan

What are we doing?

- ❖ Developing a workforce strategy with Social Care
- ❖ Implementing a new model for Pre-Registration pharmacists
- ❖ Strategic review of Education commissioning
- ❖ Developing joint Health & Social Care induction framework
- ❖ Developing a Leadership Strategy
- ❖ Developing Plans for Global engagement
- ❖ Reviewing implications of Topol for Education & Training
- ❖ Reviewing our approaches to working in a Multi-professional way
- ❖ Influencing the Welsh & National agenda - Building relations
- ❖ Enhancing wellbeing

IMTP Development 2020-23

- Building on our Annual Plan
- Aligning HEIW with other members of NHS Family
- Development of 3 year Plan – Implications longer than that!
- How do we achieve our vision – ‘Transforming the workforce for a healthier Wales’
- Approval by Board – December 2019, submission to Welsh Government – January 2020

Proposed Strategic Aims 2020-23



Future Workforce, Education & Training

– Thoughts for consideration

- ❖ How do we influence an approach to flexible, multiple careers?
- ❖ How do we help assess and create capacity in community settings?
- ❖ Peak mortality – 2044 – Are we and how do we consider the impending workforce implications?
- ❖ How can we make better use of technology in Education & training?
- ❖ What digital capabilities exist in the current workforce?
 - What are the gaps?

Future Workforce, Education & Training – Thoughts for consideration

The big issues – Cancer, stroke mental health

❖ Cancer

- ❖ Increasing demand expected – How do we ensure the workforce is fit for the increasing demands

❖ Stroke & Cardiology

- ❖ What education & training is required to aid prevention and make best use of different interventions available

❖ Mental Health

- ❖ Increasing demand – Do we have the workforce to support?
- ❖ What changes are needed to education & training to support this?

PESTLE Analysis

Political	Economic	Social
Government policies beneficial/detrimental to HEIWs success. Is the political environment stable or likely to change?	Economic factors that will impact on us moving forward. Is current economic performance affecting HEIW? Any impact on our revenue/cost?	How does human behaviour or cultural trends play a role in HEIW?
<ul style="list-style-type: none"> •Welsh Government Policy Healthier Wales Transformation Fund (Welsh Elections May 2021) •Well-being of Future Generations (Wales) Act •Nurse Staffing Levels (Wales) Act 2016 •Social Services and Well-being (Wales) Act 2014 •A Healthier Wales & Prudent Health Care •Political Stability; UK exit from the EU (Brexit), Prime Minister, UK Election (Potential) •National move to integrated care (Social Care & Health Care) •HEE/NES 	<ul style="list-style-type: none"> •Economic trend; uncertainty caused by BREXIT •Prosperity for all; economic action plan prudent health care •Nursing bursaries extended in Wales until 2020/21 •Contractual changes impact on workforce T&Cs •Incentives for rewards and recognition •Legacy A4C on NHS job roles/descriptions when dealing with modernisation •Contractual requirements for primary care private organisations providing NHS services 	<ul style="list-style-type: none"> •Population growth and aging population; pressures on service •More flexible approaches to suit work-life balance •Millennial generation •Lifestyle trends •Brexit: Immigration/Emigration •Digital literacy amongst different age groups •Succession Planning •Education and training as an attractive and valued part of supporting NHS service delivery •Pace of transformational change against a background of increasing workload
Technological	Legal	Environmental
What innovations & technological advancements are available or on the horizon? How will this affect our operations?	What regulation & laws apply to our business, do they help or hinder HEIW? Do we understand the laws across HEIW?	What are the effects of our geographic location? Are we prepared for future environment targets?
<ul style="list-style-type: none"> •TOPOL Review; harness new technology, new medicine and new ways of working •NHS access to technology (AI, Genomics, digital medicine, robotics) •Technology & Comms Infrastructure, change roles & functions of clinical staff •Digital solutions to analyse data, improve intelligence •Emerging technologies and impact on education and training •Automation •Simulation – VR •Research and Innovation 	<ul style="list-style-type: none"> •Well-being of Future Generations (Wales) Act 2015 •Nurse Staffing Levels (Wales) Act 2016 •Social Services and Well-being (Wales) Act 2014 •A Healthier Wales & Prudent Health Care •Education Standards Regulations & Laws (NMC, GMC, GDC, GOC, HCPC, GPhC) •Future changes to immigration law •Workforce terms & conditions – Change of Junior Doctor contract •Equality Act •Welsh Language Standards •Health and Social Care (Quality and Engagement) (Wales) Bill 	<ul style="list-style-type: none"> •Carbon footprint; minimising travel by using skype, car sharing, public transport, bike scheme •Climate Change; implementation of heating policy •Reduce utilities; efficient electrical items, water consumption (deregulation of water industry) •Recycling & Waste management policies; reduce bins, recycle paper, plastic, etc. •Introduction of ofgem DCP228 will mean a rise in energy costs



1.To Develop a Sustainable workforce

- Implementing the Workforce Strategy
- Developing a whole system approach to workforce data, analytics, intelligence and modelling
- Leading and supporting national priority workforce plans
- Developing flexible and agile career pathways for future role development
- Establishing a centre of excellence for workforce professional development
- Aligning approach to CPD provision across professions
- Developing a wellbeing strategy for trainees and students
- Working with partners to develop a National Joint careers service

2. Excellent Education & Training (1)

Improving Education Infrastructure

- Developing a simulation strategy for multi-professional education
- Professionalisation of training
- Enhancing digital capability within the system to boost education delivery
- Reviewing clinical placement capacity across system
- Supporting development of primary and community training capacity (? Academies)
- Supporting and develop new approaches to SIFT

Implementing new contracts for health professional education to reflect changes including:

- Inter professional education
- Digital skills and capability
- Welsh Language

2. Excellent Education & Training (2)

- Implementing matrix working approaches to Quality Management of education and training
- Improving employment arrangements for trainees e.g. single employer models
- Embedding a recognition framework to enable prior learning and experience to be recognised
- Widening access to education pathways including apprenticeship opportunities
- Implementing a global engagement strategy and develop reciprocal arrangements with overseas countries
- Ensuring SAS doctors have equitable access to education & training

3. Developing Capacity & Capability to Lead

- Implementing our Leadership strategy and delivery framework
- Implementing our NHS succession planning strategy for senior posts
- Investing in the development of a Digital Leadership portal
- Establishing a Leadership Alumni and networks
- Refocusing a multi professional all Wales clinical leadership programme
- Implementing a Graduate scheme
- Launching Executive Leadership programme

4. Supporting Service Quality & Safety

- Coordinating plans for addressing key shortages in professional and occupational groups
- Aligning CPD offer with NHS priorities

Supporting key service priorities including:

- Cancer workforce
- Unscheduled Care
- Primary and community services
- Prevention and Promotion
- Embedding quality improvement skills and capacity in the workforce
- Enhancing the digital capacity and skills within the workforce to levels required to support the role
- Supporting cross professional appraisal and revalidation including multi-source feedback

5. To be an excellent employer and a great place to work

- Implementing our People & OD strategy
- Enhancing health & wellbeing standards of HEIW
- Developing our internal digital capability
- Embracing the Welsh Language and equalities
- Implementing matrix working opportunities and realising the benefits

6. Trusted Partner & System Leader

- Continuing to implement & embed our Communication & Engagement Strategy
 - Segmented approach to key audiences
 - Develop and enhance the HEIW Brand
 - Continue to develop peer networks
 - Roadshows and information updates
 - Utilise technology to support evolving roles and functions
- Embedding Research & Evaluation in our approaches and publishing results

Questions

From a North Wales perspective.....

- What are the opportunities and threats that HEIW needs to be cognisant of and reflect in our planning?
- From a service perspective where should HEIW be focusing its attention on in relation to workforce education & training?
- How can we make better use of technology in education & training?
- What areas should HEIW focus on when it develops Digital capability competencies?
- How can we make better use of simulation facilities and training across multiple training pathways?
- Are we missing anything?



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Cymru (AaGIC)
Health Education and
Improvement Wales (HEIW)

Meeting Date	26 September 2019	Agenda Item	3.4
Report Title	Post Graduate Medical Education – A case for expanding and reforming the Foundation Training Programme for Wales		
Report Author	Dr Tom Lawson/Dr Helen Baker		
Report Sponsor	Professor Pushpinder Mangat		
Presented by	Professor Pushpinder Mangat		
Freedom of Information	Open		
Purpose of the Report	<ul style="list-style-type: none"> To approve a business case for expanding and reforming Foundation phase training. 		
Key Issues	<ul style="list-style-type: none"> Developing a sustainable medical workforce is a critical foundation for a sustainable health and care system in Wales. Current vacancies and deficits in the medical workforce at all levels in front line services can have an adverse impact on quality, safety, staff experience and cost. The education and training pipeline makes a significant contribution to this and needs to be aligned, as far as possible, across the undergraduate and postgraduate pathways. The complexity of these pathways require a more strategic and coherent approach to medical workforce planning in the future, but in the short term there are some critical issues that need to be resolved. Recent increases in medical student numbers and in Specialty and General Practice placements in Wales are positive steps towards a more sustainable approach. The next critical step is to create a better alignment with these increases at Foundation stage as explored by the attached business case 		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
			Approval ✓
Recommendations	Members are asked to: <ul style="list-style-type: none"> Approve 		

Post Graduate Medical Education – A case for expanding and reforming the Foundation Training Programme for Wales

1. INTRODUCTION

The Foundation Programme is the platform for entry into further postgraduate medical training after undergraduate education. It is a two year Programme aimed at providing doctors with the required skills and experience to gain Full Registration with the GMC at the end of Year 1. In Year 2 they develop generic skills and manage the acutely ill patient before choosing to progress their careers at the end of Year 2.

After completing the Foundation Programme doctors can then apply for a Specialty Training Programme in Secondary Care or General Practice either on a core or run through programme - these programmes vary in length from 2 years for core/basic training in the Surgical specialties to 8 years for a run-through Paediatric programme leading to the Certificate of Completion of Training (CCT).

There is evidence that experience in Foundation training posts can influence future career choice, and thereby is a key component of the training pipeline. Foundation post numbers, location and specialty are therefore crucial in developing a sustainable medical workforce strategy.

The attached business case provides recommendations, based on a review of the number of Foundation posts in Wales, as to how an expansion in post numbers could support HEIW's strategy to increase recruitment to priority specialties and localities. This will help provide Wales with a more sustainable platform on which to develop its medical workforce, which is pivotal to establishing a sustainable multi-professional service.

2. BACKGROUND

The following highlights the current and future opportunities to align the different stages of the medical education and training pipeline more effectively.

The number of Foundation posts needed to meet Medical School Graduate output

- In 2019 Wales advertised 339 FY1 posts, and in this year, 424 Medical School graduates placed Wales as their first or second choice to undertake Foundation level training.
- In 2019 all 339 FY1 posts were appointed to, which indicates that there is every likelihood that more Foundation Doctors could have been appointed to Wales if additional posts were available.
- In 2019, Welsh Medical Schools trained 359 students through to Graduation and 97 students of other UK Medical Schools placed Wales as their first choice for F1 training. This number is greater than the 339 Foundation posts available in Wales.
- The number of Medical School placements has been increased by 1500 in England, an increase of over 22%.

- WG has already increased Medical School Placements by 40 and it is recognised that this number needs to increase further to meet demand. As a result of the initial increase, 417 doctors are expected to graduate in 2023.

The number of Foundation Posts indicated as required through benchmarking with the other Home Countries ratios.

- Wales has the lowest number of Foundation level 1 posts of all the Home Nations, as a proportion of each county's population.
- The current Welsh Foundation rate is 143 Foundation posts below the current Scottish ratio and 79 posts below the current Northern Ireland ratio.

The number of Foundation posts required to feed the number of GP and Specialist training posts

- The number of Specialist and GP posts offered in Wales in 2019 was 430, which is 91 above the 339 number of Foundation posts available. Given Foundation level training is a prerequisite requirement for further training, the shortfall in Foundation level posts must be hampering the recruitment into GP and Specialist training posts.
- In 2018, across all areas of recruitment to GP and Specialist training posts in Wales, fill rates reached 80% with a shortfall of some 20%; which resulted in approximately 80 unfilled posts.

The increase in Foundation Posts required to meet the expansion of GP and Specialist training posts in Wales in the near future.

- Over the next 3 years the GP Training programme will ideally expand to 200 places, an additional 40 posts. Furthermore some 35 to 40 additional Specialist training programmes posts will be established in Wales. These additional 75-80 posts, if recruited to from Wales/UK, will require applicants that will have had to complete their Foundation level training.
- With these increases to General Practice training placements and projected increases for secondary care training, 483 GP and Specialist training posts are projected to be advertised for August 2020 which is 144 posts above the current FY2 output.

Consequently it is suggested that there are a variety of drivers for increasing the number of Foundation phase doctors in Wales, to maximise the opportunities from increases in other parts of the training pathway. The business case explores the advantages and disadvantages of 4 options and has identified that a phased increase of 111 trainees over a 5 year period would be the preferred approach.

The business case has been shared with Welsh Government colleagues to facilitate early discussion about these options and to support an early decision to inform recruitment to the programme from August 2020.

3. GOVERNANCE AND RISK ISSUES

It is acknowledged that there will always be uncertainty around year on year application numbers to foundation training in Wales as well as the rest of the UK, driven by variability in both medical school outputs and applications from EEA and overseas candidates. For the 2019 intake all of the Welsh Foundation posts were fully

recruited to, Wales could not offer any posts to overseas doctors who could have been recruited to Wales had the posts been available; we therefore missed an opportunity to increase our intake which could be maximised through these proposals.

This ambitious programme of expansion will be developed alongside initiatives developed by the Medical Schools in Wales to align and maximise opportunities through their innovative programmes such as the CARER longitudinal programme. We also look forward to working closely with WG colleagues to review the number of medical school places in light of our work on the workforce strategy.

An equality impact assessment has been considered with no adverse impact for individuals with protected characteristics identified.

4. FINANCIAL IMPLICATIONS

The following table details the cost implications for each of the options considered within the business case.

Option	Cost
1 – Maintain Status Quo	£0
2 – Alignment to Planned Medical School output	£6,818,706 Full year recurring from August 2025 onwards
3 – Alignment to Specialty Training and GP posts	£12,572,094 Full year recurring from August 2025 onwards
4 – Mid way between Option 2 and 3	£9,695,400 Full year recurring from August 2025 onwards

5. RECOMMENDATION

The Board is asked:

- To consider the business case
- To approve the preferred option, subject to feedback and discussions with Welsh Government

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

A phased implementation programme as detailed within the attached document with advanced planning allows for the creation of high quality placements and rotations aligned with the direction of travel for more community based opportunities as outlined in 'A Healthier Wales' and 'Shape of Training' reports.

All placements, in line with HEIW's Quality Management Framework and GMC requirements, will continue to be monitored to ensure no patient safety implications.

Financial Implications

Funding required to deliver this project is not available within the current HEIW funding envelope and additional funding is required from Welsh Government to support this over 6 financial years as detailed below:

TOTAL Annual Funding Requirement for Option 4		
Aug 2020 intake	Cost Financial Year 1 2020/2021	£803,439
Aug 2021 intake	Cost Financial Year 2 2021/2022	£3,007,562
August 2022 intake	Cost Financial Year 3 2022/2023	£5,289,433
August 2023 intake	Cost Financial Year 4 2023/2024	£7,750,731
Aug 2024 intake	Cost Financial Year 5 2024/2025	£9,513,456
Aug 2025 intake	Cost Financial Year 6 2025/2026	£9,695,400

Legal Implications (including equality and diversity assessment)

An equality impact assessment has been considered with no adverse impact for individuals with protected characteristics identified.

Staffing Implications

There are no anticipated staffing implications.

Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)	
Retention of graduates from Welsh medical schools through Foundation and Specialty training will support the delivery of a prosperous Wales in line with the Well-being of future Generations Act.	
Report History	HEIW Executive Leads Group
Appendices	Appendix 1 – Business Case



Title of Business Case:	Post Graduate Medical Education – A case for expanding and reforming the Foundation Training Programme for Wales
Submitted to Welsh Government by:	Dr Tom Lawson
Senior Executive Sponsor:	Professor Pushpinder Mangat
Document Author:	Dr Helen Baker
Date:	10 th June 2019

1. Executive Summary

Developing a sustainable medical workforce is a critical foundation for a sustainable health and care system in Wales. The education and training pipeline makes a significant contribution to this and needs to be aligned, as far as possible, across the undergraduate and postgraduate pathways. Recent increases in medical student numbers and in Specialty and General Practice placements in Wales are positive steps towards a more sustainable approach. However, in order to maximise the opportunities from these increases there is a need to expand Foundation Programme posts..

This proposal provides recommendations based on a review of the number of Foundation posts in Wales, and includes recommendations as to how an expansion in post numbers could support HEIW's strategy to increase recruitment to priority specialties and localities. This will help provide Wales with a more sustainable platform on which to develop its medical workforce, which is pivotal to establishing a sustainable multi-professional service. This strategy should be considered alongside further increases in medical student places in Wales, which given current competition ratios would be filled.

This report recommends Option 4 as the preferred way forward. This option recommends a start from August 2020 onward which would see the number of Foundation Programme placements rise from the current 339 FY1 and 339 FY2 posts to 450 FY1 posts by August 2023 and 450 FY2 posts by August 2024.

2. Background of proposal

Upon graduation from Medical School, newly qualified doctors enter a two-year Foundation Programme aimed at providing doctors with the required skills and experience to gain Full registration with the GMC at the end of Year 1 and developing generic skills and managing the acutely ill patient before choosing to specialise in one of a number of areas at the end of Year 2.

After completing the Foundation Programme doctors can then apply for a Specialty Training Programme in secondary care or General Practice either on a Core or run through programme - these programmes vary in length from 2 years for core/basic training in the Surgical specialties to 8 years for a run-through Paediatric programme leading to the Certificate of Completion of Training (CCT).

As the Foundation Programme is the platform for entry into further training, there is evidence that experience in these training posts can influence future career choice, and thereby is a key component of the training pipeline. Foundation post numbers, location and specialty are therefore crucial in developing a sustainable medical workforce strategy.

The case for change

1. The number of Foundation posts needed to meet Medical School Graduate output

- a. In 2019 Wales advertised 339 FY1 posts, and in this year, 424 Medical School graduates placed Wales as their first or second choice to undertake Foundation level training. This is **85** students above the number of FY1 posts advertised. A further 186 graduates placed Wales as their third choice. This suggests that Wales currently has greater capacity to recruit FY1 doctors to meet service and training needs, and that's before the projected increase in medical school output occurs.
- b. In 2019 all 339 FY1 posts were appointed to, which indicates that there is every likelihood that more Foundation Doctors could have been appointed to Wales if additional posts were available. Furthermore, given that all of the Welsh Foundation posts were fully recruited to, Wales could not offer any posts to overseas doctors who could have been recruited to Wales had more posts been available and we have therefore missed an opportunity to increase our intake.
- c. In the past, the UK Foundation programme has been undersubscribed, but that has now changed and Foundation training was oversubscribed in August 2019. To address the oversubscription HEIW, with Welsh Government support, has created 6 new FY1 posts to accept graduates from Cardiff and Swansea medical schools who, due to the oversubscription, were not allocated a Foundation post in the UK. These posts have had to be developed at short notice which carries significant risks around quality management.
- d. In 2019, Welsh Medical Schools trained 359 students through to Graduation and 97 students of other UK Medical Schools placed Wales as their first choice for F1 training. This number is greater than the 339 Foundation posts available in Wales.
- e. The number of Medical School placements has been increased by 1500 in England, an increase of over 22%. England have indicated that they will increase their number of Foundation level posts to match the increase in Students numbers. Therefore, if Wales increased at a similar rate, approximately 460 medical student places would be required; an increase of approximately **85** students (40 of which have already been created). This would require a similar number of increased Foundation posts if the shortfall in Foundation posts is not to worsen.
- f. WG has already increased Medical School Placements by 40 and it is recognised that this number needs to increase further to meet demand. As a result of the initial increase, 417 doctors are expected to graduate in 2023. If

FY1 posts were to increase to match this output a further **78** posts would be required. In the event that Wales does not increase its training posts to match this increase, it is likely that Welsh graduates will move to other nations of the UK to undertake their Foundation Training which may significantly impact on recruitment and retention at a Specialty level. Given the increasing number of Welsh Students being accepted to Welsh Medical Schools, it is possible that pressure will grow in that more graduates will want to undertake their Foundation training in Wales.

2. The number of Foundation Posts indicated as required through benchmarking with the other Home Countries ratios.

- a. Wales has the lowest number of Foundation level 1 posts of all the Home Nations, as a proportion of each county's population.
- b. Whilst the 339 Welsh Foundation Posts is only 5 posts below the current ratio for England, it would be some **90** posts below the English ratio if they fully implement their increase of 1500 posts mentioned in bullet point 1e above.
- c. The current Welsh Foundation rate is **143** Foundation posts below the current Scottish ratio and **79** posts below the current Northern Ireland ratio. The deficits when compared to Scotland and Northern Ireland would increase substantially if both of these countries match the English NHS indicated increase of a further 1500 Foundation level posts to be recruited in the near future.

3. The number of Foundation posts required to feed the number of GP and Specialist training posts

- a. The number of Specialist and GP posts offered in Wales in 2019 was **430**, which is **91** above the 339 number of Foundation posts available. Given Foundation level training is a prerequisite requirement for further training, the shortfall in Foundation level posts must hamper the recruitment into GP and Specialist training posts.
- b. In 2018, across all areas of recruitment to GP and Specialist training posts in Wales, fill rates reached 80% with a shortfall of some 20%; which resulted in approximately **80** unfilled posts.
- c. A cohort study of trainees in Wales carried out in 2017 demonstrated that of the trainees recruited to Core training programmes 65% were retained in Wales upon completion with 48% immediately taking up higher training posts and 17% taking on Service roles.

4. The increase in Foundation Posts required to meet the expansion of GP and Specialist training posts in Wales in the near future.

- a. Over the next 3 years the GP Training programme will ideally expand to 200 places, an additional 40 posts. Furthermore some 35 to 40 additional Specialist training programmes posts will be established in Wales. These additional **75-80** posts, if recruited to from Wales/UK, will require applicants that will have had to complete their Foundation level training.
- b. With these increases to General Practice training placements and projected increases for secondary care training, **483** GP and Specialist training posts are projected to be advertised for August 2020 which is **144** posts above the current FY2 output.

From the above, it is evident there is a shortfall in the current number of Foundation Posts available in Wales for Medical Graduates who have indicated that they would wish to train in Wales and also a shortfall against the number required to feed the current GP and Specialist training posts available in Wales. Furthermore, given the planned expansion underway in Medical Student Graduates in Wales and in the UK and the planned expansion of GP and Specialist training posts, there is a need to increase Foundation posts beyond the current shortfall in order to establish a coherent and coordinated training pathway for Doctors in training in Wales.

We recognise that Wales will not be wholly self-sufficient and will need to continue to attract trainee doctors from other UK, EEA and overseas countries, however we recommend, through this paper, that the mismatch demonstrated above between training post numbers is reduced as far as possible and that the Foundation Programme (and increasing medical student places) is a key component on which this strategy should be based.

3. Strategic Priorities aligned to HEIW

The expansion of the Foundation Programme in Wales is integral to the delivery of HEIW's Strategic Objective 2 – *Building a sustainable and flexible health and care workforce for the future*.

Misalignment of the training pipeline between Medical School, Foundation and Specialty & General Practice training will impact any objectives and initiatives put in place to deliver a sustainable workforce for the future either as part of HEIW's Education and Commissioning plan or through initiatives such as increasing General Practice training numbers. The likelihood of these initiatives succeeding increases with an expansion of Foundation Programme numbers.

A phased implementation programme with advanced planning allows for the creation of high quality placements and rotations aligned with the direction of travel for more community based opportunities as outlined in 'A Healthier Wales' and 'Shape of Training' reports as a result we would recommend any increase in posts at Foundation level should include placements in Psychiatry, General Practice, Emergency Medicine and Acute Medicine to provide an opportunity to attract increased numbers of trainees on these programmes in future.

4. Options appraisal

With medical school output in Wales projected to increase to 417 by August 2023 and Specialty and GP placements expected to reach 483 posts options for increasing Foundation posts numbers to an appropriate level have been considered. Given the difference in output and input requirements it is our recommendation that placing Foundation programme posts at a mid-way point (450 posts) is the most viable in terms of maximising fill rates and attracting, recruiting and retaining trainees in Wales.

Option 1 – Status quo

Maintain Foundation post numbers at 339.

Benefits

- No additional funding, resource or infrastructure required.
- The posts within the programme can remain as they are.
- Supply of doctors for entry into FY1 exceeds the number of posts enabling Wales to retain the higher quality candidates.

Disadvantages

- Wales must import a significant number of doctors from elsewhere to meet the demand requirements of GP and Secondary Care Specialty placements with a likely risk of increased vacancies or new posts created we will be unable to fill.
- Welsh graduates will be forced to look outside of Wales to continue their training with the risk that they then settle down and choose not to return to Wales.
- Welsh resident medical students that graduated in other UK Universities may look to train elsewhere rather than return to Wales.

Option 2 – Phased increase in Foundation Post numbers to align with Medical School output

Given the rotational structure of Foundation training placements (each year comprising three 4-month rotations) **78** new FY1 and **78** new FY2 posts would be created with this Option over a 5 year period with:

- 36 new FY1 posts for August 2020
- 12 new FY1 posts for August 2021 and 36 new FY2 posts
- 12 new posts for August 2022 and 12 new FY2 posts
- 18 new posts for August 2023 and 12 new FY2 posts
- 18 new FY2 posts for August 2024

This increase in posts would result in 417 FY1 posts by 2023 and 417 FY2 posts by 2024.

Benefits

- Increasing the numbers slightly for 2020 to 375 would bridge the current gap in terms of the increased output from the Medical Schools (projected at 415 doctors)
- Phasing the increase over a 5 year period will minimise the risk of vacancies occurring on the Foundation Programme and enable a more planned and pragmatic approach to expanding the programme thereby supporting the development of high quality training placements.
- Increased opportunities for retaining Welsh Graduates as detailed in the table below.

	Projected Med School output	F1 posts with Option 2 expansion programme
2019	359	339
2020	415	375
2021	380	387
2022	372	399
2023	417	417

- Improved probability of increased fill rates for Specialty and GP training posts with trainees who have worked in Foundation placements in Wales

Disadvantages

- Wales still runs the risk of displacing approximately half of the 40 additional graduates for Foundation in August 2020 and not recruiting to its potential capacity.
- Increasing to 417 posts still requires Wales to import trainees from elsewhere for General Practice and Secondary Care Specialty placements with the risk that the much needed workforce expansion at this level is not achieved.

Option 3 – Phased increase in Foundation post numbers to align with Specialty Training and GP posts

With the increases in training posts for General Practice and Specialty training in secondary care projected over the coming years, it is recommended that the number of Foundation Training posts be increased by **144** at FY1 and FY2 over a 5 year period with:

- 36 new FY1 posts for August 2020
- 36 new FY1 posts for August 2021 and 36 new FY2 posts
- 36 new FY1 posts for August 2022 and 36 new FY2 posts
- 36 new FY1 posts for August 2023 and 36 new FY2 posts
- 36 new FY2 posts for August 2024

This increase in posts will result in 483 FY1 posts and 483 FY2 posts in total.

Benefits

- Increasing to 483 Foundation Posts removes any gap between Foundation output and intake at the Specialty/GP level.
- By increasing the Foundation post numbers significantly for August 2020 this will go some way to bridging the gap between Medical Schools output and Foundation posts.
- Phasing the increase over a 5 year period will minimise the risk of vacancies occurring on the Foundation Programme and will enable a more planned and pragmatic approach to expanding the programme supporting educational and service changes and challenges.

Disadvantages

- Wales still runs the risk of displacing 40 graduates (or not recruiting to its potential capacity) for Foundation for August 2020.
- Increased risk that the new FY1 and FY2 posts will be vacant from 2021 onwards as detailed in the Table below unless Wales can attract junior doctors from other regions or overseas in a sustained manner.

	Projected Med School output	F1 posts with Option 3 expansion programme
2019	359	339
2020	415	375
2021	380	411
2022	372	447
2023	417	483

Option 4 – Phased increase in Foundation numbers to a level mid-way between Option 2 and 3

Both Options 2 and 3 address separate parts of the training pathway. Option 2 aligns medical school output with FY1 post numbers resulting in insufficient FY2 trainees eligible to take up Specialty and GP training posts. Whereas Option 3 aligns the output of Foundation training to Specialty and GP training positions which would result in more FY1 posts than expected graduates from Welsh Medical Schools.

Option 4 proposes an increase in post numbers mid-way between Options 2 and 3. Within this option, **111** FY1 and **111** FY2 posts would be created, as follows:

- 27 new FY1 posts for August 2020
- 27 new FY1 posts for August 2021 and 27 new FY2 posts
- 27 new FY1 posts for August 2022 and 27 new FY2 posts
- 30 new FY1 posts for August 2023 and 27 new FY2 posts
- 30 new FY2 posts for August 2024

This increase in posts will result in 450 FY1 posts by 2023 and 450 FY2 posts in by 2024.

Benefits

- Increasing to 450 Foundation Posts significantly minimises the gap between Foundation output and intake to Specialty/GP level to 33 posts from August 2025 onwards assuming no further changes to Specialty/GP numbers.
- The misalignment between Medical School output and FY1 posts will be addressed fully.
- Phasing the increase over a 5 year period will minimise the risk of vacancies occurring on the Foundation Programme and will enable a more planned and pragmatic approach to expanding the programme supporting educational and service changes and challenges.
- Increased flexibility to meet any future expansion or changes to medical school output.

Disadvantages

- Wales still runs the risk of displacing some 50 graduates (or at least not recruiting to its potential capacity) for Foundation for August 2020.
- Increased risk of vacancies at FY1 from 2021 onwards as detailed in the Table below until the Medical school output reaches its expanded level.

	Projected Med School output	F1 posts with Option 3 expansion programme
2019	359	339
2020	415	366
2021	380	393
2022	372	420
2023	417	450

5. Financial Analysis (Develop with Finance Business Partner)

Note – Please consider if applicable the implications on digital team and capacity

The tables overleaf detail the Trainee salary costings associated with the implementation of each of the options as outlined in this paper for comparison.

OPTION 2

Cohort	Base	Aug-20	Aug-21	Aug-22	Aug-23	Aug-24	Aug-25	Aug-26	Aug-27
F1		36	12	12	18	0	0	0	0
F2			36	12	12	18	0	0	0
Accumulative F1 Increase		36	48	60	78	78	78	78	78
Accumulative F2 Increase			36	48	60	78	78	78	78
Base Number plus F1	339	375	423	483	561	639	717	795	873
Base Number Plus F2	339	339	375	423	483	561	639	717	795
Additional F1 Costs		£ 1,055,755	£ 1,435,827	£ 1,830,679	£ 2,427,480	£ 2,476,030	£ 2,525,551	£ 2,525,551	£ 2,525,551
Additional F2 Costs		£ -	£ 1,519,811	£ 2,066,943	£ 2,635,353	£ 3,494,477	£ 3,564,367	£ 3,564,367	£ 3,564,367
LIFT pilot Trainers Grant		£ 11,622	£ 17,782	£ 18,138	£ 18,501	£ 18,871	£ 19,248	£ 19,632	£ 20,025
Trainer Grant FY2		£ -	£ 177,822	£ 241,838	£ 308,343	£ 408,863	£ 417,040	£ 417,040	£ 417,040
Relocation Expenses		£ -	£ 135,000	£ 180,000	£ 225,000	£ 292,500	£ 292,500	£ 292,500	£ 292,500
Total Cost		£ 1,067,377	£ 3,286,242	£ 4,337,598	£ 5,614,677	£ 6,690,741	£ 6,818,706	£ 6,819,090	£ 6,819,483

OPTION 3

Cohort	Base	Aug-20	Aug-21	Aug-22	Aug-23	Aug-24	Aug-25	Aug-26	Aug-27
F1		36	36	36	36	0	0	0	0
F2			36	36	36	36	0	0	0
Accumulative F1 Increase		36	72	108	144	144	144	144	144
Accumulative F2 Increase			36	72	108	144	144	144	144
Base Number plus F1	339	375	447	555	699	843	987	1131	1275
Base Number Plus F2	339	339	375	447	555	699	843	987	1131
Additional F1 Costs		£ 1,055,755	£ 2,153,740	£ 3,295,222	£ 4,481,502	£ 4,571,132	£ 4,662,555	£ 4,662,555	£ 4,662,555
Additional F2 Costs		£ -	£ 1,519,811	£ 3,100,415	£ 4,743,635	£ 6,451,343	£ 6,580,370	£ 6,580,370	£ 6,580,370
LIFT pilot Trainers Grant		£ 11,622	£ 17,782	£ 18,138	£ 18,501	£ 18,871	£ 19,248	£ 19,632	£ 20,025
Trainer Grant FY2		£ -	£ 177,822	£ 362,757	£ 555,018	£ 754,824	£ 769,921	£ 769,921	£ 769,921
Relocation Expenses		£ -	£ 135,000	£ 270,000	£ 405,000	£ 540,000	£ 540,000	£ 540,000	£ 540,000
Total Cost		£ 1,067,377	£ 4,004,155	£ 7,046,532	£ 10,203,655	£ 12,336,170	£ 12,572,094	£ 12,572,478	£ 12,572,871

OPTION 4

Cohort	Base	Aug-20	Aug-21	Aug-22	Aug-23	Aug-24	Aug-25	Aug-26	Aug-27
F1		27	27	27	30	0	0	0	0
F2			27	27	27	30	0	0	0
Accumulative F1 Increase		27	54	81	111	111	111	111	111
Accumulative F2 Increase			27	54	81	111	111	111	111
Base Number plus F1	339	366	420	501	612	723	834	945	1056
Base Number Plus F2	339	339	366	420	501	612	723	834	945
Additional F1 Costs		£ 791,816	£ 1,615,305	£ 2,471,417	£ 3,454,491	£ 3,523,581	£ 3,594,053	£ 3,594,053	£ 3,594,053
Additional F2 Costs		£ -	£ 1,139,858	£ 2,325,311	£ 3,557,726	£ 4,972,910	£ 5,072,368	£ 5,072,368	£ 5,072,368
LIFT pilot Trainers Grant		£ 11,622	£ 17,782	£ 18,138	£ 18,501	£ 18,871	£ 19,248	£ 19,632	£ 20,025
Trainer Grant FY2		£ -	£ 133,366	£ 272,068	£ 416,263	£ 581,844	£ 593,481	£ 593,481	£ 593,481
Relocation Expenses		£ -	£ 101,250	£ 202,500	£ 303,750	£ 416,250	£ 416,250	£ 416,250	£ 416,250
Total Cost		£ 803,439	£ 3,007,562	£ 5,289,433	£ 7,750,731	£ 9,513,456	£ 9,695,400	£ 9,695,784	£ 9,696,177

As part of the expansion of Foundation training posts, HEIW should commit a proportion of the increased capacity to ensuring trainees have increased access to community placements through GP training placements and placements in Psychiatry and Paediatrics.

Currently all GP Foundation placements are delivered through a 4 month placement in FY2.

We plan to use the expansion programme as an opportunity to increase the exposure to General Practice for a significant number of trainees by maintaining the traditional 4 month placement at FY2, with approximately half of the new posts being created within this proposed expansion period being in General Practice. We would also look to pilot a novel approach to GP placements for FY1 using the Longitudinal Integrated Foundation Training programme model which has been successful in the North West of England Foundation School (NWoEFS) for Options 2 and 3. Historically Foundation trainees have not been placed in General Practice during FY1 due to independent prescribing issues and a degree of isolation. The LIFT pilot proposes to address this and provide increased opportunities to GP exposure throughout the two year duration of the Foundation Programme.

6. Investment Appraisal and Value

The following table compares the options, costs and differences in the number of doctors lost between Medical School and Foundation or to be imported at Specialty/GP level.

Table – Appraisal, summary costings and benefits

Option	Impact	Cost
1 – Maintain Status Quo	<ul style="list-style-type: none"> Loss of Welsh graduates to England Significant number of doctors needed to be imported into Wales at the Specialty/GP level 	£0
2 – Alignment to Medical School output	<ul style="list-style-type: none"> Increased Foundation doctors to support service delivery Increased opportunities to retain Welsh graduates Improved probability of increased fill rates for Specialty and GP training posts <i>Continued risk around importing trainees from elsewhere for General Practice and Secondary Care Specialty placements</i> 	£6,818,706 Full year recurring from August 2025 onwards
3 – Alignment to Specialty Training and GP posts	<ul style="list-style-type: none"> Increased Foundation doctors to support service delivery Increased opportunities to retain Welsh graduates Increased probability of filling Specialty and GP training posts <i>Increased risk of vacancies at FY1/FY2 as posts significantly exceed medical school output</i> 	£12,572,094 Full year recurring from August 2025 onwards
4 – Mid way between Option 2 and 3	<ul style="list-style-type: none"> Increased Foundation doctors to support service delivery Increased opportunities to retain Welsh graduates Improved probability of increased fill rates for Specialty and GP training posts. Increased flexibility to meet any future expansion or changes to medical school output. 	£9,695,400 Full year recurring from August 2025 onwards

7. Timescale of recommended implementation

The UK Foundation Programme recruitment timetable for the August 2020 intake indicates that on Monday 23rd September 2019, registration opens on the ORIEL system and all programmes are available for prospective candidates to view with applications opening on Monday 30th September. To enable new FY1 posts to be created as part of the phased implementation commencing in August 2020 as detailed in options 2, 3 or 4, a decision regarding the choice of the options set out within this paper is required no later than 31st July 2019. Considerable work will need to be undertaken to create the 36 new FY1 posts for Option 2 or 3 and the 27 for Option 4. Given the current timescales it is recommended that the quickest and simplest approach would be to create rotations utilising new posts for August 2020 with a view to reconfiguring the rotations on the programme from 2021 onwards.

8. Major risks

This business case outlines a number of options to support the increase and reform of Foundation Training posts, the benefits and disadvantages for each option are considered within the options appraisal.

The primary risk resides with doing nothing. It is essential that as a minimum, any increases in Medical school output is matched with Foundation posts to maximise recruitment and retention opportunities for Wales. There is a danger that the programmes and investment to increase medical school placements and GP and Specialist training posts are severely hampered by the shortfall in Foundation level training posts in Wales.

It is acknowledged that there will always be uncertainty around year on year application numbers to foundation training in Wales as well as the rest of the UK, driven by variability in both medical school outputs and applications from EEA and overseas candidates. For the 2019 intake all of the Welsh Foundation posts were fully recruited to, Wales could not offer any posts to overseas doctors who could have been recruited to Wales had the posts been available; we therefore missed an opportunity to increase our intake which could be maximised through these proposals.

The funding projections within this paper outline the maximum outlay should full recruitment occur. However the funding of new FY1 posts could be established on a 'draw down' basis. This approach provides headroom for recruiting additional applicants without the need to release funds to unfilled posts. It also avoids the need to create posts and rotations at short notice in the context of an oversubscription as happened in 2019. The latter situation is associated with significant risk in terms of post and rotation quality.

This ambitious programme of expansion will be developed alongside initiatives developed by the Medical Schools in Wales to align and maximise opportunities through their innovative programmes such as the CARER longitudinal programme.

This expansion programme will enable us to be innovative around our training placements and build on this opportunity to promote a Wales-specific unique selling point to maximise recruitment into these new training posts and subsequent retention.

9. Recommendation

This business case has outlined 4 options in relation to increasing training posts at the Foundation level.

We would recommend that **Option 4** is adopted from August 2020 at FY1 and August 2021 for FY2. The total funding requirement to support the delivery of this is summarised below and analysed further in Section 5.

TOTAL Annual Funding Requirement for Option 4		
Aug 2020 intake	Cost Financial Year 1 2020/2021	£803,439
Aug 2021 intake	Cost Financial Year 2 2021/2022	£3,007,562
August 2022 intake	Cost Financial Year 3 2022/2023	£5,289,433
August 2023 intake	Cost Financial Year 4 2023/2024	£7,750,731
Aug 2024 intake	Cost Financial Year 5 2024/2025	£9,513,456
Aug 2025 intake	Cost Financial Year 6 2025/2026	£9,695,400

Formal evaluation of the LIFT pilot will follow and if implemented more widely further business cases for GP trainers grant funding to support a wider roll-out of this programme will be required from 2021 onwards to ensure opportunities for GP placements as part of this expansion and reform programme are maximised at FY1 level.



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

Meeting Date	26 September 2019	Agenda Item	4.1
Report Title	Report of the Director of Finance		
Report Author	Rhiannon Beckett		
Report Sponsor	Eifion Williams		
Presented by	Eifion Williams		
Freedom of Information	Open		
Purpose of the Report	To provide the HEIW Board with a Financial Report for Month 05 (August 2019).		
Key Issues	HEIW has a statutory duty to break even at year end and consequently this report should assist the Board, Executives and Budget Holders in managing the financial position through the 2019-20 financial year.		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
	✓		
Recommendations	1. For the HEIW Board to note the financial position reported at month 5.		

REPORT OF THE DIRECTOR OF FINANCE

1. INTRODUCTION

The report sets out the financial position as at 31st August 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 05 is £435,098 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 31st August 2019 and details the reasons for any financial variation to date against the budgets set. This is the first full year of operation of the new organisation, and so a detailed understanding of expenditure and budgets is still developing, particularly in relation to the education commissioning budgets. In recognition of this, during July, an in-depth assessment of the reported position as at Month 03 was undertaken to inform a review of the likely year end forecast based on the latest available information. This identified some year end and in year accruals and provisions that we have been able to either release or reduce. A review of student numbers and bursary take up has also revealed the potential of a significant underspend against commissioning budgets. Further variation may arise when actual enrolment numbers are received from each University following the September 2019 intake and the take up of the bursary is known. The likely outturn position without further action would result in a significant underspend at year end. Discussions with Welsh Government will be undertaken to consider the financial Position of HEIW in order that an approach be agreed that delivers a year end balanced position. A further update on recommended actions will be given at the Board Development session in October.

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 also against the financial plan submitted for 2019-20.

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

4. FINANCIAL POSITION

HEIW is reporting a cumulative underspend of £435,098 against profiled budgets as at 31st August 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 submitted is attached as Appendix 1.

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

Health Education And Improvement Wales
Executive Team Financial Report
As at 31st August 2019



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

	Year to Date			Previous Month	
	Budget	Actual	Variance	Variance to Date	Movement
	£	£	£	£	£
INCOME:					
Welsh Government	(84,239,153)	(84,239,153)	0	0	0
Other Income	(232,795)	(272,973)	(40,178)	(68,564)	28,386
Total Income	(84,471,948)	(84,512,126)	(40,178)	(68,564)	28,386
Expenditure					
Board & Executive	685,704	680,725	(4,979)	5,774	(10,752)
Finance & Corporate Services, Digital and IT	3,578,602	3,498,553	(80,049)	18,687	(98,736)
Medical & Pharmacy	36,189,683	36,318,019	128,336	42,307	86,029
Nursing	43,284,505	42,915,827	(368,678)	(15,239)	(353,440)
Human Resources and Organisation Development	733,454	663,904	(69,550)	(84,098)	14,548
Sub-Total Expenditure	84,471,948	84,077,028	(394,920)	(32,570)	(362,350)
Total			(435,098)	(101,134)	(333,964)

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

	Income	Expenditure			Total
		Pay	Non Pay	Commissioning	
Directorate	£	£	£	£	£
Board and Executive		(1,591)	(3,388)		(4,979)
Chief Executive Reserve			0		0
Finance & Corporate Services, Digital and IT	0	(69,119)	(10,930)		(80,049)
Medical & Pharmacy	(41,409)	(163,782)	290,898	2,452	88,159
Nursing	0	(28,013)	1,546	(342,212)	(368,679)
Human Resources and Organisation Development		(65,097)	(4,453)		(69,550)
Total	(41,409)	(327,602)	273,673	(339,760)	(435,098)

The analysis attached as Appendix 2 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 and specialist professional support services. It is expected that the financial position of HEIW will be managed to deliver a balanced position at year end.

5. BALANCE SHEET AS AT MONTH 05

The balance sheet as at 31st August 2019 is shown below:

Balance Sheet as at 31/08/2019			
	2019/20 Opening Balance £000s	31st August 2019 £000s	Movement £000s
Non-Current Assets:			
Fixed Assets	2,989	2,787	(202)
Current Assets:			
Trade and other receivables	801	672	(129)
Cash & bank	6,240	281	(5,959)
Total Assets	10,030	3,740	(6,290)
Liabilities:			
Trade and other payables	(6,228)	(15,528)	(9,300)
Provisions	(30)	(30)	0
Total Liabilities	(6,258)	(15,558)	(9,300)
	3,772	(11,818)	(15,590)
Financed by:			
General Fund	3,772	(11,818)	(15,590)
Total Funding	3,772	(11,818)	(15,590)

- 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 review and approval.
- Trade and other payables total £15.5m, an increase of £9.3m since the start of the financial year. The balance relates to:
 - £3.2m of invoices authorised and awaiting payment in line with the agreed 30 days payment policy (Increase of £1.4m since the start of the financial year).
 - £0.7m of goods/services received but awaiting a matching invoice (decrease of £0.2m).
 - £4.8m of accruals for NHS Wales organisations (increase of £3.7m). This is primarily accruals for invoices not yet received for the NWIS SLA (£1.9m), non-medical reimbursements (£1.6m) and medical accruals (£1.3m).

- £4.8m of accruals for non-NHS organisations (increase of £3.7m), mainly relating to university reimbursements.
- Resource allocation of £8.5m was received from Welsh Government during August 2019 and the overall cash position reduced during the month by £7.0m. There is a requirement to ensure that funding is not requested in advance of need, and therefore the draw-down was lower than in previous months to reduce the cash balance held. This was a one-off adjustment and the funding request for September 2019 will be £17.5m, which reflects our forecasted cash requirements for the month.
- The movement in general fund reflects the difference between costs incurred and accrued for the first five months of the financial year (£84.0m) and the actual cash funding required and received from Welsh Government (£68.3m). 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 1st April to the 31st August 2019, HEIW paid 96.0% of non-NHS invoices within this target.

Target	Unit	Current Month	Year to Date	Year-end Forecast
Public Sector Payment Policy To pay a minimum of 95% of all non-NHS creditors within 30 days of receipt of goods/invoice	%	94.5	96.0	>95%

5. RECOMMENDATION

The HEIW Board is asked to:

- Note the cumulative financial position reported for HEIW as at the end of August 2019.
- Note the detailed deep dive exercise that has been undertaken to analyse and explain the variances to date in individual budgets which will inform year end planning, future budget setting and future years financial planning.

Governance and Assurance				
Link to corporate objectives <i>(please ✓)</i>	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				
There are no implications for Quality, Safety and Patient Experience				
Financial Implications				
The financial implications are set out above in the body of the report.				
Legal Implications (including equality and diversity assessment)				
HEIW has a statutory responsibility to break even at year end the report sets out the financial position for August 2019. There are no equality and diversity implications of this report.				
Staffing Implications				
There are no staffing implications of this report.				
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)				
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.				
Report History	The report references and updates the previous finance update shared with the HEIW Board in August 2019.			
Appendices				

VALIDATION SUMMARY 2019-20

Your organisation is showing as :	HEIW
Period is showing :	AUG 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
TOTAL ERRORS FOR YOUR AUG 19 RETURN IS	2 ERRORS ON 2 DIFFERENT TABLE/S

HEIW

Period : Aug 19

Summary Of Main Financial Performance

Revenue Performance

		Actual YTD £'000	Annual Forecast £'000
1	Under / (Over) Performance against Resource Limit	435	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	Opening Cost Pressures	0	0	0	0
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	Opening Financial Plan	0	0	0	0
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	Forecast Outturn (- Deficit / + Surplus)	0	0	0	0

[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	Total	0	0

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	Total	0	0	0	0	0	0

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	Total	0	0	0	0	0	0

HEIW

Table B - Monthly Positions

Period : Aug 19

This Table is currently showing 0 errors

[illegible]

B. Assessment of Financial Forecast Positions

Year-to-date (YTD)	£'000	
21. Actual YTD surplus/ (deficit)	435	
22. Actual YTD surplus/ (deficit) last month	101	
23. Current month actual surplus/ (deficit)	334	
		Trend
24. Average monthly surplus/ (deficit) YTD	87	▲
25. YTD /remaining months	62	

Full-year surplus/ (deficit) scenarios	£'000
26. Extrapolated Scenario	2,773
27. Year to Date Trend Scenario	1,044

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	1,215	1,215	1,215	1,213	1,212	1,212	5,813	14,314
2 Establishment - Actual/Forecast Gross	1,021	1,050	1,108	1,092	1,032	1,211	1,189	1,193	1,193	1,195	1,195	1,200	5,303	13,679
3 Variable - Actual/Forecast Gross													0	0
4 Agency/Locum Paid at a Premium - Actual/Forecast Gross	13	40	83	50	15	40	40	35	35	30	30	25	201	436
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	1,251	1,229	1,228	1,228	1,225	1,225	1,225	5,504	14,115
8 Gross Expenditure Variance	(34)	12	(51)	(64)	(172)	32	14	13	13	12	13	13	(309)	(199)
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	1,215	1,215	1,215	1,213	1,212	1,212	5,813	14,314
20 Net Expenditure - Actual/Forecast (as per Table B)	1,034	1,090	1,191	1,142	1,047	1,251	1,229	1,228	1,228	1,225	1,225	1,225	5,504	14,115
21 Net Expenditure - Variance	(34)	12	(51)	(64)	(172)	32	14	13	13	12	13	13	(309)	(199)

B. NON PAY (excluding drugs & 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	1,308	1,298	1,295	1,233	1,221	2,196	5,641	15,381
23 Non Pay - Actual/Forecast Gross	1,096	1,266	1,087	1,162	901	1,328	1,320	1,466	1,295	1,298	1,216	2,146	5,512	15,580
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	1,328	1,320	1,466	1,295	1,298	1,216	2,146	5,512	15,580
27 Non Pay Expenditure Variance	10	159	(51)	(29)	(218)	139	12	168	(0)	65	(5)	(50)	(129)	199
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	1,308	1,298	1,295	1,233	1,221	2,196	5,641	15,381
35 Net Expenditure - Actual/Forecast (as per Table B)	1,096	1,266	1,087	1,162	901	1,328	1,320	1,466	1,295	1,298	1,216	2,146	5,512	15,580
36 Net Expenditure - Variance	10	159	(51)	(29)	(218)	139	12	168	(0)	65	(5)	(50)	(129)	199

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	15,510	15,305	15,789	17,342	14,963	18,291	73,040	186,529
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	16,124	15,529	15,323	15,808	17,248	14,981	18,654	72,860	186,529
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	16,124	15,529	15,323	15,808	17,248	14,981	18,654	72,860	186,529
88 Gross Expenditure Variance	3	(83)	10	70	(180)	(167)	20	19	20	(93)	19	364	(180)	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	15,510	15,305	15,789	17,342	14,963	18,291	73,040	186,529
96 Net Expenditure - Actual/Forecast (as per Table B)	14,321	14,225	14,992	14,745	14,577	16,124	15,529	15,323	15,808	17,248	14,981	18,654	72,860	186,529
97 Net Expenditure - Variance	3	(83)	10	70	(180)	(167)	20	19	20	(93)	19	364	(180)	0

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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	
REF	TYPE	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	year-end position £'000	
1	Administrative, Clerical & Board Members	598	605	710	698	617	767	755	754	754	751	751	742	3,228	8,502
2	Medical & Dental	362	403	388	355	366	402	392	392	392	392	392	393	1,874	4,629
3	Nursing & Midwifery Registered	6	10	11	11	(11)	5	5	5	5	5	5	8	27	65
4	Prof Scientific & Technical	55	59	67	65	62	66	66	66	66	66	66	69	308	773
5	Additional Clinical Services	13	13	15	13	13	11	11	11	11	11	11	13	67	146
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	1,251	1,229	1,228	1,228	1,225	1,225	1,225	5,504	14,115

Analysis of Pay Expenditure

11	LHB Provided Services - Pay	1,034	1,090	1,191	1,142	1,047	1,251	1,229	1,228	1,228	1,225	1,225	1,225	5,504	14,115
12	Other Services (incl. Primary Care) - Pay													0	0
13	Total - Pay	1,034	1,090	1,191	1,142	1,047	1,251	1,229	1,228	1,228	1,225	1,225	1,225	5,504	14,115
		0	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	
REF	TYPE	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	year-end position £'000	
1	Administrative, Clerical & Board Members	13	40	83	50	15	40	40	35	35	30	30	25	201	436
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	40	40	35	35	30	30	25	201	436
11	Agency/Locum (premium) % of pay	1.3%	3.7%	7.0%	4.4%	1.4%	3.2%	3.3%	2.9%	2.9%	2.4%	2.4%	2.0%	3.7%	3.1%
		0	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	
REF	REASON	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	year-end position £'000	
1	Vacancy	13	40	83	50	15	40	40	35	35	30	30	25	201	436
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	40	40	35	35	30	30	25	201	436

Period : Aug 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	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
2	Establishment	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	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
2	Agency/Locums paid at a premium	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	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	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
8	Agency pay rate caps	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
Total	0	0	0	0	0	0

HEIW

Period : Aug 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	Total	0	0	0

Contracted Expenditure £'000	Non Contracted Expenditure £'000	Total Expenditure £'000
0	14,131	14,131
0	9,030	9,030
0	13,322	13,322
0	18,546	18,546
0	7,229	7,229
0	6,331	6,331
0	422	422
0	1,137	1,137
0	21,783	21,783
0	569	569
0	0	0
0	0	0
0	0	0
0	92,500	92,500

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:	2									
2 Total Confirmed Funding	214,623				214,623		214,621	100	100	

2. ANTICIPATED ALLOCATIONS

3 Non-Cash Depreciation	480				480	R				Month 1
4 WCPPE Legacy Commitment	187				187	NR	187			Richard Dudley - Month 1
5 Education Quality and Integration Manager (SC)	28				28	NR	28			Richard Dudley - Month 1
6 Workforce Modernisation Manager (KG)	60				60	NR	60			Richard Dudley - Month 1
7 Social Care Pilot	60				60	NR	60			Richard Dudley - Month 1
8 NMET Reprourement	240				240	NR	240			Month 2
9 Advanced Clinical Skills	100				100	NR	100			Month 2 - Invoiced seperately
10 Clinical Leadership Development Manager	60				60	R	60			Month 4
11 WIMAT	102				102		102			Month 5
12 Primary Care (GP Expansion)					0	R				Value to be confirmed
13 Professionalising Training Programme Directors					0					Value to be confirmed
14 Leadership in Emergency Medicine					0					Value to be confirmed
15 DDRB Pay Award					0					Value to be confirmed
16 Excess Mileage					0					Value to be confirmed
17 Pension Advice					0					Value to be confirmed
18 Incentive Payment (Psych)					0					Value to be confirmed
19 SAS Expansion					0					Value to be confirmed
20 Non-Cash Depreciation	10				10	R				Month 5
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	1,327	0	0	0	1,327		837	0	0	

3. TOTAL RESOURCES & BUDGET RECONCILIATION

57 Confirmed Resources Per 1. above	214,623	0	0	0	214,623		214,621	100	100	
58 Anticipated Resources Per 2. above	1,327	0	0	0	1,327		837	0	0	
59 Total Resources	215,950	0	0	0	215,950		215,458	100	100	

This Table is currently showing 0 errors

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

		FORECAST YEAR END			
		Worst Case £'000	Likelihood	Best Case £'000	Likelihood
	Current Reported Forecast Outturn	0		0	
	Risks (negative values)				
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	Take up of Bursary Funding	TBC	Medium		
10	Recruitment into Training Places	TBC	Medium		
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
	Opportunities (positive values)				
23	Recruitment into Training Places	TBC	Medium	TBC	Medium
24					
25					
26					
27					
28					
29					
30	Total Risks /Opportunities	0		0	
31	Total Amended Forecast	0		0	

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Period : Aug 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 Aug 19 £'000	Forecast Closing Balance End of Mar 20 £'000
Non-Current Assets			
1 Property, plant and equipment	2,989	2,787	2,599
2 Intangible assets	0	0	0
3 Trade and other receivables	0	0	0
4 Other financial assets	0	0	0
5 Non-Current Assets sub total	2,989	2,787	2,599
Current Assets			
6 Inventories	0	0	0
7 Trade and other receivables	801	672	801
8 Other financial assets	0	0	0
9 Cash and cash equivalents	6,240	281	3,479
10 Non-current assets classified as held for sale	0	0	0
11 Current Assets sub total	7,041	953	4,280
12 TOTAL ASSETS	10,030	3,740	6,879
Current Liabilities			
13 Trade and other payables	6,121	15,334	5,290
14 Other financial liabilities		0	
15 Provisions	30	30	0
16 Current Liabilities sub total	6,151	15,364	5,290
17 NET ASSETS LESS CURRENT LIABILITIES	3,879	(11,624)	1,589
Non-Current Liabilities			
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	(11,818)	1,418
FINANCED BY: Taxpayers' Equity			
23 General Fund	3,685	(11,818)	1,418
24 Revaluation Reserve			
25 Total Taxpayers' Equity	3,685	(11,818)	1,418

	Opening Balance Beginning of Apr 19	Closing Balance End of Aug 19	Closing Balance End of Mar 20
EXPLANATION OF ALL PROVISIONS			
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
20
0
0

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

	£'000	£'000	£'000
39 Capital	0	0	0
40 Revenue	6,315	15,528	5,461

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Period : Aug 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
	RECEIPTS													
1	WG Revenue Funding - Cash Limit (excluding NCL)	17,300	14,000	14,500	14,000	8,500	17,500	17,500	18,000	18,000	18,000	20,000	35,813	213,113
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												100	100
5	Sale of Assets													0
6	Income from other Welsh NHS Organisations				28									28
7	Other - (Specify in narrative)	210	35	64	42	614								965
8	TOTAL RECEIPTS	17,513	14,035	14,664	14,070	9,114	17,500	17,544	18,000	18,000	18,044	20,000	35,957	214,441
	PAYMENTS													
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	1,214	1,214	1,214	1,214	1,214	1,214	1,671	14,290
15	Non Pay Expenditure	12,288	13,537	13,515	15,670	15,011	15,478	16,452	16,849	16,789	17,103	18,546	31,573	202,812
16	Capital Payment												100	100
17	Other items (Specify in narrative)													0
18	TOTAL PAYMENTS	13,126	14,622	14,651	16,893	16,063	16,692	17,666	18,063	18,003	18,317	19,760	33,344	217,202
19	Net cash inflow/outflow	4,387	(587)	13	(2,823)	(6,949)	808	(122)	(63)	(3)	(273)	240	2,613	
20	Balance b/f	6,240	10,627	10,040	10,053	7,230	281	1,089	967	903	900	627	866	
21	Balance c/f	10,627	10,040	10,053	7,230	281	1,089	967	903	900	627	866	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%	98.0%	3.0%	95.0%	95.0%	0.0%
2	% of NHS Invoices Paid Within 30 Days - By Number	95.0%	86.0%	-9.0%	95.0%	90.0%	-5.0%
3	% of Non NHS Invoices Paid Within 30 Days - By Value	95.0%	99.6%	4.6%	95.0%	95.0%	0.0%
4	% of Non NHS Invoices Paid Within 30 Days - By Number	95.0%	96.2%	1.2%	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 : 22/8/19

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	
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	Sub Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

	Discretionary:																		
35	To Be Confirmed	TBC	100	100													100	100	Low
36																		0	
37																		0	
38																		0	
39																		0	
40	Sub Total		100	100	0	0	0	0	0	0	0	0	0	0	0	0	100	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	0	0

62	Total Capital Expenditure		100	100	0	0	0	0	0	0	0	0	0	0	0	0	100	100	
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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		
Total outstanding as per MR submission date	0.00	0.00

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Period : Aug 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	
TOTAL Local Enhanced Services (must equal line 9)	95		0	0	0	0

TOTAL Enhanced Services (must equal line 10)	96		0	0	0	0
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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
LHB Administered	Section B	LINE NO.				
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				
TOTAL LHB Administered (must equal line 11)		114			0	0

	LINE NO.	£000's	£000's	£000's	£000's	£000's
Analysis of Other Payments (line 113)						
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					
TOTAL of Other Payments (must equal line 113)	135					0

	LINE NO.	£000's	£000's	£000's	£000's	£000's
Premises						
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					
TOTAL Premises (must equal line 12)	150				0	0

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					
TOTAL of Other Premises (must equal line 149)	158					0

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
Dispensing Data	LINE NO.					
Cost of Drugs and Appliances, after discounts and plus container allowance (and plus VAT where applicable)						
Dispensing Doctors	161					
Prescribing Medical Practitioners - Personal Administration	162					
Dispensing Service Quality Payment	163					
Professional Fees and on-cost						
Dispensing Doctors	164					
Prescribing Medical Practitioners - Personal Administration	165					
TOTAL DISPENSING DATA (must equal line 15)	166				0	0

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

HEIW

Period : Aug 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	
TOTAL DENTAL SERVICES EXPENDITURE	13		0	0	0	0
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					
TOTAL OTHER (must equal line 12)	43			0		0
RECEIPTS						
TOTAL DENTAL SERVICES INCOME (Enter as a negative value)	44				0	

DETAILED FINANCIAL ANALYSIS BY DIRECTORATE AS AT MONTH 5

1. BOARD AND EXECUTIVE

An underspend of £1,591 on pay is as a result of less than full time salary costs where interim arrangements are in place covering a substantive vacancy.

A small underspend on Non-Pay £3,388 is due to lower than budgeted Travel and subsistence costs in month 5.

2. FINANCE, CORPORATE SERVICES, DIGITAL AND IT

The underspend variance of £69,119 on pay budgets is predominantly as a result of six vacancies within the Digital team partly offset by the costs of two agency staff. There are also agency staff covering vacancies within the Planning team creating a small adverse variance due to the premium associated with agency fees. A favourable pay variance within the Finance team is as a result of the deep dive process enabling the write back of accruals made at year end or in earlier months. Within the Finance team budget there are two vacant posts that are undergoing job evaluation prior to being advertised in the near future.

With respect to vacant posts significant progress has been made in July and August to ensure that roles established have been assessed through the job evaluation process and then released, c80% of jobs in the process have now been evaluated. A number of these are currently either out to advert or appointed to waiting for individuals to start in post. This will mean that over the next quarter the underspends on pay across the organisation should reduce and the appointment of substantive staff improve staff health and wellbeing in business teams that are under resourced.

There is a reported underspend of £12,159 in Non-Pay. However, one off costs incurred in respect of lift repairs, privacy glass wraps for meeting rooms and ongoing repairs associated with water damage are still impacting on the position. However, a decision has been taken to increase the budget for the VAT element of the telephone installation and maintenance contract and the lease of Ty Dysgu since these issues are unavoidable expenditure, resulting in the additional budget provided eliminating the significant variances previously reported. The remaining cost pressures identified are more than offset by savings on utilities due to lower than expected usage and lower prices as a result of joining the all NHS Wales utilities contract.

3. MEDICAL AND PHARMACY

A favourable variance against the Other Income target in the Medical budgets of £41,409 consists of £41k in respect of additional invoiced income from WG for the piloting of Advanced Skills for Managing Acute Minor Ailments scheme for pharmacists. The costs of the programme are shown in the relevant expenditure lines.

The underspend against Pay budgets of £164k is due to a number of factors that include maternity leave and vacancies across nine posts within administration and clerical grades across a number of business units including RSU, Secondary Care, GP Training, Foundation, Dental, Quality and Pharmacy giving a £103k underspend against budget. In GP training, there are a significant number of vacancies for GP appraisers which results in a favourable £75k variance and at Medical and Dental consultant level there is an underspend of £19k 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 £36k.

The overspend of £290,898 against Non-Pay budgets consists of a number of elements. An adverse variance of £169k 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 at £20k above budget and Hamnet Street professional support costs of £45k above budget at month 5 resulting in an expected full year impact of £70k; 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 £23k has reduced slightly as a result of the deep dive process as has the overspend associated with catering £11k. Cost pressures are partly offset by favourable variances in respect of the budgets for conferences, seminars and training expenses.

Within Commissioning budgets, there is a £2,452 overspend in total. This is as a result of a number of factors including reduced expenditure in the current co-hort undertaking the Welsh Clinical Academic Training qualification due to early completion which produced a favourable variance of £129k. There is also a £114k underspend due to salary allocations and placements for hospital training grade posts in Wales being less than budgeted for; and a further underspend of £50k as a result of a lower number of supported GPs returning to the workplace via the supported placement mechanism. These underspends are offset by a significant movement in respect of GP training with costs of £127k above budget for the new intake of trainees from 4th August and £174k relating to the additional 35 GP ST1 trainees undertaking in practice placements in accordance with the new GP training model. The business case for additional funding from Welsh Government has been agreed in principle and an additional allocation will be received following confirmation from HEIW of the additional funding that will be required in this year.

4. NURSING

The underspend variance on Pay of £28,013 relates predominantly to the ongoing delay in appointment to three senior posts. As previously reported the underspend is increasing at a rate of £19,500 per month. It is unlikely that any salary costs will be incurred for a further four months since the posts have not yet progressed to advertisement.

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 £340,666 is reported in month 5 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 August position includes updated numbers for year 2 and 3 based on latest returns from Universities (July). It is assumed that recruitment into year 1 will be 100% of commissioned numbers. The financial impact of the revised numbers is a c£600k underspend variance, half of this has been reported in month to enable the deep dive work to be finalised ensuring the figures have been thoroughly tested and are robust. The numbers recruited into year 1 will also be known by the time month 6 is reported 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.
- Assumptions in the commissioning paper included an assumption about the number of students who will take up the bursary package as opposed to student loans. This is causing some variation, however at an estimated £25k underspend against budget this is not material compared to the impact of student numbers. Similar to the variation in student numbers, this position can change up until the end of November as students have a 10-week cooling off period having chosen to sign up to the Bursary scheme and the Terms and Conditions.
- Other non-pay budgets related to travel and subsistence and other expenses of the Nursing team are of minimal value. There is a small overspend of £1,500 reported to date.

5. HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT

The underspend variance of £65,097 on Pay budgets in August is due to 10 vacancies across the core budgets within the Directorate partly offset by the costs of three agency staff. Where development funding had been provided to fund posts which have not been appointed to the year to date, an underspend of c£46k has been re-allocated to offset the unavoidable cost pressure resulting from unreclaimable VAT on the TY Dysgu lease and telephone maintenance contract. The core vacancies are at various stages of recruitment with some currently out to advert whilst others are still at the job evaluation stage.

A Non-Pay underspend of £4,453 is due to a range of small variances and less spend on travel and subsistence than budgeted.



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

Meeting Date	26 September 2019	Agenda Item	4.2
Report Title	HEIW Performance Dashboard		
Report Author	Gareth Thomas		
Report Sponsor	Julie Rogers		
Presented by	Chris Payne		
Freedom of Information	Open		
Purpose of the Report	To provide board members oversight of organisational and directorate performance. Specifically highlighting the ongoing development of the HEIW performance dashboard.		
Key Issues	Timescale to implement a programme of work required to ensure the principles, competencies, capabilities and ways of working are in place to deliver the intent of the performance management framework.		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
		✓	
Recommendations	Members are asked to: <ul style="list-style-type: none"> Consider and review the performance report and provide further recommendations and additions. Note the process undertaken. 		

Performance Management

1. INTRODUCTION

This paper provides the Board Members with oversight of Health Education Improvement Wales (HEIW) performance for quarter one, covering the period April 2019 to June 2019.

2. BACKGROUND

The performance management report aims to define and align the delivery of operational performance targets, quality indicators and outcome measures. The process was presented and approved at the August Board Development session and as such the Workforce Information and Planning teams have undertaken an organisational data collection to allow us to report on HEIW's activity. The first iteration of the performance report can be found in **Appendix A** with accompanying narrative.

3. GOVERNANCE AND RISK ISSUES

The performance dashboard has been developed through engagement across HEIW directorates to consider the information available and the information that would add value from a high-level dashboard perspective.

Large volumes of data are available within the organisation. However, it is critical to note that we need to collect the correct data in an efficient format, creating streamlined processes that can easily convert data into information ensuring it is easily retrieved and understood to enhance decision making.

Further Developments

A number of recommendations have been received from board and executive members to further enhance the performance dashboard. As such the teams will investigate the addition of the following through the meeting of the Performance Information Delivery Subgroup:

- ❖ Welsh Government Remit Letter
- ❖ Addition to commissioned places; non-medical (AHPs & Other)
- ❖ Quality Data; Number of targeted visits to Health Board areas
- ❖ Workforce information; Current Casework (Disciplinary & Grievance Numbers), Staff Survey (Engagement Score & Staff response rate)
- ❖ Corporate information; Freedom of Information requests and Complaints
- ❖ Financial Targets; Working within our means, Public Sector Payment Policy (PSPP)

Whilst the dashboard is currently able to provide an insight into some of the valuable data we hold within HEIW a programme of ongoing works to enhance the efficiency and incorporate the above metrics will be complete by quarter four.

4. FINANCIAL IMPLICATIONS

The development of the framework is being supported through existing budgeted resources

5. RECOMMENDATION

It is recommended that the Board:

- Consider and review the performance dashboard and provide further recommendations and additions.
- Note the process undertaken.

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				
N/A				
Financial Implications				
There are no financial implications for Executives to consider/approve at this stage.				
Legal Implications (including equality and diversity assessment)				
N/A				
Staffing Implications				
N/A				
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)				
N/A				
Report History	18 th July 2019 – Public Board Meeting (Hywel Dda) 29 th August 2019 – Board Development Session (HEIW)			
Appendices	Appendix A – Performance Report			



**Health Education and Improvement Wales
Performance Report
Quarter One
(April 2019 to June 2019)**

Section One – Projects and Programmes

HEIW Strategic Objectives – Project Update



There are 25 key programmes and projects to be delivered as part of the Health Education Improvement Wales Annual Plan for 2019/20; in support of the strategic objectives. Each strategic objective has been assigned an Executive lead and a Senior Responsible Officer with responsibility for delivering the agreed milestone and reporting on progress and exceptions.

Status	Number	Comment
Red	3	<p>(SO3) With Social Care Wales shaping the workforce to deliver care closer to home Development of a framework for expanding education and training in primary and community care; Scoping work has commenced and a job description has been approved for a Head of Therapies role which will go out to advert early September</p> <p>(SO4) Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges Development of a multi-professional workforce plan for emergency medicine; a project manager is being recruited to provide additional capacity for this work.</p> <p>(SO7) Demonstrating Value from Investment Development of a plan for future allocation of SIFT. This project is red flagged. It is still under construction awaiting WG confirmation of direction required</p>
Amber	18	
Green	4	

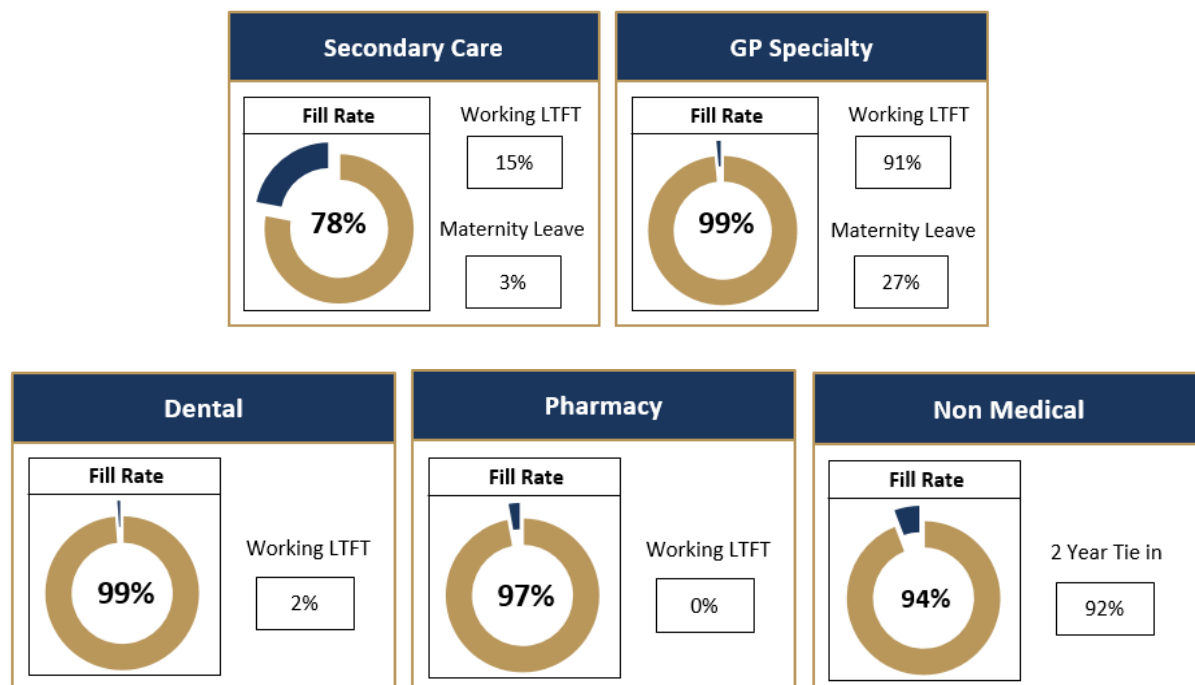
Red – Not Started/Behind Schedule

Amber – On Track

Green – Complete

Section Two – Education and Training Activity

Commission Places



Medical Education – Secondary Care

(Data from February 2019 Changeover – Next iteration October 2019)

The overall fill rate for a programme takes into account the %WTE of individuals currently working in training placements in NHS Wales plus the number of trainees currently in a programme but on parental leave and undertaking an out of programme placement trainees in these categories will return to a placement at an agreed given point in time.

This data was taken as a snapshot just after the February changeover point and there are a number of areas which need to be highlighted where discrepancies may occur between information presented here and recruitment fill rates in practice. These could be due to a number of reasons including:

- Feminisation of the workforce. Specific training programmes attract higher rates of females who in turn take maternity leave and are also more likely to train on a Less Than Full Time (LTFT) basis. Specialties such as Paediatrics have a 33% LTFT rate whereas others including certain medical specialties have LTFT rates in excess of 50%.
- Dual accreditation. Certain training programmes allow trainees to work towards a Certificate of Completion of Training (CCT) in 2 specialty areas. For example with Intensive Care Medicine all of the trainees are currently dual accrediting; requiring trainees to spend time of varying durations in their parent and dual training programme and so whilst the ICM programme may be full, trainees may be out training in their dual/parent programme at a given point.
- Period of grace. All trainees upon completing their training programme are entitled, as part of their terms and conditions of service, to a 6 month period of grace. This

period of time supports trainees in looking for a consultant position. However not all trainees choose to take up this grace period but when planning for future recruitment rounds we have to assume, until notified, that all trainees will take their entitlement. This is an increasing problem for specialties with 1 intake per year (August) and 1 recruitment round. If a vacancy therefore falls in December we will be unable to fill it with a trainee until the next August.

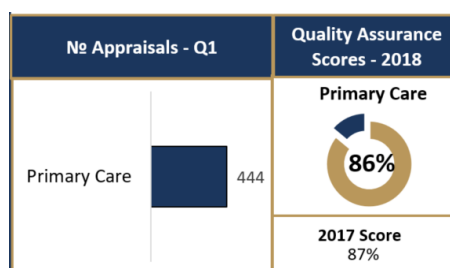
- Attrition. Naturally attrition occurs as a result of trainees failing to make progress within a specialty but also deciding that a particular specialty was not for them and successfully obtaining a placement on another programme.

Other Professions (GP Specialty, Dental, Pharmacy, Non-Medical)

It should be noted that the fill rates are high for each of the other medical and non-medical professions, and has remained a constant within Wales.

Section Three – Quality and Outcomes

GP Appraisals – Quarter 1 2019



GP Appraisal Completion Numbers

Primary care appraisal is long established. Appraisers are recruited and trained centrally by the Revalidation Support Unit (RSU), and professionally managed by a team of Appraisal Co-ordinators across Wales. Secondary care appraisal is managed by Health Boards and has developed substantially to support the introduction of Medical Revalidation in 2012. Since 2013/14 secondary care appraisal scores have increased by 10%.

This data provides a summary of the number of GP appraisals completed on MARS for the period 1st April – 30th June 2019. MARS is a sophisticated online appraisal and revalidation system provided by HEIW and used by all non-training grade doctors in Wales (over 7500 users), with tailored access for Medical Directors and Health Board staff. This is an increase of 16.8% compared to the same period in 2018, with a total of 380 appraisals completed in April – June 2018. Appraisal completion numbers are continuously in flux through the appraisal year, however, this increase may be a result of an increase in the number of GPs in Wales and an early positive indicator of engagement with annual appraisal. We will continue to collect this data as the year progresses.

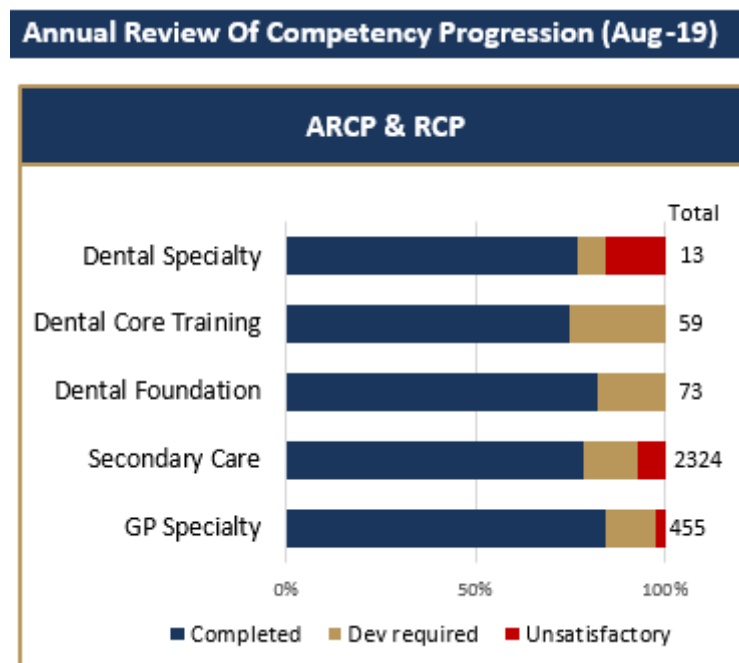
It should be noted that, as per GMC guidance, the appraisal completion date is taken from the date the appraisal summary is agreed by the appraisee on MARS.

All Wales Appraisal Summary Quality Assurance Scores.

This data is derived from the 2018/19 annual medical appraisal quality assurance exercise, which is led and managed by the RSU within HEIW. The overall aim of this process is to review the outputs of appraisal by assessing a sample of 4-5% of appraisal summaries from both primary and secondary care against a set of agreed quality criteria. This QA data provides assurances regarding the quality of appraisal in Wales, as well as recommendations for improvement. This data is reported back to WG, Health Boards and all Wales forums in order to provide an all Wales picture and to support planning of activity to respond to identified areas for development as part of an iterative quality management cycle.

The overall scores for the year 2018/19 show a consistent high score in Primary Care appraisal.

Annual Review of Competency Progression (ARCP)

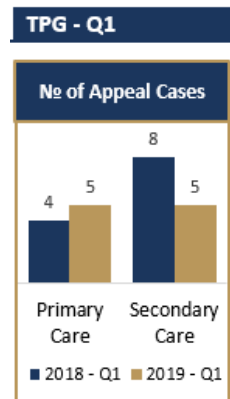


Over the last 12 months (August 2017-July 2018), Secondary Care has conducted approx. 2500 annual reviews for doctors in Foundation and Specialty training. The Foundation ARCPs are held on an annual basis locally in Postgraduate Centres and are administered by Postgraduate Foundation Administrators and Foundation Programme Directors.

Aside from this, HEIW has also conducted a number of ARCPs and reviews of competency progression (RCPs) within dental. For the following professions:

- ✦ Dental specialty: 13 Reviews
- ✦ Dental Core Training: 59 Reviews
- ✦ Dental Foundation: 73 Reviews
- ✦ GP Specialty: 455 Reviews

Trainee Professional Governance (TPG) & Quality Management



Approximately 2,500 Annual Reviews of Competence Progression are held each year (ARCPs). Trainees are awarded a range of Outcomes that are prescribed nationally. These range from Outcome 1, fully meeting competencies and progression to next stage; Outcome 2, not meeting all competences but can progress to next stage; Outcome 3, needs an extension of a prescribed period in order to progress; Outcome 4, released from programme; Outcome 5, a holding or neutral Outcome until a decision can be made and finally Outcome 6 which is qualification and reaching consultant status.

A small number of trainees disagree with their Outcome and are able to request an Appeal.

An Outcome 2 can only be reviewed without appeal, but Outcome 3s and 4s are reviewed and then if the trainee does not accept the decision a final stage of a full Independent Hearing (IH) is arranged, chaired by delegated senior clinicians appointed by the Post Graduate Dean.

Appeals are small in number compared to the total number of ARCP Outcomes awarded but they demand a consistent, rigorous approach. Appeal judgements can be challenged in the courts. Approximately half of all Appeals are changed at the review stage of appeal and if they proceed to a full independent hearing for their appeal the outcomes are generally maintained often with the trainee being released from the programme.

Within HEIW we are seeing a national trend of more complex cases going to Appeal and trainees supported by legal or union representatives.

Quality Management

Quality Management Summary

HEIW has a comprehensive quality management framework in place in order to enable compliance with regulatory standards and ensure postgraduate medical training in Wales adopts a patient centred approach which safeguards safety. Our approach to quality management is comprised of a scheduled and a responsive component. The scheduled component ensures that there are appropriate governance arrangements and infrastructure in place within Health Boards who provide training. The responsive component ensures that where quality concerns arise they are identified and managed in a proportionate manner in order to prevent any undue burden on Health Boards across Wales. The Targeted Process is the responsive component of our quality framework and is designed to enable HEIW to respond to concerns at the earliest opportunity; with varying levels of escalation enable HEIW to adopt a proportionate response to concerns.

Chart One: Targeted Visits Outcome by Specialty Group

The information within this chart provides an overview of the specialty areas for which a higher level of action planning is being undertaken through a Targeted Visit. When considering this information it should be noted that it is feasible that an individual Health Board department may receive more than one visit during a year. This is not necessarily a cause for concern but is standard practice to ensure that where improvements have been made they are sustained. The visits which have indicated as already having taken place within the chart have been done so between April to June 2019. Those visits which are illustrated as 'Outcome Awaited' are due to take place throughout the remainder of the reporting year and outcomes will be updated through further iterations of this report.

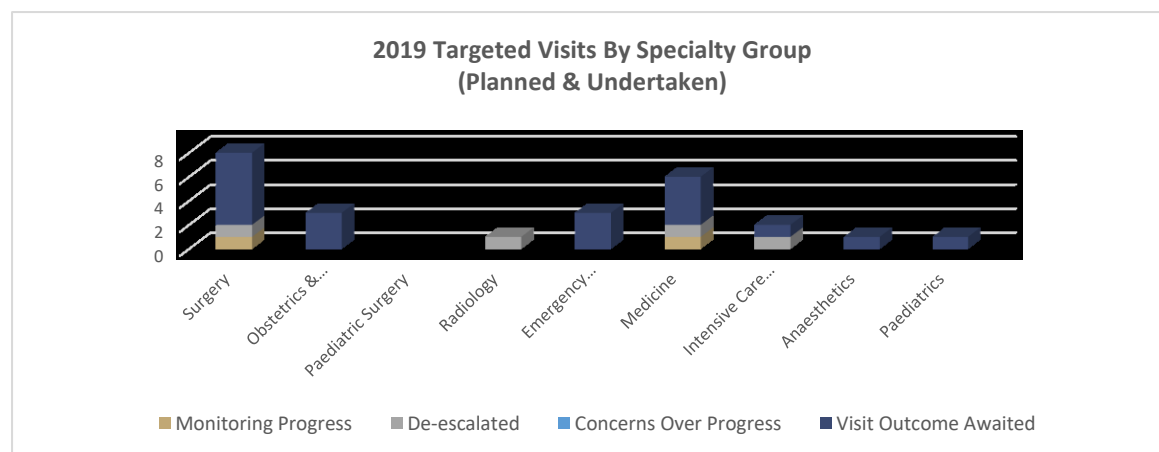


Chart Two: Enhanced Monitoring:

The information in the table below provides an overview of the specialty areas which have been escalated and are being managed under Enhanced Monitoring status with an indication of the status of each issue. As with chart one the data reflects the areas under Enhanced Monitoring during April to June 2019. Enhanced Monitoring issues remain under the management of HEIW, although the concerns are usually either particularly complex or

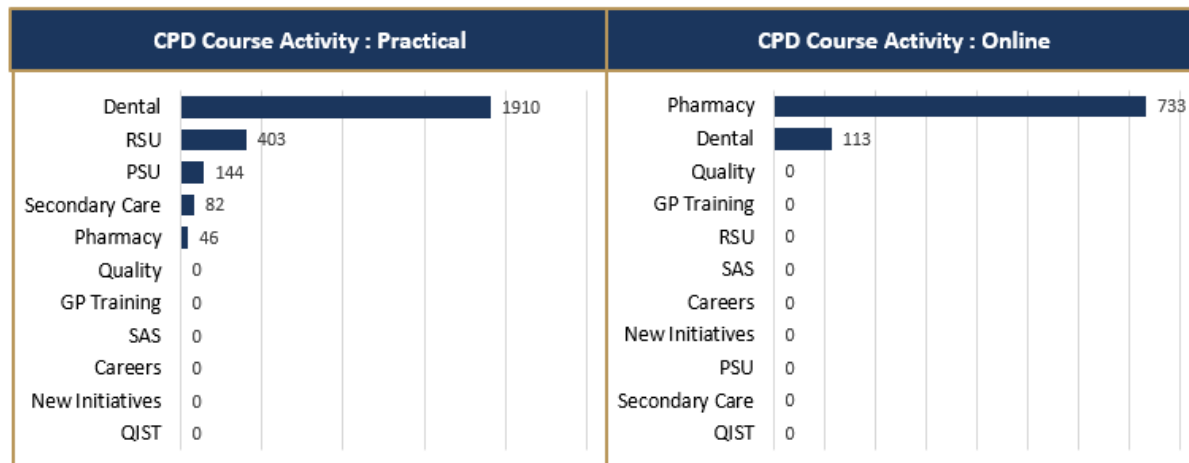
Appendix A – HEIW Performance Report

persistent in nature and as such a closer level of GMC and HEIW oversight is applied. Given this tighter level of scrutiny, it is common for Targeted Visits to be undertaken to these areas, the figures for which, will be reflected within the information provided within chart one above.

Specialty	Site	Health Board	Status
Paediatric Surgery	University Hospital of Wales	Cardiff & Vale	Checking sustainability
Obstetrics & Gynaecology	Royal Glamorgan/Prince Charles	Cwm Taf	Monitoring Progress
Obstetrics & Gynaecology	Princess of Wales	Cwm Taf	Monitoring Progress
Trauma & Orthopaedic Surgery	Morriston Hospital	Swansea Bay	Monitoring Progress
Medicine	Ysbyty Ystrad Fawr	Aneurin Bevan	De-escalated to routine monitoring i.e. This won't be an Enhanced Monitoring issue in the next reporting period.

CPD Course Activity

CPD Course Activity (Nº of People) : Apr-Jun19

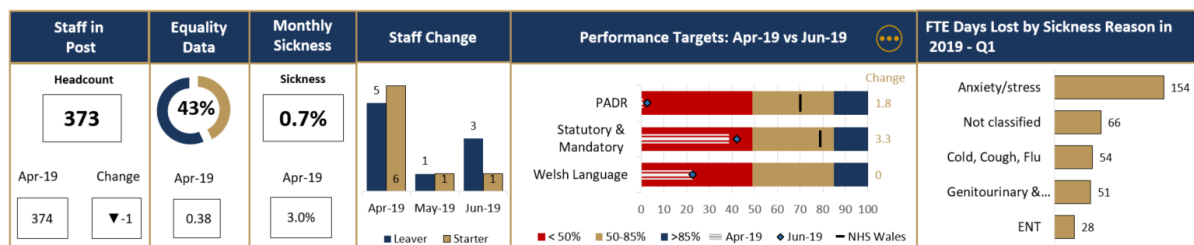


The data is collated manually for this an important indicator of our investment in the professional development of the NHS Wales workforce. However, data collection will be improved in the near future when we implement a centralised course management system.

- Total courses run = 323 with 145 of these being run by the Dental Department.
- Out of the 323 courses run this quarter, 35 were delivered by HEIW staff and 74% of courses delivered by external providers which may be individuals or a specialist company.
- For this quarter, all CPD was delivered via conference, workshops, lectures, hands - on sessions and in practice training, online and distance learning.

Section Four – Corporate Performance

HEIW Performance Metrics



Staff in Post

In June 2019 the headcount for HEIW stands at 373 with the FTE being 203.2. During the period April 2019 to June 2019 (Q1) the headcount decreased by one and there has been an increase in FTE of 0.32. Despite the headcount and FTE remaining similar there has been movement within HEIW. During Q1 there have been eight new starters and nine leavers. Overall HEIW turnover rate for Q1 is 2.4%. Between October 2018 to June 2019

(Q1-3) the turnover rate was 6.8%. Other organisation's 12 months turnover rate varies between 7%-12%.

The table below shows the movement within Directorates

April 2019 – June 2019	Starters	Leavers
Director of Nursing Directorate	3	0
Director of Workforce and OD Directorate	4	2
Executive Office Directorate	1	0
Finance and Corporate Services Directorate	0	2
Medical Director Directorate	0	5
Health Education and Improvement Wales	8	9

Equality Data

HEIW staff have a responsibility to complete the various equality measures. These measures can be completed using Employee Self Service in ESR. The Analytical Team have been working with departments to support staff entering this information.

This table shows the completion percentage of staff as at June 2019

Equality Measure	Complete	Incomplete
Nationality	27%	73%
Ethnic Origin	28%	72%
Religious Belief	34%	66%
Disability	34%	66%
Sexual Orientation	35%	65%
Welsh Language	23%	78%

Overall the completion rate for equality data in HEIW is 43%. Senior Leaders have been reminded of the need to ensure staff are completing this data. The Analytical Team will be developing a departmental league table along with other metrics to monitor equality data going forward.

Monthly Sickness

The monthly sickness percentage has dropped from 3.03% in April 2019 to 0.68% in June 2019. The reduction in sickness is due to low numbers of staff being sick in June and several people coming back from long term sickness between April and June.

The table below shows Long term / Short term

Apr 19 – Jun 19	Days Lost to Sickness	% of Overall Sickness
Long Term Sickness	435	72.6%
Short Term Sickness	164	27.4%

(Long term sickness is 28 days or more)

The most common reason for sickness within HEIW is **Anxiety/Stress/Depression/Other Psychiatric Illnesses**. This reason accounted for 39.6% of all sickness taken during Q1. Over the last three months 11.0% of all sickness is being recorded as '**Other known causes – not elsewhere classified**'. This is the second highest reason for sickness and accounts for between 20% -24% of monthly sickness. It is critical that descriptive reasons for sickness are entered into ESR so that detailed analysis can be performed to address staff needs. During Q3 the People team will be rolling out sickness training to support managers in entering sickness into ESR themselves.

Performance Targets

Every member of staff should have an annual PADR recorded in ESR. As at June 2019 only 2.7% of the workforce (11 individuals) are recorded on ESR as having undertaken a PADR in the last nine months. As a new organisation many of the staff came from external organisations and not that of NHS Wales and as such, did not have sufficient access to the ESR system. There is currently a programme of work in place to support the transition and thus aid in the compliance with the NHS Wales appraisal policy. This rate only shows records entered into ESR so may not give a full picture of actual PADR completion. The NHS Wales' total PADR completion rate is 70%. The People team will shortly be contacting managers to encourage them to record appraisal dates in ESR. Guidance will be circulated and where necessary training offered to support the recording of PADR information.

Statutory & Mandatory Compliance

There are currently 10 Statutory and Mandatory competencies each HEIW employee needs to complete. Overall HEIW has a compliance rate of 43.0% in June 2019, an increase of 4.16% on April 2019. The Medical Director Directorate account for 79% of the total assignments so an improvement in this Directorate would have the biggest impact on HEIW overall figures; it should be noted that this directorate has the largest volume of staff. NHS Wales' total compliance rate is 79%.

The table below shows the compliance rate by Directorate

Statutory & Mandatory % Compliance Rates @ June 2019		% of Workforce
Nursing Directorate	86.4%	3%
Workforce and OD Directorate	75.2%	6%
Executive Office Directorate	53.3%	3%
Finance and Corporate Services Directorate	76.7%	9%
Medical Directorate	34.6%	79%
HEIW	43.0%	100%

Rollout of ESR Self Service Functionality

All HEIW staff have access to Employee Self Service and the rollout of Supervisor Self Service was fully implemented in April 2019 with 100% of all employees having a supervisor held within their assignment. In the coming months HEIW will be introducing Manager Self Service functionality in a phased approach with the aim of complete rollout by March 2020. To support this rollout the Analytical team will be working with the People team to ensure staff receive the necessary training in relation to Self Service functionality.



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

Meeting Date	26 September 2019	Agenda Item	
Report Title	Development of the Board Assurance Framework		
Report Author	Dafydd Bebb, Company Secretary		
Report Sponsor	Dafydd Bebb, Company Secretary		
Presented by	Dafydd Bebb, Company Secretary		
Freedom of Information	Open		
Purpose of the Report	To seek Board approval for the Board Assurance Framework (BAF) – attached at Appendix 1.		
Key Issues	<ul style="list-style-type: none"> • The development of the BAF has been an iterative process with a draft of the document previously being presented to both the Board and the Audit and Assurance Committee (A&AC) for comment. • Going forward BAF shall be presented to the A&AC and the Board on an annual basis. • Regular updates in respect of the BAF shall be provided through the Corporate Risk Register. 		
Specific Action Required <i>(please one only)</i>	Information	Discussion	Assurance
			Approval ✓
Recommendations	<p>Members are asked to:</p> <p>approve the Board Assurance Framework - attached at Appendix 1.</p>		

Board Assurance Framework

1. INTRODUCTION

The purpose of this report is to seek Board approval for Board Assurance Framework (BAF).

2. BACKGROUND

2.1 Board Assurance Framework

The BAF outlines HEIW's framework for supporting good governance and ensuring this is supported by robust systems and processes.

The BAF outlines how the Board will identify and understand the principal risks to achieving its strategic objectives and receive assurance that suitable controls are in place to manage these risks. The BAF will also enable an assessment of the risk(s) to achieving the objectives based on the strength of controls and assurances in place.

The Corporate Risk Register is focussed on the key objectives of HEIW as articulated within the Annual Plan and identifies the principal risks and key controls. Given this the Corporate Risk Register shall be the vehicle for providing regular assurance on the BAF. This will enable the Board and the A&AC to gain assurance about the effectiveness of the controls in place to manage the principal risks associated with HEIW's key objectives.

The BAF shall be subject to an annual review by the Board and the A&AC.

HEIW's draft annual BAF schedule will be as follows:

Action	Executive Lead	Date
Approval of BAF by Board	Board Secretary	Sept.
Population of Risk Register – live document	Board Secretary	Ongoing
Review of BAF by the Board and A&AC	Board Secretary	Once a year
Review of the Risk Register by the Board	Board Secretary	Twice a year
Review of the Risk Register by the A&AC	Board Secretary	Quarterly

3. GOVERNANCE AND RISK ISSUES

It is essential that there is an effective and efficient framework in place to give sufficient, continuous and reliable assurance on organisational stewardship and the

management of the major risks to organisational success and delivery of improved, cost effective, public services.

4. FINANCIAL IMPLICATIONS

No direct financial implications arising from this report. The BAF is a core element of HEIW's corporate governance structure.

5. RECOMMENDATION

Members are asked to approve the Board Assurance Framework - attached at Appendix 1.

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 the Board and its Committees 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.				
Financial Implications				
There are no financial implications.				
Legal Implications (including equality and diversity assessment)				
Ensuring the Board has an effective and evolving BAF that supports the Board in delivering the current one year plan, is an essential component of the Board's Governance arrangements going forward.				
Staffing Implications				
There are no staffing implications.				

Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)	
No impact identified.	
Report History	An update on the development of the BAF was presented at March Board and at the July meeting of the A&AC.
Appendices	Appendix 1 – Draft Board Assurance Framework.

BOARD ASSURANCE FRAMEWORK 2019-20

1 Introduction

All NHS organisations in Wales are required to demonstrate good governance and ensure they are operating robust systems and processes to support this. Boards need to be confident that the systems and processes are operating in a way that is effective and is driving the delivery of objectives by focusing on minimising risk. They need to prove that they have identified their objectives and managed the principal risks to achieving them. The Board Assurance Framework will allow the Board to satisfy this requirement.

It is the responsibility of the Board to:

- Determine and clearly articulate its objectives;
- Identify the principal risks that threaten the achievement of these objectives;
- Agree the key strategic and operational plans that will deliver those objectives and which encompass the controls and actions in place to manage the identified risks;
- Monitor delivery through robust performance and assurance measurements;
- Ensure that plans are in place to take corrective action where they are not assured that objectives will be fully delivered; and
- Engage with and listen to staff.

These requirements form the basis of the Assurance Framework.

2 The Assurance Cycle

The Board will undertake an annual self-assessment of its performance against the three key themes highlighted on the Governance and Accountability Module of HEIW:

Setting the direction;
Enabling delivery; and
Delivering results, achieving excellence.

The assurance system must therefore be designed to ensure that the Board can make this annual assessment. The outcome of this self-assessment is also a fundamental component of the Annual Governance Statement (AGS) which is published each year as part of the annual report and accounts.

Each of the steps on the Assurance Cycle can be explained as follows:

2.1 Priorities for action

The first step in developing a Board Assurance Framework is for the Board to identify the organisation's aims and objectives against which the Board requires assurance. It is necessary for Boards to focus on those that are crucial to the achievement of its overall vision and ambitions.

The aims and objectives of HEIW are:

Strategic Objective 1 - As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand.
Strategic Objective 2 - Building a sustainable and flexible health and care workforce for the future.
Strategic Objective 3. With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.
Strategic Objective 4. Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
Strategic Objective 5. Improving opportunities for use of technology and digitalisation in the delivery of education and care.
Strategic Objective 6. Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales.
Strategic Objective 7. Demonstrating value from investment in the workforce and the organisation.

These aims are currently taken forward through the Annual Plan and from 2019/20 under the Integrated Medium Term Plan.

2.2 Risks

Against each objective the priority the risk(s) which may stop the organisation achieving the objective need to be set out. Main risks are defined as those that threaten the achievement of the organisation's priorities. It is essential that the Board identifies and oversees the main risks, rather than reacting to the consequences of risk exposure. The identification of main risks should be repeated at all levels within the organisation. The Board should ensure it assesses risk(s) as part of the decision making process.

The organisation has a Corporate Risk Register which details the top high level risks for the organisation. The Corporate Risk Register is attached as Appendix 2.

2.3 Controls

Key controls are defined as those controls and systems in place to assist in securing the delivery of the Board's strategic objectives. As part of the assurance process, the Board, through its Committees where appropriate, will need to assess whether current controls are adequate to provide assurance compared with the level of risk; controls must be proportionate to the risks identified.

There is not necessarily a 1:1 relationship between risks and controls, often there may need to be multiple controls in place to mitigate against a particular risk. Some controls will also manage more than one risk. There is not always a neat framework for this and even if controls are in place, consideration needs to be given as to how effective they are.

Examples of key controls are:

- Schemes of delegation
- Policies and procedures
- Performance data
- Financial Management information

2.4 Assurance

Assurance provides Board members with the evidence that HEIW is operating effectively, achieving desired outcomes, delivering on its strategic vision, meeting its strategic objectives through effective risk management, in a manner which upholds the Citizen Centred Principles and is in accordance with all statutory requirements.

The organisation uses a number of methods to obtain assurance through internal and external sources.

Internal assurance methods include:

- The Performance Report;
- internal audit reports;
- counter-fraud reports;
- serious incident reports; and
- the Annual Governance Statement.

A key vehicle for receiving external assurance will be through the Structured Assessment undertaken by the Wales Audit Office, which will be used to inform the annual governance and accountability review. A fuller, more comprehensive list of areas where assurance will be obtained is included in Appendix 1.

A further source for receiving external assurance is ensuring that external reports are reviewed to ensure that external lessons are learnt and embedded within HEIW's policies and procedures.

2.5 Reporting

A framework is in place for reporting key information to the Board and Committees. There is a plan of business to be reported to the Board and Committees and the Corporate Risk Register allows the Board to identify what risks need to be reported upon.

HEIW's Performance Report will provide the Board and Executive Team with a high level summary of performance, particularly in relation to the organisation's priorities for action.

HEIW is also required to produce public disclosure statements as part of the assurance system. The Board Assurance system, as described in this paper, will culminate in the production of the Governance and Accountability Module self-assessment and the Annual Governance Statement. These public disclosure documents together with the Financial Statements and Remuneration Report and other specific disclosures required by the Companies Act, would form the "Chapters" to the Annual Report.

3 Role of Board Committees

The Board may and, where directed by Welsh Ministers must, appoint Committees of the Board 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.

3.1 Audit and Assurance Committee

The Board's Audit and Assurance Committee advises and assures the Board and Accountable Officer on whether effective arrangements are in place to support them in their decision making and in discharging their accountabilities for securing the achievement of HEIW's objectives, in accordance with the standards of good governance determined for the NHS in Wales.

3.2 Education Commissioning and Quality Committee

The Board's Education Commissioning and Quality Committee advises and assures the Board in respect of the Commissioning of Education and the Quality of Education.

3.3 Remuneration and Terms of Service Committee

The Board's Remuneration and Terms of Service Committee is responsible for providing advice and assurance 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. It also provides assurance 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

Appendix 1: Methods of internal and external assurance

Health Education Improvement Wales Board Control Framework

Leadership

Staff

Systems
and
Processes

Finances

Technology

Controls and Assurance Mechanisms

High Quality Education

Controls: evidence within

- Annual Plan
- Commissioning
- Equality Impact Assessment

Assurance: gained via

- Education Commissioning and Quality Committee
- Senior Leadership Team
- Annual Report and Annual Governance Statement
- Chairs Reports
- Visits and inspections.

Performance Management

Controls: evidence within

- Education Commissioning and Quality Committee
- Senior Leadership Team
- Annual Report and Annual Governance Statement
- Chairs Reports
- Visits and inspections.
- Performance Report

Assurance: gained via

- Education Commissioning and Quality Committee
- Senior Leadership Team
- Annual Report and Annual Governance Statement
- Chairs Reports
- Visits and inspections.
- Performance Report

Risk Management

Controls: evidence within

- Risk management strategy and Policy
- Board Assurance Framework
- Corporate Risk Register
- Divisional Risk Register
- Reports to the Board, Senior Leadership Team and sub committees
- Policies and Procedures
- Scheme of

Assurance: gained via

- Escalation arrangements
- Internal/External Audits, visits
- Executive Director and Senior Leadership Team meetings
- Audit and Assurance Committee
- Education Commissioning and Quality Committee

Levels of Assurance

First Line Operational

- Organisational structures – evidence of delegation of responsibility through line Management arrangements
- Compliance with appraisal process
- Compliance with Policies and Procedures
- Incident reporting and thematic reviews
- Compliance with Risk Management processes and systems
- Performance Reports, Complaints and Trainee Experience Reports, Finance Reports



Second Line Risk and Compliance

Reports to Assurance and Oversight Committees

- Audit and Assurance Committee
- Education Commissioning and Quality Committee
- Remuneration Committee
- Health and Safety Groups etc

Findings and/or reports from inspections, Annual Reporting, Performance report through to Committees



Third Line Independent

- Internal Audit Plan
- Wales Audit Office (Structured Assessment)
- External Audits (eg. Annual Accounts and Annual Report)
- HIW Inspections
- Regulators
- Reviews and Reports by Royal Colleges
- External visits and accreditations
- Independent Reviews

Approach to Risk Assessment - Risk scoring

The risks reported within the Board Assurance Framework is broadly consistent with the Corporate Risk Register and are assessed by using the following assessment approach. The Corporate Risk Register focusses on the key objectives of HEIW as outlined in the Annual Plan. Given this regular reporting in respect of the BAF shall be undertaken through the Corporate Risk Register (attached at Appendix 2) which shall be presented to the Board and the Audit and Assurance Committee on a regular basis. The Board Assurance Framework shall be considered by the Board on an annual basis.

Risk Scoring Matrix

LIKELIHOOD	Probable	5	10	15	20	25
	Likely	4	8	12	16	20
	Possible	3	6	9	12	15
	Unlikely	2	4	6	8	10
	Rare	1	2	3	4	5
		Negligible	Minor	Moderate	Major	Critical
		IMPACT				
Level	Colour	Score Range				
Low		1 – 6				
Moderate		7 – 14				
High		15 – 25				

HEIW Corporate Risk Register – September 2019

Ref (Objective)	Risk Description	Inherent Risk			Mitigating Action	Residual Risk			RAG Status	Progress
	Details of risk If...then... impact...	Impact	Probability	Overall Score	Summary of action to date or proposed action to reduce risk impact or proximity	Impact	Probability	Overall Score	R/A/G & trend	
1. Obj. 1	If staff do not integrate effectively as part of the new organisation this could affect delivery of the annual plan commitments resulting in poor performance and reputational damage. JR	4	4	16	<ul style="list-style-type: none"> Co-production with staff of a People and OD strategy by the autumn of 2019 Execs and SLT to maximise opportunities for matrix working, and to encourage staff to work across Culture Champion Group to monitor and feedback Review of structures 1 year on to ensure they support integrated working. 	4	3	12		Work underway across all actions to mitigate this risk. More to be done on use of the physical space within Ty Dysgu as some issues emerging that may be working against better integration. People & OD strategy engagement & development well underway.

Ref (Objective)	Risk Description	Inherent Risk			Mitigating Action	Residual Risk			RAG Status	Progress
	Details of risk If...then... impact...	Impact	Probability	Overall Score	Summary of action to date or proposed action to reduce risk impact or proximity	Impact	Probability	Overall Score	R/A/G & trend	
2. Obj. 1	If the values and behaviours framework is not effectively embedded in the organisation this could impact on morale, engagement and reputation affecting service delivery and reputation. JR	4	3	12	<ul style="list-style-type: none"> Refresh of the action plan for embedding values & behaviours framework into core business People and OD strategy to reinforce the importance and expectations on all staff Response to staff survey is framed in context of our values and behaviours and is seen to be acted upon. 	3	3	9		<p>Work in hand; stock take on progress scheduled for October 2019.</p> <p>Values based appraisal system implemented from April 2019.</p>
3. Obj 1	If the organisation does not have effective programme and project management capacity and expertise this may impact on delivery of the annual plan objectives and result in failure to deliver agreed commitments and levels of performance. JR (DOFCS)	4	3	12	<ul style="list-style-type: none"> Identified as a priority area for training in 2019-20 from initial observations in relation to submission and preparation of project plans to deliver annual plan objectives Training in project management to be sourced and rolled out Skills assessment to be undertaken as part of a HEIW TNA to identify prior learning/expertise Best practice examples to be highlighted and shared. 	3	3	9		Limited progress to date due to capacity. Further discussion with interim DoFCS in coming month.

Ref (Objective)	Risk Description	Inherent Risk			Mitigating Action	Residual Risk			RAG Status	Progress
	Details of risk If...then... impact...	Impact	Probability	Overall Score	Summary of action to date or proposed action to reduce risk impact or proximity	Impact	Probability	Overall Score	R/A/G & trend	
4. Obj 1	If the role and functions of HEIW are not fully understood this may impact on engagement and involvement in delivery of objectives, and lead to a mismatch between ambitions and expectations, and reputational damage. JR	4	3	12	<ul style="list-style-type: none"> Publication of the Comms & engagement strategy and implementation plan early 2019-20 Regular stakeholder bulletins Targeted comms highlighting specific activities and projects Execs and staff to maximise opportunities to engage and spread understanding. 	3	3	9		<p>Strategy published and in place. Regular bulletins being prepared & distributed.</p> <p>End of 1st year events organised and happening in next month, feedback will be sort at these to identify further actions or improvements in engagement methods.</p>
5. Obj 1	If the relationship with the NHS is not effective this will impact on HEIW service delivery and implementation of the annual plan. JR	4	3	12	<ul style="list-style-type: none"> Implementation of the Comms & engagement plan for 2019-20 Regular stakeholder bulletins Execs to be active members of peer networks and national groups Proactive engagement with NHS organisations including as part of the development of our IMTP and through the annual planning cycle Understanding of NHS to continue to be a theme through staff events and training in 2019. 	3	3	9		<p>See above. Plus, all execs are now regularly attending peer networks. Opps to support national programmes are clear and allocated to key individuals within the organisation</p> <p>Engagement with NHS orgs has been built into our IMTP process for this year.</p>

Ref (Objective)	Risk Description	Inherent Risk			Mitigating Action	Residual Risk			RAG Status	Progress
	Details of risk If...then... impact...	Impact	Probability	Overall Score	Summary of action to date or proposed action to reduce risk impact or proximity	Impact	Probability	Overall Score	R/A/G & trend	
6. Obj 1	If the interface with WG is not clear this could impact on delivery and reputation, and could undermine a good relationship with WG. AH	5	4	20	<ul style="list-style-type: none"> Regular 1:1s with DG Regular 1:1s with policy leads Quality and delivery meetings start on 23 September Regular JET meetings Agreed plans and remit letter. 	4	3	12		Quality and Delivery meetings commence on 23 September which will provide a regular forum for addressing the interface, reducing the probability of this risk.

Ref (Objective)	Risk Description	Inherent Risk			Mitigating Action	Residual Risk			RAG Status	Progress
	Details of risk If...then... impact...	Impact	Probability	Overall Score	Summary of action to date or proposed action to reduce risk impact or proximity	Impact	Probability	Overall Score	R/A/G & trend	
7. Obj 1	If HEIW budgets have been established without a full understanding of the resources needed to deliver the functions this could result in poor financial performance. EW	4	3	12	<ul style="list-style-type: none"> Budget Acceptance letters will be issued to Execs for the delegated resources within their area of responsibility. Finance support will be given to budget holders to support service delivery within budgets available. Regular financial monitoring information will be provided to Board, Executive Team and all budget holders that should enable corrective action to be taken. 	2	2	4		Good progress has been made in taking forward the mitigating actions.

Ref (Objective)	Risk Description	Inherent Risk			Mitigating Action	Residual Risk			RAG Status	Progress
	Details of risk If...then... impact...	Impact	Probability	Overall Score	Summary of action to date or proposed action to reduce risk impact or proximity	Impact	Probability	Overall Score	R/A/G & trend	
8. Obj 1	If HEIW doesn't have sufficient capacity & capability, there is a risk of delay in clearing the job evaluation backlog/appointing to remaining vacancies in the organisational structure, with a consequent impact on delivery of plans and objectives. JR	5	4	20	This requires: <ul style="list-style-type: none"> Additional short term HR capacity to be secured by HEIW to support the initial peak in recruitment & HR activity over the next 6 -12 months Substantive recruitment to be progressed to HR roles asap. Prioritisation of work for People team including recruitment activity. Investment in training managers across HEIW in job evaluation and job design Trade Union partners to agree to support local JE panels. 	4	3	12		Substantive recruitment to permanent HR roles is being progressed; selection of managers have been trained to undertake online recruitment processes and/or be panel members; one additional temporary member of staff recruited Internal job evaluation panels commenced in March and will run regularly in the coming months with support from staff representatives Prioritisation agreed, regular meetings in place with Head of People & OD Team.

Ref (Objective)	Risk Description	Inherent Risk			Mitigating Action	Residual Risk			RAG Status	Progress
	Details of risk If...then... impact...	Impact	Probability	Overall Score	Summary of action to date or proposed action to reduce risk impact or proximity	Impact	Probability	Overall Score	R/A/G & trend	
9. Obj. 1	If Staff do not comply with Welsh Language Legislation, then HEIW could be subject to Welsh Language Commissioner Investigations and ultimately a potential pecuniary fine , reputational damage and decrease in staff morale. Instructing external translators is currently challenging due to increased demand for their work. DB	4	5	20	<ul style="list-style-type: none"> Set up staff group to increase awareness and address concerns of generic staff groupings Set up ongoing Communication and Engagement programme to highlight specific risk areas with solutions Identify 10 highest risk areas and report regularly against these Set up training and awareness sessions against the highest areas of risk Proposals presented to the NHS's Heads of Communication Group in respect of improving translation provision. 	4	2	8		Progress being made to embed the Welsh Language Policy within HEIW.

Ref (Objective)	Risk Description	Inherent Risk			Mitigating Action	Residual Risk			RAG Status	Progress
	Details of risk If...then... impact...	Impact	Probability	Overall Score	Summary of action to date or proposed action to reduce risk impact or proximity	Impact	Probability	Overall Score	R/A/G & trend	
10. Obj. 1	If students are unhappy with receiving an invoice to repay part or all of their NHS Bursary it could cause significant financial and emotional harm to the individuals. It could also be a source of adverse publicity for HEIW SG	4	4	16	<ul style="list-style-type: none"> • HEIW to work with professional bodies and student groups • Develop a clear communication plan • Clarify T&C of the contract renewal • Develop sensitive processes to deal with the requests for reimbursement 	3	4	12		Procedures and protocols are being developed and a paper is being written outlining the processes and options for consideration by the Exec Team.

Ref (Objective)	Risk Description	Inherent Risk			Mitigating Action	Residual Risk			RAG Status	Progress
	Details of risk If...then... impact...	Impact	Probability	Overall Score	Summary of action to date or proposed action to reduce risk impact or proximity	Impact	Probability	Overall Score	R/A/G & trend	
11. Obj. 1	<p>Shortfall in recruitment to all Dental Foundation Training posts resulting in:</p> <ul style="list-style-type: none"> unfilled posts mainly in one Health Board area where there is already a shortage of dentists Unallocated training practices may consider redundancy of Dental Nurses <p>Disengagement and lack of future commitment of Educational Supervisors. This could mean insufficient approved Educational Supervisors for subsequent years</p>	5	3	15	<p>HEIW have agreed with Welsh Government to support those Dental Foundation Training practices without a Foundation Dentist for the 2019 / 2020 training year via a choice of options. Preferred options needs to be submitted to HEIW by the end of August to ensure appropriate funding is allocated</p> <p>Workforce development/communications/ careers engagement is required within HEIW to address this risk going forward re short term and long term strategy</p>	5	2	10		<p>15/08/2019 Offer sent to all training practices WG HEIW communication to relevant HB CEOs</p>

Ref (Objective)	Risk Description	Inherent Risk			Mitigating Action	Residual Risk			RAG Status	Progress
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12. Obj 2	If current approaches to professional boundaries remain this will affect HEIW's ability to transform approaches to workforce planning, development and education. SG/PM	4	4	16	<ul style="list-style-type: none"> HEIW Execs to be an active member of executive peer groups Ensure learning opportunities are multi-professional Ensure the HEIW annual plan includes areas of work which challenge professional boundaries, e.g. promotion of delegation guidelines, Development of advanced practice/extended skills, roll out behavioural science approach etc. 	3	3	9		Actively engaging with Peer groups and through HEIW work programme to influence and challenge.
13. Obj. 2	If the quality of postgraduate medical education is not maintained this could impact on patient safety and quality as well as recruitment into education programmes in Wales. PM	3	3	9	<ul style="list-style-type: none"> Maintained previous levels of scrutiny by methods sanctioned by the GMC Engage with GMC to review QA process and act as pilot site for review. Ensure effective communication of high risk areas to CEO and MDs of Health Boards and Trust. 	3	3	9	Ongoing risk Core Business	GMC QA Pilot ongoing HEIW training role related to recent issues in one Health Board communicated to all CEOs, CMO and CNO.

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14. Obj.2	If universities review their provision of UG programmes and determine to withdraw from the market this will impact on HEIWs ability to deliver commissioned numbers and impact on workforce planning for NHS Wales. SG	4	4	16	<ul style="list-style-type: none"> Ensure active communication with HEI to understand their priorities and challenges Through the contracting process work with universities to ensure they are adequately funded for the programmes Work with education providers to determine what other alternatives are possible . 	3	3	9		HEIW engaging with universities and al current programmes will continue to be delivered until 2022 as a minimum. The work surrounding the new contract and "lotting" strategy should minimise this risk beyond 2022.
15. Obj.2	If the Welsh Government change the NHS Bursary Policy for 2021/22 and beyond it could impact on student recruitment and the supply of healthcare staff to deliver patient care. SG	4	4	16	<ul style="list-style-type: none"> Keep in regular contact with the Welsh Government and provide any assistance they require Update the university sector on Governments thinking as this develops Monitor student uptake of the NHS bursary. 	3	4	12		WG confirmed continuation of bursary for 2020/21 pending long term decision in autumn 2019. HEIW engaging with stakeholders to inform them of this position.

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16. Obj.2	If the Strategic Review of Health Professional Education does not meet the timescale and future aspirations as agreed by HEIW, this will impact on the quality and suitability of education in the future. SG	5	3	15	<ul style="list-style-type: none"> Ensure robust project management arrangements are in place Secure additional resource for the project Ensure robust stakeholder engagement Ensure it links to the 10 year health and social care workforce strategy. 	4	3	12		On the 18.6.2019, the Welsh Government announced a further engagement process prior to making a decision on the long-term bursary position. Therefore, HEIW will be unable to continue with its agreed procurement timeline and new education provision will not be in place until 2022 at the earliest. Revised plans are being developed to account for this.
17. Obj.2	If Pharmacy business case for preregistration pharmacists is not implemented this could impact on Effective training of these students and adversely impact on the reputation of HEIW. PM	3	3	9	<ul style="list-style-type: none"> Make effective plans within HEIW and with stakeholders to ensure capacity is created within the Pharmacy Deanery. Create a project plan with robust milestones for delivery. 	3	2	6		Project Lead appointed Clear Plan with milestones established.

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18. Obj. 2	<p>Following GP trainee business case for increasing GP trainees to 160, if we do not identify sufficient training facilities and provide effective training, this could adversely impact on the reputation of HEIW.</p> <p>If GP educational supervisor role is not covered by the GMPI (Indemnity) Scheme, as this only covers claims relating to clinical negligence, then the supervisor role may not have appropriate insurance cover in place. PM</p>	4	3	12	<ul style="list-style-type: none"> We have actively sought applications for training practices. We have created a framework for selection GP indemnity issue flagged to NWSSP and WG. 	4	2	8		<p>We have had sufficient applications so far.</p> <p>Awaiting response from NWSSP and WG re solution to indemnity issue.</p>

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	Details of risk If...then... impact...	Impact	Probability	Overall Score	Summary of action to date or proposed action to reduce risk impact or proximity	Impact	Probability	Overall Score	R/A/G & trend	
19. Obj.2	If Welsh Government does not accept the recommendations within the annual Education and Training Plan for 2020/21 it could impact on the future supply of the healthcare workforce and directly impact on the quality of patient care. SG	4	3	12	<ul style="list-style-type: none"> Ensure the annual plan is robust and evidence based Ensure the annual education training plan reflects priorities which are reflected in the 10 year workforce strategy Liaise with Welsh Government so they are sighted in advance on the possible level of investment required. 	3	3	9		Plan endorsed by CEO, NHS NEB and HEIW Board, submitted to WG 24.7.2019 and now await response from Minister.
20. Obj.2	Apprenticeship Frameworks If Welsh Government do not provide a means for the newly developed health qualifications to be recognised within Apprenticeship frameworks, health care staff will continue to undertake outdated qualifications as part of their apprenticeship. SG	3	4	12	<ul style="list-style-type: none"> Working with WG to develop for health apprenticeships to be revised and updated. 	3	3	9		Group set up. Right staff engaged and processes being updated.

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21. Obj 3	If the relationship with Social Care Wales is not effective, then this could impact on delivery of key priorities for A Healthier Wales, and in particular the delivery of the workforce strategy which is a high-profile commitment. AH	4	3	12	<ul style="list-style-type: none"> Joint exec team and joint Board meetings twice a year 1:1 meetings between CEOs Joint steering group for development and delivery of the health & care workforce strategy, as well as underpinning operational management groups. 	3	3	9		Agree actions continue.
22. Obj 3	If the Workforce Strategy for Health and Social Care does not meet expectations this will impact on reputation and future delivery. JR	4	4	16	<ul style="list-style-type: none"> Joint steering group chaired by CEOs Clear project plan and reporting Additional capacity in terms of consultants Significant engagement periods built into the programme to develop ownership, buy-in and understanding. 	4	3	12		Actively engaging with partners, stakeholders and staff. Significant activity underway during consultation phase. Project on course.

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23. Obj 5	If the loss of Eduroam portal provision following transition out of Cardiff University is not addressed by an effective replacement, it will impact on trainees and trainers ability to undertake and complete appropriate training through a dedicated internet connection. Risk of reputational risk to Wales and Welsh offer. AH	5	4	20	<ul style="list-style-type: none"> WG and NWIS aware of the issue and working on an amendment to GOVROAM to address our needs and the specific authentication requirements which were previously facilitated by Cardiff University. We are continuing to monitor and press WG for a solution, and will escalate to the CEO NHS Wales as appropriate Communications with trainees and trainers are being handled through consistent messaging Positive meetings facilitated with NWIS and JISC to highlight the benefits and added value Eduroam provides over GOVROAM . 	4	3	12		<p>CEO held meeting with Director of NWIS and WG to agree position and actions on 2 July. Following consultation with WG and NWIS we are engaging with Eduroam with a view to entering into a new Eduroam license.</p> <p>NWIS completed and have approved infrastructure design to support Eduroam rollout.</p> <p>Awaiting build of servers to support authentication. Planned testing and confirmation of go live date due end September/Early October depending on time taken to build infrastructure.</p>

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24. Obj 6	If there is a delay in producing the leadership strategy this could result in contradictory approaches being developed across Wales which will detract from an all Wales approach and create obstacles to implementation. JR	3	3	9	<ul style="list-style-type: none"> HEIW lead in post and making progress, additional team member recruited. SCW lead identified Project plan in place Steering group established and will meet next month. Significant engagement to date in health sector within Wales and across UK, also literature review and identification of models which will continue. Comms & engagement will support the activity 	3	2	6		Significant amount of activity to date. Steering group up and running. Project milestones being met
25. Obj 7	If there is no agreement on the future arrangements for allocation of SIFT this could undermine HEIW's ability and levers to redesign education.	5	3	15	<ul style="list-style-type: none"> Work closely with WG colleagues to progress SIFT discussions Participate in the development of proposals for the future allocation of SIFT Use lessons and experience from across UK to inform plans Ensure that the plans are confirmed and agreed prior to transfer to HEIW. 	5	2	10		This is discussed as a regular item during interface meetings with WG No progress on this to date.

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26. Remit Letter	If 80 new DN are not recruited to NHS Wales by summer 2020 it could affect plans for strengthening primary and community services. SG	4	4	16	<ul style="list-style-type: none"> Revisit original plan agreed with WG Meeting with WG on the 22.7.2019 Review projected expenditure and develop additional options Discuss with DON to raise profile and gain support Continue to work with Health Boards to encourage an increased uptake. 	4	3	12		Meetings and correspondence over the summer indicate progress towards the target.

Risk Scoring Matrix

LIKELIHOOD	Probable	5	10	15	20	25
	Likely	4	8	12	16	20
	Possible	3	6	9	12	15
	Unlikely	2	4	6	8	10
	Rare	1	2	3	4	5
		Negligible	Minor	Moderate	Major	Critical
IMPACT						

Level	Colour	Score Range
Low		1 – 6
Moderate		7 – 14
High		15 – 25

HEIW Strategic Objectives – Annual Plan 2019-20

Strategic Objective 1 - As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand.
Strategic Objective 2 - Building a sustainable and flexible health and care workforce for the future.
Strategic Objective 3. With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.
Strategic Objective 4. Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
Strategic Objective 5. Improving opportunities for use of technology and digitalisation in the delivery of education and care.
Strategic Objective 6. Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales.
Strategic Objective 7. Demonstrating value from investment in the workforce and the organisation.



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

Meeting Date	26 September 2019	Agenda Item	4.4
Report Title	Corporate Risk Register		
Report Author	Dafydd Bebb, Board Secretary		
Report Sponsor	Dafydd Bebb, Board Secretary		
Presented by	Dafydd Bebb, Board Secretary		
Freedom of Information	Open		
Purpose of the Report	To provide the Board with an update on the Corporate Risk Register.		
Key Issues	<p>The report :</p> <ul style="list-style-type: none"> • provides an update on the current position in relation to the Corporate Risk Register which is attached at Appendix 1; • confirms the three risk previously assessed as 'red' have been downgraded to amber; • confirms Corporate Risk Register is aligned with the objectives set out in the Annual Plan for 19/20 and any other areas of inherent risk; • provides an update on the process for removing green status risks from the Corporate Risk Register. 		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
			✓
Recommendations	Members are asked to note for Assurance the current position with regard to the Corporate Risk Register as attached at Appendix 1.		

CORPORATE RISK REGISTER

1. INTRODUCTION

The Board is asked to note the current position with regard to the Corporate Risk Register as outlined within this report.

2. BACKGROUND

The Corporate Risk Register is aligned with the objectives set out in the Annual Plan for 19/20 and any other areas of inherent risk.

Each risk within the Corporate Register is allocated to a specific Annual Plan or Remit letter objective in the left hand column.

It is confirmed the Corporate Risk Register continues to be reviewed on a monthly basis by the Executive Team and Senior Leadership Team.

Assessment

The methodology for assessing risk is contained within Appendix 1. There are 26 risks on the corporate risk register. There are currently no red risks, 23 amber risks and three green risks.

Three previously red risks have been downgraded to amber. These changes are for the following reasons:

- **Risk 6:** The risk in respect of engagement with Welsh Government has mainly been downgraded as the quality and delivery meetings are about to take place. Nevertheless, this area will be reassessed after the risk and engagement meeting.
- **Risk 23:** Eduroam. This has been downgraded to amber due to the significant process made in respect of acquiring and organising the Eduroam Portal.
- **Risk 26:** Recruiting 80 District Nurses. This has been downgraded as meetings and correspondence over the summer indicate progress towards the target.

Managing Green Status Risks

It is confirmed that once a risk receives a Green RAG status the Green status will be reported once within a Corporate Risk Register reporting cycle and then removed. The relevant reporting cycle for this purpose shall be that of the Audit and Assurance Committee. This is because it is on a quarterly basis and the Committee has more time allocated for scrutiny on this subject matter than the Board.

3. GOVERNANCE AND RISK ISSUES

Risk management through the Corporate Risk Register is a core tool for the governance of risk within HEIW.

4. FINANCIAL IMPLICATIONS

Risk management through the Corporate Risk Register is a core function of HEIW as a Special Health Authority. There are no anticipated additional cost implications.

5. RECOMMENDATION

The Board is asked to note the note for **Assurance** the current position with regard to the Corporate Risk Register as attached at Appendix 1.

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				
The Corporate Risk Register is the core tool to ensure effective risk management within HEIW. A robust approach to the management of risk is more likely to impact favourably on the safety and experience of patients and staff.				
Financial Implications				
Risk management is a core function of HEIW as a Special Health Authority. There are no anticipated additional costs.				
Legal Implications (including equality and diversity assessment)				
N/A				
Staffing Implications				
The Corporate Risk Register is a Core function of HEIW. There are no additional staffing implications.				
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)				
The Corporate Risk Register is HEIW's core tool to manage risk going forward.				

Report History	The Risk Register is presented to the Audit and Assurance Committee on a quarterly basis and is presented to Board twice a year.
Appendices	The Corporate Risk Register is attached at Appendix 1.

HEIW Corporate Risk Register - September 2019

Ref (Objective)	Risk Description	Inherent Risk			Mitigating Action	Residual Risk			RAG Status	Progress
	Details of risk If...then... impact...	Impact	Probability	Overall Score	Summary of action to date or proposed action to reduce risk impact or proximity	Impact	Probability	Overall Score	R/A/G & trend	
1. Obj. 1	If staff do not integrate effectively as part of the new organisation this could affect delivery of the annual plan commitments resulting in poor performance and reputational damage. JR	4	4	16	Co-production with staff of a People and OD strategy by the autumn of 2019 Execs and SLT to maximise opportunities for matrix working, and to encourage staff to work across Culture Champion Group to monitor and feedback Review of structures 1 year on to ensure they support integrated working.	4	3	12		Work underway across all actions to mitigate this risk. More to be done on use of the physical space within Ty Dysgu as some issues emerging that may be working against better integration. People & OD strategy engagement & development well underway.
2. Obj. 1	If the values and behaviours framework is not effectively embedded in the organisation this could impact on morale, engagement and reputation affecting service delivery and reputation. JR	4	3	12	Refresh of the action plan for embedding values & behaviours framework into core business People and OD strategy to reinforce the importance and expectations on all staff Response to staff survey is framed in context of our values and behaviours and is seen to be acted upon.	3	3	9		Work in hand; stock take on progress scheduled for October 2019. Values based appraisal system implemented from April 2019.

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3. Obj 1	If the organisation does not have effective programme and project management capacity and expertise this may impact on delivery of the annual plan objectives and result in failure to deliver agreed commitments and levels of performance. JR (DOFCS)	4	3	12	Identified as a priority area for training in 2019-20 from initial observations in relation to submission and preparation of project plans to deliver annual plan objectives Training in project management to be sourced and rolled out Skills assessment to be undertaken as part of a HEIW TNA to identify prior learning/expertise Best practice examples to be highlighted and shared.	3	3	9		Limited progress to date due to capacity. Further discussion with interim DoFCS in coming month.
4. Obj 1	If the role and functions of HEIW are not fully understood this may impact on engagement and involvement in delivery of objectives, and lead to a mismatch between ambitions and expectations, and reputational damage. JR	4	3	12	Publication of the Comms & engagement strategy and implementation plan early 2019-20 Regular stakeholder bulletins Targeted comms highlighting specific activities and projects Execs and staff to maximise opportunities to engage and spread understanding.	3	3	9		Strategy published and in place. Regular bulletins being prepared & distributed. End of 1 st year events organised and happening in next month, feedback will be sort at these to identify further actions or improvements in engagement methods.

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5. Obj 1	If the relationship with the NHS is not effective this will impact on HEIW service delivery and implementation of the annual plan. JR	4	3	12	Implementation of the Comms & engagement plan for 2019-20 Regular stakeholder bulletins Execs to be active members of peer networks and national groups Proactive engagement with NHS organisations including as part of the development of our IMTP and through the annual planning cycle Understanding of NHS to continue to be a theme through staff events and training in 2019.	3	3	9		See above. Plus, all execs are now regularly attending peer networks. Opps to support national programmes are clear and allocated to key individuals within the organisation Engagement with NHS orgs has been built into our IMTP process for this year.
6. Obj 1	If the interface with WG is not clear this could impact on delivery and reputation, and could undermine a good relationship with WG. AH	5	4	20	Regular 1:1s with DG Regular 1:1s with policy leads Quality and delivery meetings start on 23 September Regular JET meetings Agreed plans and remit letter.	4	3	12		Quality and Delivery meetings commence on 23 September which will provide a regular forum for addressing the interface, reducing the probability of this risk.

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7. Obj 1	If HEIW budgets have been established without a full understanding of the resources needed to deliver the functions this could result in poor financial performance. EW	4	3	12	Budget Acceptance letters will be issued to Execs for the delegated resources within their area of responsibility. Finance support will be given to budget holders to support service delivery within budgets available. Regular financial monitoring information will be provided to Board, Executive Team and all budget holders that should enable corrective action to be taken.	2	2	4		Good progress has been made in taking forward the mitigating actions.

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8. Obj 1	If HEIW doesn't have sufficient capacity & capability, there is a risk of delay in clearing the job evaluation backlog/appointing to remaining vacancies in the organisational structure, with a consequent impact on delivery of plans and objectives. JR	5	4	20	This requires: Additional short term HR capacity to be secured by HEIW to support the initial peak in recruitment & HR activity over the next 6 -12 months Substantive recruitment to be progressed to HR roles asap. Prioritisation of work for People team including recruitment activity. Investment in training managers across HEIW in job evaluation and job design Trade Union partners to agree to support local JE panels.	4	3	12		Substantive recruitment to permanent HR roles is being progressed; selection of managers have been trained to undertake online recruitment processes and/or be panel members; one additional temporary member of staff recruited Internal job evaluation panels commenced in March and will run regularly in the coming months with support from staff representatives Prioritisation agreed, regular meetings in place with Head of People & OD Team.

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9. Obj. 1	If Staff do not comply with Welsh Language Legislation, then HEIW could be subject to Welsh Language Commissioner Investigations and ultimately a potential pecuniary fine , reputational damage and decrease in staff morale. Instructing external translators is currently challenging due to increased demand for their work. DB	4	5	20	Set up staff group to increase awareness and address concerns of generic staff groupings Set up ongoing Communication and Engagement programme to highlight specific risk areas with solutions Identify 10 highest risk areas and report regularly against these Set up training and awareness sessions against the highest areas of risk Proposals presented to the NHS's Heads of Communication Group in respect of improving translation provision.	4	2	8		Progress being made to embed the Welsh Language Policy within HEIW.

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10. Obj. 1	If students are unhappy with receiving an invoice to repay part or all of their NHS Bursary it could cause significant financial and emotional harm to the individuals. It could also be a source of adverse publicity for HEIW SG	4	4	16	HEIW to work with professional bodies and student groups Develop a clear communication plan Clarify T&C of the contract renewal Develop sensitive processes to deal with the requests for reimbursement	3	4	12		Procedures and protocols are being developed and a paper is being written outlining the processes and options for consideration by the Exec Team.

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11. Obj. 1	Shortfall in recruitment to all Dental Foundation Training posts resulting in: unfilled posts mainly in one Health Board area where there is already a shortage of dentists Unallocated training practices may consider redundancy of Dental Nurses Disengagement and lack of future commitment of Educational Supervisors. This could mean insufficient approved Educational Supervisors for subsequent years	5	3	15	HEIW have agreed with Welsh Government to support those Dental Foundation Training practices without a Foundation Dentist for the 2019 / 2020 training year via a choice of options. Preferred options needs to be submitted to HEIW by the end of August to ensure appropriate funding is allocated Workforce development/communications/ careers engagement is required within HEIW to address this risk going forward re short term and long term strategy	5	2	10		15/08/2019 Offer sent to all training practices WG HEIW communication to relevant HB CEOs
12. Obj 2	If current approaches to professional boundaries remain this will affect HEIW's ability to transform approaches to workforce planning, development and education. SG/PM	4	4	16	HEIW Execs to be an active member of executive peer groups Ensure learning opportunities are multi-professional Ensure the HEIW annual plan includes areas of work which challenge professional boundaries, e.g. promotion of delegation guidelines, Development of advanced practice/extended skills, roll out behavioural science approach etc.	3	3	9		Actively engaging with Peer groups and through HEIW work programme to influence and challenge.

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13. Obj. 2	If the quality of postgraduate medical education is not maintained this could impact on patient safety and quality as well as recruitment into education programmes in Wales. PM	3	3	9	Maintained previous levels of scrutiny by methods sanctioned by the GMC Engage with GMC to review QA process and act as pilot site for review. Ensure effective communication of high risk areas to CEO and MDs of Health Boards and Trust.	3	3	9	Ongoing risk Core Business	GMC QA Pilot ongoing HEIW training role related to recent issues in one Health Board communicated to all CEOs, CMO and CNO.
14. Obj.2	If universities review their provision of UG programmes and determine to withdraw from the market this will impact on HEIW's ability to deliver commissioned numbers and impact on workforce planning for NHS Wales. SG	4	4	16	Ensure active communication with HEI to understand their priorities and challenges Through the contracting process work with universities to ensure they are adequately funded for the programmes Work with education providers to determine what other alternatives are possible .	3	3	9		HEIW engaging with universities and al current programmes will continue to be delivered until 2022 as a minimum. The work surrounding the new contract and "lotting" strategy should minimise this risk beyond 2022.

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15. Obj.2	If the Welsh Government change the NHS Bursary Policy for 2021/22 and beyond it could impact on student recruitment and the supply of healthcare staff to deliver patient care. SG	4	4	16	Keep in regular contact with the Welsh Government and provide any assistance they require Update the university sector on Governments thinking as this develops Monitor student uptake of the NHS bursary.	3	4	12		WG confirmed continuation of bursary for 2020/21 pending long term decision in autumn 2019. HEIW engaging with stakeholders to inform them of this position.
16. Obj.2	If the Strategic Review of Health Professional Education does not meet the timescale and future aspirations as agreed by HEIW, this will impact on the quality and suitability of education in the future. SG	5	3	15	Ensure robust project management arrangements are in place Secure additional resource for the project Ensure robust stakeholder engagement Ensure it links to the 10 year health and social care workforce strategy.	4	3	12		On the 18.6.2019, the Welsh Government announced a further engagement process prior to making a decision on the long-term bursary position. Therefore, HEIW will be unable to continue with its agreed procurement timeline and new education provision will not be in place until 2022 at the earliest. Revised plans are being developed to account for this.

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17. Obj.2	If Pharmacy business case for preregistration pharmacists is not implemented this could impact on Effective training of these students and adversely impact on the reputation of HEIW. PM	3	3	9	Make effective plans within HEIW and with stakeholders to ensure capacity is created within the Pharmacy Deanery. Create a project plan with robust milestones for delivery.	3	2	6		Project Lead appointed Clear Plan with milestones established.

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18. Obj. 2	<p>Following GP trainee business case for increasing GP trainees to 160, if we do not identify sufficient training facilities and provide effective training, this could adversely impact on the reputation of HEIW.</p> <p>If GP educational supervisor role is not covered by the GMPI (Indemnity) Scheme, as this only covers claims relating to clinical negligence, then the supervisor role may not have appropriate insurance cover in place. PM</p>	4	3	12	<p>We have actively sought applications for training practices. We have created a framework for selection</p> <p>GP indemnity issue flagged to NWSSP and WG.</p>	4	2	8		<p>We have had sufficient applications so far.</p> <p>Awaiting response from NWSSP and WG re solution to indemnity issue.</p>

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19. Obj.2	If Welsh Government does not accept the recommendations within the annual Education and Training Plan for 2020/21 it could impact on the future supply of the healthcare workforce and directly impact on the quality of patient care. SG	4	3	12	Ensure the annual plan is robust and evidence based Ensure the annual education training plan reflects priorities which are reflected in the 10 year workforce strategy Liaise with Welsh Government so they are sighted in advance on the possible level of investment required.	3	3	9		Plan endorsed by CEO, NHS NEB and HEIW Board, submitted to WG 24.7.2019 and now await response from Minister.
20. Obj.2	Apprenticeship Frameworks If Welsh Government do not provide a means for the newly developed health qualifications to be recognised within Apprenticeship frameworks, health care staff will continue to undertake outdated qualifications as part of their apprenticeship. SG	3	4	12	Working with WG to develop for health apprenticeships to be revised and updated.	3	3	9		Group set up. Right staff engaged and processes being updated.

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22. Obj 3	If the Workforce Strategy for Health and Social Care does not meet expectations this will impact on reputation and future delivery. JR	4	4	16	Joint steering group chaired by CEOs Clear project plan and reporting Additional capacity in terms of consultants Significant engagement periods built into the programme to develop ownership, buy-in and understanding.	4	3	12		Actively engaging with partners, stakeholders and staff. Significant activity underway during consultation phase. Project on course.

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Ref (Objective)	Risk Description	Inherent Risk			Mitigating Action	Residual Risk			RAG Status	Progress
	Details of risk If...then... impact...	Impact	Probability	Overall Score	Summary of action to date or proposed action to reduce risk impact or proximity	Impact	Probability	Overall Score	R/A/G & trend	
25. Obj 7	If there is no agreement on the future arrangements for allocation of SIFT this could undermine HEIW's ability and levers to redesign education.	5	3	15	Work closely with WG colleagues to progress SIFT discussions Participate in the development of proposals for the future allocation of SIFT Use lessons and experience from across UK to inform plans Ensure that the plans are confirmed and agreed prior to transfer to HEIW.	5	2	10		This is discussed as a regular item during interface meetings with WG No progress on this to date.
26. Remit Letter	If 80 new DN are not recruited to NHS Wales by summer 2020 it could affect plans for strengthening primary and community services. SG	4	4	16	Revisit original plan agreed with WG Meeting with WG on the 22.7.2019 Review projected expenditure and develop additional options Discuss with DON to raise profile and gain support Continue to work with Health Boards to encourage an increased uptake.	4	3	12		Meetings and correspondence over the summer indicate progress towards the target.

Risk Scoring Matrix

LIKELIHOOD	Probable	5	10	15	20	25
	Likely	4	8	12	16	20
	Possible	3	6	9	12	15
	Unlikely	2	4	6	8	10
	Rare	1	2	3	4	5
		Negligible	Minor	Moderate	Major	Critical
		IMPACT				

Level	Colour	Score Range
Low		1 – 6
Moderate		7 – 14
High		15 – 25

HEIW Strategic Objectives – Annual Plan 2019-20

Strategic Objective 1 - As a new organisation establishing HEIW as a valued and trusted partner, an excellent employer and a reputable and expert brand.
Strategic Objective 2 - Building a sustainable and flexible health and care workforce for the future.
Strategic Objective 3. With Social Care Wales shaping the workforce to deliver care closer to home and to better align service delivery.
Strategic Objective 4. Improving quality and safety by supporting NHS organisations find faster and more sustainable workforce solutions for priority service delivery challenges.
Strategic Objective 5. Improving opportunities for use of technology and digitalisation in the delivery of education and care.
Strategic Objective 6. Reinvigorating leadership development and succession planning across health and social care in partnership with Social Care Wales and Academi Wales.
Strategic Objective 7. Demonstrating value from investment in the workforce and the organisation.



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

Meeting Date	26 September 2019		Agenda Item	4.5
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&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">the Future Ways of Working (detailed in para 2.1 below);that the A&AC be directed to consider the attached SOs which have been amended to incorporate the Future Ways of Working;that the EC&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 <ul style="list-style-type: none">that the proposed Future Ways of Working be subject to review in 12 months.			

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.

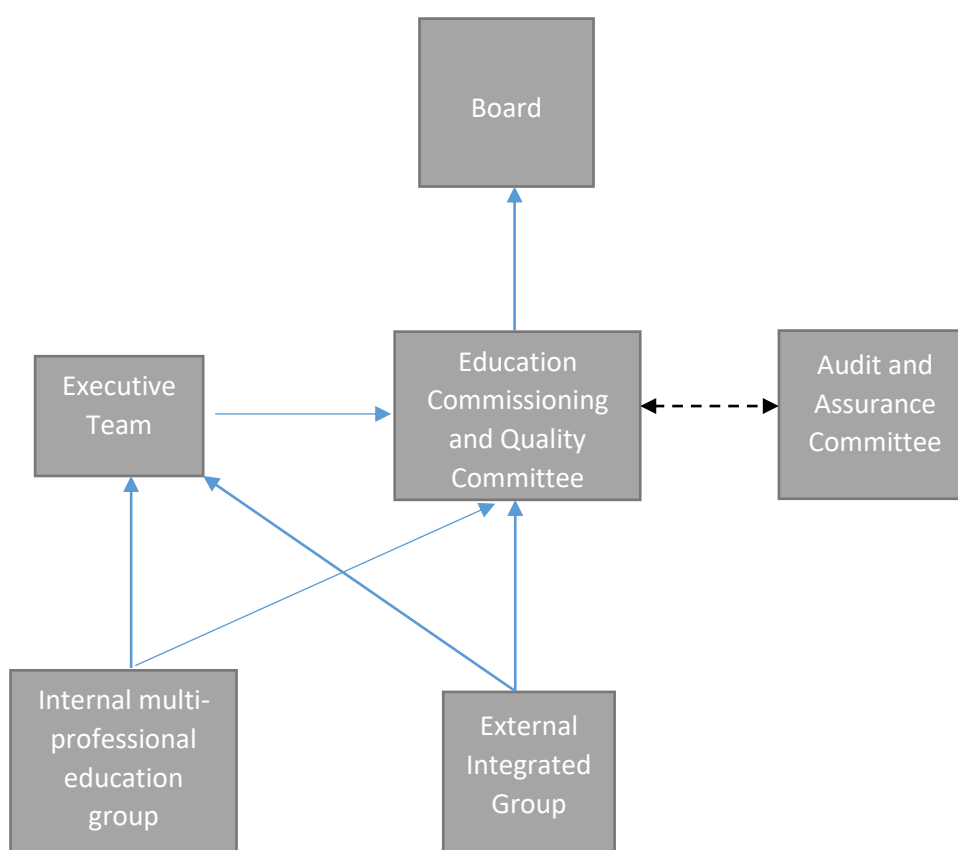
The communication strategy of HEIW will need to consider how it will enhance the overall approach to commissioning.

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 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 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.	
Financial Implications	
There are no direct financial implications.	
Legal Implications (including equality and diversity assessment)	
There are no direct legal implications.	
Staffing Implications	
There are no direct staffing implications.	
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)	
n/a	
Report History	The Future Ways of Working were considered at the August BDS.
Appendices	Appendix 1 - Draft HEIW Standing Orders amended to include the approach outline within the Future Ways of Working.



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/

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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/. 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

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 a 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 1st 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; and
- Remuneration and Terms of Service

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 30th 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 with¹ 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.

¹ 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.

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 gifts² 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.
- 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

²The term gift refers also to any reward or benefit.

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'³ 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:

³ 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.

- 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 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 organisations 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.

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all of which form part of HEIW's Standing Orders.

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 BOARD¹

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	Approve, vary and amend: <ul style="list-style-type: none"> • Standing Orders (SOs); • Standing Financial Instructions (SFIs);

1 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

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			<ul style="list-style-type: none"> • Schedule of matters reserved to HEIW; • Scheme of delegation to Committees and others; and • Scheme of delegation to Officers. <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
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

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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.
18	FULL	ORGANISATION STRUCTURE & STAFFING	Ratify appointment, discipline and dismissal of the Chief Executive
1	FULL	ORGANISATION STRUCTURE & STAFFING	Approve the appointment, discipline and dismissal of the Executive Directors and any other Board level appointments
18	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
19	FULL	ORGANISATION STRUCTURE & STAFFING	Approve, review, and revise HEIW's top level organisation structure and corporate policies

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20	FULL	ORGANISATION STRUCTURE & STAFFING	Appoint, review, revise and dismiss Board committees, including any joint committees directly accountable to the Board
21	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
22	FULL	ORGANISATION STRUCTURE & STAFFING	Appoint, equip, review and (where appropriate) dismiss individuals appointed to represent the Board on outside bodies and groups
23	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

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"> • Workforce and Organisational Development • Health education and training; • Research/evaluation; • Quality of education and training programmes; • Leadership and career development for staff within NHS Wales; • Workforce transformation & improvement; • Infrastructure, including IM &T, Estates and Capital; • Supporting delivery of 'A Healthier Wales including development of a high level strategic workforce plan for Wales in partnership with Social Care Wales.
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.
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
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37	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)
38	FULL	PERFORMANCE & ASSURANCE	Receive the annual opinion of HEIW's Chief Internal Auditor and approve action required, including improvement plans
39	FULL	PERFORMANCE & ASSURANCE	Receive the annual audit report from HEIW's external auditor and approve action required, including improvement plans
40	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
41	FULL	REPORTING	Approve HEIW's Reporting Arrangements, including reports on activity and performance to partners and stakeholders and nationally to the Welsh Government
42	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 OTHERS³

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

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.

³ 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

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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
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
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 with Universities	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;***
 - ***Equality and Human Rights Policy***
 - ***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/. 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.

Standard Terms of Reference and Operating Arrangements for all Committees of the Board	
Date: 1 October 2018	Version: Draft 1.0
Review Date: Annually	
<p>1. Introduction:</p> <p>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”.</p> <p>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:</p> <ul style="list-style-type: none"> • Audit & Assurance; and • Remuneration and Terms of Service. <p>This document includes content common to all committees and should be read alongside the specific terms of reference and operating arrangements for each committee.</p> <p>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.</p>	
<p>2. Authority:</p> <p>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,</p>	

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/Groups⁴

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.

6. Reporting and Assurance Arrangements:

Each Committee Chair shall:

- bring to the Board's specific attention any significant matters under consideration by their Committee

⁴ 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.

- 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.

Terms of Reference and Operating Arrangements Audit and Assurance Committee

Date: 1 October 2018

Review Date: Annually

1. Introduction

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 **Audit and Assurance Committee**.

The detailed 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 committees.

2. Purpose

The purpose of the Audit and Assurance 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, 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
- Where appropriate, the Committee will **advise** the Board and the Chief Executive on where, and how, its systems and assurance framework may be strengthened and developed further
- **Approve** on behalf of the Board policies, procedures and other written control documents in accordance with the Scheme of Delegation

3. Delegated Powers

With regard to its role in providing advice to the Board, the Committee will comment specifically on the:

- 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:
 - 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:⁵

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.

⁵ 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

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.

Remuneration and Terms of Service Committee Terms of Reference and Operating Arrangements	
Date: 1 October 2018	Version: Draft 1.0
Review Date: Annually	
1. Introduction <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>	
2. Purpose <p>The purpose of the Remuneration and Terms of Service Committee ("the Committee") is to provide:</p> <ul style="list-style-type: none"> • advice 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 • assurance 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. <p>The Committee shall have no powers to exercise on behalf of the Board.</p>	

3. Delegated Powers

With regard to its role in providing advice and assurance to the Board, the Committee will comment specifically upon the:

- 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
- objectives for Executive Directors and members of the Executive Team and their performance assessment
- performance management system in place for those in the positions mentioned above and its application
- 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.

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 include 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.

The Committee will review these Terms of Reference after its initial six months.



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

Meeting Date	26 September 2019	Agenda Item	4.6
Report Title	Welsh Language Policy - Update		
Report Author	Huw Owen, Welsh Language Services Manager		
Report Sponsor	Dafydd Bebb, Board Secretary		
Presented by	Dafydd Bebb, Board Secretary		
Freedom of Information	Open		
Purpose of the Report	To provide an update on the progress made in implementing our Welsh Language Policy since adoption at May Board and outline where we stand regarding the imposition of Standards Regulations.		
Key Issues	<ul style="list-style-type: none"> • Progress has been made on a number of issues • Where we stand in relation to coming under Standards Regulations – and which set will be applied to us. 		
Specific Action Required <i>(please one only)</i>	Information	Discussion	Assurance
	✓		
Recommendations	Members are asked to note the report for information.		

Welsh Language Policy

1. INTRODUCTION

The purpose of this report is to inform the Board on progress on our Welsh Language Policy and to update them on where we stand in relation to coming under Standards Regulations.

2. BACKGROUND

2.1 Welsh Language Policy

We have made significant progress to date against the Welsh Language Policy agreed in May's Board meeting.

As well as organising numerous training sessions and information bulletins against various Standards, we have also;

1. established baseline numbers of GP's wishing to undergo their appraisal process with us through the medium of Welsh (approximately 20%+ of respondents);
2. gathered detailed information of the Welsh language training needs of Community Pharmacists (25% of all Community Pharmacist within Wales have requested support in learning Welsh);
3. made further progress in our discussions with the National Centre for Learning Welsh in coming up with sustainable blended learning solutions;
4. we are expecting around 20 staff to receive Welsh language lesson this year.

2.2 Welsh Language Standards and Imposition

The Welsh Language Commissioner has indicated to us that consideration is being given for HEIW to come under Standards Regulations set 2 (those applying to National Bodies).

HEIW will work with both the Welsh Government and the Welsh Language Commissioner to ensure that the most appropriate Welsh Language Standards are applied to us as an organisation.

3. GOVERNANCE AND RISK ISSUES

Non-compliance with any Standard can result in (considerable) Management time being taken up with answering an Investigation by the Welsh Language Commissioner, possible monetary fines (up to £5000 per individual breach), and reputational damage.

4. FINANCIAL IMPLICATIONS

Non-compliance can result in monetary fines. There are no other immediate financial implications.

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				
The quality of our Welsh language services reflect on us as a body operative throughout Wales.				
Financial Implications				
There are no financial implications, other than those noted at points 3 and 4 above.				
Legal Implications (including equality and diversity assessment)				
Ensuring that the organization has a robust Welsh Language Policy supports the workforce in delivering an effective bilingual service to those areas of Wales where doing so has better clinical and training outcomes, as well as helping attract more Welsh people into Health and Care roles. It also allows us to maximise the likelihood of remaining compliant with Welsh Language legislation.				
Staffing Implications				
There are no staffing implications.				
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)				
Enacting this policy directly addresses two of the seven goals of the Well-being Act - Wales of cohesive communities and A Wales of vibrant culture and thriving Welsh Language.				
Report History	The Welsh Language Policy was approved at the May Board meeting.			
Appendices	None.			



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

Meeting Date	26 September 2019	Agenda Item	4.7
Report Title	Committee Chair's Report – Audit and Assurance Committee		
Report Author	Kay Barrow, Corporate Governance Manager		
Report Sponsor	Dafydd Bebb, Board Secretary		
Presented by	Gill Lewis, Chair		
Freedom of Information	Open		
Purpose of the Report	The purpose of the report is to outline discussions undertaken by the Audit and Assurance Committee.		
Key Issues	<p>This report focuses on the key issues raised at the Audit and Assurance Committee meeting held on 15 July 2019.</p> <p>The Board is asked to note the summary from the Chair for assurance.</p>		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
			✓
Recommendations	Members of the Board are asked to note the report for Assurance.		

Committee Chair's Report – Audit and Assurance Committee

1. INTRODUCTION

The purpose of the report is to provide an update on matters considered by the Audit and Assurance 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. 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 Audit and Assurance Committee Chair's summary of the meeting held on 15 July 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.

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 the Board carries out its business appropriately through its Committees and aligned with its standing orders is a key factor in the quality, safety and experience of patients receiving care.				
Financial Implications				
No financial implications for the Board to be aware of.				
Legal Implications (including equality and diversity assessment)				
It is essential that the Board complies with its standing orders, which includes receiving updates from its committees.				
Staffing Implications				
No staffing implications for the Board to be aware of.				
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)				
The report outlines work undertaken by the Committee to review the short term performance and finance of HEIW as well as focussing on the longer term sustainability. The governance structure aims to identify issues early to prevent escalations and the Committee integrates into the overall Board arrangements.				
Report History	This report shall be a standing item on the Board's agenda.			
Appendices	Appendix 1: Chair's summary - Audit and Assurance Committee.			

Appendix 1

Meeting Date	26 September 2019	Agenda Item	4.7
Freedom of Information Status	Open		
Reporting Committee	Audit and Assurance Committee		
Report Author	Dafydd Bebb, Board Secretary		
Chaired by	Gill Lewis, Independent Member		
Lead Executive Director	Eifion Williams, Interim Director of Finance		
Date of last meeting	15 July 2019		
Summary of key matters considered by the committee and any related decisions made:			
Month 3 Financial Position: The Committee noted the month 3 financial position which was a year to date underspend of £55k. This was a prudent position based on an assumed expenditure, predominantly due to delays with the receipt of invoices from some commissioning bodies.			
The Committee received an update in relation to the Finance Project Plan developed as part of the transition arrangements and establishment of the HEIW finance function. It was clarified that an All Wales Technical Accounting (TAG) Financial Control Procedure Task & Finish Group was reviewing FCPs across Wales with the aim of developing a national suite of FCPs. The Committee was pleased to see the progress and that the remaining areas were expected to be completed by November 2019.			
Wales Audit Office (WAO) Annual Plan 2019/20: An update on progress against the WAO Annual Plan, the wider work relevant to HEIW and the Good Practice Exchange was received. The Committee welcomed the new reporting format which was to be adopted for all future WAO progress reporting.			
The Committee noted that the WAO was to revisit the preparedness of Wales for a 'no deal' Brexit over the summer, and the increased interest of the Public Accounts Committee (PAC) regarding Counter Fraud arrangements in the Welsh public sector following the Landscape Review undertaken by WAO on behalf of the PAC.			
The Committee noted that HEIW had accepted the majority of the recommendations within the WAO Management Letter . However, Recommendation 8 had only been partially accepted as a full review was to be undertaken in relation to the cases identified.			
Baseline Review – Structured Assessment: The Committee requested that an assessment against the Baseline Review be undertaken, to determine if any relevant matters needed to be taken forward as part of the Work Programmes of the relevant Committees.			
Internal Audit Progress Report: The Committee noted that the additional follow up Workforce Review had been added to the Internal Audit Plan for 2019/20 following the discussion held at the previous meeting. The Freedom of Information			

audit that had been scheduled for Q4 had been brought forward to align with the review being undertaken at all Health Organisations in Q2. Following the discussion at the Committee relating to cyber security, Internal Audit agreed to look at this aspect as part of the scope and objectives of the Data Protection audit due to take place later in the financial year.

Values and Behaviours Framework Internal Audit Report: The Committee was pleased with the overall assessment of Reasonable Assurance but had some concerns regarding the report findings which conflicted with the positive Staff Event that had taken place on 19 June 2019. The Committee received clarification that the audit fieldwork had taken place prior to the Staff Event and that a significant amount of work had been undertaken to integrate the staff from the three former organisations.

Health and Safety Internal Audit Report: The Committee received the audit report which had achieved an overall assessment of Reasonable Assurance and highlighted a number of areas of good practice.

Audit Recommendations Tracker: The Committee considered the 25 recommendations contained within the Tracker and agreed that those actions that had been assessed as 'Green' and fully completed could be removed. Following discussion, the Committee agreed that the growth of the Tracker, in terms of the number of recommendations it contained, would be kept under review.

The Committee received an update on progress against the **Counter Fraud Annual Work Plan** and noted that 3 awareness sessions were planned in July and August with the Finance and Senior Leadership Teams.

The Committee welcomed the introduction of a regular **Counter Fraud Newsletter** that would be issued on a quarterly basis and the sharing of **Lessons Learnt** that demonstrated the closing of the loop when a process weakness is identified.

The Committee received an update in relation to the development of the **Board Assurance Framework** which sets out the basic foundations of assurance. Further work was to be undertaken in relation to mechanisms of assurance and, particularly those that feed into the Committees.

Declarations of Interest Register: The Committee received the formal record of interests declared by Board members. For completeness the Committee asked for sight of the full Declarations of Interest Register at the next meeting.

The Committee received and noted the **Gifts, Hospitality and Sponsorship Register**.

The Committee considered the **Corporate Risk Register** and asked that the Executive Team review each risk on the Risk Register to determine its appropriateness as a risk to the organisational objectives in terms of clarity of its impact and how it is being addressed.

The Committee received an update in relation to compliance with **Information Governance** principles relating to the General Data Protection Regulation/UK Data Protection Act 2018. An Information Governance Work Plan and more detailed report to be provided at the next Committee meeting.

Contract Register: The Committee was update in relation to contract management and the development of the Contract Register. The Committee requested that the contract approval process align to the Scheme of Delegation and that the Contract Register be presented at the next Committee.

Update from the Education, Commissioning and Quality Committee Development Session: The Committee received feedback from the extra ordinary meeting of the Education, Commissioning and Quality Committee that had been convened to discuss the governance relationships between both Committees and the Board, particularly in relation to commissioning and the interaction of both the Committees and their Terms of Reference. A formal report was to be presented to the August Board Development Session.

Key risks and issues/matters of concern of which the Board needs to be made aware:

The Committee considered the **Risk Management Policy** and, in recommending the Policy to the Board for approval, is requesting that the Board consider further its position in relation to its risk appetite.

Delegated action by the Committee

n/a

Main sources of information received

Finance Update
WAO Annual Plan Update
WAO Management Letter
Baseline Review - Structured Assessment
Internal Audit Annual Plan Update
Values and Behaviours Framework Internal Audit Report
Health and Safety Internal Audit Report
Audit Recommendations Tracker
Counter Fraud Work Plan Update
Counter Fraud Quarterly Newsletter
Counter Fraud Lessons Learnt
Declarations of Interest Register
Gifts, Hospitality and Sponsorship Register
Annual Review of Financial Control Procedures
Risk Management Policy
Corporate Risk Register
Information Governance Update
Contract Register Update
Update from the Education, Commissioning and Quality Committee Development Session on its Terms of Reference

Highlights from sub-groups reporting into this committee

n/a

Matters referred to other Committees

None identified.



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

Meeting Date	26 September 2019	Agenda Item	4.8
Report Title	Matters reported In-Committee		
Report Author	Kay Barrow, Corporate Governance Manager		
Report Sponsor	Dafydd Bebb, Board Secretary		
Presented by	Dafydd Bebb, Board Secretary		
Freedom of Information	Open		
Purpose of the Report	To set out key issues discussed at the In-Committee Board Meeting held on 18 July 2019.		
Key Issues	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 18 July 2019.		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
	✓		
Recommendations	Members are asked to: <ul style="list-style-type: none"> Note the report for information. 		

DECISIONS MADE DURING THE IN-COMMITTEE BOARD MEETINGS ON 18 JULY 2019

1. INTRODUCTION

The purpose of the report is to report on items considered by the in-committee Board meetings on 18 July 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 18 July 2019**:

- **Chair’s Report** – The Board received a verbal update from the Chair and the following actions were agreed:
 - The Chief Executive to provide feedback following her meeting regarding Cwm Taf Morgannwg University Health Board maternity issues at the August Board Development Session.
 - Board Secretary to bring a Paper to the Board in response to the Quality Bill and normalising the role of the Vice Chair.
 - The Chair to discuss progress with ‘A Healthier Wales’, specifically relating to workforce matters, with the Minister.
- **Chief Executive’s Report** – The Board received a verbal update from the Deputy Chief Executive and the following actions were agreed:
 - Independent Members to support the recruitment process for the Director of Finance and Corporate Services by circulating the advert via their networks.
 - Add debt Recovery of Bursary Monies to the Corporate Risk Register.
 - The Chair to raise the bursary position with the Minister.
- **Business Case – International Recruitment** – The Board considered the Business Case and:
 - Agreed that up to four members of HEIW should go to India and confirmation of the exact number be provided.

- Agreed to explore the potential for HEIW becoming the GMC approved sponsoring body for International Medical Graduates in Wales.
 - Agreed to explore the feasibility of single employer status as described in the HEIW Annual Plan and extend to also include IMG Doctors.
 - Agreed to explore supporting reciprocal arrangements internationally as part of the wider international recruitment strategy
 - Agreed to be kept informed in relation to the BAPIO recruitment progress.
- **Performance Report** – The Board considered the report and:
 - Agreed that the 'Live' Performance Dashboard be presented to the August Board Development Session.
 - Requested that the scope for performance reporting cycles to be changed to 2-monthly and co-ordinated with Board reporting be explored.
 - **Key issue report from the In-Committee Audit and Assurance Committee** – The key issues report on recent Audit Committee meetings held on 29 May 2019 was considered and noted for assurance.
 - **Key issue report from the In-Committee Education Commissioning and Quality Committee** – A report on key issues discussed at a recent meeting of the Education, Commissioning and Quality Committee held on 1 July 2019 was considered and noted for assurance.
 - **Update on Settlement for a Former Member of Staff** – The Board noted the matter had now been resolved.

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.				
Financial Implications				
There are no direct resource implications related to this report. However, any resource implications would have been detailed in the original requests for ratification.				
Legal Implications (including equality and diversity assessment)				
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.				
Staffing Implications				
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.				
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)				
There are no direct implications on the Act. However, specific impact, where relevant, will have been considered within individual reports referenced within this update.				
Report History	This report is provided at each meeting of the Board.			
Appendices	None.			



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

Meeting Date	26 September 2019	Agenda Item	5.1
Report Title	Update on Welsh Government Document Schedules		
Report Author	Kay Barrow, Corporate Governance Manager		
Report Sponsor	Dafydd Bebb, Company Secretary		
Presented by	Dafydd Bebb, Company Secretary		
Freedom of Information	Open		
Purpose of the Report	To provide the Board with a schedule of Welsh Government wider policy related documentation.		
Key Issues	To ensure that HEIW is informed on the wider NHS Wales related documentation.		
Specific Action Required (please one only)	Information	Discussion	Assurance
			✓
Recommendations	Members are asked to: <ul style="list-style-type: none"> • Note the content of the report. 		

Update on Welsh Government Document Schedules

1. INTRODUCTION

This paper presents for the Board, a list of the Welsh Health Circulars issued by Welsh Government which is attached as Appendix 1.

2. BACKGROUND

The Board, at its meeting held in July 2019, discussed HEIW's relationship with NHS Wales and, in particular, the interface with Welsh Government. Following discussion, the Board requested that the Board Secretary explore an effective way to share a schedule of Welsh Government wider policy related documentation.

3. GOVERNANCE AND RISK ISSUES

It is essential that HEIW is informed on the wider NHS Wales related documentation to ensure that HEIW priorities and strategic objectives are aligned with those of Welsh Government.

4. FINANCIAL IMPLICATIONS

No direct financial implications arising from this report.

5. RECOMMENDATION

Members are asked to note the content of the report.

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				
There is no impact on quality, safety or patient experience.				
Financial Implications				
There are no financial implications identified.				

Legal Implications (including equality and diversity assessment)	
There are no legal implications identified.	
Staffing Implications	
There are no staffing implications identified.	
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)	
No impact identified.	
Report History	N/A
Appendices	Appendix 1 – List of Welsh Health Circulars: 1 February 2019 to 31 July 2019.

WELSH HEALTH CIRCULAR



Llywodraeth Cymru
Welsh Government

Issue Date: 07/08/2019

STATUS: INFORMATION

CATEGORY: INFORMATION GOVERNANCE

Title: List of Welsh Health Circulars - 1 February 2019 – 31 July 2019

Date of Review

For Action by:

Action required by: None

Sender: David Williams, HSS Operations Team, Welsh Government

DHSS Welsh Government Contact(s) :
HSS Operations Team, Welsh Government
0300 258183
E-mail: HSSOperationsTeam@gov.wales

Enclosure(s): None

Dear Colleague

1. Please find below for your information the list of Welsh Health Circulars covering the period 1 February 2019 to 31 July 2019. The circulars were re-introduced in September 2014 to replace the ministerial and health professional letters.
2. Copies of the circular can be viewed on either the Welsh Government or HOWIS websites which can be accessed via the following links:-

Welsh Government:

<https://gov.wales/health-circulars>

HOWIS:

<http://extranet.wales.nhs.uk/howis/whcirculars.cfm?filter=2014>

David Williams
HSS Operations Team

Circular Number	Title	Issued by	Issued by Directorate	Date of Issue
WHC/2019/003	List of Welsh Health Circulars - 1 August 2018 – 31 January 2019	David Williams	HSS Operations Team	15/02/2019
WHC/2019/004	Statutory and Administrative Financial Duties of Health Education and Improvement Wales	Jackie Salmon	Finance	06/03/2019
WHC/2019/005	Maintaining continuity of supply of medicines in the event of leaving the European Union in a 'no deal' scenario	Andrew Evans	Primary Care	05/02/2019
WHC/2019/006	NHS Wales National Clinical Audit and Outcome Review Plan Annual Rolling Programme for 2019/20	Dr Frank Atherton	Public Health	09/05/2019
WHC/2019/007	Annual Quality Statement 2018 / 2019 Guidance	Jan Firby	Population Healthcare	13/02/2019
WHC/2019/008	Changes to the shingles immunisation programme from 1 April 2019	Dr Frank Atherton	Public Health	14/02/2019
WHC/2019/009	Awaiting Publication			
WHC/2019/010	Awaiting Publication			
WHC/2019/011	Implementing Recommendations of the Review of Sexual Health Services – Action to Date and	Dr Frank Atherton	Public Health	06/03/2019
WHC/2019/012	Implementation of OBS Cymru (Obstetric Bleeding Strategy for Wales), a management strategy for Postpartum Haemorrhage (PPH), in Maternity Services	Jean White	Nursing	09/04/2019
WHC/2019/013	2019/20 LHB & Trust Monthly Financial Monitoring Return Guidance	Alan Brace	Finance	12/04/2019
WHC/2019/014	Dispute Arbitration Process - Guidance for Disputed Debts (invoices and service agreements) within NHS Wales - 2019/20 – 2020/21	Alan Brace	Finance	12/04/2019
WHC/2019/015	The National Influenza Immunisation Programme 2019-2020	Dr Frank Atherton	Public Health	16/04/2019
WHC/2019/016	European Parliamentary Elections 23 May 2019	Andrew Goodall	HSS Operations Team	30/04/2019
WHC/2019/017	Living with Persistent Pain in Wales Guidance	Dr Frank Atherton	Population Healthcare	07/05/2019
WHC/2019/018	Augmentative and Alternative Communication (AAC) Pathway	Ruth Crowder	Primary Care and Health Science	06/06/2019
WHC/2019/019	AMR & HCAI Improvement Goals for 2019-20	Dr Frank Atherton	Population Healthcare	09/07/2019
WHC/2019/020	Changes to the Human Papillomavirus (HPV) Immunisation Programme from the Academic School Year Starting September 2019	Dr Frank Atherton	Public Health	17/06/2019
WHC/2019/021	The Role of the Community Dental Service and Services for Vulnerable People	Colette Bridgman	Primary Care and Health Science	23/07/2019

WHC/2019/022	Awaiting Publication			
WHC/2019/023	Update of Guidance on Clearance and Management of Healthcare Workers Living with a Bloodborne Virus (BBV)	Dr Frank Atherton	Public Health	25/07/2019
WHC/2019/024	Pertussis – occupational vaccination of healthcare workers	Dr Frank Atherton	Public Health	30/07/2019