Bundle Bwrdd AaGIC (Agored) 26 September 2019

AGENDA

September Agenda HEIW (Open) (F) V4 cyf cym med 19.docx

1 RHAN 1 - MATERION RHAGARWEINIOL

1.1 Croeso a Chyflwyniadau

1.2 Ymddiheuriadau am absenoldeb

1.3 Datgan buddiannau

1.4 Stori Gwella – Cytundeb Hyfforddi Cymru Gyfan

1.4(W) - Briefing Paper for Board - MTA(SecCareUG) cyf med 19.docx

1.5 Derbyn a chadarnhau cofnodion y cyfarfod cyffredinol blynyddol a gynhaliwyd ar 18 Gorffennaf 2019

1.5(W) - Cofnodion Ddrafft CCB 2019 (Agored) V3 - cyf.docx

1.6 Derbyn a chadarnhau cofnodion y Bwrdd a gynhaliwyd ar 18 Gorffennaf 2019

1.6(W) - Cofnodion Ddrafft y Bwrdd 18 Gorff 20.09.19 V3 (2) - cyf.docx

1.7 Log Gweithredu

1.7(W) - July Board Action Log _2019-07-18 (Open) V4. cyf med 19.docx

1.8 Materion yn Codi

2 RHAN 2 - ADRODIADAU'R GADAIR A'R PRIF WEITHREDWR

2.1 Adroddiad y Gadair

2.1(W) - Chairman's Report - Sept Board cyf med 19.docx

2.2 Adroddiad y Prif Weithredydd

2.2(W) - Ceo report sept APdocx (002) (F).cyf med 19.docx

3 RHAN 3 - EITEMAU STRATEGOL

3.1 Y diweddaraf am y Strategaeth Arweinyddiaeth ar gyfer Iechyd a Gofal Cymdeithasol

3.1(W) - Leadership Succession Planning PB cyf medi 19.docx

3.2 Gofal Sylfaenol Brys y Tu allan i Oriau - y diweddaraf am faterion y gweithlu

3.2 (W) - Diweddariad am Wasanaethau Gofal Sylfaenol y Tu allan i Oriau Brys cyf med 19.docx

3.3 Diweddariad ar Ddatblygiad IMTP

3.3a(W) - PB medi IMTP Dev Upd cyf medi 19.docx

3.3b - Annex 1 - IMTP Development Strategic Aims & Themes Presentation.pptx

3.4 Achos Busnes Hyfforddeion Sylfaen

3.4a(W) - HEIW Board Report Foundation Business Case Sept 2019 cyf medi 19.docx

3.4b - Appendix 1 - Foundation Review and Business Case.docx

4 RHAN 4 - LLYWODRAETHU, PERFFORMIAD A SICRWYDD

4.1 Adroddiad Cyllid

4.1a - (Cymraeg) medi Cyf Cyllid (F) 19.docx

4.1b - Appendix 1 - Month 05-HEIW-Monitoring Return Tables -Day 9.pdf

4.1c - Appendix 2 - Finance Board Paper.docx

4.2 Adroddiad Perfformiad

4.2a(W) - 2019-09-26 - HEIW Performance Cover Report cyf med 19.docx

4.2b - 2019-09-26 - Appendix A - Performance Report.docx

4.3 Fframwaith Sicrwydd y Bwrdd

4.3(W) - FfSB (BAF) 20.09.19.docx

4.3b - BOARD ASSURANCE FRAMEWORK Appendix 1 (Draft)_.docx

4.4 Cofrestr Risg Corfforaethol

4.4a(W) - Cofrestr Risg Corfforaethol (F)_.docx

4.4b - Appendix to Corporate Risk Register (September) (F 16.09.19).docx

4.5 Ffyrdd o Weithio yn y Dyfodol – y Pwyllgor Addysg, Comisiynu ac Ansawdd

4.5a(W) - Pwyllgor Addysg - (F 20.09.19)_ (002).docx

4.5b - Appendix 1 - Draft Standing Orders (Sep Board).doc

4.6 Y Diweddaraf am Bolisi Iaith Gymraeg

4.6(W) - Polisi y Gymraeg 20.09.19_ (002).docx

4.7 I dderbyn adroddiadau ar y materion allweddol gan:

4.7.1 - Pwyllgor Archwilio a Sicrwydd a gynhaliwyd ar 15 Gorffennaf 2019

4.7a(W) - Chair Key Issue report -Audit_Assurance_Committee_2019-07-15 (Open) cyf medi 19.docx

4.7b - AAC Chair Key Issue Report (Open) Appendix 1.docx

4.8 Penderfyniadau Mewn-Pwyllgor

4.8(W) - in committee decisions from july board cyf med 19.docx

5 RHAN 5 - ER GWYBODAETH

5.1 Diweddariad am Amserlenni Dogfen Llywodraeth Cymru – Er Gwybodaeth

5.1a(W) - medi Welsh Gov Doc Scheds cyf medi 19.docx

5.1b - Appendix 1 - WHC 2019 025 - Rhestr o Gylchiythyrau Iechyd Cymru - 1 Chwefror 2019 hyd 31 Gorffennaf 2019 (Welsh).pdf

6 RHAN 6 - MATERION ERAILL

6.1 Unrhyw Fusnes Ar Fyrder Arall

6.2 Crynodeb o'r Camau Allweddol

6.3 Dyddiadau'r cyfarfodydd nesaf

Addysg a Gwella Iechyd Cymru (AaGIC)

Cyfarfod y Bwrdd - 10.00am-1.00pm

i'w gynnal ar ddydd Iau, 26 Medi 2019
yn yr Ystafell Gynadledda, Tŷ Dysgu, Nantgarw

AGENDA

RHAN 1	**MATERION RHAGARWEINIOL**	**10.00-10.30**
1.1	Croeso a Chyflwyniadau	Cadair/Ar Lafar
1.2	Ymddiheuriadau am absenoldeb	Cadair/Ar Lafar
1.3	Datgan buddiannau	Cadair/Ar Lafar
1.4	Stori Gwella – Cytundeb Hyfforddi Cymru Gyfan	Dr Anton Saayman, Is-Ddeon (Cymorth Addysg i Raddedigion a Hyfforddiant Sgiliau Gwella Ansawdd)
1.5	Derbyn a chadarnhau cofnodion y cyfarfod cyffredinol blynyddol a gynhaliwyd ar 18 Gorffennaf 2019	Cadair/ Atodiad
1.6	Derbyn a chadarnhau cofnodion y Bwrdd a gynhaliwyd ar 18 Gorffennaf 2019	Cadair/ Atodiad
1.7	Log Gweithredu	Cadair/ Atodiad
1.8	Materion yn Codi	Cadair/Ar Lafar
RHAN 2	**ADRODDIADAU'R GADAIR A'R PRIF WEITHREDWR**	**10.30-10.50**
2.1	Adroddiad y Gadair	Cadair/ Atodiad
2.2	Adroddiad y Prif Weithredydd	Prif Weithredydd/ Atodiad
RHAN 3	**EITEMAU STRATEGOL**	**10.50-11.50**
3.1	Y diweddaraf am y Strategaeth Arweinyddiaeth ar gyfer Iechyd a Gofal Cymdeithasol	Cyfarwyddwr y Gweithlu a DG/ Atodiad
3.2	Gofal Sylfaenol Brys y Tu allan i Oriau - y diweddaraf am faterion y gweithlu	Prif Weithredydd/ Atodiad
3.3	Diweddariad ar Ddatblygiad IMTP	Cyfarwyddwr y Gweithlu a DG/ Atodiad
3.4	Achos Busnes Hyfforddeion Sylfaen	Cyfarwyddwr Meddygol/ Atodiad

RHAN 4	**LLYWODRAETHU, PERFFORMIAD A SICRWYDD**	**11.50-12.50**
4.1	Adroddiad Cyllid	Dirprwy Gyfarwyddwr Rheoli Ariannol / Atodiad
4.2	Adroddiad Perfformiad	Cyfarwyddwr y Gweithlu a DG/ Atodiad
4.3	Fframwaith Sicrwydd y Bwrdd	Ysgrifennydd y Bwrdd/ Atodiad
4.4	Cofrestr Risg Corfforaethol	Ysgrifennydd y Bwrdd/ Atodiad
4.5	Ffyrdd o Weithio yn y Dyfodol – y Pwyllgor Addysg, Comisiynu ac Ansawdd	Ruth Hall (Cadair Pwyllgor Comisiynu ac Ansawdd Addysg)/ Atodiad
4.6	Y Diweddaraf am Bolisi Iaith Gymraeg	Ysgrifennydd y Bwrdd/ Atodiad
4.7	I dderbyn adroddiadau ar y materion allweddol gan: - Pwyllgor Archwilio a Sicrwydd a gynhaliwyd ar 15 Gorffennaf 2019	 Cadair y Pwyllgor/ Atodiad
4.8	Penderfyniadau Mewn-Pwyllgor	Ysgrifennydd y Bwrdd/ Atodiad
RHAN 5	**ER GWYBODAETH**	
5.1	Diweddariad am Amserlenni Dogfen Llywodraeth Cymru – Er Gwybodaeth	Ysgrifennydd y Bwrdd/ Atodiad
RHAN 6	**MATERION ERAILL**	**12.50-1.00**
6.1	Unrhyw Fusnes Ar Fyrder Arall	Cadair/ Ar Lafar
6.2	Crynodeb o'r Camau Allweddol	Cadair/Ar Lafar
6.3	Dyddiadau'r cyfarfodydd nesaf: • Sesiwn datblygu **Bwrdd AaGIC** i'w gynnal ar **31 Hydref 2019 yn Nhŷ Dysgu, Nantgarw.** • **Bwrdd AaGIC** i'w gynnal ar **28 Tachwedd 2019** – lleoliad i'w gadarnhau.	

Yn unol â darpariaeth adran 1 (2) o Ddeddf Cyrff Cyhoeddus (Derbyniadau i Gyfarfodydd) 1960 bydd yn cael ei benderfynu bod cynrychiolwyr o'r wasg ac aelodau eraill o'r cyhoedd yn cael eu heithrio o ran olaf y cyfarfod ar y sail y byddai yn niweidiol i fudd y cyhoedd oherwydd natur gyfrinachol y busnes a drawsweithredwyd. Mae'r adran hon o'r cyfarfod i'w chynnal mewn sesiwn breifat.

Cytundeb Hyfforddwr Meddygol (Gofal Eilaidd ac Addysg Israddedig) ar gyfer Cymru

1. Mae trefniadau'r GMC i gydnabod hyfforddwyr mewn gofal eilaidd yn ffurfiol, sy'n elfen allweddol o fframwaith rheoleiddio'r GMC, yn berthnasol i hyfforddwyr ôl-raddedig (Goruchwylwyr Addysgol a Goruchwylwyr Clinigol Enwebedig) a hyfforddwyr israddedig (rheiny sy'n gyfrifol am oruchwylio cynnydd myfyrwyr mewn ysgolion meddygol a chydlynwyr Arweiniol ym mhob Darparwr Addysg Lleol).

2. I gael eu cydnabod gyda statws Hyfforddwr Ffurfiol ar Restr y GMC o Ymarferwyr Meddygol Cofrestredig fel Goruchwyliwr Addysgol (ES) neu Oruchwyliwr Clinigol Enwebedig (NCS) yng Nghymru, roedd yn ofynnol i hyfforddwyr ôl-raddedig lofnodi'r Cytundeb Goruchwyliaeth Addysgol neu peilot neu'r Cytundeb Goruchwyliaeth Glinigol beilot a bodloni gofynion y cytundeb.

3. Mae'r ddau Gytundeb wedi bod yn destun gwerthusiad llawn gan Ddeoniaeth Cymru ar y cyd â CUREMedE (Ysgol Gwyddorau Cymdeithasol, Prifysgol Caerdydd). Dangosodd gwerthusiadau fod hyfforddwyr yn gefnogol iawn i gytundeb ac roeddent o'r farn ei fod yn proffesiynoli ac yn cefnogi rolau'r hyfforddwr, gan effeithio'n gadarnhaol ar gyflawni rolau ac ansawdd goruchwyliaeth, a thrwy hynny godi safonau hyfforddiant ac yn y pen draw, ansawdd gofal cleifion.

4. Mae ymrwymiad i gysoni dulliau israddedig ac ôl-raddedig o gydnabod hyfforddwyr yng Nghymru drwy ymestyn yr iteriad nesaf o Gytundeb i'r ddwy rôl hyfforddwr israddedig wedi'i sicrhau gan Ysgolion Feddygol Prifysgolion Caerdydd ac Abertawe.

5. Mae BMA Cymru Wales hefyd wedi cymeradwyo'r cysyniad o un cytundeb hyfforddwr meddygol.

6. Lansiwyd Cytundeb newydd yr Hyfforddwr Meddygol (Addysg Israddedigion Gofal Eilaidd) ar 13 Tachwedd 2018 (yn union 5 mlynedd ar ôl lansio'r cytundeb goruchwyliaeth addysgol) ac mae'n disodli'r cytundeb goruchwyliaeth addysgol a'r peilot a Cytundeb Goruchwyliaeth Glinigol.

7. Mae cytundebau rhwng hyfforddwr unigol, darparwr addysg lleol (Bwrdd Iechyd neu Ymddiriedolaeth GIG Cymru) a Threfnydd Addysg (HEIW, Ysgol Feddygaeth Prifysgol Caerdydd neu ysgol feddygol Prifysgol Abertawe) ac mae'n diffinio rôl, cyfrifoldebau a hawliau'r tair plaid a nodi'r mecanweithiau i gefnogi darparu addysg a hyfforddiant meddygol o ansawdd uchel.

8. Gweinyddir cytundebau drwy 'TAG' (Porth Cytundeb Hyfforddwr) – system e-gytundeb a fydd hefyd yn cadw cofnodion o'r holl hyfforddwyr cydnabyddedig. Bydd hyn yn sicrhau bod y broses ar gyfer rheoli cytundebau yn fwy effeithlon i bob plaid.

9. Roedd Cyfarwyddwyr Meddygol yn cydnabod ac yn cefnogi datblygiad y Cytundeb un Hyfforddwr Meddygol gan mai hwy oedd yn gyfrifol am lofnodi'r cytundeb ar ran eu Bwrdd Iechyd neu Ymddiriedolaeth ac maent yn allweddol o ran cefnogi a chyflawni cyfrifoldebau'r partneriaethau fel diffinir yn y cytundeb.

10. Gan nad yw cyfrifoldebau sylfaenol yr hyfforddwr, y LEP a ' r Trefnydd Addysg yn wahanol mewn addysg feddygol israddedig a hyfforddiant meddygol ôl-raddedig, nid oedd y cytundeb unigol i hyfforddwyr meddygol yn cynnwys unrhyw ymrwymiadau newydd na cyfrifoldebau ar gyfer partneriaethau cyflogaeth lleol.

11. Ni ddylai fod unrhyw oblygiadau newydd o ran adnoddau ar gyfer partneriaethau cyflogaeth lleol ychwaith (er enghraifft, mae Bwrdd Iechyd Prifysgol Caerdydd a'r Fro eisoes yn neilltuo amser a ddiogelir i'r datganiad amgylcheddol, yr NCS a rolau'r hyfforddwr israddedig ac mae gan lawer o hyfforddwyr israddedig gontractau Prifysgol Caerdydd).

12. Mae manteision i Ddarparwyr Addysg Lleol a GIG Cymru ehangach yn cynnwys –
    - Cysondeb o ran y dull o ddarparu, rheoli a chefnogi rolau hyfforddwyr o fewn Darparwyr Addysg Lleol (a Threfnwyr Addysg) a rhyngddynt, a dulliau symlach ar gyfer eu rheoli a darparu, er enghraifft, gweithgaredd DPP ar gyfer hyfforddwyr

• Amgylchedd hyfforddi a fydd yn cefnogi hyfforddwyr sy'n ymrwymedig i ddarpariaeth hyfforddiant o ansawdd uchel gan arwain at fwy o frwdfrydedd am rolau hyfforddwyr a'u hannog i wneud hynny, ac yn y pen draw i roi carfan o hyfforddwyr ledled Cymru sy'n ymdrechu'n barhaus i wella ansawdd yr hyfforddiant

• Cerbyd sy'n darparu cymorth ar gyfer cydnabod ac ystyried rolau hyfforddwyr yn effeithiol o fewn yr arfarniad ymarfer cyfan a phrosesau cynllunio swyddi clinigwyr y GIG.

• Gwell cysylltiadau, cyfathrebu ac atebolrwydd rhwng Deoniaeth Cymru a Darparwyr Addysg Lleol sy'n gyfrifol am ddarparu addysg a hyfforddiant meddygol yng Nghymru

• Darparu'r sylfaen ar gyfer system Cymru gyfan o reoli ansawdd hyfforddwyr yn rhinwedd cysondeb gofynion hyfforddwyr fel y'u diffiniwyd yn y cytundeb sy'n ffurfio sail i 'safonau' mae disgwyl i hyfforddwyr ei gyflawni (gan hysbysu mecanweithiau ar gyfer dethol, adfer, mynd i'r afael ag ymddygiad amhroffesiynol a dad-ddethol hyfforddwyr)

• Creu 'cymuned ymarfer' sy'n cynnwys hyfforddwyr ar draws GIG Cymru sydd â diddordeb cyffredin mewn hyfforddiant.

13. Cysoni dulliau israddedig ac ôl-raddedig o gydnabod hyfforddwyr drwy Gytundeb un Hyfforddwr Meddygol yw'r cyntaf yn y DU a sicrhau bod Cymru yn parhau i gael ei chydnabod gan y GMC fel corff sy'n arwain y ffordd mewn perthynas â gweithredu cydnabod a chefnogi ei hyfforddwyr.

14. Mae'r cynllun cyffredinol ar gyfer y gwaith hwn wedi'i rannu gyda Gweithrediaeth Reoli Deoniaeth Cymru, y Pwyllgor Ansawdd a Grŵp Cydnabod Hyfforddwyr, a'i gymeradwyo ganddo, ac mae ysgogiad clir i'r cyfeiriad hwn ar draws y tri Trefnydd Addysg a'n rhanddeiliaid yn GIG Cymru.

    Mae'r MTA yn allweddol i sicrhau Rheoli Ansawdd yn Lleol yn y dyfodol, gan fwydo i mewn i'r Ddeoniaeth a gwella ansawdd addysg feddygol israddedig ac ôlraddedig yng Nghymru.

    Anton Saayman (Is-Ddeon), Caroline Groves (Arweinydd Uned Ansawdd)

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

HEB EU CADARNHAU

Cofnodion Cyfarfod Cyffredinol Blynyddol AaGIC
a gynhaliwyd 18 Gorffennaf 2019 am 2:00 pm
Yn yr Ystafell Fwrdd, Adeilad Ystwyth, Hafan Derwen
Parc Dewi Sant, Caerfyrddin, SA31 3BB

Yn Bresennol:

Dr Chris Jones	Cadeirydd
Julie Rogers	Dirprwy Brif Weithredwr/Cyfarwyddwr y Gweithlu a Datblygu Sefydliadol
John Hill-Tout	Is-gadeirydd
Tina Donnelly	Aelod Annibynnol
Dr Ruth Hall	Aelod Annibynnol
Gill Lewis	Aelod Annibynnol
Yr Athro Ceri Phillips	Aelod Annibynnol
Stephen Griffiths	Cyfarwyddwr Nyrsio
Yr Athro Pushpinder Mangat	Cyfarwyddwr Meddygol

Wrth law:

Dafydd Bebb	Ysgrifennydd y Bwrdd
Kay Barrow	Rheolwr Llywodraethu Corfforaethol (Ysgrifenyddiaeth)
Angharad Price	Pennaeth Cyfathrebiadau
Huw Owen	Rheolwr y Gymraeg
Rhiannon Beckett	Dirprwy Gyfarwyddwr Cyllid
Rob Heritage	Rheolwr TG
Lisa Gostling	Cyfarwyddwr y Gweithlu a Datblygu Sefydliadol, Hywel Dda
Amanda Glanvillle	Uwch-ymgynghorydd y Gweithlu, Hywel Dda
Shelley Dony	Rheolwr Datblygu Gweithlu'r Dyfodol, Hywel Dda

RHAN 1	MATERION RHAGARWEINIOL	Gweithredu
CCB 1807/1.1	**Croeso**	
	Rhoes y Cadeirydd groeso i bawb i Gyfarfod Cyffredinol Blynyddol Bwrdd AaGIC ac, yn benodol felly, i gydweithwyr o Fwrdd Iechyd Prifysgol Hywel Dda. Cyfleuodd hefyd ddiolchiadau'r Bwrdd am gynnal AaGIC.	
CCB 1807/1.2	**Sylwadau Cyflwyniadol**	
	Agorodd y Cadeirydd y Cyfarfod Cyffredinol Blynyddol gan dynnu sylw at y cyfarfod cadarnhaol o'r Bwrdd a gynhaliwyd	

	yn gynt yn y dydd. Roedd hyn wedi rhoi cyfle i staff ddangos enghreifftiau o werth ychwanegol AaGIC fel hwylusydd, a'i waith cydweithredol gyda chydweithwyr o Fyrddau Iechyd a'i bartneriaid. Roedd yn falch o weld gwaith AaGIC fel galluogwr a gwaith caled gweithlu ymroddedig. Eglurodd fod yr Adroddiad Blynyddol yn nodi llwyddiannau AaGIC ers ei sefydlu.	
RHAN 2	**ADRODDIAD BLYNYDDOL**	
CCB 1807/2.1	**Trosolwg y Prif Weithredwr**	
	Dywedodd Julie Rogers fod yr Adroddiad Blynyddol yn adlewyrchiad o'r 6 mis cyntaf o weithredu. Roedd y cyflawniadau hyd yn hyn yn dyst i'r staff a gwaddol y sefydliadau a ragflaenodd. Diolchodd i staff a'i bartneriaid am y llwyddiant wrth sefydlu AaGIC fel corff addysg y GIG. Mae AaGIC wedi adeiladu sylfaen lle gall nawr ganolbwyntio ar fynd ymlaen, fel bod modd sicrhau ei fod yn cael effaith gadarnhaol ar iechyd a lles pobl Cymru. Dywedodd fod yr adborth o gyfarfod diweddar Cyd-gyfarfod y Tîm Gweithredol â Llywodraeth Cymru yn gadarnhaol. Roedd yr Adolygiadau Archwilio Mewnol a gynhaliwyd ar y systemau a'r rheolaethau allweddol wedi amlygu meysydd arfer da ond hefyd feysydd dysgu a gwella. Roedd yr adroddiad yn tynnu sylw at gyflawni blaenoriaethau allweddol AaGIC a disgwyliadau Llywodraeth Cymru o drosglwyddo i weithredu. Roedd trosglwyddiad llyfn staff addysg a'r gweithlu i gorff newydd y GIG wedi'i briodoli i gyfathrebu da ac ymgysylltiad cynnar ar ddiwylliant a gwerthoedd. Wrth edrych ymlaen, roedd AaGIC mewn lle da gyda Chynllun Blynyddol cymeradwy ar gyfer 2019-20 gan gynnwys nifer o gyflawniadau allweddol i gyflawni'r weledigaeth o drawsnewid y gweithlu ar gyfer Cymru iachach. Roedd AaGIC yn parhau i ganolbwyntio ar yrru gwaith datblygu strategaeth gweithlu gydweithredol, yn ogystal â gwelliannau mewn addysg a hyfforddiant, datblygu'r gweithlu, ac arweinyddiaeth.	
Penderfynwyd	**Nododd** y Bwrdd Drosolwg y Prif Weithredwr	
CCB 1807/2.2	**Trosolwg y Cyfarwyddwr Cyllid**	
	Eglurodd Rhiannon Beckett fod yn rhaid i AaGIC gydymffurfio'n llawn â Llawlyfr Adrodd Ariannol y Trysorlys. Y Datganiad Sylfaenol o incwm a gwariant yn ystod y flwyddyn yw'r Datganiad o Wariant Net Cynhwysfawr, sy'n dangos y	

	gost weithredol net yr aeth AaGIC iddi ac a ariennir gan Lywodraeth Cymru. Yn flynyddol, roedd yn ofynnol i AaGIC sicrhau sefyllfa gytbwys ar ddiwedd y flwyddyn yn erbyn Terfynau'r Adnoddau a osodir ar gyfer y flwyddyn. Roedd y cyfrifon wedi'u paratoi ar gyfer y cyfnod cyfrifyddu 5/10/2018 i 31/03/2019. Roedd hyn yn adlewyrchu cyfnod o ddeunaw mis o'r adeg y sefydlwyd AaGIC ac nid ei ddyddiad 'mynd yn fyw' fel endid gweithredol. Gan fod AaGIC yn sefydliad cysgodol am ddeuddeng mis, roedd y sefydliadau cynnal a Llywodraeth Cymru wedi cyfrif am wariant am y cyfnod hwnnw. Gwarged o £68k oedd y sefyllfa ariannol ar ddiwedd y flwyddyn ar gyfer 2018/19, gyda chostau gweithredu net o £105.650m am y cyfnod ariannol.	
Penderfynwyd	**Nododd** y Bwrdd Drosolwg y Cyfarwyddwr Cyllid	
CCB 1807/2.3	**Derbyn a chymeradwyo'r Adroddiad Blynyddol am 2018/19**	
Penderfynwyd	**Derbyniodd** y Bwrdd yr Adroddiad Blynyddol am 2018/19 a'i **nod**i.	
CCB 1807/2.4	**Cwestiynau / Trafodaeth**	
	Roedd Lisa Gostling, Cyfarwyddwr y Gweithlu a Datblygu Sefydliadol ar gyfer Bwrdd Iechyd Prifysgol Hywel Dda yn falch o rannu llwyddiant cynllun prentisiaeth Hywel Dda. Eglurodd fod AaGIC wedi rhoi cefnogaeth ymarferol i'r Bwrdd Iechyd oedd wedi ei alluogi i ehangu'r cyfleoedd a lansio ei gynllun Prentisiaeth Gofal Iechyd yn llwyddiannus. Clywodd y Bwrdd am y rhaglen Prentisiaeth Gofal Iechyd oedd yn agored i ymgeiswyr o bob oed a chefndir academaidd sydd yn rhoi cyfle i unigolyn hyfforddi i ddod yn Nyrs Gofrestredig lawn trwy ddysgu seiliedig ar waith. Roedd y brentisiaeth yn galluogi unigolyn i gwblhau Prentisiaeth Sylfaenol mewn Gwasanaethau Cymorth Gofal Iechyd (lefel 2), symud ymlaen i Brentisiaeth mewn Cymorth Gofal Iechyd Clinigol (lefel 3), cyn cychwyn ar addysg brifysgol ran-amser, gan ddechrau ar lefel 4. Cafwyd hefyd adborth cadarnhaol yn ystod y Diwrnod Asesu Prentisiaethau ynghylch y fideo ar wefan Hywel Dda o nyrs wrywaidd yn siarad am ei yrfa nyrsio. Dywedodd cydweithwyr Hywel Dda eu bod wedi cynnig 26 prentisiaeth yn gynharach y diwrnod hwnnw a'u bod yn gobeithio llenwi cyfanswm o 46 o leoedd. Dywedodd Stephen Griffiths ei bod yn galonogol gweld y byddai'r rhaglen brentisiaeth yn sicrhau y byddai nifer sylweddol o nyrsys yn mynd i'r system o 2027 ymlaen ar ôl cwblhau'r hyfforddiant.	

	Mewn ymateb i gwestiwn am hyfforddiant yn y Gymraeg, cadarnhawyd y byddai'r prentisiaid yn derbyn hyfforddiant yn y Gymraeg trwy gydol eu rhaglen astudio. Mewn ymateb i gwestiwn am lwyddiant y rhaglen a lledaenu'r broses, dywedodd Lisa Gostling fod Hywel Dda yn awyddus i rannu eu profiadau a'u dysgu ag eraill. O ran y camau nesaf, gofynnodd Lisa Gostling am gefnogaeth AaGIC i ddatblygu llwybr dysgu ar gyfer Ffisiotherapi. Cytunodd Stephen Griffiths y byddai AaGIC yn parhau i weithio gyda Hywel Dda ac y byddai'n hapus i archwilio hyn ymhellach.	
RHAN 3	**CYFARFOD YN CAU**	
CCB 1807/3.1	**Cau**	
Penderfynwyd	Gan nad oedd rhagor o gwestiynau, caeodd y Cadeirydd y Cyfarfod Blynyddol.	

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Chris Jones (Cadeirydd) Dyddiad:

Eitem Agenda: [1.6]

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

HEB EU CADARNHAU

Cofnodion Cyfarfod Cyhoeddus o Fwrdd AaGIC
a gynhaliwyd 18 Gorffennaf 2019 am 10:00 am
Yn yr Ystafell Fwrdd, Adeilad Ystwyth, Hafan Derwen
Parc Dewi Sant, Caerfyrddin, SA31 3BB

Yn Bresennol:

Dr Chris Jones	Cadeirydd
Julie Rogers	Dirprwy Brif Weithredwr/Cyfarwyddwr y Gweithlu a Datblygu Sefydliadol
John Hill-Tout	Is-gadeirydd
Tina Donnelly	Aelod Annibynnol
Dr Ruth Hall	Aelod Annibynnol
Gill Lewis	Aelod Annibynnol
Yr Athro Ceri Phillips	Aelod Annibynnol
Dr Heidi Phillips	Aelod Annibynnol
Stephen Griffiths	Cyfarwyddwr Nyrsio
Yr Athro Pushpinder Mangat	Cyfarwyddwr Meddygol

Wrth Law:

Dafydd Bebb	Ysgrifennydd y Bwrdd
Kay Barrow	Rheolwr Llywodraethu Corfforaethol (Ysgrifenyddiaeth)
Angharad Price	Pennaeth Cyfathrebiadau
Huw Owen	Rheolwr y Gymraeg
Rhiannon Beckett	Dirprwy Gyfarwyddwr
Charlette Middlemiss	Pennaeth Moderneiddio'r Gweithlu

RHAN 1	MATERION RHAGARWEINIOL	Gweithredu
1807/1.1	**Croeso a Chyflwyniadau**	
	Rhoes y Cadeirydd groeso i bawb i gyfarfod Bwrdd AaGIC ac estyn ei ddiolchgarwch i Fwrdd Iechyd Prifysgol Hywel Dda am gydlynu'r trefniadau cynnal. Rhoes y Cadeirydd wybod i'r Bwrdd fod Alex Howells, y Prif Weithredwr, ar wyliau blynyddol ac y byddai Julie Rogers, y Dirprwy Brif Weithredwr / Cyfarwyddwr y Gweithlu a Datblygu Sefydliadol yn gweithredu fel Prif Weithredwr yn ystod ei habsenoldeb.	

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1807/1.2	**Ymddiheuriadau**	
	Nodwyd bod ymddiheuriadau wedi'u derbyn gan Alex Howells (Prif Weithredwr) ac Eifion Williams (Cyfarwyddwr Cyllid Dros Dro).	

1807/1.3	**Datganiadau o Ddiddordeb**	
	Datganodd Julie Rogers ddidordeb yn eitem 4.4 ar yr agenda oedd yn ymwneud â chyn-weithiwr	
Penderfynwyd	**Nododd** y Bwrdd y Datganiad o Ddiddordeb	
1807/1.4	**Effaith AaGIC ar Ofal Sylfaenol**	
	Derbyniwyd cyflwyniad gan Charlette Middlemiss am effaith AaGIC ar Ofal Sylfaenol. Rhoddwyd trosolwg o'r gwaith a hwyluswyd gan AaGIC gyda nifer o Fyrddau Iechyd. Roedd y gwaith yn canolbwyntio ar ddatblygu atebion i heriau'r gweithlu, yn enwedig y rhai a amlygwyd yn ystod y broses Adolygu Cymheiriaid a gynhaliwyd o fewn gwasanaethau gofal sylfaenol brys (y tu allan i oriau) yn ystod rhan olaf 2018. Roedd y broses Adolygu Cymheiriaid wedi helpu i bwysleisio sut roedd rôl gwasanaethau gofal sylfaenol brys yn gynyddol yn cefnogi gofal brys a gofal heb ei drefnu ac yn rheoli galwadau / llif cleifion. Dywedodd Charlette Middlemiss fod yr Adolygiad Cymheiriaid wedi amlygu rhyw gymaint o waith pwysig oedd wedi digwydd yn lleol ac yn genedlaethol dros y ddwy flynedd ddiwethaf i wella'r gwasanaethau hyn. Fodd bynnag, roedd hefyd wedi datgelu'r ddelwedd oedd yn dirywio o ofal sylfaenol brys fel lle i weithio ac ar gyfer datblygu gyrfa. Clywodd y Bwrdd am waith y Grŵp Tasg a Gorffen, a sefydlwyd yn dilyn yr Adolygiad Cymheiriaid, i fwrw ymlaen â nifer o gamau hanfodol i wella gwasanaethau gofal sylfaenol brys ledled GIG Cymru. Adolygai'r rhaglen waith a gyflwynwyd heriau'r gweithlu o fewn gwasanaethau gofal sylfaenol ledled Cymru ac edrychai ar ddatblygu atebion gweithlu cynaliadwy ar gyfer y gwasanaethau hyn. Rhoddwyd trosolwg o nifer o fentrau gweithlu ac addysg i gefnogi gwaith datblygu timau clinigol. Roedd hyn yn cynnwys yr ymgyrch farchnata a recriwtio; datblygu'r Ymarferydd Gofal Sylfaenol Brys; datblygu Rhaglen Arweinyddiaeth Glinigol; Hyfforddiant ac arbrawf Tîm Amlddisgyblaethol Gofal Sylfaenol Brys (MDT); gwneud y mwyaf o rôl y Gweithiwr Cymorth Gofal Iechyd (HCSW) a datblygu adnodd Hyfforddiant e-Ddysgu	

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	'Unwaith i Gymru' i wella'r ddarpariaeth Cadarnhau Marwolaeth. Amlygwyd y byddai'r integreiddio rhwng 111, Galw Iechyd Cymru a gwasanaethau gofal sylfaenol brys yn gynyddol gynnig gyfleoedd sylweddol ar gyfer gwytnwch a chapasiti systemau ehangach. Trafodwyd y cyflwyniad gan y Bwrdd ac amlygwyd y pwyntiau a ganlyn: • enghraifft dda o'r gwerth ychwanegol yng ngwaith cydweithredol AaGIC gyda chydweithwyr yn y Bwrdd Iechyd; • Gwaith cydgysylltu, arwain, cyfarwyddo ac egni tîm AaGIC i hwyluso, defnyddio'r adnodd a'r ymgysylltiad â gwasanaethau gofal sylfaenol brys ledled GIG Cymru; • gwaith AaGIC fel galluogwr i helpu i symud gofal yn nes at adref a hwyluso gwell ymarfer. Diolchodd y Bwrdd i Charlette Middlemiss am ei chyflwyniad hynod graff oedd wedi tynnu sylw at gyfleoedd lle'r oedd AaGIC wedi cymryd rhan ynddynt a hefyd wedi helpu i hwyluso datrysiadau'r gweithlu.	
Penderfynwyd	Penderfynodd y Bwrdd: • **cytuno** y dylid rhannu'r Adroddiad ar Adolygiad o Gymheiriaid Gofal Sylfaenol Brys (y Tu Allan i Oriau) ag Aelodau'r Bwrdd; • **cytuno** bod yr Adroddiad 'Cwblhau' gan y Grŵp Tasg a Gorffen yn cael ei rannu ag Aelodau'r Bwrdd; • **gofyn** am gael cyfleu eu diolch i'r Tîm.	**JR** **JR** **JR**
1807/1.5	**Derbyn a Chadarnhau Cofnodion y Bwrdd a gynhaliwyd 30 Mai 2019**	
	Cadarnhawyd cofnodion y cyfarfod a gynhaliwyd **30 Mai 2019** fel cofnod cywir.	
1807/1.6	**Cofnod Gweithredu**	
	Derbyniwyd y Cofnod Gweithredu. Ystyriodd y Bwrdd Daflen Weithredu'r cyfarfod a gynhaliwyd ar 30 Mai 2019 a rhoddwyd y wybodaeth ddiweddaraf a ganlyn: • **3005 / 1.4 Cyflawniadau Hyfforddeion a Hyfforddwyr**: Ni chafwyd cyfarfod o Ford Gron y Meddygon Iau ym mis Gorffennaf. Roedd disgwyl i garfan newydd o hyfforddeion gychwyn ac roedd rhaglen o sesiynau Grŵp Diddordeb Meddygon Iau yn cael ei datblygu.	
Penderfynwyd	**Cytunodd** y Bwrdd y dylid darparu rhestr o ddyddiadau a lleoliadau'r Grŵp Diddordeb Meddygon Iau, fel y gellid cydgysylltu'n ddaearyddol yr aelodau hynny oedd â diddordeb mewn mynd.	**PM**

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	• **3005 / 3.1 Gwybodaeth ddiweddaraf am Optometreg - Enillion ar Fuddsoddiad**: Eglurwyd bod cyfarfod wedi'i gynnal i symud y gwaith yn ei flaen mewn perthynas â'r fethodoleg enillion ar fuddsoddiad a'i gymhwyso i'r achos busnes.	
Penderfynwyd	**Cytunodd** y Bwrdd gyflwyno gwybodaeth ddiweddaraf i gyfarfod Bwrdd yn y dyfodol.	**CP**
	• **3005/4.1 Cyfrifon Terfynol 2018/19:** Er eglurhad, ychwanegu'r diwygiad a ganlyn at eiriad y weithred y penderfynwyd arni - 'ac eithrio Aelodau Annibynnol' fel bod y weithred y penderfynwyd arni yn darllen: • 'Diweddaru Buddion Pensiwn Aelodau'r Bwrdd, ac eithrio Aelodau Annibynnol, o Sefydliadau nad oeddynt gynt yn rhai GIG, os cânt eu derbyn cyn i'r Archwilydd Cyffredinol lofnodi'r Cyfrifon'.	
Penderfynwyd	**Cytunodd** y Bwrdd i ddiwygio'r weithred y penderfynwyd arni yn unol â hynny.	**KB**
	• **3005/4.8 Fframwaith Rheoli Perfformiad Integredig:** Câi'r adrodd 'byw' ei gyflwyno yn Sesiwn Datblygu'r Bwrdd ym mis Awst ac yn y Bwrdd ym mis Medi.	
Penderfynwyd	Cytunodd y Bwrdd ychwanegu Rheoli Perfformiad at yr Agenda ar gyfer Sesiwn Datblygu'r Bwrdd ym mis Awst.	**DB**
	• **3005/4.10 Y Sefyllfa Ddiweddaraf o ran Polisïau:** Nododd y Bwrdd y sefyllfa ddiweddaraf ac y byddid yn archwilio rhannu rhestr o ddogfennau'n ymwneud â pholisi ehangach Llywodraeth Cymru ag aelodau'r Bwrdd.	
Penderfynwyd	Cytunodd y Bwrdd ar i Ysgrifennydd y Bwrdd archwilio ffordd effeithiol o rannu rhestr o ddogfennau'n ymwneud â pholisi ehangach Llywodraeth Cymru ag aelodau'r Bwrdd.	**DB**
1807/1.7	**Materion yn codi**	
	Nid oedd materion yn codi o'r cyfarfod blaenorol.	
RHAN 2	**ADRODDIADAU'R CADEIRYDD A'R PRIF WEITHREDWR**	
1807/2.1	**Adroddiad y Cadeirydd**	
	Derbyniwyd adroddiad y Cadeirydd. Wrth gyflwyno'r adroddiad, nododd y Cadeirydd ei fod, dros y ddau fis diwethaf, wedi profi ehangder y sefydliad a'i bartneriaid allweddol wrth mynychu cyfarfodydd a digwyddiadau. Roedd Sioe Deithiol AaGIC yng Ngogledd Cymru wedi bod yn gyfle da i gwrdd â staff yn y gweithle, a hefyd hyfforddwyr a hyfforddeion ar draws pob arbenigedd. Roedd y gallu i gynnal cyfarfodydd a digwyddiadau ar hyd a lled Cymru yn gymorth i AaGIC iasio ei bresenoldeb ledled GIG Cymru a chyda'i bartneriaid allweddol. Mynegodd ei falchder yn y ffordd yr oedd pobl yn gweithio'n llyfn ar draws ffiniau mewn modd integredig.	

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	Roedd y Cadeirydd yn falch o fod yn rhan o broses Adolygiad Blynyddol o Ddilyniant Cymhwysedd (ARCP), gan wrando ar brofiadau hyfforddeion arbenigol. Eglurodd y Cadeirydd y byddid yn creu 30 o leoedd ar gyfer cymrodorion (15 yn dechrau o'r newydd a 15 oedd yn gadael) a sut y byddai'n gyfle i Aelodau'r Bwrdd fod yn rhan o'r broses gyfweld. Rhoes Tina Donnelly drosolwg o'r Gynhadledd Llyfrgellwyr y bu ynddi ar ran y Cadeirydd, a'u canfyddiad eu bod yn adnodd na châi ei ddefnyddio ddigon, yn enwedig ar gyfer ymchwil. Dywedodd y Cadeirydd ei fod wedi ymweld â Llyfrgell Felindre oedd yn adnodd a tanddefnyddiwyd, ac wedi dangos sut roedd Llyfrgellwyr yn gwneud llawer o ran mynd o amgylch wardiau a gyda'u gwaith ymchwil. Rhoes Ruth Hall drosolwg o'r Digwyddiad Arweinyddiaeth Iechyd a Gofal Cymdeithasol yr oedd wedi'i fynychu ar ran y Cadeirydd ac oedd wedi canolbwyntio ar oblygiadau Brexit; myfyrdodau gan Dr Andrew Goodall ar effaith Prosiectau'r Gronfa Drosglwyddo; sesiwn drafod ar Strategaeth y Gweithlu a chynnydd yn ymwneud â 'Chymru Iachach'. Amlygodd y Cadeirydd ei bresenoldeb yn y Seminar Iechyd Plant oedd wedi hyrwyddo 'Y Ffordd Gywir: Dull Seiliedig ar Hawliau Plant yng Nghymru'. Eglurodd y byddai angen i AaGIC fwrw ymlaen a mabwysiadu a hyrwyddo'r cyhoeddiad. Eglurodd Tina Donnelly fod yna gysylltiadau ag Awdurdodau Lleol a gwaith y Comisiynydd Plant, gydag enghreifftiau da o'r ieuenctid yn gweithio yn Rhondda Cynon Taf, Pen-y-bont ar Ogwr a Chwm Taf Morgannwg y gellid eu harchwilio ar gyfer Sesiwn Datblygu'r Bwrdd.	
Penderfynwyd	Penderfynodd y Bwrdd: • **cytuno** i wahodd Llyfrgellwyr i roi cyflwyniad mewn Sesiwn Datblygu'r Bwrdd yn yr hydref. • **cytuno** i rannu adroddiad Tina Donnelly yn dilyn ei phresenoldeb yng Nghynhadledd y Llyfrgellwyr. • **cytuno** i rannu adroddiad Ruth Hall yn dilyn ei phresenoldeb yn y Digwyddiad Arweinyddiaeth Iechyd a Gofal Cymdeithasol yn Llandudno • **cytuno** bod y Cadeirydd yn ysgrifennu at y Comisiynydd Plant i ddechrau proses AaGIC gan fabwysiadu a hyrwyddo'r cyhoeddiad 'Y Ffordd Gywir: Dull Seiliedig ar Hawliau Plant yng Nghymru' a symud ymlaen ag o. • **cytuno** y dylai 'Y Ffordd Gywir: Dull Seiliedig ar Hawliau Plant yng Nghymru' fod yn bwnc ar gyfer Sesiwn Datblygu'r Bwrdd.	**DB** **DB** **DB** **Cadeirydd** **DB**

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1807/2.2	**Adroddiad y Prif Weithredwr**	
	Derbyniwyd adroddiad y Prif Weithredwr. Wrth gyflwyno'r adroddiad, amlygodd Julie Rogers y gwaith parhaus mewn perthynas â datblygu Strategaeth y Gweithlu ar gyfer Iechyd a Gofal. Roedd hwn yn gyflawniad allweddol i AaGIC fel rhan o'r Cynllun Blynyddol ar gyfer 2019/20. Roedd disgwyl i'r ddogfen ymgynghori ar Strategaeth y Gweithlu fod allan dros gyfnod yr haf. Byddai gan y Bwrdd gyfle i gyfrannu at yr ymgynghoriad yn Sesiynau Datblygu'r Bwrdd ym mis Awst a mis Hydref. Byddai Strategaeth y Gweithlu derfynol yn cael ei chyflwyno i'r Bwrdd yn ei gyfarfod ym mis Tachwedd 2019. Dywedodd Julie Rogers fod AaGIC wedi derbyn Llythyr ei Gylch Gorchwyl gan Lywodraeth Cymru i'w gyflawni yn ychwanegol at yr ymrwymiadau a'r blaenoriaethau a nodwyd yng Nghynllun Blynyddol 2019-20. Roedd y llythyr yn nodi'r disgwyliadau mewn perthynas â chwe maes gwaith ychwanegol gyda phartneriaid allweddol. Rhoes Stephen Griffiths y wybodaeth ddiweddaraf i'r Bwrdd mewn perthynas â'r adolygiad strategol o addysg gweithwyr iechyd proffesiynol a'r broses gontractio gysylltiedig. Eglurodd y cyhoeddiad diweddar yng Nghymru ynghylch ymestyn y Fwrsariaeth ar gyfer 2020/21 hyd nes y ceid cyhoeddiad am y sefyllfa yn y tymor hwy. Roedd gan hyn oblygiadau a risgiau ehangach i AaGIC a llinell amser y contractio gan y byddai angen i AaGIC nawr symud yr amserlen ac, fel y cyfryw, byddai angen ymestyn contractau presennol am flwyddyn arall gyda chontractau newydd i fod yn eu lle ar gyfer 2022/23. Cododd y Bwrdd bryderon ynghylch yr oedi o ran yr ansicrwydd gyda chanlyniad y broses ymgynghori a'r model cyllido. Fodd bynnag, cadarnhawyd y byddai AaGIC yn defnyddio'r amser ychwanegol oedd ar gael ar ôl cwblhau adroddiad KPMG i ymgysylltu ymhellach a sicrhau bod yr argymhellion yn gyraeddadwy ac yn fesuradwy. Codwyd pryderon mewn perthynas â sefyllfa'r Fwrsariaeth a'r goblygiadau pe bai Llywodraeth Cymru yn penderfynu atal Bwrsariaeth y GIG. Calonogwyd y Bwrdd gan yr adborth o gyfarfod ar y cyd y Tîm Gweithredol yn ddiweddar a nododd y wybodaeth ddiweddaraf ar AaGIC yn gweithio gyda'i bartneriaid.	
Penderfynwyd	**Nododd** y Bwrdd yr adroddiad	

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RHAN 3	**EITEMAU STRATEGOL**	
1807/3.1	**Cynllun Addysg, Comisiynu a Hyfforddiant GIG Cymru ar gyfer 2020/21**	
	Derbyniodd y Bwrdd Gynllun Addysg, Comisiwn a Hyfforddiant GIG Cymru ar gyfer 2020/21. Wrth gyflwyno'r adroddiad, amlygodd Stephen Griffiths fod y Cynllun wedi'i ddatblygu yn seiliedig ar asesiad AaGIC o anghenion hyfforddi'r gweithlu. Bu ymgysylltu gydag ystod eang o randdeiliaid allweddol ac fe'i fframiwyd fel cynllun trosiannol gyda gweithredu dull newydd ar gyfer y flwyddyn nesaf. Roedd y Cynllun wedi'i gyflwyno yng Nghyfarfod Prif Weithredwyr Cymru Gyfan a'r Bwrdd Gweithredol Cenedlaethol, ac roedd wedi derbyn adborth cadarnhaol gyda'r awgrym y dylid fframio'r dull gweithredu nid yn unig ar y gost ond hefyd ar werthuso / gwireddu buddion. Roedd y Tîm Gweithredol ar y cyd hefyd wedi cefnogi'r Cynllun fel rhan allweddol i sicrhau capasiti a chyfleoedd i drawsnewid y gweithlu. Ystyriwyd a thrafodwyd y Cynllun gan y Bwrdd. Codwyd cwestiwn mewn perthynas â gweithredu ffyrdd newydd o weithio a newid rolau, a'r effaith ar niferoedd y gweithlu i bob grŵp staff. Dywedodd Stephen Griffiths fod yr asesiad o anghenion hyfforddi wedi cynnwys adolygiad o'r Cynlluniau Tymor Canolig Integredig (IMTP) ar gyfer sefydliadau'r GIG dros y tair blynedd diwethaf. Roedd dadansoddiad o'r cynlluniau gweithlu hynny wedi amlygu tuedd gynyddol i gyfran fawr o'r grwpiau staff weithio llai na llawn amser. O ganlyniad, byddai nifer y staff hyfforddedig oedd yn ofynnol i lenwi'r hyn oedd yn cyfateb i swydd lawn amser yn cynyddu. Amlygwyd bod y Cynllun drafft hefyd wedi'i adolygu gan y Pwyllgor Addysg, Comisiynu ac Ansawdd a'i fod wedi newid ers ei gyflwyno yn Sesiwn Datblygu'r Bwrdd ym mis Mehefin. Roedd rhaglen newid oedd yn cyd-fynd â'r cynllun trosglwyddo a phwysleisiwyd y byddai angen i AaGIC, o 2020 ymlaen, ddangos bod yna drawsnewid / newid yng Nghynlluniau'r dyfodol oedd yn cyd-fynd â Strategaethau Gweithlu GIG Cymru. Cadarnhawyd bod rhaglen o waith yn ymwneud â gwariant cyflog amrywiol oedd yn gysylltiedig â gwariant asiantaeth i ôl-lenwi bylchau mewn gwasanaethau. Câi'r rhaglen ei harwain gan Gyfarwyddwyr Gweithlu a Datblygu Sefydliadol Cymru	

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	Gyfan oedd yn gysylltiedig â'r Bwrdd Effeithlonrwydd Cenedlaethol.	
Penderfynwyd	Penderfynodd y bwrdd: • **cytuno** i argymell i Lywodraeth Cymru ei bod yn ystyried cynyddu'r lleoedd addysg a hyfforddiant ar draws ystod o grwpiau staff fel y nodir yn Adran 7 y Cynllun. • **cytuno** y dylid cyflwyno'r sefyllfa ddiweddaraf o ran gwaith y Bwrdd Effeithlonrwydd Cenedlaethol mewn perthynas â staff asiantaeth.	**SG** **JR**
RHAN 4	**LLYWODRAETHIANT, PERFFORMIAD A SICRWYDD**	
1807/4.1	**Adroddiad Cyllid**	
	Derbyniodd y Bwrdd yr adroddiad. Wrth gyflwyno'r adroddiad, rhoes Rhiannon Beckett y wybodaeth ddiweddaraf mewn perthynas â sefyllfa ariannol mis 3 2019/20 oedd yn danwariant o £54.6k hyd yn hyn. Eglurodd y câi proses a âi at wraidd y mater ei chynnal o fewn y Cyfarwyddiaethau i ddeall yn well y rhesymau dros yr amrywiadau i'r gwariant a ragwelir ac i roi camau cywiro ar waith.	
Penderfynwyd	**Nododd** y Bwrdd sefyllfa ariannol mis 3.	
1807/4.2	**Polisi Rheoli Risg**	
	Derbyniodd y Bwrdd y Polisi. Wrth gyflwyno'r polisi, amlygodd Dafydd Bebb fod y polisi, yn dilyn cyfarwyddyd y Bwrdd ym mis Mai, wedi'i gyflwyno i'r Pwyllgor Archwilio a Sicrwydd yn ei gyfarfod ym mis Gorffennaf. Eglurodd fod y Pwyllgor wedi gofyn i'r Bwrdd ystyried ei awydd am risg, a graddfa'r amlygiad i risg yr oedd yn barod i'w dderbyn wrth gyflawni ei amcanion. Cydnabu'r Bwrdd fod angen i'r Bwrdd gyfleu lefel y goddefgarwch risg i'r sefydliad ehangach. Eglurodd Gill Lewis fod y Pwyllgor hefyd wedi gofyn i'r Tîm Gweithredol adolygu pob risg ar y Gofrestr Risg i roi eglurhad o'r effaith a sut y byddid yn rhoi sylw iddi, a hefyd i gywiro rhifau'r tudalennau. O ran Hyfforddiant Rheoli Risg, pwysleisiodd y Bwrdd bod angen sicrhau bod staff yn cael eu hyfforddi'n iawn er mwyn deall eu rhwymedigaethau o fewn y sefydliad, er bod risg yn gyfrifoldeb i bawb.	
Penderfynwyd	Penderfynodd y bwrdd: • **cymeradwyo'r** Polisi yn amodol ar sicrhau y caiff rhifau'r tudalennau eu cywiro ac ychwanegu mwy o gynnwys oedd yn ymwneud ag archwaeth y sefydliad am risg.	**DB** **DB**

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	• **cytuno** y câi'r Polisi, ar ôl ei ddiwygio, ei gyhoeddi ar y mewnrwyd a'i ddosbarthu ledled AaGIC i'w weithredu'n llawn. • **cytuno** bod angen i'r Tîm Gweithredol gynnal asesiad o hyfforddiant Rheoli Risg a rhoi'r wybodaeth ddiweddaraf i'r Bwrdd naill ai trwy Adroddiad y Prif Weithredwr neu adroddiad penodol ar y sefyllfa ddiweddaraf o ran y risg.	**DB**
1807/4.3	**Derbyn Adroddiadau ar Faterion Allweddol gan:**	
1807/4.3.1	**Y Pwyllgor Archwilio a Sicrwydd a gynhaliwyd 29 Mai 2019** **Derbyniodd** y Bwrdd yr adroddiad ar aterion allweddol. Wrth gyflwyno'r adroddiad, amlygodd Gill Lewis fod y cyfarfod wedi canolbwyntio'n bennaf ar gymeradwyo'r Cyfrifon Blynyddol ar gyfer 2018/19 a'r adroddiadau cysylltiedig. Dywedodd fod y Sicrwydd Rhesymol a dderbyniwyd ar gyfer Pennaeth y Farn Archwilio Mewnol i'w ganmol. Ystyriwyd nifer o adroddiadau archwilio mewnol, ac o'r rhain, roedd adolygiad y gweithlu o weithwyr achlysurol wedi derbyn Sicrwydd Cyfyngedig a byddai angen adolygiad dilynol ohono yn ystod 2019/20.	
Penderfynwyd	**Nododd** y Bwrdd yr Adroddiad	
1807/4.3.2	**Y Pwyllgor Archwilio a Sicrwydd a gynhaliwyd 15 Gorffennaf 2019** Oherwydd amseriad cyfarfod y Pwyllgor ac adrodd i'r Bwrdd, gohiriwyd yr eitem hon hyd nes cyfarfod nesaf y Bwrdd.	
Penderfynwyd	**Cytunodd** y Bwrdd i dderbyn adroddiad ysgrifenedig yng nghyfarfod nesaf y Bwrdd.	**GL**
1807/4.3.3	**Pwyllgor Addysg, Comisiynu ac Ansawdd a gynhaliwyd 15 Gorffennaf 2019** **Derbyniodd** y Bwrdd yr adroddiad ar faterion allweddol. Wrth gyflwyno'r adroddiad, amlygodd Ruth Hall fod y cyfarfod wedi ystyried a thrafod Cynllun Addysg, Comisiynu a Hyfforddiant GIG Cymru 2020/21 yn fanwl. Cadarnhawyd bod y Pwyllgor hefyd wedi cynnal Sesiwn Ddatblygu ar wahân i adolygu'r perthnasoedd gweithio a'r trefniadau adrodd i'r Bwrdd ar gyfer y gwahanol Bwyllgorau er mwyn sicrhau nad oedd unrhyw orgyffwrdd na bylchau yn y model llywodraethu. Eglurodd y câi adroddiad ar Ffyrdd o Weithio ei gyflwyno i Sesiwn Datblygu'r Bwrdd ym mis Awst ac i'r Bwrdd ym mis Medi.	
Penderfynwyd	**Nododd** y Bwrdd yr Adroddiad.	

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1807/4.4	**Penderfyniadau Mewn-Pwyllgor**	
	Derbyniodd y Bwrdd yr adroddiad a nodai'r materion allweddol a drafodwyd 'mewn-pwyllgor' yng nghyfarfodydd y Bwrdd ym mis Mai a mis Mehefin.	
Penderfynwyd	**Nododd** y Bwrdd yr Adroddiad	
RHAN 5	**MATERION ERAILL**	
1807/5.1	**Unrhyw Fater Brys Arall**	
	Gan nad oedd unrhyw fusnes brys arall ar gyfer y sesiwn agored, penderfynodd y Bwrdd symud i'r sesiwn gaeedig.	
1807/5.2	**Dyddiadau'r Cyfarfodydd Nesaf**	
	Cadarnhawyd dyddiadau'r cyfarfodydd nesaf fel a ganlyn: • Sesiwn Datblygu'r Bwrdd AaGIC i'w chynnal 29 Awst 2019 yn Nhŷ Dysgu, Nantgarw. • Bwrdd AaGIC i'w gynnal 26 Medi 2019 yn Nhŷ Dysgu, Nantgarw.	

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Chris Jones (Cadeirydd) Dyddiad:

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Bwrdd AaGIC (agored)
18 Gorffennaf 2019
Taflen Gweithredu

(Mae'r daflen weithredu hefyd yn cynnwys camau y cytunwyd arnynt mewn cyfarfodydd blaenorol o Fwrdd AaGIC agored ac sy'n aros i gael eu cwblhau neu sydd wedi'u hamserlennu i'r Pwyllgor eu hystyried yn y dyfodol. Mae'r rhain wedi'u tywyllu yn yr adran gyntaf. Pan gaiff ei gymeradwyo gan y Bwrdd bydd y camau hyn yn cael eu cymryd oddi ar y daflen weithredu dreigl.)

Cyfeirnod Cofnod	Gweithred a Gytunwyd	Arweinydd	Dyddiad targed	Cynnydd/ Wedi Cwblhau
3005/4.10	**Y Wybodaeth Ddiweddaraf am Bolisïau**			
	• Bydd adolygiadau polisi yn cael eu hamserlennu i flaenraglen y Bwrdd.	**Ysgrifennydd y Bwrdd**	Diwedd Awst 2019	Wedi cwblhau. Diweddarwyd y flaenraglen waith.
3005/4.11	**Polisi Rheoli Risg**			
	• • Rhestr wirio adroddiadau i gynnwys y broses gadarnhau ar gyfer polisïau.	**Ysgrifennydd y Bwrdd**	Diwedd Awst 2019	Wedi cwblhau. Mae rhestr wirio cymeradwyo polisi wedi'i diweddaru i gynnwys cyfeiriad at y broses gadarnhau.
3005/4.14	**Y Pwyllgor Addysg, Comisiynu ac Ansawdd a Threfniadau Llywodraethu'r Bwrdd**			
	• Y Bwrdd i roi ystyriaeth bellach i'r berthynas a'r trefniadau adrodd i'r Bwrdd ar gyfer pwyllgorau yn ystod yr haf.	**Ysgrifennydd y Bwrdd**	Awst 2019	Wedi cwblhau.

Cyfeirnod Cofnod	Gweithred a Gytunwyd	Arweinydd	Dyddiad Targed	Cynnydd/ Wedi cwblhau
1807/1.4	**Stori Traw-effaith AaGIC ar Ofal Sylfaenol**			
	• Adroddiad Adolygu Cymheiriaid Gofal Sylfaenol Brys (Tu Allan i Oriau) i'w rannu ag Aelodau ' r Bwrdd	**Cyfarwyddwr y Gweithlu a DG**	Ar unwaith	Wedi cwblhau.
	• Rhannu adroddiad 'Cau i Lawr' o'r Grŵp Gorchwyl a Gorffen gydag Aelodau'r Bwrdd.	**Cyfarwyddwr y Gweithlu a DG**	Medi 2019	Adroddiad ar Waith Gofal Sylfaenol Brys (Tu Allan i Oriau) yn eitem ar Agenda'r Bwrdd Medi.
	• Diolchiadau'r Bwrdd i'w roi i'r tîm.	**Cyfarwyddwr y Gweithlu a DG**	Ar unwaith	Wedi cwblhau.
1807/1.6	**Taflen Gweithredu**			
	• **3005/1.4 Cyflawniadau'r Hyfforddai a'r Hyfforddwr:** Darperir y rhestr o ddyddiadau a lleoliadau Grwpiau Diddordeb Meddygon Iau, fel y gall yr Aelodau Bwrdd hynny sydd â diddordeb mewn mynychu gael eu cydlynu'n ddaearyddol.	**Cyfarwyddwr Meddygol**	Hydref 2019	Dyddiadau'n cael eu trefnu a'u cylchredeg pan gânt eu cwblhau.
	• **3005/3.1 Optometreg – Adenillion ar Fuddsoddiad:** Y wybodaeth ddiweddaraf i'w darparu am y fethodoleg, a'i chymhwysiad i'r achos busnes, mewn cyfarfod o'r Bwrdd yn y dyfodol.	**Ceri Phillips**	Medi 2019	Bydd diweddariad ar lafar yn cael ei ddarparu yng nghyfarfod y Bwrdd Medi.
	• **3005/4.1 Cyfrifon Terfynol 2018/19:** Er tryloywder, diwygio geiriad y camau a ddatryswyd mewn perthynas â Buddion Pensiwn Aelodau'r Bwrdd ("ac	**Ysgrifennyddiaeth**	Ar unwaith	Wedi cwblhau

Cyfeirnod Cofnod	Gweithred a Gytunwyd	Arweinydd	Dyddiad Targed	Cynnydd/ Wedi cwblhau
	eithrio Aelodau Annibynnol o'r Bwrdd").			
	• **3005/4.8 Fframwaith Rheoli Perfformiad Integredig:** Arddangos dangosfwrdd 'Byw' yn sesiwn datblygu Bwrdd Awst.	**Cyfarwyddwr y Gweithlu a DG**	Awst 2019	Wedi cwblhau.
	• **3005/4.10 Diweddariad ar Bolisiau:** Archwilio ffordd effeithiol o rannu rhestr o ddogfennau polisi ehangach Llywodraeth Cymru gydag Aelodau'r Bwrdd i gynnwys penderfyniadau Gweinidogion, Llythyrau Gweinidogol, Cylchlythyrau Iechyd Cymru, Adolygiadau/Diweddariadau Polisi ac ati, ac nid bod yn gyfyngedig i hynny.	**Ysgrifennydd y Bwrdd**	Medi 2019	Wedi cwblhau. Eitem ar agenda'r Bwrdd Medi.
1807/2.1	**Adroddiad y Gadair**			
	• Gwahodd Llyfrgellwyr i gyflwyno sesiwn datblygu'r Bwrdd yn yr Hydref.	**Ysgrifennydd y Bwrdd**	Hydref 2019	Wedi cwblhau.
	• Rhannu adroddiad Tina Donnelly yn dilyn ei phresenoldeb yng nghynhadledd y llyfrgellwyr.	**Ysgrifennydd y Bwrdd**	Ar unwaith	Wedi cwblhau.
	• Rhannu adroddiad Ruth Hall yn dilyn ei phresenoldeb yn nigwyddiad iechyd a gofal cymdeithasol Arweinyddership yn Llandudno	**Ysgrifennydd y Bwrdd**	Ar unwaith	Wedi cwblhau.
	• • Chris Jones i ysgrifennu at y Comisiynydd Plant i ddechrau'r broses o sicrhau bod AaGIC yn mabwysiadu, hyrwyddo a datblygu'r cyhoeddiad 'Y	**Cadair**	Diwedd Gorffennaf 2019	Wedi cwblhau.

Cyfeirnod Cofnod	Gweithred a Gytunwyd	Arweinydd	Dyddiad Targed	Cynnydd/ Wedi cwblhau
	Ffordd Gywir: Dull Hawliau Plant yng Nghymru'.			
	• 'Y Ffordd Gywir: Dull Hawliau Plant yng Nghymru' I fod yn bwnc trafod mewn Sesiwn Ddatblygu'r Bwrdd.	**Ysgrifennydd y Bwrdd**	i/g	Y Cadeirydd a'r Tîm Gweithredol i gwrdd â'r Comisiynydd Plant ar 4 Tachwedd. Gwahodd y Comisiynydd i fynychu BDS yn Ch1 o 2020.
1807/2.2	**Adroddiad y Prif Weithredydd**			
	• Y Cadeirydd i ychwanegu'r pryderon ynghylch sefyllfa'r Fwrsariaeth i'w gyfarfod Gwerthuso gyda'r Gweinidog.	**Cyfarwyddwr Nyrsio**	30 Gorffennaf 2019	Wedi cwblhau
1807/3.1	**Cynllun Addysg, Comisiynu a Hyfforddiant GIG Cymru 2020/21**			
	• AaGIC i argymell i Lywodraeth Cymru ei fod yn ystyried cynyddu'r lleoedd addysg a hyfforddiant ar draws ystod o grwpiau staff fel y nodir yn adran 7 y Cynllun.	**Cyfarwyddwr Nyrsio**	Wedi cwblhau	Cyflwynwyd argymhellion i Lywodraeth Cymru. Disgwylir sylwadau gan Lywodraeth Cymru erbyn diwedd Medi 2019.
	• Diweddariad ar waith y Bwrdd Effeithlonrwydd Cenedlaethol sy'n ymwneud â gwariant cyflog amrywiadwy sy'n gysylltiedig â defnydd yr Asiantaeth i'w ddarparu.	**Cyfarwyddwr y Gweithlu a DG**	Hydref 2019	Bydd y briff yn cael ei gyflwyno yn sesiwn Datblygu'r Bwrdd mis Hydref.
1807/4.2	**Polisi Rheoli Risg**			
	• Cymeradwyodd y Bwrdd y polisi yn amodol ar sicrhau bod rhifau'r tudalennau'n cael eu cywiro ac ychwanegu cynnwys gwell mewn perthynas ag archwaeth risg y sefydliad.	**Ysgrifennydd y Bwrdd**	Diwedd Gorffennaf 2019	Wedi cwblhau.

Cyfeirnod Cofnod	Gweithred a Gytunwyd	Arweinydd	Dyddiad Targed	Cynnydd/ Wedi cwblhau
	• Unwaith y caiff ei ddiwygio, dylai'r polisi gael ei gyhoeddi ar y fewnrwyd a'i ledaenu drwy AaGIC i'w weithredu'n llawn ac i hysbysu Aelodau'r Bwrdd.	**Ysgrifennydd y Bwrdd**	Medi 2019	Wedi cwblhau.
	• Mae angen i'r Tîm Gweithredol gynnal asesiad o hyfforddiant Rheoli Risg. Diweddariad i'w roi i'r Bwrdd naill ai drwy adroddiad y Prif Weithredwr neu adroddiad diweddaru risg penodol.	**Ysgrifennydd y Bwrdd**	Rhagfyr 2019	Mae'r Bwrdd a'r uwch dîm Arweinyddiaeth wedi derbyn hyfforddiant mewn perthynas â risg drwy ymgynghorydd allanol. Cynllun i roi hyfforddiant ar risg i'r staff sy'n weddill i'w gyflwyno gan Ysgrifennydd y Bwrdd erbyn diwedd Rhagfyr 2019.
1807/4.3.2	**Adroddiad ar y materion allweddol gan y Pwyllgor Archwilio a Sicrwydd a gynhaliwyd ar 15 Gorffennaf 2019.**			
	• Adroddiad ysgrifenedig i'w gyflwyno yng nghyfarfod nesaf y Bwrdd.	**Gill Lewis**	Medi 2019	Wedi cwblhau.

Ar unwaith – oddifewn 3 diwrnod gwaith.

Adroddiad y Cadeirydd
Medi 2019

Ar 5 Awst 2019, mynychais y cyfarfod Gweinidogol gyda Chadeirydd a Phrif Weithredwyr GIG Cymru Gyfan. Roedd trafodaethau eang yn cynnwys:-

- Sut y mae sefydliadau yn sefydlu Deddf Llesiant Cenedlaethau'r dyfodol i lunio dull gweithredu'r sefydliad a'r gwaith sy'n mynd rhagddo yng nghyd-destun Cymru Iachach, a'r Bil Ansawdd arfaethedig.
- Amlygwyd gwaith AaGIC a Gofal Cymdeithasol Cymru ar Strategaeth y Gweithlu yn ogystal â'r Strategaeth Arweinyddiaeth.

Roedd Cyfarfod Grŵp Cymheiriaid Cadeiryddion GIG Cymru gyfan 27/8/19 yn cynnwys datblygu Cynllun Olyniaeth ar gyfer Byrddau, trafodaeth a dadl ar y Bil Ansawdd arfaethedig, y wybodaeth ddiweddaraf am raglen sefydlu Aelodau Annibynnol, a chyflwyniad ar y gwaith a wnaed i adolygu Dyrannu Adnoddau.

Ynghyd â Tina Donnelly ymwelais â Chanolfan Huggard yng Nghaerdydd, sy'n ganolfan flaenllaw ar gyfer rhai sy'n cysgu ar y stryd ac sydd wedi bodoli ers 30 mlynedd. Mae eu canolfan ddydd a'u hostel yn Hansen Street yng Nghaerdydd ar agor bob dydd o'r flwyddyn a thros y 12 mis diwethaf buont yn gweithio gyda mwy na 1,200 o bobl, gan weld 24 o bobl newydd bob mis ar gyfartaledd.

Mynychais y cwrs Rheoli Trawma Meddygol a Chydnerthedd (MEDTRiM) ar 25 Awst 2019 yma yn Nhŷ Dysgu, dan arweiniad Dr Mark Stacey. Mae MedTRiM yn adnodd rhagweithiol, wedi'i gyflenwi gan gymheiriaid, ar gyfer cefnogi'r rhai sy'n agored i drawma a addaswyd gan Dr Mark Stacey ac Andy McCann o'r hyfforddiant gwydnwch trawma a ddefnyddir gan y fyddin. Fe'i lluniwyd i fynd i'r afael â strategaethau ymarferol ar gyfer ymdrin â digwyddiad trychinebus sylweddol, a rhoddodd gyflwyniad i amrywiaeth o sgiliau lles unigol (Dwsin y Pobydd). Mynychodd tua 30 o gynrychiolwyr ar draws y rhan fwyaf o'r proffesiwn meddygol. Dysgais mewn gwirionedd fod y fethodoleg yn berthnasol iawn ac yn amserol iawn ac y gallai fod yn un o'r arfau a allai helpu yn yr agenda arweinyddiaeth dosturiol. Roedd yn wirioneddol wych gwrando ar y cyfranogwyr yn ymgysylltu ac yn rhannu eu teimladau a'u profiadau personol.

Ar 11 Medi 2019 roeddwn yn falch o fynychu'r digwyddiad Arweinyddiaeth Feddygol yn Abertawe a chlywed drosof fy hun drwy gyflwyniadau a thrafodaethau un i un sut mae hyn yn gwella ac yn cefnogi arweinyddiaeth glinigol ledled Cymru.

O ran Llywodraethu'r Bwrdd, mae adolygiadau ac arfarniadau aelodau annibynnol ar y gweill. Rwyf wedi cwblhau fy arfarniad diwedd blwyddyn gyda'r Gweinidog, ac ar y cyd â Ruth Hall, Gill Lewis a Tina Donnelly, rwyf wedi cefnogi'r gwaith sy'n mynd rhagddo ar yr Is-bwyllgor Comisiynu ac Ansawdd Addysg.

Cafwyd cyfleoedd cynhyrchiol a llawn gwybodaeth i gwrdd ac ymgysylltu â phartneriaid allanol ledled Cymru yn ystod y mis diwethaf. Ynghyd â John Hill-Tout, euthum i'r gynhadledd Gofal Cymdeithasol yng Nghaerdydd, a mynychodd Ruth Hall a minnau sioe deithiol AaGIC yn Llangollen. Yn y ddau ddigwyddiad hyn mae'n amlwg bod tîm AaGIC wedi ymgysylltu'n llawn a'u bod yn weithgar, ac yn meithrin enw da ein sefydliad am adeiladu partneriaeth cryf.

Eitemau wrth John Hill-Tout, Dirprwy Gadair

Ers y Bwrdd diwethaf, yr wyf wedi bod mewn dau gyfarfod o Is-gadeiryddion a'r prif faterion a ystyriwyd oedd:-

- ***Gofal Sylfaenol***
  Gan gynnwys y cerrig milltir cyflawni ar gyfer 2019/2020 a chyfraniad Gofal Sylfaenol at gynllunio ar gyfer y gaeaf sydd i ddod. Mae'r Arweinydd Strategol Cenedlaethol ar gyfer y Strategaeth Gofal Sylfaenol yn nodi perthynas waith agos ag AaGIC, drwy ein Menter Gofal Sylfaenol ein hunain, ar faterion y gweithlu.

- ***Iechyd Meddwl***
  Mae'r Is-gadeiryddion wedi canolbwyntio ar gyflawni safonau perfformiad o ran mynediad cleifion i wasanaethau.

- ***Gwasanaethau Iechyd Meddwl Plant a'r Glasoed***
  Mae BILlau yn nodi cynnydd yn y galw am y gwasanaethau hyn, ynghyd â phrinder staff, sy'n arwain at anawsterau wrth fodloni targedau perfformiad ar gyfer mynediad at wasanaethau i blant a phobl ifanc. Gofynnwyd i AaGIC gynorthwyo a thrafodwyd papur yng nghyfarfod diweddar yr Is-gadeiryddion a nododd ein cynlluniau ar gyfer cynorthwyo yn y tymor canolig, gan gynnwys datblygu modelau staffio newydd.

Mynychais hefyd, gyda'r Cadeirydd, y gynhadledd Gofal Cymdeithasol Genedlaethol ragorol ar 12 Medi 2019. Cafwyd cyflwyniadau gan Aelodau'r cyhoedd sy'n defnyddio gwasanaethau iechyd a gofal cymdeithasol, ac roedd y diwrnod hefyd yn cynnwys cyfarfod ar gyfer Cadeiryddion, Is-gadeiryddion a Phrif Weithredyddion, a drefnwyd gan Gydffederasiwn GIG Cymru, i ddysgu am fodelau presgripsiynu cymdeithasol arloesol a gynigir i gleifion yn Tower Hamlets.

Dr Ruth Hall, Cadeirydd yr Is-bwyllgor Comisiynu Addysg ac Ansawdd

Mynychais ddigwyddiad dathlu Coleg Llandrillo ar gyfer Tystysgrif Lefel 4 mewn rhaglen Ymarfer Gofal Iechyd Addysg Uwch yn Llandudno. Mae'r digwyddiad yn cydnabod gwaith caled a chyflawniadau'r myfyrwyr ac yn cydnabod llwyddiant y rhaglen ar gyfer myfyrwyr a Bwrdd Iechyd Prifysgol Betsi Cadwaladr (BIPBC).

Bore ysbrydoledig, roedd yn ostyngedig i weld llwyddiannau'r myfyrwyr hyn a chymaint yr oedd yn ei olygu iddynt, hefyd yn llwyddiant i Ogledd Cymru.

Cafwyd cyfeiriadau cadarnhaol at AaGIC – gan gydnabod ein cefnogaeth a'n hanogaeth.

Pwyntiau allweddol:

• Amrywiaeth sylweddol o lwybrau gyrfa gwahanol wedi'u dilyn gan fyfyrwyr blaenorol, felly mae'r rhaglen yn agor maes eang o gyfleoedd; yr angen i gadw myfyrwyr a gyflogir yn lleol;
• Pwysigrwydd ansawdd 'cynnyrch' y llwybrau gyrfa hyn;
• Mae trefniadau mentora ar gyfer agweddau clinigol a dysgu yn cael eu gwerthfawrogi'n fawr ac mae angen iddynt feithrin/cynnal gallu mentora;
• Gweithio ar y cyd gyda grwpiau proffesiynol eraill, nyrsio yn arbennig.

Mynychais hefyd ddigwyddiad rhanddeiliaid AaGIC yng Nghaerfyrddin – digwyddiad pleserus a llawn gwybodaeth. Dau fater allweddol a glywais yn aml oedd:-

- Amser dysgu a ddiogelir;
- Mwy o gydnabyddiaeth o addysg (rhoi/derbyn) fel rhan o fywyd proffesiynol pob meddyg.

Cyfarfodydd y Cadeirydd dros y cyfnod 15 Gorffennaf – 25 Medi 2019

Dyddiad	Teitl y Cyfarfod
16/07/19	Gweithgor Addysgol Gofal Sylfaenol ar Fyrder
	Cyfarfod ag Archwilwyr Mewnol
17/07/19	Cwrdd â Phenaethiaid y Cymoedd i gyfarfod â Dirprwy Weinidog yr Economi a Thrafnidiaeth
	Ymweliad â Llyfrgell Felindre am gyflwyniad ar y sefyllfa VR, rôl y Llyfrgell a'r hyn sy'n cael ei gynnig i staff a myfyrwyr. Y gwaith sy'n cael ei wneud gyda myfyrwyr a meddygon graddfa dan hyfforddiant. Arddangosiad o fideos addysgol gofal lliniarol a'r apps lles sydd ar gael
	Cyfarfod ACP yn Felindre
18/07/19	Bwrdd AaGIC
	Pwyllgor Cyflog y Termau Gwasanaeth
	Cyfarfod Cyffredinol Blynyddol AaGIC
23/07/19	Grŵp Cyfeirio Gwasanaethau Cyhoeddus WCPP
	Grŵp Cymheiriaid Cadeiryddion GIG Cymru
24/07/19	Cyfarfod â Keith Lloyd ym Mhrifysgol Abertawe parthed myfyrwyr sy'n hanu o Gymru/Gorllewin Cymru
	Ymweliad ag Abertawe a Chyfleusterau Efelychu Newydd
25/07/19	Adolygiad o Ddyraniad Adnoddau – Grŵp Cynghori Technegol
	Cwrs MeDTRiM
29/07/19	Trafod gyda Tom YAPP parthed y GIG mewn ysgolion
30/07/19	Cyfarfod rhagarweiniol rhwng y Prif Swyddog Gweithredol, a Cadeiryddion AaGIC a Byrddau'r BIC
	Ymuno â'r Tîm Gweithredol yn ystod eu hymweliad â'r Ystafell Glinigol ym Mhrifysgol De Cymru
31/07/19	Cwrdd â Nik Sheen parthed Gofal Llygaid
	Cadeirio Panel IPFR Cymru gyfan
05/08/19	Cyd-gyfarfod rhwng Cadeiryddion Cymru Gyfan
	Cyfarfod Gweinidogol â Chadeiryddion Cymru Gyfan
06/08/19	Sesiwn unigol Two @ The Top
	Gwaith dilynol ar adolygiad cymheiriaid WAST gyda Richard Bowen a Martin Woodford
	Gwerthusiad y Cadeirydd gyda' r Gweinidog dros Iechyd a Gwasanaethau Cymdeithasol
07/08/19	Ymweliad â Chanolfan Huggard sef prif ganolfan Cymru ar gyfer rhai sy'n cysgu ar y stryd ac sydd wedi bodoli ers 30 mlynedd. Mae eu canolfan ddydd a'u hostel yn Hansen Street yng Nghaerdydd ar agor bob dydd o'r flwyddyn a thros y 12 mis diwethaf maent yn gweithio gyda mwy na 1,200 o bobl. Yn wir, maent yn gweld 24 o bobl newydd bob mis, ar gyfartaledd.
	Wedi cwrdd â Grace Quantock

Dyddiad	Teitl y Cyfarfod
13/08/19	Wedi cyfarfod â Pushpinder Managt a Keshav Singal parthed recriwtio India
21/08/19	Cyfarfod â Keith Lloyd, Prifysgol Abertawe
27/08/19	Grŵp Cymheiriaid Cadeiryddion GIG Cymru
28/08/19	Panel IPFR Cymru Gyfan
29/08/19	Tâl y Pwyllgor Cyflog
	Sesiwn Datblygu'r Bwrdd
02/09/19	Bwrdd Rheoli Conffederasiwn GIG Cymru
	Fforwm Cynghori Iechyd a Gofal Cymdeithasol rhanddeiliaid y Gweinidog BREXIT
	Gweithdy Is-grŵp polisi'r GIG yng Nghymru ar etholiadau'r Cynulliad Cenedlaethol 2021
09/09/19	Cyfarfod rhagarweiniol gyda Darren Hughes, Cyfarwyddwr Gwasanaeth y GIG-Cadeirydd a Phrif Swyddog Gweithredol
10/09/19	Adolygiad o ddyraniad adnoddau – Grŵp Cynghori Technegol
11/09/19	Rhaglen arweinyddiaeth feddygol o Waith Gwella Gwasanaethau
12/09/19	Cynhadledd Gofal Cymdeithasol – Mynychu prynhawn yr 11eg a'r 12fed o Fedi
	Cadeirydd y Prif Swyddog Gweithredol gyda Syr Sam Everington i ddysgu am y modelau presgripsiynu cymdeithasol arloesol sy'n cael eu cynnig i gleifion yn Tower Hamlets
16/09/19	Y Cadeirydd a'r Prif Swyddog Gweithredol yn cyfarfod â Swyddfa Archwilio
17/09/19	Fforwm Arweinyddiaeth Gydweithredol y GIG
18/09/19	Digwyddiad rhanddeiliaid Gogledd Cymru i gyfarfod â staff a rhoi trosolwg o rôl AaGIC o ran cefnogi iechyd a gofal yng Nghymru a strategaeth y gweithlu ar gyfer iechyd a gofal cymdeithasol. Y wybodaeth ddiweddaraf am addysg a chrynodeb o brif heriau a blaenoriaethau'r IMTP.
23/09/19	Cyfarfod Cadeiryddion y GIG
	Cyfarfod Gweinidogol Cadeiryddion y GIG gyda Vaughan Gething
24/09/19	Y grŵp trawsbleidiol o dan gadeiryddiaeth John Griffiths, ac Adeiladu Cymru Well - Gwersi o Ewrop.
25/09/19	Dosbarth Meistr gyda Margaret Wheatley - un o arbenigwyr mwyaf blaenllaw'r byd ar Arweinyddiaeth
	Panel IPFR Cymru Gyfan- yn Cadeirio

Dyddiad Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**2.2**
Teitl Adroddiad	**Adroddiad y Prif Weithredydd**		
Awdur Adroddiad	Alex Howells, Prif Weithredydd		
Noddwr Adroddiad	Alex Howells, Prif Weithredydd		
Cyflwynywyd gan	Alex Howells		
Rhyddid Gwybodaeth	Agored		
Gweithrediad Penodol Angenrheidiol	Mae'r adroddiad yma er gwybodaeth yn unig.		

Adroddiad y Prif Weithredydd – Medi 2019

1. PWRPAS YR ADRODDIAD

Diben yr adroddiad hwn yw rhoi'r wybodaeth ddiweddaraf i'r Bwrdd am y gweithgareddau allweddol a gynhaliwyd ers y cyfarfod diwethaf o'r Bwrdd a gosod cyd-destun ar gyfer nifer o faterion sy'n ymddangos yn fwy amlwg o fewn adroddiadau Cyfarwyddwyr Gweithredol fel rhan o fusnes y Bwrdd.

2. GWEITHREDIADAU ALLWEDDOL

Strategaeth y Gweithlu Iechyd a Gofal Gymdeithasol

Byddwn wedi cwblhau'r cam ymgynghori ar y strategaeth erbyn diwedd mis Medi ac wedi manteisio ar y cyfle yn ystod y cam hwn i barhau i godi proffil y themâu allweddol a'r blaenoriaethau a awgrymwyd gennym gydag amrywiaeth o randdeiliaid ledled Cymru. Yr ydym ar y trywydd iawn i lunio strategaeth derfynol erbyn mis Tachwedd.

Strategaeth Arweinyddiaeth

Un o gydrannau allweddol strategaeth y gweithlu yw datblygu strategaeth arweinyddiaeth sy'n seiliedig ar ymagwedd gyfunol a thosturiol tuag at arweinyddiaeth a diwylliant. Mae gwaith i ddatblygu'r strategaeth, a'r offer a'r adnoddau i gyflawni hyn, wedi bod yn mynd yn ei flaen yn gyfochrog â datblygu strategaeth ar gyfer y gweithlu. Rydym wedi cael ymteb frwd iawn i'r gynhadledd arweinyddiaeth sydd ar y gweill ar gyfer 21 Hydref. Mae crynodeb o'r gwaith hwn wedi'i gynnwys ym mhapur y Bwrdd sy'n dilyn yn ddiweddarach ar yr agenda.

Cynllun Tymor Canolig Integredig (IMTP)

Rydym wedi cynnwys diweddariad ar ddatblygu'r IMTP ar agenda'r Bwrdd. Mae hyn wedi'i lywio gan weithdy arall sy'n cynnwys yr uwch dîm arwain estynedig, lle y clywsom gan dimau unigol am eu cynlluniau ar gyfer y 3 blynedd nesaf. Mae hyn wedi ein galluogi i wneud cysylltiadau mwy eglur â'r nodau strategol a hefyd rhwng rhaglenni gwaith tebyg ar draws y sefydliad. Yr ydym yn awr yn profi ein cynlluniau newydd gydag ystod o randdeiliaid, a bydd hyn yn llywio IMTP drafft ar gyfer Sesiwn Datblygu'r Bwrdd ym mis Hydref.

Adroddiad Perfformiad Integredig

Mae ein hadroddiad perfformiad integredig cyntaf ar yr agenda. Rydym wedi trafod y gwaith o ddatblygu'r fframwaith perfformiad a chyflwyno adroddiadau ar berfformiad nifer o weithiau yng nghyfarfodydd y Bwrdd a sesiynau datblygu'r Bwrdd, ac rydym wedi cydnabod y bydd hyn yn parhau i fod yn "cael ei adeiladu" yn ystod 2019/20. Mae'r mesurau a'r dangosyddion sy'n berthnasol i'n sefydliad ar y cyfan yn wahanol i'r rhai a ddefnyddir gan sefydliadau eraill yn y GIG, ac mae hyn yn cynnwys amlder yr adroddiadau sydd yn aml yn seiliedig ar gylchoedd academaidd.

Datblygu Cynllun Comisiynu Addysg a Hyfforddiant 20/21

Cefnogwyd y Cynllun Comisiynu Addysg a Hyfforddiant gan Brif Weithredwyr y GIG a Bwrdd Gweithredol y GIG, ac mae'n awr yn disgwyl penderfyniad gan y Gweinidog dros Iechyd a Gwasanaethau Cymdeithasol.

Hyfforddiant Meddygol Ôl-raddedig – Ehangu'r Cyfnod Sylfaen

Mae un o'r papurau ar agenda'r Bwrdd heddiw yn ymwneud ag achos busnes dros ehangu nifer y meddygon cyfnod sylfaen o'r flwyddyn nesaf ymlaen. Mae hyn yn ofynnol er mwyn bodloni'r allbwn cynyddol o ysgolion meddygol a'r cynnydd yn nifer yr hyfforddeion sy'n Feddygon Teulu. Mae hyn yn gydran arall yn y gwaith o ddatblygu cynllun gweithlu meddygol mwy cynaliadwy ar gyfer GIG Cymru yn y dyfodol.

Adborth wrth Sioeau Teithiol AaGIC 2019

Y mis hwn, aethom i ymweld ag Ysbyty Glangwili ym Mwrdd Iechyd Prifysgol Hywel Dda a chwrdd â 36 o aelodau staff, myfyrwyr a hyfforddeion o amrywiaeth o broffesiynau. Cynhaliwyd nifer o sgyrsiau brwdfrydig iawn yn bennaf ar sail 1-1 gyda chydweithwyr AaGIC yn hytrach nag fel rhan o'r sesiwn holi ac ateb. Roedd yr adborth ynglŷn â'r sioe deithiol ei hun yn gadarnhaol iawn, yn enwedig am fod AaGIC yn gwneud yr ymdrech i fynd allan a chwrdd â phobl. Mae cynlluniau ar y gweill ar gyfer dwy sioe deithiol arall i Bowys, a Chaerdydd a'r Fro, ym mis Tachwedd.

Cyllid

Mae papur yn amlinellu'r sefyllfa ym mis 5 ar yr agenda. Mae'r tîm cyllid wedi rhoi gwybod am hyn drwy "waith dwfn" er mwyn deall yr amrywiannau yn erbyn cyllidebau, ac yn arbennig i lywio camau gweithredu mewn perthynas â gwariant yn ystod y flwyddyn.

Cofrestr risg

Mae'r Gofrestr Risgiau Corfforaethol ar yr agenda. Mae 26 risg ar y gofrestr. Nid oes unrhyw risgiau coch ar hyn o bryd, 23 o risgiau oren a thri risg gwyrdd.

4. ARGYMHELLIAD

Gofynnir i'r Bwrdd nodi'r adroddiad hwn.

Dyddiad Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**3.1**
Teitl Adroddiad	**Diweddariad ar Ddatblygu Arweinyddiaeth a Chynllunio ar gyfer Olyniaeth**		
Awdur Adroddiad	Helen Thomas, Cyfarwyddwr Cynorthwyol Arweinyddiaeth & Olyniaeth		
Noddwr Adroddiad	Julie Rogers, Cyfarfwyddwr Gweithlu a DG		
Cyflwynywyd gan	Julie Rogers, Cyfarfwyddwr Gweithlu a DG		
Rhyddid Gwybodaeth	Agored		
Pwrpas yr Adroddiad	Darparu adroddiad cynnydd ar y Rhaglenni Datblygu Arweinyddiaeth a Chynllunio Olyniaeth.		
Materion Allweddol	Mae'r papur hwn yn rhoi crynodeb o'r cynnydd yn erbyn y rhaglenni arweinyddiaeth a chynllunio olyniaeth-amcan 6 yng nghynllun blynyddol AaGIC 2019/20.		
Camau penodol ***(Rhowch un ✓yn unig)***	**Gwybodaeth**	**Trafodaeth**	**Sicrwydd**	**Cymeradwyo**
	✓		✓	
Argymhellion	Gofynnir i Aelodau: • Nodi'r cynnydd sydd wedi ei wneud hyd yn hyn yn y ffrydau gwaith i wireddu Amcan 6			

DIWEDDARIAD AR GYNNYDD YN ERBYN: ADFYWIO DATBLYGU ARWEINYDDIAETH A CHYNLLUNIO AR GYFER OLYNIAETH

1. CYFLWYNIAD

1.1 Bydd gweithredu 'Cymru Iachach' yn dibynnu ar arweinwyr rhagorol a fydd yn sicrhau bod diwylliant lles, gwelliant parhaus, didwylledd a diogelwch seicolegol o fewn ein gweithlu a'n sefydliadau yn ffynnu. Bydd hyn yn gofyn am ymagwedd gyfunol a thosturiol tuag at arweinyddiaeth sy'n meithrin gallu pawb i arwain, yn creu pwrpas a rennir ac yn adlewyrchu gwerthoedd sy'n canolbwyntio ar yr unigolyn.

1.2 Mae'r dull o ddatblygu arweinyddiaeth yng Nghymru yn cael ei lywio gan waith ymchwil sy'n seiliedig ar dystiolaeth a thrwy ymgysylltu ag arbenigwyr credadwy. Bydd yn hyrwyddo dull cynhwysol ac amlddisgyblaethol o ddatblygu arweinyddiaeth sy'n adlewyrchu realiti'r sefyllfa o weithio gyda thimau. Bydd y strategaeth arweinyddiaeth y byddwn yn ei datblygu gyda phartneriaid yn gosod disgwyliadau clir i yrru gweithgarwch datblygu arweinyddiaeth ac ymddygiad arweinyddiaeth ar draws y system gyfan – yn genedlaethol ac yn lleol, o fewn iechyd ac o bosibl o fewn gofal cymdeithasol.

1.3 O ystyried hyn o safbwynt AaGIC, mae ein sefydliad wedi darparu ffocws newydd ar gyfer cyflawni'r gwaith hwn unwaith ar gyfer Cymru, yn gyflym ac yn unol â'r uchelgais i drawsnewid ein gweithlu gofal iechyd yng Nghymru. Dechreuwyd ar waith yn y maes trawsnewid allweddol hwn yng ngwanwyn 2019, ond fel y nodwyd yn y tudalennau canlynol nid ydym yn gweithio o dudalen wag – mae gennym fantais o waith blaenorol, o ddatblygiadau mewn gwledydd eraill a dysgu sylweddol. Mae Amcan 6 o gynllun blynyddol AaGIC 2019-20 yn nodi'r prosiectau cychwynnol;

- Datblygu strategaeth arweinyddiaeth ar gyfer Iechyd a Gofal Cymdeithasol Cymru, mewn partneriaeth â gofal cymdeithasol Cymru ac Academi Cymru
- Gweithredu fframwaith cynllunio olyniaeth a rheoli talent ar gyfer GIG Cymru
- Mapio'r adnoddau arwain a rheoli a nodi rhaglenni blaenoriaeth ar gyfer iechyd a gofal
- Gweithredu porth arweinyddiaeth ddigidol a rhwydwaith (au) cyn-fyfyrwyr

2. CEFNDIR

2.1 Cafodd cyflwyniad yn amlinellu'r cynnydd hyd yma a'r amserlen arfaethedig ar gyfer cyflawni'r strategaeth arweinyddiaeth ac yn sail i allbynnau'r prosiect ei gyflwyno yn sesiwn datblygu'r Bwrdd ar 27ain Mehefin 2019. Cadarnhaodd yr adroddiad fod AaGIC wedi sicrhau cytundeb gan Lywodraeth Cymru a GIG Cymru i sefydlu dull ar y cyd a thosturiol i ddatblygu strategaeth arweinyddiaeth Cymru a phrosiectau cysylltiedig. Mae'r dull hwn, sydd wedi'i ddatblygu a'i feithrin gan yr Athro Michael West, Kings Fund, eisoes yn darparu'r sylfeini ar gyfer datblygu arweinyddiaeth mewn gofal iechyd ar draws rhannau eraill o'r Deyrnas Unedig ac Iwerddon. Mae gofal cymdeithasol Cymru yn cefnogi dull tosturiol a chyfunol o arwain ar gyfer datblygu strategaeth arweinyddiaeth ar gyfer iechyd a gofal ac wedi cynnal rhywfaint o ymgysylltu â'r sector gofal cymdeithasol, yn bennaf yng nghyd-destun strategaeth y gweithlu. Mae Cyfarwyddwr Arweiniol Gwasanaethau Cymdeithasol wedi'i enwebu i eistedd wrth ochr y ddau sefydliad fel aelod o'r grŵp llywio arweinyddiaeth.

2.2 Mae arweinyddiaeth dosturiol ar ei symlaf yn ei gwneud yn ofynnol i arweinwyr:

- Mynychu – rhoi amser a gwrando gyda diddordeb
- Deall – darganfod beth a pham
- Empatheiddio – gofalu am y person arall
- Helpu – cefnogi/cymryd camau priodol

Mae arweinyddiaeth ar y cyd yn galw am ganolbwyntio ar dimau, systemau a chynwysoldeb. Mae dulliau tosturiol a chyfunol yr rhai mor berthnasol i arweinwyr clinigol ag y maent i'r gweithlu'n fwy cyffredinol. Dengys adborth o'r cam ymgysylltu wrth ddatblygu'r strategaeth genedlaethol ar gyfer y gweithlu fod ymatebwyr yn awyddus i gael dull o arwain ar y cyd a thosturiol ynghyd â diwylliant sy'n hyrwyddo diogelwch seicolegol, yn blaenoriaethu iechyd a lles y gweithlu, yn gynhwysol ac yn aml-broffesiynol. Gwyddom hefyd fod rhai o sefydliadau eraill GIG Cymru yn cymryd rhan weithredol yn y dull hwn, er enghraifft Felindre. Ond yn fwy na dim, ceir tystiolaeth glir o'r cysylltiad rhwng y dulliau hyn-sy'n canolbwyntio ar les y gweithlu, fel y rhagwelwyd yn y nod pedwarplyg, ac ansawdd y gofal i gleifion yn ogystal â gwella ansawdd.

2.3 Mae'r papur hwn yn darparu crynodeb canol blwyddyn o gynnydd yn erbyn cerrig milltir allweddol, gan gynnwys camau a gymerwyd i gyflymu'r broses o ddarparu ffrydiau gwaith.

3 DIWEDDARIAD STRATEGAETH ARWEINYDDIAETH

3.1 Sefydlu Grŵp Llywio Arweinyddiaeth

Mae grŵp llywio cyffredinol wedi'i sefydlu i gydredeg â Grŵp Llywio'r Strategaeth Gweithlu ar y Cyd. Mae'r grŵp llywio yn cynnwys cynrychiolwyr o'r GIG, Gofal Cymdeithasol Cymru, Llywodraeth Cymru, Academi Cymru a Llywodraeth Leol ac fe'i sefydlwyd i:

• Goruchwylio'r gwaith o gynhyrchu strategaeth arweinyddiaeth sy'n darparu systemau, newid, gallu i arwain a'r gallu i gyflawni 'Cymru Iachach'

• Mapio'r adnoddau arwain a rheoli presennol a nodi rhaglenni blaenoriaeth ar gyfer iechyd a gofal

• Rhannu gwybodaeth am ddatblygiadau yn y sector ehangach

Mae model llywodraethu'n cael ei lunio'n derfynol er mwyn sicrhau ymgysylltu a chyfleu penderfyniadau a chynnydd yn effeithiol.

3.2 Adolygiad o ddatblygiad arweinyddiaeth presennol

Cynhaliwyd adolygiad o ddatblygu arweinyddiaeth ar draws GIG Cymru yn ystod Mai 2019. Cynhelir adolygiad tebyg gan Gofal Cymdeithasol Cymru a'i gwblhau erbyn Rhagfyr 2019. Defnyddir yr adolygiadau i lywio'r gwaith o ddatblygu'r strategaeth, nodi bylchau o ran datblygu uwch arweinwyr a llywio'r gwaith o gomisiynu/datblygu rhaglenni arweinyddiaeth cenedlaethol yn y dyfodol a gynlluniwyd i gynorthwyo arweinwyr presennol yn ogystal â chreu genhedlaeth o arweinwyr.

Un o'r rhaglenni sydd o fewn cwmpas yr adolygiad yw'r Rhaglen Arweinyddiaeth feddygol (MLP). Cafodd ei redeg gan Academi Cymru, ar gyfer GIG Cymru, ac fe'i trosglwyddwyd i AaGIC ym mis Ebrill 2019. Bydd y garfan bresennol, sy'n cynnwys unigolion o raglen Cymrodyr Clinigol AaGIC yn ogystal â chlinigwyr o bob cwr o'r GIG yng Nghymru, yn cwblhau eu rhaglen ddiwedd y mis hwn. Yn ystod 2019-20, bydd AaGIC yn adolygu rhaglenni arweinyddiaeth glinigol 'etifeddol' gyda'r bwriad o gyflwyno cynigion ar gyfer rhaglen arweinyddiaeth glinigol unedig ar ddechrau 2020 ac agor ar gyfer ceisiadau yn ddiweddarach yn y flwyddyn. Yn draddodiadol, mae cymrodyr clinigol meddygol wedi cael mynediad i raglen Academi Cymru fel rhan o'u rhaglen Gymrodoriaeth; gan nad yw wedi'i fwriadu i redeg y flwyddyn nesaf, defnyddir trefniadau amgen i sicrhau bod y cohort newydd yn cael mynediad i ddatblygiad arweinyddiaeth priodol yn ystod y cyfnod pontio.

3.3 Cynhadleth Ymgysylltu ag Arweinyddiaeth

Mae ymgysylltu â rhanddeiliaid allweddol yn hanfodol i ddatblygu a defnyddio ' r strategaeth arweinyddiaeth. Er mwyn ymgysylltu â rhanddeiliaid i'r eithaf, mae AaGIC yn cynnal cynhadledd ymgysylltu arweinyddiaeth ar y cyd ar 21 Hydref 2019 yng Ngerddi Soffia, Caerdydd.

Bydd Andrew Goodall, Prif Weithredwr GIG Cymru a Chyfarwyddwr Cyffredinol HSS, Llywodraeth Cymru, yn siaradwr cyweirnod yn y gynhadledd a bydd yn gosod y cyd-destun ar gyfer y gwaith pwysig hwn. Bydd yr Athro Michael West hefyd yn traddodi araith allweddol a bydd yn rhannu'r sail dystiolaeth ar gyfer creu diwylliant o arweinyddiaeth ar y cyd ar draws iechyd a gofal cymdeithasol. Bydd Michael yn cael ei gefnogi gan gyd-Aelodau o Loegr a Gogledd Iwerddon a fydd yn rhannu'r modd yr aethant ati i roi arweiniad ar y cyd ar waith ar draws cymunedau iechyd a gofal cymdeithasol.

Gwahoddwyd 300 o bobl i fynychu'r gynhadledd gyda chynrychiolaeth o'r maes iechyd yn bennaf, ond hefyd yn cynnwys Gofal Cymdeithasol Cymru, Academi Cymru, partneriaid strategol a sefydliadau academaidd. Mae'r gynhadledd wedi'i chynllunio i ymgysylltu â safbwyntiau a syniadau rhanddeiliaid drwy weithgareddau cyrchu torfol. Bydd rhwydweithiau a sgwadiau (grwpiau gorchwyl a gorffen) yn cael eu sefydlu yn y gynhadledd er mwyn sicrhau dull cyd-gynhyrchiol o ymdrin â'r strategaeth arweinyddiaeth a'r fframwaith cyflawni sy'n deillio o hyn. Caiff hyn ei gefnogi gan Reolwr Rhaglen AaGIC ar gyfer cyflawni amserol a llywodraethu cadarn. Nid yw'r gweithgarwch ymgysylltu â'r sector gofal cymdeithasol wedi'i benderfynu eto, ond caiff ei arwain gan Gofal Cymdeithasol Cymru, gyda mewnbwn gan AaGIC ac Academi Cymru fel y bo'n briodol.

3.4 Datblygu Porth Arweinyddiaeth Digidol

Mae datblygu porth arweinyddiaeth ddigidol a all groesi ffiniau sefydliadol yn gyflawniad allweddol ar gyfer 2019-20. Cynhaliwyd ymarfer i archwilio cyflenwyr posibl porth digidol a modd archebu cwrs gan AaGIC (Mehefin hyd at Awst 2019) gan arwain at nodi cyflenwr a ffefrir.

Mae proses gaffael wedi'i chwblhau ac mae'r contract wedi'i ddyfarnu ar gyfer cynllun peilot 12 mis a ragwelir erbyn diwedd mis Medi 2019. Bydd hyn yn golygu y gellir cychwyn y gweithgareddau canlynol ym mis Hydref hyd at Fawrth 2020:

- Dylunio a brandio'r porth
- Hyfforddiant ar gyfer defnyddwyr allweddol a datblygu protocol cyfrifoldeb defnyddwyr
- Creu llyfrgell cynnwys arweinyddiaeth
- Creu rhwydweithiau a chyn-fyfyrwyr i gynorthwyo talent a phyllau datblygu arweinyddiaeth.

3.5 Datblygu a chynnal cyfres o adnoddau datblygu rheolaeth

Mae caffael a datblygu porth arweinyddiaeth ddigidol yn rhoi cyfle i greu 'llyfrgell adnoddau rheolwyr' drwy goladu a safoni'r amrywiaeth eang o ddeunyddiau datblygu rheolaeth sydd eisoes yn bodoli ar draws GIG Cymru. Bydd hyn hefyd yn rhoi cyfle i adolygu, adnewyddu a chynnal Fframwaith Cymhwysedd Craidd GIG Cymru ar gyfer Rheolwyr a Goruchwylwyr, mewn partneriaeth ag Academi Cymru a GIG Cymru. Gellir sicrhau bod y deunyddiau hyn ar gael fel e-ddysgu ar gyfer dysgu hunangyfeiriedig neu adnoddau electronig a reolir gan fersiwn i'w defnyddio mewn hyfforddiant wyneb yn wyneb. Bydd hyn yn darparu sicrwydd a chludadwyedd cymhwysedd rheoli ar draws GIG Cymru.

Bydd cynllun prosiect yn cael ei ddatblygu drwy gydol Medi 19 mewn partneriaeth â'r gweithlu ac mae cydweithiwr OD yn profi llif gwaith sy'n amlinellu dibyniaethau a dyddiadau cyflwyno.

3.6 Ymgysylltu ag arbenigwyr a chyfleoedd credadwy i fanteisio i'r eithaf ar adnoddau'r DU

Mae Rhwydwaith Arweinyddiaeth Pum Gwlad y DU yn rhoi mynediad i ni at arbenigwyr credadwy ac ymchwil sy'n seiliedig ar dystiolaeth, sy'n hanfodol ar gyfer datblygu ein strategaeth arweinyddiaeth. Yn ogystal, drwy'r rhwydwaith rydym wedi gallu sicrhau ystod o adnoddau y gellir eu haddasu i fodloni llawer o'n gofynion, gan gynnwys arfau agored o ran diwylliant ac arweinyddiaeth a ddatblygwyd gan Gronfa Kings (TKF) a GIG Lloegr. Mae'r rhwydwaith yn helpu i feithrin dull cyson o ddatblygu arweinyddiaeth ledled gwledydd y DU ac yn parhau i rannu arfer gorau gan gynnwys:

4 Y WYBODAETH DDIWEDDARAF AM GYNLLUNIO OLYNIAETH A RHEOLI TALENT

4.1 Cynllunio olyniaeth ar gyfer rolau uwch-arweinyddiaeth haen 1 a 2 y GIG yng Nghymru

Mae AaGIC wedi ymrwymo i gyflymu'r broses o weithredu cynllunio olyniaeth ar gyfer rolau uwch-arweinyddiaeth Haen 1 a Haen 2 yn GIG Cymru. Mae adnoddau wedi'u nodi i ddwysau'r ffrwd waith hon a datblygu'r canlynol yn gyflym:

- Hwyluso gweithdy i ddiffinio'r broses cynllunio olyniaeth ar gyfer y rolau hyn

- Nodi'r rolau Gweithredwyr a Cyfarwyddwyr ar draws GIG Cymru, mannau dwys a blaenoriaethau

- Adolygu a gwella (lle bo'n ofynnol) y fframweithiau cymhwysedd, gwerthoedd ac ymddygiad ar gyfer uwch rolau yn GIG Cymru. Gall hyn adeiladu ar y gwaith a wnaed gan GIG yr Alban (NES) sydd eisoes â'r rhain wedi'u diffinio'n dda, yn ogystal â'r gwaith a wneir gan Academi Cymru. Mae cynllun pobl dros

dro GIG Lloegr hefyd wedi tynnu sylw at y gwaith hwn fel blaenoriaeth dros y 6 mis nesaf ac felly mae cyfle i ddefnyddio ein rhwydweithiau i rannu a dysgu oddi wrth ein gilydd.

- Datblygu proses i adnabod talent awyddus ar draws GIG Cymru

- Datblygu/comisiynu rhaglen(ni) datblygu arweinyddiaeth weithredol

- Poblogi cronfa talent

- Lansio rhaglen/rhaglenni datblygu a chyn fyfyrwyr

Rhagwelir y bydd y gronfa dalent, y cyn-fyfyrwyr a'r rhaglen yn eu lle erbyn Ebrill 2020.

4.2 Datrysiad datblygu dawn ddigidol a cynllunio olyniaeth

Roedd strategaeth cynllunio olyniaeth genedlaethol GIG Cymru 2017-27 yn amlinellu'r broses ganlynol ar gyfer rheoli talent yn effeithiol a sicrhau llif o uwch arweinwyr y dyfodol:

- Cam 1-Nodi anghenion staffio
- Cam 2-Creu cronfeydd talent
- Cam 3-Nodi ymgeiswyr y gronfa olyniaeth
- Cam 4-Datblygu ymgeiswyr olynol
- Cam 5-Defnyddio gallu adrodd cenedlaethol
- Cam 6-Nodi ymgeiswyr am swyddi gwag o gronfeydd talent

Rydym wedi nodi'r angen i sicrhau datrysiad digidol i hwyluso'r trefniadau rheoli talent a chynllunio olyniaeth. Ar ôl archwilio, llwyddwyd i gael prawf cysyniad (PoC) gyda ddarparwr [Oracle] am eu datrysiad rheoli talent yn seiliedig ar gwmwl (TM). Cymerodd Academi Cyllid GIG Cymru a Bwrdd Iechyd Prifysgol Caerdydd ran yn y treial a oedd yn cynnwys diffinio'r system TM i adlewyrchu eu prosesau presennol. Cafodd y system hon ei dangos yn llwyddiannus Awst 2019 mewn amgylchedd ffug.

Yn dilyn y gwrthdystiad a'r cymorth pellach hwn, bydd y camau nesaf yn cynnwys:

- Mynediad i'r safle peilot ar gyfer cynnal profion pellach

- Ymweliadau safle â sefydliadau sy'n defnyddio Oracle TM i ddilysu effeithiolrwydd a meincnodi prosesau rheoli talent

- Datblygu achos busnes amlinellol ar gyfer contract 12 mis

Bydd y dull hwn yn galluogi GIG Cymru i ddatblygu deallusrwydd ac aeddfedrwydd o ran swyddogaeth a manyleb defnyddiwr y datrysiad rheoli talent sydd ei angen i reoli cynllunio olyniaeth ar gyfer swyddi Haen 1 a 2. Bydd hefyd yn darparu gwybodaeth i lywio a dylanwadu ar yr ateb rheoli talent sydd ei angen drwy'r broses o ail-gaffael y gweithlu cofnodion staff electronig.

4.3 Ailsefydlu Rhaglen Arweinyddiaeth Graddedigion GIG Cymru

Bydd y broses recriwtio yn cael ei chwblhau ym mis Medi 2019, gyda'r nod o farchnata'r rhaglen arweinyddiaeth ar gyfer graddedigion a swyddi cefnogi prosiectau yn ystod gwanwyn 2020, gan agor y rhaglen ar gyfer ceisiadau ym mis Medi 2020 ac unigolion llwyddiannus dechrau'r rhaglen yn Ionawr 2021. Mae'r amserlen hon yn cyd-fynd â chychwyn y cynllun Cyllid i raddedigion a chynllun graddedigion sector cyhoeddus Academi Cymru a bydd yn manteisio i'r eithaf ar gyfleoedd rhwydweithio a chyfleoedd dysgu ar y cyd. Bydd hefyd yn caniatau rhannu adnoddau'r ystafell gefn a sicrhau gwell gwerth am arian. Mae'r rhaglen yn elfen allweddol o'r strategaeth cynllunio olyniaeth a bydd yn darparu ffynhonnell allweddol o uwch arweinwyr y dyfodol.

4.4 Datblygu'r proffesiwn-cynllunio'r Gweithlu a Cynllunio Olyniaeth DG

Er bod gwaith sylweddol wedi'i wneud yn ystod y tair blynedd diwethaf i ddatblygu'r gweithlu a'r proffesiwn datblygu o fewn GIG Cymru, prin yw'r cynnydd a wnaed. Dyma un o swyddogaethau craidd AaGIC ac mae gennym gyfle i ddatblygu'r prosiect hwn mewn partneriaeth ag HPMA Cymru a'r gweithlu.

Datblygir cynnig a chynllun prosiect drwy gydol yr hydref sy'n amlinellu rôl a chyfraniad AaGIC wrth gefnogi'r ffrwd waith genedlaethol hon.

5 MATERION LLYWODRAETHU A RISG

5.1. Mae'r rhaglen waith mewn perthynas ag Amcan 6 wedi'i sefydlu a chaiff ei diweddaru i adlewyrchu'r blaenoriaethau neu'r newidiadau yn yr amserlenni wrth i'r rhaglen fynd rhagddi. Mae'r rhaglen yn cael ei goruchwylio gan Grŵp Llywio Arweinyddiaeth, sy'n cael ei gadeirio gan Gyfarwyddwr y Gweithlu yn yr adran, a hefyd gan Dîm Gweithredol AaGIC drwy drefniadau atebolrwydd arferol. Mae cerrig milltir y rhaglen wedi'u cynnwys yn nangosfwrdd perfformiad AaGIC, a gaiff ei adrodd yn rheolaidd i'r tîm gweithredol ac i'r Bwrdd. Cynrychiolir Gofal Cymdeithasol Cymru ar y Grŵp Llywio Arweinyddiaeth ac ar y cyd-gadeirydd yn ôl y gofyn.

5.2 Mae'r risgiau sy' n gysylltiedig â'r rhaglen waith hon wedi'u cynnwys yn y rhaglen ac yn cael eu hadolygu'n rheolaidd o fewn AaGIC.

6 GOBLYGIADAU ARIANNOL

6.1 Nid oes unrhyw oblygiadau ariannol yn codi o'r diweddariad hwn. Fodd bynnag, rhagwelir costau ariannol ychwanegol, yn benodol o ran caffael systemau digidol ac adnoddau addysgol. Mae AaGIC wedi arwain y datblygiadau hyn ac mae arian wedi'i neilltuo o arian datblygu AaGIC i gwmpasu'r rhain yn 2019-20.

6.2 Bydd angen buddsoddi yn y maes hwn y tu hwnt i'r flwyddyn gyfredol, ar gyfer systemau a chapasiti i gyflwyno'r rhaglen uchelgeisiol hon, ond hefyd yn achos GIG Cymru i ailsefydlu datblygiad arweinyddiaeth effeithiol, trawsnewidiol a chynaliadwy yng Nghymru. Bydd angen trafodaethau pellach yn y ddau sefydliad, yn ogystal ag ar y cyd â Llywodraeth Cymru, ynghylch costau a

chynigion buddsoddi yn y dyfodol. Ni fu unrhyw drafodaethau ar hyn o bryd ynghylch pa gyllid sydd ar gael i Gofal Cymdeithasol Cymru nac, er enghraifft, y lefelau presennol o fuddsoddiad mewn datblygu arweinyddiaeth yn y sector gofal cymdeithasol.

7. ARGYMHELLIAD

Mae pob prosiect yn symud ymlaen i'r targed ar hyn o bryd. Fodd bynnag, roedd angen cymryd camau i hwyluso gwaith y Cyfarwyddwr a'r rhaglen waith cynllunio olyniaeth ar gyfer GIG Cymru. Roedd hyn yn cynnwys nodi adnodd WTE o fewn AaGIC i fodloni amserlenni diwygiedig.

7.1. Gwahoddir Aelodau'r Bwrdd i:

• Nodi'r diweddariad cryno gan gynnwys y camau a gymerwyd i sicrhau cyflawni yn erbyn targedau .

DIWEDD

Llywodraethu a Sicrwydd				
Cyswllt ag amcanion corfforaethol (✓ ogydd)	Fel sefydliad newydd sy'n sefydlu AaGIC fel partner gwerthfawr y gellir ymddiried ynddo, sy'n gyflogwr rhagorol ac yn frand ag enw da ac arbenigol	Adeiladu gweithlu iechyd a gofal cynaliadwy a hyblyg ar gyfer y dyfodol.	Gyda Gofal Cymdeithasol Cymru yn siapio'r gweithlu i ddarparu gofal yn agosach i'r cartref ac i gysoni darpariaeth y gwasanaeth yn well.	Gwella ansawdd a diogelwch drwy gefnogi sefydliadau'r GIG i ddod o hyd i atebion cyflymach a mwy cynaliadwy i'r gweithlu ar gyfer heriau darparu gwasanaethau â blaenoriaeth.
	✓	✓		
	Gwella cyfleoedd i ddefnyddio technoleg a digidoli wrth ddarparu addysg a gofal.	Adfywio'r broses o ddatblygu arweinyddiaeth a chynllunio ar gyfer olyniaeth ar draws iechyd a gofal cymdeithasol mewn partneriaeth â Gofal Cymdeithasol Cymru ac Academi Cymru	Dangos gwerth o fuddsoddi yn y gweithlu a'r sefydliad.	
	✓	✓		
Ansawdd, Diogelwch a Phrofiad y Claf				
D/b				
Goblygiadau Ariannol				
Paratoir achosion busnes yn ôl y gofyn pan fydd y goblygiadau ariannol yn hysbys				
Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)				
D/b				
Goblygiadau Staffio				
Mae'n debygol y bydd angen adnoddau ychwanegol i gefnogi ffrydiau gwaith allweddol o fewn yr agenda sylweddol hon. Bydd unrhyw adnoddau ychwanegol yn cael eu cyflwyno drwy broses achos busnes.				
Goblygiadau hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015.)				
Mae'r gofyniad ar gyfer cenhedlaeth newydd o arweinwyr tosturiol ac ymgysylltiol sy'n gallu hyrwyddo a hwyluso arweinyddiaeth effeithiol a gweithio mewn tîm ar				

draws ffiniau yn hanfodol er mwyn creu'r amodau ar gyfer gwella gofal integredig yn barhaus. Adfywio arweinyddiaeth a chynllunio olyniaeth ar gyfer rolau uwch arweinwyr yn flaenoriaeth allweddol i iechyd	
Hanes yr Adroddiad	d/b
Atodiadau	d/b

Dyddiad Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**3.2**
Teitl Adroddiad	**Diweddariad am Wasanaethau Gofal Sylfaenol y Tu allan i Oriau Brys**		
Awdur Adroddiad	Charlette Middlemiss, Pennaeth Moderneiddio'r Gweithlu		
Noddwr Adroddiad	Alex Howells, Prif Weithredydd		
Cyflwynywyd gan	Alex Howells, Prif Weithredydd		
Rhyddid Gwybodaeth	Agored		
Pwrpas yr Adroddiad	I ddiweddaru'r Bwrdd am waith a arweiniwyd gan AaGIC rhwng Medi 2018 a Mai 2019 i gefnogi'r gwaith o ddatblygu a darparu gwasanaethau gofal sylfaenol brys ar draws GIG Cymru.		
Materion Allweddol	Gan weithio mewn partneriaeth â chydweithwyr yn y GIG, roedd AaGIC yn cadeirio is-grŵp gweithlu i ddatblygu cyfres o ddatblygiadau yn y gweithlu ac addysg i gefnogi gwasanaethau gofal sylfaenol brys rhwng 2018 a Mai 2019. Mae'r profiad hwn wedi galluogi AaGIC i ddechrau llunio ei gylch gwaith fel arweinydd systemau i drawsnewid y gweithlu ar gyfer Cymru iachach. Mae'r mentrau yn tynnu sylw at y manteision sy'n deillio o sefydlu AaGIC a'r cyfle i weithio ar fatrics i ddwyn ynghyd yr arbenigedd a'r arferion da o fewn y sefydliadau etifeddol. Mae gofal sylfaenol yn llinyn sy'n rhedeg drwy nifer o amcanion strategol o'r fath a bydd angen iddo barhau'n flaenoriaeth o fewn Cynllun Tymor Canolig Integredig (CTCI) AaGIC.		
Camau penodol ***(Rhowch un ✓yn unig)***	**Gwybodaeth**	**Trafodaeth**	**Sicrwydd**	**Cymeradwyo**
	✓		✓	✓
Argymhellion	Gofynnir i Aelodau: • nodi'r cynnydd a'r datblygiadau a wnaed o ran cefnogi gwasanaethau gofal sylfaenol brys; • cytuno i dderbyn diweddariad yn yr Hydref ar waith mewnol AaGIC a chysoni â'r gwaith cenedlaethol ar wasanaethau gofal sylfaenol ar gyfer GIG Cymru.		

Diweddariad am Wasanaethau Gofal Sylfaenol y Tu allan i Oriau Brys

1. CYFLWYNIAD

Mae heriau'r gweithlu mewn gwasanaethau gofal sylfaenol brys wedi cynyddu dros y blynyddoedd diwethaf ac mae hyn yn cael effaith sylweddol ar weithrediad effeithiol y system gofal heb ei drefnu ehangach. Mae sefydlu AaGIC wedi rhoi cyfle i ddwyn ynghyd yr arbenigedd a'r arferion da o fewn Deoniaeth Cymru, y WEDS a'r CPPE i helpu i fynd i'r afael â'r flaenoriaeth gwasanaeth hon.

Ym mis Gorffennaf 2018 Gofynnodd Andrew Goodall i Judith Paget arwain y gwaith ar wella darpariaeth gofal sylfaenol brys. Sefydlodd Judith Paget grŵp cenedlaethol i reoli'r agenda hon. Roedd y materion gweithlu a oedd yn sail i bob maes o newid gwasanaeth yn cael eu cydnabod fel sbardun allweddol ar gyfer gwella. Er mwyn cefnogi'r elfennau gweithlu ac addysgol, sefydlodd a chadeiriodd Alex Howells is-grŵp gweithlu i gefnogi datblygiad timau clinigol sy'n gweithio mewn gwasanaethau gofal sylfaenol brys.

Pennwyd blaenoriaethau ar gyfer yr is-grŵp yng nghyd-destun ehangach grwpiau/ffrydiau gwaith perthnasol eraill, er enghraifft gwaith cenedlaethol ar fodelau trawsnewid a'r broses adolygu cymheiriaid gofal sylfaenol frys.

2. CEFNDIR

2.1 Gosododd y grŵp gorchwyl a gorffen yr agenda ar gyfer y rhaglen waith drwy wneud rhai tybiaethau ynghylch materion sy'n effeithio ar wasanaethau gofal sylfaenol brys ar hyn o bryd. Roedd y rhain yn cynnwys:

- dim digon o weithlu Meddygon Teulu ar hyn o bryd i ddarparu gwasanaethau gofal sylfaenol y tu allan i oriau brys effeithiol ac ymatebol;
- yr angen I ddatblygu ymagwedd Tîm Amlddisgyblaethol, a defnyddio egwyddorion darbodus i sicrhau bod meddygon teulu ond yn gwneud yr hyn y gallant ei wneud yn unig ac yn defnyddio aelodau eraill o'r tîm ar gyfer y gwaith arall;
- gofal sylfaenol brys nid yw ein gwasanaethau'n cael eu hystyried bob amser yn lle gwych i weithio, ac efallai na fydd staff ar draws llawer o grwpiau proffesiynol yn teimlo'n hyderus am weithio yn y lleoliad hwn.

2.2 Aeth y grŵp Gorchwyl a Gorffen ati i ddatblygu nifer o fentrau ar gyfer y gweithlu a'r maes addysg rhwng mis Medi 2018 a mis Mai 2019, gyda llawer o'r rhain yn seiliedig ar fynd ati unwaith i Gymru mewn perthynas ag arfer da sy' n bodoli eisoes, yng Nghymru a thu hwnt.

2.3. Rheolwyd y rhaglen waith gan dîm moderneiddio AaGIC a chefnogwyd y gwaith o gyflawni mentrau drwy fabwysiadu gwaith matrics, a oedd yn hwyluso mynediad at arbenigedd ac adnoddau penodol ar draws y tîm AaGIC ehangach.

2.4. Roedd AaGIC hefyd yn cefnogi proses yr Adolygiad gan Gymheiriaid ar gyfer gofal sylfaenol y tu allan i oriau brys, o dan gadeiryddiaeth Dr CDV Jones, gyda'r profiad a'r canlyniadau o ymweld â phob BI yn helpu i ddylanwadu ar ddatblygiadau a blaenoriaethau

3. SEFYLLFA

Mae'r canlynol yn grynodeb o'r datblygiadau a gwblhawyd gan y grŵp gorchwyl a gorffen:

Cyflwyno a sefydlu i ofal sylfaenol brys. Nod y datblygiad hwn oedd denu meddygon teulu a'r tîm proffesiynol ehangach i'r gwasanaeth gofal sylfaenol brys. Datblygwyd adnodd ar y we ac ymgyrch farchnata gysylltiedig ac mae'n gyfrwng cyfathrebu ac yn bwynt mynediad canolog i ddenu staff nad ydynt o bosibl wedi ystyried gweithio mewn gwasanaethau gofal sylfaenol brys o'r blaen. Mae'r wefan yn cynnwys gwybodaeth genedlaethol ac mae ganddi'r hyblygrwydd i alluogi darparwyr i hyrwyddo eu cyfleoedd gwasanaeth lleol.

Cynhaliwyd lansiad meddal o'r adnodd hwn yng nghynhadledd frys gofal sylfaenol ym Mehefin 2018. Bydd y wefan fyw a'r ymgyrch farchnata, sy'n ategu porth recriwtio meddygon teulu Cymru Llywodraeth Cymru, yn cael eu lansio ym mis Medi yn barod ar gyfer pwysau disgwyliedig y gaeaf. Bydd yr adnoddau hyn yn cael eu hyrwyddo gan y Gweinidog dros Iechyd a Gofal Cymdeithasol drwy ei blatfform cyfryngau cymdeithasol ac yn y gynhadledd gofal sylfaenol genedlaethol sydd ar ddod.

Fframwaith cymwyseddau Mae'r adnodd hwn yn diffinio'r sgiliau craidd ac atodol a chymwyseddau ar gyfer pob rôl glinigol o fewn gofal sylfaenol brys ac yn cefnogi dilyniant gyrfa a hyblygrwydd y gweithlu. Mae AaGIC yn arwain gwaith i ddatblygu'r addysg a'r cymwysterau sylfaenol sydd eu hangen ar gyfer pob lefel o arfer.

Rhaglen arweinyddiaeth glinigol. Cafodd rhaglen ddeuddydd ei datblygu a'i chyflwyno ym mis Mehefin gyda diwrnod dilynol yn yr Hydref. Mynychodd 19 o cynrychiolwyr o'r gwasanaethau gofal sylfaenol brys o bob rhan o Gymru y cwrs pwrpasol gyda rhaglen yn canolbwyntio ar: themâu allweddol yn codi o'r adolygiad cyfoedion, diwylliannau sefydliadol a sgiliau hanfodol ar gyfer dylanwadu mewn gofal iechyd. Gwerthusiad o'r cwrs yn gadarnhaol iawn.

Gwneud y mwyaf o rôl y Gweithiwr Cymdeithasol Gofal Iechyd (HCSW). Roedd y peilot yng Nghaerdydd a'r Fro wedi dangos y byddai rôl ehangach i weithwyr cymorth iechyd yn helpu i sicrhau gwerth am arian o fewn y gwasanaeth-h.y. cyfuno clinigol, derbynfa/gweinyddu a gyrru. Nodir y byddai'r model hwn yn gweithio'n dda, yn enwedig ar gyfer ymweliadau cartref ac yn cael ei gefnogi gan Fframwaith Addysgol Cymru gyfan ar gyfer gweithwyr cymorth gofal iechyd. Mae adroddiad ar y peilot wedi'i lunio ynghyd ag argymhelliad bod 'Datblygu/gweithredu dwy rôl i'r gweithiwr cymorth gofal iechyd sy'n gweithio o fewn y lleoliad iechyd sylfaenol brys' – yn amlygu/cefnogi cyfleoedd hyfforddi ac eglurder y rôl diffinio.

Dull Gwyddor Ymddygiad i helpu i rymuso timau i reoli risg.
Bu BIPAB yn treialu'r hyfforddiant 'nodau gofal' gydag un o'u MDTiau gofal sylfaenol brys. Roedd yr hyfforddiant yn canolbwyntio ar wneud penderfyniadau clinigol MDT yng nghyd-destun rheoli risg glinigol ac roedd yn darparu llwyfan grymus i hwyluso gwaith tîm. Roedd y cyfranogwyr o'r farn bod y cwrs yn procio'r meddwl ac yn helpu i sefydlu gwell dealltwriaeth rhwng aelodau'r tîm. Derbyniwyd yr hyfforddiant yn gadarnhaol a'i werthuso'n dda

Hyfforddiant ar Ddilysu Marwolaeth (VOD). Cwblhaodd grŵp o glinigwyr Cymru Gyfan y gwaith o ddatblygu adnodd e-ddysgu i helpu clinigwyr i ymgymryd â VOD o dan unrhyw amgylchiadau. Mae'r adnodd hwn ar gael drwy'r cofnod staff electronig ac mae'n anelu at gefnogi newid mewn arfer clinigol drwy leihau'r angen i staff meddygol gyflawni'r swyddogaeth glinigol hon. Mae'r adnodd wedi'i ddosbarthu i GIG Cymru ac mae wedi cael ei gymeradwyo gan arweinwyr polisi proffesiynol LlC. Disgwylir y bydd y datblygiad hwn yn darparu gofal mwy amserol a thosturiol ar ddiwedd oes i gleifion a'u teuluoedd.

Cynyddu rôl Fferylliaeth Gymunedol. Mae cynllun peilot gwasanaeth ychwanegol fferylliaeth gymunedol ar gyfer triniaeth UTI wedi dechrau yn Hywel Dda a Bae Abertawe gan ddefnyddio sgiliau'r fferyllydd cymunedol sy'n rhagnodwyr annibynnol. Yn ogystal, mae'r fferyllydd cymunedol sy'n rhagnodwyr annibynnol ledled Cymru yn cynnig y gwasanaethau anhwylderau cyffredin a mwy. Mae cynllun gwaith NWIS ar gyfer datblygu platfform dewis fferyllfa yn cynnwys cwmpasu proses gymeradwy er mwyn i dechnegwyr fferyllol gael mynediad i'r platfform a darparu gwasanaethau gwell fel y bo'n briodol.

Adroddiad cau i lawr. Cynhyrchodd is-grŵp y gweithlu adroddiad i gloi ar gyfer y grŵp gofal sylfaenol brys cenedlaethol ac fe'i rhoddwyd i lawr ym mis Mai 2018. Mae'r arweinwyr clinigol mewn gofal sylfaenol brys, yr oedd llawer ohonynt yn aelodau o'r is-grŵp, wedi sefydlu grŵp clinigol gweithlu ac addysg i ddatblygu mentrau eraill i wella ymhellach y ddarpariaeth o ofal sylfaenol brys ledled Cymru. Mae AaGIC yn parhau i gefnogi'r gwaith hwn.

4 CAMAU NESAF

Mae gofal sylfaenol yn llinyn sy'n rhedeg drwy nifer o amcanion strategol AaGIC. Fel arweinydd systemau mae AaGIC yn mabwysiadu ymagwedd ddeublyg i gefnogi'r agenda gofal sylfaenol yng Nghymru. Mae AaGIC yn genedlaethol yn rheoli'r gweithlu a ffrwd waith OD o raglen strategol gofal sylfaenol Cymru Gyfan; ar lefel leol, yn unol â'r cynllun gweithredol ar gyfer 2019/20, mae ffrwd waith fewnol o dan gadeiryddiaeth y Prif Weithredwr wedi mabwysiadu dull gweithio matrics sy'n cynnwys cyfarwyddiaethau allweddol. Tra bod gwaith yn mynd rhagddo'n gyflym bydd angen i'r agenda hon barhau'n flaenoriaeth o fewn CTCI AaGIC, gan gyflawni ein cylch gwaith i weddnewid y gweithlu ar gyfer Cymru iachach.

5 ARGYMHELLIAD

Gofynnir i'r Bwrdd:

- nodi'r cynnydd a'r datblygiadau a wnaed o ran cefnogi gwasanaethau gofal sylfaenol brys;
- cytuno i dderbyn diweddariad yn yr Hydref ar waith mewnol AaGIC a chysoni â'r gwaith cenedlaethol ar wasanaethau gofal sylfaenol ar gyfer GIG Cymru.

Llywodraethu a Sicrwydd				
Cyswllt ag amcanion corfforaethol (✓ ogydd)	Fel sefydliad newydd sy'n sefydlu AaGIC fel partner gwerthfawr y gellir ymddiried ynddo, sy'n gyflogwr rhagorol ac yn frand ag enw da ac arbenigol	Adeiladu gweithlu iechyd a gofal cynaliadwy a hyblyg ar gyfer y dyfodol.	Gyda Gofal Cymdeithasol Cymru yn siapio'r gweithlu i ddarparu gofal yn agosach i'r cartref ac i gysoni darpariaeth y gwasanaeth yn well.	Gwella ansawdd a diogelwch drwy gefnogi sefydliadau'r GIG i ddod o hyd i atebion cyflymach a mwy cynaliadwy i'r gweithlu ar gyfer heriau darparu gwasanaethau â blaenoriaeth.
	✓	✓		✓
	Gwella cyfleoedd i ddefnyddio technoleg a digidoli wrth ddarparu addysg a gofal.	Adfywio'r broses o ddatblygu arweinyddiaeth a chynllunio ar gyfer olyniaeth ar draws iechyd a gofal cymdeithasol mewn partneriaeth â Gofal Cymdeithasol Cymru ac Academi Cymru	Dangos gwerth o fuddsoddi yn y gweithlu a'r sefydliad.	

Ansawdd, Diogelwch a Phrofiad y Claf
d/b
Goblygiadau Ariannol
d/b
Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)
d/b
Goblygiadau Staffio
d/b
Goblygiadau hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015.)
d/b

Hanes yr Adroddiad	d/b
Atodiadau	dim

Dyddiad Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**3.3**
Teitl Adroddiad	**Diweddariad am Ddatblygu IMTP AaGIC**		
Awdur Adroddiad	Chris Payne		
Noddwr Adroddiad	Julie Rogers		
Cyflwynywyd gan	Julie Rogers		
Rhyddid Gwybodaeth	Agored		
Pwrpas yr Adroddiad	Rhoi manylion i'r Bwrdd am y gwaith sydd wedi'i wneud hyd yn hyn a'i gynllunio dros y misoedd nesaf, er mwyn cefnogi'r broses o ddatblygu, cymeradwyo a chyflwyno cynllun cyntaf AaGIC ar gyfer 2020-2023.		
Materion Allweddol	• Amserlen i gyflawni cwblhau'r IMTP. • Ymgysylltu priodol â rhanddeiliaid a phartneriaid		

Camau penodol ***(Rhowch un ✓yn unig)***	**Gwybodaeth**	**Trafodaeth**	**Sicrwydd**	**Cymeradwyo**
			✓	

Argymhellion	Gofynnir i Aelodau: • Nodi'r cynnydd a wnaed hyd yma a'r gwaith a gynlluniwyd i sicrhau bod y IMTP yn cael ei gyflawni erbyn diwedd Rhagfyr 2019

Diweddariad am Ddatblygu IMTP AaGIC

1. CYFLWYNIAD

Mae'r papur hwn yn rhoi manylion i'r Bwrdd am y gwaith a wnaed hyd yn hyn ac wedi'i gynllunio mewn perthynas â datblygu, cymeradwyo a chyflwyno'r cynllun tymor canolig integredig (IMTP) cyntaf ar gyfer AaGIC.

2. CEFNDIR

Mae gan AaGIC gynllun blynyddol wedi'i gymeradwyo ar gyfer 2019-20, ond mae'n ofynnol iddo ddatblygu IMTP ar gyfer 2020-2023 yn unol â chylch cynllunio'r GIG. O ystyried rôl unigryw AaGIC o ran cefnogi a dylanwadu ar gynlluniau a datblygiadau gweithlu ar draws GIG Cymru, mae ymgysylltu â sefydliadau eraill y GIG yn hanfodol. Rydym felly wedi dechrau ymgysylltu â'n partneriaid yn y GIG ar lefel cynllunio a gweithredol gyda'r nod o sicrhau, cyn belled ag y bo'n bosibl, aliniad a rhyngwyneb gyda'r Byrddau Iechyd Lleol a'r Ymddiriedolaethau.

Mae'r papur hwn yn rhoi'r wybodaeth ddiweddaraf am y cynnydd yn erbyn yr amserlen ddangosol a gymeradwywyd yn flaenorol (ynghlwm), ac yn tynnu sylw at ddigwyddiadau ymgysylltu allweddol yn y dyfodol a fydd yn gwella datblygiad y cynllun ymhellach.

3. MATERION LLYWODRAETHU A RISG

Fel sefydliad cymharol newydd, mae'r broses gynllunio yn AaGIC yn dal i ddatblygu, ac mae staff ym mhob rhan o'r sefydliad yn dod yn fwy cyfarwydd â chylch cynllunio'r GIG a'r dull o fynd ati. Gallwn adrodd yn gadarnhaol nad oes unrhyw faterion llywodraethu a risg yn codi ar hyn o bryd. Mae'r gwaith o ddatblygu'r cynllun yn mynd rhagddo i dargedu ac yn unol â'r cerrig milltir a nodwyd gennym yn flaenorol, er bod amserlenni'n parhau'n dynn. Ar adeg ysgrifennu, mae'r cynnydd fel a ganlyn:

Gwybodaeth a dadansoddi
Yn ystod mis Mehefin, casglwyd gwybodaeth i lywio'r broses gynllunio, gan dynnu sylw at y cyfleoedd a'r heriau drwy ddadansoddiad PESTLE. Roedd hyn yn cynnwys dadansoddiad bwrdd gwaith o gynlluniau'r Byrddau Iechyd ac Ymddiriedolaethau, polisïau Llywodraeth Cymru a chynlluniau gweithlu strategol cenedlaethol.

Pennu Blaenoriaethau & Nodau Strategol
Ym mis Gorffennaf, cynhaliwyd gweithdy cynllunio mewnol gennym gydag uwch dîm arwain estynedig i brofi'r dadansoddiad a wnaed, i adolygu'r amcanion strategol cyfredol ac i geisio awgrymiadau ar gyfer gweithgareddau yn y dyfodol, yn ogystal â syniadau amlinellol ar gyfer blaenoriaethau dros y tair blynedd nesaf. Yn dilyn amrywiaeth o ryngweithio staff ar lefel cyfarwyddiaeth ac uwch reolwyr, a dysgu o'n blwyddyn gyntaf, rydym yn cynnig y nodau strategol diwygiedig canlynol.

Nodau strategol arfaethedig 2020-2023

1. **Gweithlu Cynaliadwy** – arwain y gwaith o gynllunio, datblygu a lles gweithlu cymwys, cynaliadwy a hyblyg i helpu i gyflwyno Cymru Iachach.

2. **Hyfforddiant Addysg Ardderchog** - gwella ansawdd a hygyrchedd addysg a hyfforddiant i bob aelod o staff gofal iechyd er mwyn cefnogi'r gwaith o weithredu Cymru Iachach
3. **Gallu o ran Capasiti i Arwain** - arwain y broses o ddatblygu gallu o ran arweinyddiaeth systemau drwy ddiwylliant o dosturi ac ymagwedd bwrpasol at olyniaeth a rheoli talent.
4. **Cefnogi Ansawdd & Diogelwch** – arwain y gwaith o drawsnewid a moderneiddio'r gweithlu gofal iechyd aml-broffesiwn yn unol â blaenoriaethau cenedlaethol.
5. Bod yn gyflogwr ardderchog ac yn lle gwych i weithio.
6. Cael ei gydnabod yn bartner, yn ddylanwadwr ac yn arweinydd rhagorol.

Llunio blaenoriaeth a drafftio

Yn ystod mis Medi, bydd y tîm cynllunio yn dechrau llunio'r blaenoriaethau a'r canlyniadau a fydd yn cefnogi'r gwaith o weithredu'r amcanion strategol diwygiedig, gan ystyried canllawiau Llywodraeth Cymru ar fframwaith y cynllun tymor canolig (IMTP) ym mis Medi.

Ar y 12fed o Fedi, cynhaliwyd diwrnod Uwch-Arweinwyr a oedd yn canolbwyntio ar y cyfleoedd sydd ar gael ar draws y sefydliad i gefnogi cyflawni ein nodau strategol. Nododd y broses hon nifer o themâu allweddol y byddwn yn eu diffinio ymhellach ac yn eu datblygu'n brosiectau a rhaglenni allweddol. Bydd y rhain yn ffurfio prif elfen ein IMTP. Mae'r themâu hyn wedi'u cynnwys yn y cyflwyniad yn Atodiad 1.

Ar 18 Medi 2019, cynhaliwyd digwyddiad i randdeiliaid AaGIC yng Ngogledd Cymru ym Mhafiliwn Llangollen a threulwyd y cyfnod hwnnw ar brofi a rhannu ein cynigion a'n syniadau ar y camau i'w cynnwys yn ein IMTP. Bydd digwyddiad arall yn cael ei gynnal ar y 9 Hydref 2019 yn ne Cymru yn stadiwm pêl-droed Dinas Caerdydd – bydd rhan sylweddol o'r digwyddiad unwaith eto wedi'i neilltuo i lunio IMTP drafft AaGIC, ac rydym yn annog croestoriad eang o staff uwch i fod yn bresennol er mwyn galluogi deialog gwerthfawr ar ein nodau arfaethedig.

Ar 25 Medi 2019, bydd y Tîm Cynllunio yn gweithio gyda'r Tîm Gweithredol dros hanner diwrnod i fireinio'r cynigion a'r themâu a gasglwyd o'r holl ddigwyddiadau ymgysylltu. Rhoddir adborth i'r uwch dimau arwain er mwyn eu galluogi i ddatblygu'r cynigion a ddewiswyd ymhellach, gan gynnwys nodi costau a manteision lle bo hynny'n briodol. Bydd y gwaith pellach hwn yn rhoi llwyfan cadarn i ddechrau drafftio'r IMTP ym mis Hydref.

Ymgysylltu Llywodraeth Cymru

O fis Medi ymlaen, mae cyfarfodydd ymgysylltu misol wedi'u cysylltu â Llywodraeth Cymru i roi cyfle i drafod datblygiad a chynnydd yr IMTP, a hefyd i roi cyfle i ystyried agweddau ar gysoni cynlluniau.

Cynllun Drafft

Erbyn diwedd mis Hydref, bydd y cynllun drafft cyntaf yn cael ei ddatblygu i gynnwys gofynion cyllid, gweithlu a digidol. Bydd y rhain yn cael eu cyflwyno i'r Bwrdd i'w hystyried ar 28 Tachwedd. Caiff yr IMTP terfynol ei gyflwyno i'w gymeradwyo gan y Bwrdd ym mis Rhagfyr, cyn ei gyflwyno i Lywodraeth Cymru ym mis Ionawr 2020.

4. GOBLYGIADAU ARIANNOL

Mae'r gwaith o ddatblygu'r Cynllun Tymor Canolig Integredig yn cael ei gefnogi drwy'r adnoddau presennol. Caiff goblygiadau ariannol cynigion sy'n dod i'r amlwg eu hasesu a'u hadolygu fel rhan o broses ddatblygu'r IMTP.

5. ARGYMHELLIAD

Argymhellir y dylai'r Bwrdd:

- Nodi'r cynnydd a wnaed hyd yma a'r gwaith a gynlluniwyd i sicrhau bod yr IMTP yn cael ei gyflawni erbyn diwedd Rhagfyr 2019.

<table>
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<tr><td colspan="2">Hanes yr Adroddiad</td><td colspan="3">26 Mehefin 2019 – Sesiwn Datblygu'r Bwrdd (AaGIC)
18 Gorffennaf 2019 – Cyfarfod Bwrdd Cyhoeddus (Hywel Dda)</td></tr>
<tr><td colspan="2">Atodiadau</td><td colspan="3">Atodiad A – Amserlen Cyflawni'r IMTP</td></tr>
</table>

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?
•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	•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	•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?
•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	**•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	**•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?

Dyddiad y Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**3.4**
Teitl yr Adroddiad	**Mynd i'r afael â'r Llwybr Hyfforddiant – Achos dros ymestyn a diwygio Rhaglen Hyfforddiant Sylfaenol Cymru**		
Awdur yr Adroddiad	Dr Tom Lawson/Dr Helen Baker		
Noddwr yr Adroddiad	Yr Athro Pushpinder Mangat		
Cyflwynwyd gan	Yr Athro Pushpinder Mangat		
Rhyddid Gwybodaeth	Caeedig		
Pwrpas yr Adroddiad	• Mae datblygu gweithlu meddygol cynaliadwy yn gosod sylfaen hanfodol ar gyfer system iechyd a gofal gynaliadwy yng Nghymru. • Mae'r llwybr addysg a hyfforddiant yn cyfrannu'n sylweddol at hyn ac mae angen ei gysoni, cymaint ag y bo modd, ar draws y llwybrau israddedig ac ôl-raddedig. • Mae'r cynnydd diweddar yn niferoedd y myfyrwyr meddygol ar leoliadau Arbenigol a Meddygaeth Deuluol yng Nghymru yn gamau cadarnhaol tuag at ddull mwy cynaliadwy o weithio. • Fodd bynnag, mae hyn hefyd wedi arwain at botensial o gamgymhariad sylweddol yn niferoedd yr hyfforddeion ar bwyntiau allweddol o'r llwybr hyfforddi yng Nghymru o fis Awst 2020 ymlaen. • Nod yr achos busnes hwn yw mynd i'r afael â'r camgymhariad hwn a lleihau'r effaith ar recriwtio a chadw drwy ehangu'r nifer o swyddi'r Rhaglen Sylfaen yn raddol.		
Materion Allweddol	• Mae ehangu'r Rhaglen Sylfaen yng Nghymru yn anhepgor i gyflwyniad Amcan Strategol 2 – *Datblygu gweithlu iechyd a gofal cynaliadwy a hyblyg ar gyfer y dyfodol*. • Bydd camosod y llwybr hyfforddiant rhwng yr Ysgol Feddygol, hyfforddiant Sylfaenol ac Arbenigol a Meddygaeth Deuluol yn effeithio ar unrhyw amcanion a mentrau a roddir ar waith i ddarparu gweithlu		

<table>
<tr><td></td><td colspan="4">cynaliadwy ar gyfer y dyfodol, un ai fel rhan o gynllun Addysg a Chomisiynu AaGIC neu drwy fentrau megis cynyddu'r niferoedd sy'n dilyn hyfforddiant Meddygaeth Deuluol. Mae'r debygrwydd y bydd y mentrau hyn yn llwyddo yn cynyddu wrth i niferoedd y Rhaglen Sylfaen gynyddu.
• Rhagwelir y bydd yr allbwn o ysgolion meddygol yng Nghymru yn cynyddu i 417 erbyn mis Awst 2023 a disgwylir i leoliadau i Arbenigwyr a Meddygon Teulu gyrraedd 483 o swyddi.
• Mae 339 o swyddi Sylfaen yng Nghymru ar hyn o bryd. O ystyried y gwahaniaeth rhwng gofynion allbwn a mewnbwn, ein hargymhelliad yw mai gosod swyddi rhaglenni Sylfaen ar bwynt hanner ffordd (450 o swyddi) yw'r opsiwn mwyaf hyfyw o ran cynyddu cyfraddau llenwi a denu, recriwtio a chadw hyfforddeion yng Nghymru.</td></tr>
<tr><td rowspan="2">Camau Penodol Angenrheidiol
(un ✓yn unig)</td><td>Gwybodaeth</td><td>Trafodaeth</td><td>Sicrwydd</td><td>Cymeradwyo</td></tr>
<tr><td></td><td></td><td></td><td>✓</td></tr>
<tr><td>Argymhellion</td><td colspan="4">Gofynnir i'r aelodau:
• Cymeradwyo yr adroddiad.</td></tr>
</table>

Mynd i'r afael â'r Llwybr Hyfforddiant – Achos dros ymestyn a diwygio Rhaglen Hyfforddiant Sylfaenol Cymru

1. CYFLWYNIAD

Y Rhaglen Sylfaen yw'r platfform er mwyn cael mynediad i hyfforddiant ôl-raddedig pellach. Mae'n Rhaglen dwy flynedd gyda'r nod o roi'r sgiliau a'r profiad angenrheidiol i feddygon gael Cofrestriad Llawn gyda'r Cyngor Meddygol Cyffredinol ar ddiwedd Blwyddyn 1. Ym Mlwyddyn 2 maent yn datblygu sgiliau generig ac yn rheoli cleifion sy'n ddifrifol wael cyn dewis datblygu eu gyrfaoedd ar ddiwedd Blwyddyn 2.

Ar ôl cwblhau'r Rhaglen Sylfaen, caiff meddygon wedyn wneud cais am le ar Raglen Hyfforddiant Arbenigol mewn Gofal Eilradd neu Feddygaeth Deuluol, naill ai ar raglen graidd neu raglen barhaus – mae hyd y rhaglenni hyn yn amrywio o ddwy flynedd ar gyfer hyfforddiant craidd/sylfaenol mewn arbenigedd Llawfeddygol i 8 mlynedd ar gyfer rhaglen Bediatrig barhaus sy'n arwain at y Dystysgrif Cwblhau Hyfforddiant.

Mae tystiolaeth y gall profiad mewn swyddi hyfforddi Sylfaen ddylanwadu ar ddewis gyrfa yn y dyfodol, ac am hynny mae'n rhan allweddol o'r llwybr hyfforddi. Mae niferoedd, lleoliad ac arbenigedd swyddi sylfaen yn hanfodol felly wrth ddatblygu strategaeth gweithlu meddygol cynaliadwy.

Mae'r achos busnes sydd ynghlwm, yn seiliedig ar adolygiad o nifer o'r swyddi Sylfaen yng Nghymru, yn rhoi argymhellion ynglŷn â'r ffordd y gallai ehangu nifer y swyddi gefnogi strategaeth AaGIC i gynyddu'r niferoedd a gaiff eu recriwtio i arbenigeddau ac ardaloedd blaenoriaethol. Bydd hyn yn gymorth i roi platfform mwy cynaliadwy i Gymru ddatblygu ei weithlu meddygol, sydd yn ganolog i sefydliad gwasanaeth amlbroffesiynol cynaliadwy.

2. CEFNDIR

Mae'r canlynol yn amlygu'r camosod presennol a'r camosod a ragwelir yn digwydd ar draws y llwybr hyfforddi. Mae hyn yn cynnwys diffyg yn nifer y Swyddi Sylfaen sydd ar gael yng Nghymru ar hyn o bryd i Raddedigion Meddygol sydd wedi noddi y byddent yn dymuno hyfforddi yng Nghymru. Mae'n cynnwys diffyg hefyd yn erbyn y nifer sy'n ofynnol i fwydo i'r swyddi hyfforddi Meddygon Teulu ac Arbenigwyr sydd ar gael yng Nghymru ar hyn o bryd.

Roedd angen i'r swyddi Sylfaen gyd-fynd ag allbwn y Graddedigion o Ysgolion Meddygol

- Yn 2019 hysbysebodd Cymru 339 o swyddi Blwyddyn Sylfaen 1, ac yn y flwyddyn hon, nododd 424 o raddedigion Ysgolion Meddygol Cymru fel eu dewis cyntaf neu eu hail ddewis er mwyn ymgymryd â hyfforddiant lefel Sylfaen.

- Yn 2019 penodwyd i bob un o'r 339 swydd Blwyddyn Sylfaen 1, sy'n dangos ei bod yn debygol y gallai mwy o Feddygon Sylfaen fod wedi cael eu penodi yng Nghymru pe bai swyddi ychwanegol ar gael.
- Yn 2019, hyfforddodd Ysgolion Meddygol Cymru 359 o fyfyrwyr i lefel Graddio a nododd 97 myfyriwr o Ysgolion Meddygol eraill y DU Cymru fel eu dewis cyntaf ar gyfer hyfforddiant Blwyddyn Sylfaen 1. Mae'r nifer yn uwch na'r 339 o swyddi Sylfaen sydd ar gael yng Nghymru.
- Mae cynnydd o 1500 yn nifer y lleoliadau mewn Ysgolion Meddygol yn Lloegr, cynnydd o fwy na 22%.
- Mae LlC wedi cynyddu Lleoliadau Ysgolion Meddygol o 40 yn barod a chydnabyddir bod angen i'r nifer gynyddu eto er mwyn ateb y galw. O ganlyniad i'r cynnydd cychwynnol, mae disgwyl i 417 o feddygon raddio yn 2023.

Nifer y Swyddi Sylfaen a nodwyd yn ôl yr angen drwy feincnodi gyda gwledydd eraill Prydain.

- Cymru sydd â'r nifer isaf o swyddi Sylfaen lefel 1 o bob un o wledydd Prydain, fel cyfran o boblogaeth bob sir.
- Mae cyfradd Sylfaen bresennol Cymru 143 o swyddi Sylfaen yn is na chymhareb bresennol yr Alban a 79 o swyddi yn is na chymhareb bresennol Gogledd Iwerddon.

Nifer y Swyddi Sylfaen sy'n ofynnol i fwydo i nifer y swyddi hyfforddi meddygon teulu ac arbenigwyr

- Nifer y swyddi Arbenigol a Meddygaeth Deuluol a gynigwyd yng Nghymru yn 2019 oedd 430, sef 91 yn uwch na'r 339 o swyddi Sylfaen ar gael. O wybod bod hyfforddiant lefel Sylfaen yn rhagofyniad ar gyfer hyfforddiant pellach, mae'n rhaid bod y diffyg yn nifer y swyddi lefel Sylfaen yn rhwystr i recriwtio i swyddi hyfforddiant i Feddygon Teulu ac Arbenigwyr.
- Yn 2018, ym mhob maes recriwtio i swyddi hyfforddi Meddygon Teulu ac Arbenigwyr yng Nghymru, 80% oedd y cyfraddau llenwi gyda diffyg o tua 20%; a arweiniodd hyn at 80 o swyddi heb eu llenwi.

Y cynnydd yn nifer y Swyddi Sylfaen sy'n ofynnol i gwrdd â'r twf yn nifer y swyddi hyfforddi meddygon teulu ac arbenigwyr yng Nghymru yn y dyfodol agos.

- Dros y 3 blynedd nesaf, yn ddelfrydol, bydd y rhaglen Hyfforddi Meddygon Teulu yn cynyddu i 200 o leoedd, 40 swydd ychwanegol. At hynny, bydd tua 35 i 40 o swyddi rhaglenni hyfforddi Arbenigol yn cael eu sefydlu yng Nghymru. Bydd y 75-80 swydd ychwanegol hyn, os recriwtir iddynt o Gymru/y DU, yn gofyn am ymgeiswyr a fydd wedi gorfod cwblhau eu hyfforddiant lefel Sylfaen.
- Gyda'r cynnydd hwn yn nifer y lleoliadau hyfforddi Meddygon Teuluol a'r cynnydd a ragwelir mewn hyfforddiant gofal eilradd, rhagwelir y bydd 483 o swyddi hyfforddi i Feddygon Teulu ac Arbenigwyr yn cael eu hysbysebu ar gyfer mis Awst 2020, sef 144 o swyddi yn uwch nag allbwn presennol Blwyddyn Sylfaen 2.

3. MATERION LLYWODRAETHU A RISG

Cydnabyddir y bydd ansicrwydd bob amser ynghylch niferoedd y ceisiadau o un flwyddyn i'r llall i wneud hyfforddiant sylfaen yng Nghymru yn ogystal â gweddill y DU. Achosir yr ansicrwydd gan yr amrywiaeth yn allbynnau ysgolion meddygol a'r ceisiadau o AEE ac ymgeiswyr o dramor. Cafodd bob un o swyddi Sylfaen Cymru eu llenwi yn 2019. Ni allai Cymru gynnig unrhyw swyddi i feddygon tramor a allai fod wedi eu recriwtio i Gymru pe byddai'r swyddi ar gael. Felly collwyd cyfle i gynyddu ein cymeriant, y gellid ei gynyddu i'r eithaf drwy'r cynigion hyn.

Bydd y rhaglen ehangu uchelgeisiol hon yn cael ei datblygu ochr yn ochr â mentrau a ddatblygwyd gan Ysgolion Meddygol Cymru i gysoni a chynyddu cyfleoedd i'r eithaf drwy eu rhaglenni arloesol, megis rhaglen hydredol CARER.

Ystyriwyd effaith asesiad cydraddoldeb heb unrhyw effaith andwyol ar unigolion sydd â nodweddion gwarchodedig dynodedig.

4. GOBLYGIADAU ARIANNOL

Mae'r tabl canlynol yn nodi manylion am oblygiadau ariannol bob un o'r opsiynau a ystyriwyd o fewn yr achos busnes.

Opsiwn	**Cost**
1 – Cynnal Statws Quo	£0
2 – Cysoni ag allbwn Ysgolion Meddygol	£6,818,706 Blwyddyn lawn yn gylchol o Awst 2025 ymlaen
3 – Cysoni â Hyfforddiant Arbenigol a Swyddi Meddygon Teulu	£12,572,094 Blwyddyn lawn yn gylchol o Awst 2025 ymlaen
4 – Hanner ffordd rhwng Opsiwn 2 a 3	£9,695,400 F Blwyddyn lawn yn gylchol o Awst 2025 ymlaen

5. ARGYMHELLIAD

Mae'r achos busnes sydd ynghlwm wedi amlinellu 4 opsiwn mewn perthynas â chynyddu swyddi hyfforddi ar lefel Sylfaen. Ein hargymhelliad ni yw bod Opsiwn 4 yn cael ei dderbyn. O fewn yr opsiwn hwn, bydd 111 o swyddi Blwyddyn Sylfaen 1 a 111 o swyddi Blwyddyn Sylfaen 2 yn cael eu creu a'u cyflwyno'n raddol o fis Awst 2020. Byddai hyn yn arwain at 450 o swyddi Blwyddyn Sylfaen 1 erbyn 2023 a 450 o swyddi Blwyddyn Sylfaen 2 erbyn 2024.

Llywodraethu a Sicrwydd

Cysylltiad ag amcanion corfforaethol ***(✓os gwelwch yn dda)***	Sefydlu Addysg a Gwella Iechyd Cymru fel sefydliad newydd sy'n bartner gwerthfawr y gellir ymddiried ynddo, sy'n gyflogwr ardderchog a chanddo frand dibynadwy ac arbenigol.	Datblygu gweithlu iechyd a gofal cynaliadwy a hyblyg ar gyfer y dyfodol.	Ochr yn ochr â Gofal Cymdeithasol Cymru, llunio'r gweithlu i ddarparu gofal yn nes at y cartref, a sicrhau mwy o gysondeb o ran y gwasanaethau a ddarperir.	Gwella ansawdd a diogelwch drwy gefnogi sefydliadau'r GIG i ganfod atebion cyflymach a mwy cynaliadwy sy'n ymateb i heriau'r gweithlu wrth ddarparu gwasanaethau sy'n flaenoriaeth.
		✓		
	Gwella'r cyfleoedd i ddefnyddio technoleg a digidoleiddio wrth gyflwyno addysg a gofal.	Adfywio datblygu arweinyddiaeth a chynllunio olyniaeth ar draws y meysydd iechyd a gofal cymdeithasol mewn partneriaeth â Gofal Cymdeithasol Cymru ac Academi Cymru.	Dangos gwerth yn sgil buddsoddi yn y gweithlu a'r sefydliad.	

Ansawdd, Diogelwch a Phrofiad y Claf

Mae rhaglen weithredu fesul cam fel yr eglurir yn y ddogfen atodedig, gyda chynllunio datblygedig, yn caniatáu creadigaeth lleoliadau a threfn o ansawdd uchel. Mae hyn yn cyd-fynd â'r cyfeiriad yr ydym yn mynd iddo er mwyn sicrhau mwy o gyfleoedd cymunedol, fel yr amlinellir yn adroddiadau 'Cymru Iachach' a 'Ffurf Hyfforddiant'.
Bydd pob lleoliad, yn unol â Fframwaith Rheoli Ansawdd AaGIC a gofynion y Cyngor Meddygol Cyffredinol, yn parhau i gael ei fonitro er mwyn sicrhau nad oes unrhyw oblygiadau o ran diogelwch cleifion.

Goblygiadau Ariannol

Nid yw'r cyllid sy'n ofynnol er mwyn cyflawni'r prosiect hwn ar gael yn amlen arian bresennol AaGIC ac mae angen mwy o gyllid gan Lywodraeth Cymru er mwyn cefnogi'r prosiect dros 6 blwyddyn ariannol fel y manylir isod:

CYFANSWM y Cyllid Blynyddol Angenrheidiol ar gyfer Opsiwn 4		
Derbyniad Awst 2020	Cost Blwyddyn Ariannol 1 2020/21	£803,439
Derbyniad Awst 2021	Cost Blwyddyn Ariannol 2 2021/22	£3,007,562
Derbyniad Awst 2022	Cost Blwyddyn Ariannol 3 2022/23	£5,289,433
Derbyniad Awst 2023	Cost Blwyddyn Ariannol 4 2023/24	£7,750,731
Derbyniad Awst 2024	Cost Blwyddyn Ariannol 5 2024/25	£9,513,456
Derbyniad Awst 2025	Cost Blwyddyn Ariannol 6 2025/26	£9,695,400

Goblygiadau Cyfreithiol (gan gynnwys asesiad cydraddoldeb ac amrywiaeth)

Mae asesiad o'r effaith ar gydraddoldeb wedi ei ystyried heb unrhyw effaith andwyol ar unigolion sydd â nodweddion gwarchodedig.

Goblygiadau Staffio	
Ni ragwelir y bydd unrhyw oblygiadau staffio	
Goblygiadau Tymor hir, gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015	
Bydd dal gafael mewn graddedigion o ysgolion meddygol Cymru drwy'r hyfforddiant Sylfaenol ac Arbenigol yn cefnogi cyflwyniad Cymru Ffyniannus yn unol â Deddf Llesiant Cenedlaethau'r Dyfodol.	
Hanes Adroddiad	Grŵp Arweinwyr Gweithredol AaGIC
Atodiadau	Atodiad 1 – Achos Busnes

APPENDIX 1

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:	10th 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
- 12new FY1 posts for August 2021 and 36 new FY2 posts
- 12new 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	• 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	• 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 • *Continued risk around importing trainees from elsewhere for General Practice and Secondary Care Specialty placements*	**£6,818,706 Full year recurring from August 2025 onwards**
3 – Alignment to Specialty Training and GP posts	• Increased Foundation doctors to support service delivery • Increased opportunities to retain Welsh graduates • Increased probability of filling Specialty and GP training posts • *Increased risk of vacancies at FY1/FY2 as posts significantly exceed medical school output*	**£12,572,094 Full year recurring from August 2025 onwards**
4 – Mid way between Option 2 and 3	• 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-specifics 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.

Dyddiad Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**4.1**
Teitl Adroddiad	**Adroddiad y Cyfarwyddwr Cyllid**		
Awdur Adroddiad	Rhiannon Beckett		
Noddwr Adroddiad	Eifion Williams		
Cyflwynywyd gan	Eifion Williams		
Rhyddid Gwybodaeth	Agored		
Pwrpas yr Adroddiad	Darparu adroddiad ariannol i Fwrdd AaGIC ar gyfer mis 05 (Awst 2019).		
Materion Allweddol	Mae gan AaGIC ddyletswydd statudol i fantoli'r gyllideb ar ddiwedd y flwyddyn ac o ganlyniad dylai'r adroddiad hwn gynorthwyo'r Bwrdd, gweithredwyr a deiliaid cyllidebau i reoli'r sefyllfa ariannol drwy gydol y flwyddyn ariannol 2019-20.		
Camau penodol ***(Rhowch un ✓yn unig)***	**Gwybodaeth**	**Trafodaeth**	**Sicrwydd**	**Cymeradwyo**
	✓			
Argymhellion	I Fwrdd AaGIC nodi'r sefyllfa ariannol a gofnodwyd ym mis 5.			

ADRODDIAD Y CYFARWYDDWR CYLLID

1. CYFLWYNIAD

Mae'r adroddiad yn nodi'r sefyllfa ariannol fel yr oedd ar 31ain Awst 2019, yn erbyn cyllidebau wedi'u diweddaru a ddeilliodd o Gynllun Ariannol 2019-20 a dyraniad craidd blwyddyn lawn a dderbyniwyd gan Lywodraeth Cymru. Mae sefyllfa ariannol AaGIC, fel yr oedd ym mis 05, wedi tanwario £435,098, ac mae'r sefyllfa rhagweld ar ddiwedd y flwyddyn a adroddywyd i Lywodraeth Cymru yn un o gydbwysedd ariannol.

2. CEFNDIR

Mae'r adroddiad hwn yn rhoi'r wybodaeth ddiweddaraf am y sefyllfa ariannol gronnus ar 31 Awst 2019 ac yn nodi'r rhesymau dros unrhyw amrywiadau ariannol hyd yn hyn yn erbyn y cyllidebau a bennwyd. Dyma'r flwyddyn lawn gyntaf i'r sefydliad newydd weithredu, ac felly mae y dealltwriaeth fanwl o wariant a chyllidebau yn dal i ddatblygu, yn enwedig mewn perthynas â chyllidebau comisiynu addysg. Er mwyn cydnabod hyn, yn ystod mis Gorffennaf, cynhaliwyd asesiad manwl o'r sefyllfa a nodwyd fel yr oedd ar fis 03 er mwyn llywio adolygiad o'r rhagolygon diwedd blwyddyn tebygol ar sail y wybodaeth ddiweddaraf sydd ar gael. Nododd hwn rai o'r croniadau ar ddiwedd y flwyddyn ac yn y flwyddyn a'r darpariaethau yr ydym wedi gallu eu rhyddhau neu eu lleihau. Mae adolygiad o niferoedd myfyrwyr a'r nifer sy'n manteisio ar fwrsari hefyd wedi datgelu botensial tanwariant sylweddol yn erbyn cyllidebau comisiynu. Gall amrywiad pellach godi pan dderbynnir niferoedd cofrestru gwirioneddol o bob Prifysgol yn dilyn y cymeriant o Fedi 2019 a'r nifer sy'n derbyn y fwrsariaeth yn hysbys. Byddai'r sefyllfa alldro debygol heb gamau pellach yn arwain at danwariant sylweddol ar ddiwedd y flwyddyn. Cynhelir trafodaethau â Llywodraeth Cymru i ystyried sefyllfa ariannol AaGIC er mwyn cytuno ar ddull gweithredu sy'n sicrhau sefyllfa gytbwys ar ddiwedd y flwyddyn. Bydd diweddariad pellach ar y camau a argymhellir yn cael ei roi yn sesiwn datblygu'r Bwrdd ym mis Hydref.

3. MATERION LLYWODRAETHU A RISG

Mae gan AaGIC ddyletswydd ariannol statudol i adennill costau ar ddiwedd y flwyddyn a bydd Llywodraeth Cymru yn monitro'r sefyllfa a nodwyd o ran y ddyletswydd hon a hefyd yn erbyn y cynllun ariannol a gyflwynwyd ar gyfer 2019-20.

Mae'r adroddiad hwn yn darparu dadansoddiad lefel uchel a chrynodeb o'r gwariant yn ystod pum mis cyntaf 2019-20.

4. SEFYLLFA ARIANNOL

Mae AaGIC yn adrodd am danwariant cronnol o £435,098 yn erbyn cyllidebau a nodwyd ar 31 Awst 2019 gydag alldro a ragwelwyd ac a adroddwyd i Lywodraeth Cymru. Cafodd y sefyllfa hon ei hadrodd i Lywodraeth Cymru ar ddiwrnod 5 yn unol â Chylchlythyr Iechyd Cymru a bydd y datganiad monitro manylach sydd ei angen yn cael ei gyflwyno ar ddiwrnod 9. Mae ' r monitro a gyflwynwyd i'w weld yn Atodiad 1.

Mae'r tabl isod yn dangos yr amrywiant lefel uchel ar gyfer y Cyfarwyddwyr Gweithredol.

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

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)

Mae'r tabl canlynol yn rhoi dadansoddiad pellach o'r amrywiant ariannol yn ôl Cyfarwyddiaeth.

	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)**

Mae'r dadansoddiad sydd wedi'i atodi yn Atodiad 2 yn rhoi'r rhesymau allweddol am y tanwariant, yn ôl Cyfarwyddiaeth. Y prif resymau dros yr amrywiannau tanwariant yw swyddi gwag yn erbyn lefelau staffio wedi'u cyllidebu ar gyfer cyllidebau cyflog a lleoliadau is nag a gynlluniwyd mewn cyllidebau lleoliadau hyfforddi a gomisiynwyd. Mae'r gorwariant yn y gyllideb ar gyfer Meddygaeth a Fferylliaeth nad yw'n dâl yn gysylltiedig â nifer o faterion gan gynnwys treuliau adleoli uwch na'r hyn a gyllidebwyd a gwasanaethau cymorth proffesiynol arbenigol. Disgwylir y bydd sefyllfa ariannol AaGIC yn cael ei reoli er mwyn sicrhau sefyllfa gytbwys ar ddiwedd y flwyddyn.

5. MANTOLEN FEL AG YR OEDD YM MIS 05

Dangosir isod y fantolen ar 31ain Awst 2019:

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)**

- Mae'r symudiad ar asedau anghyfredol yn adlewyrchu dibrisiant a godir yn ystod 2019. Cyfanswm y dyraniad cyfalaf ar gyfer 2019/20 yw £ 100k, ac nid yw wedi'i ddefnyddio eto. Mae cynigion yn cael eu paratoi a byddant yn cael eu cyflwyno'n fuan i'r Tîm Gweithredol i'w hadolygu a'u cymeradwyo.

- Mae cyfanswm y masnach a symiau taladwy eraill yn £15.5m, cynnydd o £9.3m ers dechrau'r flwyddyn ariannol. Mae'r cydbwysedd yn ymwneud â:

    - Mae £3.2m o anfonebau wedi'u hawdurdodi ac yn aros am daliad yn unol â'r polisi talu 30 diwrnod a gytunwyd (Cynnydd o £1.4m ers dechrau'r flwyddyn ariannol).

    - Derbyniwyd £0.7m o nwyddau/gwasanaethau ond roedd yn aros am anfoneb gyfatebol (gostyngiad o £0.2m).

    - £4.8m o groniadau ar gyfer sefydliadau GIG Cymru (cynnydd o £3.7m). Mae hyn yn bennaf yn groniadau ar gyfer anfonebau nad ydynt wedi dod i law eto

ar gyfer CLG NWIS (£1.9m), ad-daliadau anfeddygol (£1.6m) a chroniadau meddygol (£1.3m).

- £4.8m o groniadau ar gyfer sefydliadau nad ydynt yn perthyn i'r GIG (cynnydd o £3.7m), sy'n ymwneud yn bennaf ag ad-daliadau prifysgolion.

- Derbyniwyd dyraniad adnoddau o £8.5m gan Lywodraeth Cymru yn ystod Awst 2019 a gostyngodd y sefyllfa arian parod gyffredinol yn ystod y mis o £7.0m. Mae'n ofynnol sicrhau nad yw cyllid yn cael ei ofyn cyn bod ei angen, ac felly roedd y gostyngiad yn is nag yn y misoedd blaenorol i leihau'r balans arian parod a ddelir. Addasiad un-tro oedd hwn a'r cais am gyllid ar gyfer Medi 2019 fydd £17.5m, sy'n adlewyrchu'r gofynion arian parod a ragwelwyd ar gyfer y mis.

- Mae'r symudiadau yn y gronfa gyffredinol yn adlewyrchu'r gwahaniaeth rhwng y costau a ysgwyddwyd ac a gronnwyd yn ystod pum mis cyntaf y flwyddyn ariannol (£84.0m) a'r arian parod gwirioneddol sydd ei angen ac a dderbyniwyd gan Lywodraeth Cymru (£68.3m). Mae hwn yn fater graddol ac nid yw'n effeithio ar gyfanswm gwerth y dyraniad adnoddau refeniw sydd ar gael am y flwyddyn.

Disgwylir i holl gyrff y GIG fodloni Polisi Talu'r Sector Cyhoeddus, sy'n ei gwneud yn ofynnol i sefydliadau'r GIG dalu 95% o'r holl anfonebau o fewn 30 diwrnod a'u seilio ar sefyllfa gronnol. Ar gyfer y cyfnod rhwng 1 Ebrill a 31 Awst 2019, talodd AaGIC 96.0% o anfonebau nad ydynt yn ymwneud â'r GIG o fewn y targed hwn.

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. ARGYMHELLIAD

Gofynnir i Fwrdd AaGIC:

- Nodi'r sefyllfa ariannol gronnus yr adroddwyd amdani ar gyfer AaGIC, ar ddiwedd Awst 2019.
- Nodi'r ymarfer manwl sy'n mynd rhagddo i ddadansoddi ac egluro'r amrywiannau hyd yma mewn cyllidebau unigol a fydd yn llywio'r broses o gynllunio ar gyfer y flwyddyn, pennu cyllidebau yn y dyfodol a chynllunio ariannol ar gyfer blynyddoedd y dyfodol.

Llywodraethu a Sicrwydd				
Cyswllt ag amcanion corfforaethol (✓ ogydd)	Fel sefydliad newydd sy'n sefydlu AaGIC fel partner gwerthfawr y gellir ymddiried ynddo, sy'n gyflogwr rhagorol ac yn frand ag enw da ac arbenigol	Adeiladu gweithlu iechyd a gofal cynaliadwy a hyblyg ar gyfer y dyfodol.	Gyda Gofal Cymdeithasol Cymru yn siapio'r gweithlu i ddarparu gofal yn agosach i'r cartref ac i gysoni darpariaeth y gwasanaeth yn well.	Gwella ansawdd a diogelwch drwy gefnogi sefydliadau'r GIG i ddod o hyd i atebion cyflymach a mwy cynaliadwy i'r gweithlu ar gyfer heriau darparu gwasanaethau â blaenoriaeth.
	Gwella cyfleoedd i ddefnyddio technoleg a digidoli wrth ddarparu addysg a gofal.	Adfywio'r broses o ddatblygu arweinyddiaeth a chynllunio ar gyfer olyniaeth ar draws iechyd a gofal cymdeithasol mewn partneriaeth â Gofal Cymdeithasol Cymru ac Academi Cymru	Dangos gwerth o fuddsoddi yn y gweithlu a'r sefydliad.	

Ansawdd, Diogelwch a Phrofiad y Claf
Nid oes unrhyw oblygiadau o ran Ansawdd, Diogelwch a Phrofiad y Claf
Goblygiadau Ariannol
Mae'r goblygiadau ariannol wedi'u nodi uchod yng nghorff yr adroddiad.
Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)
Mae gan AaGIC gyfrifoldeb statudol i fantoli'r bwlch ar ddiwedd y flwyddyn, ac mae'r adroddiad yn nodi'r sefyllfa ariannol ar gyfer Awst 2019. Nid oes unrhyw oblygiadau o ran cydraddoldeb ac amrywiaeth i'r adroddiad hwn.
Goblygiadau Staffio
Nid oes unrhyw oblygiadau staffio i'r adroddiad hwn.
Goblygiadau hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015.)
Mae'r adroddiad yn disgrifio'n gryno sut mae AaGIC yn ceisio mabwysiadu dull cynaliadwy o reoli ariannol a fydd yn galluogi AaGIC i gyflawni ei amcanion hirdymor.

Hanes yr Adroddiad	Mae'r adroddiad yn cyfeirio at a diweddaru'r diweddariad cyllid blaenorol a rannwyd gyda Bwrdd AaGIC ym mis Awst 2019.
Atodiadau	

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**

HEIW **Period : Aug 19**

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	Non Recurring	Recurring	FYE of Recurring
		£'000	£'000	£'000	£'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**

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	In Year Effect
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
18													0
19													0
20													0
21													0
22													0
23													0
24													0
25													0
26													0
27													0
28													0
29													0
30													0
31													0
32													0
33													0
34													0
35													0
36													0
37													0

HEIW **Period : Aug 19**

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: Recurring Savings (+ve) £'000	Full Year Effect of Actions: Recurring Allocations (+ve) £'000	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: Recurring Savings (+ve) £'000	Full Year Effect of Actions: Recurring Allocations (+ve) £'000	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

	A. Monthly Summarised Statement of Comprehensive Net Expenditure		1 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total YTD £'000	Forecast year-end position £'000
1	Revenue Resource Limit	Actual/F'cast	16,450	16,598	17,241	17,068	16,881	18,637	18,015	17,951	18,270	19,713	17,357	21,769	84,238	215,948
2	Miscellaneous Income - Capital Donation\Government Grant Income	Actual/F'cast													0	0
3	Miscellaneous Income - Other (including non resource limited income)	Actual/F'cast	61	42	86	67	18	44	41	44	39	39	46	237	274	766
4	**Income Total**		**16,511**	**16,640**	**17,327**	**17,135**	**16,899**	**18,681**	**18,056**	**17,995**	**18,309**	**19,752**	**17,403**	**22,006**	**84,512**	**216,714**
5	Primary Care Contractor (excluding drugs, including non resource limited expenditure)	Actual/F'cast													0	0
6	Primary Care - Drugs & Appliances	Actual/F'cast													0	0
7	Provided Services - Pay	Actual/F'cast	1,034	1,090	1,191	1,142	1,047	1,251	1,229	1,228	1,228	1,225	1,225	1,225	5,504	14,115
8	Provider Services - Non Pay (excluding drugs & depreciation)	Actual/F'cast	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
9	Secondary Care - Drugs	Actual/F'cast													0	0
10	Healthcare Services Provided by Other NHS Bodies	Actual/F'cast													0	0
11	Non Healthcare Services Provided by Other NHS Bodies	Actual/F'cast													0	0
12	Continuing Care and Funded Nursing Care	Actual/F'cast													0	0
13	Other Private & Voluntary Sector	Actual/F'cast	14,321	14,225	14,992	14,745	14,577	16,124	15,529	15,323	15,808	17,248	14,981	18,654	72,860	186,529
14	Joint Financing and Other	Actual/F'cast													0	0
15	DEL Depreciation\Accelerated Depreciation\Impairments	Actual/F'cast	40	41	40	40	40	40	40	40	40	43	43	43	201	490
16	AME Donated Depreciation\Impairments	Actual/F'cast													0	0
17	Non Allocated Contingency	Actual/F'cast													0	0
18	Profit\Loss Disposal of Assets	Actual/F'cast													0	0
19	**Cost - Total**	Actual/F'cast	**16,491**	**16,622**	**17,310**	**17,089**	**16,565**	**18,743**	**18,118**	**18,057**	**18,371**	**19,814**	**17,465**	**22,068**	**84,077**	**216,714**
20	**Net surplus/ (deficit)**	Actual/F'cast	**20**	**18**	**17**	**46**	**334**	**(62)**	**(62)**	**(62)**	**(62)**	**(62)**	**(62)**	**(62)**	**435**	**0**

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

			1 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total YTD	Forecast year-end position
	DEL															
28	Baseline Provider Depreciation	Actual/F'cast	40	41	40	40	40	40	40	40	40	43	43	43	201	490
29	Strategic Depreciation	Actual/F'cast													0	0
30	Accelerated Depreciation	Actual/F'cast													0	0
31	Impairments	Actual/F'cast													0	0
32	Other (Specify in Narrative)	Actual/F'cast													0	0
33	**Total**		**40**	**41**	**40**	**40**	**40**	**40**	**40**	**40**	**40**	**43**	**43**	**43**	**201**	**490**
	AME															
34	Donated Asset Depreciation	Actual/F'cast													0	0
35	Impairments	Actual/F'cast													0	0
36	Other (Specify in Narrative)	Actual/F'cast													0	0
37	**Total**		**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**

D. Accountancy Gains

			1	2	3	4	5	6	7	8	9	10	11	12		
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
38	Accountancy Gains	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	**0**	**0**

E. Committed Reserves & Contingencies

			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		
	List of all Committed Reserves & Contingencies inc above in Section A. Please specify Row number in description.															
39		Forecast Only													0	0
40		Forecast Only													0	0
41		Forecast Only													0	0
42		Forecast Only													0	0
43		Forecast Only													0	0
44		Forecast Only													0	0
45		Forecast Only													0	0
46		Forecast Only													0	0
47		Forecast Only													0	0
48		Forecast Only													0	0
49		Forecast Only													0	0
50		Forecast Only													0	0
51		Forecast Only													0	0
52		Forecast Only													0	0
53		Forecast Only													0	0
54		Forecast Only													0	0
55		Forecast Only													0	0
56		Forecast Only													0	0
57		Forecast Only													0	0
58		Forecast Only													0	0
59		Forecast Only													0	0
60		Forecast Only													0	0
61		Forecast Only													0	0
62		Forecast Only													0	0
63		Forecast Only													0	0
64		Forecast Only													0	0
65		Forecast Only													0	0
66		Forecast Only													0	0
67	**Total**		**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
		Phasing	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	

HEIW

Period : Aug 19

Table B1 - Net Expenditure Profile Analysis

This Table is currently showing 0 errors

A. PROVIDER PAY EXPENDITURE ANALYSIS

	Pay - Expenditure Profiles	1 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total YTD £'000	Forecast year-end position £'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 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total YTD £'000	Forecast year-end position £'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

	Drugs/Medicines Management - Expenditure Profiles	1 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total YTD £'000	Forecast year-end position £'000
37	**Total Gross Drugs Expenditure - Plan**													0	0
38	Primary Care Drugs - Actual/Forecast Gross													0	0
39	Secondary Care - Actual/Forecast Gross													0	0
40	Committed Reserves - Actual/Forecast Gross													0	0
41	**Total Expenditure - Actual/Forecast**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
42	**Expenditure Variance**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
43	**Total Medicines Management Savings - Plan**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
44	Medicines Management Savings - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
45	**Medicines Management Savings Variance**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
46	**Drugs Accountancy Gains - Plan**													0	0
47	**Drugs Accountancy Gains - Actual/Forecast**													0	0
48	**Drugs Accountancy Gains Variance**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
49	**Net Expenditure - Plan**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	**Net Expenditure - Actual/Forecast (as per Table B)**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51	**Net Expenditure - Variance**	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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

	Primary Care Contractor - Expenditure Profiles	1 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total YTD £'000	Forecast year-end position £'000
52	**Total Gross Primary Care Contractor Expenditure - Plan**													0	0
53	Primary Care Contractor Expenditure - Actual/Forecast Gross													0	0
54	Primary Care - Agency/Locum Paid at a Premium - Actual/Forecast Gross													0	0
55	Committed Reserves - Actual/Forecast Gross													0	0
56	**Total Gross Primary Care Contractor Expenditure - Actual/Forecast**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
57	**Gross Primary Care Expenditure Variance**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
58	**Total Primary Care Savings - Plan**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
59	Primary Care Savings - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
60	**Primary Care Savings Variance**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
61	**Primary Care Accountancy Gains - Plan**													0	0
62	**Primary Care Accountancy Gains - Actual/Forecast**													0	0
63	**Primary Care Accountancy Gains Variance**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
64	**Net Expenditure - Plan**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
65	**Net Expenditure - Actual/Forecast (as per Table B)**	0	0	0	0	0	0	0	0	0	0	0	0	0	0
66	**Net Expenditure - Variance**	0	0	0	0	0	0	0	0	0	0	0	0	0	0

E. CONTINUING HEALTHCARE/ FUNDED NURSING CARE EXPENDITURE ANALYSIS

	Continuing Healthcare / Funded Nursing Care - Expenditure Profiles	1 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total YTD £'000	Forecast 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. COMMISSONED SERVICES (Health Care & Non HealthCare) EXPENDITURE ANALYSIS

	Commissioned Services - Expenditure Profiles	1 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total YTD £'000	Forecast 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**

HEIW

Period : **Aug 19**

This Table is currently showing 0 errors

Table B2 - Pay Expenditure Analysis

A - Pay Expenditure

REF	TYPE	1 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total YTD £'000	Forecast 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

REF	TYPE	1 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total YTD £'000	Forecast 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)

REF	REASON	1 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total YTD £'000	Forecast 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**

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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

			1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			*YTD variance as %age of YTD*	Green	Amber	non recurring	recurring	
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000				£'000	£'000	£'000	£'000	£'000
1	CHC and Funded Nursing Care	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
2		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
3		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
4	Commissioned Services	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	Medicines Management (Primary & Secondary Care)	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	Non Pay	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	Pay	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	Primary Care	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			
22	Variance in month																					
23	In month achievement against FY forecast																					

HEIW **Period : Aug 19**

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	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			*YTD variance as %age of YTD Budget/Plan*	Green	Amber	non recurring	recurring	
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000				£'000	£'000	£'000	£'000	£'000
1	Changes in Staffing Establishment	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
2		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
3		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
4	Variable Pay	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
5		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
6		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
7	Locum	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
8		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
9		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
10	Agency / Locum paid at a premium	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
11		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
12		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
13	Changes in Bank Staff	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
14		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
15		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
16	Other (Please Specify)	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
17		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
18		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
19	Total	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
20		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
21		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			

Table C2- Savings Schemes Agency/Locum Paid at a Premium Analysis

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

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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**

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Table D - Income/Expenditure Assumptions

Annual Forecast

	LHB/Trust	Contracted Income	Non Contracted Income	Total Income	Contracted Expenditure	Non Contracted Expenditure	Total Expenditure
		£'000	£'000	£'000	£'000	£'000	£'000
1	Swansea Bay University	0	0	**0**	0	14,131	**14,131**
2	Aneurin Bevan University	0	0	**0**	0	9,030	**9,030**
3	Betsi Cadwaladr University	0	0	**0**	0	13,322	**13,322**
4	Cardiff & Vale University	0	0	**0**	0	18,546	**18,546**
5	Cwm Taf Morgannwg University	0	0	**0**	0	7,229	**7,229**
6	Hywel Dda University	0	0	**0**	0	6,331	**6,331**
7	Powys	0	0	**0**	0	422	**422**
8	Public Health Wales	0	0	**0**	0	1,137	**1,137**
9	Velindre	0	0	**0**	0	21,783	**21,783**
10	Wales Ambulance Services	0	0	**0**	0	569	**569**
11	WHSSC	0	0	**0**	0	0	**0**
12	EASC	0	0	**0**	0	0	**0**
13	HEIW	0	0	**0**	0	0	**0**
14	**Total**	**0**	**0**	**0**	**0**	**92,500**	**92,500**

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Period : Aug 19

Table E - Resource Limits 1. BASE ALLOCATION		STATUS OF ISSUED RESOURCE LIMIT ITEMS HCHS £'000	Pharmacy £'000	Dental £'000	GMS £'000	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
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 Reprocurement	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**	

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Period : **Aug 19**

This Table is currently showing 0 errors

	Table F - Overview Of Key Risks / Opportunities Affecting Forecast Outturn	**FORECAST YEAR END**			
		Worst Case	**Likelihood**	**Best Case**	**Likelihood**
		£'000		**£'000**	
	Current Reported Forecast Outturn	**0**		**0**	
	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**	

HEIW **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	Closing Balance End of Aug 19	Forecast Closing Balance End of Mar 20
	Non-Current Assets	**£'000**	**£'000**	**£'000**
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**

	EXPLANATION OF ALL PROVISIONS	Opening Balance Beginning of Apr 19	Closing Balance End of Aug 19	Closing Balance End of Mar 20
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)	£'000
36	Welsh NHS Receivables Aged 0 - 10 weeks	20
37	Welsh NHS Receivables Aged 11 - 16 weeks	0
38	Welsh NHS Receivables Aged 17 weeks and over	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	

HEIW

Period : **Aug 19**

This table needs completing on a quarterly basis

Table I - PSPP

NOTE: Data to 1 decimal place

30 DAY COMPLIANCE

	PROMPT PAYMENT OF INVOICE PERFORMANCE	YEAR TO DATE			FORECAST YEAR END		
		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

	PROMPT PAYMENT OF INVOICE PERFORMANCE	YEAR TO DATE			FORECAST YEAR END		
			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						

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Period : Aug 19

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
	Gross expenditure (accrued, to include capitalised finance leases)						
	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**	

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Period : Aug 19

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 Min. £'000	2019-20 Forecast Max. £'000	Capital Expenditure Monthly Profile April £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000	Total £'000	Risk Level
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**	
	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**	**100**	**100**	
	Other Schemes:																	
41																	0	
42																	0	
43																	0	
44																	0	
45																	0	
46																	0	
47																	0	
48																	0	
49																	0	
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52																	0	
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54																	0	
55																	0	
56																	0	
57																	0	
58																	0	
59																	0	
60																	0	
61	**Sub Total**		**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	
62	**Total Capital Expenditure**		**100**	**100**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**100**	**100**	

HEIW

Period : Aug 19

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	

HEIW

Period: **Aug 19**

11 weeks before end of Aug 19 = 15 June 2019
17 weeks before end of Aug 19 = 04 May 2019

Table M - Debtors Schedule

Debtor	Inv #	Inv Date	Orig Inv £	Outstand. Inv £	Valid Entry	>11 weeks but <17 weeks	Over 17 weeks	Arbitration Due Date	Comments
Drop down list of organisations here									
			0.00	0.00		0.00	0.00		

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

HEIW **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

GENERAL MEDICAL SERVICES
Operating Expenditure

		WG Allocation	Current Plan	Forecast Outturn	Variance	Year to Date
LHB Administered ***Section B***	**LINE NO.**	**£000's**	**£000's**	**£000's**	**£000's**	**£000's**
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

Analysis of Other Payments (line 113)	**LINE NO.**	**£000's**	**£000's**	**£000's**	**£000's**	**£000's**
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

Premises ***Section C***	**LINE NO.**	**£000's**	**£000's**	**£000's**	**£000's**	**£000's**
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	Current Plan	Forecast Outturn	Variance	Year to Date
Dispensing Data	LINE NO.	£000's	£000's	£000's	£000's	£000's
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 included in a GDS contract and / or PDS agreement.</u> 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**	

Appendix 2

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.

Dyddiad Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**4.2**
Teitl Adroddiad	**Dangosfwrdd Perfformiad AaGIC**		
Awdur Adroddiad	Gareth Thomas		
Noddwr Adroddiad	Julie Rogers		
Cyflwynywyd gan	Chris Payne		
Rhyddid Gwybodaeth	Agored		
Pwrpas yr Adroddiad	Sicrhau bod Aelodau'r Bwrdd yn goruchwylio perfformiad sefydliadol a chyfarwyddiaeth. Yn benodol yn mae'r adroddiad yn amlygu datblygiad parhaus dangosfwrdd perfformiad AaGIC.		
Materion Allweddol	Amserlen i weithredu rhaglen waith sydd ei hangen i sicrhau bod egwyddorion, cymwyseddau, galluoedd a ffyrdd o weithio ar waith i gyflawni bwriad y fframwaith rheoli perfformiad.		

Camau penodol *(Rhowch un ☐ yn unig)*	**Gwybodaeth**	**Trafodaeth**	**Sicrwydd**	**Cymeradwyo**
		✓		

Argymhellion	Gofynnir i Aelodau: • Ystyried ac adolygu'r dangosfwrdd perfformiad a darparu argymhellion ac ychwanegiadau pellach. • Nodi'r broses a ddilynir.

Rheoli Perfformiad

1. CYFLWYNIAD

Mae'r papur hwn yn rhoi trosolwg i Aelodau'r Bwrdd o berfformiad Addysg a Gwella Iechyd Cymru (AaGIC) ar gyfer y chwarter gyntaf, gan gwmpasu'r cyfnod o Ebrill 2019 i Fehefin 2019.

2. CEFNDIR

Nod yr adroddiad rheoli perfformiad yw diffinio a chysoni'r gwaith o gyflawni targedau perfformiad gweithredol, dangosyddion ansawdd a mesurau canlyniadau. Cafodd y broses ei chyflwyno a'i chymeradwyo yn Sesiwn Datblygu'r Bwrdd ym mis Awst ac felly mae timau Gwybodaeth a Chynllunio'r Gweithlu wedi cynnal casgliad data sefydliadol i'n galluogi i adrodd ar weithgarwch AaGIC. Gellir gweld iteriad cyntaf yr adroddiad perfformiad yn **Atodiad A** gyda naratif cysylltiedig.

3. MATERION LLYWODRAETHU A RISG

Mae'r dangosfwrdd perfformiad wedi'i ddatblygu drwy ymgysylltu ar draws cyfarwyddiaethau AaGIC i ystyried y wybodaeth sydd ar gael a'r wybodaeth a fyddai'n ychwanegu gwerth o safbwynt dangosfwrdd lefel uchel.

Mae meintiau mawr o ddata ar gael o fewn y sefydliad. Fodd bynnag, mae'n hanfodol nodi bod angen i ni gasglu'r data cywir mewn fformat effeithlon, gan greu prosesau symlach sy'n gallu troi data'n hawdd gan sicrhau ei fod yn cael ei adalw a'i ddeall yn hawdd er mwyn gwella'r broses o wneud penderfyniadau.

Datblygiadau pellach

Derbyniwyd nifer o argymhellion gan Aelodau'r Bwrdd a'r swyddogion gweithredol i wella'r dangosfwrdd perfformiad ymhellach. Fel y cyfryw, bydd y timau'n ymchwilio i'r canlynol drwy gyfarfod yr Is-grŵp Cyflenwi Gwybodaeth am Berfformiad:

- Llythyr cylch gwaith Llywodraeth Cymru
- Ychwanegu lleoedd a gomisiynir; anfeddygol (AHPs ac eraill)
- Data o Ansawdd; Nifer yr ymweliadau a dargedwyd ag ardaloedd y Byrddau Iechyd
- Gwybodaeth am y gweithlu; Gwaith Achos Presennol (disgyblu a chwyno), Arolwg Staff (sgôr ymgysylltu & cyfradd ymateb staff)
- Gwybodaeth gorfforaethol; Ceisiadau rhyddid gwybodaeth a chwynion
- Targedau ariannol; Gweithio o fewn ein modd, polisi talu'r sector cyhoeddus (PSPP)

Er bod y dangosfwrdd ar hyn o bryd yn gallu rhoi cipolwg ar rywfaint o'r data gwerthfawr sydd gennym o fewn AaGIC, caiff rhaglen o waith parhaus i wella effeithlonrwydd ac ymgorffori'r metrigau uchod ei chwblhau erbyn chwarter pedwar.

4. GOBLYGIADAU ARIANNOL

Caiff y broses o ddatblygu'r fframwaith ei chefnogi drwy'r adnoddau a gyllidebwyd eisoes.

5. ARGYMHELLIAD

Argymhellir y dylai'r Bwrdd:

- Ystyried ac adolygu'r dangosfwrdd perfformiad a darparu argymhellion ac ychwanegiadau pellach.
- Nodi'r broses a ddilynir.

<table>
<tr><th colspan="5">Governance and Assurance</th></tr>
<tr><td rowspan="4">Cyswllt ag amcanion corfforaethol (✓ ogydd)</td><td>Fel sefydliad newydd sy'n sefydlu AaGIC fel partner gwerthfawr y gellir ymddiried ynddo, sy'n gyflogwr rhagorol ac yn frand ag enw da ac arbenigol</td><td>Adeiladu gweithlu iechyd a gofal cynaliadwy a hyblyg ar gyfer y dyfodol.</td><td>Gyda Gofal Cymdeithasol Cymru yn siapio'r gweithlu i ddarparu gofal yn agosach i'r cartref ac i gysoni darpariaeth y gwasanaeth yn well.</td><td>Gwella ansawdd a diogelwch drwy gefnogi sefydliadau'r GIG i ddod o hyd i atebion cyflymach a mwy cynaliadwy i'r gweithlu ar gyfer heriau darparu gwasanaethau â blaenoriaeth.</td></tr>
<tr><td></td><td></td><td></td><td></td></tr>
<tr><td>Gwella cyfleoedd i ddefnyddio technoleg a digidoli wrth ddarparu addysg a gofal.</td><td>Adfywio'r broses o ddatblygu arweinyddiaeth a chynllunio ar gyfer olyniaeth ar draws iechyd a gofal cymdeithasol mewn partneriaeth â Gofal Cymdeithasol Cymru ac Academi Cymru</td><td>Dangos gwerth o fuddsoddi yn y gweithlu a'r sefydliad.</td><td></td></tr>
<tr><td>✓</td><td></td><td></td><td></td></tr>
<tr><td colspan="5">Ansawdd, Diogelwch a Phrofiad y Claf</td></tr>
<tr><td colspan="5">d/b</td></tr>
<tr><td colspan="5">Goblygiadau Ariannol</td></tr>
<tr><td colspan="5">Nid oes goblygiadau ariannol i Weithredwyr ystyried/cymeradwyo ar hyn o bryd.</td></tr>
<tr><td colspan="5">Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)</td></tr>
<tr><td colspan="5">d/b</td></tr>
<tr><td colspan="5">Goblygiadau Staffio</td></tr>
<tr><td colspan="5">d/b</td></tr>
<tr><td colspan="5">Goblygiadau hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015.)</td></tr>
<tr><td colspan="5">d/b</td></tr>
<tr><td>Hanes yr Adroddiad</td><td colspan="4">18 Gorffennaf 2019 – Cyfarfod Bwrdd Cyhoeddus (Hywel Dda)
29 Awst 2019 – Sesiwn Datblygu'r Bwrdd (AaGIC)</td></tr>
<tr><td>Atodiadau</td><td colspan="4">Atodiad A – Adroddiad Perfformiad</td></tr>
</table>



Health Education and Improvement Wales

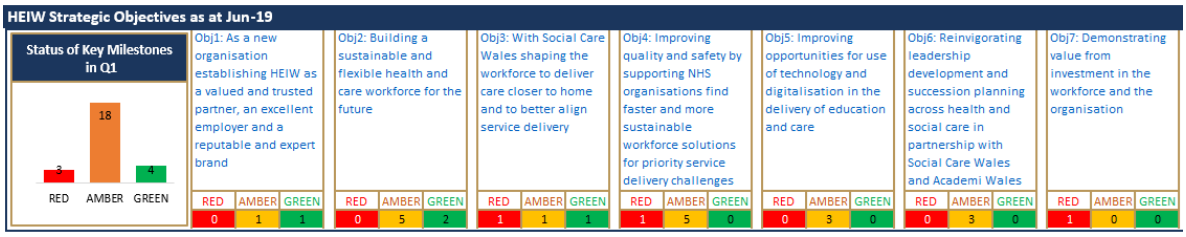
Performance Report

Quarter One

(April 2019 to June 2019)

Section One – Projects and Programmes

HEIW Strategic Objectives – Project Update



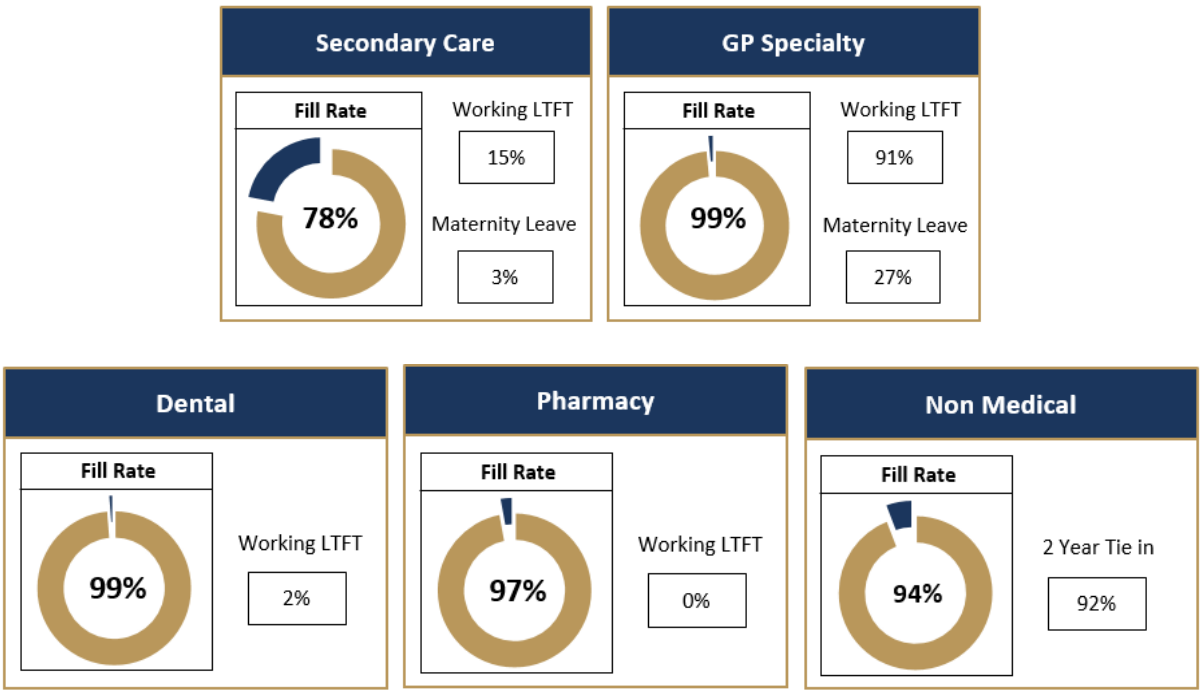
There are 25 key programmes and projects to be delivered as part of the Health Education Improvement Wales Annual Plan for 2019/20; in support of the strategic objectives. Each strategic objective has been assigned an Executive lead and a Senior Responsible Officer with responsibility for delivering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

Status	Number	Comment
Red	3	**(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 **(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. **(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
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.

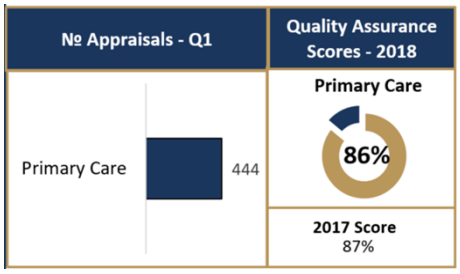
- Attrition. Naturally attrition occurs as a result of trainees failing to make progress within a specialty but also deciding that a particular specialty was not for them and successfully obtaining a placement on another programme.

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.

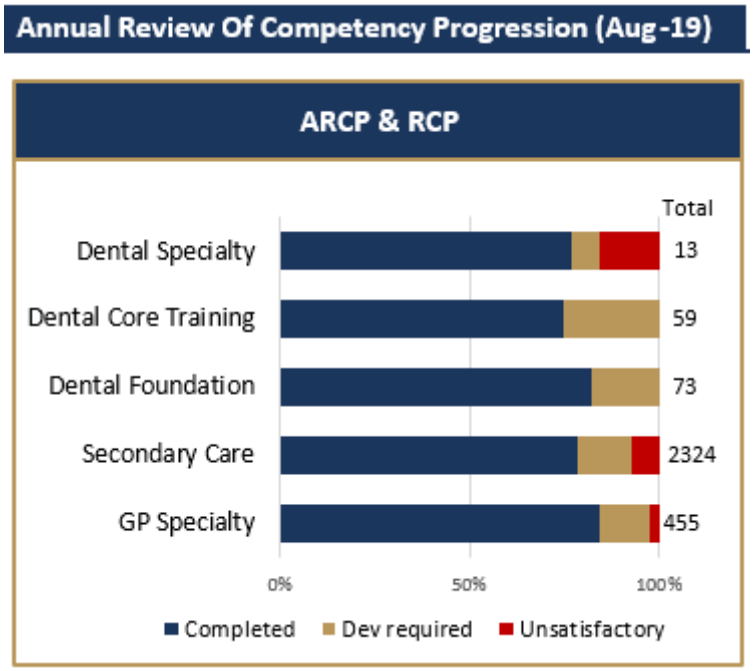
It should be noted that, as per GMC guidance, the appraisal completion date is taken from the date the appraisal summary is agreed by the appraisee on MARS.

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)

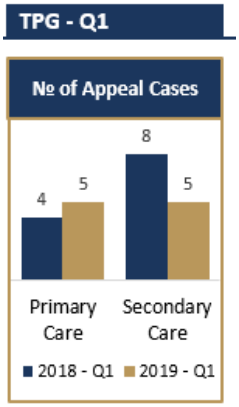


Over the last 12 months (August 2017-July 2018), Secondary Care has conducted approx. 2500 annual reviews for doctors in Foundation and Specialty training. The Foundation ARCPs are held on an annual basis locally in Postgraduate Centres and are administered by Postgraduate Foundation Administrators and 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 Outcome1, 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.

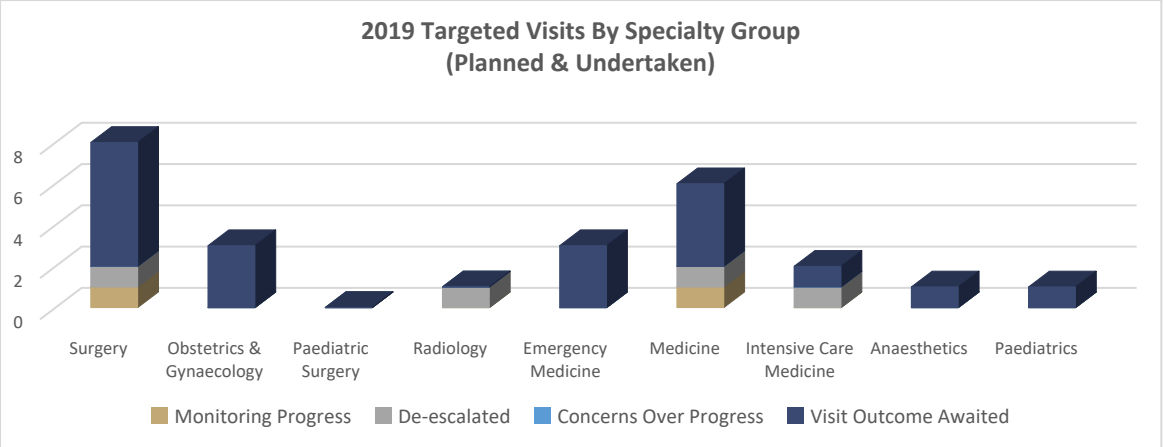


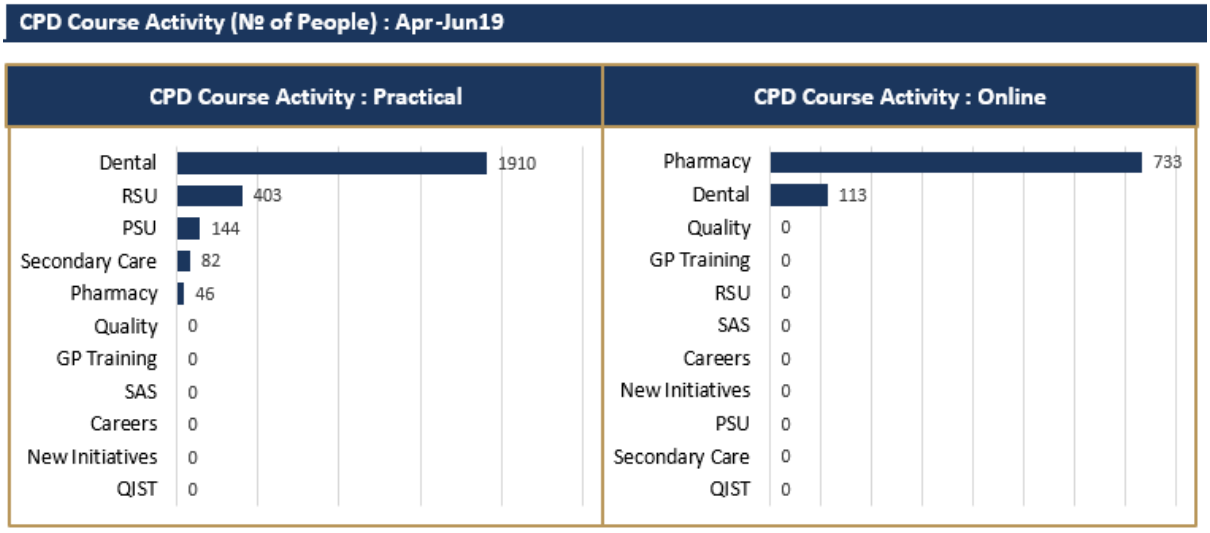
Chart Two: Enhanced Monitoring:

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

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

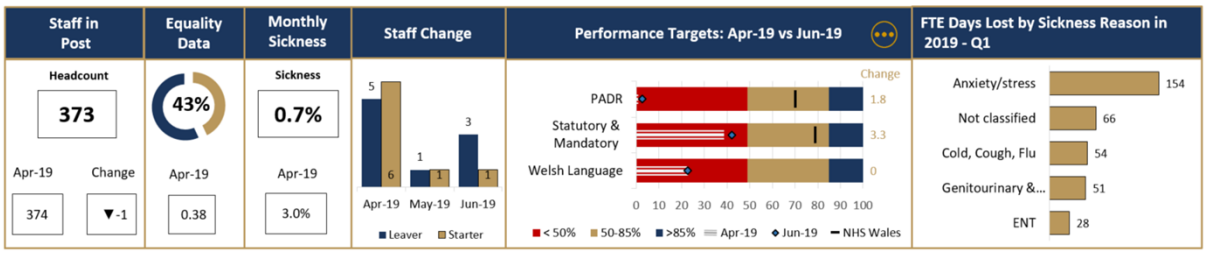


The data is collated manually for this an important indicator of our investment in the professional development of the NHS Wales workforce. However, data collection will be improved in the near future when we implement a centralised course management system.

- 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 June2019

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.

Dyddiad Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**4.3**
Teitl yr Adroddiad	**Datblygiad Fframwaith Sicrwydd y Bwrdd**		
Awdur yr Adroddiad	Dafydd Bebb, Ysgrifennydd y Cwmni		
Noddwr yr Adroddiad	Dafydd Bebb, Ysgrifennydd y Cwmni		
Cyflwynwyd gan	Dafydd Bebb, Ysgrifennydd y Cwmni		
Rhyddid Gwybodaeth	Agored		
Pwrpas yr Adroddiad	Canfod cymeradwyaeth y Bwrdd ar gyfer Fframwaith Sicrwydd y Bwrdd (FfSB) – sy'n amgaeedig yn Atodiad 1.		
Materion Allweddol	• Mae datblygiad Fframwaith Sicrwydd y Bwrdd (FfSB) wedi bod yn broses ailadroddus gyda drafft o'r ddogfen wedi'i chyflwyno i'r Bwrdd a'r Pwyllgor Archwilio a Sicrwydd (PAS) cyn hynny am sylwadau; • Wrth symud ymlaen, bydd FfSB yn cael ei gyflwyno i'r PAS a'r Bwrdd yn flynyddol; • Darperir diweddariadau rheolaidd mewn perthynas â FfSB drwy'r Gofrestr Risgiau Corfforaethol.		

Camau gweithredu penodol *(un yn unig)*	**Gwybodaeth**	**Trafodaeth**	**Sicrwydd**	**Cymeradwyaeth**
				✔

Argymhellion	Gofynnir i aelodau: gymeradwyo Fframwaith Sicrwydd y Bwrdd – sy'n amgaeedig yn Atodiad 1.

Fframwaith Sicrwydd y Bwrdd

1. CYFLWYNIAD

Pwrpas yr adroddiad hwn yw cael cymeradwyaeth y Bwrdd ar gyfer Fframwaith Sicrwydd y Bwrdd (FfSB).

2. CEFNDIR

2.1 Fframwaith Sicrwydd y Bwrdd

Mae FfSB yn amlinellu fframwaith AaGIC ar gyfer cefnogi llywodraethiant da a sicrhau bod systemau a phrosesau cadarn yn cefnogi hyn.

Mae'r FfSB yn amlinellu sut bydd y Bwrdd yn nodi ac yn deall y prif risgiau i gyflawni ei amcanion strategol ac yn cael sicrwydd bod mesurau ar waith i reoli'r risgiau hyn. Bydd FfSB hefyd yn galluogi asesiad o'r risg(iau) i gyflawni'r amcanion yn seiliedig ar gryfder y mesurau rheoli a'r sicrwydd sydd ar waith.

Mae'r Gofrestr Risgiau Corfforaethol yn canolbwyntio ar amcanion allweddol AaGIC fel y'u mynegir yn y Cynllun Blynyddol ac mae'n nodi'r prif risgiau a'r mesurau rheoli allweddol. O ystyried hyn, y Gofrestr Risgiau Corfforaethol fydd y cyfrwng ar gyfer rhoi sicrwydd rheolaidd ar FfSB. Bydd hyn yn galluogi'r Bwrdd a'r PAS i gael sicrwydd ynglŷn ag effeithiolrwydd y mesurau rheoli sydd ar waith i reoli'r prif risgiau sy'n gysylltiedig ag amcanion allweddol AaGIC.

Bydd FfSB yn destun adolygiad blynyddol gan y Bwrdd a'r Pwyllgor Archwilio a Sicrwydd.

Bydd amserlen FfSB ddrafft flynyddol AaGIC fel a ganlyn:

Cam Gweithredu	Swyddog Arweiniol	Dyddiad
Y Bwrdd yn cymeradwyo FfSB	Ysgrifennydd y Bwrdd	Medi
Llenwi'r Gofrestr Risgiau – dogfen sy'n cael ei diweddaru'n gyson	Ysgrifennydd y Bwrdd	Parhaus
Adolygiad o FfSB gan y Bwrdd a'r Pwyllgor Archwilio a Sicrwydd	Ysgrifennydd y Bwrdd	Unwaith y flwyddyn
Y Bwrdd yn adolygu'r Gofrestr Risgiau	Ysgrifennydd y Bwrdd	Dwywaith y flwyddyn
Adolygiad o'r Gofrestr Risgiau gan y PAS	Ysgrifennydd y Bwrdd	Chwarterol

3. MATERION LLYWODRAETHIANT A RISG

Mae'n hanfodol bod fframwaith effeithiol ac effeithlon ar waith i roi sicrwydd digonol, parhaus a dibynadwy ar stiwardiaeth sefydliadol a rheoli'r prif risgiau i lwyddiant sefydliadol a darparu gwasanaethau cyhoeddus gwell, cost-effeithiol.

4. GOBLYGIADAU ARIANNOL

Nid oes unrhyw oblygiadau ariannol uniongyrchol yn deillio o'r adroddiad hwn. Mae FfSB yn elfen graidd o strwythur llywodraethiant corfforaethol AaGIC.

5. ARGYMHELLION

Gofynnir i aelodau gymeradwyo Fframwaith Sicrwydd y Bwrdd – sy'n amgaeedig yn Atodiad 1.

Llywodraethiant a Sicrwydd				
Cyswllt ag amcanion corfforaethol ***(✓os gwelwch yn dda)***	Fel sefydliad newydd, sefydlu AaGIC fel partner gwerthfawr y gellir ymddiried ynddo, cyflogwr gwych a brand parchus ac arbenigol	Datblygu gweithlu iechyd a gofal cynaliadwy a hyblyg ar gyfer y dyfodol.	Gyda Gofal Cymdeithasol Cymru yn siapio'r gweithlu i ddarparu gofal yn agosach at adref ac i alinio darpariaeth gwasanaethau yn well.	Gwella ansawdd a diogelwch drwy gefnogi sefydliadau'r GIG i ddod o hyd i atebion cyflymach a mwy cynaliadwy o ran y gweithlu ar gyfer heriau darparu gwasanaeth â blaenoriaeth.
	✓			
	Gwella cyfleoedd i ddefnyddio technoleg a digido wrth ddarparu addysg a gofal.	Ailfywiogi'r broses o ddatblygu arweinyddiaeth a chynllunio olyniaeth ar draws iechyd a gofal cymdeithasol mewn partneriaeth â Gofal Cymdeithasol Cymru ac Academi Cymru	Dangos gwerth buddsoddi yn y gweithlu a'r sefydliad.	

Ansawdd, Diogelwch a Phrofiad Cleifion
Mae sicrhau bod y Bwrdd a'i Bwyllgorau yn gwneud penderfyniadau gwybodus yn dibynnu ar ansawdd a chywirdeb y wybodaeth a gyflwynir ac a ystyrir gan y rhai sy'n gwneud penderfyniadau. Mae penderfyniadau gwybodus yn fwy tebygol o effeithio'n ffafriol ar ansawdd, diogelwch a phrofiad cleifion a staff.
Goblygiadau Ariannol
Nid oes unrhyw oblygiadau ariannol.
Goblygiadau Cyfreithiol (gan gynnwys asesiad cydraddoldeb ac amrywiaeth)
Mae sicrhau bod gan y Bwrdd FfSB effeithiol sy'n esblygu ac yn cefnogi'r Bwrdd i gyflawni'r cynllun blwyddyn cyfredol, yn rhan hanfodol o drefniadau Llywodraethiant y Bwrdd wrth symud ymlaen.
Goblygiadau Staffio
Nid oes unrhyw oblygiadau staffio.
Goblygiadau Hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015)
Ni nodwyd unrhyw effeithiau.

Hanes yr Adroddiad	Cyflwynwyd diweddariad ar ddatblygiad FfSB adeg cyfarfod y Bwrdd ym mis Mawrth ac yng nghyfarfod mis Gorffennaf o'r Pwyllgor Archwilio a Sicrwydd.
Atodiadau	Atodiad 1 – Fframwaith Sicrwydd Drafft y Bwrdd.

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

Appendix 2

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.

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**	• 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.
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.

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**	• 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**		**S**trategy published and in place. Regular bulletins being prepared & distributed. 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.
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**		**S**ee above. Plus, all execs are now regularly attending peer networks. Opps to support national programmmes are clear and allocated to key individuals within the organisation Engagement with NHS orgs has been built into our IMTP process for this year.

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**	• 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**	• 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: • 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**	• 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**	• 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	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

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	
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.
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.

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	
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**	• 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**	• 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.

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	
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.
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.

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**	
18. Obj. 2	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. 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	**4**	**3**	**12**	• 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**		We have had sufficient applications so far. Awaiting response from NWSSP and WG re solution to indemnity issue.

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	
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.

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	
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**	• 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**	• 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.

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	
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**	• 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**		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. NWIS completed and have approved infrastructure design to support Eduroam rollout. 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.

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	
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**	• 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**	• 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.

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	
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.

Dyddiad Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**4.4**
Teitl yr Adroddiad	**Cofrestr Risgiau Corfforaethol**		
Awdur yr Adroddiad	Dafydd Bebb, Ysgrifennydd y Bwrdd		
Noddwr yr Adroddiad	Dafydd Bebb, Ysgrifennydd y Bwrdd		
Cyflwynwyd gan	Dafydd Bebb, Ysgrifennydd y Bwrdd		
Rhyddid Gwybodaeth	Agored		
Pwrpas yr Adroddiad	Rhoi diweddariad i'r Pwyllgor Archwilio a Sicrwydd ar y Gofrestr Risgiau Corfforaethol.		
Materion Allweddol	Mae'r adroddiad hwn yn: • darparu diweddariad ar y sefyllfa bresennol mewn perthynas â'r Gofrestr Risgiau Corfforaethol sy'n amgaeedig yn Atodiad 1; • yn cadarnhau bod y tri risg a aseswyd yn flaenorol fel 'coch' wedi'u hisraddio i oren; • cadarnhau bod y Gofrestr Risgiau Corfforaethol wedi'i halinio â'r amcanion a nodir yn y Cynllun Blynyddol ar gyfer 19/20 ac unrhyw feysydd eraill o risg gynhenid; • darparu diweddariad am y broses ar gyfer dileu risgiau statws gwyrdd o'r Gofrestr Risgiau Corfforaethol.		
Camau gweithredu penodol ***(un yn unig)***	**Gwybodaeth**	**Trafodaeth**	**Sicrwydd** ✓ / **Cymeradwyaeth**
			✓
Argymhellion	Gofynnir i'r aelodau nodi ar gyfer **Sicrwydd** y sefyllfa bresennol mewn perthynas â'r Gofrestr Risgiau Corfforaethol sy'n amgaeedig yn Atodiad 1.		

COFRESTR RISGIAU CORFFORAETHOL

1. CYFLWYNIAD

Gofynnir i'r Pwyllgor Archwilio a Sicrwydd nodi'r sefyllfa bresennol mewn perthynas â'r Gofrestr Risgiau Corfforaethol fel yr amlinellir yn yr adroddiad hwn.

2. CEFNDIR

Mae'r Gofrestr Risgiau Corfforaethol wedi'i halinio â'r amcanion a nodir yn y Cynllun Blynyddol ar gyfer 19/20 ac unrhyw feysydd eraill o risg gynhenid.

Mae pob risg ar y Gofrestr Gorfforaethol yn cyd-fynd â Chynllun Blynyddol neu amcan llythyr cylch gwaith penodol llywodreath Cymru yn y golofn chwith.

Ceir cadarnhad bod y Gofrestr Risgiau Corfforaethol yn parhau i gael ei hadolygu bob mis gan y Tîm Gweithredol a'r Uwch Dîm Arweinyddiaeth.

Asesiad

Mae'r fethodoleg ar gyfer asesu risg wedi'i chynnwys yn Atodiad 1. Mae 26 o risgiau ar y gofrestr risgiau corfforaethol, nid oes unrhyw risgiau coch ar hyn o bryd, 23 o risgiau oren a thair yn wyrdd.

Mae tair risg goch gynt wedi'u hisraddio i oren. Mae'r newidiadau hyn wedi'u gwneud am y rhesymau canlynol:

- Risg 6. Mae'r risg mewn perthynas ag ymgysylltu â Llywodraeth Cymru wedi'i hisraddio yn bennaf gan fod y cyfarfodydd ansawdd a chyflenwi ar fin digwydd. Serch hynny, bydd y maes hwn yn cael ei ailasesu ar ôl y cyfarfod risg ac ymgysylltu.
- Risg 23. Eduroam. Wedi'i israddio i oren oherwydd y broses sylweddol a wnaed ynglŷn â chaffael a threfnu Porth Eduroam.
- Risg 26: recriwtio 80 o Nyrsys Ardal. Mae hyn wedi'i israddio gan fod cyfarfodydd a gohebiaeth dros yr haf yn dangos cynnydd tuag at y targed.

Rheoli Risgiau Statws Gwyrdd

Ceir cadarnhad unwaith y bydd risg yn derbyn statws Gwyrdd o fewn Statws Coch Oren Gwyrdd, bydd y statws Gwyrdd yn cael ei adrodd unwaith o fewn cylch adrodd y Gofrestr Risgiau Corfforaethol ac yna'n cael ei ddileu. Y cylch adrodd perthnasol at y diben hwn fydd y Pwyllgor Archwilio a Sicrwydd. Mae hyn oherwydd ei fod yn gylch chwarterol ac mae'r Pwyllgor yn neilltuo mwy o amser i graffu ar y pwnc hwn na'r Bwrdd.

3. MATERION LLYWODRAETHIANT A RISG

Mae rheoli risg drwy'r Gofrestr Risgiau Corfforaethol yn offeryn craidd ar gyfer llywodraethiant risg o fewn AaGIC.

4. GOBLYGIADAU ARIANNOL

Mae rheoli risg drwy'r Gofrestr Risgiau Corfforaethol yn swyddogaeth graidd AaGIC fel Awdurdod Iechyd Arbennig. Ni ddisgwylir unrhyw oblygiadau ychwanegol o ran cost.

5. ARGYMHELLION

Gofynnir i'r Pwyllgor nodi'r nodyn **Sicrwydd** o ran sefyllfa bresennol y Gofrestr Risgiau Corfforaethol sy'n amgaeedig yn Atodiad 1.

Llywodraethiant a Sicrwydd				
Cyswllt ag amcanion corfforaethol ***(✓os gwelwch yn dda)***	Fel sefydliad newydd, sefydlu AaGIC fel partner gwerthfawr y gellir ymddiried ynddo, cyflogwr gwych a brand parchus ac arbenigol	Datblygu gweithlu iechyd a gofal cynaliadwy a hyblyg ar gyfer y dyfodol.	Gyda Gofal Cymdeithasol Cymru yn siapio'r gweithlu i ddarparu gofal yn agosach at adref ac i alinio darpariaeth gwasanaethau yn well.	Gwella ansawdd a diogelwch drwy gefnogi sefydliadau'r GIG i ddod o hyd i atebion cyflymach a mwy cynaliadwy o ran y gweithlu ar gyfer heriau darparu gwasanaeth â blaenoriaeth.
	√			
	Gwella cyfleoedd i ddefnyddio technoleg a digido wrth ddarparu addysg a gofal	Ailfywiogi'r broses o ddatblygu arweinyddiaeth a chynllunio olyniaeth ar draws iechyd a gofal cymdeithasol mewn partneriaeth â Gofal Cymdeithasol Cymru ac Academi Cymru	Dangos gwerth buddsoddi yn y gweithlu a'r sefydliad.	

Ansawdd, Diogelwch a Phrofiad Cleifion
Y Gofrestr Risgiau Corfforaethol yw'r offeryn craidd i sicrhau bod risgiau yn cael eu rheoli'n effeithiol o fewn AaGIC. Mae dull cadarn o reoli risg yn fwy tebygol o effeithio'n ffafriol ar ddiogelwch a phrofiad cleifion a staff.
Goblygiadau Ariannol
Mae rheoli risg yn swyddogaeth graidd AaGIC fel Awdurdod Iechyd Arbennig. Ni ddisgwylir unrhyw oblygiadau ychwanegol o ran cost.
Goblygiadau Cyfreithiol (gan gynnwys asesiad cydraddoldeb ac amrywiaeth)
Ddim yn gymwys

Goblygiadau Staffio	
Mae'r Gofrestr Risgiau Corfforaethol yn swyddogaeth Graidd AaGIC. Nid oes unrhyw oblygiadau staffio ychwanegol.	
Goblygiadau Hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015)	
Y Gofrestr Risgiau Corfforaethol yw offeryn craidd AaGIC i reoli risg wrth symud ymlaen.	
Hanes yr Adroddiad	Cyflwynir y Gofrestr Risgiau i'r Pwyllgor Archwilio a Sicrwydd yn rheolaidd ac fe'i cyflwynir i'r Bwrdd ddwywaith y flwyddyn.
Atodiadau	Dim.

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.

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	
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**		**S**trategy published and in place. Regular bulletins being prepared & distributed. 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.

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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	
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**		**S**ee above. Plus, all execs are now regularly attending peer networks. Opps to support national programmmes 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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	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**	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: 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**	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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	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**	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	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.

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	
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 HEIWs 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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	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	
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	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. 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	**4**	**3**	**12**	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**		We have had sufficient applications so far. Awaiting response from NWSSP and WG re solution to indemnity issue.

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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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	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	
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**	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**	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.

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	
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**	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**		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. NWIS completed and have approved infrastructure design to support Eduroam rollout. 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.
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**	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

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.

Dyddiad y Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**4.5**
Teitl yr Adroddiad	**Ffyrdd o weithio yn y dyfodol – perthynas rhwng y Pwyllgor Comisiynu ac Ansawdd Addysg , y Bwrdd a'r Pwyllgor Archwilio a Sicrwydd**		
Awdur yr Adroddiad	Dafydd Bebb, Ysgrifennydd y Bwrdd		
Noddwr yr Adroddiad	Dafydd Bebb, Ysgrifennydd y Bwrdd		
Cyflwynwyd gan	Ruth Hall, Cadeirydd y Pwyllgor Addysg Comisiynu ac Ansawdd		
Rhyddid Gwybodaeth	Agored		
Pwrpas yr Adroddiad	Egluro ffyrdd o weithio'r dyfodol i'r Pwyllgor Comisiynu ac Ansawdd Addysg (PCAA) mewn perthynas â'i swyddogaeth gyda'r Bwrdd a'r Pwyllgor Archwilio a Sicrwydd (PAS).		
Materion Allweddol	Mae angen eglurhad o ffyrdd PCAA o weithio yn y dyfodol er mwyn sicrhau bod y penderfyniadau'n cael eu gwneud ar y lefel briodol ac er mwyn osgoi gorgyffwrdd neu fylchau yn y strwythur llywodraethu. Mae manylion am y 'Ffyrdd o Weithio yn y Dyfodol' arfaethedig wedi eu nodi ym mharagraff 2.1 o'r papur hwn. Yn amodol ar gymeradwyaeth y Bwrdd, cynigir bod Rheolau Sefydlog (RhS) AaGIC yn cael eu diwygio i gynnwys y dull a nodir yn y Ffyrdd o Weithio yn y Dyfodol. Er y caiff y diwygiadau i'r RhS eu cymeradwyo'n ffurfiol gan y Bwrdd, bydd angen iddynt gael eu hystyried gan y Pwyllgor Archwilio yn gyntaf.		
Manylion Angenrheidiol	**Gwybodaeth**	**Trafodaeth**	**Sicrwydd**	**Cymeradwyaeth**
				✓
Argymhellion	Gofynnwyd i'r Aelodau gymeradwyo'r canlynol: • y Ffyrdd o Weithio yn y Dyfodol (a nodir ym mharagraff 2.1 isod); • bod y PAS yn cael ei gyfarwyddo i ystyried y RhS sydd ynghlwm ac sydd wedi eu diwygio i gynnwys y Ffyrdd o Weithio yn y Dyfodol; • bod y PCAA yn cael ei gyfarwyddo i: ystyried y diwygiadau i'w gylch gorchwyl; ystyried cylch gorchwyl ar gyfer grŵp addysg aml-broffesiwn mewnol ac ar gyfer Grŵp Integredig Allanol i gynghori ar flaenoriaethau addysg a hyfforddiant; • bod y Ffyrdd o Weithio yn y Dyfodol yn cael eu hadolygu mewn 12 mis.			

Ffyrdd o Weithio yn y Dyfodol – y Pwyllgor Addysg Comisiynu ac Ansawdd

1. CYFLWYNIAD

Pwrpas Ffyrdd o Weithio yn y Dyfodol, a nodir ym mharagraff 2.1 isod, yw egluro'r berthynas waith rhwng y Bwrdd, y PCAA, a'r PAS.

Bydd hyn yn sicrhau bod y PCAA yn ymgymryd ag ystod a lefel briodol o waith a bod y mecanweithiau llywodraethu wedi eu diffinio'n glir. Cynigir bod Rheolau Sefydlog AaGIC (Atodiad 1) ynghyd â blaenraglen waith y PCAA yn cael eu diwygio i gynnwys y Ffyrdd o Weithio yn y Dyfodol.

2. CEFNDIR

Cafod Ffyrdd o Weithio yn y Dyfodol y PCAA eu hystyried mewn sesiwn ddatblygu'r Bwrdd (SDDB) ar 1 Gorffennaf a Sesiwn Ddatblygu'r Bwrdd ar 29 Awst. Caiff y Ffyrdd o Weithio yn y Dyfodol eu cofnodi ym mharagraff 2.1 isod.

Nod Ffyrdd o Weithio yn y Dyfodol yw manteisio ar nerth ac arbenigedd llawn y Bwrdd a galluogi ei Bwyllgorau i adolygu materion yn drylwyr a datblygu dealltwriaeth fanwl ymysg ei aelodau.

2.1 Ffyrdd o weithio yn y dyfodol

2.1.1 Y berthynas rhwng y PCAA a'r Bwrdd

Y Bwrdd yn unig sydd yn gwneud penderfyniadau strategol. Caiff y PCAA a'r Bwrdd (drwy'r BDS) wneud argymhellion i'r Bwrdd mewn perthynas â materion strategol cysylltiedig â Chomisiynu Addysg ac Ansawdd Addysg.

Rhaid i'r PCAA geisio sicrwydd ar ran y Bwrdd mewn perthynas â pherfformiad, ansawdd a gwerth contractau addysg (e.e. recriwtio, cadw a boddhad myfyrwyr), asesu hyfforddeion ôl-raddedig ac asesu pa mor dda y maent yn cael eu haddysgu gan Ymddiriedolaethau a Byrddau Iechyd. Rhaid i'r PCAA hefyd geisio sicrwydd mewn perthynas â hyfforddiant Gwella Ansawdd. Bydd y PCAA yn tynnu sylw'r Bwrdd at unrhyw faterion anghyffredin.

Bydd y Bwrdd yn cadw'r rôl o geisio diweddariadau a sicrwydd mewn perthynas â'r broses Ailddilysu.

Rhaid i'r PCAA graffu ar fanyleb dogfennau tendro sy'n ymwneud â Chontractau Addysg a gwneud argymhellion i'r Bwrdd. Y Bwrdd fydd yn cadw'r cyfrifoldeb o gymeradwyo dogfennau'r fanyleb yn derfynol.

Ar hyn o bryd mae cylch gorchwyl y PCAA yn dirprwyo'r cyfrifoldeb o gymeradwyo'r cynlluniau hyfforddi'n derfynol, gan gynnwys buddsoddi a dadfuddsoddi (cyn yr argymhellir bod Llywodraeth Cymru'n ei gymeradwyo) i'r PCAA. Bydd angen diwygio hyn er mwyn i'r PCAA argymell i'r Bwrdd yn unig.

Rhaid i flaenraglen waith y PCAA adlewyrchu'r ffyrdd o weithio yn y dyfodol a bod yn ddarostyngedig i gymeradwyaeth y bwrdd.

2.1.2 Y berthynas rhwng y PCAA a'r PAS

Rhaid i'r PCAA geisio sicrwydd a chraffu ar ran y Bwrdd:

- er mwyn sicrhau'r ansawdd gorau posibl o addysg yn yr adnodd sydd ar gael;
- o ran Risg a chyfeirio sylw'r PAS at faterion perthnasol sy'n peri pryder;
- er mwyn cael gwerth am arian wrth wario ar gontractau hyfforddiant ac addysg.

Rhaid i'r Pwyllgor Archwilio geisio sicrwydd a chraffu ar ran y Bwrdd:

- er mwyn sicrhau bod y PCAA yn dilyn y prosesau cywir er mwyn sicrhau gwerth am arian;
- er mwyn sicrhau bod y broses gontractio a thendro ar gyfer contractau addysg a hyfforddiant wedi'i dilyn;
- ar unrhyw feysydd y tynnodd y PCAA sylw atynt o fewn ei gylch gorchwyl sy'n gofyn am gamau llywodraethu gan y PAS.

Rhaid i'r ddau Bwyllgor weithio'n agos ar feysydd sydd o ddiddordeb i'r ddwy ochr er mwyn sicrhau bod gorgyffwrdd a bylchau'n cael eu hysgogi.

2.1.3 Y berthynas rhwng y PCAA a rhanddeiliaid mewnol ac allanol

Rhaid i'r PCAA sefydlu Grŵp Addysg Amlbroffesiynol mewnol er mwyn sicrhau bod holl weithgareddau addysg AaGIC yn cael ei gydlynu a'i oruchwylio. Bydd yn cynnwys cynrychiolaeth o'r holl gyfarwyddiaethau. Bydd y cylch gorchwyl drafft ar gyfer y Grŵp Mewnol hwn yn cael ei ystyried yn y cyfarfod nesaf o'r PCAA .

Rhaid i'r PCAA wneud pob trefniant priodol er mwyn sefydlu Grŵp Integredig Allanol i gynghori ar flaenoriaethau addysg a hyfforddiant. Caiff y grŵp hwn sefydlu grwpiau gorchwyl a gorffen er mwyn ymgymryd â gwaith penodol ar feysydd lle canfyddir angen. Bydd y cylch gorchwyl drafft ar gyfer y Grŵp allanol hwn yn cael ei ystyried yn y cyfarfod nesaf o'r PCAA.

Y Grŵp Integredig Allanol hwn fydd â'r dasg o adnabod gofynion hyfforddiant addysg y dyfodol, ystyried cynigion y dyfodol a chyfleoedd addysg newydd a fyddai'n cael eu hystyried gan y PCAA cyn eu cyflwyno i'r Bwrdd llawn.

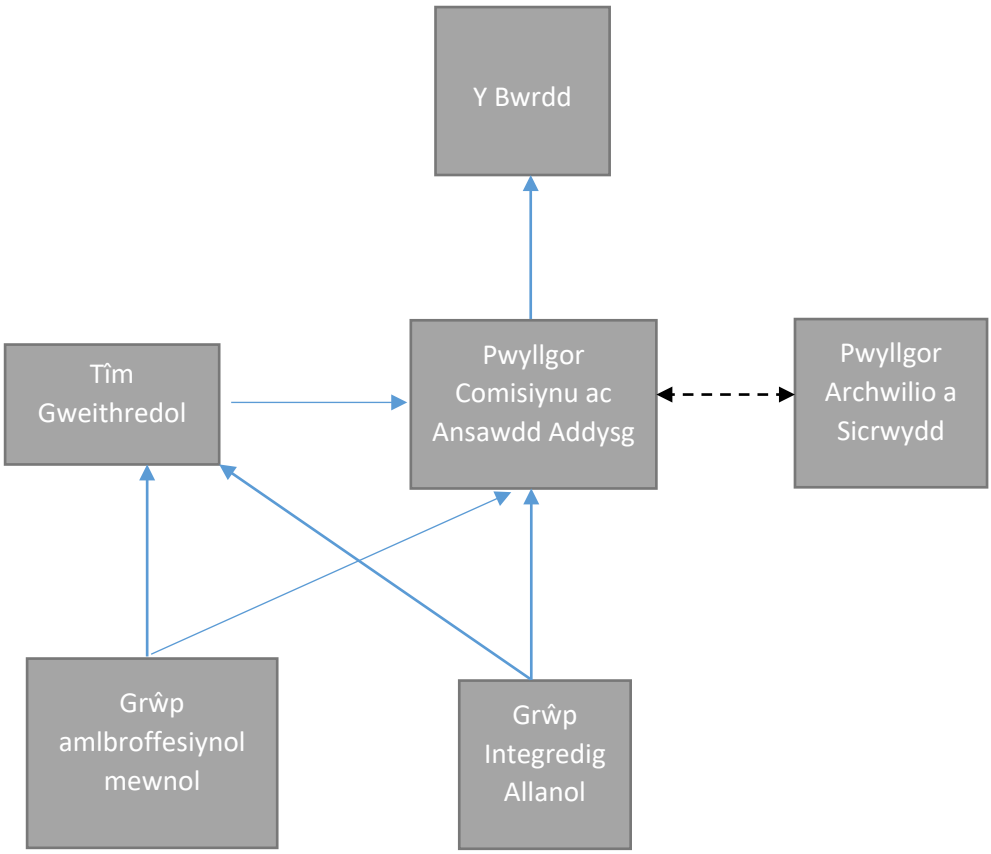
Bydd angen i strategaeth gyfathrebu AaGIC fod yn ystyriol o'r ffordd y bydd yn gwella'r dull gweithredu cyffredinol cysylltiedig â chomisiynu.

2.1.4 Aelodaeth o'r PCAA

O ystyried mai dim ond 2 aelod sydd gan y PCAA, bydd Aelod Annibynnol yn cael ei enwebu i weithredu yn lle aelod absennol o'r Pwyllgor. Bydd eilydd o'r fath pan elwir arno yn aelod llawn o ' r Pwyllgor.

Diagram 1

Dangosir isod y berthynas rhwng y Bwrdd, y PCAA a'r PAS, y Tîm Gweithredol a'r grwpiau mewnol ac allanol:



3. MATERION LLYWODRAETHU A RISG

Bydd egluro'r berthynas waith rhwng y Bwrdd, y PCAA, a'r PAS yn sicrhau bod y PCAA yn ymgymryd ag ystod a lefel briodol o waith. Bydd sicrhau bod mecanweithiau llywodraethu ac atebolrwydd priodol wedi eu diffinio'n glir yn lleihau'r risg o orgyffwrdd a bylchau yn y strwythur llywodraethu.

4. GOBLYGIADAU ARIANNOL

Nid oes unrhyw oblygiadau ariannol uniongyrchol.

5. ARGYMHELLIAD

Gofynnwyd i'r Aelodau gymeradwyo'r canlynol:

- y Ffyrdd o Weithio yn y Dyfodol (a nodir ym mharagraff 2.1 isod);
- bod y PAS yn cael ei gyfarwyddo i ystyried y RhS sydd ynghlwm ac sydd wedi eu diwygio i gynnwys y Ffyrdd o Weithio yn y Dyfodol;
- bod y PCAA yn cael ei gyfarwyddo i:

  ystyried y diwygiadau i'w gylch gorchwyl;
  ystyried cylch gorchwyl ar gyfer grŵp addysg aml-broffesiwn mewnol ac ar gyfer Grŵp Integredig Allanol i gynghori ar flaenoriaethau addysg a hyfforddiant;
- bod y Ffyrdd o Weithio yn y Dyfodol yn cael eu hadolygu mewn 12 mis.

Llywodraethu a Sicrwydd				
Cysylltiad i'r amcan corfforaethol ***(✓os gwelwch yn dda)***	Fel sefydliad newydd yn sefydlu AaGIC fel partner gwerthfawr y gellir ymddiried ynddo, cyflogwr rhagorol a brand parchus ac arbenigol	Meithrin gweithlu iechyd a gofal cynaliadwy a hyblyg ar gyfer y dyfodol.	Gyda Gofal Cymdeithasol Cymru yn siapio'r gweithlu i ddarparu gofal yn agosach at adref ac i alinio darpariaeth gwasanaethau'n well.	Gwella ansawdd a diogelwch drwy gefnogi sefydliadau'r GIG i ddod o hyd i atebion gweithlu cyflymach a mwy cynaliadwy i heriau darparu gwasanaethau blaenoriaeth.
	✓	✓		✓
	Gwella cyfleoedd i ddefnyddio technoleg a digideiddio yng nghyflwyniad addysg a gofal.	Adfywio datblygu arweinyddiaeth a chynllunio olyniaeth ar draws y maes iechyd a gofal cymdeithasol mewn partneriaeth â Gofal Cymdeithasol Cymru ac Academi Cymru	Dangos gwerth buddsoddi yn y gweithle a'r sefydliad.	
	✓		✓	
Ansawdd, Diogelwch a Phrofiad y Claf				
Bydd egluro'r berthynas waith rhwng y Bwrdd, y PCAA, a'r PAS yn lleihau'r risg o orgyffwrdd a bylchau yn y strwythur llywodraethu ac yn cynorthwyo AaGIC i wneud penderfyniadau gwybodus. Mae penderfyniadau gwybodus yn fwy tebygol o effeithio'n ffafriol ar ansawdd, diogelwch a phrofiad cleifion a staff.				
Goblygiadau Ariannol				
Nid oes unrhyw oblygiadau ariannol uniongyrchol.				

Goblygiadau Cyfreithiol (gan gynnwys asesiad cydraddoldeb ac amrywiaeth)	
Nid oes unrhyw oblygiadau cyfreithiol uniongyrchol**.**	
Goblygiadau Staffio	
Nid oes unrhyw oblygiadau staffio uniongyrchol.	
Goblygiadau Tymor Hir (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015)	
Dim yn berthnasol	
Hanes Adroddiad	Dim yn berthnasol
Atodiadau	Atodiad 1 – Rheolau Sylfaenol Drafft AaGIC i gynnwys amlinelliad o'r dull o fewn Ffyrdd o Weithio yn y Dyfodol;

GIG CYMRU NHS WALES | Addysg a Gwella Iechyd Cymru (AaGIC) Health Education and Improvement Wales (HEIW)

Standing Orders

Executive Sponsor & Function:

Board Secretary

Document Author:

Dafydd Bebb

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No impact

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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.

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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 HEIWs 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 HEIWs website and in hard copy or other accessible format on request, in accordance with any legislative requirements, e.g., Data Protection Act 2018, General Data Protection Regulations and HEIW's Communication Strategy and Welsh language requirements.

5.7 Confidentiality

5.7.1 All Board members (including Associate Members), together with members of any Committee or Advisory Group established by or on

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

6. VALUES AND STANDARDS OF BEHAVIOUR

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

6.1 Declaring and recording Board members' interests

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

6.1.2 Board members must also declare any interests held by family members or persons or bodies with which they are connected. The Board Secretary will provide advice to the Chair and the Board on what should be considered as an 'interest', taking account of the regulatory requirements and any further guidance, e.g., the Values and Standards of Behaviour framework. If individual Board members are in any doubt about what may be considered as an interest, they should seek advice from the Board Secretary. However, the onus regarding declaration will reside with the individual Board member.

6.1.3 ***Register of interests –*** The Chief Executive, through the Board Secretary will ensure that a Register of Interests is established and maintained as a formal record of interests declared by all Board members. The register will include details of all Directorships and other relevant and material interests which have been declared by Board members.

6.1.4 The register will be held by the Board Secretary, and will be updated during the year, as appropriate, to record any new interests, or changes to the interests declared by Board members. The Board Secretary will also arrange an annual review of the Register, through which Board members will be

required to confirm the accuracy and completeness of the register relating to their own interests.

6.1.5 In line with the Board's commitment to openness and transparency, the Board Secretary must take reasonable steps to ensure that the citizens served by HEIW are made aware of, and have access to view the HEIW's Register of Interests. This may include publication on the HEIW website.

6.1.6 ***Publication of declared interests in Annual Report –*** Board members' declared directorships of companies or positions in other organisations likely or possibly seeking to do business with the NHS shall be published in HEIW's Annual Report.

6.2 Dealing with Members' interests during Board meetings

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

6.2.2 Where individual Board members identify an interest in relation to any aspect of Board business set out in the Board's meeting agenda, that member must declare an interest at the start of the Board meeting. Board members should seek advice from the Chair, through the Board Secretary before the start of the Board meeting if they are in any doubt as to whether they should declare an interest at the meeting. All declarations of interest made at a meeting must be recorded in the Board minutes.

6.2.3 It is the responsibility of the Chair, on behalf of the Board, to determine the action to be taken in response to a declaration of interest, taking account of any regulatory requirements or directions made by the Welsh Ministers. The range of possible actions may include determination that:

i The declaration is formally noted and recorded, but that the Board member should participate fully in the Board's discussion and decision, including voting. This may be appropriate, for example where the Board is considering matters of strategy relating to a particular aspect of healthcare and an Independent Member is a healthcare professional whose profession may be affected by that strategy determined by the Board;
ii The declaration is formally noted and recorded, and the Board member participates fully in the Board's discussion, but takes no part in the Board's decision;
iii The declaration is formally noted and recorded, and the Board member takes no part in the Board discussion or decision;
iv The declaration is formally noted and recorded, and the Board member is excluded for that part of the meeting when the matter is being discussed. A Board member must be excluded, where that member has a direct or indirect financial interest in a matter being considered

by the Board.

6.2.4 In extreme cases, it may be necessary for the member to reflect on whether their position as a Board member is compatible with an identified conflict of interest.

6.2.5 Where the Chair is the individual declaring an interest, any decision on the action to be taken shall be made by the Vice Chair, on behalf of the Board.

6.2.6 In all cases the decision of the Chair (or the Vice Chair in the case of an interest declared by the Chair) is binding on all Board members. The Chair should take advice from the Board Secretary when determining the action to take in response to declared interests; taking care to ensure their exercise of judgement is consistently applied.

6.2.7 ***Members with pecuniary (financial) interests –*** Where a Board member, or any person they are connected with[1] 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.

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[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 gifts[2] 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:

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- **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

[2] The 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:

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[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.

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 BOARD[1]

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: • 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

			• Schedule of matters reserved to HEIW; • Scheme of delegation to Committees and others; and • Scheme of delegation to Officers. In accordance with any directions set by Welsh Ministers.
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

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

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 HEIWs 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 HEIWs partnership and stakeholder engagement and involvement strategies
30	FULL	STRATEGY & PLANNING	Approve the HEIWs key strategies and programmes related to: • 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

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 OTHERS[3]

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

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	

1. Introduction:

Section 3.1 of the HEIW standing orders provide that "The Board may and, where directed by the Welsh Government must, appoint Committees either to undertake specific functions on the Board's behalf or to provide advice and assurance to the Board in the exercise of its functions. The Board's commitment to openness and transparency in the conduct of all its business extends equally to the work carried out on its behalf by committees".

In line with Section 3.3 of the standing orders, the Board shall as a minimum nominate annually committees which cover the following aspects of Board business:

- Audit & Assurance; and
- Remuneration and Terms of Service.

This document includes content common to all committees and should be read alongside the specific terms of reference and operating arrangements for each committee.

The provisions of Section 5 of the Standing Orders have also been taken into account when developing the committee Terms of Reference. This relates to transparency of meetings, planning board/committee business, setting agenda's etc.

2. Authority:

Each Committee is authorised by the Board to investigate or have investigated any activity within its terms of reference. In doing so, the Committee shall have the right to inspect any books, records or documents of the Authority relevant to the Committee's remit,

ensuring staff confidentiality, as appropriate. It may seek relevant information from any:

- employee (and all employees are directed to co-operate with any reasonable request made by the Committee); and
- any other Committee, sub-committee or group set up by the Board to assist it in the delivery of its functions.

Each Committee is authorised by the Board to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers it necessary, in accordance with the Board's procurement, budgetary and other requirements.

3. Sub-Committees and Groups

Each Committee may, subject to the approval of the Board, establish sub-committees or groups to carry out on its behalf specific aspects of Committee business.

4. Membership and Attendees:

4.1 Secretariat

As determined by the Board Secretary.

4.2 Member Appointments

- The second and third paragraph of this section 4.2 shall not be applicable to the Remuneration and Terms of Service Committee as section 4.1 of the same Committee's Terms of Reference shall take precedence.
- The membership of each Committee shall be determined by the Board, based on the recommendation of the Chair - taking account of the balance of skills and expertise necessary to deliver each Committee's remit and subject to any specific requirements or directions made by the Welsh Government. The Board shall ensure succession planning arrangements are in place.
- Members shall be appointed to hold office for a period of one year

at a time, up to a maximum of their term of office. During this time a member may resign or be removed by the Board. The Board should, as a matter of good practice, review the membership of each Committee every two years in order to ensure each Committee is refreshed on a regular basis whilst maintaining continuity.

- Committee members' terms and conditions of appointment, (including any remuneration and reimbursement) will be in accordance with their terms of appointment to HEIW. Where a member has been co-opted to fulfil a specific function and where they are not Independent Members or employees of HEIW this will be determined by the Board, based upon the recommendation of the Chair and on the basis of advice from the Remuneration and Terms of Service Committee.

4.3 Support to Committee Members

The Board Secretary, on behalf of each Committee Chair, shall:

- Arrange the provision of advice and support to committee members on any aspect relating to the conduct of their role; and

- Ensure the provision of a programme of organisational development for Committee members as part of the overall Organisational Development programme developed by the Deputy Chief Executive.

4.4 Withdrawal of individuals in attendance

Each Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

Members and attendees will also withdraw from the meeting, as appropriate, where there is a conflict of interest or a potential conflict of interest.

5. Relationships and accountabilities with the Board and its

Committees/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
- ensure appropriate escalation arrangements are in place to alert

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.

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

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.

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 Remuneration and Terms of Service Committee ("the Committee") is to provide:

- **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.

The Committee shall have no powers to exercise on behalf of the Board.

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 including taking a forward looking and strategic view.

vi. Seek assurance of the effective performance, monitoring, management and value of education and training programmes and contracts, including the identification and management of related risk.

vii. Monitor compliance of education and training activities with:

a. statutory and regulatory requirements, including equity, equality legislation and Welsh language requirements and;

b. with NHS Wales policy and other relevant policies and HEIW's priorities in relation to equity, equality and diversity, person-centred care and participation, and educational quality.

viii. Monitor HEIW's compliance with delegated responsibilities given to it by health regulators i.e. GMC, GDC and GPhC as delegated to HEIW.

ix. Promote collaboration within HEIW and with external agencies in relation to educational and training governance which shall include wellbeing.

x. To work collaboratively with other HEIW Board standing committees.

xi. Scrutinise the specification of education tender documents.

xii. Recommend the specification of tender documents to

the Board for Education.

xiii. Recommend undertaking research on Education, Quality and Commissioning to the Board.

xiv. Engage with Board Development Sessions with regards to making recommendations on strategic matters relating to Education Commissioning and Education Quality.

xv. Seek assurance in respect of risk areas within its area of responsibility and highlight material areas of concern to the Audit and Assurance Committee.

xvi. Highlight any issues out of the ordinary to the Board.

The Committee will review and agree its forward work programme on an annual basis, and will recommend it to the Board for approval.

4. Membership, Attendees Quorum and Term

4.1.1 Members

A minimum of two members, comprising:

- Chair - Independent Member
- Members - 1 Independent Member in addition to the Chair

The Chair of the organisation shall not be a member of the Committee, but may be invited to attend by the Chair of the Committee as appropriate.

4.1.2 Deputy Independent Member

The Board may appoint a Deputy Independent Member for the Committee. Where a member of the Committee is unable to attend a

Committee meeting, then the nominated Deputy may attend in his or her absence as a member of the Committee. If a Deputy attends a Committee as a member of the Committee then the Deputy shall be included for the calculation of a quorum and may exercise voting rights.

4.2 Attendees

In attendance:

- Director of Nursing
- Medical Director
- Director of Finance and Corporate Services
- Board Secretary
- Head of Education, Commissioning and Quality

In addition to this, others from within or outside the organisation who the Committee considers should attend, will be invited taking account of the matters under consideration at each meeting.

The Chief Executive shall be invited to attend, at least annually, to discuss with the Committee the process for assurance that supports the Annual Governance Statement.

4.3 Quorum

At least **two** members must be present to ensure the quorum of the Committee, one of whom should be the Committee Chair (or Vice Chair where appointed).

4.4 Terms

Immediately following the establishment of HEIW the Members shall be appointed for an initial period of two years. Thereafter Members shall be appointed for a term of one year.

5. Frequency of Meetings

Meetings shall be held no less than quarterly and otherwise as the Chair of the Committee deems necessary – consistent with HEIW's annual plan of Board Business.

6. Relationships and accountabilities with the Board and its Committees/ Groups

The Committee must have an effective relationship with other committees or sub-committees of the Board so that it can understand the system of assurance for the Board as a whole. It is very important that the Committee remains aware of its distinct role and does not seek to perform the role of other committees.

The Committee will maintain effective working relationships with HEIW'S Audit and Assurance Committee (AAC), and with HEIW's other Board committees and subcommittees. To strengthen liaison with the AAC, one Independent Member will serve on both committees.

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

Dyddiad Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**4.6**
Teitl yr Adroddiad	**Polisi'r Gymraeg - Diweddariad**		
Awdur yr Adroddiad	Huw Owen, Rheolwr Gwasanaethau Cymraeg		
Noddwr yr Adroddiad	Dafydd Bebb, Ysgrifennydd y Bwrdd		
Cyflwynwyd gan	Dafydd Bebb, Ysgrifennydd y Bwrdd		
Rhyddid Gwybodaeth	Agored		
Pwrpas yr Adroddiad	Diweddariad am y cynnydd a wnaed wrth weithredu ein Polisi'r Gymraeg ers ei fabwysiadu yng nghyfarfod mis Mai o'r Bwrdd.		
Materion Allweddol	• Gwnaethpwyd cynnydd ar sawl agwedd o'r polis; • Sefyllfa AaGIC o ran dod o dan Safonau'r Gymraeg yn ffurfiol - a pha set fydd yn berthnasol i ni.		
Camau gweithredu penodol ***(un yn unig)***	**Gwybodaeth**	**Trafodaeth**	**Sicrwydd**	**Cymeradwyaeth**
	✓			
Argymhellion	Gofynnir i aelodau nodi'r diweddariad o fewn yr adroddiad er gwybodaeth.			

Polisi’r Iaith Gymraeg

1. CYFLWYNIAD

Pwrpas yr adroddiad hwn yw hysbysu’r Bwrdd ynglŷn â chynnydd ein Polisi Iaith Gymraeg a'u diweddaru ar y sefyllfa bresennol mewn perthynas ag AaGIC sy'n dod o dan Safonau'r Gymraeg yn ffurfiol.

2. CEFNDIR

2.1 Polisi’r Iaith Gymraeg

Rydym wedi gwneud cynnydd sylweddol hyd yn hyn yn erbyn y polisi iaith Gymraeg a gytunwyd yng nghyfarfod Bwrdd mis Mai.

Yn ogystal â threfnu nifer o sesiynau hyfforddi a bwletinau gwybodaeth yn erbyn safonau amrywiol, rydym hefyd wedi;

1. cadarnhau’r niferoedd o feddygon teulu sy' n dymuno ymgymryd â'u proses arfarnu gyda ni drwy gyfrwng y Gymraeg (tua 20% + o ymatebwyr);
2. casglu gwybodaeth fanwl am anghenion hyfforddiant iaith Gymraeg fferyllwyr cymunedol (mae 25% o'r holl fferyllydd cymunedol yng Nghymru wedi gofyn am gymorth i ddysgu Cymraeg);
3. gwneud rhagor o gynnydd yn ein trafodaethau â'r Ganolfan Genedlaethol dysgu Cymraeg wrth ddod o hyd i atebion dysgu cyfunol cynaliadwy;
4. rydym yn disgwyl i tua 20 o staff dderbyn gwersi Gymraeg eleni.

2.2 Safonau’r Gymraeg a Dyddiadau Gosod

Mae Comisiynydd y Gymraeg wedi nodi wrthym fod ystyriaeth yn cael ei roi i AaGIC ddod o dan Reoliadau Safonau 2 (y rhai sy'n gymwys i Gyrff Cenedlaethol).

Bydd AaGIC yn gweithio gyda Llywodraeth Cymru a Chomisiynydd y Gymraeg i sicrhau bod Safonau’r Gymraeg mwyaf priodol yn cael eu gyflwyno i ni fel sefydliad.

3. MATERION LLYWODRAETHIANT A RISG

Gall methu â chydymffurfio ag unrhyw Safon arwain at reolwyr yn treulio amser (sylweddol) yn ateb Ymchwiliad gan Gomisiynydd y Gymraeg, dirwyon ariannol posibl (hyd at £5000 fesul toriad unigol) a niweidio enw da.

4. GOBLYGIADAU ARIANNOL

Gall peidio â chydymffurfio arwain at ddirwyon ariannol. Nid oes unrhyw oblygiadau ariannol uniongyrchol eraill.

5. ARGYMHELLION

Gofynnir i aelodau:

nodi'r diweddariad o fewn yr adroddiad sicrwydd.

Llywodraethiant a Sicrwydd				
Cyswllt ag amcanion corfforaethol ***(✓os gwelwch yn dda)***	Fel sefydliad newydd, sefydlu AaGIC fel partner gwerthfawr y gellir ymddiried ynddo, cyflogwr gwych a brand parchus ac arbenigol	Datblygu gweithlu iechyd a gofal cynaliadwy a hyblyg ar gyfer y dyfodol.	Gyda Gofal Cymdeithasol Cymru yn siapio'r gweithlu i ddarparu gofal yn agosach at adref ac i alinio darpariaeth gwasanaethau yn well.	Gwella ansawdd a diogelwch drwy gefnogi sefydliadau'r GIG i ddod o hyd i atebion cyflymach a mwy cynaliadwy o ran y gweithlu ar gyfer heriau darparu gwasanaeth â blaenoriaeth.
	✔	✓		
	Gwella cyfleoedd i ddefnyddio technoleg a digido wrth ddarparu addysg a gofal.	Ailfywiogi'r broses o ddatblygu arweinyddiaeth a chynllunio olyniaeth ar draws iechyd a gofal cymdeithasol mewn partneriaeth â Gofal Cymdeithasol Cymru ac Academi Cymru	Dangos gwerth buddsoddi yn y gweithlu a'r sefydliad.	
	✓			

Ansawdd, Diogelwch a Phrofiad Cleifion
Mae ansawdd ein gwasanaethau Cymraeg yn adlewyrchu arnom ni fel corff sy'n gweithredu ledled Cymru.
Goblygiadau Ariannol
Nid oes unrhyw oblygiadau ariannol, ac eithrio'r rhai a nodwyd ym mhwyntiau 3 a 4 uchod.
Goblygiadau Cyfreithiol (gan gynnwys asesiad cydraddoldeb ac amrywiaeth)
Mae sicrhau bod gan y sefydliad Bolisi Cymraeg cadarn yn cefnogi'r gweithlu i ddarparu gwasanaeth dwyieithog effeithiol i'r ardaloedd hynny o Gymru lle mae gwneud hynny yn arwain at ganlyniadau clinigol a hyfforddiant gwell, yn ogystal â helpu i ddenu mwy o bobl Cymraeg i swyddi lechyd a Gofal. Mae hefyd yn caniatáu i ni wneud y mwyaf o'r tebygolrwydd o barhau i gydymffurfio â deddfwriaeth y Gymraeg.
Goblygiadau Staffio
Nid oes unrhyw oblygiadau staffio.
Goblygiadau Hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015)
Mae gweithredu'r polisi hwn yn mynd i'r afael yn uniongyrchol â dau o saith nod y Ddeddf Llesiant - Cymru o gymunedau cydlynus a Chymru â diwylliant bywiog lle mae'r Gymraeg yn ffynnu.

Hanes yr Adroddiad	Cymeradwywyd Polisi'r Iaith Gymraeg yng nghyfarfod y Bwrdd ym mis Mai.
Atodiadau	

Dyddiad Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**4.7**
Teitl Adroddiad	**Adroddiad Cadeirydd y Pwyllgor- Archwilio a Sicrwydd**		
Awdur Adroddiad	Kay Barrow, Rheolwr Llywodraethu Corfforaethol		
Noddwr Adroddiad	Dafydd Bebb, Ysgrifennydd y Bwrdd		
Cyflwynywyd gan	Gill Lewis, Cadair		
Rhyddid Gwybodaeth	Agored		
Pwrpas yr Adroddiad	Diben yr adroddiad yw amlinellu trafodaethau a gynhelir gan y Pwyllgor Archwilio a Sicrwydd.		
Materion Allweddol	Mae'r adroddiad hwn yn canolbwyntio ar y materion allweddol a godwyd yng nghyfarfod y Pwyllgor Archwilio a Sicrwydd a gynhaliwyd ar 15 Gorffennaf 2019. Gofynnir i'r Bwrdd nodi'r crynodeb gan y Cadeirydd er mwyn cael sicrwydd.		
Camau penodol ***(Rhowch un ✓yn unig)***	**Gwybodaeth**	**Trafodaeth**	**Sicrwydd**	**Cymeradwyo**
			✓	
Argymhellion	Gofynnir i Aelodau'r Bwrdd nodi'r adroddiad ar gyfer sicrwydd.		

Adroddiad Cadeirydd y Pwyllgor- Archwilio a Sicrwydd

1. CYFLWYNIAD

Diben yr adroddiad yw rhoi'r wybodaeth ddiweddaraf am y materion a ystyriwyd gan y Pwyllgor Archwilio a sicrwydd. Gofynnir i'r Bwrdd nodi'r adroddiad cryno gan y Cadeirydd..

2. CEFNDIR

Bydd y Bwrdd yn ymwybodol bod tri Phwyllgor wedi'u sefydlu o dan Reolau Sefydlog AaGIC. Bydd pob Pwyllgor yn cyflwyno adroddiadau i'r Bwrdd yn ystod y flwyddyn yn amlinellu trafodaethau, materion a risgiau allweddol a drafodwyd yn ystod cyfarfodydd.

3. ADRODDIAD GAN GADEIRYDD Y PWYLLGOR

Gofynnir i'r Bwrdd **dderbyn** a **nodi** crynodeb Cadeirydd y Pwyllgor Archwilio a Sicrwydd o'r cyfarfod a gynhaliwyd ar 15 Gorffennaf 2019.

4. MATERION LLYWODRAETHU A RISG

Caiff unrhyw risgiau a materion llywodraethu eu rheoli drwy gyfarfodydd y Pwyllgor a bydd adroddiadau eithrio yn cael eu darparu i'r Bwrdd gan y Cadeiryddion perthnasol.

5. OBLYGIADAU ARIANNOL

Nid oes unrhyw oblygiadau ariannol i'r Bwrdd eu hystyried/cymeradwyo.

6. ARGYMHELLIAD

Gofynnir i Aelodau'r Bwrdd:

- **NODI** cynnwys yr adroddiad er sicrwydd**.**

Llywodraethu a Sicrwydd				
Cyswllt ag amcanion corfforaethol ***(please ✓)***	Fel sefydliad newydd sy'n sefydlu AaGIC fel partner gwerthfawr y gellir ymddiried ynddo, sy'n gyflogwr rhagorol ac yn frand ag enw da ac arbenigol	Adeiladu gweithlu iechyd a gofal cynaliadwy a hyblyg ar gyfer y dyfodol.	Gyda Gofal Cymdeithasol Cymru yn siapio'r gweithlu i ddarparu gofal yn agosach i'r cartref ac i gysoni darpariaeth y gwasanaeth yn well.	Gwella ansawdd a diogelwch drwy gefnogi sefydliadau'r GIG i ddod o hyd i atebion cyflymach a mwy cynaliadwy i'r gweithlu ar gyfer heriau darparu gwasanaethau â blaenoriaeth.
	✓			
	Gwella cyfleoedd i ddefnyddio technoleg a digidoli wrth ddarparu addysg a gofal.	Adfywio'r broses o ddatblygu arweinyddiaeth a chynllunio ar gyfer olyniaeth ar draws iechyd a gofal cymdeithasol mewn partneriaeth â Gofal Cymdeithasol Cymru ac Academi Cymru	Dangos gwerth o fuddsoddi yn y gweithlu a'r sefydliad.	

Ansawdd, Diogelwch a Phrofiad y Claf
Sicrhau bod y Bwrdd yn cynnal ei fusnes yn briodol drwy ei bwyllgorau ac yn cyd-fynd â'i reolau sefydlog yn ffactor allweddol o ran ansawdd, diogelwch a phrofiad cleifion sy'n derbyn gofal.
Oblygiadau ariannol
Dim goblygiadau ariannol i'r Bwrdd fod yn ymwybodol ohonynt.
Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)
Mae'n hanfodol bod y Bwrdd yn cydymffurfio â'i reolau sefydlog, sydd yn cynnwys derbyn diweddariadau gan ei bwyllgorau.
Goblygiadau Staffio
Dim goblygiadau staffio i'r Bwrdd fod yn ymwybodol ohonynt.
Goblygiadau hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015.)
Mae'r adroddiad yn amlinellu'r gwaith a wnaed gan y Pwyllgor i adolygu perfformiad tymor byr a chyllid AaGIC yn ogystal â chanolbwyntio ar gynaliadwyedd yn y tymor hwy. Nod y strwythur llywodraethu yw nodi materion yn gynnar i atal rhai rhag gwaethygu ac mae'r Pwyllgor yn integreiddio â threfniadau cyffredinol y Bwrdd.

Hanes yr Adroddiad	Bydd yr adroddiad hwn yn eitem sefydlog ar agenda'r Bwrdd.
Atodiadau	Atodiad 1: Crynodeb y Cadeirydd - Pwyllgor Archwilio a sicrwydd.

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 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.

Dyddiad Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**4.8**
Teitl Adroddiad	**Materion a adroddwyd Mewn- Camera**		
Awdur Adroddiad	Kay Barrow, Rheolwr Llywodraethu Corfforaethol		
Noddwr Adroddiad	Dafydd Bebb, Ysgrifennydd y Bwrdd		
Cyflwynywyd gan	Dafydd Bebb, Ysgrifennydd y Bwrdd		
Rhyddid Gwybodaeth	Agored		
Pwrpas yr Adroddiad	Nodi'r prif faterion a drafodwyd yng Nghyfarfod y Bwrdd Mewn-Camera a gynhaliwyd ar 18 Gorffennaf 2019.		
Materion Allweddol	Yn unol â'r Rheolau Sefydlog, mae'n ofynnol i AaGIC gyflwyno adroddiad ar unrhyw benderfyniadau a wneir mewn sesiwn breifat i gyfarfod cyhoeddus nesaf y Bwrdd. Mae'r adroddiad yn nodi'r penderfyniadau a wnaed gan y Bwrdd mewn Camera ar 18 Gorffennaf 2019.		
Camau penodol ***(Rhowch un ✓yn unig)***	**Gwybodaeth**	**Trafodaeth**	**Sicrwydd**	**Cymeradwyo**
	✓			
Argymhellion	Gofynnir i Aelodau: • Nodi'r adroddiad ar gyfer **gwybodaeth**			

PENDERFYNIADAU A WNAED YN YSTOD CYFARFODYDD Y BWRDD MEWN- CAMERA AR 18 GORFFENNAF 2019

1. CYFLWYNIAD

Diben yr adroddiad yw adrodd ar eitemau a ystyriwyd gan gyfarfodydd y Bwrdd yng nghyfarfodydd Mewn-Camera ar 18 Gorffennaf 2019.

2. CEFNDIR

Bydd y Bwrdd yn cynnal cymaint o'i fusnes ffurfiol â phosibl yn gyhoeddus. Efallai y bydd yna amgylchiadau lle na fyddai o fudd i'r cyhoedd drafod mater yn gyhoeddus. Mewn achosion o'r fath, bydd y Cadeirydd (a gynghorir gan Ysgrifennydd y Bwrdd pan fo'n briodol) yn amserlennu'r materion hyn yn briodol ac yn ei gwneud yn ofynnol i unrhyw arsylwr ymneilltuo o'r cyfarfod. Wrth wneud hynny, bydd y Bwrdd yn datrys:

"bod cynrychiolwyr o'r wasg ac aelodau eraill o'r cyhoedd yn cael eu heithrio o weddill y cyfarfod hwn gan ystyried natur gyfrinachol y busnes sydd i'w drafod, gan roi cyhoeddusrwydd a fyddai'n rhagfarnu er budd y cyhoedd"

3. MATERION LLYWODRAETHU A RISG

Trafodwyd yr eitemau canlynol yng nghyfarfod **Mewn-Camera Bwrdd AaGIC ar 18 Gorffennaf 2019:**

- **Adroddiad y Cadeirydd -** Cafodd y Bwrdd ddiweddariad llafar gan y Cadeirydd a chytunwyd ar y camau gweithredu canlynol:
    - o y Prif Weithredwr i roi adborth yn dilyn ei chyfarfod ynghylch materion mamolaeth Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg yn sesiwn datblygu'r Bwrdd ym mis Awst.
    - o Ysgrifennydd y Bwrdd i ddod â phapur i'r Bwrdd mewn ymateb i'r Bil Ansawdd a normaleiddio rôl yr Is-gadeirydd.
    - o y Cadeirydd i drafod cynnydd gyda 'Cymru Iachach', sy'n ymwneud yn benodol â materion gweithlu, gyda'r Gweinidog.

- **Adroddiad y Prif Weithredwr -** Cafodd y Bwrdd ddiweddariad llafar gan y Dirprwy Brif Weithredwr a chytunwyd ar y camau gweithredu canlynol:
    - o aelodau annibynnol i gefnogi'r broses recriwtio ar gyfer y Cyfarwyddwr Cyllid a Gwasanaethau Corfforaethol drwy gylchredeg yr hysbyseb drwy eu rhwydweithiau.
    - o ychwanegu arian at y fwrsariaeth i adennill dyledion i'r gofrestr risg gorfforaethol.
    - o y Cadeirydd i godi sefyllfa'r fwrsariaeth gyda'r Gweinidog

- **Achos Busnes – Recriwtio Rhyngwladol -** Ystyriodd y Bwrdd yr achos busnes a:
    - o cytunwyd y dylai hyd at bedwar aelod o staff AaGIC fynd i'r India a bod y Bwrdd yn derbyn cadarnhad o'r union nifer.
    - o wedi cytuno i ymchwilio i'r potensial i AaGIC ddod yn gorff noddi cymeradwy y GMC ar gyfer graddedigion meddygol rhyngwladol yng Nghymru.
    - o wedi cytuno i archwilio dichonoldeb cael statws un cyflogwr fel y disgrifir yng nghynllun blynyddol AaGIC ac yn ymestyn i gynnwys meddygon IMG hefyd.

o cytuno i ystyried cefnogi trefniadau dwyochrog yn rhyngwladol fel rhan o'r strategaeth recriwtio ryngwladol ehangach
o wedi cytuno i gael gwybod y wybodaeth ddiweddaraf mewn perthynas â'r cynnydd recriwtio BAPIO.

- **Adroddiad Perfformiad –** Ystyriodd y Bwrdd yr adroddiad a:
  o Cytunwyd y dylai'r dangosfwrdd perfformiad 'byw' gael ei gyflwyno i sesiwn datblygu'r Bwrdd ym mis Awst.
  o Cytunwyd Gofynnwyd i'r sgôp ar gyfer newid cylchoedd adrodd ar berfformiad i bob 2 fis a'i gydgysylltu ag adroddiadau'r Bwrdd gael ei ystyried.

- **Adroddiad ar y mater allweddol gan y Pwyllgor Archwilio a sicrwydd yn y Pwyllgor**-Ystyriwyd yr adroddiad materion allweddol ar gyfarfodydd diweddar y Pwyllgor Archwilio a gynhaliwyd ar 29 Mai 2019 a'i nodi i gael sicrwydd.

- **Adroddiad ar fater allweddol gan y Pwyllgor Comisiynu ac Ansawdd Addysg Mewn-Camera** – Cafodd adroddiad ar y materion allweddol a drafodwyd mewn cyfarfod diweddar o'r Pwyllgor Addysg, comisiynu ac ansawdd a gynhaliwyd ar 1 Gorffennaf 2019 ei ystyried a'i nodi er mwyn sicrhau.

- **Y wybodaeth ddiweddaraf am y setliad ar gyfer cyn-aelod o staff** – Nododd y Bwrdd fod y mater bellach wedi'i ddatrys

4. GOBLYGIADAU ARIANNOL

Nid oes unrhyw oblygiadau ariannol wrth nodi'r diweddariad. Fodd bynnag, byddai unrhyw oblygiadau o ran adnoddau wedi'u nodi yn y ceisiadau gwreiddiol am gadarnhad.

5. ARGYMHELLIAD

- Gofynnir i Aelodau **nodi'r** adroddiad er **gwybodaeth**.

Llywodraethu a Sicrwydd				
Cyswllt ag amcanion corfforaethol (✓ ogydd)	Fel sefydliad newydd sy'n sefydlu AaGIC fel partner gwerthfawr y gellir ymddiried ynddo, sy'n gyflogwr rhagorol ac yn frand ag enw da ac arbenigol	Adeiladu gweithlu iechyd a gofal cynaliadwy a hyblyg ar gyfer y dyfodol.	Gyda Gofal Cymdeithasol Cymru yn siapio'r gweithlu i ddarparu gofal yn agosach i'r cartref ac i gysoni darpariaeth y gwasanaeth yn well.	Gwella ansawdd a diogelwch drwy gefnogi sefydliadau'r GIG i ddod o hyd i atebion cyflymach a mwy cynaliadwy i'r gweithlu ar gyfer heriau darparu gwasanaethau â blaenoriaeth.
	✓			
	Gwella cyfleoedd i ddefnyddio technoleg a digidoli wrth ddarparu addysg a gofal.	Adfywio'r broses o ddatblygu arweinyddiaeth a chynllunio ar gyfer olyniaeth ar draws iechyd a gofal cymdeithasol mewn partneriaeth â Gofal Cymdeithasol Cymru ac Academi Cymru	Dangos gwerth o fuddsoddi yn y gweithlu a'r sefydliad.	

Ansawdd, Diogelwch a Phrofiad y Claf	
Mae sicrhau bod y Bwrdd a'i Bwyllgor yn gwneud penderfyniadau cwbl wybodus yn dibynnu ar ansawdd a chywirdeb y wybodaeth a gyflwynir ac a ystyrir gan y rhai sy'n gwneud penderfyniadau. Mae penderfyniadau hyddysg yn fwy tebygol o effeithio'n ffafriol ar ansawdd, diogelwch a phrofiad cleifion a staff.	
Goblygiadau Ariannol	
Nid oes unrhyw oblygiadau ariannol wrth nodi'r diweddariad. Fodd bynnag, byddai unrhyw oblygiadau o ran adnoddau wedi'u nodi yn y ceisiadau gwreiddiol am gadarnhad	
Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)	
Nid oes unrhyw oblygiadau cyfreithiol yn yr adroddiad hwn. Fodd bynnag, bydd effaith benodol, lle y bo'n berthnasol, wedi cael ei hystyried mewn adroddiadau unigol y cyfeirir atynt yn y diweddariad hwn.	
Goblygiadau Staffio	
Nid oes unrhyw oblygiadau uniongyrchol i'r gweithlu yn yr adroddiad hwn. Fodd bynnag, bydd effaith benodol, lle y bo'n berthnasol, wedi cael ei hystyried mewn adroddiadau unigol y cyfeirir atynt yn y diweddariad hwn.	
Goblygiadau hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015.)	
Nid oes unrhyw oblygiadau uniongyrchol i'r Ddeddf. Fodd bynnag, bydd effaith benodol, lle y bo'n berthnasol, wedi cael ei hystyried mewn adroddiadau unigol y cyfeirir atynt yn y diweddariad hwn.	
Hanes yr Adroddiad	Cyflwynir yr Adroddiad hwn i bob Cyfarfod Bwrdd
Atodiadau	Dim

Dyddiad Cyfarfod	**26 Medi 2019**	**Eitem Agenda**	**5.1**
Teitl Adroddiad	**Diweddariad am Amserlenni Dogfennau Llywodraeth Cymru**		
Awdur Adroddiad	Kay Barrow, Rheolwr Llywodraethu Corfforaethol		
Noddwr Adroddiad	Dafydd Bebb, Ysgrifennydd y Bwrdd		
Cyflwynywyd gan	Dafydd Bebb, Ysgrifennydd y Bwrdd		
Rhyddid Gwybodaeth	Agored		
Pwrpas yr Adroddiad	Darparu rhestr i'r Bwrdd o ddogfennau ehangach Llywodraeth Cymru sy'n ymwneud â pholisi.		
Materion Allweddol	Sicrhau bod AaGIC yn cael gwybod am y dogfennau ehangach sy'n gysylltiedig â'r GIG yng Nghymru.		

Camau penodol ***(Rhowch un ✓yn unig)***	**Gwybodaeth**	**Trafodaeth**	**Sicrwydd**	**Cymeradwyo**
			✓	

Argymhellion	Gofynnir i Aelodau: • Nodi cynnwys yr adroddiad.

Diweddariad ar Amserlenni Dogfennau Llywodraeth Cymru

1. CYFLWYNIAD

Mae'r papur hwn yn cyflwyno rhestr o gylchlythyrau Iechyd Cymru a gyhoeddwyd gan Lywodraeth Cymru ar gyfer y Bwrdd, ac mae wedi'i atodi fel Atodiad 1.

2. CEFNDIR

Yn ei gyfarfod a gynhaliwyd ym mis Gorffennaf 2019, trafododd y Bwrdd berthynas AaGIC â GIG Cymru ac, yn arbennig, y rhyngwyneb â Llywodraeth Cymru. Ar ôl trafod, gofynnodd y Bwrdd i Ysgrifennydd y Bwrdd archwilio ffordd effeithiol o rannu amserlen dogfennau ehangach Llywodraeth Cymru sy'n ymwneud â pholisi.

3. MATERION LLYWODRAETHU A RISG

Mae'n hanfodol bod AaGIC yn cael gwybod am ddogfennaeth ehangach sy'n gysylltiedig â'r GIG yng Nghymru er mwyn sicrhau bod blaenoriaethau ac amcanion strategol AaGIC yn gyson â rhai Llywodraeth Cymru.

4. GOBLYGIADAU ARIANNOL

Does dim goblygiadau ariannol uniongyrchol yn codi o'r adroddiad hwn.

5. ARGYMHELLIAD

Gofynnir i Aelodau nodi cynnwys yr adroddiad

Llywodraethu a Sicrwydd				
Cyswllt ag amcanion corfforaethol (✓ ogydd)	Fel sefydliad newydd sy'n sefydlu AaGIC fel partner gwerthfawr y gellir ymddiried ynddo, sy'n gyflogwr rhagorol ac yn frand ag enw da ac arbenigol	Adeiladu gweithlu iechyd a gofal cynaliadwy a hyblyg ar gyfer y dyfodol.	Gyda Gofal Cymdeithasol Cymru yn siapio'r gweithlu i ddarparu gofal yn agosach i'r cartref ac i gysoni darpariaeth y gwasanaeth yn well.	Gwella ansawdd a diogelwch drwy gefnogi sefydliadau'r GIG i ddod o hyd i atebion cyflymach a mwy cynaliadwy i'r gweithlu ar gyfer heriau darparu gwasanaethau â blaenoriaeth.
	✓	✓	✓	✓
	Gwella cyfleoedd i ddefnyddio technoleg a digidoli wrth ddarparu addysg a gofal.	Adfywio'r broses o ddatblygu arweinyddiaeth a chynllunio ar gyfer olyniaeth ar draws iechyd a gofal cymdeithasol mewn partneriaeth â Gofal Cymdeithasol Cymru ac Academi Cymru	Dangos gwerth o fuddsoddi yn y gweithlu a'r sefydliad.	
Ansawdd, Diogelwch a Phrofiad y Claf				
Nid oes unrhyw effaith ar ansawdd, diogelwch na phrofiad y claf				
Goblygiadau Ariannol				
Ni nodwyd unrhyw oblygiadau ariannol				

Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)	
Ni nodwyd unrhyw oblygiadau cyfreithiol	
Goblygiadau Staffio	
Ni nodwyd unrhyw oblygiadau staffio	
Goblygiadau hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015.)	
Ni nodwyd unrhyw draweffaith	
Hanes yr Adroddiad	d/b
Atodiadau	Atodiad 1 – Rhestr o Gylchlythyrau Iechyd Cymru: 1 Chwefror 2019 i 31 Gorffennaf 2019.

WHC/2019/025

CYLCHLYTHYR IECHYD CYMRU

Llywodraeth Cymru
Welsh Government

Dyddiad Cyhoeddi: 07/08/2019

STATWS: *GWYBODAETH*

CATEGORI: *LLYWODRAETHU GWYBODAETH*

Teitl: Rhestr o Gylchlythyrau Iechyd Cymru – 1 Chwefror 2019 hyd 31 Gorffennaf 2019

Dyddiad dod i ben / Adolygu Amherthnasol

I'w weithredu gan:

Angen gweithredu erbyn: Dim

Anfonir gan: David Williams, Tîm Gweithrediadau Adran Iechyd a Gwasanaethau Cymdeithasol, Llywodraeth Cymru

Enw(au) Cyswllt yn Llywodraeth Cymru:
Tîm Gweithrediadau, Yr Adran Iechyd a Gwasanaethau Cymdeithasol, Llywodraeth Cymru
03000 258183
E-bost: HSSGOperationsTeam@llyw.cymru

Annwyl Gyfaill,

1. Gweler ynghlwm â'r neges yma, restr o Gylchlythyrau Iechyd Cymru o 1 Chwefror 2019 hyd 31 Gorffennaf 2019. Cafodd y Cylchlythyrau eu hail-gyflwyno ym mis Medi 2014 i gymryd lle y llythyrau proffesiynol gweinidogol ac iechyd.
2. Mae modd gweld copïau o'r Cylchlythyrau unai ar wefan Llywodraeth Cymru neu ar wefan HOWIS trwy ddilyn y dolenni isod:

Llywodraeth Cymru:

https://gov.wales/health-circulars

HOWIS:

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

David Williams
Tîm Gweithrediadau AIGC

Rhif y Cylchlythyr	Teitl	Cyhoeddwyd gan	Cyhoeddwyd gan Gyfarwyddiaeth	Dyddiad Cyhoeddi
WHC/2019/003	Rhestr o Gylchlythyrau Iechyd Cymru – 1 Awst 2018 hyd 31 Ionawr 2019	David Williams	Tîm Gweithrediad-au IGC	15/02/2019
WHC/2019/004	Dyletswyddau Ariannol Statudol a Gweinyddol Addysg a Gwella Iechyd Cymru	Jackie Salmon	Cyllid	06/03/2019
WHC/2019/005	Cynnal parhad cyflenwad meddyginiaethau pe baem yn gadael yr Undeb Ewropeaidd 'heb gytundeb	Andrew Evans	Gofal Sylfaenol	05/02/2019
WHC/2019/006	Cynllun Archwilio Clinigol Cenedlaethol ac Adolygu Canlyniadau GIG Cymru Rhaglen Dreigl Flynyddol 2019/20	Dr Frank Atherton	Iechyd y Cyhoedd	09/05/2019
WHC/2019/007	Datganiad Ansawdd Blynyddol 2018 / 2019 - Canllawiau	Jan Firby	Is-adran Iechyd y Boblogaeth	13/02/2019
WHC/2019/008	Newidiadau i'r Rhaglen Brechu rhag yr Eryr o 1 Ebrill 2019	Dr Frank Atherton	Iechyd y Cyhoedd	14/02/2019
WHC/2019/009	Aros am Gyhoeddiad			
WHC/2019/010	Aros am Gyhoeddiad			
WHC/2019/011	Rhoi argymhellion yr adolygiad o wasanaethau iechyd rhywiol ar waith – camau gweithredu hyd yn hyn a'r camau nesaf	Dr Frank Atherton	Iechyd y Cyhoedd	06/03/2019
WHC/2019/012	Gweithredu'r Strategaeth Gwaedu Obstetrig i Gymru, sef strategaeth ar gyfer rheoli gwaedlifau ôl-enedigol, mewn gwasanaethau mamolaeth.	Jean White	Nyrsio	09/04/2019
WHC/2019/013	Canllawiau ar gyfer Ffurflenni Monitro Ariannol Misol Byrddau Iechyd Lleol ac Ymddiriedolaethau 2019/20	Alan Brace	Cyllid	12/04/2019
WHC/2019/014	Y Broses Gymrodeddu ar gyfer Dadleuon - Canllawiau ar gyfer Dyledion sy'n Destun Dadl (anfonebau a chytundebau gwasanaeth) yn GIG Cymru - 2019/20 – 2020/21	Alan Brace	Cyllid	12/04/2019
WHC/2019/015	Rhaglen Genedlaethol Imiwneiddio Rhag y Ffliw 2019-2020	Dr Frank Atherton	Iechyd y Cyhoedd	16/04/2019
WHC/2019/016	Etholiadau Senedd Ewrop 23 Mai 2019	Andrew Goodall	Tîm Gweithrediad-au IGC	30/04/2019
WHC/2019/017	Canllawiau ar Fyw gyda Phoen Parhaus yng Nghymru	Dr Frank Atherton	Is-adran Iechyd y Boblogaeth	07/05/2019
WHC/2019/018	Llwybr ar gyfer Cyfathrebu Estynedig ac Amgen	Ruth Crowder	Gofal Sylfaenol a Gwyddor Iechyd	06/06/2019
WHC/2019/019	Nodau Gwella AMR & HCAI Ar Gyfer 2019-20	Dr Frank Atherton	Is-adran Iechyd y Boblogaeth	09/07/2019

WHC/2019/020	Newidiadau i'r rhaglen imiwneiddio yn erbyn y Feirws Papiloma Dynol ar gyfer y flwyddyn ysgol academaidd yn dechrau ym mis Medi 2019	Dr Frank Atherton	Iechyd y Cyhoedd	17/06/2019
WHC/2019/021	Rôl y Gwasanaeth Deintyddol Cymunedol a Gwasanaethau i Bobl sy'n Agored i Niwed	Colette Bridgeman	Gofal Sylfaenol a Gwyddor Iechyd	23/07/2019
WHC/2019/022	Aros am Gyhoeddiad			
WHC/2019/023	Diweddaru Canllawiau ar Gyfer Clirio a Rheoli Gweithwyr Gofal Iechyd sy'n Byw a Feirws a Gludir yn y Gwaed	Dr Frank Atherton	Iechyd y Cyhoedd	25/07/2019
WHC/2019/024	Pertussis – brechiad galwedigaethol i weithwyr gofal iechyd	Dr Frank Atherton	Iechyd y Cyhoedd	30/07/2019