

# Bwrdd (Agored)

Thu 28 January 2021, 10:00 - 12:00

Drwy Zoom/Telegynhadledd



GIG  
CYMRU  
NHS  
WALES

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

## Agenda

10:00 - 10:10  
10 min

### 1. MATERION RHAGARWEINIOL

#### 1.1. Croeso a Chyflwyniadau

*Cyflwynydd: Cadeirydd - Llafar*

#### 1.2. Ymddiheuriadau am Absenoldeb

*Cyflwynydd: Cadeirydd - Llafar*

#### 1.3. Datganiad o Fuddiannau

*Cyflwynydd: Cadeirydd - Llafar*


#### 1.4. Derbyn a chadarnhau cofnodion y Bwrdd a gynhaliwyd ar 26 Tachwedd 2020

*Cyflwynydd: Cadeirydd - Ymlyniad*

 1.4 - Cym - Unconfirmed Minutes (Open) Board\_26 November 2020 V3\_approved by CDVJ (1) cym.pdf (12 pages)

#### 1.5. Log Gweithredu

*Cyflwynydd: Cadeirydd - Ymlyniad*

 1.5 - Cym - November Board Action Log \_2020-11-26 (Open) V1 (1) cym.pdf (2 pages)

#### 1.6. Materion yn Codi

*Cyflwynydd: Cadeirydd - Llafar*

10:10 - 10:30  
20 min


### 2. ADRODDIADAU'R CADEIRYDD A'R PRIF WEITHREDWR

#### 2.1. Adroddiad y Cadeirydd

*Cyflwynydd: Cadeirydd - Ymlyniad*

#### 2.2. Adroddiad y Prif Weithredwr

*Cyflwynydd: Prif Weithredwr - Ymlyniad*

 2.2 - CEO Report Jan 2021 (F)-en-cy-C.docx CYM.pdf (5 pages)

10:30 - 11:25  
55 min

### 3. EITEMAU STRATEGOL

#### 3.1. Cynllun Blynnyddol ar gyfer 2021/22


*Cyflwynydd: Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol - Ymlyniad*

 3.1a - IMTP Annual Planning Progress Update-en-cy-C.docx cym.pdf (5 pages)

 3.1b - Appendix 1 HEIW Annual Plan 2021-2022 Draft v2.pdf (83 pages)

## 3.2. Adroddiad ar Efelychu er gwybodaeth


**Cyflwynydd:** Cyfarwyddwr Nyrsio Dros Dro - Ymlyniad

 3.2a - Simulation Board Paper\_Jan 2021-en-cy-C.docx CYM.pdf (3 pages)

 3.2b - Appendix 1 Simulation Presentation.pdf (18 pages)

## 3.3. Cynllun AaGIC ar gyfer Cyrhaeddiad Gwahaniaethol er gwybodaeth

**Cyflwynydd:** Cyfarwyddwr Meddygol - Ymlyniad

 3.3 - HEIW Plan for Differential Attainment-en-cy-C (1).docx CYM.pdf (5 pages)

## 3.4. Adroddiad ar Addysg Gofal Sylfaenol er gwybodaeth

**Cyflwynydd:** Prif Weithredwr - Ymlyniad

 3.4a - Primary Care Vision paper cover (F)\_en-cy-C.docx CYM.pdf (4 pages)

 3.4b - Appendix 1 - All Wales Framework for Primary Care.pdf (11 pages)


11:25 - 11:55  
30 min

# 4. LLYWODRAETHU, PERFFORMIAD A SICRWYDD

## 4.1. Adroddiad y Cyfarwyddwr Cyllid

**Cyflwynydd:** Cyfarwyddwr Cyllid - Ymlyniad

 4.1a - Finance Board Report\_Jan 2021-en-cy-C.docx cym.pdf (6 pages)

 4.1b - Appendix 1 Board Finance Report\_Jan 2021.pdf (5 pages)

 4.1c - Appendix 2 Month 9 HEIW Monitoring Return Tables - Day 9 V2.pdf (32 pages)

## 4.2. Fframwaith Perfformiad ar gyfer Cymeradwyo

**Cyflwynydd:** Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol - Ymlyniad

 4.2a - Approval of the Performance Framework 28.1.21-en-cy-C.docx CYM.docx cym.pdf (5 pages)

 4.2b - Appendix 1 - v7 HEIW Integrated Performance Framework.pdf (14 pages)

 4.2c - Appendix 2. 021-01-08 Data Glossary for Dashboard KPIs - baseline info.pdf (1 pages)

 4.2d - Appendix 3 - Completed Audit Recommendations .pdf (1 pages)

## 4.3. Blas Risg am Gymeradwyaeth

**Cyflwynydd:** Ysgrifennydd y Bwrdd - Ymlyniad

 4.3a - Risk Appetite Cover Paper - January Board (Final)-en-cy-C.docx CYM.pdf (3 pages)

 4.3b - Appendix 1 - Risk Appetite (F).pdf (5 pages)

## 4.4. Polisi Ymdrin â Chwynion i'w Gymeradwyo

**Cyflwynydd:** Ysgrifennydd y Bwrdd - Ymlyniad


 4.4a - Complaints Handling Policy\_Board Cover Report (F)-en-cy-C.docx CYM.pdf (4 pages)

 4.4b - Appendix 1 - Complaints Handling Policy (F).pdf (15 pages)

## 4.5. Adolygiad o'r Rheolau Sefydlog i'w Gymeradwyo

**Cyflwynydd:** Ysgrifennydd y Bwrdd - Ymlyniad

 4.5a - Review of Standing Orders\_January 2021 (F)-en-cy-C.docx cym.pdf (5 pages)

 4.5b - Appendix 1 DRAFT HEIW Standing Orders V4\_January 2021 V2 (F).pdf (71 pages)

## 4.6. Derbyn adroddiad mater allweddol gan:


#### 4.6.1. Y Pwyllgor Archwilio a Sicrwydd a gynhaliwyd ar 18 Ionawr 2021

*Cyflwynydd: Cadeirydd y Pwyllgor - Ymlyniad*

 4.6 - Chair Key Issue report\_Audit\_Assurance\_Committee\_2021-01-18 (Open) V2-en-cy-C.docx CYM.pdf (7 pages)

#### 4.7. Penderfyniadau'r Pwyllgor ym mis Tachwedd

*Cyflwynydd: Ysgrifennydd y Bwrdd - Ymlyniad*

 4.7 - In Committee Decisions from November Board V1-en-cy-C.docx cym.pdf (3 pages)

11:55 - 11:55  
0 min

### 5. ER GWYBODAETH/NODI

#### 5.1. Derbyn Cofnodion Cymeradwy Fforwm Arweinyddiaeth Gydweithredol GIG Cymrugynhaliwyd ar 29 Gorffennaf 2020

*Cyflwynydd: Cadeirydd - Ymlyniad*

 5.1 - LF-2012-01 - Minutes of CLF 280720 v1 (APPROVED)-en-cy-C.docx cym.pdf (5 pages)

11:55 - 11:55  
0 min

### 6. MATERION ERAILL

#### 6.1. Unrhyw fater brys arall

*Cyflwynydd: Cadeirydd - Llafar*

#### 6.2. Crynodeb o'r camau gweithredu allweddol

*Cyflwynydd: Cadeirydd - Llafar*

#### 6.3. Dyddiadau'r Cyfarfodydd Nesaf:

6.3.1. Sesiwn Datblygu Bwrdd AaGIC i'w chynnal ar 25 Chwefror 2021 i'w chadarnhau naill ai drwy Microsoft Teams/Telegynhadledd neu i'w chynnal yn Nhŷ Dysgu, Nantgarw

6.3.2. Bwrdd AaGIC i'w gynnal ar 25 Mawrth 2021 i'w gadarnhau naill ai drwy Zoom/Telegynhadledd neu i'w gynnal yn Nhŷ Dysgu, Nantgarw

**Cofnodion Drafft Heb eu Cadarnhau o gyfarfod Bwrdd AaGIC  
a gynhaliwyd ar 26 Tachwedd 2020  
drwy Zoom/Telegynadledda, Tŷ Dysgu, Nantgarw**

**Presennol:**

Dr Chris Jones	Cadeirydd
John Hill Tout	Dirprwy Gadeirydd, Aelod Annibynnol
Tina Donnelly	Aelod Annibynnol
Dr Ruth Hall	Aelod Annibynnol
Gill Lewis	Aelod Annibynnol
Yr Athro Ceri Phillips	Aelod Annibynnol
Dr Heidi Phillips	Aelod Annibynnol
Alex Howells	Prif Weithredwr
Dr Tom Lawson	Deon Meddygol Ôl-raddedig/Dirprwy Gyfarwyddwr Meddygol
Angela Parry	Cyfarwyddwr Nyrsio Dros Dro
Julie Rogers	Cyfarwyddwr y Gweithlu a Datblygu Sefydliadol
Eifion Williams	Cyfarwyddwr Cyllid

**Yn bresennol:**

Dafydd Bebb	Ysgrifennydd y Bwrdd
Nicola Johnson	Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol
Liz Hargest	Rheolwr Datblygu Addysg
Emma Samways	Dirprwy Bennaeth Archwilio Mewnol (NWSSP)
Angharad Price	Pennaeth Cyfathrebu
Rob Heritage	Rheolwr TG
Jaci Evans	Rheolwr Cyfieithu'r Iaith Gymraeg
Kay Barrow	Rheolwr Llywodraethu Corfforaethol (Ysgrifenyddiaeth)

RHAN 1	MATERION RHAGARWEINIOL	Cam Gweithredu
2611/1.1	<b>Croeso a Chyflwyniadau</b>	
	Croesawodd y Cadeirydd bawb i'r cyfarfod. Cadarnhawyd bod cworwm yn bresennol. Croesawodd y Cadeirydd Emma Samways (Dirprwy Bennaeth Archwilio Mewnol NWSSP) fel arsyllwr a hefyd Dr Tom Lawson (Deon Meddygol Ôl-raddedig/Dirprwy Gyfarwyddwr Meddygol) a oedd yn mynychu ar ran yr Athro Pushpinder Mangat.	
2611/1.2	<b>Ymddiheuriadau am absenoldeb</b>	
	Derbyniwyd ymddiheuriadau gan yr Athro Pushpinder Mangat.	
2611/1.3	<b>Datganiadau o fuddiant</b>	
	Ni chafwyd unrhyw ddatganiadau o fuddiant.	
2611/1.4	<b>Derbyn a chadarnhau cofnodion y Cyfarfod Cyffredinol Blynyddol (AGM) a gynhaliwyd ar 24 Medi 2020</b>	



<b>Penderfyniad</b>	Cafodd y cofnodion eu <b>derbyn</b> a'u <b>cymeradwyo</b> fel cofnod cywir o'r cyfarfod, yn amodol ar ychwanegu Dr Heidi Phillips fel ymddiheuriad.	<b>DB</b>
<b>2611/1.5</b>	<b>Derbyn a chadarnhau cofnodion cyfarfod y Bwrdd a gynhaliwyd ar 24 Medi 2020</b>	
<b>Penderfyniad</b>	Cafodd y cofnodion eu <b>derbyn</b> a'u <b>cymeradwyo</b> fel cofnod cywir o'r cyfarfod yn amodol ar y diwygiadau canlynol: <ul style="list-style-type: none"> <li>• <b>2409/1.2 Ymddiheuriadau am absenoldeb:</b> Tynnu enw Dr Heidi Phillips a diwygio'r cofnod i ddarllen 'Ni dderbyniwyd unrhyw ymddiheuriadau am absenoldeb'.</li> <li>• <b>2409/1.3 Datganiadau o Fuddiant:</b> Ychwanegu'r eitem benodol ar yr agenda yr oedd y Datganiadau o Fuddiant yn cyfeirio ati er mwyn diwygio dechrau'r cofnod i ddarllen 'Derbyniwyd y Datganiadau o Fuddiant canlynol mewn cysylltiad â Phrifysgolion Cymru ar gyfer eitem 3.1 ar yr agenda, Cymeradwyo'r Fanyleb Contract Addysg - ...'.</li> </ul>	<b>DB</b>
<b>2611/1.6</b>	<b>Cofnod o'r Camau Gweithredu</b>	
<b>Penderfyniad</b>	<b>Derbyniodd</b> y Bwrdd y Cofnod o Gamau Gweithredu a <b>nodwyd</b> y camau a oedd naill ai wedi'u cwblhau neu faterion i'w hystyried ar yr agenda heddiw.	
<b>2611/1.7</b>	<b>Materion yn Codi</b>	
	<b>Ystyriodd</b> y Bwrdd estyniad i'r tymor ar gyfer cynnal cyfarfodydd rhithwir y Bwrdd a'i Bwyllgorau.	
<b>Penderfyniad</b>	<b>Cytunwyd</b> y byddai'r tymor ar gyfer cynnal cyfarfodydd rhithwir y Bwrdd a'i Bwyllgorau yn cael ei ymestyn at ddiwedd mis Mawrth 2021.	<b>DB</b>
<b>PART 2</b>	<b>ADRODDIAD Y CADEIRYDD A'R PRIF WEITHREDWR</b>	
<b>2611/2.1</b>	<b>Adroddiad y Cadeirydd</b>	
	<p><b>Derbyniwyd</b> yr adroddiad gan y Bwrdd.</p> <p>Adlewyrchodd y Cadeirydd ar brysurdeb y sefydliad a'i staff wrth ymateb i heriau parhaus y pandemig COVID-19. Roedd yn falch o weld y ffocws cryf ar y gwaith gyda phartneriaid a rhanddeiliaid er mwyn sicrhau y bydd addysg a hyfforddiant ac yn parhau i gynllunio ar gyfer gweithlu'r GIG yn y dyfodol.</p> <p>Dywedodd y Cadeirydd ei fod wedi mynychu Cynhadledd Cydffederasiwn y GIG ac er ei fod wedi canolbwyntio ar Loegr, pwysleisiwyd partneriaethau a phenderfyniadau cadarn. Codwyd yr effaith economaidd hefyd fel pryder a chafwyd trafodaeth ar yr hyn yr oedd angen i gomisiynwyr addysg a hyfforddiant ei wneud i ganolbwyntio ar eu cynlluniau tymor canolig i'r tymor hir, er mwyn sicrhau parhad cadwyn gyflenwi'r gweithlu.</p> <p>Nododd y Bwrdd yr adlewyrchiadau a dderbyniwyd mewn cysylltiad â'r Gynhadledd Staff Rithwir a gynhaliwyd ar 14 Hydref 2020 gyda chyflwyniadau a fideos yn dangos egni a dyfnder y gwaith sy'n cael ei wneud drwy'r sefydliad cyfan, er gwaethaf y pwysau presennol.</p> <p>Diolchodd y Cadeirydd i staff AaGIC a'u partneriaid am eu cefnogaeth barhaus yn ystod y cyfnod heriol iawn hwn.</p>	

	<p>Gofynnodd i'r rheolwyr fod yn ystyriol o lesiant eu staff yn ogystal â'u llesiant hwy eu hunain.</p> <p>Soniodd y Cadeirydd am ddau o Gamau Gweithredu'r Cadeirydd a gynhaliwyd yn ystod Hydref 2020 mewn cysylltiad â'r materion canlynol:</p> <ul style="list-style-type: none"> <li>• Cynyddu'r awdurdod dirprwyedig o £2 filiwn i £2.5 miliwn ar gyfer y Prif Weithredwr er mwyn cymeradwyo dwy anfoneb ar gyfer mis Medi a mis Hydref 2020. Roedd yr anfonebau yn ymwneud ag ailgodi tâl gan Bartneriaeth Cydwasanaethau GIG Cymru ar gyfer costau cyflogau cyflogwyr arweiniol unigol ar gyfer meddygon teulu dan hyfforddiant (Anfoneb Meddygon Teulu Cyflogwr Arweiniol Unigol) a</li> <li>• Cymeradwyo Cynllun Gweithredol Ch3 a Ch4 i'w gyflwyno i Lywodraeth Cymru. O ystyried yr amserlen ar gyfer cymeradwyo a gyflwynwyd gan Lywodraeth Cymru, ni fu'n bosibl cymeradwyo'r Cynllun Gweithredol yn ffurfiol yng nghyfarfod y Bwrdd cyn ei gyflwyno. Er hynny, roedd y Cynllun Gweithredol wedi'i ddosbarthu ymhlith Aelodau'r Bwrdd i'w ystyried drwy e-bost cyn gweithredu cam gweithredu'r Cadeirydd.</li> </ul>	
<b>Penderfyniad</b>	<p>Fe wnaeth y Bwrdd:</p> <ul style="list-style-type: none"> <li>• <b>Nodi</b> ystod y gwaith a ddisgrifiwyd gan y Cadeirydd;</li> <li>• <b>cadarnhau'r</b> ddau Gam Gweithredu'r Cadeirydd a nodwyd uchod.</li> </ul>	
<b>2611/2.2</b>	<b>Adroddiad y Prif Weithredwr</b>	
	<p><b>Derbyniwyd</b> yr adroddiad gan y Bwrdd.</p> <p>Wrth gyflwyno'r adroddiad, pwysleisiodd Alex Howells bod y ffocws wedi bod ar gynnal nodau ac amcanion strategol y sefydliad. Gwnaed hyn er gwaethaf yr angen i addasu'n rheolaidd mewn ymateb i'r heriau a wynebwyd o ganlyniad i'r pandemig COVID-19.</p> <p>Ailadroddodd eiriau'r Cadeirydd bod yn rhaid i AaGIC ystyried llesiant y gweithlu, yn arbennig wrth ystyried y gwaith ychwanegol y mae Llywodraeth Cymru wedi gofyn i AaGIC ei wneud ond hefyd o ganlyniad i'r model gweithio o bell sy'n weithredol yn awr.</p> <p>Llongyfarchodd Alex Howells y staff am y llwyddiannau, er gwaethaf yr anawsterau o ganlyniad i'r pandemig COVID-19.</p> <p>Mae'r Adolygiadau Gwasanaeth Canol Blwyddyn wedi'u cwblhau a bydd y themâu allweddol sy'n dod i'r amlwg yn cael eu cyflwyno yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr.</p> <p>Dywedwyd y byddai AaGIC yn parhau i weithio gyda staff ar hyd a lled Cymru i gefnogi'r ymateb i'r argyfwng presennol. Roedd Cyfarwyddwr y Gweithlu a Datblygu Sefydliadol yn cefnogi ac yn Cyd-gadeirio Cell Gweithlu Llywodraeth Cymru, a oedd yn cynnwys gwaith ar fodel Brechiad COVID ar gyfer y gweithlu.</p>	

	<p>Cyfeiriodd Julie Rogers at y gwaith da sy'n cael ei wneud ar gymorth llesiant, yn fewnol ac allanol. Dywedodd bod Arolwg Staff GIG Cymru wedi dod i ben ar 25 Tachwedd 2020 ac y byddai'r dadansoddiad yn cael ei gyflwyno yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr. Dywedodd mai 61% oedd cyfradd ymateb AaGIC i arolwg GIG Cymru, sy'n ganlyniad cadarnhaol iawn ac yn glod i'r staff a oedd wedi cyfranogi yn hyn.</p> <p>Esboniwyd y byddai staff presennol y GIG yn cael eu defnyddio i ddarparu rhaglen frechu COVID-19 er y byddai hyn yn cael ei gefnogi gan wirfoddolwyr amrywiol, gweithwyr sydd wedi ymddeol a rhai sydd wedi dychwelyd, cofrestreion dan oruchwyliaeth , WCVA ac Ambiwlans Sant Ioan.</p>	
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DRAFT

<b>Penderfyniad</b>	<p>Fe wnaeth y Bwrdd:</p> <ul style="list-style-type: none"> <li>• <b>nodi</b> adroddiad y Prif Weithredwr</li> <li>• <b>nodi</b> y byddai'r adborth o'r Adolygiadau Gwasanaeth Canol Blwyddyn yn cael ei gyflwyno yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr</li> <li>• <b>nodi</b> y byddai'r adborth o Arolwg Staff GIG Cymru yn cael ei gyflwyno yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr.</li> </ul>	<p><b>AH</b></p> <p><b>JR</b></p>
<b>RHAN 3</b>	<b>MATERION STRATEGOL</b>	
	Ymunodd Liz Hargest â'r cyfarfod.	
<b>2611/3.1</b>	<b>Dysgu Seiliedig ar Waith a Phrentisiaethau</b>	
	<p>Croesawodd y Cadeirydd Liz Hargest i'r cyfarfod.</p> <p>Cyflwynodd Liz Hargest drosolwg i'r Bwrdd o'r gwaith sy'n cael ei wneud ar gyfer Dysgu Seiliedig ar Waith a Phrentisiaethau. Roedd y cyflwyniad yn canolbwyntio ar ddatblygu, cyflenwi ac asesu dysgu seiliedig ar waith er mwyn cefnogi cyflawniad Amcan Strategol IMTP: Gwneud y gorau o gyfleoedd dysgu seiliedig ar waith a phrentisiaethau ym maes iechyd. Dywedodd bod AaGIC yn gweithio i allu cael mynediad at gyllid ar gyfer prentisiaethau yn uniongyrchol gan Llywodraeth Cymru ar ran y GIG, yn hytrach na thrwy drydydd parti, sy'n digwydd yn awr gyda'r model presennol.</p> <p>Pwysleisiwyd budd prentisiaethau i fusnesau, yr economi ac i unigolion, ac esboniwyd yr enghraifft o'r gwaith sy'n cael ei wneud gyda Pendine Park, y Darparwr Cartrefi Gofal. Mae cynhyrchu Polisi Prentisiaethau AaGIC a'i Gynllun Gweithredu pum mlynedd yn atgyfnerthu nod Llywodraeth Cymru i ddarparu mwy o swyddi a swyddi gwell drwy economi sy'n gryfach a thecach. Mae rhaglenni dysgu seiliedig ar waith gyda sicrwydd ansawdd yn allweddol ar gyfer rhoi'r wybodaeth a'r sgiliau sydd eu hangen i staff y GIG ymgymryd â'u rolau.</p> <p>O fis Ebrill 2021, byddai angen i GIG Cymru ystyried sut y gallai ei benderfyniadau helpu i leihau'r anghydraddoldeb sy'n gysylltiedig ag anfanteision economaidd-gymdeithasol wrth wneud penderfyniadau strategol, er enghraifft penderfynu ar flaenoriaethu a phennu amcanion. Byddai darparu dysgu seiliedig ar waith a phrentisiaethau o ansawdd uchel yn sicrhau bod cyfle cyfartal i bawb a oedd yn dymuno gweithio yn GIG Cymru.</p> <p>Trafododd y Bwrdd y cyflwyniad, ac roedd yn falch bod AaGIC yn arwain gwaith mor bwysig, yn arbennig mewn cysylltiad â safoni dulliau gweithredu, asesiad cadarn o gymhwysedd a sicrhau ansawdd dysgu seiliedig ar waith ar draws GIG Cymru.</p> <p>Yn nhermau datblygu'r fframwaith sicrhau ansawdd a phrosesau llywodraethu, pwysleisiwyd y byddai angen i'r gwaith hwn gysylltu â'r Grŵp Ansawdd ac Addysg Amlbroffesiwn, yn arbennig o ran atebolrwydd. Awgrymwyd y dylai'r Pwyllgor Addysg, Comisiynu ac</p>	

	<p>Ansawdd adolygu'r fframwaith pan fyddai'r manylion wedi'u cadarnhau mewn mwy o fanylder.</p> <p>Esboniwyd y byddai angen cynnwys staff ar bob lefel yn y dull dysgu seiliedig ar waith ac, wrth iddo ddatblygu, byddai angen cydlynu'r gwaith ar academiâu clinigol, efelychu a'r arbenigeddau â niferoedd isel, er enghraifft y gwyddorau iechyd.</p> <p>Roedd y Bwrdd yn cydnabod y cyflawniadau hyd yma a'r amcan strategol, a diolchwyd i Liz Hargest am ei chyflwyniad.</p>	
<b>Penderfyniad</b>	<b>Nodwyd</b> yr adroddiad a'r cyflwyniad gan y Bwrdd.	
	Gadawodd Liz Hargest y cyfarfod.	
<b>2611/3.2</b>	<b>Diweddariad ar Ddatblygiad y Cynllun Blynyddol ar gyfer 2021/22</b>	
	<p><b>Derbyniwyd</b> yr adroddiad gan y Bwrdd.</p> <p>Diolchodd Nicola Johnson i'r Bwrdd am gefnogi cyflwyniad Cynllun Gweithredol Ch3 a Ch4 i Lywodraeth Cymru ar fyr rybudd.</p> <p>Wrth gyflwyno'r adroddiad, pwysleisiwyd bod Llywodraeth Cymru, o ganlyniad i'r pandemig COVID-19, wedi gofyn i sefydliadau'r GIG gynhyrchu Cynllun Blynyddol ar gyfer 2021/22. Er eu bod yn aros i dderbyn Fframwaith Cynllunio GIG Cymru ar gyfer 2021/22 gan Lywodraeth Cymru, roedd y Tîm Gweithredol wedi cytuno ar ddull gweithredu i gynhyrchu Cynllun Blynyddol ar gyfer 2021/22 ac i'w gyflwyno mewn cyd-destun tair blynedd, yn seiliedig ar y diweddariad o IMTP 2020-23. Roedd y dull gweithredu'n cynnwys nodi cerrig milltir a gweithgareddau chwarterol mewn ymateb i bandemig COVID-19, sy'n parhau.</p> <p>Er cysondeb, cynigiwyd y dylai AaGIC gadw'r chwe Nod Strategol a oedd yn ffurfio craidd y Cynllun Tymor Canolig Integredig (IMTP). Byddai hyn yn sicrhau y gellir parhau i olrhain a monitro flwyddyn ar ôl blwyddyn fodd bynnag, byddai'r amcanion allweddol, y pethau y gellir eu cyflawni a'r canlyniadau ar gyfer blynyddoedd 2 a 3 yn cael eu hadolygu a'u diweddarau i gynnwys yr hyn a ddysgwyd gan COVID-19, yn arbennig mewn cysylltiad â'r ffactorau newydd ac allweddol sydd wedi datblygu sydd wedi newydd y macro-amgylchedd.</p> <p>Esboniwyd bod Nodau Strategol AaGIC wedi'u diweddarau wrth ddatblygu'r IMTP ar gyfer 2020-23 ac, fel rhan o adolygiad y Tîm Gweithredol, ystyriwyd bod y Nodau Strategol yn addas i'r diben. Byddai'r gwaith o adolygu'r Amcanion Strategol yn parhau gyda Grŵp Integreiddio IMTP mewnol yn cael ei sefydlu a'r ymgysylltiad allanol parhaus gyda rhanddeiliaid a phartneriaid.</p> <p>Byddai rhwymedigaethau AaGIC o ran Deddf Llesiant a Chenedlaethau'r Dyfodol a'r Ddyletswydd Economaidd-Gymdeithasol yn cael eu hystyried hefyd ac y gwneir y gorau ohonynt fel rhan o'r broses gynllunio yng nghyd-destun cyfrifoldebau comisiynu AaGIC.</p>	

<b>Penderfyniad</b>	<p>Fe wnaeth y Bwrdd:</p> <ul style="list-style-type: none"> <li>• <b>nodi'r</b> dull o ddatblygu Cynllun Blynyddol mewn cyd-destun blynyddol ar gyfer 2021-24 a'r cynnydd hyd yma;</li> <li>• <b>cymeradwyo'r</b> bwriad i gynnal Nodau Strategol presennol y sefydliad fel sail ar gyfer y Cynllun Blynyddol.</li> </ul>	
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<b>2611/4</b>	<b>LLYWODRAETHU, PERFFORMIAD A SICRWYDD</b>	
<b>2611/4.1</b>	<b>Adroddiad y Cyfarwyddwr Cyllid</b>	
	<p><b>Derbyniwyd</b> yr adroddiad gan y Bwrdd.</p> <p>Wrth gyflwyno'r adroddiad, rhoddodd Eifion Williams ddiweddariad ar y sefyllfa ariannol ar ôl 7 mis ar gyfer 2020/2021 sef tanwariant o £927,000 hyd yma yn y flwyddyn. Roedd hyn yn ostyngiad o £970,000 yn y sefyllfa tanwariant, o gymharu â'r mis blaenorol.</p> <p>Roedd Adroddiad at Wraidd y Mater wedi'i gynnal o'r rhagolygon ariannol a'r tanwariant ac roedd hyn wedi pwysleisio tanwariant sylweddol o £7.5 miliwn ar ddiwedd y flwyddyn. Esboniwyd y rhesymau dros y rhagolwg hwn a'r cynnig i ddychwelyd £5 miliwn i Lywodraeth Cymru. Nodwyd bod y sefyllfa 7 mis wedi arwain at ddychwelyd y £5 miliwn, a oedd y tu hwnt i'r cyllidebau dirprwyedig, ac a oedd yn adlewyrchu'r tanwariant is o gymharu â mis 6. Byddai AaGIC yn cadw'r £2.5 miliwn dros ben am y tro a byddai'r rhagolwg diwedd y flwyddyn yn cael ei adolygu eto yn ystod Ch4.</p> <p>Esboniwyd bod Llywodraeth Cymru wedi cael gwybod am y tanwariant a'r sefyllfa o ran y rhagolygon. Roedd Dr Andrew Goodall wedi cael ei friffio hefyd gan Alex Howells ac roedd yn hapus gyda'r dull gweithredu.</p> <p>Er bod AaGIC yn nodi tanwariant, nodwyd bod yr Adroddiad ar Berfformiad a oedd wedi'i gynnwys gyda phapurau'r Bwrdd yn dangos bod AaGIC yn perfformio'n dda ac yn cyflenwi yn erbyn ei amcanion a'i dargedau.</p> <p>Esboniwyd bod y pandemig COVID-19 yn parhau i effeithio ar gyllidebau cyflogau a chyllidebau nad ydynt yn rhai cyflogau a chadarnhawyd bod y tanwariant yn y cyllidebau cyflogau yn adlewyrchu swyddi gwag ar draws sefydliadau staffio AaGIC. Cafwyd tanwariant yn y cyllidebau nad ydynt yn rhai cyflogau o ganlyniad i lai o ddigwyddiadau a chynadleddau, a chostau teithio a chynhaliaeth oherwydd cyfyngiadau symud COVID-19.</p> <p>Roedd y Bwrdd wedi'i friffio ynglŷn â'r rhagdybiaethau a wnaed mewn cysylltiad â chyllid comisiynu ac, yn arbennig, cyfraddau gadael a'r dull ceidwadol o lunio'r rhagolygon ariannol. Esboniwyd bod y dull hwn yn sicrhau cyllid digonol i AaGIC gyflenwi yn erbyn cyfradd adael isel pe byddai lefelau sy'n agos at recriwtio llawn ym mhob rhaglen addysg a hyfforddiant.</p>	

	<p>Cadarnhawyd y byddai eitemau i'w prynu yn erbyn y gyllideb gyfalaf fodd bynnag, nid oedd angen y dyraniad cyfalaf a oedd wedi'i drosglwyddo o'r flwyddyn flaenorol ar gyfer Fferylliaeth mwyach at y diben a fwriadwyd. Roedd cydweithwyr Fferylliaeth yn cynnal trafodaethau gyda'u cydweithwyr yn Llywodraeth Cymru ar gyfer defnyddio'r cyllid hwn at ddiben fferyllol penodol, fel arall byddai'r arian yn cael ei ddychwelyd i Lywodraeth Cymru.</p> <p>Ni chodwyd unrhyw faterion ynglŷn â sefyllfa'r Fantolen a chadarnhawyd mai'r sefyllfa gronnus ar gyfer Polisi Taliadau'r Sector Cyhoeddus oedd 93.55%. Rhagwelwyd y byddai gwelliant pellach yn cael ei wneud i gyflawni'r targed 95% yn y misoedd nesaf, er mwyn sicrhau cydymffurfiaeth erbyn diwedd y flwyddyn ariannol.</p> <p>Bu i'r Bwrdd ystyried yr adroddiad, y cynnig i ddychwelyd £5 miliwn i Lywodraeth Cymru a'r dull gweithredu o ran y rhagolygon ar gyfer diwedd y flwyddyn.</p> <p>Mynegwyd pryder ynglŷn â dychwelyd cyllid i Lywodraeth Cymru ac a fyddai hyn yn effeithio ar benderfyniadau dyfarnu cyllid Llywodraeth Cymru yn y dyfodol. Esboniwyd y byddai'r dull comisiynu cyllid, mewn amgylchiadau arferol, yn ystyried y cyfraddau gadael a gyfrifwyd dros y blynyddoedd blaenorol. Fodd bynnag, roedd natur anrhagweladwy COVID-19 a'r cynnydd twf a ragwelwyd flwyddyn ar ôl blwyddyn, yn gwarantu'r dull gweithredu ceidwadol. Byddai hyn yn diogelu'r gyllideb gomisiynu nes y byddai data cymharol yn golygu y byddai'r broses ragweld yn fwy cadarn.</p> <p>Esboniwyd bod gan y Gwasanaeth Addysg y Gweithlu blaenorol gyfraddau gadael cymharol gyson ac awgrymwyd y gallai'r Pwyllgor Addysg, Comisiynu ac Ansawdd gynnal adroddiad at wraidd y mater o'r cyfraddau gadael.</p>	
<b>Penderfyniad</b>	<p>Fe wnaeth y Bwrdd:</p> <ul style="list-style-type: none"> <li>• <b>nodi'r</b> sefyllfa 7 mis a'r rhesymau dros yr amrywiadau allweddol gan y Gyfarwyddiaeth;</li> <li>• <b>nodi'r</b> sefyllfa o ran y gyllideb cyfalaf a gwariant;</li> <li>• <b>nodi</b> sefyllfa'r fantolen;</li> <li>• <b>nodi'r</b> perfformiad yn erbyn polisi taliad y sector cyhoeddus;</li> <li>• <b>cymeradwyo'r</b> cynnig i ddychwelyd £5 miliwn o adnoddau i Lywodraeth Cymru fel rhan o'r camau gweithredu i fod mewn balans ar ddiwedd y flwyddyn.</li> </ul>	
<b>2611/4.2</b>	<b>Adroddiad ar Berfformiad</b>	
	<p><b>Derbyniwyd</b> yr adroddiad gan y Bwrdd.</p> <p>Wrth gyflwyno'r adroddiad, esboniodd Nicola Johnson, ar ôl ail-bennu'r amcanion strategol ar gyfer Cynllun Chwarter 3 a 4, bod yr amcanion yn cael eu monitro. Roedd y perfformiad cyffredinol yn dda ar draws y mwyafrif o feysydd busnes ac roedd pob un o'r amcanion ar y trywydd cywir i gael eu cwblhau o fewn amserlenni</p>	

	<p>cysylltiedig neu, os nad oeddent ar y trywydd cywir, byddent yn cael eu hadfer. Nid oedd unrhyw amcanion â sgôr Coch (oddi ar y trywydd cywir ac yn galw am fesurau lliniaru). Roedd cynnydd sylweddol wedi'i wneud mewn nifer o feysydd, er enghraifft Hyfforddiant Meddygon Teulu a Fferylliaeth Cyn-cofrestru fodd bynnag, roedd Apeliadau Bwrsariaethau wedi'u huwchgyfeirio i Gymorth wedi'i Dargedu. Nid oedd unrhyw bryderon sylweddol eraill i'w hadrodd ynglŷn â pherfformiad i'r Bwrdd ar yr adeg hon.</p> <p>Roedd gwaith yn mynd rhagddo i gwblhau'r Fframwaith Perfformiad trosfwaol i gefnogi'r dull adrodd ar berfformiad yn unol â gofynion archwilio a fyddai'n cynnwys symud i arfer adrodd chwarterol. Byddai'r Fframwaith yn cael ei gyflwyno i'r Bwrdd ei drafod yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr.</p> <p>Pwysleisiwyd bod yr adroddiad yn cynnwys y cyflwyniad blynyddol cyntaf o'r Adolygiad Blynyddol o Ddilyniant Cymhwysedd (ARCP) ac yn y dyfodol byddai'n cael ei gyflwyno i'r Bwrdd ar sail flynyddol er mwyn alinio gyda ffurflen y Cyngor Meddygol Cyffredinol.</p> <p>Bu i'r Bwrdd gydnabod bod AaGIC wedi ennill Gwobr Technolegau Dysgu ar gyfer 2020. Roedd Tîm Arweinyddiaeth AaGIC wedi ennill y wobr aur am y 'Trawsnewidiad digidol gorau o raglen hyfforddi yn y DU mewn ymateb i COVID-19'. Roedd y wobr yn adlewyrchu sut roedd AaGIC wedi defnyddio technoleg i ddarparu deunyddiau dysgu cyflym, ymatebol ac o bell i gefnogi gweithlu GIG Cymru yn ystod y pandemig COVID-19. Elfen ganolog o'r wobr hon oedd datblygu Gwella – porthol arweinyddiaeth ddigidol a lansiwyd ym mis Awst 2020.</p> <p>Roedd y Bwrdd yn falch o weld tystiolaeth gynhwysfawr ac ymrwymiad yn erbyn y dangosyddion perfformiad allweddol. Yn benodol, y defnydd cynyddol o'r gwasanaeth cyfieithu Cymraeg a'r cynnydd yn nifer y geiriau a oedd yn cael eu cyfieithu. Roedd hyn yn ddangosydd cryf bod Polisi'r Gymraeg yn cael ei ymgorffori'n fewnol o fewn AaGIC.</p>	
<b>Penderfyniad</b>	<p>Fe wnaeth y Bwrdd:</p> <ul style="list-style-type: none"> <li>• <b>nodi'r</b> diweddariad i'r Adroddiad ar Berfformiad;</li> <li>• <b>nodi</b> bod y Fframwaith Perfformiad yn cael ei gyflwyno yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr.</li> </ul>	<b>NJ</b>
<b>26/11/4.3</b>	<b>Adroddiadau Materion Allweddol gan y:</b>	
<b>2611/4.3.1</b>	<b>Pwyllgor Addysg, Comisiynu ac Ansawdd a gynhaliwyd ar 8 Hydref 2020</b>	
	<p><b>Derbyniwyd</b> yr adroddiad gan y Bwrdd.</p> <p>Wrth gyflwyno'r adroddiad, cadarnhaodd Ruth Hall fod y Pwyllgor wedi cwrdd yn rhithwir a darparodd drosolwg byr o'r eitemau a ystyriwyd gan y Pwyllgor yn y cyfarfod a gynhaliwyd ar 9 Hydref 2020. Esboniodd bod y cyfarfod wedi canolbwyntio'n bennaf ar reoli ansawdd a'u bod wedi adlewyrchu ar ganlyniadau anfwriadol COVID-19, yn arbennig ar hyfforddeion llawfeddygol. Roedd Protocol 'wyneb yn wyneb' gydag lechyd Cyhoeddus Cymru ar fin</p>	



	<p>cael ei gwblhau ac roedd y Tîm Efelychu yn llunio adroddiad er mwyn mynd i'r afael â'r diffyg cymwyseddau wyneb yn wyneb a datblygu Canllawiau. Roedd yr egwyddorion cymhwysedd hyn yn cael eu cyflwyno hefyd yn y Deoniaethau Deintyddol a Fferyllol er mwyn mynd i'r afael ag effaith COVID-19 am resymau tebyg.</p> <p>Roedd y Pwyllgor yn falch o dderbyn sicrwydd 'rhesymol' ar gyfer yr Archwiliad Mewnol o'r gwaith Monitro Comisiynu Meddygol ac roedd wedi ystyried canlyniadau'r Gwerthusiad o Effeithiolrwydd y Pwyllgor, a oedd wedi'i atodi fel atodiad i'r adroddiad.</p> <p>Croesawodd y Pwyllgor y ffaith y byddai Cylch Gorchwyl y Pwyllgor yn cael ei atgyfnerthu gyda phenodiad Aelod Annibynnol ychwanegol, yn ogystal â'r ffaith y byddai'r tri Deon yn aelodau 'yn bresennol' rheolaidd.</p> <p>Roedd y Pwyllgor wedi derbyn cyflwyniad cadarnhaol iawn gan aelodau o Rwydwaith Trawma De Cymru (SWTN), a oedd wedi croesawu efelychu gyda'i ddysgu clinigol rhithwir fel rhan o'u rhaglen addysg a hyfforddiant. Nodwyd bod SWTN wedi gosod nifer o ofynion ar AaGIC ac roedd y rhain yn cael eu harchwilio.</p> <p>Roedd Ruth Hall yn falch o ddatgan bod Llywodraeth Cymru wedi cymeradwyo manyleb y Contract Gweithwyr Iechyd Proffesiynol a'i fod wedi symud ymlaen i'r cam tendro.</p>	
<b>Penderfyniad</b>	<b>Nodwyd</b> yr adroddiad gan y Bwrdd at ddibenion sicrwydd.	
<b>2611/4.3.2</b>	<b>Cyfarfod y Pwyllgor Archwilio a Sicrwydd a gynhaliwyd ar 20 Hydref 2020</b>	
	<p><b>Derbyniwyd</b> yr adroddiad gan y Bwrdd.</p> <p>Wrth gyflwyno'r adroddiad, dywedodd Gill Lewis bod y Pwyllgor yn ystyried ystod eang o adroddiadau a rhoddodd drosolwg byr o'r eitemau a oedd wedi'u hystyried. Pwysleisiodd bod cynnydd sylweddol yn cael ei wneud o ran Llywodraethu Gwybodaeth a Seiberddiogelwch. Roedd y Pwyllgor yn wyladwrs o ran cydymffurfio â phrosesau Caffael ac roedd yn disgwyl derbyn adroddiad Panel Annibynnol Caffael a Phrosesau AaGIC yn ei gyfarfod nesaf.</p> <p>Roedd y Pwyllgor wedi ystyried y Polisi Cwynion drafft ac wedi gwneud nifer o awgrymiadau i'w hystyried gan y Tîm Gweithredol wrth ddatblygu'r fersiwn nesaf o'r Polisi.</p> <p>Roedd y Pwyllgor yn falch bod rôl y Dirprwy Gadeirydd wedi'i ffurfioli a bod ei aelodaeth wedi'i hatgyfnerthu gydag ychwanegiad Aelod Annibynnol newydd.</p> <p>Cafodd yr eitemau canlynol eu hargymell i'w cymeradwyo gan y Bwrdd:</p> <ul style="list-style-type: none"> <li>• Diwygiadau i'r Cylch Gorchwyl yn Atodiad 2, a oedd yn ffurfio rhan o'r Rheolau Sefydlog canlynol:</li> </ul>	

	<ul style="list-style-type: none"> <li>○ cyfeirio at rôl y Dirprwy Gadeirydd yn aelodaeth y Pwyllgor Archwilio a Sicrwydd;</li> <li>○ cyfeirio at rôl y Dirprwy Gadeirydd yn aelodaeth y Pwyllgor Addysg, Comisiynu ac Ansawdd ac, yn amodol ar ychwanegu'r tri Deon fel aelodau 'yn bresennol' sefydlog yn hytrach nac fel aelodau llawn o'r Pwyllgor.</li> </ul> <ul style="list-style-type: none"> <li>• Diwygio'r Cyfyngiadau Ariannol Dirprwyedig sy'n ffurfio rhan o Reolau Sefydlog AaGIC o £2 filiwn i £3 miliwn ar gyfer anfonebau gan Bartneriaeth Cydwasanaethau GIG Cymru.</li> </ul>	
<b>Penderfyniad</b>	<p>Fe wnaeth y Bwrdd:</p> <ul style="list-style-type: none"> <li>• <b>nodi'r</b> adroddiad at ddibenion sicrwydd.</li> <li>• <b>cymeradwyo'r</b> newid er mwyn i'r tri Deon fod yn aelodau 'yn bresennol' y Pwyllgor Addysg, Comisiynu ac Ansawdd;</li> <li>• <b>cymeradwyo'r</b> diwygiadau i Gylch Gorchwyl y Pwyllgor Archwilio a Sicrwydd a'r Pwyllgor Addysg, Comisiynu ac Ansawdd, fel a ganlyn: <ul style="list-style-type: none"> <li>○ cyfeirio at rôl y Dirprwy Gadeirydd yn aelodaeth y Pwyllgor Archwilio a Sicrwydd;</li> <li>○ cyfeirio at rôl y Dirprwy Gadeirydd yn aelodaeth y Pwyllgor Addysg, Comisiynu ac Ansawdd ac, yn amodol ar ychwanegu'r tri Deon fel aelodau 'yn bresennol' sefydlog yn hytrach nac fel aelodau llawn o'r Pwyllgor.</li> </ul> </li> <li>• <b>Cymeradwyo'r</b> Cyfyngiadau Ariannol Dirprwyedig sy'n ffurfio rhan o Reolau Sefydlog AaGIC o £2 filiwn i £3 miliwn ar gyfer anfonebau gan Bartneriaeth Cydwasanaethau GIG Cymru.</li> </ul>	
<b>2611/4.4</b>	<b>Fframwaith Sicrwydd y Bwrdd</b>	
	<p><b>Derbyniwyd</b> yr adroddiad gan y Bwrdd.</p> <p>Wrth gyflwyno'r adroddiad, darparodd Dafydd Bebb drosolwg o'r newidiadau a wnaed yn yr adolygiad blynyddol o Fframwaith Sicrwydd y Bwrdd. Esboniodd y byddai'r Fframwaith yn cael ei atgyfnerthu ymhellach i gynnwys map sicrwydd manwl er mwyn nodi a mapio'r rheolaethau a'r ffynonellau sicrwydd allweddol yn erbyn y prif risgiau at gyflawni'r amcanion strategol. Byddai Map Sicrwydd Fframwaith Sicrwydd y Bwrdd yn cael ei gyflwyno i'r Pwyllgor Archwilio a Sicrwydd ar 18 Ionawr 2021.</p>	
<b>Penderfyniad</b>	<p>Fe wnaeth y Bwrdd:</p> <ul style="list-style-type: none"> <li>• <b>cymeradwyo'r</b> diwygiadau i Fframwaith Sicrwydd y Bwrdd;</li> <li>• <b>nodi</b> y byddai Map Sicrwydd Fframwaith Sicrwydd y Bwrdd yn cael ei gyflwyno i'r Pwyllgor Archwilio a Sicrwydd ar 18 Ionawr 2021.</li> </ul>	<b>DB</b>
<b>2611/4.5</b>	<b>Diweddariad ar y Cynllun Iaith Gymraeg</b>	
	<p><b>Derbyniwyd</b> yr adroddiad gan y Bwrdd.</p> <p>Wrth gyflwyno'r adroddiad, darparodd Dafydd Bebb ddiweddariad ar y broses ymgynghori a datblygiad Safonau a'r Cynllun Iaith Gymraeg. Rhagwelwyd y byddai'r broses ymgynghori yn cael ei chwblhau yn Ionawr 2021 ac y byddai'r Cynllun Iaith Gymraeg yn derbyn ei gymeradwyaeth terfynol gan Gomisiynydd y Gymraeg a Bwrdd AaGIC ym Mawrth 2021.</p>	

	<p>Derbyniodd y Bwrdd ddiweddariad yn erbyn y 10 maes blaenoriaeth uchaf ar gyfer y Gymraeg. Pwysleisiwyd bod y staff wedi croesawu'r Gymraeg yn AaGIC a gwelwyd hyn yn y cynnydd sylweddol yn nifer y geiriau a oedd yn cael eu cyfieithu bob mis, sef tua 400,000 yn awr. Roedd nifer y dysgwyr Cymraeg wedi cynyddu'n sylweddol hefyd i 45, a oedd yn dangos eto bod yr iaith Gymraeg yn cael ei hymgorffori yn y sefydliad.</p> <p>Nododd y Bwrdd y cyfarfod cadarnhaol a gafwyd gyda Chomisiynydd y Gymraeg ac, yn benodol, bod y gwaith a oedd yn cael ei wneud yn AaGIC i atgyfnerthu sgiliau Cymraeg gweithlu'r GIG wedi'i groesawu. Cadarnhawyd hefyd bod y Comisiynydd wedi nodi gwaith cynllunio'r gweithlu ar gyfer nodi'r rolau hynny a oedd angen sgiliau'r Gymraeg, fel maes yr oedd angen sylw.</p> <p>Diolchodd y Bwrdd i Dîm yr Iaith Gymraeg am y cynnydd oedd yn cael ei wneud.</p>	
<b>Penderfyniadau</b>	<b>Nodwyd</b> yr adroddiad gan y Bwrdd.	
<b>2611/4.6</b>	<b>Penderfyniadau a wnaed yng nghyfarfod y Pwyllgor</b>	
<b>Penderfyniad</b>	<b>Derbyniodd a nododd</b> y Bwrdd yr adroddiad a oedd yn darparu'r materion allweddol i'w trafod 'yng nghyfarfod y pwyllgor' yng nghyfarfod y Bwrdd ym mis Medi.	

<b>2611/5</b>	<b>ER GWYBODAETH/I'W NODI</b>	
<b>2611/5.1</b>	<b>Cynllun Gweithredol Ch3 a Ch4</b>	
	<b>Derbyniodd a nododd</b> y Bwrdd y Cynllun a gyflwynwyd i Lywodraeth Cymru, fel y nodwyd yng Ngham Gweithredu'r Cadeirydd fel rhan o Adroddiad y Cadeirydd yng nghofnod 2611/2.1 uchod.	
<b>2611/6</b>	<b>MATERION ERAILL</b>	
<b>2611/6.1</b>	<b>Unrhyw Faterion Brys Eraill</b>	
	Nid oedd unrhyw faterion eraill i'w hystyried.	
<b>2611/6.2</b>	<b>Dyddiad y cyfarfod nesaf</b>	
	<p>Dyddiadau'r Cyfarfodydd Nesaf:</p> <ul style="list-style-type: none"> <li>Sesiwn Datblygu Bwrdd AaGIC i'w chynnal ar 17 Rhagfyr 2020 drwy Microsoft Teams/Telegynadledda.</li> <li>Cyfarfod Bwrdd AaGIC i'w gynnal ar 28 Ionawr 2021 i'w gynnal drwy Zoom/Telegynadledda.</li> </ul>	

.....  
Chris Jones (Cadeirydd)

.....  
Dyddiad:



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**Bwrdd AaGIC (Agored)**  
**26 Tachwedd 2020**  
**Cofnod o'r Camau Gweithredu**

(Mae'r Ddalen Camau Gweithredu hefyd yn cynnwys camau gweithredu y cytunwyd arnynt yng nghyfarfodydd blaenorol Bwrdd Agored AaGIC ac sydd i'w cwblhau neu sydd wedi'u hamserlennu i'r Bwrdd eu hystyried yn y dyfodol. Mae'r rhain wedi'u tywyllu yn yr adran gyntaf. Pan fydd y Bwrdd yn cytuno bod y camau gweithredu wedi'u cyflawni, byddant yn cael eu dileu oddi ar y ddalen camau gweithredu.)

Cyfeirnod Cofnod	Camau Gweithredu y Cytunwyd Arnynt	Arweinydd	Dyddiad Targed	Cynnydd/ Cwblhawyd
<b>2611/1.5</b>	<b>Cofnodion y Cyfarfod Cyffredinol Blynnyddol a gynhaliwyd ar 24 Medi 2020</b>			
	<ul style="list-style-type: none"> <li>Diwygio'r cofnod i ychwanegu Dr Heidi Phillips fel ymddiheuriad.</li> </ul>	<b>Ysgrifennydd y Bwrdd</b>	O fewn 1 wythnos	Cwblhawyd.
<b>2611/1.6</b>	<b>Cofnodion cyfarfod y Bwrdd a gynhaliwyd ar 24 Medi 2020</b>			
	<ul style="list-style-type: none"> <li>Diwygio'r cofnodion fel a ganlyn: <ul style="list-style-type: none"> <li><b>2409/1.2 Ymddiheuriadau am absenoldeb:</b> Tynnu enw Dr Heidi Phillips a diwygio'r cofnod i ddarllen 'Ni dderbyniwyd unrhyw ymddiheuriadau am absenoldeb'.</li> <li><b>2409/1.3 Datganiadau o Fuddiant:</b> Ychwanegu'r eitem benodol ar yr agenda yr oedd y Datganiadau o Fuddiant yn cyfeirio ati er mwyn diwygio dechrau'r cofnod i ddarllen 'Derbyniwyd y Datganiadau o Fuddiant canlynol mewn cysylltiad â Phrifysgolion Cymru ar gyfer eitem 3.1 ar yr agenda. Cymeradwyo'r Fanyleb Contract Addysg - ...'.</li> </ul> </li> </ul>	<b>Ysgrifennydd y Bwrdd</b>	O fewn 1 wythnos	Cwblhawyd.



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Cyfeirnod Cofnod	Camau Gweithredu y Cytunwyd Arnynt	Arweinydd	Dyddiad Targed	Cynnydd/ Cwblhawyd
<b>2611/1.7</b>	<b>Materion yn Codi</b>			
	<ul style="list-style-type: none"> <li>Bydd tymor ar gyfer cynnal cyfarfodydd rhithwir y Bwrdd a'i Bwyllgorau yn cael ei ymestyn at ddiwedd mis Mawrth 2021.</li> </ul>	<b>Ysgrifennydd y Bwrdd</b>	Mawrth 2021	Y mater hwn i'w ystyried gan y Bwrdd yn eu cyfarfod ar 25 Mawrth 2021.
<b>2611/2.2</b>	<b>Adroddiad y Prif Weithredwr</b>			
	<ul style="list-style-type: none"> <li>Yr adborth o'r Adolygiadau Gwasanaeth Canol Blwyddyn i'w gyflwyno yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr.</li> </ul>	<b>Prif Weithredwr</b>	Rhagfyr 2020	Yr eitem ar yr agenda ar gyfer Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr.
	<ul style="list-style-type: none"> <li>Yr adborth o Arolwg Staff GIG Cymru i'w gyflwyno yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr.</li> </ul>	<b>Cyfarwyddwr y Gweithlu a Datblygu Sefydliadol</b>	Rhagfyr 2020	Yr eitem ar yr agenda ar gyfer Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr.
<b>2611/4.2</b>	<b>Adroddiad ar Berfformiad</b>			
	<ul style="list-style-type: none"> <li>Y Fframwaith Perfformiad i'w gyflwyno yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr.</li> </ul>	<b>Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol</b>	Rhagfyr 2020	Yr eitem ar yr agenda ar gyfer Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr.
<b>2611/4.4</b>	<b>Fframwaith Sicrwydd y Bwrdd</b>			
	<ul style="list-style-type: none"> <li>Y Map Sicrwydd Fframwaith Sicrwydd y Bwrdd i'w gyflwyno i'r Pwyllgor Archwilio a Sicrwydd ar 18 Ionawr 2021.</li> </ul>	<b>Ysgrifennydd y Bwrdd</b>	18 Ionawr 2021	Eitem ar yr agenda ar gyfer cyfarfod y Pwyllgor Archwilio a Sicrwydd ar 18 Ionawr 2021.



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<b>Dyddiad y Cyfarfod</b>	<b>28 Ionawr 2021</b>	<b>Eitem agenda</b>	<b>2.2</b>
<b>Teitl yr Adroddiad</b>	<b>Adroddiad y Prif Weithredwr - Ionawr 2021</b>		
<b>Awdur yr Adroddiad</b>	Dafydd Bebb, Ysgrifennydd y Bwrdd		
<b>Noddwr yr Adroddiad</b>	Alex Howells, Prif Weithredwr		
<b>A gyflwynir gan</b>	Alex Howells, Prif Weithredwr		
<b>Rhyddid Gwybodaeth</b>	Agored		

## Adroddiad y Prif Weithredwr - Ionawr 2021

### 1. CYFLWYNIAD

Wrth i ni ddechrau Chwarter olaf y flwyddyn mae Coronafeirws unwaith eto yn dominyddu'r agenda ar gyfer y system iechyd a gofal. Mae cyfraddau cynyddol y firws yn y cyfnod cyn y Nadolig wedi arwain at bwysau sylweddol ar wasanaethau'r GIG a'r gweithlu, ac mae angen i ni gofio am yr effaith ar ein cydweithwyr ar draws y GIG ar hyn o bryd. Mae cymeradwyaeth a defnydd diweddar brechlynnau wedi cael croeso mawr a dyma'r flaenoriaeth bwysicaf i'r GIG dros yr ychydig fisoedd nesaf. Mae cyfarfodydd cyfathrebu rheolaidd ar waith gyda Llywodraeth Cymru ar lefel Prif Swyddog Gweithredol, ac mae'r mecanwaith Cynllunio ac Ymateb Brys ar waith.

### 2. GWEITHGAREDDAU ALLWEDDOL

- **Coronafeirws**

Mae'r Rhaglen Frechu yn mynd rhagddo yn ei anterth ac mae Julie Rogers yn arwain cyfraniad AaGIC i'r Rhaglen trwy ei rôl fel cyd-gadeirydd Cell y Gweithlu, gan oruchwylio datblygiad canllawiau a chydlynu cynlluniau ar gyfer model y gweithlu.

Yn AaGIC rydym yn parhau i adolygu effaith y pandemig ar ein staff, ein gwasanaethau a'n cynlluniau, gan gynnal cyfarfodydd wythnosol o'n Tîm Rheoli Argyfwng (CMT). Un o'n prif flaenoriaethau fu lleihau a rheoli unrhyw darfu ar addysg a hyfforddiant i'n myfyrwyr a'n hyfforddeion, er mwyn cynnal ein piblinell gweithlu yn y dyfodol cyn belled ag y bo modd. Rhannwyd briff penodol ar y sefyllfa bresennol gydag aelodau'r Bwrdd a thrafodir y mater hwn yn fanylach yn y Pwyllgor Comisiynu Addysg ac Ansawdd.

Mae Tî Dysgu yn parhau i fod ar agor i'r staff hynny sydd angen dod i mewn am resymau busnes neu les. Rydym yn parhau i gynnal fforwm agored staff bob pythefnos a fynychir yn aml gan dros 120 o staff, er mwyn sicrhau bod cyfathrebu rheolaidd a chyfle i ddiweddarau staff ar unrhyw newidiadau neu ddatblygiadau. Rydym hefyd wedi cynnal cynhadledd bob aelod o staff ar 25 o Ionawr. Thema trwy ein holl gyfathrebu yw lles, ac mae'r arolwg staff diweddar wedi helpu i ganolbwyntio ar ymgysylltu a deialog staff.

- **Penodiadau newydd**

Rwy'n falch iawn o gyhoeddi bod Kirstie Moons wedi'i phenodi'n Ddeon Deintyddol Ôl-raddedig AaGIC. Dechreuodd Kirstie ei swydd gyda ni ar 1 Ionawr ar ôl bod yn Ddeon Deintyddol Ôl-raddedig Dros Dro yn AaGIC gyda William McLaughlin. Cyn hyn roedd yn Gyfarwyddwr Cyswllt ar gyfer Datblygu a Chynllunio'r Tîm Deintyddol ac mae wedi gweithio ym maes deintyddiaeth yng Nghymru ers cymhwyso fel nyrs ddeintyddol ym 1990, ac yna hanes hir o weithio ym maes addysg ddeintyddol.

Hoffwn achub ar y cyfle hwn i ddiolch i Kirstie a William McLaughlin sydd wedi bod yn cyd-gwmpasu rôl Deon Deintyddol Ôl-raddedig dros dro tra bod y broses benodi wedi digwydd.

- **Cyfathrebu â Rhanddeiliaid**

- **Cynllun Blynyddol ar gyfer 2021/22**

- **Fframwaith Perfformiad**

- **Grŵp Llywio Prentisiaethau Iechyd**

- **Gwelliannau mewn Addysg a Hyfforddiant**

17/330



- **Polisi Trin Cwynion**

Mae Polisi Trin Cwynion pwrpasol AaGIC wedi'i gynnwys ar yr agenda i'w gymeradwyo gan y Bwrdd. Mae'r polisi pwrpasol yn adlewyrchu safle AaGIC fel darparwr addysg a hyfforddiant yn y GIG.

- **Adroddiad Cyllid**

Mae papur yn amlinellu sefyllfa mis saith ar yr agenda. Fel y nodwyd yn yr adroddiad rydym yn parhau i weithio'n agos gyda Llywodraeth Cymru i ddefnyddio'r tanwariant ac i gefnogi buddsoddiad mewn gweithgareddau ychwanegol yn unol â'n Cynlluniau Chwarter 3 a 4.

- **Risg**

Ar hyn o bryd mae deg risg ar y Gofrestr Risg Gorfforaethol, ac mae dwy ohonynt yn goch:

Seiberddiogelwch a chyfleoedd cyflogaeth annigonol ar gael ar gyfer Gweithwyr Proffesiynol Perthynol i lechyd graddedig a myfyrwyr Cymorth Gofal lechyd sydd wedi dewis ymuno â'r fwrsariaeth.

### **3. Argymhelliad**

Gofynnir i'r Bwrdd nodi'r adroddiad hwn.

Llywodraethu a Sicrwydd			
<b>Linc i nodau strategol IMTP</b> <i>(os gwelwch yn ddau)</i>	<b>Nod Strategol 1:</b> Arwain y gwaith o gynllunio, datblygu a lles gweithlu cymwys, cynaliadwy a hyblyg i gefnogi'r gwaith o gyflawni 'Cymru Iachach'	<b>Nod Strategol 2:</b> Gwella ansawdd a hygyrchedd addysg a hyfforddiant i'r holl staff gofal iechyd gan sicrhau ei fod yn diwallu anghenion y dyfodol	<b>Nod Strategol 3:</b> Gweithio gyda phartneriaid i ddylanwadu ar newid diwylliannol o fewn GIG Cymru drwy feithrin gallu tosturiol ac arweinyddiaeth gyfunol ar bob lefel
	✓	✓	✓
	<b>Nod Strategol 4:</b> Datblygu'r gweithlu i gefnogi'r gwaith o ddarparu diogelwch ac ansawdd	<b>Nod Strategol 5:</b> Bod yn gyflogwr enghreifftiol ac yn lle gwych i weithio	<b>Nod Strategol 6:</b> I'w gydnabod fel partner, dylanwadwr ac arweinydd rhagorol
	✓	✓	✓
<b>Ansawdd, Diogelwch a Phrofiad y Claf</b>			
Nid oes unrhyw faterion ansawdd, diogelwch cleifion a phrofiad uniongyrchol yn ymwneud â'r adroddiad hwn.			
<b>Goblygiadau Ariannol</b>			
Nid oes unrhyw oblygiadau ariannol uniongyrchol i'r adroddiad hwn.			
<b>Goblygiadau Cyfreithiol (gan gynnwys asesiad cydraddoldeb ac amrywiaeth)</b>			
Nid oes unrhyw oblygiadau cyfreithiol uniongyrchol i'r adroddiad hwn.			
<b>Goblygiadau Staffio</b>			
Nid oes unrhyw oblygiadau staffio uniongyrchol i'r adroddiad hwn			
<b>Goblygiadau Tymor Hir (gan gynnwys effaith Deddf Lles Cenedlaethau'r Dyfodol (Cymru) 2015)</b>			
Bydd yr ystod o weithgareddau a amlinellir yn yr adroddiad yn cyfrannu at agwedd AaGIC tuag at Ddeddf Lles Cenedlaethau'r Dyfodol. Fodd bynnag, bydd y cyfraniadau'n benodol i bob un o'r meysydd unigol a gwmpesir yn gyffredinol yn yr adroddiad hwn.			
<b>Hanes yr Adroddiad</b>	Cyflwynir adroddiad y Prif Swyddog Gweithredol ym mhob sesiwn Bwrdd agored a gynhelir unwaith bob deufis.		
<b>Atodiadau</b>	AMHERTHNASOL		



<b>Dyddiad y Cyfarfod</b>	<b>28 Ionawr 2021</b>	<b>Eitem agenda</b>	<b>3.1</b>
<b>Teitl yr Adroddiad</b>	<b>Diweddariad Blynyddol y Cynllun</b>		
<b>Awdur yr Adroddiad</b>	Chris Payne, Cyfarwyddwr Cynorthwyol Cynllunio a Pherfformiad a Gwasanaethau Corfforaethol		
<b>Noddwr yr Adroddiad</b>	Nicola Johnson, Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol		
<b>A gyflwynir gan</b>	Nicola Johnson, Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol		
<b>Rhyddid Gwybodaeth</b>	Agored		
<b>Diben yr Adroddiad</b>	Rhoi drafft cyntaf o Gynllun Blynyddol 2021/22 i'r Bwrdd i'w drafod a'i adborth i gefnogi ei ddatblygiad parhaus.		
<b>Materion Allweddol</b>	<p>Mae'r papur hwn yn cwmpasu'r Cynllun Blynyddol drafft sy'n cael ei ddatblygu yn unol â chanllawiau cynllunio Llywodraeth Cymru.</p> <p>Datblygodd y sefydliad Gynllun Tymor Canolig Integredig cymeradwy ar gyfer 2020-23 gydag ymgysylltiad helaeth ag ystod eang o randdeiliaid ledled Cymru. Mae'r Cynllun Blynyddol wedi'i ddatblygu, yn seiliedig ar Flwyddyn 2 y Cynllun Tymor Canolig Integredig, trwy ymgysylltu â'r Bwrdd, y Tîm Gweithredol a'r Uwch Dîm Arweinyddiaeth (UDA). Er mwyn ymateb i'r amgylchedd presennol, adolygodd a chwblhaodd y Tîm Gweithredol y portffolio o Amcanion Strategol i'w ddatblygu yn 2021/22 i gyflawni Nodau Strategol cytunedig y sefydliad. Roedd hyn yn cynnwys adnewyddu'r Arweinwyr Gweithredol a'r Uwch Swyddogion Cyfrifol.</p> <p>Er mwyn datblygu'r Cynllun terfynol gan y Bwrdd ym mis Mawrth, ein ffocws yw cwblhau'r cyflawniadau manwl, a'r mesurau llwyddiant mewn perthynas â'n Amcanion Strategol y cytunwyd arnynt a chwblhau'r cynlluniau ariannol a gweithlu i sicrhau bod gennym y gallu a'r gallu i gyflawni.</p>		
<b>Camau Penodol sy'n Ofynnol</b> ( <i>un ✓ yn unig os gwelwch yn dda</i> )	<b>Gwybodaeth</b>	<b>Trafodaeth</b>	<b>Sicrwydd</b>
		✓	
<b>Argymhellion</b>	<p>Gofynnir i'r Aelodau:</p> <ul style="list-style-type: none"> <li>Rhowch sylwadau ac adborth ar y Cynllun Blynyddol drafft sydd ynghlwm yn Atodiad 1 i gefnogi datblygiad y Cynllun terfynol.</li> </ul>		

## DIWEDDARIAD CYNLLUN BLYNYDDOL 2021/22

### 1. CYFLWYNIAD

Mae'r papur hwn yn darparu Cynllun Blynyddol drafft AaGIC 2021-22 i'r Bwrdd ei drafod a rhoi adborth. Amlinellir y camau sy'n weddill ar gyfer datblygu'r Cynllun terfynol yn ogystal â'r cynlluniau ar gyfer ymgysylltu parhaus.

### 2. Cefndir

Mae'r gofyniad i ddatblygu Cynllun Blynyddol mewn cyd-destun tair blynedd wedi cael ei symud ymlaen ers mis Tachwedd yn unol â Fframwaith Cynllunio Llywodraeth Cymru gyda chefnogaeth ac ymgysylltiad agos gan y Bwrdd, y Tîm Gweithredol a'r UDA. Yn dilyn trafodaeth yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr, mae'r Tîm Gweithredol wedi cwblhau'r adolygiad a chwblhau'r portffolio o Amcanion Strategol i'w ddatblygu i gyflawni'r Nodau Strategol y cytunwyd arnynt. Mae hyn wedi cynnwys adnewyddiad yr Arweinwyr Gweithredol a'r Uwch Swyddogion Cyfrifol.

Amlinellir yr Amcanion Strategol y cytunwyd arnynt ym Mhennod 5 y ddogfen ac maent yn ystyried ehangder a graddfa'r gwaith a wnawn wrth gefnogi polisiâu a blaenoriaethau cenedlaethol allweddol. Mae hyn yn cynnwys sut rydym yn bwriadu arwain a dylanwadu ar newidiadau system ar draws ein hystod o swyddogaethau, yn ogystal â'n ffocws parhaus ar ddatblygu ein sefydliad.

### 3. CYNNIG

Mae'r Cynllun Blynyddol drafft yn debyg o ran naws, arddull a strwythur i'n Cynllun Tymor Canolig Integredig y gellir ei gymeradwyo o'r blaen ond fe'i diweddarwyd i adlewyrchu ein cynnydd fel sefydliad ym Mlwyddyn 1 ein Cynllun Tymor Canolig Integredig cymeradwy (a blwyddyn 2 ein sefydliad) a hefyd i adlewyrchu'r effaith yn arbennig o'r pandemig COVID-19.

Adolygodd y Tîm Gweithredol yr holl Amcanion Strategol ac maent wedi eu hail-lunio ar gyfer 2021/22. Hwyluswyd hyn trwy ymgysylltu mewnol ac roedd yr ystyriaeth yn cynnwys:

- Gan adeiladu ar y cynnydd yn 2020/21,
- Ein ffyrdd newydd o weithio ac arloesi mewn ymateb i bandemig COVID-19,
- Angen cynnal ystwythder ac ymateb parhaus i COVID-19,
- Trafodaethau Adolygiadau Gwasanaeth Canol Blwyddyn,
- Adborth gan yr UDA a'r aelodau unigol sy'n Uwch Swyddogion Cyfrifol,
- Dadansoddiad o'r Cynlluniau cychwynnol ar Dudalen ar gyfer pob Amcan Strategol, ac,
- Adolygiad o'n Cofrestr Risg Gorfforaethol.

Mae'r Arweinwyr Gweithredol a'r Uwch Swyddogion Cyfrifol hefyd wedi'u hadnewyddu i adlewyrchu'r twf yn y Tîm Gweithredol (gyda dau Gyfarwyddwr newydd) ac i sicrhau bod gweithio matrices aml-broffesiynol yn cael ei annog ar draws y sefydliad.

Ar ôl cytuno ar bortffolio'r Amcanion, cynhaliwyd adolygiad yn erbyn *Strategaeth y Gweithlu ar gyfer Iechyd a Gofal Cymru* ac mae hyn wedi cadarnhau bod y camau gweithredu'n cael eu hadlewyrchu'n briodol yn y Cynllun Blynyddol, ac mai'r Cynllun Blynyddol yw ein cyfrwng cyflenwi ar gyfer y Strategaeth. Yn **Atodiad C** mae'r ddogfen hefyd yn manylu ar yr aliniad rhwng ein Cynllun a'r Blaenoriaethau Gweinidogol a Deddf *Lles Cenedlaethau'r Dyfodol*.

Mae gwaith yn mynd rhagddo i nodi a meintoli'r adnoddau sydd eu hangen i gyflawni'r Cynllun ac mae hyn yn cynnwys gallu a gallu i gyflawni'r Amcanion Strategol y cytunwyd arnynt yn uniongyrchol ac i gefnogi'r seilwaith corfforaethol galluogi gofynnol. Fel sefydliad cymharol newydd rydym wedi ysgwyddo cyfrifoldebau a swyddogaethau ychwanegol yn 2020/21, rydym hefyd yn dysgu am y gefnogaeth sydd ei hangen i gyflawni ehangder ein swyddogaethau ac mae gennym well dealltwriaeth o'r gallu a'r gallu a ddaethom ynghyd gan y rhagflaenydd sefydliadau. Gwneir y dadansoddiad o'r gofynion hyn i integreiddio agweddau comisiynu, cyflawni, cyllid a gweithlu'r Cynllun a chaiff ei drafod gyda'r Bwrdd ym mis Chwefror.

Mae ymgysylltiad allanol yn parhau, er yng nghyd-destun y pwysau system ddifrifol a brofir yn y GIG ehangach. Hyd yma cynhaliwyd cyfarfodydd gyda NWIS a Chydweithredol GIG Cymru. Gyda chydweithwyr NWIS buom yn trafod ein dulliau cynllunio ac yn rhagweld portffolios o waith. Gyda Chydweithfa'r GIG rydym wedi adolygu aliniad ein cyflawniadau ar gyfer y rhaglenni gwaith cenedlaethol sy'n cyd-fynd â'n Hamcanion Nod 4 Strategol a byddwn yn ymgymryd â gwaith pellach ym mis Chwefror i ddylanwadu a disgrifio gofynion y gweithlu dros gyfnod y Cynllun i gefnogi'r rhaglenni cenedlaethol hyn. .

Nodwyd y bydd Llywodraeth Cymru yn trefnu cyfarfod anffurfiol i drafod datblygu a chynnydd y cynllun ganol mis Chwefror.

Bydd y drafft yn cael ei ddatblygu ymhellach er mwyn cyflwyno'r Cynllun terfynol i'w gymeradwyo i'r Bwrdd ym mis Mawrth gan:

- Gwblhau'r cyflawniadau Amcan Strategol, cerrig milltir a mesurau llwyddiant.
- Cynnal dadansoddiad o'r adnoddau angenrheidiol i gefnogi cyflwyno'r Cynllun i sicrhau gallu a gallu i gyflawni.
- Trafodaeth ar y dadansoddiad ac unrhyw flaenoriaethu neu ddewisiadau sy'n ofynnol i'r Bwrdd yn y Sesiwn Ddatblygu ym mis Chwefror.
- Cwblhau'r cynlluniau ariannol a gweithlu.
- Ymgysylltiad parhaus trwy rannu'r ddogfen ddrafft yn eang ar gyfer sylwadau (gan gynnwys gyda Gofal Cymdeithasol Cymru), cyflwyniad yn y Cyfarwyddwyr Cyllid a Chyfarwyddwyr y Gweithlu a grwpiau rhwydwaith cymheiriaid OD a thrafodaeth bellach gyda sefydliadau eraill y GIG.
- Cwblhau meysydd perthnasol y Set Ddata Lleiafswm cenedlaethol sy'n cyd-fynd â hi a chwblhau'r ddogfen.

#### **4. MATERION LLYWODRAETHU A RISG**

O ystyried y pwysau ar system GIG Cymru mae'n debygol y bydd ymgysylltiad â chydweithwyr Bwrdd lechyd y GIG yn cael ei gynnal wyneb yn wyneb ond trwy rannu dogfennau i gael sylwadau gyda chydweithwyr a thrwy drafodaeth ar rwydweithiau cymheiriaid priodol. Lle bo hynny'n ymarferol, y bwriad o hyd yw y bydd ymgysylltiad â sefydliadau a allai fod o dan lai o bwysau clinigol.

Cyhoeddir templed Set Data Isafswm (MDS) cenedlaethol gan Lywodraeth Cymru ganol mis Chwefror i'w gwblhau gan holl sefydliadau'r GIG. Bydd AaGIC yn cwblhau'r meysydd perthnasol ac yn ei gynnwys gyda'r Cynllun terfynol i'w gymeradwyo.

Yn ogystal, mae Asesiad Effaith Cydraddoldeb yn cael ei gynnal. Mae hyn yn cael ei ddatblygu ar hyn o bryd gan y Tîm Cynllunio gyda chefnogaeth Arweinydd Cynhwysiant AaGIC.

Mae'r Cynllun Blynnyddol yn ymateb i'r Gofrestr Risg Gorfforaethol (CRR). Mae'r unig risg cyfradd coch ar y gofrestr yn gysylltiedig â seiberddiogelwch y rhoddir sylw iddo trwy Amcan Strategol 5.8.

## **5. GOBLYGIADAU ARIANNOL**

Nid ydym eto wedi derbyn manylion gan Lywodraeth Cymru ar ein dyraniad ariannol ar gyfer cyfnod y cynllun. Mae gwaith yn mynd rhagddo i sicrhau bod cyllid ar waith nid yn unig i gyflawni ein huchelgeisiau a fynegir yng nghyd-destun y cynllun ond i sicrhau bod y gweithlu a'r gyllideb ar gael i ddarparu lefel briodol o allu a gallu ar draws gweithgareddau busnes fel arfer.

Mynegir y dull a'r rhagdybiaethau sy'n cefnogi datblygiad ein cynllun ariannol ym Mhennod 10. Bydd trafodaethau'n parhau'n fewnol a chyda Llywodraeth Cymru i gefnogi unrhyw ofynion blaenoriaethu cynllun ym mis Chwefror a galluogi adolygu a chwblhau penodau ariannol a thablau cyllid yn gadarn cyn i'r drafft terfynol gael ei gyflwyno ym mis Mawrth.

## **6. Argymhelliad**

Gofynnir i'r Aelodau:

- Rhoi sylwadau ac adborth ar y Cynllun Blynnyddol drafft sydd ynghlwm yn Atodiad 1 i gefnogi datblygiad y Cynllun terfynol.

Llywodraethu a Sicrwydd			
<b>Linc i nodau strategol Cynllun Tymor Canolig Integredig</b> <i>(os gwelwch yn ddau)</i>	<b>Nod Strategol 1:</b> Arwain y gwaith o gynllunio, datblygu a lles gweithlu cymwys, cynaliadwy a hyblyg i gefnogi'r gwaith o gyflawni 'Cymru Iachach'	<b>Nod Strategol 2:</b> Gwellu ansawdd a hygyrchedd addysg a hyfforddiant i'r holl staff gofaliachyd gan sicrhau ei fod yn diwallu anghenion y dyfodol	<b>Nod Strategol 3:</b> Gweithio gyda phartneriaid i ddylanwadu ar newid diwylliannol o fewn GIG Cymru drwy feithrin gallu tosturiol ac arweinyddiaeth gyfunol ar bob lefel
	✓	✓	✓
	<b>Nod Strategol 4:</b> Datblygu'r gweithlu i gefnogi'r gwaith o ddarparu diogelwch ac ansawdd	<b>Nod Strategol 5:</b> Bod yn gyflogwr enghreifftiol ac yn lle gwych i weithio	<b>Nod Strategol 6:</b> I'w gydnabod fel partner, dylanwadu ac arweinydd rhagorol
	✓	✓	✓
<b>Ansawdd, Diogelwch a Phrofiad Cleifion</b>			
Bydd ein Cynllun Blynyddol yn cefnogi ein dull o wellu ansawdd addysg a hyfforddiant a fydd yn effeithio ar brofiadau cleifion a dderbynnir. Hwylusir hyn trwy nod strategol sy'n ymroddedig i ddarparu Ansawdd a diogelwch.			
<b>Goblygiadau Ariannol</b>			
Mae paratoi cynllun ariannol manwl yn rhan allweddol o'r Cynllun Blynyddol a rhoddir sylw llawn iddo yn y drafft terfynol ochr yn ochr â chwblhau set ddata leiaf.			
<b>Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)</b>			
Mae dyletswydd gyfreithiol i gydymffurfio â Fframwaith Cynllunio GIG Cymru. Mae asesiad Effaith Cydraddoldeb yn cael ei gwblhau a bydd yn cael ei gyflwyno gyda'r drafft terfynol.			
<b>Goblygiadau Staffio</b>			
Gan mai hwn yw'r ail Gynllun Tymor Canolig Integredig (Cynllun Blynyddol mewn cyd-destun 3 blynedd) ac mae gweithrediadau'n parhau i ehangu, mae'r broses gynllunio yn debygol o nodi ceisiadau adnoddau staffio ychwanegol sylweddol sy'n ofynnol i fodloni gofynion capasiti. Bydd y rhain yn cael eu nodi ochr yn ochr â chostau priodol i gefnogi datblygu a chwblhau ein cynllun ariannol.			
<b>Goblygiadau Hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015)</b>			
Bydd y Cynllun Blynyddol yn rhoi ystyriaeth lawn i'r gofyniad i fodloni Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015, 5 ffordd o weithio.			
<b>Hanes yr Adroddiad</b>	19 Tachwedd 2020		
<b>Atodiadau</b>	Atodiad 1 - Cynllun Blynyddol Drafft 2021/22		

Health Education and Improvement Wales

# Annual Plan

2021 - 2022



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

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



# Contents

Foreword from the Chair and Chief Executive \_\_\_\_\_

Executive Summary \_\_\_\_\_

## Chapter 1 – Organisational profile and reflections on 2020-21

- 1.1 HEIW Vision \_\_\_\_\_
- 1.2 Purpose \_\_\_\_\_
- 1.3 Functions \_\_\_\_\_
- 1.4 Our Culture, values and behaviours \_\_\_\_\_
- 1.5 Organisational and Governance structures for planning and delivery \_\_\_\_\_
- 1.6 Capacity and Capability to deliver \_\_\_\_\_

## Chapter 2 – Progress in 2020-21

- 2.1 Response to the COVID-19 pandemic and new ways of working \_\_\_\_\_
- 2.2 The Workforce Strategy for Health and Social Care \_\_\_\_\_
- 2.3 Key Achievements and progress in 2020-21 \_\_\_\_\_
- 2.4 Awards for Excellence in 2020-21 \_\_\_\_\_

## Chapter 3 – Strategic Context

- 3.1 The strategic context in which we work \_\_\_\_\_
- 3.2 The PESTLE analysis \_\_\_\_\_
- 3.3 Health Board and Trust Issues and challenges \_\_\_\_\_
- 3.4 The new national executive function \_\_\_\_\_

## Chapter 4 – Strategic Framework for 2021-22

- 4.1 Our strategic framework for 2021-22 \_\_\_\_\_
- 4.2 Alignment with *A Healthier Wales*, the Wellbeing of Future Generations Act and the Ministerial Priorities \_\_\_\_\_
- 4.3 Stakeholder Engagement and development of the Annual Plan \_\_\_\_\_

## Chapter 5 - Strategic Objectives

- 5.1 Development and wellbeing of a sustainable and flexible workforce \_\_\_\_\_
- 5.2 Quality and accessibility of education and training \_\_\_\_\_
- 5.3 Collective leadership capacity in the NHS \_\_\_\_\_
- 5.4 Transformation of the workforce in line with national priorities \_\_\_\_\_
- 5.5 Exemplar employer and a great organisation to work for \_\_\_\_\_
- 5.6 Excellent partner, influencer and leader \_\_\_\_\_

## Chapter 6 – Professional and Occupational Perspectives

- 6.1 Nursing \_\_\_\_\_
- 6.2 Healthcare Support Workers \_\_\_\_\_
- 6.3 Medicine \_\_\_\_\_
- 6.4 Pharmacy \_\_\_\_\_
- 6.5 Dental \_\_\_\_\_
- 6.6 Optometry \_\_\_\_\_
- 6.7 Allied Health Professionals \_\_\_\_\_
- 6.8 Healthcare Scientists \_\_\_\_\_
- 6.9 NHS Managers \_\_\_\_\_

## **Chapter 7 – Education and Training**

- 7.1 Introduction \_\_\_\_\_
- 7.2 Progress in 2020-2021 \_\_\_\_\_
- 7.3 Education Commissioning Plans for 2021-22 \_\_\_\_\_

## **Chapter 8 – The HEIW Workforce**

- 8.1 Developing our People and organisation \_\_\_\_\_
- 8.2 Shape of our workforce \_\_\_\_\_
- 8.3 Workforce Measures \_\_\_\_\_
- 8.4 Future Priorities \_\_\_\_\_
- 8.5 Attraction, recruitment and selection \_\_\_\_\_
- 8.6 Equality, Diversity and Inclusion \_\_\_\_\_
- 8.7 HEIW workforce: communications and engagement \_\_\_\_\_

## **Chapter 9 – Our enabling and support functions, risk and governance**

- 9.1 Communicating effectively with people, partners and the public \_\_\_\_\_
- 9.2 Data analytics and intelligence \_\_\_\_\_
- 9.3 Digital and information systems \_\_\_\_\_
- 9.4 Ensuring a safe, sustainable and appropriate working environment \_\_\_\_\_
- 9.5 Planning and Performance \_\_\_\_\_
- 9.6 Professional Support Unit \_\_\_\_\_
- 9.7 Revalidation Support Unit \_\_\_\_\_
- 9.8 Research, Evaluation and Value \_\_\_\_\_
- 9.9 Innovation, Improvement & Transformation \_\_\_\_\_
- 9.10 Organisational Risk and Governance \_\_\_\_\_

## **Chapter 10 – Financial Plan**

- 10.1 Our approach \_\_\_\_\_
- 10.2 The 5 Year HEIW Financial Plan \_\_\_\_\_
- 10.3 Development and Investment \_\_\_\_\_
- 10.4 Financial Risks and Opportunities \_\_\_\_\_
- 10.5 Capital \_\_\_\_\_

## **Chapter 11 – Appendices**

- 11.1 A HEIW Values and Behaviours \_\_\_\_\_
- 11.2 B HEIW Board \_\_\_\_\_
- 11.3 C PESTLE Analysis \_\_\_\_\_
- 11.4 D Stakeholder Engagement \_\_\_\_\_

# Foreword from the Chair and Chief Executive

## DN1. Will be finalised in final Plan

- HEIW was in a strong place moving into 2020/21 with an approvable IMTP, a developing organisation and a clear strategic direction. During the year we made a considerable contribution to helping the NHS respond to COVID-19. This has magnified the important role we have as part of the NHS and has played to our strengths as an organisation that we can respond to new challenges and develop creative solutions to problems.
- It has been important that as well as the immediate response we remained focussed on delivering the workforce of the future and maintained education, training, leadership development and workforce planning as far as practicably possible. We will need to remain agile in 2021/22 and this is plan carefully balances the demands of the COVID-19 pandemic and our new ways of working alongside our strategic activities.
- Our partnership working has been strong throughout the pandemic, and we been able to keep on-track with the majority of the ambitious plans that we set ourselves at the start of the year. This is an incredible achievement, especially given that our whole team has been working remotely for the majority of the year.
- The pandemic has brought particular challenges for our commissioned services generally, and this has had a specific impact on education and training, requiring our teams to implement significant adjustments and flexibilities to support our students and trainees across the professions. The team has risen to the challenge of 2020 and we are in a great position to build on these innovations in the next year.
- We are delighted that the national ten-year Workforce Strategy for Health and Social Care was published in October 2020. It puts wellbeing at the heart of our plans for the workforce. The vision and the 7 key themes will transform traditional roles and ways of working. HEIW in partnership with Social Care Wales developed the plan following extensive consultation with multiple organisations, bodies and agencies. The focus of the plan is on improving the wellbeing, inclusion, capability and engagement of the health and social care workforce, and our Annual Plan is the delivery plan for the health aspects of the Strategy, in partnership with all our stakeholders, over the next year.
- We look forward to enabling the NHS in Wales to continue to respond to the challenges of the pandemic in 2021-22 and delivering our strategic plans to *Transform the Workforce for A Healthier Wales*.

	
Ms Alex Howells Chief Executive	Dr Christopher Jones, CBE Chairman

**Executive Summary**

DN2. Will be inserted in final Plan

**Plan on a Page**

DN3. Will be inserted in final Plan

# Chapter 1 – Organisational profile and progress in 2020-21

## 1.1 HEIW Vision

Our vision is “**Transforming the Workforce for A Healthier Wales**” which was developed through extensive engagement with our staff, stakeholders and partners. The workforce is pivotal in building a sustainable health and care system that can meet our future needs and we will work closely with our stakeholders to continuously evaluate, re-imagine, and transform how we need to work to meet the needs of an ever-changing world. We will deliver this vision using our PEOPLE principles, as outlined below:

<b>P</b>	<b>Planning</b> ahead to predict and embrace changes and build a sustainable health and social care system
<b>E</b>	<b>Educating</b> , training and developing staff to meet the needs of patients and citizens in line with prudent healthcare principles
<b>O</b>	<b>Offering opportunities</b> for development to new and existing staff from all professional and occupational groups throughout career pathways
<b>P</b>	<b>Partnership working</b> to increase value for our citizens, patients, learners and staff
<b>L</b>	<b>Leading</b> the way, through continuous learning, improvement and innovation
<b>E</b>	<b>Exciting, Enthusing, Engaging, Enabling and Empowering</b> staff across all professional and occupational groups

## 1.2 Purpose

Our purpose is to integrate and grow expertise and capability in planning, developing, shaping, and supporting the healthcare workforce - ensuring we have the right staff, with the right skills, to deliver world-class health and care to the people of Wales. The publication of *A Healthier Wales* reinforced the need for a more strategic and sustainable approach to workforce in health and social care, and this will be progressed through delivering the national *Workforce Strategy for Health and Social Care*.

As a relatively new organisation within NHS Wales we are also clear that our purpose is to deliver improvements in the safety and quality of care for patients, to staff experience and to the system as a whole. This includes the underpinning enabler of delivering the best system leadership practice through our compassionate leadership, talent management and succession planning programmes. Our work on supporting and promoting staff, student and trainee wellbeing has also come to the fore during the pandemic as well as our ongoing work on education and training quality assurance and management.

Our role in commissioning education and training makes us uniquely placed to use the commissioning levers and tools to ensure system value is achieved and to implement the *Wellbeing of Future Generations (Wales) Act* and the Socio-Economic Duty. We also see this as a key lever to promote the use of the Welsh language and to foster a bilingual workforce that meets the needs of the Welsh population.

Our ‘Made in Wales’ approach includes strategic workforce planning creating the plans and conditions for a sustainable workforce for the future, widening access to a

range of health careers and opportunities, reducing socio-economic inequality and engaging with the public and our partners, students and trainees to shape education and training opportunities that can be delivered locally.

Whilst we have now been established for over two years, it is important that we continue to recognise the significant change we made by merging the three predecessor organisations and we will continue to strive to be an exemplar employer by valuing our own staff, listening to their experiences and role-modelling compassionate leadership. The implementation of a remote working model so early in our development has been a challenge and we are conscious of the need to pay particular attention the continuation of our Organisational Development (OD) programme to deliver an integrated and multi-professional approach. We will build on the innovative ways we have used to improve staff experience, maintain work/life balance, encourage the use of the Welsh language in our business and to work together as a team during the pandemic, and will foster our ongoing OD journey.

Finally, we will continue to nurture our relationships with our key stakeholders and partners, including on a UK-wide basis, and to use best practice and innovation in our ongoing communications and engagement.

### 1.3 Functions

DN4. Finance figure to be confirmed in final Plan.

DN5. Key facts to be checked and format amended

HEIW is a Special Health Authority and is an all-Wales organisation employing circa 400 members of staff, but also working closely with large numbers of NHS staff who deliver education, training, supervision and appraisal with us on a daily basis. We have an annual budget in excess of £227 million which is set to rise to £xmillion in 2021-22 and further in future years in line with the expansion in education and training and in the organisation's supporting functions over the next 5 years. We support the education and training of the wide range of health professions that work in the NHS including:

### Supports the education, training and CPD of:



The organisation undertakes a wide range of functions as outlined below. During 2021-22 we will continue to work within these functions to support NHS Wales to respond to the COVID-19 pandemic and to deliver our strategic objectives:

**Education Commissioning and Delivery:** HEIW plans, commissions and delivers education and training for a wide range of health professional groups, and incorporates the Deaneries for Medicine, Dentistry and Pharmacy. This is what the majority of the HEIW budget is spent on, and through the commissioning approach HEIW ensures value and sustainable outcomes are delivered for the NHS system and encourages the use of the Welsh language.

**Quality Management:** HEIW assures and manages the quality of education and training provision ensuring it meets the required standards, and improvements are made where required. This includes supporting teachers, trainers, trainees and students and working closely with education providers, NHS organisations and regulators.



**Supporting Regulation:** HEIW plays a key role representing Wales in liaison with regulators, working within the policy framework established by the Welsh Government. HEIW also undertakes, independently of the Welsh Government, specific regulatory support roles.

**Workforce intelligence:** HEIW is recognised as a primary source for information and intelligence about the Welsh health workforce. We provide analytical insight and intelligence to support the development of the current and future shape of the workforce. We act as a central body to identify and analyse sources of intelligence from Wales, UK and abroad.

**Workforce strategy and planning:** HEIW provides 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 care models of service delivery. In addition, through this process, HEIW identifies and develops new workforce models required within the NHS and fosters a bilingual workforce.

**Leadership Development and Succession Planning:** HEIW is leading and developing the strategic direction for the development and delivery of leadership development for and succession planning for NHS Wales.

**Careers and Widening Access:** HEIW provides the strategic direction for health careers and the widening access agenda, delivering an ongoing agenda to promote health careers. With a clear focus on opening access to the many people in our communities that have valuable skills and experience that are currently under-represented in our workforce.

**Workforce Transformation and Improvement:** HEIW provides strategic and practical support for workforce transformation and improvement, including skills development, role design, Continuing Professional Development and career pathway development. This work links closely with the development of new workforce models to underpin strategic developments in the NHS including the Strategic Programme for Primary Care, Working Together for Mental Health, national programmes and the strategic programmes led by the NHS Wales Collaborative. During 2020 we also became responsible for a number of new areas including the Nurse Staffing Act, Healthcare Sciences and the Allied Health Professionals Framework.

**Professional Support for Workforce and Organisational Development (OD):** HEIW has an express function to support the development of the workforce and OD profession within Wales.

#### **1.4 Our Culture, Values and Behaviours**

As a still-growing organisation, our culture and the way we do business are very important to us. There is an increasing and compelling body of evidence linking the wellbeing of the health and care workforce to improved outcomes and quality of care. As the system leader for workforce we want our own workforce to be happy, healthy and engaged and we promote wellbeing, inclusion and bilingualism within HEIW, in line with the national *Workforce Strategy for Health and Social Care*. We created a Values and Behaviour Framework prior to the establishment of the new organisation, which was developed by all of the staff who came together as a team to form HEIW, and consists of the following values:

**Respect for all:** in every contact we have with others

**Together as a Team:** we will work with colleagues across NHS Wales and with partner organisations

**Ideas that Improve:** harnessing creativity, and continuously innovating and evaluating

The full values and behaviours framework can be found at **Appendix A**. We will continue to embed the values and behaviours into our policies, practices and processes and will take all opportunities to be a role model for the national work we are leading on compassionate and collective leadership.

In October 2020, we launched our Strategic Equality Plan (SEP) 2020-2024. This was created using feedback from a robust consultation and engagement process and sets out our direction of travel for the next four years and will embed equality, diversity and inclusion at the heart of our work. It explains how we will promote equality, eliminate discrimination and foster good relations between those who share a protected characteristic and those who do not. The launch of the SEP also formally declared our commitment to being part of Wales' first Public Body Equality Partnership (WPBEP). This group of 11 public sector organisations has come together to share resources, insight and expertise in order to promote equality across all areas. Through this collective approach, the WPBEP works to meet the challenges set out in the *Is Wales Fairer* report whilst reflecting the principles of the *Well-being of Future Generations (Wales) Act*. Furthermore, we are progressing work to mitigate the impact of differential attainment through our training and education processes.

## 1.5 Organisational Governance Structures for Planning and Delivery

HEIW was formally launched as a statutory body on 1 October 2018 and we celebrated our two-year anniversary in 2020. HEIW has a statutory Board consisting of a Chair, Chief Executive, six Independent Members and four Executive Directors. In 2020 we also appointed a Director of Planning, Performance and Corporate Services and a Director of Digital and IT to the Board, both for a period of two years. A summary of Executive Director portfolios and a "who's who" of the Board including the Executive Team can be found on our website at <https://heiw.nhs.wales/corporate/heiw-board-executive-team/> and our Independent Board members at <https://heiw.nhs.wales/corporate/heiw-board-independent-members/>.

The Board sets the strategic direction for HEIW and approves the Annual Plan (or IMTP) for submission to the Welsh Government in line with the NHS Wales Planning Framework. At a strategic level the Board scrutinises and assures the performance of the organisation which includes the delivery of the Annual Plan and delivery of our 'Business as Usual' activities. The Board also ensure arrangements are in place to monitor and manage the key risks of the organisation.

Our approach to the development of this Annual Plan has been to engage with the Board at all stages as priorities and actions have been developed. An outline timetable for the development of the Annual Plan was presented to the Board in October 2020 and updates have been provided to the Board at all full Board and Board Development sessions. The development of the Annual Plan has been overseen by the Executive Team with ongoing engagement with the wider Senior

Leadership Team and key stakeholders including other NHS organisations, Social Care Wales and external stakeholders.

In 2020-21 the Board approved our **Performance Framework** which sets out how we will scrutinise, assure and improve performance in all our activities, based on the Performance Dashboard and reporting cycle. The purpose of this is to describe the organisation's system for making continuous improvements to achieve our Strategic Aims and Objectives and to deliver our 'Business As Usual' activities effectively. The Performance Report and Dashboard will be considered at quarterly intervals by the Board and will ensure that HEIW places information at the forefront of decision-making process in order to support delivery of the Strategic Objectives. As our performance processes continue to evolve, we will develop our Dashboard and reports to provide differing levels of the organisation and committees with appropriate granularity of information to improve performance through local scrutiny, assurance, decision-making and support.

DN6. Hyperlink to be inserted for the Performance Framework to the January Board report and papers when in the public domain.

The organisation received a positive Structured Assessment for 2020 which stated that the organisation has robust arrangements in place to monitor and report on progress with the delivery of our strategic plans.

The Risk section in Chapter 9 explains how the Annual Plan responds to the key risks on HEIW's Corporate Risk Register, how the Register is aligned to the Strategic Aims and how it is systematically reviewed by the Board.

## 1.6 Capacity and Capability to Deliver

We have a significant vision and ambitious agenda to deliver with our staff, partners and stakeholders. Following extensive review and engagement, we have translated this ambition into six Strategic Aims and the specific Strategic Objectives laid out in Chapter 5.

One of the challenges of this Annual Plan is to ensure that we have the capacity and capability to deliver against our aims and the full range of Strategic Objectives outlined. The national *Workforce Strategy for Health and Social Care* was approved and published in October 2020 and both HEIW and Social Care Wales believe that the significant implementation actions will need to be supported by additional investment.

The wider Senior Leadership Team has had a critical role in the development of the Annual Plan bringing together input from across the organisation, considering how our new ways of working in response to the pandemic can underpin the Plan and also to ensure the Plan can be prioritised and effectively delivered with the right resources in place. In October 2020, we undertook a listening exercise with the Senior Leadership Team, with an emphasis on wellbeing and capacity to deliver and this has shaped the Plan and the resources required to deliver it.

This exercise was particularly important in light of the new remote working Operating Model that has been in place for the majority of 2020-21, the continued growth of our functions and the headcount of the organisation, the need to remain agile with regard to the ongoing COVID-19 response and in terms of our organisational development.

We are increasingly adopting a matrix approach to working to support the delivery of our Plan and, if additional capacity is supported, will underpin this with a consistent approach to programme and project management in 2021-22.

Regarding capability, we have a stable and highly motivated workforce. We are developing a three-year Training and Development plan, which will sit alongside our People and OD Strategy, and will help to ensure our workforce has the skills needed to deliver the expectations set out in this plan. The main areas for further skills development that have been identified to date are programme and project management, preparation of business cases, risk management and digital capability. These are in addition to the usual training requirements of an NHS and a new organisation in relation to leadership, management skills, information governance, finance and procurement.

In terms of capacity, we are aware that as a relatively new organisation within NHS Wales our functions are still growing, and our organisation is still forming. During 2020 we have taken on a range of new responsibilities including the Healthcare Sciences and Allied Health Professionals Frameworks, the Nurse Staffing Act and agreeing to host the Chief Digital Officer's team. We expect that the organisation's functions and responsibilities will continue to grow in the medium term. In developing the Annual Plan we have reviewed our capability, capacity, priorities and new ways of working and we have a greater understanding of the strengths, weaknesses and historical capacity that we inherited from our predecessor organisations. Our view is that investment is required in our capacity and capability, both to directly support the delivery of a number of the Strategic Objectives and also to provide essential enabling functions across the organisation as outlined above. The cost of these requirements is included in the Finance Chapter (Chapter 10).

**DN7. The Finance Chapter will be completed in the final Plan.**

## Chapter 2 – Progress in 2020-21

### 2.1 Response to the COVID-19 Pandemic and New Ways of Working

As an active partner in the COVID-19 response our priority has been to support the wider NHS and care system, but also to support our trainees and students to continue their education. In order to co-ordinate our response we refreshed our Business Continuity Plan and we set up our Crisis Management Team. Members of our senior and executive team also joined partners and colleagues as part of **national emergency planning and coordination groups**. Our Chief Executive was seconded to Welsh Government to support the national leadership response in the first wave, and latterly has led the Chief Executive's Management Group. Our Director of Workforce and OD has also jointly chaired the National Workforce Cell and is HEIW's representative on the national Coronavirus Planning and Response Group, the COVID-19 Vaccine Delivery Programme Board and the COVID-19 Vaccine Deployment Battle Rhythm/SITREP Meetings.

During the early stages of the pandemic we reduced key areas of our IMTP programmes to redirect resources to our COVID-19 response. However, we were mindful of our duty to mitigate the effect of the pandemic on the education and training of the current and future workforce to preserve future workforce supply and protect services going forwards. Therefore, as well as carrying out immediate actions we also continuously assessed and took necessary actions to minimise the impact on education, training and the workforce of the future. In line with all NHS organisations we developed and published three Quarterly Operational Plans and the development of these ensured that we balanced the needs of the immediate response with the future strategic direction and workforce pipeline.

Across our **education and training** responsibilities we actively engaged with key stakeholders to ensure where possible the application of appropriate training, assessment and quality assurance processes. We have worked very closely in partnership with regulators, other statutory education bodies, education providers, Welsh Government and our colleagues across NHS Wales and the UK. This partnership work enabled us to mitigate the effects of the pandemic on our trainees, students and staff wherever possible. We also ensured that there was effective communication at a national and local level and produced guidance and advice for students, trainees, trainers and employers which can be found on our dedicated COVID-19 webpages at <https://heiw.nhs.wales/covid-19/>.

We also developed appropriate contingency plans to maintain recruitment processes for future training years to mitigate the impact on future cohorts. This included:

- In support of the development of the Dragon's Heart Hospital (Principality Stadium field hospital), we developed processes to enable the site to be approved as a GMC training site and this was shared to support their aligned developments.
- We incorporated 4 nation agreements and processes for medical trainees in completing the Annual Review of Competency Progression (ARCP).
- We have worked closely with colleagues from the 4 nations and the Royal College to ensure that GP trainees due to gain their Certificate of Completion of Training (CCT) by the beginning of August are able to sit the required exams in a timely manner and will not experience a delay to qualification.

- New online resources continue to be developed and are nearing completion to replace study days for both Dental Core and Foundation trainees.

HEIW met with all Universities individually and analysed each cohort or every course to determine whether graduation is predicted to be delayed due to the COVID-19 pandemic. Where delays were identified HEIW worked with the Universities and the Service to develop innovative ways of restructuring education (both academic and placements) to ensure all delays are mitigated or reduced to a minimum.

However, despite the close monitoring and management of education and training, and the collaboration of all our partners to protect the future workforce supply, there are concerns in some areas. At the time of writing the main risks are in surgical training within the Medical Deanery and in the training of our future dentists. These areas will remain under close management.

We also provided practical **specialist training and education** to support the pandemic response in the areas of critical care, remote consultation and rehabilitation, infection prevention and control, and support for care homes. This included the rapid introduction of structured critical care training in collaboration with Universities.

A comprehensive suite of **wellbeing** resources was developed at pace by HEIW in partnership with staff health and wellbeing leads across NHS Wales and Trade Union partners to support the COVID-19 response. This was distributed via HEIW and Health Board and Trusts websites and onward dissemination as appropriate. In addition we supported the national work programme of wellbeing, and facilitated the delivery of a dedicated Samaritans Wales helpline for NHS and Social Care staff including Welsh Language provision as well as an extension of the Health for Health Professionals provision (which was originally only for doctors) to all NHS staff. This includes a confidential help line, counselling and self-guided and professional guided online tools. Details of the comprehensive wellbeing offer can be found at <https://heiw.nhs.wales/covid-19/>.

Furthermore, we focused our **Compassionate Leadership** activities on maximising the HEIW digital leadership portal to enable new ways of working and access for the health system through digital and virtual education solutions.

With regard to our own organisation, all of our staff moved very quickly to a **remote working model** during the first wave. In response to the needs of the staff, and our business needs as a new organisation we moved to a blended model in September. Staff are able to access Ty Dysgu for wellbeing or business purposes on an individual basis as a choice. Plans are in place for a more formal blended model when the situation allows. We have had very few positive cases of COVID-19 amongst our staff but we continue to monitor the situation and the other impacts of the virus closely.

## 2.2 The Workforce Strategy for Health and Social Care

In October 2020, the ten-year national *Workforce Strategy for Health and Social Care* was endorsed and published by Welsh Government. The document represents the culmination of almost a year's development work by HEIW and Social Care Wales in partnership with NHS Wales and Local Government, the voluntary and independent sectors as well as regulators, professional bodies and education providers.



The wellbeing of the workforce, Welsh language and inclusion is at the heart of the Strategy's ambition that we will have a motivated, engaged and valued, health and social care workforce, with the capacity, confidence and competence to meet the needs of the people of Wales. The Strategy is summarised in the diagram in **Appendix B** and sets out that:

- We will have a workforce with the right values, behaviours, skills and confidence to deliver care, and support people's wellbeing as close to home as possible;
- We will have a workforce in sufficient numbers to be able to deliver responsive health and social care that meets the needs of the people of Wales;
- We will have a workforce that is reflective of the population's diversity, welsh language and cultural identity, and
- We will have a workforce that feels valued and is valued.

The Strategy is underpinned by seven key themes as follows and our Annual Plan Strategic Objectives represent the delivery plan for the health actions that will be undertaken in partnership to deliver the Strategy.

Theme	Descriptor
1. An Engaged, Motivated and Healthy Workforce	By 2030 the health and social care workforce will feel valued, fairly rewarded and supported wherever they work.
2. Attraction and Recruitment	By 2030, health and social care will be well established as a strong and recognisable brand and sector of choice for our future workforce.
3. Seamless Workforce Models	By 2030 multi-professional and multi-agency workforce models will be the norm.
4. Building a Digitally Ready Workforce	By 2030 the digital and technological capabilities of the workforce are well developed and in widespread use to optimise the way we work, to help us deliver the best possible care for people.
5. Excellent Education and Learning	By 2030 the investment in education and learning for health and social care professionals will deliver the skills and capabilities needed to meet the future needs of people in Wales.
6. Leadership and Succession	By 2030 leaders in the health and social care system will display collective and compassionate leadership.
7. Workforce Supply and Shape	By 2030 we will have a sustainable workforce in sufficient numbers to meet the health and social care needs of our population

## 2.3 Key Achievements and Progress in 2020-21

Throughout 2020-21, despite the impact of the pandemic our staff have worked hard to make progress with our Strategic Aims and Objectives in line with delivering our vision of a future sustainable workforce for A Healthier Wales.

As outlined in Section 2.1 above, due to the need to respond rapidly to the first wave of the pandemic we suspended the majority of our IMTP programmes during April and May. During May, the Board agreed to recommence the reviewed objectives outlined in the Q2 Operational Plan. For the period to the end of Q2 we committed to delivering around three-quarters of our Strategic Objectives. At the mid-year point

for 2020-21, our monitoring indicated that all Objectives were on track for delivery. As we developed our Operational Plans for the final six months of 2020-21, we agreed to progress the majority of our Objectives, reflecting several objectives being restarted or new objectives added to support the national Winter Protection Plan.

The IMTP 2020-23 was developed to deliver the organisation's six Strategic Aims and the highlights of our progress and achievements to date are included in the following table:

<b>Strategic Aim 1: To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'</b>	<b>Strategic Aim 2: To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs</b>
<b>Achievements</b> <ul style="list-style-type: none"> <li>• Endorsement from WG and publication of the 10 Year Workforce Strategy to 2030</li> <li>• Transfer of Widening Access team into HEIW</li> <li>• Transfer of Train Work Live into HEIW portfolio</li> <li>• Supported the development of BAME risk assessment tool</li> <li>• Piloted the Continuing Professional Development Course Management System (CMS).</li> <li>• Delivered the first non-clinical qualification for Primary Care Practice administration and reception staff.</li> <li>• Developed and started progression of Made in Wales programme</li> <li>• Agreed to standardised workforce planning methodology</li> </ul>	<b>Achievements</b> <ul style="list-style-type: none"> <li>• Phase 1 of Strategic Review of Education completed</li> <li>• Approved and endorsed Education and Commissioning Plan</li> <li>• Implemented enhanced Single Lead employer arrangements across a breadth of Medical specialities, dental and pharmacy</li> <li>• Invested in an interprofessional team to drive forward our approach to co-ordinate Simulation Based Education and hosted 2 webinars to take forward the agenda. We have professionalised our Training Programme Director programme</li> <li>• First cohort of nurses commenced on Future Nurse Programme</li> <li>• Expanded Clinical Fellowship to include Pharmacy and Optometry</li> <li>• Assisted the rollout of Attend Anywhere to dental practices</li> <li>• Established Differential attainment programme board to drive forward change</li> </ul>
<b>Strategic Aim 3: To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels</b>	<b>Strategic Aim 4: To develop the workforce to support the delivery of safety and quality</b>
<b>Achievements</b> <ul style="list-style-type: none"> <li>• Developed and utilised 'Gwella' our Leadership Portal</li> <li>• Led the implementation of the Health &amp; Care Leadership Strategy through the NHS Wales Compassionate and Collective Leadership framework for action</li> <li>• Produced Talentbury – 4-day festival of Leadership</li> </ul>	<b>Achievements</b> <ul style="list-style-type: none"> <li>• Achieved an overfill in GP training places -125% fill rate</li> <li>• Completed rollout of GP training 1+ model across all Wales regions</li> <li>• implemented Longitudinal Integrated Foundation Training (LIFT) model</li> <li>• Transitioned the Nurse staffing Act team into HEIW</li> <li>• Increase medical foundation training places by 12</li> </ul>



<ul style="list-style-type: none"> <li>• Relaunched the NHS Graduate Scheme with inclusive recruitment, assessment and induction processes</li> <li>• Piloted Executive Leadership programme developed in conjunction with the Kings Fund</li> <li>• Created Alumni networks to support Leadership cohort</li> </ul>	<ul style="list-style-type: none"> <li>• Increased Pre-Registration pharmacy places filled to 132. An increase of 39%</li> <li>• Hosted virtual conference on Informing the Future of the Mental Health workforce in Wales</li> </ul>
<b>Strategic Aim 5: To be an exemplar employer and a great place to work</b>	<b>Strategic Aim 6: To be recognised as an excellent partner, influencer and leader</b>
<b>Achievements</b>	<b>Achievements</b>
<ul style="list-style-type: none"> <li>• Publication of our Strategic Equality Plan which explains how HEIW will promote equality, eliminate discrimination and foster good relations</li> <li>• Piloted and shared a range of wellbeing resources for staff to raise awareness and provide availability of support across mental health, money advice</li> <li>• Taken forward and embraced our organisational approach to the Biodiversity and decarbonisation agenda</li> <li>• Enhanced structure of Welsh Language team to meet increasing demands and requirements</li> <li>• Enabled staff to work virtually from home within 24 hours</li> </ul>	<ul style="list-style-type: none"> <li>• Moved to virtual board meetings and AGM increasing the ability of stakeholders to attend</li> <li>• Finalised and launched Brand guidelines</li> <li>• Publication of detailed stakeholder bulletins</li> <li>• Developed range of bi-lingual materials</li> <li>• Increasing presence across various forms of media and ensuring appropriate engagement</li> <li>• Engaged with health boards on the availability of EDUROAM network across all sites</li> </ul>

As a core principle we applied the five ways of working as outlined in *The Wellbeing of Future Generations Act* across the majority of our Strategic Objectives. The table in **Appendix C** gives some examples.

#### DN8. Insert section on other milestones including graduation of first bursary cohort

All of our achievement and progress has been successful through collaboration, engagement and close working with our stakeholders and partners and more detail on our partnership and engagement activities this year is included in Chapter 9.

## 2.4 Awards for Excellence in 2020-21

In November 2020, our Leadership Team won the Gold Award for the Best UK Digital Transformation of a Training Programme in Response to COVID-19 award at the 2020 Learning Technologies Awards. This award was for the development of 'Gwella' – the digital leadership portal that was launched in August 2020. Working with our strategic partner, CDSM Thinqi, the team created a bilingual, digital solution aimed at providing open access to a wide range of leadership resources. The portal included integrated virtual classroom capability that enabled the NHS workforce to engage in education and training remotely and safely.

The HEIW Pharmacy team were shortlisted in the 'Training and Development' category of the annual Chemist and Druggist Awards 2020 for their innovative multi-sector training programme, taking trainees from being students to professional pharmacist by providing them with opportunities to experience and deliver pharmaceutical care in a range of settings. This new programme allows trainees to move between hospital, community and primary care settings gaining the skills and

experience necessary to confidently and competently practice as a newly qualified pharmacist in any of the areas experienced.

Emyr Meek, a recent graduate from Cardiff University and dental foundation trainee at HEIW became the first ever winner of the College of General Dentistry and Dental Society of Wales/Y Gymdeithas Ddeintyddol Art and Science of Dentistry Prize for dental students in Wales. Entrants were required to submit a referenced vlog or poster and Emyr's winning entry explains the changes made to the dental contract whilst also examining recent developments including the Assessment of Clinical Oral Risks and Needs (ACORN) and its impact on oral health.

Rebecca Chamberlain, a Pharmacy Technician at HEIW, was awarded the prestigious International Professional Development Association (IPDA) Cymru Howard Tanner Research Prize 2019 for her research into the role of community pharmacy technicians within NHS Wales and the scope they have for role development. Rebecca won the award for her research, supported by HEIW as professional development, which looked to understand current pharmacy technician roles, identifying enablers and barriers to role development, with a particular focus on education and training.

Professor Pushpinder Mangat, HEIW Medical Director, has also recently been recognised by the British Association of Physicians of Indian Origin (BAPIO) for his contribution and support to the education and training of Black, Asian and Minority Ethnic workforce.

## Chapter 3 – Strategic Context

### 3.1 The strategic context in which we work

As a strategic organisation responsible for planning and developing the national workforce it is important that we build on our progress in 2020-21 within the current strategic environment. Clearly 2020 was an unprecedented year and the impact of the COVID-19 pandemic has radically changed the strategic context in which we work and live on a global, national and local basis. This has offered opportunities, as well as challenges, which we respond to in this Plan.

### 3.2 PESTLE Analysis

We have reviewed and refreshed our PESTLE analysis to inform the review of our Strategic Objectives. More context and detail is included in **Appendix D** with a summary below. The PESTLE analysis is based on a review of the Political, Environmental, Social, Technological, Legal and Environmental landscape that we operate within and ensures that we have reviewed the changing strategic context and the impact of the pandemic in a structured way to continue to take advantage of opportunities and mitigate threats to HEIW functions and to take appropriate actions to achieve our Strategic Aims.

Political	Economic	Social
<i>Government policies beneficial/detrimental to HEIWs success. Is the political environment stable or likely to change?</i>	<i>Economic factors that will impact on us moving forward. Is current economic performance affecting HEIW? Any impact on our revenue/costs?</i>	<i>How does human behaviour / cultural trends play a role in HEIW?</i>
<ul style="list-style-type: none"> <li>Welsh Government policy and legislation (<i>Wellbeing of Future Generations (Wales) Act, A Healthier Wales, Nurse Staffing Levels (Wales) Act 2016, forthcoming Social Care Quality and Engagement Bill, Strategic Programme for Primary Care (2018) Is Wales Fairer? (2018)</i>)</li> <li>COVID-19 has highlighted the need for closer working with the four nations in the context of our field of work, such as the Code of Practice for International Recruitment.</li> <li>Political situation is less stable in Wales than last year given forthcoming Senedd election in May</li> </ul>	<ul style="list-style-type: none"> <li>Economic trend for austerity and spending cuts across public services; uncertain economy caused by COVID-19 pandemic and Brexit exacerbating Wales' economic difficulties and impact upon our funding settlement.</li> <li>Welsh Government economic policy (Prosperity for all: economic action plan; prudent healthcare) and uncertain WG funding allocation for FE/HEIs in Wales and to meet the increasing funding demands for future social care.</li> <li>Impact of economic and social environment on health inequalities.</li> </ul>	<ul style="list-style-type: none"> <li>Increasing pressures from a growing and ageing population with more complex health needs; an ageing workforce and generating pressures on workforce (staffing shortages) and increasing demand on services in a time of austerity and spending cuts. Compounded by COVID-19 pandemic.</li> <li>Welsh Government Social and Economic Duty and policy to widen access and provide greater flexibility in higher education for under-represented groups.</li> <li>Health trends such as mental health, obesity and smoking related illnesses.</li> </ul>

<p>2021 but uncertainty remains as a result of Brexit.</p> <ul style="list-style-type: none"> <li>• System politics associated with the development of new service models. Response to the <i>Strategic Programme for Primary Care (2018)</i>.</li> <li>• Status of equality and human rights in Wales is likely to change and will impact on all public bodies in Wales.</li> <li>• National Clinical Plan determining future location of clinical services across Wales.</li> <li>• <i>National Workforce Strategy for Health and Social Care</i>.</li> <li>• National move to integrated care (Health and Social Care).</li> <li>• National (NHS England, NHS Scotland, HEE/NES/NIMTA) workforce and education plans.</li> </ul>	<ul style="list-style-type: none"> <li>• Changes to the Nursing bursaries in England removed but retained in Wales for two further cohorts until 2023.</li> <li>• Contractual changes impacting on T&amp;Cs of junior doctor contract.</li> <li>• Pension changes.</li> </ul>	<ul style="list-style-type: none"> <li>• Trends such as heavy workload, balancing career and personal responsibilities and health resulting in measures to offer more flexible approaches to work and careers for a better work-life balance (part time, portfolio work).</li> <li>• Healthcare inequalities i.e. health provision for children and young people, learning disability.</li> <li>• Patterns of migration to change following Brexit and new immigration system.</li> <li>• Urban/rural geography of Wales resulting in hard to recruit areas.</li> <li>• Impact of different levels of Digital literacy (how to use digital functions and use it properly) is variable amongst different age groups.</li> </ul>
Technological	Legal	Environmental
<i>What innovation and technological advancements are available or on the horizon? How will this affect our operations?</i>	<i>What regulation and laws apply to our business? Do they help/hinder HEIW. Do we understand the laws across HEIW?</i>	<i>What are the effects of our geographic location? Are we prepared for future environmental targets?</i>
<ul style="list-style-type: none"> <li>• Impact of COVID-19 on the way technological changes have been advanced at pace within the NHS.</li> <li>• <i>The Topol Review</i> support the aims of the NHS long term plan and the workforce implementation plan (i.e. creating a digitally ready workforce to ready to use new technology and medicines and to adapt to new ways of working).</li> <li>• Continuing medical advances in technology (AI, Genomics, digital</li> </ul>	<ul style="list-style-type: none"> <li>• <i>A Healthier Wales 2018</i>.</li> <li>• <i>Well-being of Future Generations (Wales) Act 2015</i>.</li> <li>• <i>Nurse Staffing Levels (Wales) Act 2016</i>.</li> <li>• <i>Social Services and Well-being (Wales) Act 2014</i>.</li> <li>• <i>Equality Act (2010)</i>.</li> <li>• <i>Welsh Language (Wales) Measure 2011</i></li> <li>• <i>Health and Social Care (Quality and Engagement) (Wales) Bill</i>.</li> <li>• Education Standards Regulations and Laws</li> </ul>	<ul style="list-style-type: none"> <li>• <i>Climate Change Act 2008</i> to reduce carbon emissions, a key contributor to the causes of climate change (50% reduction by 2025 and 80% by 2050).</li> <li>• <i>The Environment (Wales) Act 2016</i> requires the government to reduce emissions by 40% by 2020.</li> <li>• Increase the amount of renewable energy used, limit emissions from transport, agriculture, industry and business.</li> </ul>

<p>medicine, robotics) e.g. advances in remote monitoring of patients and enabling service users to use technology will require changes to the education and training of the workforce and the population.</p> <ul style="list-style-type: none"> <li>• Changes in technology and communications infrastructure will require a change in roles and functions of clinical staff.</li> <li>• Digital solutions to analyse data, improve intelligence.</li> <li>• Digital literacy and digital accessibility in relation to the rapid take up of tools for remote working.</li> <li>• The Network and Information Security (NIS) regulation introduced in 2018 sets out a framework for Operators of Essential Services (OES) in areas of healthcare, transport, water etc to respond to cyber incidents affecting operations.</li> </ul>	<p>(NMC, GMC, GDC, GOC, HCPC, GPC).</p> <ul style="list-style-type: none"> <li>• Future changes to immigration system in the UK.</li> <li>• Workforce terms and conditions around changes to the Junior Doctor contract.</li> </ul>	<ul style="list-style-type: none"> <li>• <i>Wellbeing of Future Generations (Wales) Act 2015</i> seeks to reduce our environmental impact in line with the meaning that we are low carbon and efficient with our resources.</li> <li>• Introduction of OFGEM DCP228 will mean a rise in energy costs.</li> <li>• Biodiversity duty (S6 Duty of Environment Act) – reporting every 3 years.</li> <li>• The COVID-19 pandemic has seen fewer people travelling for work and a greater awareness of the environment.</li> </ul>
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### 3.3 Health Board and Trust Issues and Challenges

Through our ongoing engagement our Plan aligns and responds to the range of issues and challenges identified by our NHS Wales partners as areas where we can support and influence over the course of our Annual Plan.

DN 9. To be amended for final draft following further engagement during February/March.

<i>Introducing new multi workforce models to address workforce pressure and more prudent use of non-regulated workforce.</i>	<i>Growing our own staff to meet service gaps and requirements particularly in rural and remote areas and hard to recruit professions.</i>
<i>Sustainability of junior doctor rotas in fragile services.</i>	<i>Improving alignment between Workforce and Technology plans.</i>
<i>Fragility of workforce in Primary Care and in particular GP practices.</i>	<i>Recruitment and retention of staff.</i>

<i>Increasing volunteering opportunities.</i>	<i>Wellbeing of the workforce.</i>
<i>Leadership and Management Development at all levels.</i>	<i>Succession Planning and talent Management.</i>

### 3.4 The National Executive Function

*A Healthier Wales* set out the commitment to create a National Executive Function to ensure that all NHS organisations operate within the context of a single national system focussed on securing improved outcomes and value for the population as a whole. We understand the response to the pandemic has taken precedence in 2020 and in the meantime, we have agreed to host the office of the Chief Digital Officer from 2021 until the Executive Function is in place.

# Chapter 4 – Strategic Framework for 2021-24

## 4.1 Our Strategic Framework for 2021-24

In refreshing our strategic framework for the next three years we have been cognisant of the principles and ambitions that led to the establishment of HEIW, the *Workforce Strategy for Health and Social Care*, the learning from the response to the pandemic and our achievements and progress in 2020-21. We will develop an integrated approach to the planning and development of the workforce across the full range of professional and occupational groups and we have ensured that our Strategic Aims and Objectives are multi-professional in scope. We are clear that by working in this way there are many exciting opportunities for us to transform education and training to underpin new workforce models and to add value to the health and care system in the short, medium and long term.

We have formally reviewed our 6 Strategic Aims and the Board agreed that these are still valid and applicable to our functions and priorities for the Annual Plan and the three-year context. Our ongoing work to support the system to remain agile through the COVID-19 pandemic is integrated throughout the Strategic Aims so that we have one plan that describes our Objectives and deliverables for 2021-22.

### The 6 Strategic Aims



**Sustainable Workforce.** This relates to our role in leading the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of *A Healthier Wales*. We will improve continuous professional development for the workforce to ensure that they have the right skills and capabilities. We will implement key actions from the *Workforce Strategy for Health and Social Care* that focus on staff wellbeing and will lead the implementation of strategic priorities that address current challenges and deficits in key professional and occupational groups. We will provide strategic leadership for workforce planning and workforce intelligence, setting clear priorities that support service delivery and improvement. We will develop and coordinate careers activities across Wales with a focus on the ethos of ‘Made in Wales’, identifying and promoting activities for widening access and actively promote health and care careers in Wales and Wales as a place to live.



**Excellent Education and Training.** Education and training is one of our core functions, and we spend the majority of our budget on commissioning undergraduate and postgraduate programmes. Now that the Workforce Strategy is approved we will develop a enabling Strategy for Education, Learning and Development to set out our principles and objectives for transforming the workforce through the transformative enabler of education. We want to improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs and delivers value. This will focus on multi-professional models of care, the shift to prevention and care closer to home, digitally and technology enabled care, maximise opportunities for work-based learning and apprenticeships and the importance of Welsh Language skills. We want to improve the infrastructure available for education and training across Wales, working closely with NHS colleagues, regulators, professional bodies and education providers locally and nationally. We want to take advantage of, and embed, the new ways of education and training that were put in place in response to the Covid-19 pandemic. We also want to promote a reduction in differential attainment in education and training in line with our Strategic Equality Plan. It will also be important to develop and implement modernised funding models to incentivise training and education in NHS Wales.

**Compassionate and Collective Leadership.** We will implement our strategy for leadership and succession planning in partnership with others, and will direct and develop the programmes, tools and resources to support implementation. We will embed a collective and compassionate approach to leadership, with a focus on inclusion, quality improvement, supporting individuals, teams and organisations to deliver on the transformation ambition. Digital platforms and self-service approaches will be a central theme to reinforce a shared and accessible approach to leadership.

**Safety and Quality.** We will continue to provide NHS Wales with an agile response to the specific workforce needs of the COVID-19 pandemic. We want to increase the direct connection and contribution between our functions and the delivery of safe, high quality care for people. We will develop a focus on inter professional training for patient safety and will take a targeted approach to national service priorities such as primary care, mental health, urgent and emergency care, cancer, and eye care. We will support the workforce implications arising from integrated models of care developed by Regional Partnership Boards. This will require an organisation wide approach to encompass workforce intelligence, workforce planning, education and training, workforce modernisation, careers, leadership development, digital. We will also develop post-registration support, education and training pathways to improve the transition of health care professionals from education to the workforce.

**An exemplar employer and a great place to work.** Our ambition is to be an exemplar employer where staff are motivated and empowered by undertaking interesting and varied work, where skills and talent is developed, and where staff wellbeing is supported by an inclusive and values-based culture, a modern working environment, effective HR function and flexible working patterns. Retention levels are high, turnover and sickness absence low, and vacancies easy to fill with high calibre applicants. Leaders lead with compassion, candour and openness, providing clear direction and supporting staff with effective feedback about performance and development. We want to implement important organisational changes to meet the requirements regarding biodiversity and climate change. We will also expand our capacity and capability for evaluation, innovation and research and protect our work from cyber security issues.



**An excellent partner, influencer and leader.** We will continue to build clear networks, mechanisms and communication channels to work closely with a diverse range of partners and key stakeholders to plan ahead to ensure the health and care workforce meets the needs of the people of Wales now and in the future. Partners will seek to involve us at local, national and UK levels because of our reputation and expertise. We have a broad range of statutory functions as outlined in Chapter 1 and have looked to incorporate Strategic Objectives in support of all of these functions within this Plan. To further improve in this area we will undertake an organisational network analysis. We will also look to support NHS Wales with the establishment of the Chief Digital Officer's office as a hosted entity within HEIW. (DN.10 exact wording TBC)

#### **4.2 Alignment with *A Healthier Wales*, the Wellbeing of Future Generations Act and the Ministerial Priorities**

In the following chapter, we have outlined the Objectives which fall under each of the 6 Strategic Aims. For each Objective we have highlighted how it links to each of the 7 themes of the *Workforce Strategy for Health and Social Care* and identified where each Strategic Objective supports *A Healthier Wales* and the *Wellbeing of Future Generations Act*. More detail on the alignment of our Plan with the WBFGA and the Ministerial Priorities is included in **Appendix C**.

#### **4.3 Stakeholder Engagement on the development of the Annual Plan**

The publication of the ten-year national workforce strategy for health and care, in partnership with Social Care Wales involved extensive stakeholder engagement, including staff, professional bodies and trade unions, employers, carers, patients, people who access care and support, third sector organisations, commissioners and volunteers. We also undertook extensive engagement on the development of our approvable IMTP through a series of regional workshops across Wales in 2019-20.

Our Annual Plan has been developed on the strong foundations of our last IMTP, and refreshed utilising the knowledge and expertise of our Board, senior leaders and staff who have built strong links with our key stakeholders. This is reflected in the PESTLE analysis and the refreshed Strategic Objectives contained within this Annual Plan. We also consulted with our staff on the development of the plan at our all Staff Winter Event in January 2021.

We have worked closely with the NHS Wales Collaborative to make sure that our Plans and detailed work programmes align. HEIW leads on the transformation and delivery of the workforce models to underpin the new service models across the transformative strategic change programmes led by the Collaborative. This includes key programmes which underpin the recovery from the pandemic including the national imaging and endoscopy programmes. To formalise our work with the Collaborative we are in the process of developing and agreeing a Memorandum of Understanding.

We have also undertaken detailed work to share our plans with the NHS Wales Informatics Service and are offering practical support as they become the second Special health Authority in NHS Wales. As two strategic national enabling bodies we have engaged with the other individual NHS Wales organisations together to align the opportunities provided through innovation in workforce and digital technologies and to capitalise on the step-change that has taken place during the pandemic.

The Executive Team has also shared and discussed HEIW's plans at a range of national boards and with their Peer Network Groups. We have continued to work virtually with NHS Wales Directors and Assistant Directors of Planning throughout the planning cycle to ensure that we integrate our plans for the workforce within their plans.

As outlined in Chapter 3 we have engaged with NHS organisations and have had the benefit of receiving early drafts and indications of workforce and education content from emerging IMTPs from several organisations. This has provided a sense check on the alignment between HEIW's priorities, and services pressures and priorities.

Finally, we discussed the development of our plans regularly with Welsh Government during the autumn to update on progress, build relationships and share information about key risks and incorporated useful feedback into our plans as part of this process.

## Chapter 5 – Strategic Aims and Objectives 2021-22

DN11. 2 Example Objective deliverables provided. Remainder to be completed and included in final draft.

**Strategic Aim 1: To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'**

Strategic Objective 1.1: Lead and develop a sustainable national workforce plan for nursing to achieve a better match between demand and supply in Wales. <b>Exec Lead Angela Parry SRO Kerri Eilertsen-Feeney</b>
Strategic Objective 1.2: Develop a multi-professional Continuous Professional Development (CPD) Strategy and improve CPD activity to ensure that the existing NHS Wales workforce has the skills and capabilities required for the future. <b>Exec Lead Push Mangat SRO Charlette Middlemiss</b>
Strategic Objective 1.3: Lead, develop and embed a range of actions to support workforce and workplace wellbeing and colleague experience. <b>Exec Lead Julie Rogers SRO Angie Oliver</b>
Strategic Objective 1.4: Improve recruitment and access to careers in the health and care sector in partnership with Social Care Wales. <b>Exec Lead Julie Rogers SRO Angie Oliver</b>
Strategic Objective 1.5: Develop a range of opportunities to promote and achieve the 'Made in Wales' ethos for careers in health and care. (exact wording TBC). <b>Exec Lead Julie Rogers SRO Angie Oliver</b>
Strategic Objective 1.6: Develop our workforce intelligence functions to improve the quality of workforce data, planning and modelling for NHS Wales. <b>Exec Lead Julie Rogers SRO Angie Oliver</b>
Strategic Objective 1.7: Develop education and training to support NHS organisations to improve the quality of workforce planning expertise and capability across the system. <b>Exec Lead Julie Rogers SRO Angie Oliver</b>
Strategic Objective 1.8: Develop effective and ethical international/global mechanisms to enhance workforce supply <b>Exec Lead Julie Rogers SRO Angie Oliver</b>

**Strategic Aim 2: To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs**

Strategic Objective 2.1: Develop a multi professional Education, Learning and Development Strategy designed to deliver future roles. <b>Exec Lead Angela Parry SRO Anton Saayman</b>
Strategic Objective 2.2: Implement Phase 1 of the Strategic Review of the commissioning of health professional education through a successful procurement process. <b>Exec Lead Angela Parry SRO Martin Riley</b>
Strategic Objective 2.3: Plan for Phase 2 of the Strategic Review of the commissioning of health professional education. <b>Exec Lead Angela Parry SRO Christine Love</b>
Strategic Objective 2.4: Embed the new ways of education and training that have been put in place in response to the Covid-19 pandemic, including digitally enabled learning, assessment and quality assurance. <b>Exec Lead Sian Richards SRO Malcolm Gajraj</b>
Strategic Objective 2.5: Support the modernisation of the pharmacy workforce, plan for and implement the Initial Education and Training Standards for Pharmacy (IETP). <b>Exec Lead Push Mangat SRO Margaret Allan</b>
Strategic Objective 2.6: Lead and promote a reduction in differential attainment in education and training in line with the Strategic Equality Plan. <b>Exec Lead Push Mangat SRO Collette McNally</b>
Strategic Objective 2.7: Maximise opportunities for work-based learning and apprenticeships in health. <b>Exec Lead Angela Parry SRO Martin Riley</b>
Strategic Objective 2.8: Improve opportunities for learners to undertake education and training through the medium of Welsh. <b>Exec Lead Dafydd Bebb SRO Huw Owen</b>
Strategic Objective 2.9: Develop and implement a multi-professional education and training quality assurance framework and supporting infrastructure. <b>Exec Lead Push Mangat SRO Tom Lawson</b>
Strategic Objective 2.10: Implement improvements to ensure equitable access to education and training for SAS and locally employed doctors. <b>Exec Lead Push Mangat SRO Ian Collings</b>
Strategic Objective 2.11: Lead the development and management of a multi-professional infrastructure and strategy for Simulation Based Education <b>Exec Lead Angela Parry SRO Anton Saayman</b>
Strategic Objective 2.12: Lead the development and implementation of a digital capability framework for the healthcare workforce in partnership with DHCW (for staff who are not digital specialists). <b>Exec Lead Sian Richards SRO Jay Beavan</b>
Strategic Objective 2.13 Improve career pathways and education opportunities for the clinical academic and research workforce.

<b>Exec Lead Angela Parry SRO Angie Oliver</b>
Strategic Objective 2.14: Develop and implement modernised funding models to incentivise training and education in NHS Wales.
<b>Exec Lead Eifion Williams SRO Rhiannon Beckett</b>

**Strategic Aim 3: To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels**

Strategic Objective 3.1 Lead the implementation of the Health & Care Leadership Strategy through the NHS Wales Compassionate and Collective Leadership framework for action <b>Exec Lead Julie Rogers SRO Helen Thomas</b>
Strategic Objective 3.2: Lead the implementation and management of the NHS succession planning framework for Tiers 1 -3 and monitor progress <b>Exec Lead Julie Rogers SRO Helen Thomas</b>
Strategic Objective 3.3: Lead the implementation and management of the Digital Leadership portal <b>Exec Lead Julie Rogers SRO Helen Thomas</b>
Strategic Objective 3.4: Lead the adaptation, development and implementation of leadership programmes and resources for clinical leaders from a range of professional backgrounds <b>Exec Lead Julie Rogers SRO Helen Thomas</b>
Strategic Objective 3.5: Lead the review, improvement and re-launch of the NHS Wales Graduate training scheme <b>Exec Lead Julie Rogers SRO Helen Thomas</b>
Strategic Objective 3.6: Lead the development, implementation and management of the new NHS Executive Collective and Compassionate Leadership programme <b>Exec Lead Julie Rogers SRO Helen Thomas</b>

#### Strategic Aim 4: To develop the workforce to support the delivery of safe, high-quality care

Strategic Objective 4.1: Maintain an agile response to the specific workforce needs of the COVID-19 pandemic. <b>Exec Lead Alex Howells SRO Charlette Middlemiss</b>
Strategic Objective 4.2: Support the development and implementation of multi-professional workforce models for primary and community care, in line with the Strategic Programme for Primary Care and Regional Partnership Board plans. <b>Exec Lead Alex Howells SRO Charlette Middlemiss</b>
Strategic Objective 4.3: Develop a mental health workforce model and plan in collaboration with Welsh Government and Social Care Wales to support the implementation of Together for Mental Health (this includes CAMHS). <b>Exec Lead Alex Howells SRO Kerri Eilertsen-Feeney</b>
Strategic Objective 4.4: Modernise workforce models to deliver service transformation arising from the NHS Wales Collaborative and national strategic programmes for: <ul style="list-style-type: none"><li>• imaging;</li><li>• pathology;</li><li>• endoscopy;</li><li>• major trauma;</li><li>• unscheduled care; and,</li><li>• critical care.</li></ul> <b>Exec Lead Nicola Johnson SRO Kerri Feeney (TBC) Kerri Feeney (TBC), Kerri Feeney, Angie Oliver (TBC),Charlette Middlemiss (tbc), Clem Price</b>
Strategic Objective 4.5: Support the implementation of national policy and professional frameworks and legislation related to the health professional workforce including: <ul style="list-style-type: none"><li>• optometry;</li><li>• allied health professionals;</li><li>• healthcare sciences;</li><li>• the Nurse Staffing Act;</li><li>• nursing standards; and,</li><li>• maternity services.</li></ul> <b>Exec Lead Angela Parry SROs: Nik Sheen, Wendy Wilkinson, Maria Edwards, Kerri Feeney, Kerri Feeney, Kerri Feeney</b>
Strategic Objective 4.6: Develop the post-registration support, education and training pathways to improve the transition of health care professionals from education into the workforce. <b>Exec Lead Push Mangat SRO Kirstie Moons</b>

### Strategic Aim 5: To be an exemplar employer and a great place to work

Strategic Objective 5.1: Finalise and implement the People, Inclusion and OD Strategy. <b>Exec Lead Julie Rogers SRO Foula Evans</b>
Strategic Objective 5.2: Lead, develop and embed a range of actions to support workforce and workplace wellbeing and excellent colleague experience within HEIW. <b>Exec Lead Julie Rogers SRO Angie Oliver</b>
Strategic Objective 5.3: Implement and embed the Welsh Language framework within HEIW. <b>Exec Lead Dafydd Bebb SRO Huw Owen</b>
Strategic Objective 5.4: Implement and embed HEIW's Strategic Equality Plan and continue partnership working across the public sector. <b>Exec Lead Julie Rogers SRO Emma Kwaya-James</b>
Strategic Objective 5.5: Implement organisational changes to meet the requirements regarding biodiversity and climate change. <b>Exec Lead Nicola Johnson SRO Chris Payne</b>
Strategic Objective 5.6: Embed multi-disciplinary Quality Improvement capacity and capability within HEIW. <b>Exec Lead Push Mangat SRO Anton Saayman</b>
Strategic Objective 5.7: Develop the capacity and capability for evaluation, innovation and research. <b>Exec Lead Push Mangat SRO Anton Saayman</b>
Strategic Objective 5.8: Reduce the organisational risks regarding cyber security. <b>Exec Lead Sian Richards SRO Ricky Hartland</b>

### Strategic Aim 6: To be recognised as an excellent partner, influencer and leader

Strategic Objective 6.1: Refresh and relaunch the HEIW Communications and Engagement Strategy. <b>Exec Lead Julie Rogers SRO Angharad Price</b>
Strategic Objective 6.2: Improve external engagement and communication through an organisational network analysis. <b>Exec Lead Julie Rogers SRO Angharad Price</b>
Strategic Objective 6.3: Scope and agree our future single digital platform. (maybe a slight change to this wording to make it clearer) <b>Exec Lead Sian Richards SRO Jay Beavan</b>
Strategic Objective 6.4: Establish the Chief Digital Officer's office as a hosted entity within HEIW. ( <i>exact wording TBC</i> ) <b>Exec Lead TBC SRO TBC</b>



## Strategic Aim 2: To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs

Strategic Objective 2.5: Support the modernisation of the pharmacy workforce, plan for and implement the Initial Education and Training Standards for Pharmacists (IETP).

**Executive Lead: Push Mangat / SRO: Margaret Allan**

### Why?

- Development and submission of the 5yr IETP Programme business case
- Design a new pilot post-registration pathway for Pharmacists to start August 2021 and secure funding for delivery

### Deliverables

Key Deliverables for Year 1 (2021-22)	Key Quarterly Milestones for Year 1 (2021-22)
<ul style="list-style-type: none"> <li>• Secure funding from Welsh Government for 5yr Programme</li> <li>• Programme Governance framework established and operating</li> <li>• Post-Registration Foundation Pharmacists 2021-22 intake - In partnership with HEIs and training providers start delivery of the new pilot transition pathway for IETP to include IP outcomes and secure funding for delivery</li> <li>• Post-Registration Foundation Pharmacists 2022-23 intake - In partnership with HEIs and training providers review and iterate the transition pathway for IETP to include IP outcomes and secure funding for delivery</li> <li>• Complete negotiations with HEIs regarding the proposed funding of clinical placements within MPharm to support the transition of learning outcomes</li> <li>• Iterative development, continuous improvement and quality management of Pre-Registration Foundation and pilot transition programme alongside IETP developments</li> </ul>	<b>Q1 (April-June)</b> <ul style="list-style-type: none"> <li>• Finalise content and delivery methods for pilot post-registration pathway</li> <li>• Secure funding for pilot pathway, identify and enrol pharmacists</li> <li>• Roadmap for implementation of HEI/MPharm changes</li> <li>• Pre-Registration Foundation Curriculum for 2021-22 intake agreed and approved</li> <li>• HEIW approval of 5yr Programme business case</li> </ul>
	<b>Q2 (July-September)</b> <ul style="list-style-type: none"> <li>• Commence Post-Registration Foundation pilot transition pathway</li> <li>• Negotiations concluded with HEIs to start enhanced funded Clinical Placements in Wales (3/4yr Cardiff MPharm students)</li> <li>• Start the iteration Pre-Registration Foundation curriculum to align to IETP for 2022-23 intake</li> <li>• Welsh Government approval of 5yr Programme business case</li> </ul>
	<b>Q3 (October-December)</b> <ul style="list-style-type: none"> <li>• Start the iteration and development of a Post-Registration Foundation pathway for 2022-23 intake</li> <li>• Pharmacy planning cycle – engage with internal stakeholder and submit any necessary business cases/change requests</li> </ul>
	<b>Q4 (January-March)</b> <ul style="list-style-type: none"> <li>• 2021-22 intake – formal external review of Post-Registration Foundation transition pathway to inform changes for 2022-23 intake</li> </ul>

**High level Deliverables for Year 2 (2022-23)**

- Develop an IETP pathway for Pharmacists with a full IP outcome for 2023-24 intake and secure funding for delivery

**High level Deliverables for Year 3 (2023-24)**

- Develop an IETP pathway for Pharmacists for 2024-25 and secure funding for delivery. Intake will result in IP-qualified Pharmacist

**What does success look like?**

The successful transition of Learning Outcomes into MPharm degrees, the delivery of a single training programme that leads to Independent Prescriber qualified Pharmacists at the end of their Foundation Training Year.

### **Strategic Aim 3: To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels**

Strategic Objective 3.6: Lead the review, improvement and re-launch of the NHS Wales Graduate training scheme

**Executive Lead: Julie Rogers / SRO: Helen Thomas**

#### **Why?**

To create diverse leadership capacity across NHS Wales requires robust succession planning and talent management strategies. This is a critical element of succession planning through the provision of annual pipelines of aspiring leaders to NHS Wales and the wider system. This is a new objective for HEIW to lead the review, improvement and re-launch of the NHS Wales Graduate training scheme. The NHS Wales graduate leadership scheme will align where practical with the NHS Wales Finance Leadership graduate scheme and the Academi Wales public sector graduate scheme, creating diverse learning networks and shared experiences with collective and compassionate leadership as a core element of the scheme.

#### **Deliverables**

<b>Key Deliverables for Year 1 (2021-22)</b>	<b>Key Quarterly Milestones for Year 1 (2021-22)</b>
<ul style="list-style-type: none"> <li>Onboard the new NHS Wales Graduates</li> <li>Finalise the master's degree content in partnership with the University of South Wales</li> <li>Organise and facilitate 3-virtual engagement sessions with trainees and organisations</li> <li>Develop Framework for Onboarding Induction</li> <li>Establish an organisational 'safari tour' and work experience schedule in partnership with organisations</li> <li>Develop and agree a performance framework for the graduate trainee</li> <li>Create a Gwella Graduate network to maintain engagement with the appointed graduates prior to their commencement September 2021</li> <li>Review the Graduate marketing and recruitment process and develop lessons learned</li> <li>Develop supplementary leadership offerings to support the graduates' leadership development</li> <li>Delivery of the HEIW internship programme</li> <li>Establish a HEIW Graduate Management Programme Alumni</li> <li>Explore options to establish a joint network with the Finance Academy and Academi Wales</li> </ul>	<b>Q1 (April-June)</b> <ul style="list-style-type: none"> <li>Master's degree content finalised</li> <li>Graduate network established</li> <li>HEIW Internship complete (phase 1)</li> </ul>
	<b>Q2 (July-September)</b> <ul style="list-style-type: none"> <li>Graduate orientation and work experience schedule complete</li> <li>Graduates commence</li> <li>Launch HEIW internship (phase 2)</li> <li>Performance Framework established</li> </ul>
	<b>Q3 (October-December)</b> <ul style="list-style-type: none"> <li>Master's programme commences</li> <li>Evaluate internship programme</li> <li>Review of Graduate process complete (from offer to post on-boarding of Trainees)</li> </ul>
	<b>Q4 (January-March)</b> <ul style="list-style-type: none"> <li>Commence master classes and learning offerings</li> <li>Finalise internship programme and scale up</li> <li>Final review and reflect of Graduate Programme process and operating model</li> </ul>

#### High level Deliverables for Year 2 (2022-23)

- Support the Management Graduate Programme (Programme 1)
- Commence the marketing and recruitment process for a new Cohort of graduates to the NHS Wales graduate scheme (Programme 2)
- Evaluate graduate programme (1) developing lessons learned to inform improvements to Cohort 2.
- Organisation to confirm participation in Cohort 2
- Provision of HEIW internship programme

#### High level Deliverables for Year 3 (2023-24)

- Onboard new management graduates
- Commence the management Graduate Programme Cohort 3
- Provision of HEIW internship programme

#### What does success look like?

An established NHS Wales graduate leadership programme providing increased capacity of professionally diverse senior and executive leaders across NHS Wales

A sustainable creating a rich and diverse pool of aspiring leaders for senior and executive leadership positions across NHS Wales

An established NHS Wales internship programme that enhances the capacity of the NHS Wales workforce

#### Success factors Year 1:

- A minimum of 20 graduates offered a Trainee placement and commence on the programme September 2021
- A minimum of 90% of graduates successfully completed year 1 of master's degree
- At least 90% of all graduates commence Year 2 of programme

#### Success Factors Year 2:

- All graduates meeting the performance criteria and successfully completing the programme and talent retained

A minimum of 90% of graduates successfully completed year 2 of master's degree

## Chapter 6 – Professional and Occupational Perspectives

DN12. Content on paramedics/physicians associates and anaesthetic associates to be included in final Plan.

The Strategic Objectives and deliverables in Chapter 5 illustrate our principle that we take an integrated and multi-professional approach to all of our work, in line with our vision and with future workforce requirements. This Chapter provides a brief summary of what our strategic plans mean for individual professional groups.

### 6.1 Nursing and Midwifery

Nurses and Midwives make up the largest part of the NHS workforce and we know that this is one of the most critical shortage areas in the health workforce. Over the next year we will combine the results of improved workforce planning, workforce development, education and training to develop a more sustainable plan for the nursing workforce in Wales and will focus on delivering this plan over the next three years. We will promote career pathways and the development of specialist areas to ensure our nurses have the skills and knowledge for the future.

This will also need to take into account the continued implementation of safe staffing levels and compliance with the Nurse Staffing Act. Undergraduate education will continue to change in line with new Nursing and Midwifery Council standards and our recent strategic review of health professional education. We will be working closely with NHS partners and Universities to improve the system and quality of clinical placements to deliver the best possible educational outcomes and to manage the future implications of any future change to the bursary arrangements.

DN13. Nursing and Midwifery sections may be split in the final Plan.

### 6.2 Healthcare Support Workers

Healthcare support workers are playing an increasingly important role in the delivery of care across all areas of healthcare provision. HEIW will continue to increase its investment in the education of this workforce to ensure they are competent and confident to take on new areas of care and registered practitioners are confident to delegate work to them. The development of this workforce will also provide those with the aspiration to continue their career and progress on to formal training programmes to become registered healthcare professionals, thus delivering the 'Made in Wales' ethos and also enabling individuals to 'earn while they learn'.

### 6.3 Medicine

HEIW plays a significant role in ensuring that medical trainees have a positive experience and excellent training outcomes as this has a critical impact both on patient care and their own wellbeing. Our planned improvements in employment arrangements, study leave, training infrastructure and professional support will be part of this. HEIW will be collaborating with UK partners to progress transformation of medical education and training to support the Future Doctor report which includes ensuring the principles of flexible working are embedded, ensuring a greater focus on trainee and team wellbeing and increasing generic skills across the trainee workforce. We also need to ensure that the numbers of doctors we are training at each stage of the medical training pipeline meets the needs of the population in Wales and makes NHS Wales as self-sufficient as possible. We will build on the work already being progressed to increase GP trainees and to modernise their training but

we will need to align numbers through the pipeline. Staff and Associate Grade doctors make up between 15 and 20% of the medical workforce and therefore it is important that we provide better development and support to maximise their potential. Global links in terms of medical training will also be explored to support the workforce model in a sustainable way.

#### **6.4 Pharmacy**

Pharmacy education and training will change rapidly over the course of the next three years to mirror the pace of change in service models, particularly in primary care. We have successfully implemented our quality assured multi sector pre-registration pharmacist programme in 2020-21, in parallel with increasing the number of pre-registration pharmacist trainees and supporting this with a single lead employer scheme. We will develop a plan to roll out our new model for post-registration foundation pharmacists training in line with UK recognised foundation curricula and the new General Pharmaceutical Council's (GPhC) initial education and training standards for pharmacists. We will be continuing our transition programme to support qualified pharmacists' transition into primary care roles and will be working with other professional groups to expand training opportunities in primary care settings. We will continue to target opportunities to develop extended and advanced practice to meet service needs including Independent Prescribing. We will also be exploring changes to pre-registration training for pharmacy technicians and improvements in the transition from education into practice.

During 2021, Pharmacy will be commencing a significant planning and implementation process for the roll out of the new GPhC initial education and training standards for pharmacists. The programme of work will be phased over the next five to six years and will transform the skills and competence of pharmacists at the point of registration. From day one of practice, pharmacists will be Independent Prescribers with the skills and ability to work seamlessly within the multi-disciplinary team offering more patient services at any point of care.

#### **6.5 Dental**

A key focus for dental training will be transforming the workforce to deliver on the ambitions set out in *A Healthier Wales*. We will be supporting and developing a workforce for the General Dental Service that is fit for purpose, embeds the principles of prudent healthcare and optimises patient care. The development of the workforce will be aligned with the themes set out in the national Workforce Strategy for Health and Social Care and underpinned by robust workforce intelligence to inform workforce planning. This will extend to all members of the dental multi-professional team.

Workforce development will move further towards a multi-professional approach utilising new opportunities for delivery aligned with regulatory requirements. An emphasis on prevention and collaboration across healthcare professions will ensure a united approach to oral health care of the future patient population. We will support Welsh Government in rolling out General Dental Services (GDS) contract reform and system changes with training and education for the profession that shifts cultural practices towards innovation and offers leadership training.

We will be exploring ways of ensuring that we continue to fill our dental foundation training places in Wales, developing innovative General Dental Service Dental Core Training roles to retain young dentists in Wales and continuing to support training

with the Single Lead Employer arrangement. We will also be focusing on quality assurance of the training and wellbeing for the trainees.

## **6.6 Optometry**

We will continue to build on the work we have initiated to extend the role of optometrists through additional postgraduate education, to shift the focus of common eye conditions into primary care optometry practices. We will integrate the training, education and support of optometrists and contact lens opticians in Wales into HEIW and we will extend the Welsh Clinical Leadership Training Fellowship programme to incorporate optometrists as the next phase of developing this into a multi professional programme.

Evaluating a new mentor and support service for newly qualified optometrists will enable us to determine further plans and link into Continuing Professional Development (CPD) and scope of practice. We will build on success in providing multi-professional education and continuing professional development in line with HEIW's aspirations with a focus on quality assurance and determining value of CPD in changing practice.

## **6.7 Allied Health Professionals**

Allied Health Professionals (AHPs) have played a significant role in meeting the rehabilitation needs of people directly or indirectly affected by COVID-19. HEIW will build on the recent innovations in practice through the delivery of the workforce and training elements of the *Allied Health Professional (AHP) Framework for Wales – Looking Forward Together* over the next two years. Through improvements in workforce design and planning, education, training and leadership development we aim to unlock the potential and thereby transform the AHP workforce to meet the service needs in Wales. Close working with multi-sector partners will aim to improve innovation in the provision of practice placement education to increase the range and quality of education outcomes and student experience. These partnerships will also be instrumental in shaping the AHP offer within in primary care, and associated education and training required to support this shift in practice.

We will also capitalise on the streamlining agreement that has been put in place for our AHP students to ensure that there is smooth transition from education into employment in NHS Wales.

## **6.8 Healthcare Scientists**

Releasing and harnessing the potential of the healthcare science workforce is of fundamental importance if we are to address the challenges that face NHS Wales in the future. The highly specialised scientific knowledge and skill base of the healthcare science workforce is considerable, and whilst more senior healthcare scientists have experience in the management of clinical resources, they lack profile and recognition for this. Despite the spotlight that has been on the profession during the COVID-19 pandemic it is considered that the healthcare science workforce remains an untapped resource.

By addressing workforce challenges, enhancing skill sets, communicating effectively with other professions, raising the professional profile and working collaboratively, healthcare scientists can support the transformation of services by using evidence and value-based approaches. HEIW will build on the recent innovations in practice through the delivery of the workforce and training elements of the *Healthcare Science*

*in NHS Wales – Looking Forward* Framework. The framework also covers diagnostic and therapeutic radiographers. In NHS Wales, the radiography workforce is included within healthcare science rather than AHPs. The development of point of care testing, modernisation of the radiology workforce, delivering the Single Cancer Pathway along with the increasing use of genomics' and precision medicine demonstrate the increasing role of the healthcare scientist workforce. The ambition is to create an environment in NHS Wales where healthcare science can flourish by establishing universal recognition of the profession, and by promoting its diverse array of rewarding and fulfilling career choices that can make a real difference to the lives of others.

## **6.9 NHS Managers**

Alongside our work on Compassionate and Collective Leadership we will be refreshing management competences and capabilities to inform management development programmes and to develop a Talent Programme, succession planning and career pathways. The reintroduction of the Graduate Management Training programme will provide an additional pipeline of managerial talent.



## Chapter 7 – Education and Training Commissioning and Delivery

### 7.1 Introduction

HEIW is responsible for setting the strategic direction for education and training across a range of health professions as well as supporting Postgraduate Medical and Dental Education. One element of this work is ensuring value and sustainable outcomes are achieved for the health and care system through commissioning education and training, and this chapter sets out our progress and commissioning plans in more detail.

### 7.2 Progress in 2020-21

#### 7.2.1 Nursing and Allied Health Professions

We commission education for student groups including nursing, midwifery, community nursing, all allied health professions and health sciences (referred to as Health Professional Education). Advanced practice, non-medical prescribing and return to practice are also measured and benchmarked.

The COVID-19 pandemic has highlighted the need for a flexible, sustainable and responsive workforce, which can transform and transition across sectors of practice. The commissioning of all education and training has been prioritised to ensure the whole workforce has the skills to respond to a rapidly changing landscape. Wales is leading in embracing and adopting the positive learning from the COVID-19 and encouraging the use of innovative methods of training, including upskilling staff in critical care and use of digital technologies.

In learning from the pandemic NHS Wales is expanding apprenticeship models at all levels and increasing multi-professional and multi-agency placements and workplace experiences. We were delighted that Welsh Government agreed for HEIW to become the development partner for Health Apprenticeship frameworks taking on the role previously undertaken by Skills for Health. HEIW will continue to work with the service, regulatory bodies and Universities to continue to develop new ways of delivering education and assessment through blended learning with a much greater focus on digital methods and simulation. Changes are being made in the way that students and trainees are supported, including examinations, which have been undertaken through digital solutions while ensuring competence is fully assessed.

Section 7.3 highlights a selection of Health Professional pre-registration commissions across nursing, midwifery, allied health professions and healthcare science. Overall in September 2021 we will see an increase in commissions of 9.2% from September 2020 to 3,480. This increase will represent the highest ever level of health professional commissioning in Wales. In addition, there has been further investment in both Health Care Support Worker funding and Health Professional Post-Registration funding with a particular emphasis on supporting staff with confidence, skills and knowledge to support to Wales during this pandemic.

#### 7.2.2 Medical Training

For August 2020 HEIW commissioned 3,211 medical training posts as follows:

- 691 in Foundation Training years 1 and 2
- 1,779 across the 58 different training programmes within Secondary Care
- 741 in General Practice training.

These posts and programmes were occupied by 2,284 trainees, 93% of whom were actively in training posts and 7% were out of programme either for parental leave or training and development opportunities outside of the structured programme environment. During the height of the COVID-19 pandemic earlier this year a substantial number of those trainees who were out of programme returned to support clinical activity where required.

In August 2020, 347 trainees commenced on the Foundation Training Programme and 566 new trainees commenced on Secondary Care Specialty Programmes, an increase of 4% for specialty training compared to August 2019. Notable increases in fill rates were seen for a number of specialties following the 2020 recruitment round including Combined Infection training and Higher Emergency Medicine. Recruitment challenges remain across higher Psychiatry and Medicine training programmes which is largely as a result of historical low fill rates through earlier stages of the training pipeline for a number of years. August 2020 saw the continued roll out of new approved training curricula with an impact on training programme configuration and duration. Further changes will be implemented over the coming years; this is likely to impact the number of vacancies advertised and along with applicant behaviour. The Foundation Programme has seen the first increase of 12 Foundation Year 1 training posts as part of the five-year expansion plan to meet medical school output in Wales and increase our Foundation places to 450 by August 2024. An increase of nearly 33% on previous foundation places.

	Number of F1 posts	F1 increase	Number of F2 posts	F2 increase
August 2019	339		339	
August 2020	351	12	339	0
August 2021	381	30	351	12
August 2022	411	30	381	30
August 2023	450	39	411	30
August 2024	450	0	450	39

This significant expansion will enable us to increase community placements across Wales with dedicated time for Foundation trainees to spend in General Practice and community settings.

A total of 200 GP Trainees accepted training places in Wales in the 2020 recruitment round for posts commencing in August 2020 and February 2021. The 1+2 model of GP training, whereby trainees undertake a total of 1 year in hospital posts and 2 years in GP training posts, was introduced in the Bangor, Dyffryn Clwyd, Wrexham, Gwent and Cardiff GP Training Schemes in August 2019 was rolled out across the remaining 6 Schemes in Wales training Schemes in Wales from August 2020. In order to accommodate the increased numbers of trainees based in general practice, an increase in new trainers and training practices was required. COVID-19 interrupted plans to offer the traditional face to face Prospective Trainers Courses (PTC) however an online version of the PTC was developed and launched in June 2020 and this allowed us to increase the number of new trainers from 328 in August 2019 to 457 in August 2020 and new training practices from 147 to 179 in August 2020.

Of the total number training, 494 trainees across all grades and programmes (Secondary Care, General Practice and Foundation Training) were registered with HEIW to train on a less than full time (LTFT) basis in August 2020 which is an increase of 18.5% compared with the same time in 2019. Over the last 12 months we have seen significant increase in requests for LTFT arrangements as an increasing number of trainees reviewed their working hours to support the COVID-19 pandemic. An increasing number of trainees have applied this year to train less than full time as a result of wellbeing or personal work life balance reasons. Those specialties that attract high proportions of less than full time trainees include Paediatrics, Emergency Medicine and Public Health medicine.

Each year, trainees have two windows in which to submit an Inter-Deanery Transfer. Strict eligibility criteria govern this UK process in which trainees can apply to transfer into the same programme in an alternative region. In February 2020, 5 trainees transferred out and 10 trainees transferred into Wales. Later that year, in August 2020, 6 trainees transferred out of Wales and 6 trainees transferred into Wales.

Between 7 August 2019 and 4 August 2020, 3,232 Annual Reviews of Competence Progression (ARCPs) were undertaken across Foundation, General Practice and Secondary Care training programmes. These ARCPs determine whether trainees have made satisfactory progress within their training programmes. Through this process trainees were 'signed off' as having completed the following training programmes between the 2019-2020 training year with the performance as follows:

- 319 trainees satisfactorily completed Foundation training.
- 262 trainees satisfactorily completed Core and Higher Training programmes enabling progression either to the next level of training or Consultant positions.
- 81 trainees satisfactorily completed General Practice training programmes.

As a result of COVID-19, two new training ARCP outcomes (10.1 and 10.2) were issued to reflect the impact COVID had on training. These recognised that the trainee was achieving progress and developing competences/capabilities at the expected rate prior to COVID-19, but that acquisition of some capabilities had been delayed by the impact of COVID-19. Twenty-four trainees in General Practice and 304 trainees in Secondary Care were awarded Outcome 10s during the summer ARCPs.

### **7.2.3 Dental**

In August 2020, 62 trainees commenced the Dental Foundation Training (DFT) Programme, with a fill rate of 100%, and 72 trainees commenced the Dental Core Training Programmes (DCT1, DCT2 and DCT3), with a fill rate of 100%. In Dental Specialty Training, 21 of the 22 posts across the various specialties were occupied in August 2020, with a 95.5% fill rate.

Six Dental Specialty trainees were registered with HEIW to train on a less than full time (LTFT) basis in August 2020. There were no LTFT trainees on the DFT and DCT schemes in August 2020.

A total of 292 Reviews of Competence Progression (RCPs) were undertaken across Dental Foundation, Dental Core and Dental Specialty training programmes (interim and annual). These RCPs determine whether trainees have made satisfactory progress within their training programmes. Between August 2019 and August 2020,

the following number of trainees were 'signed off' as having satisfactorily completed their training:

- 68 trainees satisfactorily completed Foundation Training
- 62 trainees satisfactorily completed Dental Core Training Programmes (i.e. DCT1, DCT2 and DCT3)
- 11 trainees satisfactorily completed Dental Specialty Training.

#### **7.2.4 Pharmacy**

For 2020-21, the number of HEIW commissioned training posts commenced and ongoing was 340. The breakdown of the posts are as follows:

- 132 Pre-registration Pharmacists -An increase of 39%
- 121 year 1 and year 2 Pre-registration Pharmacy Technicians
- 78 year 1 and year 2 Clinical Diploma Pharmacists

#### **DN14. – Pharmacy asked to provide respective change % figures**

Recruitment to all the above programmes has been strong with a high fill rate. The final fill rate for each programme was:

- Pre-registration Pharmacists 82.5%
- Pre-registration Pharmacy Technicians 92%
- Clinical Diploma 97.5%

During 2020-21, 48 Independent Prescribers (IP) course have been commissioned for community pharmacists from the pharmacy budget. IP courses for hospital pharmacists were commissioned from the non-medical education budget.

Advanced practice commissioning for pharmacy currently sits within the pharmacy and non-medical education budget. In 2022-23, all pharmacy commissioned programmes will be held within the pharmacy budget.

One hundred and twenty-nine advanced practice courses were commissioned from pharmacy budget during 2020-21. The breakdown of course are as follows:

- BTEC Level 4 Professional Diploma in Pharmacy Clinical Services: 10
- HEI 20 credit research module: 15
- HEI Minor ailment modules: 29
- Ear and Eye specific training course for NHS111 staff: 45
- GP Pharmacists transition programme: 30

COVID-19 has impacted on the completion of programmes of learning and the Pharmacy Deanery team has supported learners and tutors/assessors to maintain training progress during the pandemic. The most seriously affected were the 2019-20 intake of pre-registration pharmacists who should have registered in July 2020. The GPhC decided to delay the June 2020 registration assessment and develop an online assessment which will be held in March 2021. Therefore, currently there is no data for the completion of this programme due to the requirement to successfully complete the GPhC registration assessment. However, all 65 HEIW commissioned 2019-20 pre-registration pharmacist trainees did complete their competency sign-off

and were able to move into employment posts as provisional registrants. HEIW has continued to support the provisional registrants until the March GPhC assessment.

### 7.3 Education Commissioning Plans for 2021-22

A significant proportion [DN15. insert % when confirmed] of our recurring budget is spent on the commissioning of health professional education. Through the Strategic Review we have ensured that a Value-based approach as has been taken to the commissioning plan in line with the strategic direction of NHS Wales as well as the need to assure quality and to tackle the immediate supply and training issues.

It is also important to highlight the complexity of the environment in which HEIW works. Whilst the overarching process is a continual cycle of planning, analysis, commissioning and contract management, as can be seen from the diagram below, for a particular intake of trainee or students the process will span and cut across a number of financial and academic years increasing the complexity of arrangements, planning and budget allocations.



Due to the nature of the academic planning cycle the Education Commissioning Plan for 2021-22 has already been approved by Welsh Government and therefore forms an important part of the Annual Plan. In developing the NHS Wales Education Commissioning and Training Plan for 2021-22, HEIW used:

- information from NHS organisations IMTP's and Annual Plans (previous three years),
- workforce modelling and wider available workforce intelligence,
- Welsh Government strategic direction (*A Healthier Wales*) and wider policy requirements,
- capacity within the system to support training/student/trainees,
- opportunities to transform the workforce through innovation/new roles and new ways of working.

This identified the need for a continued increase in investment in education and training across a range of professional and occupational groups. The proposals were supported by a wide range of stakeholders and the increased commissions are outlined in the following sections.

#### 7.3.1 Health Professional Education

The aims of the plan for Health Professional Education are to:

- i. Expand the number of health professional education programmes delivered through part time and shortened programmes
- ii. Increase the proportion of pre-registration nursing places delivered by the part time/distance learning route
- iii. Expand the provision of part time places available to the care home sector.
- iv. Increase the level of investment in both advanced practice to build clinical careers and health care support worker development.

Specialty	From	To	% Increase
Adult Nursing	1,400	1,540	10%
Mental Health Nursing	356	410	15%
Child Nursing	159	175	10%
Midwifery	161	185	15%
Radiotherapy & Oncology	22	26	18%
Dietetics	52	60	15%
Physiotherapy	164	174	6%
Occupational Therapy	163	179	10%
Podiatry	24	27	12%
Paramedics	52	75	44%
Doctorate in Clinical Psychology places	29	32	10%
Healthcare Science: Scientific Training programme	32	37	17%
Higher Specialist Scientific Training Programme	5	8	60%
Healthcare Science: PTP / BMS	24	25	4%

### 7.3.2 Postgraduate Medical Education

Specialty	Agreement
<b>General Practice:</b>	Continue to advertise 160 with option to over recruit should there be sufficient suitable applicants.
<b>Emergency Medicine:</b>	5 additional Higher Training posts (ST3) to address the deficit following the conversion of higher posts to ACCS in previous years 2 additional ACCS posts on the North Wales rotation.
<b>Anaesthetics:</b>	3 additional Higher Training posts to address ongoing and predicted workforce shortages at consultant level.  NB: Due to the impact of the Coronavirus pandemic the planned changes to the Anaesthetics curriculum will now be delayed by one year. As a result of curriculum changes projected requirements for additional posts for

	2021 will now not be required until August 2022 and Anaesthetics will be reviewed again next year.
<b>Intensive Care Medicine:</b>	<p>4 additional Higher Training posts are required to increase our ICM workforce in Wales.</p> <p>The Coronavirus pandemic has highlighted the need to expand and provide critical care capacity; the other 4 nations are planning expansion. ICM requirements to be reviewed again in 2021.</p>
<b>Major Trauma Network</b>	
<b>Plastic Surgery:</b>	2 additional Higher Training posts to support the workforce model for the Major Trauma Centre
<b>General Surgery:</b>	4 additional Higher Training posts in General Surgery to support the workforce model for the Major Trauma Centre; address predicted workforce shortages at consultant level and in response to increased demand and changes to curricula to support cancer treatments.
<b>Trauma &amp; Orthopaedics:</b>	No change required following the increase of 4 trainees from the 2019 intake.
<b>Urology:</b>	4 additional Higher Training posts to support the Cancer agenda and workforce shortages at consultant level.
<b>Neurosurgery:</b>	A reduction of posts in line with trainees completing their training. Reducing the training programme by 1 post over the next year followed by further review.
<b>Paediatrics:</b>	<p>4 additional ST1 posts to address the recommendations of the RCPCH workforce report and feminisation of the workforce which has led to an increase in the numbers of trainees opting for LTFT training resulting in persistent gaps within this training programme and consultants opting to work part time.</p> <p>2 Higher Training Clinical Teaching fellowships to support recruitment and retention within the Paediatrics training programme.</p>
<b>Obstetrics &amp; Gynaecology workforce:</b>	2 additional ST1 posts in response to ' <i>Maternity Care in Wales, a 5 year vision for the future</i> ' and to address attrition during the early years of the training programme.
<b>Community Sexual &amp; Reproductive Health (CSRH):</b>	Specialty to be reviewed in 2021.
<b>Internal Medicine</b>	15 additional Core Training posts to support the changes to the Internal Medicine curriculum and the requirement to maintain the balance between core and higher specialty training. The additional posts will



	ensure there are sufficient core training posts to meet the recommended increase in Higher Training posts.
<b>Acute Medicine:</b>	4 additional Higher Training posts to support the expansion of the Acute Care Physician consultant workforce in this area; Acute Medicine is still a relatively new specialty.
<b>Respiratory Medicine:</b>	2 additional Higher Training posts to support future workforce requirements. The coronavirus pandemic has demonstrated the need for an increase in respiratory physicians.
<b>Gastroenterology:</b>	2 additional Higher Training posts to support future workforce requirements and to support the single cancer pathway work.
<b>Renal Medicine:</b>	No change to training numbers and specialty to be reviewed in 2021.
<b>Diabetes &amp; Endocrinology:</b>	No change to training numbers and specialty to be reviewed in 2021
<b>Medical Oncology:</b>	3 additional Higher Training posts per year for 5 years to support the increased incidence of cancer and the Cancer agenda
<b>Clinical Oncology:</b>	4 additional Higher Training Posts per year for 5 years to support the workforce modelling undertaken by the Royal College of Radiologists and to meet increasing demand for cancer treatments.
<b>Medical Microbiology/Combined Infection Training:</b>	Continue the recommendation from last year's plan of 3 additional posts for 5 years to support the increase in the clinical infection workforce. This would constitute the second year of the increase of 3 additional posts for 5 years.
<b>Clinical Radiology:</b>	To maintain an intake of 20 trainees per annum as agreed last year to maximise the capacity of the Imaging Academy and review again for 2021.

### 7.3.3 Dental

Education	Description
<b>Dental Foundation Training (DFT)</b>	64 DFT places in Wales entered for National Recruitment for 2021 entry.
<b>General Dental Services Core Training (GDSCT)</b>	9 places available for September 2021 entry – 1 in each LHB with 2 in Hywel Dda and Betsi Cadwaladr to address patient need.
<b>Dental Core Training (DCT)</b>	72 posts in total across 3 levels and 4 schemes supporting service while developing career pathways for young dentists.



<b>Dental Specialty Training (DST)</b>	23 posts in total across 8 specialities.
<b>Dental Hygiene</b>	18 places commissioned to train, with expansion of training in North Wales planned.
<b>Dental Therapy</b>	13 places commissioned to train.
<b>Welsh Dental Therapy Foundation Training</b>	10 places available for this programme with intakes in March and September.

### 7.3.4 Pharmacy

<b>Education</b>	<b>Description</b>
<b>Pre-registration Pharmacist programme</b>	125 trainees enrolled on new model of quality assured centrally employed multi-sector training programme for August 2021 start. This is a slight decrease on the final fill of 132 for 2020 intake. This is set against a challenging recruitment platform of a projected average fill across England and Wales of 50%. Training placements in hospital, GP practice and community pharmacies.
<b>Pre-registration Pharmacy Technician Apprenticeships</b>	63 hospital and minimum of 20 community apprenticeships offered in 2021. Percentage of apprenticeships will be offered as multi-sector training posts across hospital, primary care and GP practice.
<b>Access to pre-registration pharmacy technician apprenticeships</b>	Commission modules of learning to support up to 100 existing pharmacy staff to gain the necessary qualifications to apply for pre-registration technician training.
<b>Clinical Diploma</b>	40 clinical diploma hospital pharmacists two-year training posts funded.
<b>Transition Programme: GP practice pharmacists</b>	30 GP practice pharmacists to be enrolled on transition programme. Supportive programme to provide skills, competence and confidence to practice effectively within GP practice team.
<b>Independent prescribing</b>	100 community pharmacists offered training to support increase in community pharmacy professional services.
<b>Advance Practice</b>	Increase the competency of the existing pharmacy workforce through a range of courses targeted to transform service delivery.
<b>Foundation Pharmacist Practice- post-registration</b>	Develop and deliver a new programme of learning for emerging registrants which meets the skill gaps between existing and new initial education and training standards.

**NVQ level 2  
apprenticeships**

Support the NHS to offer increasing numbers of NVQ level 2 apprenticeships to healthcare support staff.

## Chapter 8 – The HEIW Workforce

### 8.1 Developing our people and organisation

Our people are our most valuable asset. HEIW's aspiration is to be an excellent employer and great organisation to work for. This has been a strategic aim since we were created in 2018, and we continue to develop our People, Inclusion and Organisational Development practices to enable us to achieve this aspiration.

It is essential that we have a motivated, engaged and sustainable workforce that is competent, confident and with the appropriate capacity to deliver HEIW's future priorities in support of NHS Wales' delivery of excellent health care provision. We will continue to support our existing staff, and work to be attractive to our future workforce as our organisation matures and grows.

We will continue to embed our diversity, equality and inclusion agenda which is informed by strong leadership, co-production, collaboration and direct engagement with those who are affected by the decisions we make. We will progress this through ongoing communication and engagement with staff, stakeholders and their representatives to inform our future plans. This includes our strong encouragement and facilitation of the use of the Welsh language in our business and in our staff wellbeing and engagement activities.

Our organisational values and behaviours framework which was developed in partnership with all staff during 2018 underpins all of our business, key examples of which may be found in our Recruitment and Selection processes, Performance Appraisal and Development Review and our Health and Wellbeing programmes.

Prior to the impact of the pandemic in early 2020, we had introduced a range of bespoke communications to reflect the geographical diversity of our workforce, particularly our sessional remote workers. The pandemic led to a rapid change in HEIW's operating model that has meant that home working has become the norm for all staff including those based at Ty Dysgu. This has led to the use of virtual technology for day to day communication being embedded in the way all HEIW staff work and has improved communications with our sessional staff. In the course of 2021 with a lessening of pandemic restrictions, we will review the operating model for HEIW with a view to moving to a blended model which optimises the use of virtual technology and therefore maintaining the communication gains while re-introducing the daily norms of face to face contact for individuals and teams.

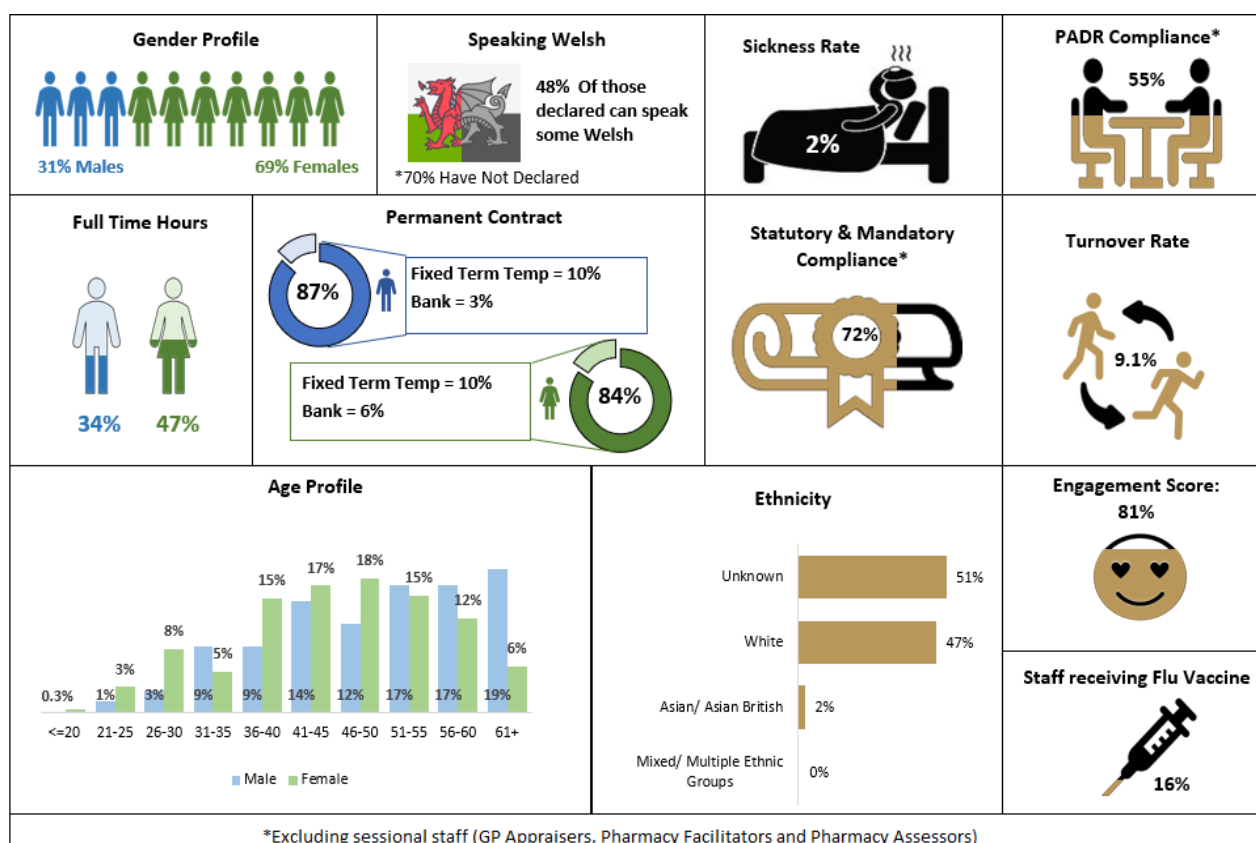
### 8.2 Shape of our workforce

When HEIW was established in October 2018, we brought together staff from 3 former organisations – Workforce Education and Development Service, Wales Deanery and the Wales Centre for Pharmacy Professional Education. At this point there were 92% of HEIW staff on Cardiff University Terms and Conditions who transferred to HEIW under *Transfer of Undertakings (Protection of Employment) Regulations* (TUPE) arrangements. This was a significant challenge for the People Team, who needed to be familiar with two complex sets of employment terms and conditions on a daily basis. Many of the transferred Cardiff University staff are Medical and Dental staff where the terms and conditions, with some variations, essentially mirror NHS terms. However, the non-medical and dental transferred staff continue to be on significantly different contractual terms although the numbers have

reduced owing to turnover since October 2018. Currently 21% of non-medical and dental staff remain on Cardiff University contractual terms.

Our long-term plan is to harmonise terms and conditions across the organisation, and we are working in partnership with our Trade Union colleagues to progress this. In 2020, following consultation with staff and Trade Unions, Statutes and Ordinances, a Cardiff University set of policies that applied to senior staff and that related to disciplinary and grievance processes, were removed and replaced by the HEIW policies. In early 2021 we are commencing a process to rationalise large numbers of Cardiff University policies where there is no detriment and often benefit to moving to the HEIW equivalents. Former Cardiff University staff have been awarded a pay increase in line with Agenda for Change staff. All newly appointed staff are employed on NHS Terms and Conditions, and staff who wish to transfer from existing University contracts are supported to do so.

Our current staff profile at the time of writing (January 2021) is shown below:



### 8.3 Workforce Measures

Figures as at 30 November 2020 are:

- 69% of HEIW's workforce are female - an increase of 2%
- Of the total workforce 57% work less than full time - a 12% reduction on last year. This will include nearly 50% of our workforce who are employed on a sessional basis with HEIW (e.g. GP appraisers) and hold substantive employment elsewhere.
- HEIW's sickness absence rate is 2.04% and continues a positive reducing trend.
- The compliance rate of Statutory and Mandatory training for core staff (excluding those with main employment in other NHS Wales organisations) is 72% and is a positive increase on last year (65%).

- 55% of Personal Appraisal Development Reviews (PADR) for core staff have been entered into ESR, an increase of 15% since Autumn 2019.

#### **8.4 Future Priorities**

HEIW was launched following a strong Organisational Development work programme with engagement across the three previous organisations. This continued through local and national engagement with staff to inform the development of our People, Inclusion and Organisational Development strategy and included a culture group with representatives from all teams at Ty Dysgu. However, although the development of the strategy has been progressed, the impact of the pandemic on organisational priorities has meant that finalisation and implementation has been delayed to Spring 2021 and will therefore be a priority for 2021.

HEIW has grown substantially since October 2018, both via TUPE transfers such as the Nurse Staffing, Healthcare Science and AHP teams, and internal service growth particularly across the Digital team and the Nurse/AHP/Healthcare Science Transformation programmes. A priority for 2021 will be the creation of a detailed Workforce Plan and planning process that encompasses planned developments and growth and horizon scanning.

As an exemplar organisation, we value our approach to onboarding and supporting new staff. Since March 2020 we invited all new staff to join our Newcomers Network which helped to ensure that our workplace culture continued although we have not been onsite at Ty Dysgu. The group will have a pivotal role in helping to shape a transition back to Ty Dysgu for both new and existing staff at the appropriate time in 2021.

Since March 2020, HEIW has implemented innovative ways to engage and measure staff satisfaction and wellbeing. This includes four homeworking and wellbeing surveys, two health needs assessments and our second national staff survey which received an engagement score of 81%. It was the second highest in Wales behind NWIS (82%). Facilitated conversations are taking place across all teams and directorates. Additionally, all Heads of Departments have participated in a 360 review.

As part of our Organisational Development journey, we have developed key performance metrics. This will increase in sophistication during 2020-23 as we create and develop our Centre of Excellence for internal data and analytics, bringing together all our quality metrics and performance information relating to our workforce so that we can provide a holistic and comprehensive picture of our organisational performance and inform the priorities for OD interventions.

As an exemplar organisation, HEIW is exploring the use of the Investors in People diagnostic tool to help us with our continuous development. With the review of the management competencies across the NHS, HEIW will be rolling out specific management development for new and aspiring managers based on inclusive and compassionate leadership.

#### **8.5 Attraction, recruitment and selection**

We are an inclusive employer and want to ensure we recruit the best people, with the right values and behaviours into HEIW. To support this, we want our recruitment

experience to be excellent for all prospective employees from their first contact with HEIW.

During 2021-2023 we will use a variety of attraction methods to advertise our vacancies and use values-based recruitment across all areas. We have commenced this journey and continue to roll out recruitment and selection training to managers, which also now includes an introduction to Recruitment and Selection, Advanced training and training on unconscious bias. In addition, we will be rolling out training for staff to help them prepare for applying for vacancies and this links in with the organisational initiatives around talent management and succession planning.

We know that around 80% of our future workforce are with us today. Therefore, we want to ensure that our staff feel included, valued, informed and that their wellbeing is supported. As an organisation with a primary purpose in current and future workforce development, it is vital that our own staff have excellent experience in this area. We must therefore provide excellent opportunities to develop our HEIW people and ensure they are able to enhance their skills and knowledge within their current career pathway, or to gain additional or alternative skills to help them move to an alternative pathway.

Key to this is our Performance Appraisal and Development Review (PADR) policy and procedure. This is now embedded and in 2020 a 360° assessment process was also introduced. During the PADR staff have the opportunity to discuss their progress against their agreed objectives with their line manager, develop ongoing objectives and create and agree a personal development plan to enable ongoing personal and professional development. Medical staff take part in the medical appraisal and job planning process.

All HEIW staff are required to complete the All-Wales mandatory training in line with NHS Wales Health Boards and Trusts. We are currently reporting 72% compliance and are working with managers to ensure that we meet the 85% target as soon as possible.

We are building a health and social care leadership and succession framework as an integral part of the *Workforce Strategy for Health and Social Care*. As such there are key elements within this that will be available for HEIW staff. An internal group has been established and is currently developing a framework to support leadership and management development, together with succession planning/talent management for HEIW. This will be progressed throughout 2021-23.

Our relationships with our Trade Union partners is extremely positive. We have an established Partnership Forum which meets bi-monthly and has been well supported by our trade union representatives. We have invited union colleagues to HEIW to deliver clinics to meet staff and talk about union membership, any issues they may have and how union membership can benefit them. We will continue to do this and look forward to supporting our union colleagues as they recruit stewards from HEIW.

Our ability to deliver our Annual Plan will depend on the capability and capacity of our most important asset, our people and as described in Chapter 1 we will be continuing to grow our capacity and capability in 2021-22.

DN 16. Section to be inserted on planned increase in headcount, WTE and skills when agreed in February, integrated with the Strategic Objectives, enablers and finance plan.

## 8.6 Equality, Diversity and Inclusion

HEIW has continued to embed the progress made since April 2019, in relation to our diversity, equality and inclusion agenda. Starting with the publication of our first Diversity, Equality and Inclusion policy early in 2020. Our first *Strategic Equality Plan (2020-2024)* was published on the 1 October 2020. During the latter part of the year, the Directorates have been developing specific action plans which deliver the high level actions in our Strategic Equality Plan.

In our aspiration to be an excellent employer and a great place to work, HEIW has committed to developing Workplace Champions. They offer peer support and provide an internal health check and insight into organisational climate. We continue to engage with external partners to provide impartial review of our policies and practices to ensure alignment with national standards in respect of equality, diversity and inclusion as follows:

- Stonewall Diversity Champion - tackling barriers and inequalities faced by lesbian, gay, bisexual and transgender staff
- Disability Confident – supporting HEIW to make the most of the talents that disabled people can bring to your workplace
- Dying to Work TUC – additional employment protection for terminally ill workers
- Anti-Violence Collaboration - sets out the responsibilities of the partners when dealing with violent or aggressive incidents relating to NHS staff
- Communication Access Symbol – HEIW was the first organisation in Wales to make a commitment to adopting Communication Access Symbol – giving a voice to people living with a communication disability.

HEIW produced the Domestic Abuse Policy in November to mark White Ribbon Day and the Mental Wellbeing in the Workplace policy. Both were developed with significant staff input.

During the course of 2021, we plan to undertake the national review and revision of the online NHS mandatory training 'Treat Me Fairly' programme. Teams will continue to implement the SEP actions across organisation. Work is going to commence on the development of Transitioning at Work Policy and the development of the Inclusion role to include medical trainees. There will be further development of Equality and Diversity training packages. Given the importance of this area we have included a specific objective with further detail in **Strategic Objective 5.4 [DN17, numbering to be checked in final Plan]**.

## 8.7 HEIW workforce: communications and engagement

Effective communications and engagement are the golden thread running through everything that the organisation does. The COVID-19 pandemic meant that our staff switched to a remote-working model and have quickly adapted the way communications and engagement is undertaken across the organisation and we will retain many of these new ways of working in the future. These have included:

- Launching Microsoft Teams to enable colleagues to keep in touch, attend team and project meetings and share files quickly and easily in a safe way;
- In COVID-19 wave 1 producing a weekly staff message issued by email and intranet to keep staff up to date on what was happening in relation to COVID-19 nationally and across the organisation;
- Developing an online staff community to enable coffee catchups and watercooler conversations to continue;
- Issuing online health and wellbeing resources and links to external advice and guidance;
- Issuing regular online surveys to monitor health and wellbeing;
- Maintaining staff education and training by moving sessions online;
- Moving wellbeing sessions online;
- Moving HEIW corporate induction for new staff online and into smaller session;
- Moving our monthly staff open forum to Teams providing a monthly opportunity to get together virtually as an organisation;
- Moving staff events online with Teams;
- Continuing to consult and engage with colleagues on shaping policies and strategies via online surveys and feedback sessions;
- Introducing training on webinars and virtual classrooms to further enable online team meetings and external events;
- In COVID-19 wave 2 increasing our online staff open forums to fortnightly, and
- In line with regulations and guidance when appropriate providing safe access to our offices for business and wellbeing support.



## Chapter 9 – Our enabling and corporate functions, risk and governance

Our enabling and corporate functions play a vital role in supporting the organisation to deliver the Strategic Aims and Objectives described within this Annual Plan as well as working with our colleagues in the wider NHS.

### 9.1 Communicating effectively with people, partners and the public

As an All-Wales strategic organisation, close working with our partners and stakeholders is essential to the way we undertake our business. This includes trainees and students, NHS Wales, Social Care Wales, education providers, regulators, private sector businesses, voluntary sector, professional bodies, the public and Welsh Government. During 2020-21 our communications, engagement and partnership working has been even more important as we work together to meet the challenges presented to us by Covid-19.

As described in Chapter 2, our pandemic response included carrying out immediate actions to support the wider NHS and to minimise the impact on education, training and the workforce of the future. All of this entailed integrated working and innovation in partnership with regulators, other statutory education bodies, education providers, Welsh Government and our colleagues across NHS Wales. In addition, we worked closely with the NHS Wales staff health and wellbeing network, Third Sector partners and Welsh Government to ensure health and social care staff have effective health and wellbeing support during these difficult times. We also worked with partners to create resources for NHS staff to help them care for patients and meet service demands, including [workforce planning resources](#) and [rehabilitation resources](#).

In early May 2019, we launched the 'HEIW Roadshows' visiting Health Boards and Trusts across Wales to meet with healthcare trainees, students, educators and those responsible for education. Due to the pandemic, we were not able to continue the Roadshows in person this year, but we moved several of our information and engagement events online to ensure that partners continued to have the opportunity to hear about what we are doing and help shape key national workforce and education programmes.

To maintain openness and transparency our Board meetings and Annual General Meeting have been held in public and online, plus we have held larger virtual events such as:

- the [Informing the future of the Mental Health Workforce in Wales conference](#). A joint virtual conference with Social Care Wales bringing together people from across the mental health workforce to share best practice and influence the shape of the future mental health workforce.
- Talentbury – a four-day virtual festival of leadership and learning for emerging executive leaders in NHS Wales.
- the Education and Training in Primary and Community Care conference aimed at helping to set the direction and shape of future primary and community care education and training.
- Innovation in Challenging Times conference - bringing together medical trainers, trainees and others with an interest in quality improvement to build on and share the new innovative ways of working, learning and training brought about by the pandemic.

Further partnership and engagement activities this year have included:

- Regular stakeholder bulletins including COVID-19 specific updates.
- Social media to inform and update on HEIW work as well as support national COVID-19 messaging.
- Regular workshops, meetings and virtual working groups to inform and involve everyone in discussions on key topics and shape ongoing HEIW work including:
  - development of the annual education and commissioning plan
  - informing the development of our Annual Plan to ensure it is shaped to meet the needs of the NHS workforce and services across Wales
  - how we could support partners with their response to Covid-19.
- Participation in national boards and all Wales peer network groups.
- Collaboration and co-production of Wales's first Public Body Equality Partnership to develop and delivery Wales' first shared Strategic Equality Plan across public sector bodies.
- Extensive engagement of the strategic review of health professional education.
- Virtual showcase events.
- Virtual consultation on key agenda items such as Welsh Language Scheme and Leadership Principles.
- Trainee webinars, newsletters and regular messages from the Postgraduate Dean.
- Revising face-to-face CPD modules and workshops to be delivered effectively online.
- Guest blogs from partners across Wales highlighting contributions to the COVID-19 response as well as highlighting careers in the NHS.

Working together, understanding each other's needs and how we can best support each other is critical if we are to succeed as individual organisations and as a system. To achieve this, we will continue to innovate, collaborate, communicate, engage and work closely with our partners, stakeholders and the public. We will continue to use many of our new ways of working and will adapt when and how we engage in line with the current pandemic and the commitments of partners.

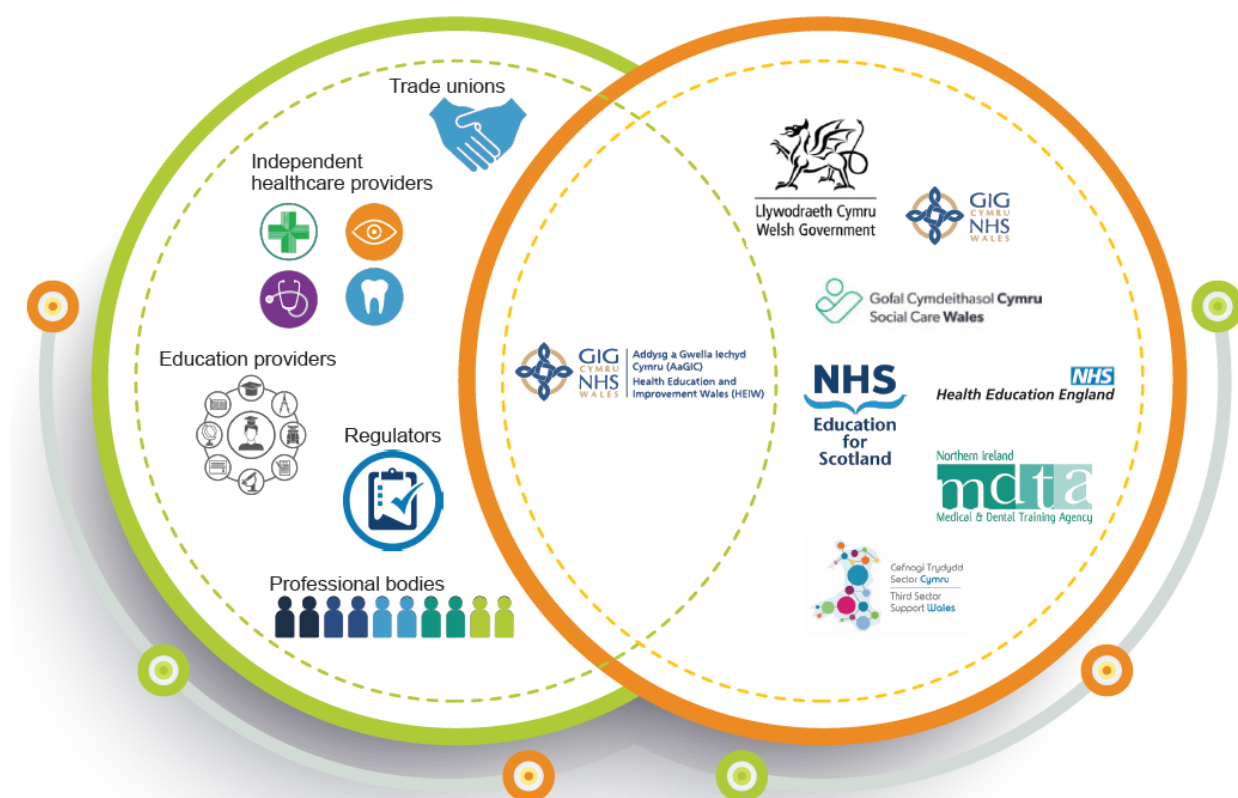
Our organisational structures within HEIW promote integration and collaboration with NHS Wales. This might involve collaboration through matrix working to join up team members from separate departments with external networking for the purpose of sharing information or joint working with colleagues from other NHS organisations to deliver services or working in partnership with other organisations and public bodies such as Social Care Wales.

Through collaboration, we build successful relationships based on shared goals, shared knowledge, building mutual respect and strong communication which is frequent, timely, accurate and focussed on problem-solving. Successful collaboration is based on the effectiveness of the relational co-ordination of the quality of the communication which depends on the quality of the relationship.

A new Strategic Objective has been included in the Annual Plan to review our current plans for communication and collaboration and to undertake an organisational network analysis that will enable us to design relevant interventions with others to continue to improve our approach to collaboration.

The diagram that follows shows the many partners with whom we collaborate and the complex relationships that we nurture and foster.

## HEIW and our partners



### 9.2 Data analytics and intelligence

During 2020-21 we plan to develop our workforce intelligence support to improve the quality of workforce planning and modelling in Wales (Strategic Objective 1.6). Internally within HEIW the workforce intelligence team will provide analytical support with data, baseline modelling, corporate performance reporting and dashboard improvement.

In terms of corporate and business reporting, the analytics team maintain the local ESR system and work collaboratively with the Finance team to ensure accuracy on reporting of vacancies and resources. As data controllers of ESR, the team supports the whole organisation with ESR related issues and provide reports and analysis across HEIW. From 2020 onwards, the team has been bringing together a range of performance related data in one place to give HEIW deeper understanding of its business and enable more intelligence-led decision-making and this will continue to be developed in the context of the agreed Performance Framework. The team will also implement a training programme to enable staff to become digitally astute in the use of Microsoft Office.

### 9.3 Digital and information systems

The digital team is heavily involved in supporting the delivery of several Objectives outlined in this Annual Plan. In 2020-21 we will undertake the scoping, design and development of an integrated digital platform for NHS Wales which will result in a single portal to access all HEIW services (Strategic Objective 1.5). We will also scope the development and implementation of a digital capability framework (Strategic Objective 2.12).

The digital team will continue to provide advice and support for the development, integration and procurement of new digital solutions for the organisation (e.g. the new Course Management System for HEIW). The team will also take a leading role to ensure that HEIW makes use of current, emerging and future technologies to their fullest potential in the context of enhancing learning, teaching and training.

Working collaboratively with NWIS, the digital team will increase our capacity and capability to ensure the resilience and security of the network, print, telephone and compute infrastructure and will develop and implement standards and frameworks to improve service management and delivery.

Aligned to our equality and inclusion work, HEIW is actively taking forward its obligations in relation to the website accessibility regulations which came into force in September 2018. The regulations mean that public sector bodies now have a legal obligation to meet accessibility requirements for their websites and web applications and this work is actively being undertaken and will form a fundamental element of work during the year.

#### **9.4 Ensuring a safe, sustainable and appropriate working environment**

The Planning, Performance and Corporate Services Team will continue to contribute to the Strategic Aims and Objectives of the organisation, in particular to Strategic Aim 5: *to be an exemplar employer and a great place to work*. As Ty Dysgu is the main headquarters of the organisation, the team continues to ensure the provision of facilities and equipment and to ensure that the environment is as inclusive as possible for all staff. As remote working has become the norm, the organisation will develop a blended workforce model that builds on feedback from our staff whilst also underpinning our ongoing organisational development.

The organisation will continue to ensure that our staff are safe wherever they are undertaking work on behalf of HEIW and regardless of where their base may be. The Health and Safety Policy and supporting procedures are in place and have been cascaded to our HEIW workforce via the staff intranet and for new staff via the corporate induction. The Health and Safety Committee meets quarterly and reports to the Executive Team.

#### **9.5 Planning and Performance**

Planning and performance arrangements are in place to enable HEIW to achieve our Strategic Aims and to measure our progress and delivery of our business activities.

##### **9.5.1 Planning**

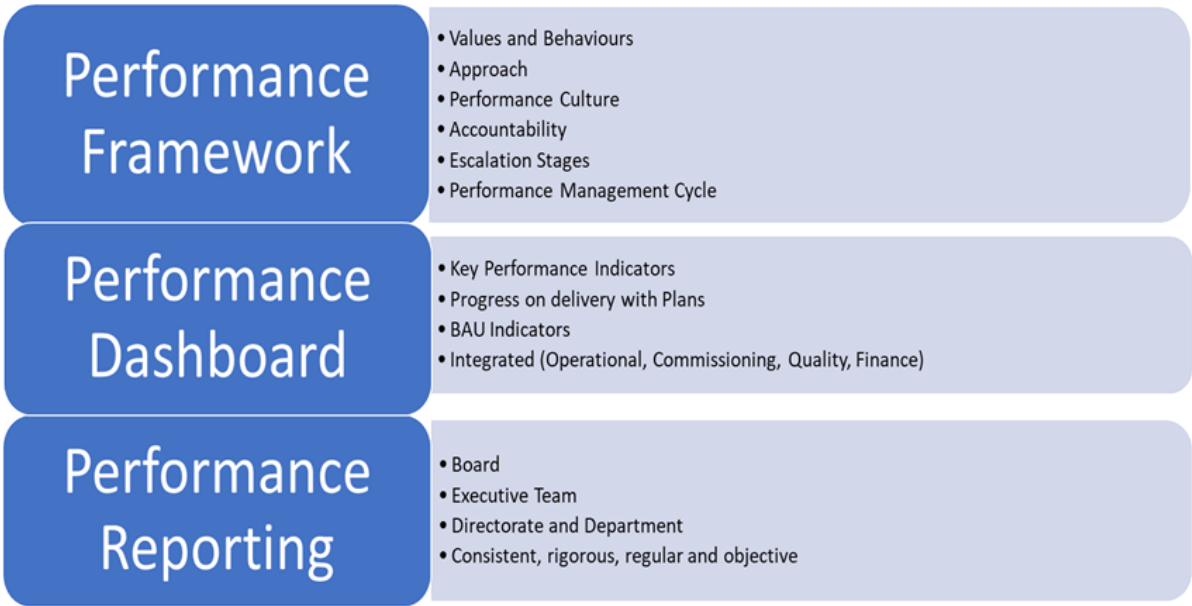
In 2020 the organisation appointed a new Director of Planning, Performance and Corporate Services and we are building on the work done to date to continuously improve our planning approach and practice. This includes our strategic, operational and business planning. We are developing approaches to supporting teams in the development of departmental delivery plans as well as internal and strategic business cases, ensuring that strong cases are developed that clearly identify the value and benefits that the investment will achieve. In 2021 we will be implementing a systematic approach to programme management and benefits management and supporting this with a digital planning system. This will also support our strategic planning and performance monitoring and our ongoing focus on value and outcomes.

In 2020 we revised our Business Continuity Plan and our crisis response arrangements will remain in place as required during the COVID-19 pandemic.

**9.5.2 Performance**

The Structured Assessment for 2020 noted that that was good assurance on the monitoring of the delivery of our Plans. However, we are committed to developing a compassionate and collective culture that is underpinned by effective performance management and a focus on improvement. Given the specific nature of our role as a strategic organisation and the demands placed on us by the UK regulators, we are taking a proportionate approach and we largely measure and monitor a different set of performance indicators to the rest of NHS Wales. Our reporting cycle is also different, with a greater focus on academic cycles, annual and quarterly timescales rather than the daily, weekly and monthly beat of other NHS organisations.

We routinely provide our Board with the Performance Dashboard and reports, providing them with assurance on the delivery of our strategic plan, the progress of projects and programmes and core business delivery. From January 2020 this will move to a quarterly reporting cycle. In 2020 we will also agree and publish a Performance Framework which describes the organisation’s system for making continuous improvements to achieve our Strategic Aims and Objectives and to deliver our ‘Business As Usual’ activities effectively, as shown below.



Our revised approach will further support and embed our service review process where the Executive Team holds biannual service review meetings with senior leaders and their teams to review the progress of key projects or programmes of work, to help remove any barriers and offer support and guidance where required. In addition our approach will align with the biannual JET meetings and the Quality and Delivery meetings with Welsh Government.

**9.6 Professional Support Unit**

The Professional Support Unit (PSU) is an enabling function for NHS Wales and sits within HEIW. Its role is to provide proactive and comprehensive support and guidance to doctors, dentists and trainers to enable progression in training. Through 1:1 coaching, the team works with the trainee to identify objectives for resolving

training and personal concerns to mitigate the impact on trainee progress or patient safety.

In more complex circumstances, the team refer the trainee to a specialist support service to improve well-being and performance. This specialist support is provided by Hammett Street Consultants as part of a formal service level agreement. The range of support includes:

Wellbeing / Physical Health / Mental Health	Time Management / Personal Organisation
Personal / Professional Issues	Decision Making / Problem Solving
Assertiveness / Confidence	Leadership / Team Working
Examination Issues / Study Skills	Communication / Language Skills

Assessment for Dyslexia Assessment is outsourced on case by case basis to local specialist providers.

An integral part of core work for the PSU is the production and delivery of workshops on topics to support trainees and trainers. The sessions aid understanding of the purpose of support and, as a result of better understanding, the rate of referrals and demand has increased significantly. The PSU strive for proactive interventions to minimise adverse effects on training, personal lives and ultimately patients. Data such as referral trends, outcomes and ARCP progress, demonstrates the positive impact the PSU is having on training outcomes and retention. Evidence shows that 90% of trainees supported by the PSU progress with positive outcomes (ARCP Outcome 1 or 6). In other cases, a trainee might decide to leave their training programme, and this can also be a positive outcome for the individual.

PSU works across HEIW, e.g. Differential Attainment Board, Workforce Equality and Inclusion Unit, Quality Unit and the training programmes to understand and improve outcomes for HEIW trainees. In support of the Differential Attainment Board, during the coming year we will be collecting data and information on this specifically. As well as continuing to reinforce the key role that education supervisors, faculty leads, and heads of school have in supporting trainees.

Within Wales the PSU shares best practice guidance and information with all parties involved in postgraduate medical and dental training. The creation of HEIW has provided an opportunity to explore how the learning and evidence from the work of the PSU can be used to inform the commissioning and development of our education programmes and approaches to training, and this will also be a priority for us in the next year. There is a PSU in each of the four countries of the UK and we believe that the Wales PSU leads the way with an innovative and proactive service, contributing widely to the medical and dental education authorities nationally and internationally.

**9.7 Revalidation Support Unit**

The aim of the Revalidation Support Unit (RSU) is to support and improve professional standards for healthcare professionals through Continuing Professional Development, appraisal and revalidation. The Unit is a core function within HEIW and works closely with stakeholders including Welsh Government, the regulators and Health Boards to deliver high quality, professionally led systems and resources. The

Unit also works in partnership with teams across HEIW, in particular the HEIW digital team which maintains the IT systems to support activity. Our responsibilities include:

- Management of a suite of online resources to support staff and Health Boards through appraisal and revalidation, including the Medical Appraisal Revalidation system (MARS), the Orbit360 patient and colleague feedback system, the Dental Appraisal System (DAS) and the Wales Professional Review for Optometry (WPRO).
- Delivery of CPD events, training, online modules and resources
- Management of the 3D Programme: Discovering, Developing and Delivering in Healthcare.
- Management of the GP Appraisal Process in Wales.
- Leading on a programme of quality management activities and all Wales groups and networks that oversee medical appraisal and revalidation, in order to facilitate a consistent approach to policies, guidance and quality improvement.

The Unit's focus during 2019-20 has been to respond to needs of the workforce and to provide support throughout the COVID-19 pandemic. Key activity includes:

- Releasing over 120 sessions to support Primary Care services across Wales following the GMC's temporary suspension of the Revalidation Process, and the CMO's recommendation to suspend the medical appraisal process in Wales in March 2020.
- Recommencement of the medical appraisal process with a focus on wellbeing from 1st October 2020 in alignment with the four nations.
- Development of new online resources on returning to appraisal, virtual working and mental health
- Adapting to a virtual delivery model to maintain our CPD provision and key functions

The Unit's priorities over the next 12 months are to continue to provide a high quality service, to remain responsive to the needs of the workforce and to provide support through wellbeing focussed appraisal.

## **9.8 Research, Evaluation and Value**

Research and evaluation is a key component in supporting HEIW achieve its vision. HEIW's priorities as defined in the Annual Plan 2021-22 identify evidence-based decision making, promotion of innovation, new initiatives and engagement in continuous evaluation and improvement as the foundation for high quality, accessible healthcare services in Wales. Research and Evaluation are key enablers for these organisational aims and to ensure that we continuously improve quality, enhance our processes for investment in the NHS Wales workforce and provide the evidence base for the decisions we make in planning for our current and future workforce. It is also key to determining the impact that our activity has on the healthcare workforce, practice and ultimately, patient care and safety.

Relevant evaluation frameworks will be constructed to meet the organisational aims and enable us to determine the extent to which initiatives and schemes resonate with the six Strategic Aims and contribute to the transformation of the workforce for *A Healthier Wales*.



Evaluation frameworks will be developed to enable both summative and formative approach to be employed, and result in assessments of effectiveness and cost-effectiveness, along with the identification of process related factors that contribute to success. The frameworks will also provide opportunity for us to inform the nature and scope of the evaluations and to secure agreement with relevant stakeholders as to the nature of the proposed outcome measures.

Undertaking this work will enable HEIW to actively promote our activities and innovative approaches to education and training and support best practice and learning across national and international forums and through publications in peer-reviewed articles. All of which will support the promotion of Wales as a destination of choice for healthcare professional training and enhance the reputation of HEIW as an innovative, forward thinking organisation.

### **9.9 Improvement, Innovation and Transformation**

In HEIW, our philosophy is that improvement is seen as core to our agenda and throughout all the work that we do. We will be rolling out improvement training as part of the Improving Quality Together programme and alongside this, we will provide development to support change management with particular reference to cultural change when progressing improvement programmes. We also have plans to develop an approach to facilitate and embed research and evaluation to multiple areas of our work. This will focus our attention on measuring the impact, supporting innovation and improvement activity, driving up quality and adding value.

In many areas of our work there are innovative solutions being developed and applied to help resolve system wide issues. Many examples of innovation can be found throughout our Annual Plan, particularly around our themes relating to education and training and supporting quality and safety. The Strategic Review of Education will help to influence the content of education provision here in Wales and is something that hasn't been done elsewhere in the UK. The work being undertaken with partners to roll out of new educational frameworks, workforce models, guidance, roles/extended skills are further examples of our innovative work. Our ability to embed our model of compassionate leadership and succession planning work across NHS Wales is unique here in Wales.

We have developed innovative ways of training (including the Longitudinal Integrated Foundation Training programme) and will use simulation and clinical skills training in the interprofessional workforce development area to, for example, find safe alternatives to face to face training.

We are also going to be utilising new technology to support areas of our work. For example, under the theme relating to a Sustainable Workforce we will be scoping the development of a Wellbeing in Work Impact Resource (WiWIR) and associated toolkit, which assesses the health and wellbeing indicators at the design stage (e.g. job descriptions, care pathways, shift patterns, buildings, services etc). This has not been done previously and is ground-breaking in its approach. We will also be exploring ways to better use our simulation equipment across Wales.

### **9.10 Organisational Risk and Governance**

As an organisation we adhere to the HEIW risk management policy and maintain a risk management system which enables and empowers staff to identify, assess and manage risks to HEIW. Strategic risks are monitored by the Board and managed by



the Executive Team and operational risks are managed by teams at the most appropriate level. This enables HEIW to have clear visibility in what might prevent us from delivering our Strategic Aims and Objectives. Since October 2018, new governance arrangements for managing our Strategic Aims and Objectives have been established.

During 2020 HEIW's Board has focussed further on the development of our approach to strategic risk. The updated Risk Management Policy was approved at July Board and HEIW's Strategic Risks confirmed as part of the organisation's Board Assurance Framework at November Board. HEIW's Risk Appetite approach was considered at a Board Development Session in December and is expected to be approved at January Board.

Our risk management policy and practice is currently being assessed by our internal auditors. Our Audit and Assurance Committee reviews the Corporate Risk Register on a quarterly basis. At the time of writing there is a sole Red-rated risk (relating to cyber-security) on the Corporate Risk Register and the Plan respond to this through Strategic Objective 5.8.

Following submission of the Annual Plan into Welsh Government at the end of January, the Executive and Senior Leadership Team will be focussing on developing the project and programme plans to support delivery of key actions, as well as articulating the risks and mitigating actions for each objective. HEIW's Corporate Risk Register will be amended in line with the Annual Plan in readiness for the start of the new financial year taking account of the agreed risk appetite.

While innovation requires an appetite for risk this does mean that there is a risk that a project or programme might fail. By taking a well-informed, evidence-based approach to decision making, and operating a risk management approach, we will ensure that any issues relating to the delivery of any Objectives are flagged early and responded to appropriately.

## Chapter 10 – Financial Plan

### 10.1 Our approach

The HEIW Financial Plan is designed to enable the programmes and activities established by the Board, in response to our vision of *Transforming the Workforce for A Healthier Wales*, to be taken forward. The identified funding requirement is for the range of functions and programmes agreed with Welsh Government and will be appropriately managed to achieve financial balance in each and every year of the financial plan. The plan recognises that the ‘quadruple aims’ approach of Improving Health, Enhancing Quality and Access, Higher Value Care and a Motivated and Sustainable Workforce, go hand in hand with achieving good value in the use of public money. The HEIW financial plan has also been designed to support the ambitions articulated in the 6 Strategic Aims, which in turn align with *A Healthier Wales* and the Wellbeing of Future Generations Act.

Delivering value in the use of public money is an important requirement and HEIW will demonstrate value and sustainability of its programmes and activities over the life of the Annual Plan by:

#### **Leadership**

- Clear and effective leadership by the Executive Team.
- Timely planning, monitoring, support and action by the Finance Team.
- Integrated working with all Executives, Senior Leaders, Budget Holders and Departments
- Visible and timely intervention and interaction by all Executives, Senior Leaders and Budget Holders.
- Interrogation and collaboration of strategies, plans and approaches with our sister organisations across the UK.

#### **Using a Value-Based Approach to Commissioning and Development activities**

- Developing a value-based approach to articulate the system benefits of investing resources in Education and Training.
- Developing a robust approach to business case development.

#### **Strong Discipline**

- Disciplined financial management of all expenditure commitments.
- Continuous and detailed monitoring and management of the financial position.
- Timely corrective response to any variation from plan.
- Adherence to standards and governance requirements.

#### **Ensuring excellent Assurance and Governance**

- Effective budget holder engagement to deliver the Plan and management of budgets.
- Provision of high quality, accurate and timely financial advice for budget holders, the Executive team and HEIW Board.
- Expert support and technical advice to budget holders to enable the development of robust plans and business cases.
- Continuous evaluation of systems to identify areas for improvement and timely actions in response to audit recommendations.

#### **Engagement with Budget Holders**

- Finance team will provide regular timely and informative reports and support for budget holders.
- Promotion of financial behaviours that encourage, incentivise and add value.

### **Using available tools to demonstrate efficient use of resources where appropriate**

- Relevant and timely Performance Reporting aligned to the organisation's Performance Framework.
- Use of relevant NHS Benchmarking.
- Application of Efficiency Framework where possible.

HEIW agreed a three-year IMTP with Welsh Government for the 2020-21 to 2022-23 financial years. The Financial Plan within the IMTP presented the resource requirements and deployment over an extended 5-year time frame, in order to ensure that the timescales of the current agreed programmes and those envisaged were presented over their full annual cost commitment. It is important that the scale of the stepped commitment over the phasing of programmes is understood since the cost increases can be substantial when the additional student/trainee numbers commissioned progress through all the years of their education and training.

The process of developing the financial plan to date has involved detailed review with individual budget holders of their 2020-21 budgets, which were set following agreement of the 2020-21 to 2022-23 IMTP. The emerging in-year financial position and year-end outturn forecast as at month six was also considered in establishing the new-year starting base. Due to the inherent complexity involved in pay modelling, the exercise has been carried out centrally within the Finance Team, but budget holders have been able to subsequently review their proposed budgeted establishment for accuracy.

All agreed business cases and increases in commissioning budgets that have the approval of Welsh Government or are part of the NHS Wales Education Commissioning and Training Plan 2021-22 have been included. Budget holders were also asked to include within the planning template essential requests for additional funding that may be required to fully deliver the Strategic Objectives set out in within this Annual Plan and the enabling corporate requirements. The resource requirements of these have not been and included within the Plan as yet and will be incorporated into the final version when they are agreed.

The key Pay and Inflation assumptions within the financial plan are as follows:

- Following the end of the 3 year pay agreement (ending 2020/21) for NHS staff an inflationary uplift of 1% on pay scales has been applied for future years.
- A 1% uplift on Cardiff University pay scales has been applied based on current rates.
- A 2.8% uplift on DDRB pay scales has been applied based on current rates.
- A 1% inflationary uplift on non-pay budgets has been applied.

## **10.2 Developments and Investments**

Through the process of developing the Annual Plan, developments and potential investment to deliver the Plan are being identified through the Plans on a Page approach. The resource requirements of these will be costed and incorporated into the final version when they are agreed.

#### **10.4 Financial Risks and Opportunities**

The financial plan is being developed with the best available information and within the existing policy environment. The assumptions made in developing the financial plan will be clearly set out in the final version. There is some uncertainty on the scale and length of the impact of the COVID-19 pandemic on the educational and training commitments in the early years of the financial plan, consequently the basis of the planning assumptions has been conservative.

#### **10.5 Capital**

HEIW has a recurrent discretionary Capital Allocation of £100k. Although this modest allocation will not initially inhibit the developments set out in the plan, a process will be established that involves budget holders and other partners to determine the capital needs of HEIW in support of its objectives and strategy over the next five years.

## Appendices

### Appendix A

Our **values and behaviours** have been developed by us and reflect our thoughts, feelings and beliefs in how we will, and won't, behave and treat others. They reflect how we will carry out our work and support the delivery of health and social care to the people of Wales.

<b>Respect for all - in every contact we have we have with others.</b>	<b>Together as a team - we will work with colleagues, across NHS Wales and with partner organisations.</b>	<b>Ideas that improve – harnessing creativity and continuously innovating, evaluating and improving.</b>
<b>We Will</b>	<b>We Will</b>	<b>We Will</b>
<ul style="list-style-type: none"> <li>• Actively listen – make time to listen, to hear, and respond to everyone's views;</li> <li>• Seek to understand alternative viewpoints and see things from others' perspectives;</li> <li>• Challenge constructively and objectively and deal with disagreement quickly and respectfully maintaining peoples' dignity;</li> <li>• Respect other people's expertise and trust people to do their jobs;</li> <li>• Take personal responsibility for our actions and have the confidence to admit mistakes and apologise;</li> <li>• Treat people fairly and equitably according to their needs;</li> <li>• Value all differences not just professional backgrounds, experience and skills.</li> </ul>	<ul style="list-style-type: none"> <li>• Seek out, recognise and value the knowledge skills and experience of others from within HEIW and across our stakeholders;</li> <li>• Openly receive contributions from colleagues and partners;</li> <li>• Work hard for each other, contribute our best whether we are leading or supporting work;</li> <li>• Work collaboratively;</li> <li>• Be open and transparent and work towards shared objectives;</li> <li>• Have fun.</li> </ul>	<ul style="list-style-type: none"> <li>• Be creative, curious and future thinking;</li> <li>• Challenge the status quo and suggest constructive solutions;</li> <li>• Take a positive approach to challenges and problems;</li> <li>• Drive informed innovation and improvement for patients, staff and learners;</li> <li>• Empower staff, teams and partners with skills to improve;</li> <li>• Seek out and respond to feedback from patients, learners, staff and partners;</li> <li>• Talk up and celebrate success;</li> <li>• Embrace and learn from mistakes;</li> <li>• Focus on the 'whys' - the purpose and the outcome;</li> <li>• Create and protect time and space for reflection and evaluation.</li> </ul>
<b>We will not</b>	<b>We will not</b>	<b>We will not</b>
<ul style="list-style-type: none"> <li>• Allow challenges or differences of opinion to become personal;</li> </ul>	<ul style="list-style-type: none"> <li>• Withhold important relevant information;</li> </ul>	<ul style="list-style-type: none"> <li>• Behave in a negative or "can't do" way;</li> <li>• Be defensive when challenging existing ways of working;</li> </ul>

<ul style="list-style-type: none"><li>• Behave in a way which could be perceived as bullying;</li><li>• Exclude others;</li><li>• Behave in a way which could be perceived as prejudicial;</li><li>• Give preferential treatment;</li><li>• Dominate discussions or approaches.</li></ul>	<ul style="list-style-type: none"><li>• Forget to communicate with each other;</li><li>• Lack loyalty towards each other and HEIW;</li><li>• Work rigidly to defined boundaries.</li></ul>	<ul style="list-style-type: none"><li>• Think we know best;</li><li>• Allow obstacles to stop improvement;</li><li>• Blame others for mistakes.</li></ul>
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## The Ambition – 2030

- Our workforce feels valued, is treated fairly and their wellbeing is supported
- Workforce language, culture and diversity reflects our population
- Potential shortage areas are known earlier and targeted effectively
- Widespread values based and inclusive recruitment ensures we have the right people
- Common competences are identified and underpin new and different ways of working
- Learning is delivered through flexible and accessible routes
- Widespread digital skills capability underpins care delivery
- National bi-lingual careers service is widening access to careers in health and care for all ages



2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030

32 Actions

REVIEW

? Actions

REVIEW

? Actions

- Very high levels of staff engagement, motivation, wellbeing and satisfaction
- Better recruitment and retention of staff through attractive and flexible working arrangements and career opportunities
- Increased levels of Welsh language skills in the health and care workforce
- Flexible education opportunities and career development
- Intelligence led workforce planning enabling us to change our workforce to meet our population need
- A compassionate culture, role modelled by excellent leaders and managers

The timeline illustrates the project's progress from January to July 2019, including engagement with over 1000 people, a consultation document with 200 responses, and the drafting of the strategy. The word clouds highlight key themes: addressing the pay gap, valuing the workforce through active listening, and maximizing ESR link to retention data.

## Wellbeing of Future Generations Act and the Ministerial Priorities

### 1. Examples of the Five Ways of Working in 2020-21

The Five Ways of Working	How they have been applied in HEIW
<b>Long term</b> The importance of balancing short-term needs with the need to safeguard the ability to also meet long-term needs.	<ul style="list-style-type: none"> <li>Professional CPD strategy for the NHS workforce to ensure that our existing workforce has the skills and capabilities required for the future.</li> <li>Sustainable national workforce plans for key shortage professional areas to achieve a better match between demand and supply in Wales.</li> <li>Support workforce and workplace wellbeing for the NHS including trainees and students.</li> <li>Improve access to careers in the Health and Care sector in partnership with Social Care Wales.</li> <li>Workforce intelligence support to improve the quality of workforce planning and modelling in Wales.</li> <li>Education and training to support NHS organisations to improve the quality of workforce planning expertise and capability across the system.</li> </ul>
<b>Prevention</b> How acting to prevent problems occurring or getting worse may help public bodies meet their objectives.	<ul style="list-style-type: none"> <li>Wellness strategy and this is being implemented within the organisation. It is a system that supports and anticipates health needs, prevents illness and reduces the impact of poor health.</li> <li>Preventative approaches across all functions and services and in particular how we plan to shift services, workforce and resources to support them.</li> </ul>
<b>Integration</b> Considering how the public body's well-being objectives may impact upon each of the well-being goals, on their other objectives, or on the objectives of other public bodies.	<ul style="list-style-type: none"> <li>Support workforce and workplace wellbeing for the NHS, including trainees and students.</li> <li>Wellbeing strategy for all staff employed by HEIW.</li> <li>Integrating health along with social care.</li> </ul>
<b>Collaboration</b> Acting in collaboration with any other person (or different parts of the body itself) that could help the body to meet its well-being objectives.	<ul style="list-style-type: none"> <li>Collaboration and partnership working with others, matrix working internally within HEIW.</li> <li>Co-production of the national <i>Workforce Strategy for Health and Social Care in Wales</i> and intention to grow stronger working relations with Social Care Wales in the future.</li> <li>Understanding what our stakeholders and service users need from us, and how we can best support them.</li> <li>Communicating and engaging with our partners and on a regular basis, and through various channels.</li> </ul>
<b>Involvement</b> The importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the body serves.	<ul style="list-style-type: none"> <li>Involving trainees and students in developing plans for education and training</li> <li>Welsh Health Student Forum and the Trainee Think Tank, the BMA Junior Doctors Committee.</li> <li>Wales first Public-Sector Equality Group to look at developing a suite of shared high-level strategic Objectives across the sector.</li> </ul>



2. **Delivery of 2021-22 Plans in line with the Ministerial Priorities**

HEIW is an integral part of the Welsh healthcare system. Our Strategic Objectives and deliverables directly contribute to the Ministerial priorities, and support other organisations, to deliver as shown below.



Our approach to **Prevention** can be seen in our approach to health and wellbeing being implemented within the organisation and nationally. It is a system that supports and anticipates health needs, prevents illness and reduces the impact of poor health. Preventative approaches are taken widely across all of our functions and services e.g. our education and CPD strategies, our Advanced Practice programme; Infection Prevention and Control training and outbreak management; our internally focussed approach to decarbonisation and in particular how we plan to transform services, workforce and resources to support them.

As an organisation we do not have a population health responsibility but the health workforce represents a significant component of local communities. Therefore, we can contribute to **Reducing Health Inequalities** through our careers work, 'Made in Wales' and our plans to widen access to employment in the NHS by meaningful engagement with under-represented and marginalised groups in our society, continuing to provide more locally accessible and flexible routes into education and focusing on the well-being of staff in general. It is also evidenced by our work to deliver our Strategic Equality Plan.

Our strategic aim in respect of leading the transformation and modernisation of the multi-professional healthcare workforce in line with national priorities focuses on interventions to support the **primary and community care** in respect of workforce as part of the strategic programme for primary care. We are expanding our primary and community care programme.

We have set an objective to develop a **mental health** workforce programme in collaboration with WG and Social Care Wales to support implementation of Together for Mental Health (including CAMHS). We recognise that the National Clinical Plan and the Quality and Engagement (Wales) Bill are likely to impact on our plans as they evolve over the next few months. We are undertaking some significant work through our national leader of and internal work on **Wellbeing**.

HEIW has taken a number of steps to improve **timely access to care**. This is evidenced by the development of a sustainable workforce plan and the development

of a plethora of new workforce models to support those areas of the service most under pressure for example, Unscheduled Care, Cancer, MTN, Maternity, Critical Care and Learning Disabilities and through improvements to the urgent primary care out of hours workforce model, eye care and unscheduled care. We are working closely with partners to improve their digital capability and to improve the access to patient care through the medium of Welsh.

We are also addressing the additional priority area of **Decarbonisation**. This is really important to us and therefore our strategic objective around climate change and biodiversity outlines the approach we are taking. Our Strategic Objective relating to the implementation of the Strategic Equality Plan is a good example of our contribution towards the additional priority area of **Social Partnership**. This is also evidenced by our work in partnership with Social Care Wales and our work in response to COVID-19 associated with Care Homes and the Vaccination programme roll out.

## The PESTLE Analysis

### Political and Legal

*The Wellbeing of Future Generations (Wales) Act* has become more important than ever as describing the core strategic principles for the public sector in Wales as the impact of the pandemic has highlighted societal inequalities in many ways. The Act aligns with HEIW's ambitions to develop a more sustainable workforce that meets the needs of future service models, and to reduce the reliance on short term, expensive solutions which often have a negative impact on the well-being of staff.

Education, training and workforce development are critical to this, recognising the importance of supporting our existing workforce to acquire new skills as well as ensuring that the pipeline into health careers is as wide as possible. The NHS is a significant employer for many local communities and widening access into training and employment opportunities can support the development of health and prosperity in these areas.

The 'ways of working' are clearly embedded in our PEOPLE principles as described in Chapter 1 and the *Workforce Strategy for Health and Social Care*. We recognise that we have levers and tools through our commissioning and leadership functions to generate opportunities to support people to have better health and wellbeing throughout their lives and to improve the prosperity of local communities. We have articulated throughout the Objectives in Chapter 5 where we see a clear alignment between the actions we are proposing and the 5 ways of working.

*A Healthier Wales* continues to challenge HEIW along with other NHS organisations to develop sustainable plans and actions to deliver care closer to home, through strengthening primary and community services, and refocusing on prevention. The learning from the pandemic has accelerated many of these aims which have been reiterated through the supplementary Primary and Community Care 2021-22 Annual Planning Framework.

It also emphasises the importance of quality improvement in a transformational system, and the need to maximise the opportunities of digital and other technology. This is an area which has seen a step-change in delivery in response to COVID-19. The development of new models of seamless local health and social care are being taken forward through the Regional Partnership Boards and it is intended that the funding provided by the national Transformation Programme will ensure that change happens quickly. There is an opportunity for HEIW to contribute to the removal of the barriers between different healthcare providers to make more efficient use of resources in order to find better outcomes for patients.

The Four Harms are the quality framework for planning for 2021-22 to ensure that the mitigation of harm from COVID-19 is balanced with the non COVID-19 harms of the pandemic response. The quadruple aim which underpins this plan also highlights the critical importance of staff engagement and well-being which are a key focus for HEIW. The prudent healthcare principles have been embraced by HEIW and have an important influence on how we design our roles and teams to get maximum value. In particular, we ensure that the education and training commissioned or delivered by us supports these principles.

*The Nurse Staffing Levels (Wales) Act 2016* describes the need to both provide sufficient nurses and to allow nurses time to care for patients sensitively in both provided and

commissioned services. Interim nurse staffing principles for paediatric inpatient wards were published in July 2019. The aim of these principles is in part to prepare paediatric inpatient wards for the inevitable full extension of the Act to that setting before the end of this government term. As we are now responsible for rolling out this work, this is being carefully factored into our workforce planning and education commissioning planning.

In June 2019, the *Health and Social Care (Quality and Engagement) (Wales) Bill 2019* set out the intention to strengthen the existing duty of quality and to establish an organisational duty of candour. From a HEIW perspective this is being embedded in our education and training programmes and in our leadership development work.

The purpose of the *Socio-Economic Duty, Part 1, Section 1 of the Equality Act 2010* which comes into force on the 31 March 2021, is to achieve a more equal Wales, and highlights Welsh Government's commitment to safeguarding equality and human rights. As such, we will continue to pay due regard to the assessment of the socio-economic impact of our strategic decisions, and whether the outcome is going to reduce the inequalities associated with socio-economic disadvantage, thus contributing to the levelling the playing field. This has become increasingly important and highlighted further in the light of COVID-19 and Brexit. HEIW has developed an integrated approach to equality impact assessments, enabling us to assess the socio-economic impacts of our strategic decisions and highlight how our decisions might help to help reduce health inequalities associated with socio-economic disadvantage. Whilst being reflective and aligning with not only *A Healthier Wales (2018)* but also *Is Wales Fairer? (2018)* and the *Well-being and Future Generations Act (2015)* to further ensure we embed actions towards a more equal Wales.

There is considerable concern about the mental health and wellbeing of the workforce as a result of the pandemic which will have an impact in terms of resourcing support needs and work will be guided by the *Together for Mental Health* Delivery Plan.

On the 30 July 2020, NHS England published the *We are the NHS: People Plan for 2020/21 – action for us all* which provides a focus for developing the sustainability of high-quality health and care services. This long-term plan sets out clear ambitions and proposals for the workforce and has implications for the workforce agenda in Wales and requires us to understand the implications of these in relation to our plans. The plan focusses on key shortage areas of nursing (for which there is a global crisis), general practitioners and the medical workforce shortages caused by the UK Government pension legislation. The development of new roles across the UK can affect what happens in Wales and needs to be closely monitored. In some instances, this helps us accelerate local developments (for example, in relation to Physicians Associates). In others, we may have a different policy direction which results in different approaches, for example the Nursing Associate role which has been introduced over the last few years in England.

At the UK level, there continues to be uncertainty caused by Brexit but we will continue to look for opportunities offered by this change to support workforce challenges. The UK Government's significant majority means that there is an increased likelihood of political stability in England for the next few years and an expectation amongst counterparts in England that this will lead to greater potential for driving the implementation of the People Plan. In Wales, the situation is less stable than last year given the outcome of the forthcoming Senedd election in May 2021. COVID-19 has highlighted the need for closer working with the four nations in the context of our field of work, such as the Code of Practice for International Recruitment.

Better and more responsive healthcare professional regulation is a shared ambition for both the regulators and all four UK Governments. The Department of Health consulted on the need to reform professional regulation in England and Wales to help maximise public protection while supporting workforce development and improved clinical practice. This recognises the need for regulation to adapt and change to new service models and requirements, in particular the development of multi-disciplinary teams and extended roles. It will be important for HEIW to continue to foster good working relationships with the regulators and to influence this agenda where possible, in close cooperation with Welsh Government and employers.

Education and training standards for many healthcare professions changed in 2020 and we will need to respond to these changes to education standards. The implementation of New Nursing Standards by the Nursing and Midwifery Council (NMC), has led to a focus on core competences being embedded in curricula which may increase levels of supervision and placement capacity needed. However, the standards also extend the range of professionals who can supervise practice which is a positive change. In addition, the Midwifery Standards will lead to the development of a four-year programme with implications for costs and take up.

The Health and Care Professions Council (HCPC) have changed the threshold level of qualification for entry to the Register for paramedics to 'Bachelor degree with honours'. From 1 September 2021, HCPC will withdraw approval from existing programmes delivered below the new threshold level. This will have a direct impact in Wales where the programme is currently at diploma level.

In Optometry, the General Optical Council, is in the process of an Education Strategic Review for the profession. They have proposed a new outcomes-based approach offering the benefits of greater freedom and flexibility and a robust approach to approval and quality assurance of relevant optical education. This will change the delivery of education in optometry including undergraduate, pre-qualifying and postgraduate training.

A new set of Initial Education and Training Standards (IETP) for Pharmacists were agreed by GPhC Council in December 2020. All education and training will need to be compliant with the standards by 2026 with an agreed transition plan in place between 2021 and 2026. The outcomes of the overall change are that pharmacists will have an earlier and greater involvement in direct patient care and clinical contribution to multi-professional teams across primary and secondary care. The change is designed to enable pharmacists to be integral to the transformation and transference of patient services from secondary to primary care as described in *A Healthier Wales*.

## Economic

In Wales, the key driver for economic change is the Welsh Government national strategy to build the Welsh economy entitled '*Prosperity for All: Economic Action*'. This plan is an attempt to address the huge challenges around deindustrialisation, unstable and insecure employment, accelerating technological change, costly sickness and in work illness rates and the challenge of an ageing population. There is a need to be ever more efficient with the money that the nation spends and demand for NHS services has never been higher. The challenge for HEIW is to commission the future workforce to provide the services to meet this demand whilst ensuring both quality and value. We need to think of value in terms of achieving desired outcomes that matter to individuals whilst considering the relative impact of cost that achieving those outcomes will have.

Concerns have arisen about the economic forecast for the UK given the impact of COVID-19 and future unemployment and whether this will impact the supply of jobs for our future trainees and students. However current thinking is this is unlikely due to the high vacancy rate in many professions and the need to reduce variable pay.

Uncertainty persists around the setting of student fees which will have a potential impact upon student demand and the delivery of programmes by Higher Education Institutions. It is also widely recognised that there is financial uncertainty around the adult social care sector following central funding cuts to local authorities, combined with an increased demand for social care services which has been highlighted again by the pandemic. Unless funding levels within social care sector are increased or new models are introduced this could lead to a significant reduction in the quality of care for the people they support.

Previous changes to the NHS Bursary System in England resulted in the withdrawal of funding for nursing, midwifery or Allied Health Professional courses which led to the reduction of student applications on some courses in England. The UK Government has since reintroduced a non-repayable grant in England. The Welsh Government retained the bursary arrangements in Wales including a 2-year tie-in to working in Wales and extended arrangements for another two academic cohorts until 2023 for nurses, midwives and allied health professionals. The system is currently being reviewed as it is acknowledged that it will have an impact on workforce supply, and further developments have taken place in 2020 with regard to matching commissioned student numbers into posts at the end of courses.

## **Social**

COVID-19 has led to enormous challenges and its impact on society in Wales has been huge. This has led to widespread changes for people and communities and has had a massive impact on the NHS workforce in Wales.

In Wales, the growing and ageing population (with more complex health needs) is placing increasing demand on services. The impact of an older, sicker and poorer population in Wales compared to other parts of the UK may have contributed to the high impact of COVID-19 in Wales. We have an ageing population with the number of people aged 65 and over projected increase by as much as 34% in the next 20 years presenting a challenge to the health and social care system as well as on the economy. The ageing population is also having an impact on the workforce and generating pressures in terms of staff shortages for example shortages of GPs and Dentists in certain parts of Wales. The age profile within nursing shows that 19% of the workforce are now aged 55 and over and are eligible to opt for voluntary early retirement.

There has been a change in attitudes towards work and careers with the need to find a work-life balance becoming an increasingly important requirement for people. It is widely accepted that work has become more intense than it was a decade ago, people are working longer hours under increasing levels of pressure and this is making work very stressful. The knock-on effect is having a detrimental effect on people's overall physical and psychological health which often impacts on their family life too. In recognition of this, people are looking for opportunities to find a better balance between their personal life, professional life and family life through flexible working arrangements. People are more likely in the future to want to retain some of the benefits afforded them through remote working.

Patterns of migration are changing in the UK as a result of the uncertainty of the impact of Brexit and are likely to change further with the introduction of a new immigration system which will have an impact on jobs (in terms of supply and demand) and pay. The UK



Government has engaged across the UK and internationally to listen to the views of stakeholders, to shape the future immigration system that will be implemented in a phased approach from January 2021.

The NHS workforce is widely dispersed across Wales and different parts of the country have very different needs. This is largely due to the urban/rural geography of Wales with staff being attracted more to working in large urban centres than rural areas and thus creating recruitment issues in some of these areas. It is HEIW's role as a system leader for education and training to bring the different strands of the workforce together and to consider innovative ways of developing, recruiting and re-training the workforce in rural and remote areas. On the upside, the pandemic has highlighted a strong interest in careers in the health and care sectors which has led to increased recruitment into training and employment in these sectors.

We also need to ensure that we conduct our business in accordance with the *Equality Act (2010)* and the Welsh specific duties contained within *The Equality Act (2010) (statutory duties) (Wales) Regulations 2011*. The pandemic has had a differential impact on people from Black and Ethnic Minority (BAME) backgrounds and we are also highly engaged in work on differential attainment in higher education. We have already commenced work on this by engaging with people from protected characteristic groups or their representatives in the development and co-production of our Strategic Equality Plan; ensuring COVID-19 risk assessments were undertaken for BAME staff and trainees; undertaking and publishing Integrated Equality Impact Assessments; publication of Equality Objectives; preparation of an annual report and four yearly reviews; provision of accessible information; collection of information on the protected characteristics and training staff and through leadership on differential attainment at a national level. We will act to ensure equality of opportunity through our implementation plans and Objectives to meet the needs of people with one or more protected characteristics, embed the citizens voice and consider the needs of the current and future diverse workforce and service users.

As a newly established organisation, HEIW has already adopted its own Welsh Language policy which is based on the need to meet the statutory requirements set out in the *Welsh Language (Wales) Measure 2011*. While HEIW does not currently come under the Welsh Language Standards, we are currently engaging with the Welsh Government and the Welsh Language Commissioner to ensure that the appropriate set of standards are applied. In the meantime, it is our intention to implement and embed the HEIW Welsh Language policy as prescribed by the Welsh Language Act 1993. Key to this will be the delivery of Objectives and actions set out in the *More than just words Action Plan for 2019-20, A Healthier Wales and The HEIW/ Social Care Wales Workforce Strategy*.

## Technological

The COVID-19 pandemic has had a huge impact on facilitating rapid changes to NHS technology. A large number of NHS digital projects have been accelerated and funding made available for them to be introduced at pace. For example, the availability of laptops and access to Microsoft Teams meant that office-based NHS staff had the flexibility to work anywhere. Training and education had to adapt to simulation-based education in place of the enormous amount of face-to-face learning that is delivered across the NHS. The roll out of video conferencing tools and e-learning platforms such as Gwella have helped to support patient consultations and enabled recruitment and assessment processes to continue.

The Topol Review supports the aims of the NHS long term plan and the workforce implementation plan to create a digitally ready workforce able to use new technology and

medicines and to adapt to new ways of working. This will have consequences for selection, curricula, education, training and development and lifelong learning of current and future NHS workforce. There is a lot to do to prepare the workforce in Wales for a digital future. Starting with digital literacy which is essentially how people gain an understanding of the range of digital technology functions (e.g. the use of databases, spreadsheets, search engines and social media channels) and use them properly. However, we know that there are different levels of adoption and accessibility to these functions and this variation is particularly noteworthy amongst different age groups and needs to be addressed.

Topol also points to the continuing medical advances in technology (including genomics, artificial intelligence, digital medicine, robotics) that will require changes to the roles and functions of clinical staff and also to the education and training of the workforce. For example, advances in remote monitoring of patients and enabling service users to use technology will require education of the population. Changes within technology and communications infrastructure has adapted rapidly as a result of the pandemic and will continue to require changes in roles and functions of clinical staff. More sophisticated digital solutions will be required to analyse data to improve intelligence. In addition, the NHS will need to respond to the *Network and Information Security (NIS) regulation introduced in 2018* which sets out a framework to respond to cyber incidents affecting their operations.

The Health and Social Services Minister plans to transform digital health and care in Wales and this has involved creating the role of Chief Digital Officer for Health and Care and a new NHS Wales Strategic Health Authority to deliver national digital services in Wales. This will result in the transition of NHS Wales Informatics Service to a new standalone NHS Wales organisation, reflecting the importance of digital and data in modern health and care. We are developing strong links with this new special health authority to recognise the close connections between the two national strategic enabling organisations.

## Environmental

In Wales, *The Environment (Wales) Act 2016* required Welsh Government to set new emission reduction targets, reducing emissions by 40% by 2020. In 2020-21 we committed to action towards addressing the effects of climate change and maintaining and enhancing the resilience of biodiversity via a dedicated strategic objective, and we continue to be committed to this moving forward. We are actively working towards Welsh Government's ambition for a carbon neutral public sector in Wales by 2030, in line with the decarbonisation priority outlined in the NHS Wales Annual Planning Framework, 2021-2022. The COVID-19 pandemic has seen fewer people travelling for work or for leisure and a greater awareness of nature and the environment and presents us with the opportunity to make measurable progress towards these goals in the future.

We have already implemented a range of initiatives in Ty Dysgu to reduce our carbon emissions, including LED lighting throughout, a comprehensive recycling scheme, and 100% green energy supplies (via NHS Wales Shared Services Partnership). In 2021-22, we will be actively consulting with staff on HEIW's biodiversity plan and on organisational targets to further reduce carbon emissions in areas where we will have the greatest and most immediate impact.

In addition, for the first time from 2021-22, we will be reviewing all strategic Objectives in relation to *The Environment (Wales) Act 2016* and the S6 Duty to maintain and enhance the resilience of biodiversity. This is in line with HEIW's intention to make the organisational change required to embed the thinking and implement the mitigation in to all our operations, activities and planning.



Our commitment to this agenda is evidenced through Strategic Objective 5.5 articulated in Chapter 5. The Environment (Wales) Act 2016 also introduced an enhanced biodiversity and resilience of ecosystems duty (the Section 6 duty) for public authorities in the exercise of functions in relation to Wales.





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<b>Dyddiad y Cyfarfod</b>	<b>28 Ionawr 2021</b>	<b>Eitem agenda</b>	<b>3.2</b>
<b>Teitl yr Adroddiad</b>	<b>Diweddariad ar Strategaeth Efelychu AaGIC</b>		
<b>Awdur yr Adroddiad</b>	Angela Parry , Cyfarwyddwr Nyrsio Dros Dro		
<b>Noddwr yr Adroddiad</b>	Angela Parry, Cyfarwyddwr Nyrsio Dros Dro		
<b>Cyflwynwyd gan</b>	Angela Parry, Cyfarwyddwr Nyrsio Dros Dro		
<b>Rhyddid Gwybodaeth</b>	Agored		
<b>Diben yr Adroddiad</b>	Mae hwn yn ddiweddariad i Fwrdd AaGIC ar ble mae AaGIC wedi cyrraedd ar gyflawni Strategaeth a Rhaglen Efelychu Rhyngbroffesiynol yn dilyn cyflwyniadau yn y Pwyllgor Cyngori Allanol a sesiwn Datblygu'r Bwrdd		
<b>Materion Allweddol</b>	<ul style="list-style-type: none"> <li>• Recriwtio Rhyngbroffesiynol Llwyddiannus i Rolau Deon Cysylltiol</li> <li>• Digwyddiad Ymgysylltu Llwyddiannus gyda Rhanddeiliaid</li> <li>• Papur manwl yn cael ei baratoi ar gyfer y Pwyllgor Comisiynu Addysg ac Ansawdd</li> </ul>		
<b>Camau Penodol sy'n Ofynnol</b> ( <i>un ✓ yn</i> unig os gwelwch yn dda)	<b>Gwybodaeth</b>	<b>Trafodaeth</b>	<b>Sicrwydd</b>
<b>Argymhellion</b>	Gofynnir i'r Aelodau: <ul style="list-style-type: none"> <li>• <b>Gymeradwyo'r dull.</b></li> </ul>		

# Diweddariad ar Strategaeth Efelychu AaGIC

## 1. CYFLWYNIAD / CEFNDIR

Am nifer o flynyddoedd roedd cyn Deoniaeth Cymru ac AaGIC wedi dymuno penodi Deon Cysylltiol ar gyfer Efelychu i helpu i fynd i'r afael ag anghenion addysgol meddygon. Yn anffodus, roedd y swydd hon wedi aros heb ei llenwi am amryw resymau. Yn 2020 fodd bynnag, roedd maes rhagorol gyda thri ymgeisydd rhagorol. Gan wybod hyn a phwysigrwydd Efelychu yn y dyfodol, cymeradwyodd Tîm Gweithredol AaGIC benodiad y tri ymgeisydd a chyllid pellach Deoniaid Cyswllt o Nyrsio (2 swydd) a Gweithwyr Proffesiynol Perthynol i Iechyd (AHP) (1 swydd).

Yn dilyn yr apwyntiadau hyn, mae'r Tîm Rhyngbroffesiynol newydd hwn yn symud yn gyflym i ddatblygu'r Strategaeth Efelychu ac yn cyd-fynd â chynnig AaGIC gyda'r cyfleusterau efelychu rhagorol sydd eisoes yn bresennol yn ein gwasanaeth. Cynhaliwyd digwyddiad Ymgysylltu llwyddiannus yn Hydref 2020 a fydd yn helpu i lywio manylion y strategaeth.

Cyflwynodd un o'r Deoniaid Cyswllt y weledigaeth hon i'r Grŵp Cynghori Allanol (sy'n adrodd i Bwyllgor Comisiynu Addysg ac Ansawdd AaGIC [ECQC]) ac i Sesiwn Datblygu Bwrdd AaGIC ym mis Rhagfyr 2020. Mae'r cyflwyniad ynghlwm fel Atodiad 1 i'r papur hwn.

Mae adroddiad manylach yn cael ei baratoi ar gyfer Y Pwyllgor Comisiynu Addysg ac Ansawdd (ECQC) ym mis Chwefror 2021.

## 2. MATERION LLYWODRAETHU A RISG

Mae efelychu i fod yn rhan allweddol o addysg Ryngbroffesiynol yn y dyfodol ac nid oes llawer o risg yn gysylltiedig â'i ddatblygiad.

## 3. GOBLYGIADAU ARIANNOL

Mae ymrwymiad sesiynol y Deoniaid Cyswllt yn cyfateb i 1.2 WTE ac mae rôl gefnogol band 6 wedi'i chymeradwyo gan y Tîm Gweithredol. Efallai y bydd angen cefnogaeth bellach os yw maint y gwaith yn ehangu.

## 4. ARGYMHELLIAD

Gofynnir i'r Bwrdd:

- **Gymeradwyo'r** dull hwn

Llywodraethu a Sicrwydd			
<b>Linc i nodau strategol Cynllun Tymor Canolig Integredig</b> <i>(os gwelwch yn ddau)</i>	<b>Nod Strategol 1:</b> Arwain y gwaith o gynllunio, datblygu a lles gweithlu cymwys, cynaliadwy a hyblyg i gefnogi'r gwaith o gyflawni 'Cymru Iachach'	<b>Nod Strategol 2:</b> Gwellu ansawdd a hygyrchedd addysg a hyfforddiant i'r holl staff gofal iechyd gan sicrhau ei fod yn diwallu anghenion y dyfodol	<b>Nod Strategol 3:</b> Gweithio gyda phartneriaid i ddylanwadu ar newid diwylliannol o fewn GIG Cymru drwy feithrin gallu tosturiol ac arweinyddiaeth gyfunol ar bob lefel
	<b>Nod Strategol 4:</b> Datblygu'r gweithlu i gefnogi'r gwaith o ddarparu diogelwch ac ansawdd	<b>Nod Strategol 5:</b> Bod yn gyflogwr enghreifftiol ac yn lle gwych i weithio	<b>Nod Strategol 6:</b> I'w gydnabod fel partner, dylanwadrwr ac arweinydd rhagorol
<b>Ansawdd, Diogelwch a Phrofiad Cleifion</b>			
Mae hyfforddiant efelychu yn hanfodol i gynhyrchu gofal mwy diogel i gleifion.			
<b>Goblygiadau Ariannol</b>			
Fel y disgrifir uchod			
<b>Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)</b>			
Dim			
<b>Goblygiadau Staffio</b>			
Fel uchod			
<b>Goblygiadau Hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015)</b>			
<b>Hanes yr Adroddiad</b>	Cyflwyniad i EAG a BDS		
<b>Atodiadau</b>	Atodiad 1 - Cyflwyniad o Sesiwn Datblygu'r Bwrdd		



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# HEIW Simulation Team

**Sara-Catrin Cook**

**Associate Dean for Simulation & Clinical Skills**

# The IP Team



Sara-Catrin Cook



Cristina Diaz-Navarro



Bridie Jones



Suman Mitra



Clare Hawker



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# The Vision



# Simulation Based Education

What simulation based education means to HEIW:

Simulation based education (SBE) is an educational methodology that incorporates a range of modalities and tools to facilitate experiential learning.

It should

- Provide quality assured training to a high standard in safe learning environments
- Have an emphasis on interprofessional opportunities to promote collaborative working in the clinical setting
- Be available to health care professionals of all levels of experience, to learn, rehearse, and evolve the knowledge, skills, behaviours and professionalism needed for good practice
- Be equally accessible to all across Wales

Overall, aiming to continuously improve the quality and safety of care delivered to patients across Wales

# .....it's about promoting

- Interprofessional training
- Accessibility
- Standards



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# Achievements so far...

# Establishing the foundations

- Set the vision
- Established our portfolios
- Started to set up our governance structures
- Developed our evaluation plan: Key Success Factors and Outcome measures
- Numerous meetings with simulation colleagues to build network links






### Meet the team

Simulation based education (SBE) is an educational methodology that incorporates a range of modalities and tools to facilitate experiential learning


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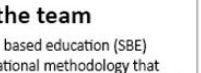
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Build by NHS Wales Informatics Service

## Every pandemic has a silver lining: building on the COVID experience

Cristina Diaz-Navarro, Suman Mitra, Clare Hawker, Bridie Jones, Sara-Catrin Cook  
Health Education and Improvement Wales, UK

### Introduction

The SARS-CoV-2 pandemic has posed extraordinary pressures on individuals, teams and organisations. It has also considerably impacted on simulation training. Initially by enhancing its role in promoting clinical preparedness, learning new drills and upskilling redeployed staff. Later, because of its potential to contribute to viral transmission, which has mandated new considerations regarding how we deliver simulation safely now and in the foreseeable future. Lastly by accentuating a trend towards virtual means of collaborating, teaching and learning.

Health Education and Improvement Wales (HEIW) was created in 2018 as a Special Health Authority, which sits alongside health boards as part of NHS Wales. One of its key priorities is to facilitate the consolidation of the Welsh Simulation Network (WSN) and the delivery of high standard simulation education in Wales.

### Results

We aim to identify positive elements to build on, in order to exemplify a culture of positivity. Virtual meetings have offered an accessible forum regardless of geographical location, particularly relevant in Wales, as our hospital sites can be distant with poor road infrastructure (4.5 hours car travel). A wider application of this principle is guiding the establishment of new opportunities for all in the WSN.

Numerous examples of good simulation practice have arisen since March, with all Welsh health boards drawing on simulation training sessions in readiness for crises. Celebrating excellence will be key in building the way forward together.

### Discussion

Whilst this pandemic has inflicted a great deal of stress on clinical and educational personnel, it has also highlighted the adaptability, resilience and vocation of our colleagues. Identifying successes will contribute to overcoming current and future hurdles, as we delineate a new way for safe, accessible, high-standard simulation education in Wales.



### Methods

HEIW has established an expert simulation education team this summer. All interviews and meetings have been carried out virtually. As a consequence, this new team is defining a new simulation strategy, governance structures and portfolios as well as identifying ways to revitalise the Welsh network without being able to meet in person.

We cannot underestimate the impact of developing a team virtually rather than through physical encounters. As simulation educators we often rely on subtle non-verbal cues and eye contact to facilitate constructive communication and individual engagement. Trying to communicate effectively with new colleagues as well as learning to use all new resources at our disposal has constituted a challenge but has provided us with new opportunities.



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# Academia

## MEDICAL TEACHER

<https://doi.org/10.1080/0142159X.2020.1817349>



## TWELVE TIPS

# Twelve tips for facilitating and implementing clinical debriefing programmes

Andrew Coggins<sup>a</sup> , Ramez Zaklama<sup>a</sup>, Rebecca A. Szabo<sup>b</sup> , Cristina Diaz-Navarro<sup>c</sup> , Ross J. Scalese<sup>d</sup>,  
Kristian Krogh<sup>e,f</sup> and Walter Eppich<sup>g</sup>



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**Save the date:**

## **COVID and Simulation in Wales Webinar**

20<sup>th</sup> October 2020, 9.30 to 12.30

Introducing the simulation team at HEIW:  
Sara-Catrin Cook, Cristina Diaz-Navarro and Suman Mitra

Did you use simulation training to prepare your teams for COVID?

**Share your story** with the wider simulation community in Wales.

If you wish to present your work contact [HEIW.Simulation@wales.nhs.uk](mailto:HEIW.Simulation@wales.nhs.uk)

Do you want to make your simulation sessions safe? **Join the discussion**

Would you like be part of a virtual simulation network in Wales?

**We would love to listen to your ideas.**

**To register for this free event, follow this link**

<https://heiwsim1020.eventbrite.co.uk>



# Moving Forward





# Working towards the bigger picture

- Identify **alternatives to Face to Face training**
- Develop the **Simulation Strategy**
- Set up a **Peer Advisory Group**
- Continue to bring together the **Welsh Simulation Community** (network)
- Establish the **simulation webpages and app**
- Promote ASPiH simulation **standards**
- Develop a **faculty development** programme
- Improve **accessibility and deliverability**
- Look to how we can support simulation based **appraisal and CPD**

# The rapid deliverable projects

- Three monthly webinars
- Supporting simulation for curricula: Internal Medicine
- VR/AR/Mixed Reality Training: Endoscopy, Ophthalmology
- Framework: Using simulation following key critical events
- Job Description: Simulation Fellowships



Needed: flexibility and fluidity

## Promoting the Safe Delivery of Clinical-Based Face-to-Face Training and Assessment across Wales during the COVID-19 Pandemic

### Guidance for Training/Assessment Organisers

Version 2.4

Educational events should now be delivered online whenever possible. There are, however, some training events, courses and that require face-to-face interaction, for example those involving simulation and clinical skills training, that are part of induction or essential adjuncts to workplace-based training.

*The following is not an exhaustive list of measures but guidance developed to facilitate safe training and the delivery of face-to-face interactions. It must be considered in the context of the most up-to-date national and local guidance and legislation including Welsh Government guidance regarding local lockdowns which should be followed at all times.*

*The most up-to-date versions of this and any associated documents must be used.*

### HEIW Simulation Team: Exploring potential alternatives to 'face to face' learning and training opportunities

The COVID-19 pandemic has had an unprecedented impact on healthcare professional training in terms of 'patient facing' and all other 'face to face' learning and training opportunities. Some



**Finally & most importantly...**

**it's about supporting the great  
simulation that's already going on  
across Wales**



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**Transforming the workforce for a healthier Wales**

# What can we do for you?

Please do contact us if there's anything we can do for you.

[HEIW.Simulation@wales.nhs.uk](mailto:HEIW.Simulation@wales.nhs.uk)



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# Diolch yn fawr

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<b>Dyddiad y Cyfarfod</b>	<b>28 Ionawr 2021</b>	<b>Eitem agenda</b>	<b>3.3</b>
<b>Teitl yr Adroddiad</b>	<b>Cynllun AaGIC ar gyfer Cyrhaeddiad Gwahaniaethol</b>		
<b>Awdur yr Adroddiad</b>	Colette McNally		
<b>Noddwr yr Adroddiad</b>	Pushpinder Mangat		
<b>Cyflwynwyd gan</b>	Pushpinder Mangat		
<b>Rhyddid Gwybodaeth</b>	Agored		
<b>Diben yr Adroddiad</b>	Diweddaru Bwrdd AaGIC o'r camau a gymerwyd ac a gynlluniwyd i fynd i'r afael â Chyrhaeddiad Gwahaniaethol		
<b>Materion Allweddol</b>	<p>Mae'r adroddiad yn disgrifio'r holl faterion sy'n ymwneud â Chyrhaeddiad Gwahaniaethol (CG).</p> <p>Mae hyn yn cynnwys darparu diweddariad ar gefndir hanesyddol CG a'i roi yn ei gyd-destun, ystyried effaith CG ar unigolion, manylu ar rôl AaGIC wrth ymateb a mynd i'r afael â CG ac ystyried canlyniadau mynd i'r afael â'r mater hwn.</p>		
<b>Camau Penodol sy'n Ofynnol</b> ( <i>un ✓ yn</i> unig os gwelwch yn dda)	<b>Gwybodaeth</b>	<b>Trafodaeth</b>	<b>Sicrwydd</b>
	✓		
<b>Argymhellion</b>	<p>Gofynnir i'r Aelodau:</p> <ul style="list-style-type: none"> <li><b>nodi'r</b> dull a gymerodd AaGIC wrth fynd i'r afael â Chyrhaeddiad Gwahaniaethol er gwybodaeth.</li> </ul>		



## **Cynllun AaGIC ar gyfer Cyrhaeddiad Gwahaniaethol**

### **1. CYFLWYNIAD**

Cyrhaeddiad gwahaniaethol (CG) yw'r hyn a alwn yn fwch rhwng lefelau cyrhaeddiad gwahanol grwpiau o feddygon. Mae'n digwydd ar draws llawer o broffesiynau ac addysg uwch. Fe'i hadlewyrchir mewn cyrhaeddiad yn yr Ysgol Feddygol, arholiadau ôl-raddedig, a llwyddiant mewn apwyntiadau.

Mae'r ymchwil gyfredol yn canolbwyntio'n bennaf ar y bwlch cyrhaeddiad sy'n ymwneud ag ethnigrwydd.

Gwelir y bwlch ar draws:

- Sgoriau arholiadau ôl-raddedig ac israddedig (gan gynnwys profion wedi'u marcio â pheiriant);
- Adolygiad Blynnyddol o ganlyniadau Dilyniant Cymhwysedd.
- Holiaduron boddhad hyfforddiant.

### **2. CEFNDIR**

Mae cyrhaeddiad gwahaniaethol wedi'i gydnabod mewn sawl senario gwahanol ers blynnyddoedd ledled y DU gan gynnwys cyflawniadau Ysgol Feddygol, canlyniadau Ôl-raddedig gydag ARCP a chanlyniadau hyfforddiant terfynol.

Mae'r Cyngor Meddygol Cyffredinol wedi cydnabod y mater hwn yn llawn ac yn bwriadu cyhoeddi Differol Data cyrhaeddiad ar gyfer pob Deoniaeth Feddygol ledled y DU.

Mae CG yn effeithio ar:

- Graddedigion Meddygol Rhyngwladol Du, Asiaidd a Lleiafrifoedd Ethnig.
- Raddedigion Meddygol Ardal Economaidd Ewrop.
- Graddedigion Du, Asiaidd a Lleiafrifoedd Ethnig y DU.

Effaith CG:

- Arwahanrwydd cymdeithasol a diffyg strwythurau cymorth.
- Lefelau hyder gwael.
- Straen a gorflino.
- Ofn methu a pheidio â chyrraedd disgwyliadau.
- Colled ariannol.
- Effaith straen teuluol a chymdeithasol.
- Perthynas yn y gwaith.
- Bydd effaith unigol sylweddol yn effeithio ar ymarferoldeb tîm, ac yn y pen draw ar ganlyniadau cleifion.

### **3. Rôl AaGIC mewn ymateb i CG**

Bwrdd y Rhaglen Cyrhaeddiad Gwahaniaethol - a sefydlwyd ym mis Awst 2019 ac mae wedi cyfarfod ar 3 achlysur i rannu arfer da, cynllunio mentrau yn y dyfodol ac i weithredu fel hyrwyddwyr cyrhaeddiad gwahaniaethol i ddylanwadu, gwella a hyrwyddo'r agenda cyrhaeddiad gwahaniaethol ar draws grwpiau rhanddeiliaid a'r

gymuned hyfforddi ehangach. Mae rhanddeiliaid o fewn AaGIC yn cynnwys y Gweithlu, Deoniaethau Deintyddol a Fferylliaeth a'r Gyfarwyddiaeth Nyrsio. Mae Rhanddeiliaid Allanol yn cynnwys Ysgolion Meddygol, Byrddau Iechyd, a'u cynrychiolwyr Addysg.

Mae cymrawd arweinyddiaeth a benodwyd ym mis Awst 2019 wedi rhannu ymchwil ansoddol sydd wedi llywio'r strategaeth CG.

Mae data CG Cymru wedi cael ei ystyried yn helaeth a'i rannu ag Ysgolion Arbenigol a Chyfarwyddwyr Meddygol Cyswllt. Proffesodd AaGIC rôl Cyfarwyddwr y Rhaglen Hyfforddi gyda chyrhaeddiad gwahaniaethol fel rhan o'r disgrifiad swydd

Gofynnwyd i Benaethiaid ysgolion Arbenigol:

- nodi'r rhai a allai fod mewn perygl o beidio â symud ymlaen fel arfer cyn cychwyn;
- ym mhob cyfarfod goruchwyliwr-hyfforddai addysgol i adolygu risgiau ar gyfer anawsterau dilyniant a thrafod gyda hyfforddeion yn gynnar;
- bod â strategaeth ar gyfer cefnogi'r rhai sydd mewn perygl ond heb ddangos arwyddion bod angen cefnogaeth arnynt;
- bod â strategaeth ar gyfer cefnogi hyfforddeion nad ydynt yn symud ymlaen yn ôl y disgwyl;
- bod â strategaeth i sicrhau bod pob addysgwr wedi'i hyfforddi mewn cyrhaeddiad gwahaniaethol

Ar gyfer unrhyw hyfforddai a nodwyd gan y mesurau uchod, bydd Cyfarwyddwr y Rhaglen Hyfforddi yn cyfeirio at yr Uned Cymorth Proffesiynol (UCP) gyda chaniatâd yr hyfforddai. Bydd yr uned yn darparu asesiad a chefnogaeth un i un lle bo angen.

Yn ogystal, bydd yr uned yn darparu gweithdai i hyfforddeion a goruchwylwyr Addysg yn y meysydd a ganlyn:

- Cyrhaeddiad gwahaniaethol
- Hyfforddiant gweithredol gan wrthwynebwyd.
- Cynnal sgysiau hanfodol.
- Paratoi arholiad (3 modiwl).
- Hyfforddiant mentor a mentorai (2 fodiwl).
- Croeso i ymarfer y DU.
- Hyfforddiant rhagfarn anymwybodol (darparwr allanol).

Mae'r PSU wedi cynhyrchu tua 40 o weithdai o'r fath rhwng Ionawr - Mehefin 2021 Mae'r gweithdai ar gael yn eang i gefnogi'r ysgolion i gyflwyno'r cyfarfod gwell hwn.

Mae Cyrhaeddiad Gwahaniaethol wedi'i ymgorffori yn y Cynllun Cydraddoldeb Strategol, Hyfforddiant Addysgwyr a'i gydnabod o fewn cefnogaeth PSU.

Gellir cael data i gydnabod CG trwy gomisiynu Addysg Iechyd Israddedig. Bydd derbyniadau cyd-destunol yn cael eu hymgorffori fel safon ym mhroses recriwtio myfyrwyr AaGIC gyda thariff mynediad is i'w gymhwyso i fyfyrwyr sydd â nodweddion gwarchodedig, sy'n ofalwyr ifanc neu sydd wedi bod mewn gofal neu sydd o gefndiroedd economaidd difreintiedig.

Mae'r Cyfarwyddwr Meddygol yn eistedd ar Grŵp Llywio'r Cynllun Gweithredu Cydraddoldeb Hiliol lle cyflwynodd y cysyniad o CG. Mabwysiadwyd hyn yn rhannol gan Ffrydiau Gwaith Iechyd ac Addysg.

#### **4. Canlyniadau Posibl mynd i'r afael â CG**

Mae canlyniadau posibl mynd i'r afael â CG fel a ganlyn:

- Lleihau'r diffyg rhwng meddygon gwyn y DU a Myfyrwyr Meddygol Rhyngwladol sy'n dechrau hyfforddiant arbenigol o'r sylfaen.
- Gweithlu sy'n teimlo ei fod yn cael ei werthfawrogi.
- Addysgwyr sy'n teimlo'n hyderus y gallant gefnogi eu holl hyfforddeion yn gyfartal.
- Hyfforddeion sy'n cyrchu cefnogaeth broffesiynol a hyfforddiant ychwanegol yn gynnar yn eu rhaglenni hyfforddi.
- Cynyddu cyfran yr hyfforddeion sy'n llwyddo yn eu harholiadau Coleg Brenhinol ar yr achlysur cyntaf.
- Hyfforddeion sydd felly'n fwy hyderus a hapus yn eu hyfforddiant.
- Timau mwy swyddogaethol ac felly gwell canlyniad i gleifion.
- Darparu cefnogaeth a sgiliau trosglwyddadwy i asiantaethau allanol lle gallai CG fodoli hefyd.

#### **5. MATERION LLYWODRAETHU A RISG**

Mae hwn yn fater difrifol sy'n ymestyn ymhellach na Meddygaeth yn unig a dyma ddechrau'r broses o fynd i'r afael â CG mewn grwpiau proffesiynol eraill ac mewn Addysg Israddedig ehangach. Mae hefyd yn gysylltiedig â phatrymau sefydliadol eraill megis atgyfeirio gwahaniaethol i'r Cyngor Meddygol Cyffredinol.

Mae'n rhwymedigaeth gymdeithasol foesol i fynd i'r afael ag anghydraddoldebau yn ein systemau os ydym am gael ein gweld fel cymdeithas deg. Mae'n risg i enw da AaGIC os na fyddwn yn mynd i'r afael â hyn.

#### **6. GOBLYGIADAU ARIANNOL**

Nid oes unrhyw oblygiadau ariannol amlwg wrth weithredu hyn

#### **7. Argymhelliad**

Bod Bwrdd AaGIC yn nodi'r dull a gymerwyd gan AaGIC wrth fynd i'r afael â Chyrhaeddiad Gwahaniaethol er gwybodaeth.

Llywodraethu a Sicrwydd			
<b>Linc i nodau strategol Cynllun Tymor Canolig Integredig</b> <small>(os gwelwch yn dda)</small>	<b>Nod Strategol 1:</b> Arwain y gwaith o gynllunio, datblygu a lles gweithlu cymwys, cynaliadwy a hyblyg i gefnogi'r gwaith o gyflawni 'Cymru Iachach'	<b>Nod Strategol 2:</b> Gwella ansawdd a hygyrchedd addysg a hyfforddiant i'r holl staff gofal iechyd gan sicrhau ei fod yn diwallu anghenion y dyfodol	<b>Nod Strategol 3:</b> Gweithio gyda phartneriaid i ddylanwadu ar newid diwylliannol o fewn GIG Cymru drwy feithrin gallu tosturiol ac arweinyddiaeth gyfunol ar bob lefel
	✓	✓	✓
	<b>Nod Strategol 4:</b> Datblygu'r gweithlu i gefnogi'r gwaith o ddarparu diogelwch ac ansawdd	<b>Nod Strategol 5:</b> Bod yn gyflogwr enghreifftiol ac yn lle gwych i weithio	<b>Nod Strategol 6:</b> I'w gydnabod fel partner, dylanwadwr ac arweinydd rhagorol
	✓	✓	✓
<b>Ansawdd, Diogelwch a Phrofiad Cleifion</b>			
<b>Goblygiadau Ariannol</b>			
Dim			
<b>Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)</b>			
<b>Goblygiadau Staffio</b>			
<b>Goblygiadau Hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015)</b>			
<b>Hanes yr Adroddiad</b>			
<b>Atodiadau</b>			



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<b>Dyddiad y Cyfarfod</b>	<b>28 Ionawr 2021</b>	<b>Eitem agenda</b>	<b>3.4</b>
<b>Teitl yr Adroddiad</b>	Fframwaith Hyfforddiant ac Addysg Gofal Sylfaenol a Chymunedol ar gyfer GIG Cymru		
<b>Awdur yr Adroddiad</b>	Charlette Middlemiss		
<b>Noddwr yr Adroddiad</b>	Alex Howells		
<b>Cyflwynwyd gan</b>	Alex Howells		
<b>Rhyddid Gwybodaeth</b>	Agored		
<b>Diben yr Adroddiad</b>	Rhoi gwybod i'r Bwrdd am ddatblygiad Fframwaith Hyfforddiant ac Addysg Gofal Sylfaenol a Chymunedol gyda'r nod o gefnogi'r model amlddisgyblaethol gofal sylfaenol.		
<b>Materion Allweddol</b>	<p>Mae'r cyflwyniad yn crynhoi'r achos dros newid ac yn amlinellu gweledigaeth AaGIC, rolau, swyddogaethau'r grwpiau, strwythur llywodraethu ac ariannu'r weledigaeth.</p> <p>Mae'r papur yn cefnogi amcanion AaGIC sy'n cyd-fynd â'r Rhaglen Strategol Genedlaethol ar gyfer Gofal Sylfaenol, Cymru lachach a'n cylch gwaith i ddatblygu addysg, trawsnewid a gwella gwasanaethau.</p>		
<b>Camau Penodol sy'n Ofynnol (un yn unig os gwelwch yn dda)</b>	<b>Gwybodaeth</b>	<b>Trafodaeth</b>	<b>Sicrwydd</b>
	✓		
<b>Argymhellion</b>	<p>Gofynnir i'r Bwrdd:</p> <ul style="list-style-type: none"> <li><b>nodi'r</b> weledigaeth yn y cyflwyniad atodedig i sefydlu rhwydwaith o hybiau hyfforddi ardaloedd gofal sylfaenol a chymunedol a'r camau nesaf wrth symud yr agenda hwn yn ei blaen.</li> </ul>		

# **FFRAMWAITH HYFFORDDIANT AC ADDYSG GYNRADD A CHYMUNED AR GYFER GIG CYMRU**

## **1. CYFLWYNIAD**

Rydym i gyd yn gweithio i gefnogi darparu mwy o ofal yn nes at y cartref, trwy wasanaethau Sylfaenol a Chymunedol sydd wedi'u hehangu a'u cryfhau yn unol â Chymru Iachach, ac mae model gweithlu cynaliadwy yn allweddol i hyn. Mae'r cyflwyniad atodedig yn nodi gweledigaeth ar gyfer sefydlu fframwaith Cymru gyfan ar gyfer addysg Gofal Sylfaenol, hyfforddiant a thrawsnewid y gweithlu.

## **2. ACHOS AM NEWID**

Ar hyn o bryd mae amrywioldeb yn ansawdd ac argaeledd addysg a hyfforddiant o ran grwpiau proffesiynol ac ardaloedd daearyddol. O bwysigrwydd hanfodol, heblaw yn y Model Ymarfer Hyfforddi Meddygon Teulu, nid oes fframwaith y cytunwyd arno ar gyfer:

- Datblygu a chefnogi hyfforddwyr
- Mynediad i leoliadau clinigol
- Safonau Addysgol

Mae'r diffyg addysg a hyfforddiant mewn lleoliadau Gofal Sylfaenol a Chymunedol yn golygu y gall fod yn anodd recriwtio a chadw staff, ac felly mae hyfforddiant ac addysg ein gweithlu presennol ac yn y dyfodol ym maes lechyd a Gofal Cymdeithasol yn ganolog i gyflawni'r fframwaith yn llwyddiannus.

## **3. CEFNDIR**

Yn gynnar yn 2020 cyfarfu AaGIC â Chyfarwyddwyr Gofal Sylfaenol a Chyfarwyddwyr Meddygol Cyswllt i archwilio opsiynau ar gyfer cefnogi datblygiad addysg Gofal Sylfaenol a chynaliadwyedd gwasanaeth. Ym mis Hydref 2020 hwylusodd AaGIC ddigwyddiad rhithwir ymgysylltu â rhanddeiliaid yn cynnwys 196 o randdeiliaid allweddol gwahoddedig i ystyried a siapio syniadau ar gyfer y dyfodol ymhellach. Mae ymgysylltu ar y diwrnod a'r dadansoddiad dilynol o'r adborth, a oedd i gyd yn gadarnhaol iawn, wedi ein galluogi i greu'r weledigaeth ar gyfer y dyfodol.

## **4. CYNNIG**

Mae model Gofal Sylfaenol yn y dyfodol yn dibynnu ar dimau aml-ddisgyblaethol (MDT) sy'n gweithio ar draws lechyd a Gofal Cymdeithasol a bydd datblygu hyn yn gofyn am ddull wedi'i gydlynu'n genedlaethol gyda hyblygrwydd i ymateb i anghenion rhanbarthol. Mae'r cynnig trawsnewidiol hwn ar gyfer Fframwaith Hyfforddiant ac Addysg Gofal Sylfaenol a Chymunedol ar gyfer GIG Cymru yn ceisio:

- Datblygu ac ehangu'r gweithlu MDT sy'n sail i'r Model Gofal Sylfaenol
- Cyflwyno hyfforddiant a datblygiad o ansawdd uchel ar gyfer pob grŵp proffesiynol yn seiliedig ar safonau clir a chyson
- Buddsoddi yn natblygiad cynaliadwy'r gweithlu Cynradd a Chymunedol i wella recriwtio a chadw staff.

Gan weithio gyda phartneriaid, cynigiodd AaGIC arwain gwaith i sefydlu fframwaith Cymru gyfan ar gyfer addysg gofal sylfaenol, hyfforddiant a thrawsnewid y gweithlu sy'n cefnogi rhwydwaith o Hybiau Hyfforddi Ardal. Bydd gweledigaeth AaGIC yn galluogi hybiau hyfforddi lleol i gefnogi cyflwyno model MDT o weithio trwy ddull cyson ledled Cymru gan greu mwy o arferion hyfforddi ar gyfer hyfforddi'r gweithlu gofal sylfaenol presennol ac yn y dyfodol. Ein un nod a'n gweledigaeth yn y pen draw yw i ddarparu addysg a hyfforddiant i ystod eang o grwpiau proffesiynol a galwedigaethol gan ddefnyddio dull sy'n seiliedig ar le.

Mae'r fframwaith yn cynnig rôl ar gyfer y cyfraniad unigryw y gall AaGIC ei wneud wrth ddarparu dull Cymru Gyfan, gan weithio mewn partneriaeth â rhanddeiliaid ar lefel genedlaethol a chyda'r hybiau hyfforddi ardal sy'n dod i'r amlwg ar lefel leol.

## **5. CAMAU NESAF**

Mae bron i 200 o randdeiliaid a phartneriaid eisoes wedi bod yn rhan o greu'r cynnig cychwynnol, a bu egni a chefnogaeth enfawr i wneud cynnydd ar hyn yn gyflym. Bydd hyn yn cynnwys rhaglen waith sylweddol a fydd yn gofyn am strwythur prosiect, rheolaeth ac adnoddau i gyflawni'r weledigaeth.

Ymgwymerir â'r gweithgareddau canlynol rhwng Ionawr a Mawrth 2021 a byddant yn sylfaen ar gyfer gwaith yn y dyfodol.

- Adolygu modelau ac arfer gorau mewn rhannau eraill o'r DU.
- Dosbarthu cynnig AaGIC am sylwadau ymhlith rhanddeiliaid ym mis Ionawr 2021.
- Ymgysylltu â meddygon teulu â ffocws penodol.
- Ffurio grŵp tasg a gorffen â therfyn amser i ddatblygu model cyflawni a chynnig peilot.
- Darparu diweddariadau misol ar gynnydd a phwyntiau gwneud penderfyniadau allweddol trwy lif gwaith y Gweithlu a DS i sicrhau cefnogaeth ar gyfer y cam nesaf.

Yn 201/22 rhagwelir y bydd angen datblygu achos busnes mwy cynhwysfawr i gefnogi cyflwyno'r model cyflenwi a bydd isadeiledd Gofal Sylfaenol a Chymunedol mewnol AaGIC yn cael ei roi ar waith i hwyluso'r trawsnewid.

## **6. ARGYMHELLIAD**

Gofynnir i'r Bwrdd nodi'r weledigaeth yn y cyflwyniad atodedig i sefydlu rhwydwaith o hybiau hyfforddi ardaloedd gofal sylfaenol a chymunedol a'r camau nesaf arfaethedig wrth symud yr agenda ymlaen.

Llywodraethu a Sicrwydd			
Linc i nodau strategol Cynllun Tymor Canolig Integredig (os gwelwch yn <i>ddau</i> )	<b>Nod Strategol 1:</b> Arwain y gwaith o gynllunio, datblygu a lles gweithlu cymwys, cynaliadwy a hyblyg i gefnogi'r gwaith o gyflawni ' <i>Cymru Iachach</i> '	<b>Nod Strategol 2:</b> Gwella ansawdd a hygyrchedd addysg a hyfforddiant i'r holl staff gofal iechyd gan sicrhau ei fod yn diwallu anghenion y dyfodol	<b>Nod Strategol 3:</b> Gweithio gyda phartneriaid i ddylanwadu ar newid diwylliannol o fewn GIG Cymru drwy feithrin gallu tosturiol ac arweinyddiaeth gyfunol ar bob lefel
	✓	✓	
	<b>Nod Strategol 4:</b> Datblygu'r gweithlu i gefnogi'r gwaith o ddarparu diogelwch ac ansawdd	<b>Nod Strategol 5:</b> Bod yn gyflogwr enghreifftiol ac yn lle gwyb i weithio	<b>Nod Strategol 6:</b> I'w gydnabod fel partner, dylanwadwr ac arweinydd rhagorol
	✓		
<b>Ansawdd, Diogelwch a Phrofiad Cleifion</b>			
Bydd Fframwaith Cymru i gyd ar gyfer Hyfforddiant Gofal Sylfaenol a Chymunedol yn cefnogi sefydlu rhwydwaith o hybiau hyfforddi ardaloedd gofal sylfaenol a chymunedol. Bydd hyn yn cefnogi darparu mwy o ofal yn agosach at y cartref ac yn cael effaith gadarnhaol ar ansawdd, diogelwch a phrofiad y claf.			
<b>Goblygiadau Ariannol</b> Bydd achos busnes yn cael ei ddatblygu i gefnogi'r weledigaeth.			
<b>Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)</b>			
. amherthnasol - mae'r cyflwyniad ar gyfer ei nodi.			
<b>Goblygiadau Staffio</b>			
. amherthnasol - mae'r cyflwyniad ar gyfer ei nodi.			
<b>Goblygiadau Hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015)</b>			
. amherthnasol			
<b>Hanes yr Adroddiad</b>	Ystyriwyd y cyflwyniad atodedig yn Atodiad 1 yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr.		
<b>Atodiadau</b>	Atodiad 1 - Fframwaith Cymru Gyfan ar gyfer Hyfforddiant Gofal Sylfaenol a Chymunedol		





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# **Primary and Community Care Training and Education Framework for NHS Wales**

## **Primary Care 'Locality' Training Hubs**

**Alex Howells - CEO HEIW  
Charlette Middlemiss  
Prof. Phil Matthews  
Prof. Margaret Allan  
Sanjeev Mahapatra**

# Case for Change

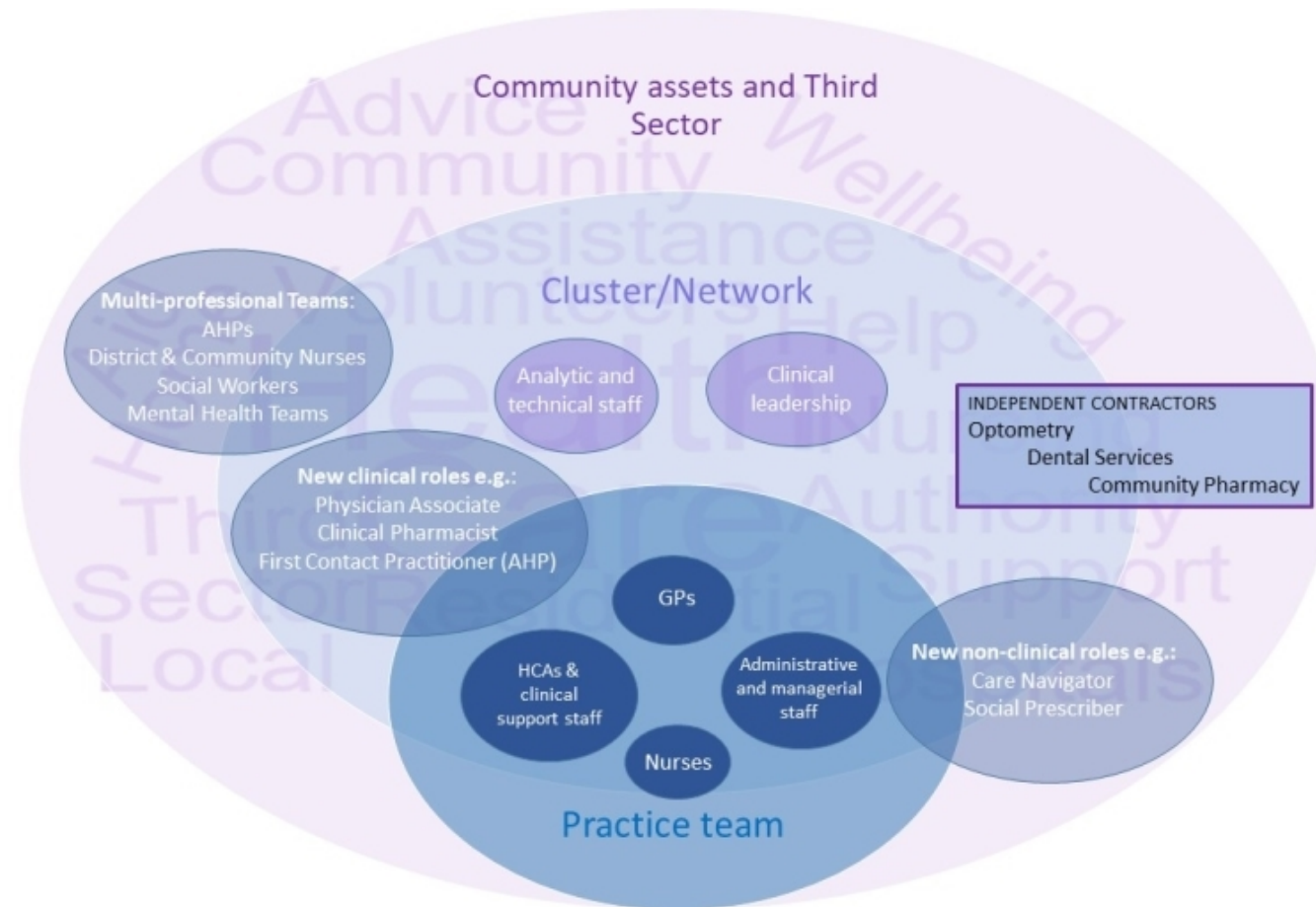
- Expand and Strengthen Primary/Community Care – A Healthier Wales
- Quality and Availability of Training/Education variable
- No agreed framework for
  - *Developing and Supporting trainers*
  - *Access to Clinical placements*
  - *Educational Standards*
- Framework seeks to:
  - *Develop/expand MDT*
  - *Quality training/consistent Standards*
  - *Invest in sustainable development – recruitment/retention*
- Future model of PC working across H&SC – nationally structured & co-ordinated approach – flexible to respond to regional need



# Background

- ✓ HEE/Academies in Wales
- ✓ February 2020 – DPC/AMD
- ✓ October 2020 – Stakeholder Event/196 delegates = positive feedback
- ✓ December 2020 – HEIW Executives
- ✓ December 2020 – HEIW Senior Leadership Team
- ✓ December 2020 – Primary Care Strategic Programme
- ✓ December 2020 – HEIW Board Development

# Primary Care Workforce Model



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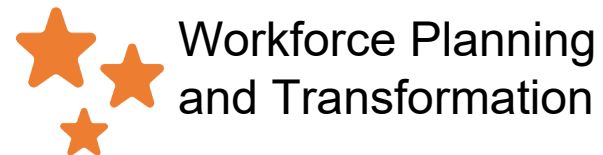
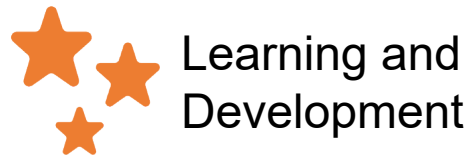
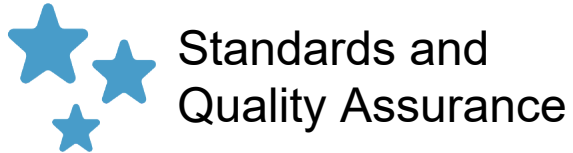
Trawsnewid y gweithlu ar gyfer Cymru iachach  
Transforming the workforce for a healthier Wales

# Vision



- Working with partners, HEIW will lead work to establish an all Wales framework for Primary Care education, training and workforce transformation
- Support a network of 'Locality' Training Hubs that will sit alongside HBs
- Facilitating the delivery of education/training for wide range of professionals/occupational groups using a place-based approach
- Integral part of the system & mature – social care/independent sector

# Roles and Functions



# Governance Structure





# Governance Arrangements

- Internal HEIW Mechanism – All Wales Function - Dedicated Manager & Clinical Lead
- ‘Locality’ Hubs – Supporting Functions & Development of Primary Care Clusters
- Core infrastructure funded centrally by HEIW
- Stakeholder Engagement – Advisory Group
- ❖ *Provide advice/priorities*
- ❖ *Alignment with national policy/standards/guidelines*
- ❖ *Support communication*



# Funding and Resourcing



- Support for a Nationally funded infrastructure through HEIW to establish and operate a 'Locality' Training Hub model
- Funding formula and mechanism to recognise the cost of training a wider range of professionals in primary care
- Development of simulation facilities, digital platforms, e-learning and host physically attended training
- Primary Care Estates



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# Next Steps – January to March 2021

- Circulate HEIW's proposal for comment amongst stakeholders in January 2021
- Form a time-limited task and finish group to develop a business case/implementation plan
- Provide monthly updates on progress and key decision - making points via the Workforce and OD work stream
- Establish the internal HEIW Primary and Community Care infrastructure to facilitate transformation

# Any Questions?



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<b>Dyddiad y Cyfarfod</b>	<b>28 Ionawr 2021</b>	<b>Eitem agenda</b>	<b>4.1</b>
<b>Teitl yr Adroddiad</b>	Adroddiad y Cyfarwyddwr Cyllid		
<b>Awdur yr Adroddiad</b>	Rhiannon Beckett		
<b>Noddwr yr Adroddiad</b>	Eifion Williams		
<b>Cyflwynwyd gan</b>	Eifion Williams		
<b>Rhyddid Gwybodaeth</b>	Agored		
<b>Diben yr Adroddiad</b>	Darparu adroddiad i Fwrdd AaGIC ar y sefyllfa ariannol ar gyfer mis Rhagfyr 2020 (Mis 09).		
<b>Materion Allweddol</b>	Mae gan AaGIC ddyletswydd statudol i fantoli'r gyllideb ar ddiwedd y flwyddyn a dylai'r adroddiad hwn gynorthwyo'r Bwrdd, y Swyddogion Gweithredol a Deiliaid Cyllidebau i ddeall y sefyllfa ariannol a adroddwyd ar gyfer Mis 9 ym mlwyddyn ariannol 2020-21 ac roedd angen cydbwyso'r camau gweithredu ar ddiwedd y flwyddyn.		
<b>Camau Penodol sy'n Ofynnol</b> ( <i>un ✓ yn</i> unig os gwelwch yn dda)	<b>Gwybodaeth</b>	<b>Trafodaeth</b>	<b>Sicrwydd</b>
	✓		
<b>Argymhellion</b>	1. Dylai Bwrdd AaGIC nodi'r sefyllfa ariannol a adroddwyd ym mis naw a'r rhesymau sylfaenol dros yr amrywiannau allweddol i'r gyllideb.		

# ADRODDIAD Y CYFARWYDDWR CYLLID

## 1. CYFLWYNIAD

Mae'r adroddiad yn nodi'r sefyllfa ariannol ar ddiwedd mis Rhagfyr 2020, a adroddwyd yn erbyn cyllidebau wedi'u diweddarau. Mae'r cyllidebau dirprwyedig wedi deillio o Gynllun Adnoddau 2020/21 a dynnwyd o Gynllun Ariannol Cynllun Tymor Canolig Integredig 2020-25 ac a ddiweddarwyd ymhellach gan y llythyr Dyrannu a dderbyniwyd gan Lywodraeth Cymru. Y sefyllfa ariannol a gofnodwyd gan AaGIC ym Mis 9 yw £1,490,160 o dangynigiad a'r sefyllfa a ragwelir ar ddiwedd y flwyddyn a adroddwyd i Lywodraeth Cymru yw y bydd camau'n cael eu cymryd i sicrhau y bydd cydbwysedd ariannol gan AaGIC.

## 2. CEFNDIR

Mae'r adroddiad hwn yn rhoi'r wybodaeth ddiweddaraf am y sefyllfa ariannol ar gyfer y cyfnod hyd at 31 Rhagfyr 2020, ac mae'r adroddiad yn nodi'r rhesymau dros unrhyw amrywiad ariannol yn erbyn y cyllidebau a bennwyd. Mae sefyllfa pandemig a chyfyngiadau symud COVID-19 yn parhau i effeithio ar gyllidebau cyflog a diffyg cyflog ac er bod cynnydd wedi'i wneud gyda chyfleoedd recriwtio ar gyfer hyfforddiant wyneb yn wyneb ac mae gweithgarwch addysg wedi'i gyfyngu'n ddifrifol. Mae deialog â Llywodraeth Cymru mewn perthynas â rheoli'r sefyllfa ariannol hyd at ddiwedd y flwyddyn yn parhau gyda'r addasiad i'r gyllideb y cytunwyd arno ym mis Hydref bellach wedi'i weithredu drwy lythyr dyrannu. Mae deiliaid cyllidebau a rheolwyr gwasanaethau yn rhoi ystyriaeth barhaus i ailbroffilio'r gweithgarwch a Gomisiynwyd a gallai hyn arwain at ddiwygiadau pellach i'r cynllun ariannol yn chwarter olaf 2020/21.

## 3. CYNNIG

Gofynnir i'r Bwrdd nodi'r sefyllfa ariannol a adroddwyd gan AaGIC ar gyfer Mis 9 ac ystyried yr esboniadau cryno o'r amrywiadau allweddol a ddisgrifir ar gyfer pob Cyfarwyddiaeth.

## 4. MATERION LLYWODRAETHU A RISG

Mae gan AaGIC ddyletswydd ariannol statudol i fantoli'r cyfrifon hyd yn oed ar ddiwedd y flwyddyn a bydd Llywodraeth Cymru yn monitro'r sefyllfa a adroddwyd o ran y ddyletswydd hon a hefyd yn erbyn cynllun ariannol y flwyddyn gyfredol a gyflwynwyd o fewn Cynllun Tymor Canolig Integredig 2020-23.

## 5. GOBLYGIADAU ARIANNOL

### 5.1 Sefyllfa Ariannol Refeniw ym Mis 09

Mae AaGIC yn adrodd am danwariant o £1,490k yn erbyn cyllidebau wedi'u proffilio ar 31 Rhagfyr 2020. Mae'r tanwariant mewn cyllidebau Cyflog yn deillio o swyddi gwag ar draws sefydliadau staffio AaGIC. Mae'r tanwariant mewn cyllidebau di-dâl o ganlyniad i lai o weithgarwch hyfforddi ac addysg, a chostau teithio, digwyddiadau a chynadleddau o ganlyniad i gyfyngiadau cyfyngiadau symud COVID-19. Mae'r tanwariant sylweddol mewn cyllidebau Comisiynu yn deillio'n bennaf o dandryddio neu athrofa o gyrsiau addysg Broffesiynol Gofal Iechyd a'r nifer sy'n manteisio ar Fwrsariaeth sy'n daladwy a'r gyfradd honno; ac mae'r tanwariant mewn cyllidebau meddygol yn gysylltiedig â than-recriwtio i swyddi gradd hyfforddiant meddygol a gwrthbwysu fferylliaeth gan niferoedd cynyddol sy'n dechrau neu'n ymestyn eu hamser mewn hyfforddiant meddygon teulu.

Adroddwyd am sefyllfa mis 9 i Lywodraeth Cymru ar ddiwrnod 5 ac mae rhagor o fanylion wedi'u rhannu drwy'r ffurflen fonitro a gyflwynwyd ar ddiwrnod 9 yn unol ag amserlen adrodd ofynnol WHC. Mae'r Datganiad Monitro a gyflwynwyd wedi'i gynnwys yn Atodiad 2.



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



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**As at 31st December 2020**

	Year to Date			Previous Month	
	Budget	Actual	Variance	Variance to Date	Movement
	£	£	£	£	£
<b>INCOME:</b>					
Welsh Government	(170,413,861)	(170,413,861)	0	0	0
Other Income	(437,403)	(322,179)	115,224	100,370	14,854
<b>Total Income</b>	<b>(170,851,264)</b>	<b>(170,736,040)</b>	<b>115,224</b>	<b>100,370</b>	<b>14,854</b>
<b>Expenditure</b>					
Board & Executive	1,296,929	1,223,899	(73,030)	(66,203)	(6,827)
Finance	721,780	687,387	(34,393)	(27,998)	(6,395)
Planning, Performance and Corporate Services	1,311,454	1,223,542	(87,912)	(80,571)	(7,341)
Digital and IT	3,616,358	3,497,656	(118,702)	(96,500)	(22,202)
Medical & Pharmacy	81,565,414	80,661,030	(904,384)	(725,655)	(178,729)
Nursing	80,525,076	80,378,574	(146,502)	(176,911)	30,409
Human Resources and Organisation Development	1,940,619	1,700,158	(240,461)	(169,432)	(71,029)
<b>Sub-Total Expenditure</b>	<b>170,977,630</b>	<b>169,372,246</b>	<b>(1,605,384)</b>	<b>(1,343,270)</b>	<b>(262,114)</b>
<b>Total</b>			<b>(1,490,160)</b>	<b>(1,242,900)</b>	<b>(247,260)</b>

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

Directorate	Income	Expenditure			Total
		Pay	Non Pay	Commissioning	
	£	£	£	£	£
Board and Executive		(13,173)	(59,857)		(73,030)
Chief Executive Reserve			0		0
Finance		(24,343)	(10,050)		(34,393)
Planning, Performance and Corporate Services		644	(88,557)		(87,912)
Digital and IT		(42,207)	(76,495)		(118,702)
Medical & Pharmacy	115,224	(297,463)	(905,645)	298,724	(789,160)
Nursing	0	(60,009)	(8,945)	(77,548)	(146,502)
Human Resources and Organisation Development		(92,673)	(147,788)		(240,461)
<b>Total</b>	<b>115,224</b>	<b>(529,224)</b>	<b>(1,297,336)</b>	<b>221,175</b>	<b>(1,490,160)</b>

Mae'r dadansoddiad sydd ynghlwm fel Atodiad 1 yn rhoi'r rhesymau allweddol dros danwario, gan y Gyfarwyddiaeth. Y prif resymau dros yr amrywiannau tanwariant yw swyddi gwag yn erbyn lefelau staffio wedi'u cyllidebu ar gyfer Cyllidebau Cyflog, costau is mewn gweithgarwch cymorth addysg a hyfforddiant a threuliau teithio mewn cyllidebau nad ydynt yn ymwneud â Thâl a lleoliadau is na'r bwriad mewn cyllidebau lleoliadau addysg a hyfforddiant a gomisiynwyd.

Disgwylir y bydd AaGIC yn llwyddo i sicrhau y cyflawnir sefyllfa ariannol gytbwys gyffredinol ar ddiwedd y flwyddyn.

## 5.2 Cyllid Comisiynu

Dylid nodi bod y gyllideb Gomisiynu yn seiliedig ar y garfan bresennol o fyfyrwyr yn y system a'r niferoedd myfyrwyr a gomisiynwyd ar gyfer 20/21. Yn dilyn y 'rhaniad dwfn' a wnaed ar ddiwedd chwarter 1, dychwelwyd y cyllid sy'n gysylltiedig â'r rhagolwg tanwariant bryd hynny i Lywodraeth Cymru, sy'n dod i £3.9m. Yn dilyn y rhaniad dwfn a wnaed yn chwarter 2 a dychwelwyd £3.9m fel y nodir uchod, nodwyd y rhagwelwyd tanwariant sylweddol pellach



mewn cyllidebau comisiynu Addysg Broffesiynol Iechyd. Yn ystod trafodaeth gyda chydweithwyr Cyllid Llywodraeth Cymru, cytunodd y Bwrdd i ddychwelyd £5m arall o gyllid a gweithredwyd ar hyn drwy'r llythyr dyrannu. Yn dilyn asesu ffurflenni gan Brifysgolion mewn perthynas â nifer wirioneddol y myfyrwyr sy'n dewis hunangyhoeddi ar gyfer y flwyddyn academaidd 20/21 ym mis 9, y nifer wirioneddol o hunangyhoeddwr a gofnodwyd yw cyfanswm o 370 yn erbyn rhagdybiaeth cynllunio/cyllideb yn 200. Mae'r cynnydd hwn o 170 o hunan-gyllidwyr yn creu gwarged pellach mewn perthynas â ffioedd is sy'n daladwy a thaliadau bwrsariaeth eraill a fydd yn dod i gyfanswm o £1.5m yn y flwyddyn ariannol hon. Mae hyn wedi'i addasu o'r sefyllfa o'r flwyddyn hyd yma a bydd yn cael ei hysbysu i Lywodraeth Cymru i'w ddychwelyd yn C4, hyd nes y caiff Bwrdd AaGIC ei gymeradwyo.

Dylid ystyried amrywiadau pellach a rhagolygon tanwariant ar draws cyllidebau eraill y Gyfarwyddiaeth yr amcangyfrifir eu bod tua £2.5m ar hyn o bryd yng ngoleuni unrhyw ymrwymadau y gellir eu gwneud i gefnogi amcanion AaGIC rhwng nawr a diwedd y flwyddyn gyda adenillion pellach yn ôl yr angen.

### 5.3 Gwariant Cyfalaf

Mae cynlluniau'n dal i gael eu paratoi ar gyfer defnyddio'r gwariant cyfalaf dewisol a dderbyniwyd ar gyfer y flwyddyn 2020/21 a rhagwelir y bydd y terfyn o £105k yn cael ei ddefnyddio'n sylweddol yn ystod y flwyddyn. Cafodd swm o £46K ei gario drosodd i'w ddefnyddio gan y tîm Fferylliaeth o 2019/20, sydd bellach wedi'i nodi fel nad oes ei angen mwyach. Hysbyswyd Llywodraeth Cymru y bydd y swm hwn yn cael ei ddychwelyd yn Ch4.

### 5.4 Mantolen

Dangosir y fantolen ar 31 Rhagfyr 2020 isod:

	<b>Balans Agoriadol 2020/21</b>	<b>31 Rhagfyr 2020</b>	<b>Symud</b>
	<b>£000</b>	<b>£000</b>	<b>£000</b>
<b>Asedau Nad ydynt yn Gyfredol:</b>			
Asedau Sefydlog	2,595	2,219	(376)
<b>Asedau Cyfredol:</b>			
Masnach a symiau derbyniadwy eraill	1,074	904	(170)
Arian parod a banc	7,465	574	(6,891)
<b>Cyfanswm asedau</b>	<b>11,134</b>	<b>3,697</b>	<b>(7,437)</b>
<b>Rhwymedigaethau:</b>			
Masnach a symiau taladwy eraill	(7,328)	(17,442)	(10,114)
Darpariaethau	(130)	(130)	0
<b>Cyfanswm Rhwymedigaethau</b>	<b>(7,458)</b>	<b>(17,572)</b>	<b>(10,114)</b>
	<b>3,676</b>	<b>(13,875)</b>	<b>(17,551)</b>
Ariennir gan:			
Cronfa Gyffredinol	3,676	(13,875)	(17,551)
<b>Cyfanswm y Cyllid</b>	<b>3,676</b>	<b>(13,875)</b>	<b>(17,551)</b>

- Mae'r symudiad ar asedau nad ydynt yn gyfredol yn adlewyrchu dibrisiant a godir yn ystod 2020/21. Cyfanswm y dyraniad cyfalaf ar gyfer 2020/21 yw £151k o ganlyniad i gario £51k ymlaen o 2019/20. Ceir rhagor o wybodaeth am gynlluniau cyfalaf yn yr adran isod.

- Cyfanswm y masnach a symiau taladwy eraill yw £17.4m, cynnydd o £10.1m ers dechrau'r flwyddyn ariannol. Mae'r prif falansau'n cynnwys:
  - Croniadau ar gyfer yr adran Feddygol yn y mis yw cyfanswm o £4.5m. Mae £2.1m o'r balans hwn yn ymwneud â chostau Meddygon Teulu ym mis Rhagfyr nad yw wedi'i dalu. Mae £0.4m yn gronniad o gostau cyflog myfyrwyr mewn byrddau iechyd ac mae £1.6m ar gyfer ailwefru amrywiol i Sefydliadau'r GIG gan gynnwys Ailwefru Cyflogau Hyfforddeion a chostau Comisiynu Fferylliaeth.
  - Croniadau yn y mis ar gyfer yr is-adran Ansafedreddol yw cyfanswm o £9.7m, gan gynnwys £1.2m ar gyfer GIG Cymru (gan gynnwys ad-dalu cyflogau myfyrwyr) a £7.5m ar gyfer costau nad ydynt yn gostau GIG Cymru (anfonebau prifysgol yn bennaf gan gynnwys ad-dalu bwrsariaethau, costau teithio ac ati).
  - Mae balansau eraill yn cynnwys:
    - £0.5m ar gyfer cronïadau sy'n gysylltiedig â'r gyflogres – taliadau Pensiwn a Chyllid a Thollau Ei Mawrhydi a wnaed y mis yn dilyn y gyflogres.
    - £0.5m ar gyfer cronïadau cyfrifyddu technegol e.e. gwyliau blynyddol cario ymlaen cronïadau.

Gofynnwyd am gyllid dyrannu adnoddau o £16.5m a chafodd ei dderbyn gan Lywodraeth Cymru ym mis Rhagfyr 2020. Mae'r balans negyddol ar y gronfa gyffredinol o £13.8m yn adlewyrchu'r gwahaniaeth rhwng cyllid craidd a dynnwyd i lawr a'r gwariant arian parod gwirioneddol hyd yma. Oherwydd gwerth credydwyd, nid oes angen i AaGIC sy'n weddill dynnu gwerth llawn y cyllid i lawr i gyfateb i'r gwariant cronedig. Bydd cydbwysedd cyffredinol y gronfa yn adlewyrchu'r sefyllfa wirioneddol ar ddiwedd y flwyddyn ar ôl i'r dyraniad llawn gael ei dynnu i lawr.

Y sefyllfa ariannol ar ddiwedd mis 9 oedd £0.6m.

## 5.5 Polisi Talu'r Sector Cyhoeddus

Disgwylir i holl gyrff y GIG fodloni Polisi Taliadau'r Sector Cyhoeddus, sy'n ei gwneud yn ofynnol i sefydliadau'r GIG dalu 95% o'r holl anfonebau o fewn 30 diwrnod ac mae'n seiliedig ar sefyllfa gronol. Ar gyfer y cyfnod rhwng 1 Ebrill a 30 Rhagfyr 2020, talodd AaGIC 94.47% o anfonebau nad ydynt yn anfonebau'r GIG o fewn y targed hwn (adroddwyd 94.17% ar gyfer Mis 8). Ceir dadansoddiad o'r sefyllfa, ynghyd â chymhariaeth â mis 9 yn 2019/20 isod:

<b>Anfonebau nad ydynt yn rhan o'r GIG Perfformiad PSPP 2019/20 a 2020/21 - Yn ôl Nifer yr Anfonebau (Targed o 95%)</b>								
	2019/20				2020/21			
	Cyfanswm	Cyfanswm a Basiwyd	Cyfanswm wedi Methu	% Pasiwyd	Cyfanswm	Cyfanswm a Basiwyd	Cyfanswm wedi Methu	% Pasiwyd
Chwarter 1	1,303	1,254	49	96.2	1,118	982	136	87.8
Chwarter 2	1,638	1,571	67	95.9	1,036	1,016	20	98.1
Chwarter 3	1,604	1,498	106	93.4	1,008	989	19	98.1
<b>Cronnol</b>	<b>4,545</b>	<b>4,323</b>	<b>222</b>	<b>95.1</b>	<b>3,162</b>	<b>2,987</b>	<b>175</b>	<b>94.5</b>

Mae gwaith wedi bod yn mynd rhagddo i gyflawni PSPP, gyda 98.1% o anfonebau nad ydynt yn anfonebau'r GIG yn cael eu talu yn chwarter 3 o fewn y targed 30 diwrnod. Mae'r sefyllfa

gronno wedi cynyddu o 92.7% ar ddiwedd mis Medi i 94.5% ddiwedd mis Rhagfyr. Mae AaGIC yn disgwyl cyrraedd y targed o 95.0% erbyn diwedd y flwyddyn.

O'r anfonebau sydd wedi methu PSPP yn ystod y flwyddyn, y gwerth cyfartalog yw £3,502 fesul anfoneb. Mae'r gwerth cyfartalog ar gyfer chwarter 3 yn is na'r cyfartaledd, ar £749 fesul anfoneb.

6. Argymhelliad

Gofynnir i'r Bwrdd nodi'r sefyllfa ariannol a adroddwyd ar gyfer AaGIC ym mis 9, yr esboniad cryno o amrywiadau allweddol gan y Gyfarwyddiaeth, y sefyllfa gyfalaf, y Fantolen, perfformiad PSPP.

Llywodraethu a Sicrwydd			
<b>Linc i nodau strategol Cynllun Tymor Canolig Integredig</b> (os gwelwch yn dda ✓)	<b>Nod Strategol 1:</b> Arwain y gwaith o gynllunio, datblygu a lles gweithlu cymwys, cynaliadwy a hyblyg i gefnogi'r gwaith o gyflawni 'Cymru Iachach'	<b>Nod Strategol 2:</b> Gwella ansawdd a hygyrchedd addysg a hyfforddiant i'r holl staff gofal iechyd gan sicrhau ei fod yn diwallu anghenion y dyfodol	<b>Nod Strategol 3:</b> Gweithio gyda phartneriaid i ddylanwadu ar newid diwylliannol o fewn GIG Cymru drwy feithrin gallu tosturiol ac arweinyddiaeth gyfunol ar bob lefel
	<b>Nod Strategol 4:</b> Datblygu'r gweithlu i gefnogi'r gwaith o ddarparu diogelwch ac ansawdd	<b>Nod Strategol 5:</b> Bod yn gyflogwr enghreifftiol ac yn lle gwyb i weithio	<b>Nod Strategol 6:</b> I'w gydnabod fel partner, dylanwadu ac arweinydd rhagorol
<b>Ansawdd, Diogelwch a Phrofiad Cleifion</b>			
Nid oes unrhyw oblygiadau o ran Ansawdd, Diogelwch a Phrofiad Cleifion			
<b>Goblygiadau Ariannol</b>			
Nodir y goblygiadau ariannol uchod yng nghorff yr adroddiad.			
<b>Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)</b>			
Mae gan AaGIC gyfrifoldeb statudol i dorri hyd yn oed ar ddiwedd y flwyddyn mae'r adroddiad yn nodi'r sefyllfa ariannol ar gyfer mis Rhagfyr 2020.			
Nid oes unrhyw oblygiadau o ran cydraddoldeb ac amrywiaeth yn yr adroddiad hwn.			
<b>Goblygiadau Staffio</b>			
Nid oes unrhyw oblygiadau staffio i'r adroddiad hwn.			
<b>Goblygiadau Hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015)</b>			
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.			
<b>Hanes yr Adroddiad</b>	Mae'r adroddiad yn cyfeirio ac yn diweddarau'r diweddariad cyllid blaenorol a rannwyd gyda Bwrdd AaGIC ym mis Rhagfyr 2020.		
<b>Atodiadau</b>	Ceir rhagor o fanylion yn Atodiad 1.		

## REPORT OF THE DIRECTOR OF FINANCE

The following analysis of the key underspends, by Directorate, is provided below: -

### 1. Board and Executives

- An underspend on pay to date is as a result of 2 wte vacancies, the posts have been appointed to and the Interim Director of Nursing post appointed at less than 1 wte also contributes to the underspend. The year to date underspend has been reduced by the re-purposing of £1m of budget phased across the year to support activities required to enable trainees to progress as a result of the Covid-19 pandemic.
- An underspend on Non-Pay of £59.8K is due to lower than budgeted travel, catering, room hire and training expenses as a result of the Covid-19 pandemic and lockdown, and lower legal and risk costs than budgeted. Savings on translation services have also been recognised as a result of the appointment of a Welsh Translation Manager

### 2. Finance

- The underspend on pay budgets of £24.3k is as a result of two vacancies within the team. The underspend associated with these vacancies would ordinarily have been offset by the costs of agency staff but as a result of the Covid-19 pandemic and lockdown the decision was taken to reduce the use of agency staff. The underspend to date has been reduced by the re-purposing of £1m of budget phased across the year to support activities to enable trainees to progress as a result of the Covid-19 pandemic and other new commitments.
- There is a favourable variance of £10K in Non-Pay that is predominantly related to lower than anticipated travel and subsistence costs and lower than budgeted bank charges.

### 3. Planning, Performance and Corporate Services

- The Pay budgets are slightly overspent at month 9, due to 1 wte vacant post being filled by an agency member of staff. Recruitment to the post is expected in January.
- There is an underspend of £88.6k against non-pay budgets as a result of savings in utilities costs and other variable costs associated with Ty Dysgu. There has also been a VAT rebate in year from 2019/20 following an end of year review.

### 4. Digital and IT

- The number of vacant posts within the team results in an underspend of £42.2k. Appointments have been made to all posts within the establishment with agreed start dates through December and January. The year to date underspend on pay budgets has been reduced by the

re-purposing of £1m of budget to support activities to enable trainees to progress as a result of the Covid-19 pandemic and other commitments.

- There is an underspend against non-pay budgets of £76.5k as a result of lower than anticipated travel and subsistence costs and underspends on Intrepid development days and Office 365 licence take up by trainees. The planned migration from Cardiff University servers to Azure cloud-based servers has also been delayed, set up and migration costs are low while testing is being completed.

## 5. Medical and Pharmacy

- There is an adverse variance of £115.2k against the other income target as a result of lower than anticipated income from revalidation and CPD courses for Dentists and GPs.
- The underspend on pay of £297.4k is as a result of a number of administration and clerical vacancies across a range of teams which are only partly offset by agency costs. There are also vacancies in clinical lead roles including the PGES lead and lead for Simulation, the Deputy Foundation lead has been appointed and took up post in October.
- The underspend on non-pay of £905.6k is as a result of lower than anticipated spend on training expenses, lecture fees and travel and subsistence in the year to date. Also GP appraisals were suspended in the first six months of the year creating a significant underspend of £335k. They recommenced in October but it is considered that it is unlikely there will be any recovery of previous activity. Virtual sessions, delivered through the Hamnet Street contract, are at a lower cost than face to face sessions which also contribute to the underspend, although the number of sessions is increasing. The underspends are offset by an increasing spend on supernumerary posts and less than full time training posts.
- Commissioning budgets are overspent by £298.7k year to date. The overspend is predominantly due to additional expenditure on GP Training, first reported in month 5. Additional costs above budget of £2.261m are reported at month 09. This overspend is partially offset by an underspend of £161k due to under-recruitment to training grade posts, £261k underspend due to lower activity in training expenses and training, travel and subsistence costs and £1,411k of underspend in Pharmacy budgets. Pre Foundation is £1,045k underspent due to multisector salaries being less than budgeted for the period April to July with under recruitment of 28 students to the August 2020 co-hort. Pre Foundation training grant budgets are currently £ 157k underspent. There are also underspends of £71.4K in the PGMDE budget and £74.6k in Welsh Clinical Academic Training and £119k in GP Induction and Returners. It is currently understood that the GP returners programme will not attract any new recruits in this financial year.

## 6. Nursing

- The underspend in Pay budgets of £60K relates predominantly to the delay in appointing to senior posts within the nursing team and also

within the Workforce Modernisation team that has now transferred into the Nursing Directorate. The start date for the Head of Science post is still unconfirmed at this point.

- 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 £78k is reported. Following assessment of returns from Universities in respect of the actual number choosing to self-fund for the 20/21 academic year, the actual number reported is 370 in total against a planning/budget assumption of 200. This increase of 170 self funders creates a further surplus in respect of reduced fees payable and other bursary payments that will amount to £1.5m in this financial year. This has been adjusted out of the year to date position and will be notified to WG for return in Q4, pending HEIW Board approval.
- It should be noted that the Commissioning budget is based on the existing student cohort in the system and the commissioned student numbers for 20/21. Following the 'deep dive' undertaken at the end of quarter 1, the funding associated with the underspend forecast at that point was returned to Welsh Government amounting to £3.9m, which was as a result of the following factors:-

	Forecast Outturn	Notes
Spring 2020 co-hort under-recruitment	£1m	1
Student Salaries	£0.5m	2
Self Funding Students	£1.6m	3
Delayed Course Starts	£0.7m	4
<b>Total</b>	<b>£3.9m</b>	

#### Notes

1. Under-recruitment to year 1 of the Spring 2020 co-hort which would not have been known at budget setting.
2. Underspend in respect of student salary re-imbursement as a result of under-recruitment to certain courses in the Sept 2019 to August 2020 co-hort.
3. Underspend in contract fees and bursary as a result of student choice to self-fund in the Sept 2019 to August 2020 co-hort.
4. Delayed course starts as a result of Covid 19.

- Following the deep dive at quarter 2 and return of £3.8m as detailed above, it was identified that a further significant underspend is forecast in Health Professional Education commissioning budgets. During discussion with Welsh Government Finance colleagues a return of £5m of funding was suggested. Further variation and underspend forecasts across other Directorate budgets currently estimated to be c£2.5m should be considered in the light of any commitments that can be made to support HEIW's objectives between now and year end with further return as necessary. Following the agreement of the Board, the return of £5m was actioned and Budgets have been adjusted accordingly.

A breakdown of the forecast commissioning underspend is shown in the table below

	£'000	Notes
Training travel & subsistence	-920	1
E&T Contracts	-1,984	2
Student Salary Reimbursements	-1,004	3
Student Bursary Reimbursements	-2,125	4
Student Disability Payments	206	5
<b>Total</b>	<b>-5,828</b>	

- Expenditure on training travel and subsistence has reduced significantly as a result of Covid-19 with fewer students travelling to placements.
- The forecast of £1,984k on Education contracts is as a result of 270 fewer students starting years 2 and 3 in the new academic year starting September 2020 and the best available information on year 1 out of a total student number of 6,648. There may be further variation when the returns for year 1 students are verified although this should not cause a significant movement as Universities have reported high levels of recruitment. Attrition is lower than at the start of the previous academic year where 325 students didn't enrol for year 2 or 3 out of total student numbers of 6,217.
- There is a forecast underspend of £1m on student salary re-imbursement to HBs for staff undertaking education. The table below shows the main numbers and values by course.

	No's less than budgeted	monthly budgeted salary costs	Projected year - end underspend
RAPS	8	£ 1,250	£ 70,000
scphn ft	1	£ 3,060	£ 21,420
scphn pt	12	£ 2,040	£ 171,360
HCSW	60	£ 921	£ 386,820
HSST diff	12	£ 2,128	£ 178,752
STP	6	£ 3,211	£ 134,862
			£ 963,214

- The 270 students also impact on the bursary payable creating a £0.8m underspend against the bursary budget. As the bursary is means tested the



latest data on average bursary rates payable that was not available at the time of budget setting shows a reduction of on average £200 per student. Across the entire student group of 6,454 students this equates to a further £1.3m of underspend

5. Student disability payments have increased with a £200k overspend forecast.
  - The other non-pay budgets are related to travel and subsistence and other expenses of the Nursing team which are of minimal value and there is an overspend of £43k in month.

#### 5. Human Resources and Organisation Development

- There are 8 wte vacancies within the core budgets of the Directorate, with only 1.7 wte offset by agency staff, contributing to a £92.7k underspend against pay budgets. Two appointments have been made with start dates in January, with a further two appointments likely to start in Feb/March. The year to date underspend on pay budgets has been reduced by the re-purposing of budget to support activities to enable trainees to progress as a result of the Covid-19 pandemic and other commitments
- A Non-Pay variance of £147.8k is predominantly due to underspends on training, workforce programmes, workforce planning training, consultancy, professional fees and conference budgets largely due to the impact of Covid-19 restrictions.

## VALIDATION SUMMARY 2020-21

Your organisation is showing as :	HEIW
Period is showing :	DEC 20
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 A2: RISKS	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE B : MONTHLY POSITIONS	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE B2 : PAY & AGENCY/LOCUM	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE B3 : COVID-19	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 : TRACKER	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE E : RESOURCE LIMITS	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE E1 : INVOICED INCOME	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE F : STATEMENT OF FINANCIAL POSITION	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE G : MONTHLY CASHFLOW	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE I : CAPITAL RESOURCE / EXPENDITURE LIMIT	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE J: CAPITAL IN YEAR SCHEMES	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE K : CAPITAL DISPOSALS	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
<b>TOTAL ERRORS FOR YOUR DEC 20 RETURN IS</b>	<b>1 ERRORS ON 1 DIFFERENT TABLE/S</b>

Summary Of Main Financial Performance

Revenue Performance

		Actual YTD £'000	Annual Forecast £'000
1	Under / (Over) Performance	1,490	0

Table A - Movement of Opening Financial Plan to Forecast Outturn

This Table is currently showing 0 errors

Line 12 should reflect the corresponding amounts included within the latest IMTP/AOP submission to WG  
Lines 1 - 12 should not be adjusted after Month 1

	In Year Effect £'000	Non Recurring £'000	Recurring £'000	FYE of Recurring £'000
1 Underlying Position b/fwd from Previous Year - as per 3 year plan (Surplus - Positive Value / Deficit - Negative Value)	0	0	0	0
2 New Cost Pressures - as per 3 year plan (Negative Value)	-28,752	0	-28,752	-33,676
3 Opening Cost Pressures	-28,752	0	-28,752	-33,676
4 Welsh Government Funding (Positive Value)	28,752	0	28,752	33,676
5 Identified Savings Plan (Positive Value)	0	0	0	0
6 Planned Net Income Generated (Positive Value)	0	0	0	0
7 Planned Accountancy Gains (Positive Value)	0	0	0	0
8 Planned Profit / (Loss) on Disposal of Assets	0	0	0	0
9 Planned Release of Uncommitted Contingencies & Reserves (Positive Value)	0	0		
10	0	0		
11 Planning Assumptions still to be finalised at Month 1	0	0		
12 IMTP / Annual Operating Plan	0	0	0	0
13 Reversal of Planning Assumptions still to be finalised at Month 1	0	0	0	0
14 Month 1 Planned Savings - Forecast Underachievement Due to Covid-19	0	0		
15 Month 1 Planned Savings - Other Forecast (Underachievement) / Overachievement	0	0	0	0
16 Additional In Year Identified Savings - Forecast (Positive Value)	60	60	0	0
17 Additional In Year & Variance from Planned Net Income Generated (Positive Value)	0	0	0	0
18 Additional In Year & Variance from Planned Accountancy Gains (Positive Value)	0	0	0	0
19 Additional In Year & Variance from Planned Profit / (Loss) on Disposal of Assets	0	0		
20 Release of Previously Committed Contingencies & Reserves (Positive Value)	0	0		
21 Additional In Year Welsh Government Funding (Positive Value)	0	0		
22 Additional In Year Welsh Government Funding Due To Covid-19 (Positive Value)	-567	-567		
23 Operational Expenditure Cost Increase Due To Covid-19 (Negative Value)	-152	-152		
24 Planned Operational Expenditure Cost Reduction Due To Covid-19 (Positive Value)	719	719		
25 (Positive Value)	0	0		
26 Net In Year Operational Variance to IMTP/AOP (material gross amounts to be listed separately)	-60	-60		
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 Forecast Outturn (- Deficit / + Surplus)	0	0	0	0

	Apr £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000	YTD £'000	In Year Effect £'000
1													0	0
2	-1,739	-1,739	-1,739	-1,739	-2,151	-2,806	-2,806	-2,806	-2,806	-2,806	-2,806	-2,806	-20,333	-28,752
3	-1,739	-1,739	-1,739	-1,739	-2,151	-2,806	-2,806	-2,806	-2,806	-2,806	-2,806	-2,806	-20,333	-28,752
4	1,739	1,739	1,739	1,739	2,151	2,806	2,806	2,806	2,806	2,806	2,806	2,806	20,333	28,752
5	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8													0	0
9													0	0
10													0	0
11													0	0
12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16	0	0	0	0	0	30	5	1	6	5	6	7	42	60
17	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19													0	0
20													0	0
21													0	0
22						-719						152	-719	-567
23	0	0	0	0	0	0	0	0	0	0	0	-152	0	-152
24	0	0	0	0	0	719	0	0	0	0	0	0	719	719
25	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	329	363	289	145	358	384	-976	315	241	-340	-351	-817	1,448	-60
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	329	363	289	145	358	414	-971	316	247	-335	-345	-810	1,490	0

Table A1 - Underlying Position

This table needs completing monthly from Month: 6

This Table is currently showing 0 errors

Section A - By Spend Area		IMTP	Full Year Effect of Actions			New, Recurring, Full Year Effect of Unmitigated Pressures (-ve)	IMTP
		Underlying Position b/f	Recurring Savings (+ve)	Recurring Allocations / Income (+ve)	Subtotal	£'000	Underlying Position c/f
		£'000	£'000	£'000	£'000	£'000	£'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 B - By Directorate		IMTP	Full Year Effect of Actions			New, Recurring, Full Year Effect of Unmitigated Pressures (-ve)	IMTP
		Underlying Position b/f	Recurring Savings (+ve)	Recurring Allocations / Income (+ve)	Subtotal	£'000	Underlying Position c/f
		£'000	£'000	£'000	£'000	£'000	£'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

This Table is currently showing 0 errors

Table A2 - Overview Of Key Risks & Opportunities		FORECAST YEAR END	
		£'000	Likelihood
	Opportunities to achieve IMTP/AOP (positive values)		
1	Red Pipeline schemes (inc AG & IG)		
2	Potential Cost Reduction		
3	Total Opportunities to achieve IMTP/AOP	0	
	Risks (negative values)		
4	Under delivery of Amber Schemes included in Outturn via Tracker		
5	Continuing Healthcare		
6	Prescribing		
7	Pharmacy Contract		
8	WHSSC Performance		
9	Other Contract Performance		
10	GMS Ring Fenced Allocation Underspend Potential Claw back		
11	Dental Ring Fenced Allocation Underspend Potential Claw back		
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26	Total Risks	0	
	Further Opportunities (positive values)		
27			
28			
29			
30			
31			
32			
33			
34	Total Further Opportunities	0	
35	Current Reported Forecast Outturn	0	
36	IMTP / AOP Outturn Scenario	0	
37	Worst Case Outturn Scenario	0	
38	Best Case Outturn Scenario	0	

Table B - Monthly Positions

YTD Months to be completed from Month: 1  
Forecast Months to be completed from Month: 3

Period : Dec 20

This Table is currently showing 0 errors

A. Monthly Summarised Statement of Comprehensive Net Expenditure / Statement of Comprehensive Net Income			1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year-end position
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	£'000	£'000
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Revenue Resource Limit	Actual/F'cast	17,662	18,470	18,566	15,390	18,812	20,484	19,430	20,496	21,230	22,300	20,500	25,519	170,540	238,859
2	Capital Donation / Government Grant Income	Actual/F'cast													0	0
3	Welsh NHS Local Health Boards & Trusts Income	Actual/F'cast													0	0
4	WHSSC Income	Actual/F'cast													0	0
5	Welsh Government Income (Non RRL)	Actual/F'cast													0	0
6	Other Income	Actual/F'cast	30	38	72	28	27	25	21	43	38	34	36	33	322	425
7	Income Total		17,692	18,508	18,638	15,418	18,839	20,509	19,451	20,539	21,268	22,334	20,536	25,552	170,862	239,284
8	Primary Care Contractor (excluding drugs, including non resource limited expenditure)	Actual/F'cast													0	0
9	Primary Care - Drugs & Appliances	Actual/F'cast													0	0
10	Provided Services - Pay	Actual/F'cast	1,268	1,260	1,267	1,265	1,278	1,276	1,351	1,342	1,397	1,372	1,369	1,536	11,704	15,981
11	Provider Services - Non Pay (excluding drugs & depreciation)	Actual/F'cast	1,149	1,121	1,189	(226)	703	1,197	1,058	1,065	1,428	1,494	1,312	3,974	8,684	15,464
12	Secondary Care - Drugs	Actual/F'cast													0	0
13	Healthcare Services Provided by Other NHS Bodies	Actual/F'cast													0	0
14	Non Healthcare Services Provided by Other NHS Bodies	Actual/F'cast													0	0
15	Continuing Care and Funded Nursing Care	Actual/F'cast													0	0
16	Other Private & Voluntary Sector	Actual/F'cast	14,904	15,722	15,851	14,192	16,458	17,580	17,971	17,774	18,154	19,760	18,157	20,809	148,606	207,332
17	Joint Financing and Other	Actual/F'cast													0	0
18	Losses, Special Payments and Irrecoverable Debts	Actual/F'cast													0	0
19	Exceptional (Income) / Costs - (Trust Only)	Actual/F'cast													0	0
20	Total Interest Receivable - (Trust Only)	Actual/F'cast													0	0
21	Total Interest Payable - (Trust Only)	Actual/F'cast													0	0
22	DEL Depreciation(Accelerated Depreciation/Impairments	Actual/F'cast	42	42	42	42	42	42	42	42	42	43	43	43	378	507
23	AME Donated Depreciation/Impairments	Actual/F'cast													0	0
24	Uncommitted Reserves & Contingencies	Actual/F'cast													0	0
25	Profit/Loss Disposal of Assets	Actual/F'cast													0	0
26	Cost - Total	Actual/F'cast	17,363	18,145	18,349	15,273	18,481	20,095	20,422	20,223	21,021	22,669	20,881	26,362	169,372	239,284
27	Net surplus/ (deficit)	Actual/F'cast	329	363	289	145	358	414	(971)	316	247	(335)	(345)	(810)	1,490	0

B. Assessment of Financial Forecast Positions

Year-to-date (YTD)	£'000	Full-year surplus/ (deficit) scenarios	£'000
28 . Actual YTD surplus/ (deficit)	1,490	33. Extrapolated Scenario	2,231
29. Actual YTD surplus/ (deficit) last month	1,243	34. Year to Date Trend Scenario	1,987
30. Current month actual surplus/ (deficit)	247		
31. Average monthly surplus/ (deficit) YTD	166		
32. YTD /remaining months	497		

C. DEL/AME Depreciation & Impairments

			1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year-end position
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	£'000	£'000
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
35	DEL															
35	Baseline Provider Depreciation	Actual/F'cast	42	42	42	42	42	42	42	42	42	43	43	43	378	507
36	Strategic Depreciation	Actual/F'cast													0	0
37	Accelerated Depreciation	Actual/F'cast													0	0
38	Impairments	Actual/F'cast													0	0
39	Other (Specify in Narrative)	Actual/F'cast													0	0
40	Total		42	42	42	42	42	42	42	42	42	43	43	43	378	507
41	AME															
41	Donated Asset Depreciation	Actual/F'cast													0	0
42	Impairments	Actual/F'cast													0	0
43	Other (Specify in Narrative)	Actual/F'cast													0	0



44	Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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D. Accountancy Gains

		1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year-end position
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
45	Accountancy Gains	Actual/F'cast	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	Total YTD	Forecast year-end position
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
	List of all Committed Reserves & Contingencies inc above in Section A. Please specify Row number in description.														
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	Forecast Only													0	0
68	Forecast Only													0	0
69	Forecast Only													0	0
70	Forecast Only													0	0
71	Forecast Only													0	0
72	Forecast Only													0	0
73	Forecast Only													0	0
74	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!	

Period : Dec 20

YTD Months to be completed from Month: 1  
Forecast Months to be completed from Month: 3

This Table is currently showing 0 errors

Table B2 - Pay Expenditure Analysis

A - Pay Expenditure

REF	TYPE	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	£'000	year-end position £'000
1	Administrative, Clerical & Board Members	763	756	765	737	756	766	796	823	864	841	837	1,142	7,026	9,846
2	Medical & Dental	419	420	415	413	420	416	439	410	420	435	435	435	3,772	5,077
3	Nursing & Midwifery Registered	6	5	6	32	13	11	12	14	12	12	12	16	111	151
4	Prof Scientific & Technical	68	68	70	72	78	72	92	84	91	74	75	83	695	927
5	Additional Clinical Services	12	11	11	11	11	11	12	11	10	10	10	12	100	132
6	Allied Health Professionals													0	0
7	Healthcare Scientists													0	0
8	Estates & Ancillary													0	0
9	Students													0	0
10	TOTAL PAY EXPENDITURE	1,268	1,260	1,267	1,265	1,278	1,276	1,351	1,342	1,397	1,372	1,369	1,688	11,704	16,133

Analysis of Pay Expenditure															
11	LHB Provided Services - Pay	1,268	1,260	1,267	1,265	1,278	1,276	1,351	1,342	1,397	1,372	1,369	1,536	11,704	15,981
12	Other Services (incl. Primary Care) - Pay												152	0	152
13	Total - Pay	1,268	1,260	1,267	1,265	1,278	1,276	1,351	1,342	1,397	1,372	1,369	1,688	11,704	16,133
		0	0	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	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	£'000	year-end position £'000
1	Administrative, Clerical & Board Members	27	17	19	13	16	9	18	19	6	15	15	20	144	194
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	27	17	19	13	16	9	18	19	6	15	15	20	144	194

11	Agency/Locum (premium) % of pay	2.1%	1.3%	1.5%	1.0%	1.3%	0.7%	1.3%	1.4%	0.4%	1.1%	1.1%	1.2%	1.2%	1.2%
		1	1	1	1	1	1	1	1	1	1	1	1	1	1

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

REF	REASON	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	£'000	year-end position £'000
1	Vacancy	27	17	19	13	16	9	18	19	6	15	15	20	144	194
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	COVID-19													0	0
14	TOTAL AGENCY/LOCUM (PREMIUM) EXPENDITURE	27	17	19	13	16	9	18	19	6	15	15	20	144	194
		0	0	0	0	0	0	0	0	0	0	0	0	0	0

This Table is currently showing 0 errors

Table B3 - COVID-19 Analysis

A - Additional Expenditure

REF	Enter as positive values	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year-end position
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Pay (Additional costs due to C19)														
2	Establishment & Bank Additional Hours:														
3	Administrative, Clerical & Board Members													0	0
4	Medical & Dental													0	0
5	Nursing & Midwifery Registered													0	0
6	Prof Scientific & Technical													0	0
7	Additional Clinical Services													0	0
8	Allied Health Professionals													0	0
9	Healthcare Scientists													0	0
10	Estates & Ancillary													0	0
11	Sub total Establishment & Bank Additional Hours	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12	Agency:														
13	Administrative, Clerical & Board Members													0	0
14	Medical & Dental													0	0
15	Nursing & Midwifery Registered													0	0
16	Prof Scientific & Technical													0	0
17	Additional Clinical Services													0	0
18	Allied Health Professionals													0	0
19	Healthcare Scientists													0	0
20	Estates & Ancillary													0	0
21	Sub total Agency	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	Returners (Provide WTE to the right):														
23	Administrative, Clerical & Board Members													0	0
24	Medical & Dental													0	0
25	Nursing & Midwifery Registered													0	0
26	Prof Scientific & Technical													0	0
27	Additional Clinical Services													0	0
28	Allied Health Professionals													0	0
29	Healthcare Scientists													0	0
30	Estates & Ancillary													0	0
31	Sub total Returners	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32	Students (Provide WTE to the right):														
33	Medical & Dental													0	0
34	Nursing & Midwifery Registered													0	0
35	Prof Scientific & Technical													0	0
36	Additional Clinical Services													0	0
37	Allied Health Professionals													0	0
38	Healthcare Scientists													0	0
39	Estates & Ancillary													0	0
40	Sub total Students	0	0	0	0	0	0	0	0	0	0	0	0	0	0
41	Other Temp Staff (Provide WTE to the right):														
42	Administrative, Clerical & Board Members													0	0
43	Medical & Dental													0	0
44	Nursing & Midwifery Registered													0	0
45	Prof Scientific & Technical													0	0
46	Additional Clinical Services													0	0
47	Allied Health Professionals													0	0
48	Healthcare Scientists													0	0
49	Estates & Ancillary													0	0
50	Sub total Other Temp Staff	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51	Other (specify below and in narrative)														
52	Anticipated Increase in Annual Leave accrual for HEIW Employees												152	0	152
53														0	0
54														0	0
55														0	0
56	TOTAL ADDITIONAL PAY EXPENDITURE	0	0	0	0	0	0	0	0	0	0	0	152	0	152



B - Non Delivery of Planned Savings Due To C19

		1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year-end position
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Enter as Positive values															
111	Non Delivery of Planned Savings (due to C19)														
112	Non Delivery of Finalised (M1) Savings													0	0
113	Non delivery of Savings Assumed but not finalised at M1													0	0
114	TOTAL NON DELIVERY OF PLANNED SAVINGS	0	0	0	0	0	0	0	0	0	0	0	0	0	0

C - Planned Operational Expenditure Cost Reduction Due To C19

		1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year-end position
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Enter as Negative values															
115	Expenditure Reductions (due to C19)														
116	Reduction of non pay costs due to reduced elective activity													0	0
117	Reduction of outsourcing costs due to reduced planned activity													0	0
118	Reduction of travel and expenses													0	0
119	Delayed course start dates						(719)							(719)	(719)
120														0	0
121														0	0
122														0	0
123														0	0
124														0	0
125	TOTAL EXPENDITURE REDUCTION (Agrees to Table A)	0	0	0	0	0	(719)	0	0	0	0	0	0	(719)	(719)
		0	0	0	0	0	0	0	0	0	0	0	0	0	0

D - Slippage on Planned Investments/Repurposing of Developmental Initiatives due to C19

		1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year-end position
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Enter as Negative values															
126	Slippage on Planned Investments/Repurposing of Developmental Initiatives (due to C19)													0	0
127														0	0
128														0	0
129														0	0
130														0	0
131														0	0
132														0	0
133														0	0
134														0	0
135														0	0
136	TOTAL RELEASE/REPURPOSING OF PLANNED INVESTMENTS/DEVELOPMENT INITIATIVES (Agrees to Table A)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
137	NET EXPENDITURE DUE TO Covid-19	0	0	0	0	0	(719)	0	0	0	0	0	0	152	(567)
		0	0	0	0	0	0	0	0	0	0	0	0	0	0

A - WTE of New Staff

		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
		WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE
22	<b>Returners:</b>	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
23	Administrative, Clerical & Board Members												
24	Medical & Dental												
25	Nursing & Midwifery Registered												
26	Prof Scientific & Technical												
27	Additional Clinical Services												
28	Allied Health Professionals												
29	Healthcare Scientists												
30	Estates & Ancillary												
31	<b>Sub total Returners</b>	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
32	<b>Students:</b>												
33	Medical & Dental												
34	Nursing & Midwifery Registered												
35	Prof Scientific & Technical												
36	Additional Clinical Services												
37	Allied Health Professionals												
38	Healthcare Scientists												
39	Estates & Ancillary												
40	<b>Sub total Students</b>	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
41	<b>Other Temp Staff:</b>												
42	Administrative, Clerical & Board Members												
43	Medical & Dental												
44	Nursing & Midwifery Registered												
45	Prof Scientific & Technical												
46	Additional Clinical Services												
47	Allied Health Professionals												
48	Healthcare Scientists												
49	Estates & Ancillary												
50	<b>Sub total Other Temp Staff</b>	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

A1 - Major Projects : Change in Bed Numbers Due To C19 (subset of Table A)

		1	2	3	4	5	6	7	8	9	10	11	12
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
REF	Enter as positive values												
98	Major Projects: Bed Capacity (due to C19)												
99													
100													
101													
102													
103													
104													
105													
106													
107													
108													
109													
110	TOTAL MAJOR PROJECTS: ADDITIONAL BED CAPACITY	0	0	0	0	0	0	0	0	0	0	0	0

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

Period : Dec 20

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	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
2	Nursing Care	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		Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
5	Commissioned Services	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	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
8	(Primary & Secondary Care)	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
9		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
10		Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		56	0			
11	Non Pay	Actual/F'cast	0	0	0	0	0	30	5	0	5	5	5	6	40	56	71.43%	56	0	56	0	0
12		Variance	0	0	0	0	0	30	5	0	5	5	5	6	40	56		0	0			
13		Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		4	0			
14	Pay	Actual/F'cast	0	0	0	0	0	0	0	1	1	0	1	1	2	4	50.00%	4	0	4	0	0
15		Variance	0	0	0	0	0	0	0	1	1	0	1	1	2	4		0	0			
16		Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
17	Primary Care	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
18		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
19		Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		60	0			
20	Total	Actual/F'cast	0	0	0	0	0	30	5	1	6	5	6	7	42	60	70.00%	60	0	60	0	0
21		Variance	0	0	0	0	0	30	5	1	6	5	6	7	42	60		0	0			
22	Variance in month																					
23	In month achievement against FY forecast		0.00%	0.00%	0.00%	0.00%	0.00%	50.00%	8.33%	1.67%	10.00%	8.33%	10.00%	11.67%								



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 £'000
			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	
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			4	0			
17		Actual/F'cast	0	0	0	0	0	0	0	1	1	0	1	1	2	4	50.00%		4	0	4	0	0
18		Variance	0	0	0	0	0	0	0	1	1	0	1	1	2	4			0	0			
19	Total	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0			4	0			
20		Actual/F'cast	0	0	0	0	0	0	0	1	1	0	1	1	2	4	50.00%		4	0	4	0	0
21		Variance	0	0	0	0	0	0	0	1	1	0	1	1	2	4			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 £'000
			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	
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			

Table C3 - Tracker

This Table is currently showing 0 errors

	£'000	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Full-year forecast	Non Recurring	Recurring	FYE Adjustment	Full-year Effect
Savings (Cash Releasing & Cost Avoidance)	Month 1 - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Month 1 - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Plan	0	0	0	0	0	30	5	5	5	5	5	5	45	60	60	0	60	60
	In Year - Actual/Forecast	0	0	0	0	0	30	5	1	6	5	6	7	42	60	60	0	60	60
	Variance	0	0	0	0	0	0	0	(4)	1	0	1	2	(3)	0	0	0	0	0
	Total Plan	0	0	0	0	0	30	5	5	5	5	5	5	45	60	60	0	60	60
	Total Actual/Forecast	0	0	0	0	0	30	5	1	6	5	6	7	42	60	60	0	60	60
	Total Variance	0	0	0	0	0	0	0	(4)	1	0	1	2	(3)	0	0	0	0	0
Income Generation	Month 1 - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Month 1 - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accountancy Gains	Month 1 - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Month 1 - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	Month 1 - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Month 1 - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Plan	0	0	0	0	0	30	5	5	5	5	5	5	45	60	60	0	60	60
	In Year - Actual/Forecast	0	0	0	0	0	30	5	1	6	5	6	7	42	60	60	0	60	60
	Variance	0	0	0	0	0	0	0	(4)	1	0	1	2	(3)	0	0	0	0	0
	Total Plan	0	0	0	0	0	30	5	5	5	5	5	5	45	60	60	0	60	60
	Total Actual/Forecast	0	0	0	0	0	30	5	1	6	5	6	7	42	60	60	0	60	60
	Total Variance	0	0	0	0	0	0	0	(4)	1	0	1	2	(3)	0	0	0	0	0

## HEIW

Period : Dec 20

**Table D - Income/Expenditure Assumptions**

### Annual Forecast

	LHB/Trust	Contracted Income £'000	Non Contracted Income £'000	Total Income £'000	Contracted Expenditure £'000	Non Contracted Expenditure £'000	Total Expenditure £'000
1	Swansea Bay University		4	4		12,438	12,438
2	Aneurin Bevan University		4	4		9,554	9,554
3	Betsi Cadwaladr University		4	4		14,987	14,987
4	Cardiff & Vale University		7	7		20,935	20,935
5	Cwm Taf Morgannwg University		4	4		11,184	11,184
6	Hywel Dda University		3	3		7,004	7,004
7	Powys			0		469	469
8	Public Health Wales		9	9		1,342	1,342
9	Velindre		20	20		35,992	35,992
10	NWSSP			0			0
11	NWIS			0			0
12	Wales Ambulance Services			0		643	643
13	WHSSC			0			0
14	EASC			0			0
15	HEIW			0			0
16	NHS Wales Executive			0			0
17	<b>Total</b>	<b>0</b>	<b>55</b>	<b>55</b>	<b>0</b>	<b>114,548</b>	<b>114,548</b>

Table E - Resource Limits

Table E - Resource Limits		STATUS OF ISSUED RESOURCE LIMIT ITEMS				Total Revenue Resource Limit £'000	Recurring (R) or Non Recurring (NR)	Total Revenue Drawing Limit £'000	Total Capital Resource Limit £'000	Total Capital Drawing Limit £'000	WG Contact and Date Item First Entered Into Table
		HCHS £'000	Pharmacy £'000	Dental £'000	GMS £'000						
1. BASE ALLOCATION											
1	LATEST ALLOCATION LETTER/SCHEDULE REF:	10									
2	Total Confirmed Funding	237,176				237,176		236,656	151	151	
2. ANTICIPATED ALLOCATIONS											
3	DEL Non Cash Depreciation - Baseline Surplus / Shortfall					0					
4	DEL Non Cash Depreciation - Strategic					0					
5	DEL Non Cash Depreciation - Accelerated					0					
6	DEL Non Cash Depreciation - Impairment					0					
7	AME Non Cash Depreciation - Donated Assets					0					
8	AME Non Cash Depreciation - Impairment					0					
9	AME Non Cash Depreciation - Impairment Reversals					0					
10	Removal of Donated Assets / Government Grant Receipts					0					
11	Nurse Staffing Act	180				180	NR	180			Month 1 - Richard Dudley
12	WCLF QIST (Pharmacy)	33				33	NR	33			Month 1 - Richard Dudley
13	Commitment Awards	38				38	NR	38			Month 1 - Richard Dudley
14	Development Funding	600				600	NR	600			Month 1 - Richard Dudley
15	Strategic Review of Education Provision	240				240	NR	240			Month 1 - Richard Dudley
16	Leadership & Succession Posts	77				77	R	77			Month 1 - Richard Dudley
17	SAS Post	111				111	R	111			Month 1 - Richard Dudley
18	Single Lead Employer Foundation	260				260	R	260			Month 1 - Richard Dudley
19	Senior Software Developer	56				56	R	56			Month 1 - Richard Dudley
20	WCLTF Optometry - 50% Funding	34				34	NR	34			Month 4
21	CDDS Dental posts P7-12	9				9	NR	9			Month 7
22	Healthcare Science Team	45				45	NR	45			Month 9
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	1,683	0	0	0	1,683		1,683	0	0	
3. TOTAL RESOURCES & BUDGET RECONCILIATION											
57	Confirmed Resources Per 1. above	237,176	0	0	0	237,176		236,656	151	151	
58	Anticipated Resources Per 2. above	1,683	0	0	0	1,683		1,683	0	0	
59	Total Resources	238,859	0	0	0	238,859		238,339	151	151	

This Table is currently showing 0 errors

Table E1 - Invoiced Income Streams - TRUSTS ONLY

Ref		Swansea Bay ULHB £'000	Aneurin Bevan ULHB £'000	Betsi Cadwaladr ULHB £'000	Cardiff & Vale ULHB £'000	Cwm Taf Morgannwg ULHB £'000	Hywel Dda ULHB £'000	Powys LHB £'000	Public Health Wales NHS Trust £'000	Welsh Ambulance NHS Trust £'000	Velindre NHS Trust £'000	NWSSP £'000	NWIS £'000	HEIW £'000	WG £'000	EASC £'000	WHSSC £'000	Other (please specify) £'000	Total £'000	WG Contact and date item first entered into table
1	Agreed full year income																		0	
	Details of Anticipated Income																			
2	DEL Non Cash Depreciation - Baseline Surplus / Shortfall																		0	
3	DEL Non Cash Depreciation - Strategic																		0	
4	DEL Non Cash Depreciation - Accelerated																		0	
5	DEL Non Cash Depreciation - Impairment																		0	
6	AME Non Cash Depreciation - Donated Assets																		0	
7	AME Non Cash Depreciation - Impairment																		0	
8	AME Non Cash Depreciation - Impairment Reversals																		0	
9																			0	
10																			0	
11																			0	
12																			0	
13																			0	
14																			0	
15																			0	
16																			0	
17																			0	
18																			0	
19																			0	
20																			0	
21																			0	
22																			0	
23																			0	
24																			0	
25																			0	
26																			0	
27																			0	
28																			0	
29																			0	
30																			0	
31																			0	
32																			0	
33																			0	
34																			0	
35	Total Income	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

HEIW

Period : Dec 20

This table needs completing monthly from Month: 6  
This Table is currently showing 0 errors

Table F - Statement of Financial Position For Monthly Period

	Opening Balance Beginning of Apr 20	Closing Balance End of Dec 20	Forecast Closing Balance End of Mar 21
<b>Non-Current Assets</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>
1 Property, plant and equipment	2,596	2,219	2,240
2 Intangible assets			
3 Trade and other receivables			
4 Other financial assets			
5 Non-Current Assets sub total	2,596	2,219	2,240
<b>Current Assets</b>			
6 Inventories			
7 Trade and other receivables	1,046	904	1,046
8 Other financial assets			
9 Cash and cash equivalents	7,465	574	7,839
10 Non-current assets classified as held for sale			
11 Current Assets sub total	8,511	1,478	8,885
12 <b>TOTAL ASSETS</b>	<b>11,107</b>	<b>3,697</b>	<b>11,125</b>
<b>Current Liabilities</b>			
13 Trade and other payables	7,301	17,442	7,506
14 Borrowings (Trust Only)			
15 Other financial liabilities			
16 Provisions			
17 Current Liabilities sub total	7,301	17,442	7,506
18 <b>NET ASSETS LESS CURRENT LIABILITIES</b>	<b>3,806</b>	<b>(13,745)</b>	<b>3,619</b>
<b>Non-Current Liabilities</b>			
19 Trade and other payables			
20 Borrowings (Trust Only)			
21 Other financial liabilities			
22 Provisions	130	130	130
23 Non-Current Liabilities sub total	130	130	130
24 <b>TOTAL ASSETS EMPLOYED</b>	<b>3,676</b>	<b>(13,875)</b>	<b>3,489</b>
<b>FINANCED BY: Taxpayers' Equity</b>			
25 General Fund	3,676	(13,875)	3,489
26 Revaluation Reserve			
27 PDC (Trust only)			
28 Retained earnings (Trust Only)			
29 Other reserve			
30 <b>Total Taxpayers' Equity</b>	<b>3,676</b>	<b>(13,875)</b>	<b>3,489</b>

	Opening Balance Beginning of Apr 20	Closing Balance End of Dec 20	Closing Balance End of Mar 21
<b>EXPLANATION OF ALL PROVISIONS</b>			
31 Provision for Overtime Holiday Pay Claims	4	4	4
32 Provision for probable payment of untaken annual leave	126	126	126
33			
34			
35			
36			
37			
38			
39			
40 <b>Total Provisions</b>	<b>130</b>	<b>130</b>	<b>130</b>

<b>ANALYSIS OF WELSH NHS RECEIVABLES (current month)</b>	<b>£'000</b>
41 Welsh NHS Receivables Aged 0 - 10 weeks	49
42 Welsh NHS Receivables Aged 11 - 16 weeks	0
43 Welsh NHS Receivables Aged 17 weeks and over	0

<b>ANALYSIS OF TRADE &amp; OTHER PAYABLES (opening, current &amp; closing)</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>
44 Capital	0	0	0
45 Revenue	7,301	17,442	7,506

<b>ANALYSIS OF CASH (opening, current &amp; closing)</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>
46 Capital	0	0	0
47 Revenue	7,465	574	7,839

This Table is currently showing 0 errors

This table needs completing monthly from Month: 6

Table G - Monthly Cashflow Forecast

		April £'000	May £'000	June £'000	July £'000	Aug £'000	Sept £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £,000	Total £,000
	<b>RECEIPTS</b>													
1	WG Revenue Funding - Cash Limit (excluding NCL) - LHB & SHA only	14,500	15,500	8,500	18,500	22,500	20,000	21,500	14,000	16,500	22,500	23,000	41,339	238,339
2	WG Revenue Funding - Non Cash Limited (NCL) - LHB & SHA only													0
3	WG Revenue Funding - Other (e.g. invoices)													0
4	WG Capital Funding - Cash Limit - LHB & SHA only												151	151
5	Income from other Welsh NHS Organisations	13	27	6	0	2	2	18	0	21				89
6	Short Term Loans - Trust only													0
7	PDC - Trust only													0
8	Interest Receivable - Trust only													0
9	Sale of Assets													0
10	Other - (Specify in narrative)	19	62	102	249	876	36	19	48	36	38	34	135	1,654
11	<b>TOTAL RECEIPTS</b>	<b>14,532</b>	<b>15,589</b>	<b>8,608</b>	<b>18,749</b>	<b>23,378</b>	<b>20,038</b>	<b>21,537</b>	<b>14,048</b>	<b>16,557</b>	<b>22,538</b>	<b>23,034</b>	<b>41,625</b>	<b>240,233</b>
	<b>PAYMENTS</b>													
12	Primary Care Services : General Medical Services													0
13	Primary Care Services : Pharmacy Services													0
14	Primary Care Services : Prescribed Drugs & Appliances													0
15	Primary Care Services : General Dental Services													0
16	Non Cash Limited Payments													0
17	Salaries and Wages	1,217	1,205	1,211	1,259	1,235	1,306	1,320	1,363	1,372	1,372	1,369	1,536	15,765
18	Non Pay Expenditure	14,151	15,886	12,427	17,508	19,459	14,224	18,171	18,019	18,594	21,414	18,686	35,555	224,094
19	Short Term Loan Repayment - Trust only													0
20	PDC Repayment - Trust only													0
21	Capital Payment													0
22	Other items (Specify in narrative)													0
23	<b>TOTAL PAYMENTS</b>	<b>15,368</b>	<b>17,091</b>	<b>13,638</b>	<b>18,767</b>	<b>20,694</b>	<b>15,530</b>	<b>19,491</b>	<b>19,382</b>	<b>19,966</b>	<b>22,786</b>	<b>20,055</b>	<b>37,091</b>	<b>239,859</b>
24	Net cash inflow/outflow	(836)	(1,502)	(5,030)	(18)	2,684	4,508	2,046	(5,334)	(3,409)	(248)	2,979	4,534	
25	Balance b/f	7,465	6,629	5,127	97	79	2,763	7,271	9,317	3,983	574	326	3,305	
26	Balance c/f	6,629	5,127	97	79	2,763	7,271	9,317	3,983	574	326	3,305	7,839	

Table H - PSPP

This table needs completing on a quarterly basis  
NOTE: Data to 1 decimal place

30 DAY COMPLIANCE		ACTUAL Q1			ACTUAL Q2		ACTUAL Q3		ACTUAL Q4		YEAR TO DATE		FORECAST YEAR END	
	PROMPT PAYMENT OF INVOICE PERFORMANCE	Target %	Actual %	Variance %	Actual %	Variance %	Actual %	Variance %	Actual %	Variance %	Actual %	Variance %	Forecast %	Variance %
1	% of NHS Invoices Paid Within 30 Days - By Value	95.0%	95.7%	0.7%	87.9%	-7.1%	99.7%	4.7%		-95.0%	94.5%	-0.5%	95.0%	0.0%
2	% of NHS Invoices Paid Within 30 Days - By Number	95.0%	87.9%	-7.1%	93.2%	-1.8%	95.1%	0.1%		-95.0%	92.3%	-2.7%	93.0%	-2.0%
3	% of Non NHS Invoices Paid Within 30 Days - By Value	95.0%	99.6%	4.6%	97.8%	2.8%	99.9%	4.9%		-95.0%	99.1%	4.1%	98.0%	3.0%
4	% of Non NHS Invoices Paid Within 30 Days - By Number	95.0%	87.7%	-7.3%	98.1%	3.1%	98.1%	3.1%		-95.0%	94.5%	-0.5%	95.0%	0.0%

10 DAY COMPLIANCE		ACTUAL Q1		ACTUAL Q2		ACTUAL Q3		ACTUAL Q4		YEAR TO DATE		FORECAST YEAR END	
	PROMPT PAYMENT OF INVOICE PERFORMANCE	Actual %		Actual %		Actual %		Actual %		Actual %		Actual %	
5	% of NHS Invoices Paid Within 10 Days - By Value	76.4%		63.3%		67.9%				68.6%		70.0%	
6	% of NHS Invoices Paid Within 10 Days - By Number	46.7%		32.7%		29.0%				35.7%		37.0%	
7	% of Non NHS Invoices Paid Within 10 Days - By Value	77.8%		67.4%		72.2%				72.4%		75.0%	
8	% of Non NHS Invoices Paid Within 10 Days - By Number	36.0%		31.2%		35.2%				34.2%		35.0%	



This Table is currently showing 0 errors

Table I - 2020-21 Capital Resource / Expenditure Limit Management

£'000151

Approved CRL / CEL issued at :9/4/20

Ref:	Performance against CRL / CEL	Year To Date			Forecast		
		Plan £'000	Actual £'000	Variance £'000	Plan £'000	F'cast £'000	Variance £'000
	<i>Gross expenditure (accrued, to include capitalised finance leases)</i>						
	All Wales Capital Programme:						
	Schemes:						
1	Pharmacy Equipment			0	46	0	(46)
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	46	0	(46)
	Discretionary:						
43	I.T.			0			0
44	Equipment			0			0
45	Statutory Compliance			0			0
46	Estates			0			0
47	Other			0	105	105	0
48	Sub Total	0	0	0	105	105	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	0
70	Total Expenditure	0	0	0	151	105	(46)	
	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	0
	Donations:							
77				0				0
78	Sub Total	0	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	0
91	Technical Adjustments			0				0
92	CHARGE AGAINST CRL / CEL	0	0	0	151	105	(46)	
93	PERFORMANCE AGAINST CRL / CEL (Under)/Over		(151)			(46)		

YTD Months to be completed from Month: 4  
Forecast Months to be completed from Month: 6

Table J - In Year Capital Scheme Profiles

This Table is currently showing 0 error:

Ref:	All Wales Capital Programme: Schemes:	Project Manager	In Year Min. £'000	Forecast Max. £'000	Capital Expenditure Monthly Profile												YTD £'000	Total £'000	Risk Level
					April £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000			
1	Pharmacy Equipment	Margaret Allen	0	0												0	0	0	High
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	
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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	Sub Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Discretionary:																			
35	I.T.	Martyn Pennell															0	0	
36	Equipment	Martyn Pennell															0	0	
37	Statutory Compliance	Martyn Pennell															0	0	
38	Estates	Martyn Pennell															0	0	
39	Other	Martyn Pennell	0	105										0	35	70	0	105	Low
40	Sub Total		0	105	0	0	0	0	0	0	0	0	0	0	35	70	0	105	
Other Schemes:																			
41																	0	0	
42																	0	0	
43																	0	0	
44																	0	0	
45																	0	0	
46																	0	0	
47																	0	0	
48																	0	0	
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	Sub Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
62	Total Capital Expenditure		0	105	0	0	0	0	0	0	0	0	0	0	35	70	0	105	

Table K - 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 £'000	Sales Receipts £'000	Cost of Disposals £'000	Gain/ (Loss) £'000	Comments
		MM/YY (text format, e.g. Apr 20)	MM/YY (text format, e.g. Apr 20)	MM/YY (text format, e.g. Feb 21)					
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	

This Table is currently showing 0 errors  
This table needs completing monthly from Month: 6

Table L: EXTERNAL FINANCING LIMIT

		Full Year Per WG £'000	Full Year Per Trust £'000	Planning Variance £'000	Actual to date £'000
REF	NET FINANCIAL CHANGE	A	B	C	D
1	Retained surplus/(deficit) for period			0	
2	Depreciation			0	
3	Depreciation on Donated Assets			0	
4	DEL and AME Impairments			0	
5	Net gain/loss on disposal of assets			0	
6	Profit/loss on sale term of disc ops			0	
7	Proceeds of Capital Disposals			0	
8	Other Income (specify)			0	
9	APPLICATION OF FUNDS				
10	Capital Expenditure			0	
11	Other Expenditure			0	
	MOVEMENTS IN WORKING CAPITAL				
12	Inventories			0	
13	Current assets - Trade and other receivables			0	
14	Current liabilities - Trade and other payables			0	
15	Non current liabilities - Trade and other payables			0	
16	Provisions			0	
17	Sub total - movement in working capital	0	0	0	0
18	NET FINANCIAL CHANGE	0	0	0	0
	EFL REQUIREMENT TO BE MET BY				
19	Increase in Public Dividend Capital			0	
20	Net change in temporary borrowing			0	
21	Change in bank deposits and interest bearing securities			0	
22	Net change in finance lease payables			0	
23	TOTAL EXTERNAL FINANCE	0	0	0	0

[illegible]

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

Table N - General Medical Services  
Table to be completed from Q2

This Table is currently showing 0 errors

Operating Expenditure - ring fenced GMS budget

SUMMARY OF GENERAL MEDICAL SERVICES FINANCIAL POSITION			WG Allocation £000's	Current Plan	Forecast Outturn £000's	Variance £000's	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					
Quality Assurance Improvement Framework (QAIF)		6					
QAIF (in hours Access)		7					
Total Quality		8				0	0
Direct Enhanced Services	(To equal data in Section A (i) Line 32)	9				0	
National Enhanced Services	(To equal data in Section A (ii) Line 42)	10				0	
Local Enhanced Services	(To equal data in Section A (iii) Line 95)	11				0	
Total Enhanced Services	(To equal data in section A Line 96)	12		0	0	0	0
LHB Administered	(To equal data in Section B Line 109)	13				0	
Premises	(To equal data in section C Line 138)	14				0	
IM & T		15				0	
Out of Hours	(including OOHDF)	16				0	
Dispensing	(To equal data in Line 154)	17				0	
Total		18	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		19				0	
Childhood Immunisation Scheme		20				0	
Mental Health		21				0	
Influenza & Pneumococcal Immunisations Scheme		22				0	
Services for Violent Patients		23				0	
Minor Surgery Fees		24				0	
MENU of Agreed DES							
Asylum Seekers & Refugees		25				0	
Care of Diabetes		26				0	
Care Homes		27				0	
Extended Surgery Opening		28				0	
Gender Identity		29				0	
Homeless		30				0	
Oral Anticoagulation with Warfarin		31				0	
TOTAL Directed Enhanced Services (must equal line 9)		32		0	0	0	0
National Enhanced Services	A (ii)	LINE NO.	£000's	£000's	£000's	£000's	£000's
INR Monitoring		33				0	
Shared care drug monitoring (Near Patient Testing)		34				0	
Drug Misuse		35				0	
IUCD		36				0	
Alcohol misuse		37				0	
Depression		38				0	
Minor injury services		39				0	
Diabetes		40				0	
Services to the homeless		41				0	
TOTAL National Enhanced Services (must equal line 10)		42		0	0	0	0

<b>Local Enhanced Services</b>	<b>A (iii)</b>	<b>LINE NO.</b>	<b>£000's</b>	<b>£000's</b>	<b>£000's</b>	<b>£000's</b>	<b>£000's</b>
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
DOAC/NOAC		53					0
Drugs Misuse		54					0
Extended Minor Surgery		55					0
Gonaderlins		56					0
Homeless		57					0
HPV Vaccinations		58					0
Immunisations (inc Pertussis excluding DES - Childhood Imm & Influenza & Pneumococcal Imm)		59					0
Learning Disabilities		60					0
Lithium / INR Monitoring		61					0
Local Development Schemes		62					0
Mental Health		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
Ring Pessaries		75					0
Sexual Health Services		76					0
Shared Care		77					0
Smoking Cessation		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
Zoladex		86					0
		87					0
		88					0
		89					0
		90					0
		91					0
		92					0
		93					0
		94					0
<b>TOTAL Local Enhanced Services (must equal line 11)</b>		<b>95</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>TOTAL Enhanced Services (must equal line 12)</b>		<b>96</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

**GENERAL MEDICAL SERVICES**  
**Operating Expenditure**

<b>LHB Administered</b>	<b>Section B</b>	<b>LINE NO.</b>	<b>WG £000's</b>	<b>Current Plan £000's</b>	<b>Forecast £000's</b>	<b>Variance £000's</b>	<b>Year to Date £000's</b>
Seniority		97					
Doctors Retainer Scheme Payments		98					
Locum Allowances consists of adoptive, paternity & maternity		99					
Locum Allowances : Cover for Sick Leave		100					
Locum Allowances : Cover For Suspended Doctors		101					
Prolonged Study Leave		102					
Recruitment and Retention (including Golden Hello)		103					
Appraisal - Appraiser Costs		104					
Primary Care Development Scheme		105					
Partnership Premium		106					
Supply of syringes & needles		107					
Other (please provide detail below, this should reconcile to line 128)		108					
<b>TOTAL LHB Administered (must equal line 13)</b>		<b>109</b>				<b>0</b>	<b>0</b>



Analysis of Other Payments (line 108)	LINE NO.	£000's	£000's	£000's	£000's	£000's
Additional Managed Practice costs (costs in excess of Global Sum/MPIG)	110					
CRB checks	111					
GP Locum payments	112					
LHB Locality group costs	113					
Managing Practice costs (LHB employed staff working in GP practices to improve GP services)	114					
Primary Care Initiatives	115					
Salaried GP costs	116					
Stationery & Distribution	117					
Training	118					
Translation fees	119					
	120					
	121					
	122					
	123					
	124					
	125					
	126					
	127					
<b>TOTAL of Other Payments (must equal line 108)</b>	<b>128</b>					<b>0</b>

Premises	Section C	LINE NO.	£000's	£000's	£000's	£000's	£000's
Notional Rents		129					
Actual Rents: Health Centres		130					
Actual Rents: Others		131					
Cost Rent		132					
Clinical Waste/ Trade Refuse		133					
Rates, Water, sewerage etc		134					
Health Centre Charges		135					
Improvement Grants		136					
All other Premises (please detail below which should reconcile to line 146)		137					
<b>TOTAL Premises (must equal line 14)</b>		<b>138</b>				<b>0</b>	<b>0</b>

Analysis of Other Premises (Line 137)	LINE NO.	£000's	£000's	£000's	£000's	£000's
	139					
	140					
	141					
	142					
	143					
	144					
	145					
<b>TOTAL of Other Premises (must equal line 137)</b>	<b>146</b>					<b>0</b>

Memorandum item						
Enhanced Services included above but in dispute with LMC (TOTAL)	147					
Enhanced Services included above but not yet formally agreed LMC	148					

**GENERAL MEDICAL SERVICES**  
Dispensing

Dispensing Data	LINE NO.	WG £000's	Current Plan £000's	Forecast £000's	Variance £000's	Year to Date £000's
<b>Cost of Drugs and Appliances, after discounts and plus container allowance (and plus VAT where applicable)</b>						
Dispensing Doctors	149					
Prescribing Medical Practitioners - Personal Administration	150					
Dispensing Service Quality Payment	151					
<b>Professional Fees and on-cost</b>						
Dispensing Doctors	152					
Prescribing Medical Practitioners - Personal Administration	153					
<b>TOTAL DISPENSING DATA (must equal line 17)</b>	<b>154</b>				<b>0</b>	<b>0</b>

Table O - General Dental Services  
Table to be completed from Q2  
Operating Expenditure from the revenue allocation for the dental contract

This Table is currently showing 0 errors

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					
Sedation services including GA	16					
Continuing professional development	17					
Occupational Health / Hepatitis B	18					
Gwen Am Byth - Oral Health in care homes	19					
Refund of patient charges	20					
Design to Smile	21					
Other Community Dental Services inc WHC/2015/001	22					
Dental Foundation Training/Vocational Training	23					
DBS/CRB checks	24					
Health Board staff costs associated with the delivery / monitoring of the dental contract	25					
Oral Surgery	26					
Orthodontics	27					
Special care dentistry e.g. WHC/2015/002	28					
Oral Health Promotion/Education	29					
	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	



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

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

<b>Dyddiad y Cyfarfod</b>	<b>28 Ionawr 2021</b>	<b>Eitem agenda</b>	<b>4.2</b>
<b>Teitl yr Adroddiad</b>	<b>Cymeradwyo Fframwaith Perfformiad AaGIC a Datblygu Geirfa Data'r Dangosfwrdd Perfformiad</b>		
<b>Awdur yr Adroddiad</b>	Nicola Johnson, Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol		
<b>Noddwr yr Adroddiad</b>	Nicola Johnson, Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol		
<b>Cyflwynwyd gan</b>	Nicola Johnson, Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol		
<b>Rhyddid Gwybodaeth</b>	Agored		
<b>Diben yr Adroddiad</b>	Argymhell Fframwaith Perfformiad AaGIC i'r Bwrdd i'w gymeradwyo a nodi datblygu Geirfa Data ar gyfer y Dangosfwrdd Perfformiad yn unol ag argymhellion Archwilio Mewnol.		
<b>Materion Allweddol</b>	<p>Ym mis Mawrth 2020 cyhoeddodd Archwiliad Mewnol adroddiad ar Reoli Perfformiad a oedd yn argymhell y dylai AaGIC fod yn datblygu Fframwaith Perfformiad. Yn dilyn datblygu Fframwaith drafft trwy ymgysylltu â'r Bwrdd, y Tîm Gweithredol a'r Uwch Dîm Arweinyddiaeth mae'r Fframwaith Perfformiad terfynol ynghlwm i'w gymeradwyo.</p> <p>Argymhellion eraill yr Archwiliad Mewnol oedd datblygu Rhestr Termaw ar gyfer y Dangosfwrdd Perfformiad i sicrhau bod data'n cael ei adrodd yn gyson dros amser a bod perchnogaeth pob Dangosydd Perfformiad Allweddol (DPA) yn glir. Mae'r Rhestr Termaw Data wedi'i datblygu ymhellach i gynnwys diffiniadau a pherchnogion DPA ac mae hyn ynghlwm er gwybodaeth.</p>		
<b>Camau Penodol sy'n Ofynnol</b> ( <i>un ✓ yn</i> unig os gwelwch yn dda)	<b>Gwybodaeth</b>	<b>Trafodaeth</b>	<b>Sicrwydd</b>
	✓		
<b>Argymhellion</b>	<p>Gofynnir i'r Bwrdd:</p> <ul style="list-style-type: none"> <li>• <b>Cymeradwyo</b> Fframwaith Perfformiad AaGIC.</li> <li>• <b>Sylwch</b> ar yr Eirfa Data a ddatblygwyd i gyd-fynd â'r Dangosfwrdd Perfformiad.</li> <li>• <b>Sylwch</b> fod nifer o'r argymhellion Archwilio ar Reoli Perfformiad (y manylir arnynt yn Atodiad 3) yn gyflawn.</li> </ul>		

# **CYMERADWYO FFRAMWAITH PERFFORMIAD AaGIC A DATBLYGU GEIRFA DATA PERFFORMIAD PERFFORMIAD**

## **1. CYFLWYNIAD**

Datblygwyd Fframwaith Perfformiad AaGIC trwy ymgysylltu â'r Bwrdd, y Tîm Gweithredol a'r Uwch Dîm Arweinyddiaeth ac mae ynghlwm wrtho i'w gymeradwyo. Mae'r Eirfa Data Dangosfwrdd Perfformiad hefyd wedi'i ddatblygu ymhellach i gynnwys diffiniadau a pherchnogion DPA ac mae hyn ynghlwm er gwybodaeth.

## **2. CEFNDIR**

Yn ystod y ddwy flynedd y mae AaGIC wedi bodoli, dangoswyd Dangosfwrdd Perfformiad ar lefel Bwrdd ac Adroddiadau Perfformiad i'r Bwrdd. Er mwyn datblygu diwylliant gwella perfformiad byddwn yn parhau i ddatblygu ein system gynaliadwy, gymesur o reoli perfformiad ar lefel y Bwrdd, y Tîm Gweithredol a'r Gyfarwyddiaeth, gyda chefnogaeth adrodd amserol a darparu Dangosyddion Perfformiad Allweddol (DPA) cyson a pherthnasol.

Ym mis Mawrth 2020 rhoddodd adroddiad Archwilio Mewnol ar Reoli Perfformiad Sicrwydd Rhesymol i'r sefydliad ar y systemau sydd ar waith. Yr unig argymhelliad ar y gyfradd Goch oedd y dylai AaGIC ddatblygu Fframwaith Rheoli Perfformiad sy'n disgrifio ein system, y llinellau adrodd a'r rolau a'r cyfrifoldebau. Mae'r argymhellion hefyd yn cynnwys yr angen i nodi'r perchnogion cyfrifol a'r Arweinwyr Gweithredol ar gyfer DPA trwy ddatblygu'r Rhestr Termau Data a sicrhau bod digon o amser ar gael i adolygu cymheiriaid a dilysu data cyn adrodd.

Gwnaeth yr Asesiad Strwythuredig ar gyfer 2019 argymhellion tebyg ynglŷn â datblygu Fframwaith Perfformiad ac yn gyffredinol rhoddodd yr adroddiad sicrwydd rhesymol ar fonitro'r modd y cyflawnir cynlluniau AaGIC.

## **3. MATERION LLYWODRAETHU A RISG**

### **3.1. Fframwaith Perfformiad**

Mae'r Fframwaith Perfformiad ynghlwm yn Atodiad 1 i'w gymeradwyo. Pwrpas y Fframwaith Perfformiad yw disgrifio system y sefydliad ar gyfer gwneud gwelliannau parhaus i gyflawni ein Nodau a'n Amcanion Strategol a chyflawni ein gweithgareddau 'Busnes Fel Arferol' (BAU) yn effeithiol. Mae hefyd yn galluogi'r Bwrdd i graffu a rhoi perfformiad ar berfformiad y sefydliad. Mae AaGIC yn atebol yn gyhoeddus am ein perfformiad, a thrwy'r Bwrdd agored yn adrodd gall unrhyw berson neu sefydliad arall sydd â diddordeb yn ein cyfrifoldebau ddeall sut rydym yn perfformio. Mae'r Fframwaith Perfformiad yn rhan o'n fframwaith llywodraethu ehangach sy'n sicrhau bod ein gweithgareddau busnes yn cael eu cyflawni yn unol ag atebolrwydd y sector cyhoeddus, diwydrwydd dyladwy a chywirdeb.

Mae Rheoli Perfformiad yn ei gwneud yn ofynnol i system fod ar waith sy'n gwella perfformiad trwy'r adolygiad cyson a rheolaidd o'r wybodaeth sy'n bwysig i'r sefydliad fel y dangosir yn y diagram isod.



Mae'r Fframwaith yn nodi ein system ar gyfer gwella perfformiad a sut y bydd yn cael ei gweithredu yn ein sefydliad, fel arweinydd y system yng NgIG Cymru ar gyfer arweinyddiaeth dosturiol. Mae'n cynnwys ein:

- Gwerthoedd ac Ymddygiadau
- Ymagwedd
- Diwylliant
- Atebolrwydd
- Camau Cynyddu
- Cylch Rheoli Perfformiad.

Mae Dull Perfformiad Tosturiol AaGIC fel a ganlyn:

- **Gwelliant yn Gyntaf** - mae rheoli perfformiad yn rhan o AaGIC, wedi'i alinio â'n gwaith ar wella ansawdd a sicrhau ansawdd.
- **Cymesur** - bydd ein dull gwella perfformiad yn gymesur â maint a chwmpas AaGIC fel sefydliad strategol o fewn GIG Cymru.
- **Grymuso** - trwy ymgorffori rheoli perfformiad trwy gydol y sefydliad, mae perfformiad yn cael ei reoli mor lleol â phosibl gyda sicrwydd ar lefel y Bwrdd, y Tîm Gweithredol a'r Gyfarwyddiaeth.
- **Camau Gyrru Gwybodaeth** - Mae gan yr holl staff gyfrifoldeb i rannu gwybodaeth ac i gynyddu neu i weithredu pan ddaw materion perfformiad yn hysbys.
- **Tryloywder** - Bydd Dangosyddion Perfformiad Allweddol yn cael eu datblygu gyda thimau a byddant yn eglur, yn gyson ac yn cael eu hadrodd yn systematig.
- **Atebolrwydd** - Mae rolau a chyfrifoldebau yn glir, cydnabyddir perfformiad da a deallir a chyflawnir y Camau Cynyddu.
- **Effeithiolrwydd** - Bydd gweithrediad y Fframwaith yn sicrhau bod y sefydliad yn deall ei gynnydd wrth gyflawni'r Nodau ac Amcanion Strategol, a nodir yn ei Gynllun Tymor Canolig Integredig (neu Gynllun Blynnyddol) ac yn deall ei weithgareddau BAU, yn enwedig lle mae timau'n perfformio'n dda, neu os yw pethau'n mynd yn anghywir.

Mae'r rolau a'r cyfrifoldebau ar gyfer rheoli a gwella perfformiad wedi'u nodi yn y Fframwaith yn ogystal â'r mecanweithiau ar gyfer cydnabod perfformiad da a darparu cefnogaeth ychwanegol ar gyfer heriau a materion perfformiad.

Fel sefydliad strategol ac i gyd-fynd â monitro cerrig milltir chwarterol y Cynllun Blynyddol / Cynllun Tymor Canolig Integredig, bydd adroddiadau'r Bwrdd yn symud i gylch chwarterol fel a ganlyn:

Adroddiad Ch1	Bwrdd Medi
Adroddiad Ch2 (canol blwyddyn)	Bwrdd Tachwedd
Adroddiad Ch3	Bwrdd Mawrth
Adroddiad Ch4 (diwedd blwyddyn)	Bwrdd Mai

Bydd hyn hefyd yn cefnogi'r argymhelliad Archwilio ynghylch caniatáu amser ar gyfer adolygu a dilysu data cymheiriaid yn briodol a hefyd yn cyd-fynd â'r cyfarfodydd JET bob dwy flynedd ac Adolygiadau Gwasanaeth mewnol.

### 3.2 Rhestr Termiau

Mae fersiwn ddiwygiedig yr Eirfa Data ar gyfer y Dangosfwrdd Perfformiad hefyd ynghlwm yn Atodiad 2 er gwybodaeth. Mae hyn yn cynnwys diffiniad a ffynhonnell bob DPA yn ogystal â'r Arweinydd Gweithredol a'r Perchennog Cyfrifol. O'u cymryd ynghyd â'r Fframwaith Perfformiad, mae hyn yn cwblhau nifer o argymhellion yr adroddiadau Archwilio Mewnol ac Asesiadau Strwythuredig (mae'r manylion wedi'u cynnwys yn Atodiad 3).

Perchennog Cyfrifol y DPA sy'n gyfrifol am:

- Sicrhau bod y data'n cael ei ddilysu a'i gywiro a'i adrodd yn brydlon yn unol â'r amserlen adrodd;
- Sicrhau bod y data'n cael ei adrodd yn gyson o un cyfnod i'r llall;
- Os oes unrhyw newidiadau i'r diffiniad neu'r data a ddefnyddir, gan sicrhau bod hyn yn cael ei adrodd yn dryloyw i'r timau Dadansoddeg Gweithlu a pherfformiad; ac,
- Helpu i ymchwilio ac egluro unrhyw amrywiad yn y perfformiad rhwng cyfnodau.

Mae'r Perchennog Gweithredol yn gyfrifol am:

- Sicrhau bod swyddogaethau'r Perchennog Cyfrifol yn cael eu cyflawni;
- Rhoi gwybod i'r Tîm Gweithredol neu'r Bwrdd am unrhyw broblemau gyda'r adrodd neu gyda'r perfformiad a fesurir gan y DPA; ac,
- Cymryd camau yn lleol i ddatrys anawsterau adrodd neu gynghori'r Tîm Gweithredol ar ddwysáu os oes angen.

Mae argymhellion eraill yr adroddiad Archwilio Mewnol yn cyfeirio at ddatblygu DPAAu pellach i adlewyrchu ehangder Nodau Strategol y sefydliad a bydd y gwaith hwn yn cael ei yrru gan Grŵp Llywio'r Dangosfwrdd Perfformiad (dan gadeiryddiaeth y Cyfarwyddwr Cynllunio a Pherfformiad) dros y deuddeg nesaf i ddeunaw mis.

## 4. ARGYMHELLION

Gofynnir i'r Bwrdd:

- Cymeradwyo Fframwaith Perfformiad AaGIC.
- Sylwch ar yr Eirfa Data a ddatblygwyd i gyd-fynd â'r Dangosfwrdd Perfformiad.
- Sylwch fod nifer o'r argymhellion Archwilio ar Reoli Perfformiad (y manylir arnynt yn Atodiad 3) yn gyflawn.

Llywodraethu a Sicrwydd			
<b>Linc i nodau strategol Cynllun Tymor Canolig Integredig</b> (os gwelwch yn ddau)	<b>Nod Strategol 1:</b> Arwain y gwaith o gynllunio, datblygu a lles gweithlu cymwys, cynaliadwy a hyblyg i gefnogi'r gwaith o gyflawni 'Cymru Iachach'	<b>Nod Strategol 2:</b> Gwella ansawdd a hygyrchedd addysg a hyfforddiant i'r holl staff gofal iechyd gan sicrhau ei fod yn diwallu anghenion y dyfodol	<b>Nod Strategol 3:</b> Gweithio gyda phartneriaid i ddylanwadu ar newid diwylliannol o fewn GIG Cymru drwy feithrin gallu tosturiol ac arweinyddiaeth gyfunol ar bob lefel
	✓	✓	✓
	<b>Nod Strategol 4:</b> Datblygu'r gweithlu i gefnogi'r gwaith o ddarparu diogelwch ac ansawdd	<b>Nod Strategol 5:</b> Bod yn gyflogwr enghreifftiol ac yn lle gwyb i weithio	<b>Nod Strategol 6:</b> I'w gydnabod fel partner, dylanwadwr ac arweinydd rhagorol
	✓	✓	✓
<b>Ansawdd, Diogelwch a Phrofiad Cleifion</b>			
Mae rheoli perfformiad yn ddull y mae ansawdd a diogelwch yn cael ei sicrhau.			
<b>Goblygiadau Ariannol</b>			
Nid oes unrhyw oblygiadau ariannol uniongyrchol yn deillio o gynhyrchu'r Fframwaith hwn, ond adroddir ar y sefyllfa ariannol trwy'r adroddiad Perfformiad.			
<b>Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)</b>			
Dim			
<b>Goblygiadau Staffio</b>			
Bydd gofynion staffio ychwanegol i redeg y system rheoli perfformiad arfaethedig ac nid yw'r rhain wedi'u meintoli na chytuno arnynt eto.			
<b>Goblygiadau Hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015)</b>			
Bydd rheoli perfformiad yn cefnogi'r sefydliad i gyflawni ei gynlluniau strategol sy'n cael eu datblygu yn unol â'r WBFGA.			
<b>Hanes yr Adroddiad</b>	AMHERTHNASOL		
<b>Atodiadau</b>	1 - Fframwaith Perfformiad AaGIC 2 - Geirfa Data Ionawr 2021 3 - Argymhellion Archwilio wedi'u Cwblhau		



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

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

# INTEGRATED PERFORMANCE FRAMEWORK

Final (Version 7)



Contents

1.0 Introduction .....3

2.0 Purpose .....3

3.0 Values and Behaviours .....4

4.0 Approach .....5

5.0 Embedding Performance Management .....6

6.0 Taking Action .....7

7.0 Accountability.....7

8.0 The Performance Dashboard and Reporting .....8

9.0 Performance Improvement Cycle .....9

Appendix 1 Roles and Responsibilities.....11

## 1.0 Introduction

Health Education Improvement Wales is the system leader for workforce for NHS Wales. In line with our vision of ***‘Transforming the Workforce for a Healthier Wales’*** we aim to ensure that training, education, workforce and leadership development are commissioned and delivered to a high quality. We will achieve our vision through delivery of our Strategic Aims which are shown below.



We are committed to developing a compassionate and collective culture that is underpinned by effective performance management and a focus on improvement. We consider that effective performance management is the responsibility of everyone in the organisation.

Our approach to measuring performance reflects our status as a unique organisation in NHS Wales. We have developed an approach to performance management that suits the functions of our organisation, drawing on practice in similar organisations across the UK. In the majority of our business areas we need to measure and monitor different indicators to the rest of NHS Wales and at a strategic level the reporting cycle for this is also very different, with a greater focus on academic cycles and annual timescales than the daily, weekly and monthly beat of other NHS organisations.

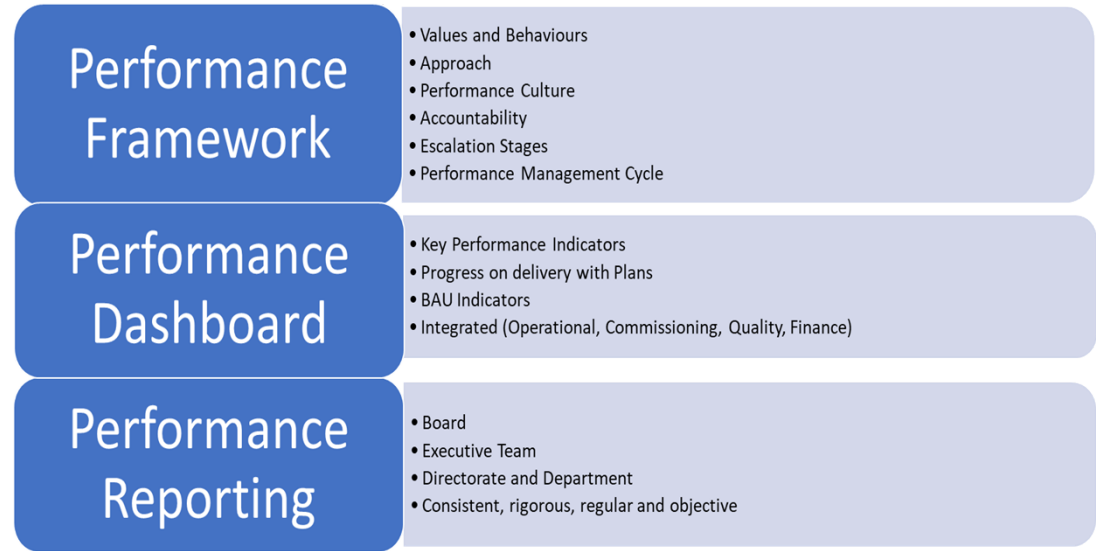
## 2.0 Purpose

The purpose of the Performance Framework is to describe the organisation's system for making continuous improvements to achieve our Strategic Aims and Objectives and to deliver our 'Business As Usual' (BAU) activities effectively. It also enables the Board to scrutinise and provide assurance on the performance of the organisation. HEIW is publicly accountable for our performance and through the open Board reporting any other person or organisation with an interest in our responsibilities can understand how we are performing. The Performance Framework is part of our wider governance framework which ensures our business activities are undertaken in line with public sector accountability, due diligence and probity.

The development and communication of the Framework is a useful engagement tool to embed ownership of performance at every level of the organisation from teams, departments and Directorates through to the Executive Team and the Board. Along with

our quality assurance and quality improvement activities, performance management forms part of the ‘I’ in HEIW and is at the heart of all that we do to enable continuous improvement in delivering quality, efficient and patient-focused education, training, workforce and leadership development. However, the management of individual performance is not addressed in this Framework but will be aligned to the organisation’s objectives and promoted through the application of HEIW’s Values Based Performance Appraisal and Development Policy.

Performance Management requires a system to be in place that improves performance through the consistent and regular review of the information that is important to the organisation as shown in the diagram.



The **Performance Framework** sets out the system and how it will be operated, including:

- Value and Behaviours
- Approach
- Culture
- Accountability
- Escalation Stages
- Performance Management Cycle.

The **Performance Dashboard** includes the relevant data items that have been deemed by the Executive Team to be Key Performance Indicators (KPIs) which measure the progress with delivery of the organisation’s IMTP (or Annual Plan) and its Business As Usual activities.

**Performance Reporting** uses the Dashboard to provide a commentary on the KPIs, highlights issues by exception, tracks trends, measures against targets or benchmarks and identify mitigating actions.

The Performance Dashboard and Performance Reporting will be further developed as described in Section 8.0.

### 3.0 Values and Behaviours

HEIW is leading the work to create a shared culture across NHS Wales of compassionate and collective leadership at all levels. We also have clear organisational values which were co-produced by our staff and are underpinned by a set of behaviours that we expect each other to follow. Our aspiration is that taken together these will drive the way in which we do things in HEIW and how we interact with others.

The focus of performance management in HEIW is continuous improvement in line with our other work on quality assurance and quality improvement and the aim is to acknowledge good performance and to support improvement where needed. Performance management will be undertaken with a spirit of enquiry and is not punitive or blaming. We will operate this Framework and undertake all our performance management activities in line with our Organisational Values and the Compassionate Behaviours as set out below.



### 4.0 Approach

HEIW's Compassionate Performance Approach is as follows.

- **Improvement First** - performance management is part of the 'I' in HEIW, aligned to our work on quality improvement and quality assurance.
- **Proportionate** - our performance improvement approach will be proportionate to the size and scope of HEIW as a strategic organisation within NHS Wales.
- **Empowerment** - by embedding performance management throughout the organisation performance is actively managed as locally as possible with assurance at Board, Executive Team and Directorate level.
- **Knowledge Drives Action** - All staff have a responsibility to share information and to escalate or to take action where performance issues become known.
- **Transparency** - Key Performance Indicators will be developed with teams and will

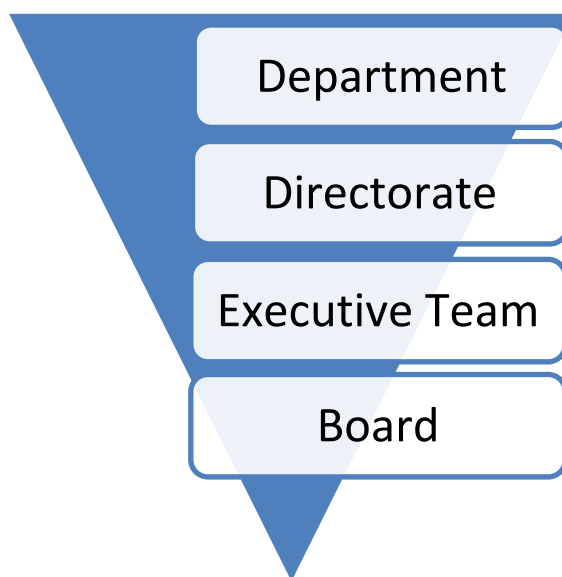
be clear, consistent and systematically reported.

- **Accountability** - Roles and responsibilities are clear, good performance is acknowledged and the Escalation Stages are understood and fairly applied.
- **Effectiveness** - The operation of the Framework will ensure the organisation understands its progress in delivering the Strategic Aims and Objectives, laid out in its IMTP (or Annual Plan) and understands its BAU activities, particularly where teams are performing well, or if things are going wrong.

## 5.0 Embedding Performance Management

HEIW is a unique organisation in NHS Wales and has an improvement focus at its heart. To embed performance management in the way we work, Directorates and teams will be encouraged and supported to enquire about their own performance and individual and department objectives will be aligned to the organisational objectives as described in the Values Based Performance Appraisal and Development Review Policy <https://heiw.nhs.wales/files/values-based-performance-appraisal-and-development-policy-v2>

On an organisational basis performance will be monitored at the following levels:



Board assurance is high-level based on more detailed scrutiny in the Board Committees (particularly the Audit and Assurance Committee and the Education, Commissioning and Quality Committee). The Executive team will receive more frequent operational reports and Directorate-level scrutiny will take place twice a year through the Service Reviews. For more detail on roles and responsibilities see Appendix 1.

At present internal assurance and reporting is only at Board and Executive team and this will be expanded over the next eighteen months to encourage and support local management. Through the implementation of this Framework we will develop processes and systems which support the organisation to actively manage its performance as locally as possible, with assurance at Board, Executive Team and Directorate level.

Matrix working is promoted through the development and delivery of the Annual Plan, with Executive Leads and Senior Responsible Owners (SRO) agreed on a cross-organisational basis for each Objective agreed in the Plan, and these nominated leads are responsible for reporting on the delivery of the Objectives against the agreed milestones.

The system of Service Reviews at departmental level which take place bi-annually (mid and end of year) will continue as an integral part of the performance framework.

In addition to the internal reviews and reporting, Welsh Government review progress on the delivery of our IMTP on a 6-monthly basis through the Joint Executive Team (JET) and in the Quality and Delivery (Q&D) meeting cycle.

With regard to the quality of education and training, HEIW is accountable to the General Medical Council (GMC) and General Dental Council as the regulator for the quality of postgraduate medical and dental education and training in Wales. This responsibility is discharged through the commissioning of postgraduate medical and dental training, the application of HEIW's Quality Management Framework and the accreditation of trainers for the GMC.

The organisation also meets the regulatory requirements of the Nursing and Midwifery Council, General Pharmaceutical Council, General Optical Council and the Health and Care Professions Council. In addition, structured, regular monitoring of the quality of education provision is taken through the education commissioning process.

Performance indicators regarding the discharge of these functions are included in the Dashboard and reporting or are under development for inclusion.

The Performance Management Cycle which includes the frequency of reports and reviews is included in Section 9.0

## **6.0 Taking Action**

Performance management is not an end in itself and the principle of 'Knowledge Drives Action' means that success is determined by the action taken based on what the performance information is showing in a timely manner.

As well as the formal measurement, reporting and assurance cycle, all staff have a duty to share data and information and to escalate performance issues through the Directorate structures at any stage of the performance management cycle. This is particularly important whilst the Performance Dashboard and Reporting is still in its development stage. Once known, for continuous improvement to occur, the performance issue will be acted upon in order to remedy poor performance, share good practice and allocate resources effectively.

## **7.0 Accountability**

The roles and responsibilities for the management and improvement of performance are set out in Appendix 1.

In a compassionate organisation it is important that good performance is recognised and celebrated, and any learning is spread throughout the organisation, for example through the regular Staff Forum, staff and stakeholder conferences, Board Showcase events and Annual Report. The Service Reviews are also an opportunity for departments to share success with the Executive Team and for this to be recognised in the CEO letter following the Review.

It is equally important in a compassionate organisation that additional support is provided for any performance challenges and issues. In these instances, the CEO will make a decision, in consultation with the Executive Team, as to whether informal improvement mechanisms are sufficient or whether the issue need to be escalated. The Chair will be informed of the decision to escalate any issue by the CEO and the Board will be informed at the next meeting or at the relevant Committee meeting.

Following the compassionate leadership principles, issues or areas of work will be put into escalation rather than individuals or teams. However, if it is identified that management action is required in an area of work in escalation, this will be addressed through the appropriate line management arrangements with advice from the People team.

Escalation means different levels of additional support as follows:

Escalation Stages	Rationale	Support
Enhanced Support	Significant difficulty in delivering strategic objective or BAU Indicator	<ul style="list-style-type: none"><li>• Consideration of Root Cause Analysis or process mapping to identify system issues.</li><li>• Additional support and input from Executive Team</li><li>• Weekly/regular monitoring meeting</li><li>• Action plan in place to address issue</li><li>• Progress Reports to Executive Team and by exception to the Board.</li></ul>
Targeted Support	Continued difficulty in delivering a strategic objective or BAU Indicator or further deterioration in original issue in Enhanced Support	<ul style="list-style-type: none"><li>• Above arrangements continue plus additional targeted resources are put in place to address issue.</li><li>• Review of OD requirements</li></ul>

## 8.0 The Performance Dashboard and Reporting

To support performance improvement HEIW will continue to develop the Board-level Performance Dashboard to include the most relevant set of KPIs.

A KPI is the measure of performance of an activity that is critical to the success of the business and must be both meaningful and measurable. The most effective indicators follow the SMART (Specific, Measurable, Achievable, Relevant and Timely) criteria. Well-defined KPIs engage staff, drive continuous improvement and encourage desired behaviours within the organisation, and these will continue to be developed with teams and approved for inclusion in the Dashboard by the Executive Team.

Each KPI will have an Executive and Management Owner that is responsible for ensuring the data included is verified as accurate and consistent and can provide a commentary on variation and trends. Every stage of the performance management process relies on evidence and data to allow us to make decisions on what is needed, what has been achieved, and how it compares. It is therefore vital that information is high quality, reliable and timely; meaningful; and presented with insight and commentary. In addition, the Dashboard will be developed further to include targets, trends and benchmarking information.

Due to the unique nature of HEIW's activities most of the NHS Wales Delivery Framework measures do not apply to the organisation. Where national guidance does apply the KPI will be included according to this guidance to allow for benchmarking. However, many of our relevant KPIs are produced annually or quarterly and therefore, in line with the other UK Statutory Health Education Bodies, the reporting rhythm to the Board and the production of the Board-level Dashboard will move to quarterly from the beginning of 2020.

At present the Dashboard measures performance against the four quadrants below:

- Delivery of projects and programmes to improve and transform the workforce
- Education and Training activity
- Quality of Education and Training
- Corporate metrics for HEIW.

Over the next year the Dashboard will be developed to reflect the delivery of the organisation's Strategic Aims and reviewed annually in alignment with the IMTP development process to ensure that changes in local, contractual and regulatory requirements are reflected.

To support the empowerment of performance improvement through the organisation other local Dashboards and reports will be developed to support the Performance Framework. This will include a more frequent 'operational' report to the Executive Team as well as biannual Directorate reports.

## **9.0 Performance Improvement Cycle**

Our performance improvement approach is based on a cycle of continuous review and improvement and linked closely to the strategic IMTP planning cycle. The system is designed to ensure a proportionate, regular and effective approach to planning, monitoring performance, reviewing progress, agreeing actions, improvement and learning in a strategic organisation.

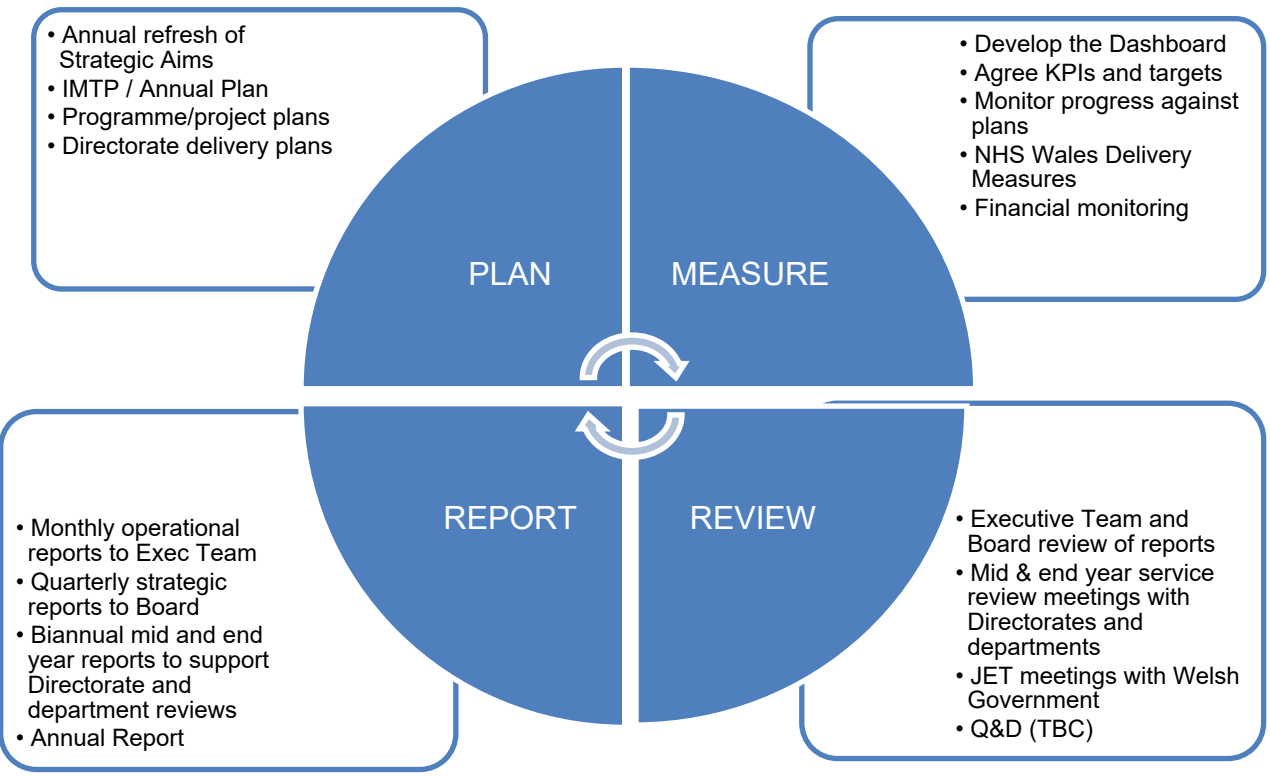
As a strategic organisation and to align with the monitoring of the Annual Plan/IMTP quarterly milestones the Board reporting will move to a quarterly cycle as follows:



Q1 Report	September Board
Q2 Report (mid-year)	November Board
Q3 Report	March Board
Q3 Report (end of year)	May Board.

This will also align with the biannual JET meetings and internal Service Reviews.

In order to ensure there is appropriate scrutiny and assurance of operational indicators a monthly Executive Team report will also be developed.



Continuous improvement depends on all staff at every level. Every team needs to be fully engaged in the performance management process. This has the added benefit of demonstrating the work that they do is important and valued. This circular approach applies equally to finance, corporate and workforce divisions who provide advice and support to other divisions. Our progress in delivery or our plans and BAU activities will inform our planning for the following year.

## **Appendix 1 Roles and Responsibilities**

Effective performance management requires defined roles and responsibilities and clear ownership of Key Performance Indicators as follows.

### **The Board**

The Board sets the strategic direction for HEIW and approves the Annual Plan/IMTP for submission to the Welsh Government in line with the NHS Wales Planning Framework. At a strategic level the Board scrutinises and assures the performance of the organisation which includes the delivery of the Annual Plan/IMTP and delivery of our 'Business As Usual' activities. The Board will approve the suite of Key Performance Indicators which is included in the Dashboard, as these are developed.

### **Board Committees**

HEIW has three Committees. The Committees report to and provide assurance to the Board in respect of their areas of responsibility which are outlined below:

- The Audit and Assurance Committee keeps under review the design and adequacy of HEIW's governance and assurance arrangements and its system of internal control.
- The Education, Commissioning and Quality Committee enables the Board to undertake greater scrutiny in respect of commissioning, monitoring and quality assessing of education and training.
- The Remuneration and Terms and Conditions Committee considers and recommends salaries, pay awards and terms and conditions of employment for the Executive Team and other key senior staff.

### **Executive Team**

The Executive Team comprises HEIW's Directors and the Board Secretary. The Executive Team has collective responsibility for operational decision-making and delivery of the Annual Plan/IMTP and the organisation's Business As Usual activities. The leadership and line management of all staff flows from the Executive Team.

The Executive Team will consider the strategic performance reporting before formal scrutiny by the Board and will also regularly scrutinise the operational performance of the organisation. If the performance of an issue or area of work is escalated, the Executive Team is responsible for overseeing the escalation arrangements and advising on whether enhanced escalation or de-escalation is appropriate. The Team will ensure that the operation of this Framework is undertaken in line with the organisation's Values and the compassionate leadership principles.

The Team will agree changes to the Dashboard for recommendation to the Board for approval, including the suite of Key Performance Indicators that will be reported.

### **Senior Leadership Team**

The Senior Leadership Team (SLT), through monthly formal meetings, provides a forum for Directors and Senior Team Leaders to discuss matters of strategic or operational

significance prior to onward transmission or cascade. The SLT as a forum does not have a formal role in the Performance Management process.

### **The Chief Executive Officer**

The CEO is the Accountable Officer and has overall statutory responsibility for the governance and performance of the organisation. The CEO will decide, using relevant information and discussion with the Executive Team, whether the performance of an issue or area of work requires escalation under this Framework, and when enhanced escalation or de-escalation is appropriate.

The CEO has delegated responsibility for the detailed operation of this Framework to the Director of Planning, Performance Corporate Services.

### **The Director of Planning, Performance and Corporate Services (PPCS)**

The Director of PPCS leads the development and implementation of the Performance Framework and has delegated responsibility for preparing, implementing and updating this Framework. The Director of PPCS will ensure that systems are in place for the measurement of national and local measures and KPIs which are reported via the Dashboard(s) and that the Integrated Performance Reports are produced for scrutiny and assurance by the Executive Team and the Board. The Director will ensure that these include transparent reporting of areas of good progress as well as areas of performance that require attention and/or escalation. The Director of PPCS will also seek to ensure that governance arrangements and sustainable resources are in place to support effective performance improvement and management.

The Director of PPCS leads the PPCS team who run the system described in the Performance Framework and provides a range of support functions working closely with staff and management across HEIW. The team implements the Framework by:

- ensuring the performance cycle is maintained and reporting requirements are met.
- working with services, in partnership with the Workforce Analytics team, to develop the KPIs, Dashboard and Reports and maintain the Data Glossary.
- working with KPI Management and Executive Owners, in partnership with the Workforce Analytics team, to ensure data quality and consistency.
- working with services, in partnership with others, to undertake targeted work to improve performance as required.

### **The Director of Workforce and Organisational Development (WOD)**

The WOD leads the Workforce Analytics team who will support the Performance Framework by:

- maintaining and developing the Performance Dashboard and ensuring it is updated in line with the performance reporting cycle.
- working with the performance team to develop the KPIs, Dashboard and Reports and maintain the Data Glossary.
- working with KPI Management and Executive Owners, in partnership with the performance team, to ensure data quality and consistency.
- working with services, in partnership with others, to undertake targeted work to improve performance as required.

## **Individual Directors**

Individual Directors are the Executive Leads for the delivery of Annual Plan/IMTP Objectives and are responsible for ensuring that they are delivered and progress is reported in line with the performance reporting cycle.

They are also the Executive Owners for designated KPIs as included in the Data Glossary and are responsible for ensuring that the KPI data is validated and consistent and any issues are transparently reported.

The Executive Owner is responsible for:

- Ensuring the functions of the Responsible Owner are carried out;
- Advising the Executive Team or Board of any issues with the reporting or with the performance measured by the KPI; and,
- Taking action on a local basis to resolve reporting difficulties or advising the Executive Team on escalation if required.

## **Individual Senior Team Leaders / Responsible Owners**

Individual members of the SLT, and other team leaders are SROs for the delivery of Annual Plan/IMTP Objectives and are responsible for delivery and that progress is reported in line with the performance reporting cycle.

Individual members of the SLT, and other team leaders, may also be Responsible Owners for designated KPIs as included in the Data Glossary and will ensure that the KPI data is validated and consistent and any issues are transparently reported.

The Responsible Owner for the KPI is responsible for:

- Ensuring the data is validated and correct and reported on time in line with the reporting schedule;
- Ensuring the data is reported consistently from one period to another;
- If there are any changes to the definition or data used, making sure this is transparently reported to the Workforce Analytics and performance teams; and,
- Helping to investigate and explain any variation in the performance between periods.

## **All Staff**

Every employee contributes towards performance improvement and management by being encouraged and supported to identify improvement opportunities and to take the required action. It is important that staff own the data and information on their activity and understand how that contributes to the corporate performance of the organisation. All staff have a responsibility to ensure that good progress is celebrated and any performance issue or off-track progress is transparently reported in the spirit of compassionate and collective leadership laid out in this document.

Individual objectives will be aligned to the organisation's objectives as described in the Values Based Performance Appraisal and Development Review Policy.



Team / Department	Executive Owner (Title)	Responsible KPI (Title)	Dashboard KPI Name	Detailed Description of KPI
Nursing	Interim Director of Nursing	Deputy Director of Education, Commissioning & Quality	FTI rate (percentage) (L101 - or 1 (top) of programme) - for Nursing & Midwifery, dent and RCS training programmes in Wales	N/A (included as a percentage of the no. of commissioned places)
Governance	Board Secretary	Corporate Governance Manager	Freedom of information requests	Number of requests received for information under the Freedom of Information Act and responded to according to legislation
Governance	Board Secretary	Corporate Governance Manager	No. of complaints	No. of formal complaints submitted in the reporting period (and an update on any currently in the system)
Governance	Board Secretary	Information Governance Manager	Information Governance - statutory & mandatory training	Percentage of staff compliant with information Governance statutory and mandatory training
Governance	Board Secretary	Woods Learning Manager	No. of events delivered into Wales	No. of events delivered into Wales for the rolling 12-month period in the current financial year compared to the same period in the previous financial year
Finance	Director of Finance & Corporate Services	Deputy Director Financial Management, Costing & Contracting	Public Sector Payment Policy (PSP)	PSP is a financial duty of all NHS bodies and is reported in the annual accounts. It is defined as: "Payment of at least 95% of non-NHS invoices within 30 calendar days from the receipt of goods or a valid invoice (whichever is later), unless other payment terms have been agreed." The financial duty applies to non-NHS
Finance	Director of Finance & Corporate Services	Deputy Director Financial Management, Costing & Contracting	Financial position	The committee under no oversight of the expenditure. All NHS organisations have a Financial Duty to break even against its Revenue Resource Limit over the financial year.
Finance	Director of Finance & Corporate Services	Deputy Director Financial Management, Costing & Contracting	Service expenditure	Total expenditure on agency staff as a cost and as a percentage of total pay costs
Leadership	Deputy CEO/ Director of Workforce & OD	Director	Strategic objective RAG ratings	RAG ratings by strategic aim
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	Monthly sickness absence	Contains current total levels of staff sickness. This KPI is derived by taking the FTI Absence and dividing by the available FTE
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	Monthly sickness absence	Contains total staff sickness by region per month. This KPI is derived by taking the FTE Absence Report and dividing by the overall total Absence FTE in period
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	Staff in post	FTE contracted staff in post as at the end of the month (National Definition description)
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	Expiry date	Calculation is based on the number of practised characteristics completed divided by the overall number of expected characteristics available to complete
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	14 month sickness absence rate	Percentage sickness absence rate over a rolling 14-month period. Calculated as: (FTE absence days/FTE days available over a 14-month period (National Definition description))
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	FTI days lost by sickness reason	FTI Days sickness lost by Absence Reason based on the top 5 sickness reasons (as entered in to EXPL) for the reporting period
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	Staff in leave	Comparison of staff in post versus for the current reporting month and the previous month to identify losses and identify leave reporting month
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	FTI	Percentage of headcount within organisation who have had a FTI/ACI Approval in the previous 12-month period (National Definition description)
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	Statutory & Mandatory training	Percentage compliance based on staff who have completed level 1 competence within Core Skills and Training Framework in a 12-month period (National Definition description)
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	Worth language skills	The number of staff who have updated their Worth language skills in Q4, expressed as percentage of total headcount
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	Turnover	Percentage of total number of leavers in a 12-month period. Calculated as: headcount before organisation within a 12-month period/average total headcount employed (National Definition description)
People	Deputy CEO/ Director of Workforce & OD	Head of People	Number of advertised roles	Number and FTE of advertised roles in the reporting month
People	Deputy CEO/ Director of Workforce & OD	Head of People	On vacancies	Number of staff that have had a full vacancy in the reporting period
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	Staff Survey	Engagement index and response rate for NHS Staff Survey
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	Health & Safety - statutory & mandatory training	Percentage of staff compliant with NHS statutory and mandatory training
People	Deputy CEO/ Director of Workforce & OD	Head of People	Statutory & mandatory training	No. of formal disclosures and absence cases submitted in the reporting period (and an update on any currently in the system)
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Workforce & OD	Health needs assessment	Engagement index and response rate (intended for review Q4/2024) for NHS Wales (only?)
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Head of Communications & Engagement	No. of Twitter followers	No. of Twitter followers for the rolling 12-month period in the current financial year compared to the same period in the previous financial year
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Head of Communications & Engagement	No. of Facebook likes	No. of Facebook likes for the rolling 12-month period in the current financial year compared to the same period in the previous financial year
Workforce Data & Analytics	Deputy CEO/ Director of Workforce & OD	Deputy Director of Planning, Performance & Corporate Services	Health & Safety - no. of incidents	No. of incidents reported formally on RIDDOR
Medical Director	Deputy Director of Planning, Performance & Corporate Services	Deputy Director of Planning, Performance & Digital	No. of Medical Appearals Committee	This data involves a summary of the number of appearances completed across Wales on both MARS and the Primary Care instance of MARS for relevant period (last April to date)
ASU	Medical Director	Postgraduate Dean	No. of completed Review Visits (this includes Joint/DB)	Completed Review Visits and ultimately Work as a whole, across 1 to 2 year cycle
ASU	Medical Director	Postgraduate Dean	First to Face CPD Activity (No. of people) (Oct-Dec) CPD Course Activity Total	This figure is the number of people that attended RSG CPD face to face events during a certain quarter
ASU	Medical Director	Postgraduate Dean	Annual quality scores for primary and secondary care	Annual quality scores for primary and secondary care
ASU	Medical Director	Postgraduate Dean	Engagement with RSG CPD team across multiple via web portal	Engagement with RSG CPD team across multiple via web portal
Post registration Pharmacists	Medical Director	Pharmacy Dean	Initial FTI rate (i.e. accepted cases in Q4) (from Dec to any given year for any given year for the following year)	No. of points awarded in Q4 to successful candidates, as a percentage of the total number of points available
Post registration Pharmacists	Medical Director	Pharmacy Dean	Actual FTI rate (from the Aug start date the following year)	No. of points actually filed as a percentage of the total number of points accepted in Q4 (and for as a percentage of the total number of points available, if this is different?)
Post registration Pharmacists	Medical Director	Pharmacy Dean	Additional award cases made via the Post-Reg Pharmacy exams in Wales	Additional award cases made via the Post-Reg Pharmacy exams in Wales compared to the other nations
Post registration Pharmacy Technicians	Medical Director	Pharmacy Dean	Actual FTI rate (i.e. accepted cases in Q4) (from Dec to any given year for any given year for the following year)	No. of points actually filed as a percentage of the total number of points accepted in Q4 (and for as a percentage of the total number of points available, if this is different?)
Dental	Medical Director	Dental Dean	FTI rate (percentage) (combined for Dental Training Programmes in Wales)	Number as a percentage of total places available for DPT, DCT and Dental Society Training programmes combined
Dental	Medical Director	Dental Dean	Mandatory face to face CPD activity - Dental (no. of attendees)	Number of actual attendees, available following the event
Dental	Medical Director	Dental Dean	Mandatory online CPD activity - Dental (no. of attendees)	Number of actual attendees, available following the event
Dental	Medical Director	Dental Dean	Voluntary face to face CPD activity - Dental (no. of attendees)	Number of actual attendees, available following the event
Dental	Medical Director	Dental Dean	Voluntary online CPD activity - Dental (no. of attendees)	Number of actual attendees, available following the event
Pharmacy	Medical Director	Pharmacy Dean	Mandatory face to face CPD activity - Pharmacy (no. of attendees)	Number of actual attendees, available following the event
Pharmacy	Medical Director	Pharmacy Dean	Mandatory online CPD activity - Pharmacy (no. of attendees)	Number of actual attendees, available following the event
Pharmacy	Medical Director	Pharmacy Dean	Voluntary face to face CPD activity - Pharmacy (no. of attendees)	Number of actual attendees, available following the event
Pharmacy	Medical Director	Pharmacy Dean	Voluntary online CPD activity - Pharmacy (no. of attendees)	Number of actual attendees, available following the event
ASU	Medical Director	Postgraduate Dean	Mandatory face to face CPD activity - RSG (no. of attendees)	Number of actual attendees, available following the event
ASU	Medical Director	Postgraduate Dean	Mandatory online CPD activity - RSG (no. of attendees)	Number of actual attendees, available following the event
ASU	Medical Director	Postgraduate Dean	Voluntary face to face CPD activity - RSG (no. of attendees)	Number of actual attendees, available following the event
ASU	Medical Director	Postgraduate Dean	Voluntary online CPD activity - RSG (no. of attendees)	Number of actual attendees, available following the event
Secondary Care	Medical Director	Postgraduate Dean	FTI rate (percentage) (combined for Secondary Care Training Programmes in Wales)	Number of candidates accepted for GP training places for points commensurate in Aug of the same year or Feb of the following year (including deferrals) as a percentage of commissioned places
Secondary Care	Medical Director	Postgraduate Dean	ARCP outcomes for Secondary Care Training Programmes	Number of ARCPs conducted by outcome for all programmes combined
Foundation	Medical Director	Postgraduate Dean	ARCP outcomes for Foundation Training Programmes	Number of ARCPs conducted by outcome
Dental	Medical Director	Postgraduate Dean	ARCP outcomes for Dental Training Programmes	Number of ARCPs conducted by outcome (broken down by programme)
Quality Unit	Medical Director	Postgraduate Dean	Quality Management targeted visits	A summary of the number and outcomes of Quality Unit led Targeted Visits undertaken within the relevant reporting period
Quality Unit	Medical Director	Postgraduate Dean	GM national trainee survey result (overall satisfaction)	Overall satisfaction scores (percentage) for Wales, England, Scotland, NI
Trainee Progression Governance (TPG)	Medical Director	Postgraduate Dean	ARCP appeal	Number of reviews (all successful) and number of independent reviews (all successful)
GP Training	Medical Director	Director of Postgraduate Education of General Practice	ARCP outcomes for GP Training Programmes	Number of ARCPs conducted by outcome for all programmes combined
GP Training	Medical Director	Director of Postgraduate Education of General Practice	FTI rate (percentage) (combined for GP training places in Wales)	Number of candidates accepted for GP training places for points commensurate in Aug of the same year or Feb of the following year (including deferrals) as a percentage of commissioned places
Professional Support Unit	Medical Director	Postgraduate Dean	No. of referrals to Payment Group Consultants	No. of PSC active cases at a point in time
Professional Support Unit	Medical Director	Postgraduate Dean	Reasons for visits to PSC	No. of referrals to Payment Group Consultants at a point in time
Professional Support Unit	Medical Director	Postgraduate Dean	Reasons for visits to PSC	Reasons associated with active cases reported in the same report (change title on dashboard?)
Secondary Care (and Foundation?)	Medical Director	Postgraduate Dean	National ARCP outcomes for Secondary Care and Foundation Training Programmes	ARCP outcomes by UK nation (except)

## Appendix 3 – Completed Audit Recommendations – Performance Management

### 1.0 Internal Audit Report March 2020

HEIW Ref. No.	Year	Report Title	Assurance Rating	Director	Priority Level	Recommendation
75	19/20	<a href="#">Performance Management March 2020</a>	Reasonable	Director of Planning, Performance & Corporate Services	High	HEIW should continue to establish a formal Performance Management Framework that incorporates the objectives the organisation is trying to achieve from such a framework, reporting lines, responsible officers and executive leads. In doing so, similar organisations, including stakeholders that are further advanced in developing a Performance Management Framework could be contacted.
81	19/20	<a href="#">Performance Management March 2020</a>	Reasonable	Director of Planning, Performance & Corporate Services	Low	We would suggest that including an element of 'operational' peer review into the validation process as this would add a constructive element in helping to validate performance measures. Sense-checking report data prior to publication might detect some of the minor errors identified in the Q1 dashboard.

### 2.0 Structured Assessment 2019

Recommendation
<p><b>Embedding a sound system of assurance:</b>  <b>R4</b> HEIW should document its performance management framework, setting out:</p> <p>a) operational performance management arrangements and lines of accountability; and</p> <p>b) what is reported to whom and by when, and Board / Committee oversight for performance management.</p>
<p><b>Monitoring delivery:</b>  <b>R7</b> HEIW has not set out a framework for monitoring performance against its strategic objectives and IMTP and should:</p> <p>a) formally document arrangements for the oversight and scrutiny of performance against strategic objectives</p>



<b>Dyddiad y Cyfarfod</b>	<b>28 Ionawr 2021</b>	<b>Eitem agenda</b>	<b>4.3</b>
<b>Teitl yr Adroddiad</b>	<b>Adolygiad Blynyddol o Archwaeth Risg AaGIC</b>		
<b>Awdur yr Adroddiad</b>	Dafydd Bebb, Ysgrifennydd y Bwrdd		
<b>Noddwr yr Adroddiad</b>	Dafydd Bebb, Ysgrifennydd y Bwrdd		
<b>A gyflwynir gan</b>	Dafydd Bebb, Ysgrifennydd y Bwrdd		
<b>Rhyddid Gwybodaeth</b>	Agored		
<b>Diben yr Adroddiad</b>	Ystyried a chymeradwyo dogfen Archwaeth Risg wedi'i diweddaru gan AaGIC.		
<b>Materion Allweddol</b>	<p>Mae dogfen Archwaeth Risg AaGIC yn cael ei gosod yn flynyddol gan y Bwrdd yn unol â'r Polisi Rheoli Risg. Mae'r Archwaeth Risg yn cynnwys Datganiad Archwaeth Risg a Goddefgarwch Risg y sefydliad.</p> <p>Mae ystyried yr Archwaeth Risg yn fater strategol ac felly'n fater i'r Bwrdd.</p> <p>Ystyriwyd a thrafodwyd yr Archwaeth Risg yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr. Er na chynigir unrhyw newidiadau i'r Datganiad Archwaeth Risg a lefelau Goddefgarwch Risg cynigir rhai mân ddiwygiadau i'r ddogfen Archwaeth Risg.</p> <p>Gwahoddir y Bwrdd i gymeradwyo dogfen Archwaeth Risg wedi'i diweddaru gan AaGIC sydd ynghlwm yn Atodiad 1.</p>		
<b>Camau Gweithredu Penodol Gofynnol (un ✓ yn unig)</b>	<b>Gwybodaeth</b>	<b>Trafodaeth</b>	<b>Sicrwydd</b>
			<b>Cymeradwyaeth</b> ✓
<b>Argymhellion</b>	Gofynnir i'r aelodau <b>gymeradwyo</b> dogfen Archwaeth Risg AaGIC wedi'i diweddaru (Atodiad 1) sy'n cynnwys y diwygiadau a amlygwyd yn adran y cynigion (paragraff 3) o'r adroddiad hwn.		



# Adolygiad Blynyddol o Archwaeth Risg AaGIC

## 1. CYFLWYNIAD

Pwrpas y papur hwn yw gwahodd y Bwrdd i gymeradwyo dogfen Archwaeth Risg y sefydliad wedi'i diweddaru fel yr amlinellir yn Atodiad 1. Mae'r ddogfen yn cynnwys Datganiad Archwaeth Risg a Goddefgarwch Risg y sefydliad. Mae'r Datganiad Archwaeth Risg yn manylu ar sut mae AaGIC yn trin risg, tra bod y lefelau Goddefgarwch Risg yn rhoi mwy o fanylion am y lefelau amrywiol o risg y mae'r sefydliad yn barod i'w derbyn mewn perthynas â phob un o'i swyddogaethau statudol.

## 2. CEFNDIR

Yn unol â Pholisi Rheoli Risg AaGIC (RMP) mae dogfen Archwaeth Risg y sefydliad yn cael ei gosod yn flynyddol gan y Bwrdd ac fe'i cymeradwywyd gyntaf ym Mwrdd mis Ionawr y llynedd. Roedd hyn felly cyn y pandemig COVID-19. Cymeradwywyd RMP y sefydliad wedi'i ddiweddaru ym Mwrdd Gorffennaf. Ystyriwyd a thrafodwyd y ddogfen Archwaeth Risg yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr.

Mae risgiau cysylltiedig â COVID-19 wedi bod yn elfen amlwg ar y Gofrestr Risg Gorfforaethol (CRR) eleni. Roedd hyn yn arbennig o wir yn Ch1 a Ch2, lle'r oedd y CRR yn canolbwyntio'n bennaf ar yr ymateb i'r pandemig. Aseswyd bod gan nifer gymharol uchel o'r risgiau hyn statws coch, mewn ymateb i don gyntaf y pandemig. Helpodd y lefelau Goddefgarwch Risg, a ddyrannwyd yn erbyn pob risg ar y CRR, i lywio'r drafodaeth mewn perthynas â risg trwy gydol y flwyddyn.

## 3. CYNNIG

Pwrpas gosod y Datganiad Archwaeth Risg a lefelau Goddefgarwch Risg yw sicrhau bod staff ledled AaGIC yn ymwybodol ohono ac yn deall faint o risg y mae'r sefydliad yn barod i fod yn agored i wrth fynd o gwmpas eu busnes o ddydd i ddydd.

Mae gosod y ddogfen Archwaeth Risg yn fater strategol ar gyfer lefel y Bwrdd. Mae'n debygol y bydd yn gweithredu fel cyfyngiad gweithredol ar lefel rheolwr llinell a bydd yn gweithredu fel rheolydd ymddygiad ar lefel unigol. Dylai roi arweiniad i staff ar ffiniau pa lefel o risg sy'n dderbyniol i AaGIC.

Yn dilyn y drafodaeth yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr ni chynigir unrhyw newidiadau i'r Datganiad Archwaeth Risg a lefelau Goddefgarwch Risg.

Cynigir dau welliant i'r ddogfen ehangach Archwaeth Risg:

- mae diffiniad o oddefgarwch risg wedi'i ychwanegu at baragraff pedwar y ddogfen; a
- mae'r nod Strategol ar dudalen chwech y ddogfen wedi'i diweddaru i adlewyrchu'r Cynllun Tymor Canolig Integredig y gellir ei gymeradwyo.

Mae dogfen Archwaeth Risg AaGIC wedi'i diweddaru ynghlwm yn Atodiad 1.

#### 4. MATERION LLYWODRAETHU A RISG

Mae rheoli'r Archwaeth Risg yn unol â'r RMP yn alluogwr allweddol wrth lywodraethu risg o fewn AaGIC.

#### 5. GOBLYGIADAU ARIANNOL

Ni ragwelir unrhyw oblygiadau cost ychwanegol.

#### 6. ARGYMHELLIAD

Gofynnir i aelodau gymeradwyo dogfen Archwaeth Risg AaGIC (Atodiad 1) sy'n cynnwys y diwygiadau a amlygwyd yn adran gynigion yr adroddiad hwn.

Llywodraethu a Sicrwydd			
<b>Linc i nodau strategol Cynllun Tymor Canolig Integredig</b> <small>(os gwelwch yn dda ✓)</small>	<b>Nod Strategol 1:</b> Arwain y gwaith o gynllunio, datblygu a lles gweithlu cymwys, cynaliadwy a hyblyg i gefnogi'r gwaith o gyflawni 'Cymru Iachach'	<b>Nod Strategol 2:</b> Gwella ansawdd a hygyrchedd addysg a hyfforddiant i'r holl staff gofal iechyd gan sicrhau ei fod yn diwallu anghenion y dyfodol	<b>Nod Strategol 3:</b> Gweithio gyda phartneriaid i ddylanwadu ar newid diwylliannol o fewn GIG Cymru drwy feithrin gallu tosturiol ac arweinyddiaeth gyfunol ar bob lefel
	✓	✓	✓
	<b>Nod Strategol 4:</b> Datblygu'r gweithlu i gefnogi'r gwaith o ddarparu diogelwch ac ansawdd	<b>Nod Strategol 5:</b> Bod yn gyflogwr enghreifftiol ac yn lle gwyb i weithio	<b>Nod Strategol 6:</b> I'w gydnabod fel partner, dylanwadr ac arweinydd rhagorol
	✓	✓	✓
<b>Ansawdd, Diogelwch a Phrofiad Cleifion</b>			
Mae'r Archwaeth Risg yn alluogwr allweddol i sicrhau rheolaeth risg effeithiol o fewn AaGIC. Mae dull cadarn o reoli risg yn fwy tebygol o effeithio'n ffafriol ar ddiogelwch a phrofiad cleifion a staff.			
<b>Goblygiadau Ariannol</b>			
Mae rheoli risg yn swyddogaeth graidd i AaGIC fel Awdurdod Iechyd Arbennig. Ni ragwelir unrhyw gostau ychwanegol			
<b>Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)</b>			
AMHERTHNASOL			
<b>Goblygiadau Staffio</b>			
Mae rheoli risg yn swyddogaeth Graidd i AaGIC. Nid oes unrhyw oblygiadau staffio ychwanegol.			
<b>Goblygiadau Hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015)</b>			
Mae rheoli risg yn alluogwr allweddol i sicrhau rheolaeth risg effeithiol o fewn AaGIC.			
<b>Hanes yr Adroddiad</b>	Cymeradwywyd y Polisi Rheoli Risg ym Mwrdd Gorffennaf. Cymeradwywyd Archwaeth Risg presennol AaGIC ym Mwrdd Ionawr 2020. Ystyriwyd yr Archwaeth Risg wedi'i diweddaru yn Sesiwn Datblygu'r Bwrdd ym mis Rhagfyr.		
<b>Atodiadau</b>	Atodiad 1 - Archwaeth Risg Drafft AaGIC.		

## Appendix 1

### Draft HEIW Risk Appetite Statement and Risk Tolerance 2021/22

#### 1. Introduction

HEIW cannot achieve its strategic goals without taking risks. The purpose of the Risk Appetite Statement (outlined in paragraph 3 below) is to articulate HEIW's position as to how it treats risks, and informs wider decision making and provide guidance to staff. HEIW's risk tolerance defines the varying levels of risk it is willing to accept.

The main principles of HEIW's appetite for risk are that:

- the lower HEIW's appetite, the less risk the authority is willing to accept and therefore higher levels of controls should be put in place to manage the risk;
- the higher HEIW's appetite, the more risk the authority is willing to accept and consequently HEIW will accept the usual for established systems of internal controls and will not necessarily seek to strengthen those controls above all else;
- it is recognised that the risk appetite is not a single fixed concept and there will be a range of tolerances for different risks which need to align and these may change over time.

#### 2. Risk appetite levels

The Board recognises that its risk appetite is not a single fixed concept. The Board has worked to define its risk appetite and appreciates that there will be a range of tolerances for different risks which need to align and these may change over time.

The five risk appetite levels are defined in Table 1 below.

*Table 1. Risk Appetite Levels*

<b>Appetite Level</b>	<b>Described as:</b>	<b>What this means</b>
None	Avoidance of risk and uncertainty is a key organisational objective.	Avoidance of loss is key objective, play safe, avoidance of developments. Priority for tight controls and oversight.
Low	Minimal, or as little risk as reasonably possible. Preferred for ultra-safe delivery options that have a low degree of inherent risk and only for limited reward potential.	Prepared to accept the possibility of very limited financial loss if essential. Innovations avoided unless essential.

<b>Appetite Level</b>	<b>Described as:</b>	<b>What this means</b>
Moderate	Caution is preferred for safe delivery options that have low degree of inherent risk and may only have limited potential for reward.	Prepare to accept some possibility of some financial loss. Limited tolerance for sticking neck out. Tendency to stick with status quo, innovation in practice avoided unless necessary
High	Open and willing to consider all potential delivery options while also providing an acceptable level of reward (and Value for Money).	Prepared to invest for return & minimise the possibility of financial loss. Value and benefits considered. Gains outweigh adverse consequences. Innovation supported.
Very High	Seek and be eager to be innovative and to choose options offering potentially higher business rewards (despite greater inherent risk). Or also described as mature and confident in setting high levels of risk appetite because controls, forwards scanning and responsiveness systems are robust.	Investing for best possible return & acceptance of possibility of financial loss. Chances of losing any challenge are real and consequences would be significant. Desire to break the mould. High levels of devolved authority – management by trust not control.

### 3. Risk Appetite Statement

“HEIW’s recognises that, as an improvement based organisation, it is impossible for it to deliver its services and achieve positive outcomes for its stakeholders without a high appetite for risk. Indeed, only by taking risks can HEIW realise its aims.

HEIW nevertheless recognises that its appetite for risk will differ depending on the activity undertaken. Its acceptance of risk will be based on ensuring that potential benefits and risks are fully understood before decisions on funding are made, and that appropriate actions are taken.

HEIW’s risk appetite considers its capacity for risk, which is the amount of risk it is able to bear (or loss it can endure) having regard to its financial and other resources, before a breach in statutory obligations and duties occurs.”

HEIW’s appetite for risk across its activities is provided in Table 2 below.

### 4. Risk Tolerance

HEIW must define the varying levels of risk it is willing to accept. This is often described as risk tolerance.

Risk tolerance may vary on a case by case basis depending on the perceived benefits of the issue being considered.

Set out below is a guide to the level of variation of risk the organisation is willing to accept in respect of its function.

*Table 2 Risk Appetite across HEIW activities*

<b>Risk Impact Domains</b>	<b>Risk Tolerance/ tolerance level for risk</b>	<b>Rationale</b>
Workforce Intelligence	Low	Workforce Intelligence is based on holding and processing data which includes sensitive personal information. HEIW's focus is on improving Workforce intelligence on the basis that such data is processed securely and safely in accordance with data protection legislation. Given this HEIW will approach options within this domain with a low risk appetite.
Workforce Planning	Moderate	In certain circumstances, HEIW will accept risks associated with the delivery of Workforce Planning where the development of new staffing models and roles are deemed necessary.
Education commissioning, planning and delivery	Moderate to high	To support workforce change we will require new innovative provision in respect of education commissioning planning and delivery.
Quality Management	Low	HEIW will quality manage education and training provision ensuring it meets required standards, and improvements are made where required. As HEIW's focus shall be on assurance the risk appetite is low.
Supporting Regulation	Moderate	HEIW will need to challenge the current understanding of workforce regulations and how these impacts on education and risk development.
Leadership Development	High	To support Leadership Development HEIW will require new innovative approaches which requires a high risk appetite.

<b>Risk Impact Domains</b>	<b>Risk Tolerance/ tolerance level for risk</b>	<b>Rationale</b>
Workforce Improvement	High	To provide a strategic leadership role in Workforce transformation and Improvement HEIW will need to consider all potential delivery options and take an innovative approach.
Professional support for workforce and organisational development (OD) in NHS Wales	Moderate	To support the professional workforce and OD in Wales HEIW will be working within regulatory and statutory requirements.
HEIW internally as an organisation	Low	<p>This domain covers such area as HEIW's staff, finance, corporate governance and reputation. HEIW will continue to employ and retain staff of a high quality standard training to ensure all staff reach their full potential, always mindful of the professional and managerial capacity and capability of the organisation and staff well-being. This approach requires a low degree of risk.</p> <p>Achieving financial balance is a key objective, and therefore the Board will not accept any risk that will (if realised) threaten this. To support the long term success of the organisation, HEIW will need to seek risks. HEIW will maintain high standards of Corporate Governance and will not accept risk that are inconsistent with these standards.</p> <p>HEIW will maintain high standards of conduct and will not accept risks that could cause reputational damage to the Board and undermine public and stakeholder confidence associated with the day to day delivery of services. The Board will only consider accepting risks in certain circumstances, such as service or transformational improvement.</p>

## 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				

Score Level Colour

Low 1-6
Moderate 7-14
High 15-25

range

## HEIW Strategic Aims – Approvable IMTP 2020-21

Strategic Aim 1 - To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'.
Strategic Aim 2 - To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs.
Strategic Aim 3 - To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels.
Strategic Aim 4 - To develop the workforce to support the delivery of safety and quality.
Strategic Aim 5 - To be an exemplar employer and a great place to work.
Strategic Aim 6 - To be recognised as an excellent partner, influencer and leader.



**GIG**  
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WALES

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

<b>Dyddiad y Cyfarfod</b>	<b>28 Ionawr 2021</b>	<b>Eitem agenda</b>	<b>4.4</b>
<b>Teitl yr Adroddiad</b>	<b>Polisi Trin Cwynion</b>		
<b>Awdur yr Adroddiad</b>	<b>Dafydd Bebb, Ysgrifennydd y Bwrdd</b>		
<b>Noddwr yr Adroddiad</b>	<b>Dafydd Bebb, Ysgrifennydd y Bwrdd</b>		
<b>Cyflwynwyd gan</b>	<b>Dafydd Bebb, Ysgrifennydd y Bwrdd</b>		
<b>Rhyddid Gwybodaeth</b>	Agored		
<b>Diben yr Adroddiad</b>	I gael cymeradwyaeth y Bwrdd ar gyfer Polisi Trin Cwynion AaGIC		
<b>Materion Allweddol</b>	<p>Mae AaGIC yn gofyn am Bolisi Trin Cwynion pwrpasol sy'n adlewyrchu ei rôl fel darparwr hyfforddiant ac addysg.</p> <p>Ni chredir bod Polisi Cwynion presennol y GIG (Gwneud Pethau'n lawn), sy'n canolbwyntio ar gwynion cleifion, yn adlewyrchu anghenion AaGIC gan nad yw'n sefydliad sy'n wynebu cleifion.</p> <p>Mae'r Polisi Trin Cwynion yn amlinellu'r broses ar gyfer delio â phryderon a chwynion, yn pwysleisio datrys materion yn gyflym lle bo hynny'n bosibl ac yn amlinellu sut y bydd gweithrediad y polisi yn cael ei fonitro.</p> <p>Yn unol â Rheolau Sefydlog AaGIC mae angen cymeradwyaeth derfynol y Bwrdd ar gyfer Polisi Trin Cwynion.</p>		
<b>Camau Penodol sy'n Ofynnol</b> ( <i>un ✓ yn unig os gwelwch yn dda</i> )	<b>Gwybodaeth</b>	<b>Trafodaeth</b>	<b>Sicrwydd</b>
			<b>Cymeradwyaeth</b> ✓
<b>Argymhellion</b>	Gofynnir i'r aelodau <b>gymeradwyo'r</b> Polisi Trin Cwynion (Atodiad 1).		



## **Polisi Trin Cwynion**

### **1. CYFLWYNIAD**

Pwrpas yr adroddiad hwn yw ceisio bod y Bwrdd yn ystyried ac yn cymeradwyo'r Polisi Trin Cwynion (CHP) drafft sydd ynghlwm yn Atodiad 1.

### **2. CEFNDIR**

Mae polisi cwynion presennol GIG Cymru, Gwneud Pethau'n lawn, yn canolbwyntio ar drin cwynion gan gleifion. Gan nad yw AaGIC yn sefydliad sy'n wynebu cleifion, mae angen polisi pwrpasol sy'n adlewyrchu ei rôl fel sefydliad hyfforddi ac addysg. Dylid nodi hefyd, gan fod AaGIC yn Awdurdod Iechyd Arbennig, nad yw'n dod o dan y rheoliadau sy'n ymwneud â Gwneud Pethau'n lawn.

Mae'r broses o greu'r Polisi Trin Cwynion (CHP) wedi bod yn broses hir ac ailadroddol. Mae gan AaGIC ystod unigryw o swyddogaethau o fewn GIG Cymru ac mae hyn wedi'i ystyried wrth ddatblygu'r Polisi Trin Cwynion (CHP) sydd ynghlwm yn Atodiad 1.

Ystyriodd y Pwyllgor Archwilio a Sicrwydd y Polisi Trin Cwynion (CHP) ym mis Hydref a dosbarthwyd y polisi i Aelodau Annibynnol i gael sylwadau arno ym mis Rhagfyr. Mae hefyd wedi'i ystyried gan y Tîm Gweithredol a'r Uwch Dîm Arweinyddiaeth. Postiwyd y Polisi Trin Cwynion (CHP) ar fewnwyd AaGIC trwy gydol mis Rhagfyr yn gwahodd sylwadau staff ac hefyd yn cael ei ystyried gan y Fforwm Partneriaeth Leol ym mis Ionawr.

### **3. CYNNIG**

Manylir ar elfennau allweddol y Polisi Trin Cwynion (CHP) isod:

- Mae cwmpas y polisi yn cadarnhau y gellir derbyn pryder neu gŵyn gan unrhyw un ac felly mae'n cynnwys myfyrwyr, hyfforddeion, hyfforddwyr a Chyfarwyddwyr Rhaglenni Hyfforddi. Mae hefyd ar gael i aelodau staff ond dim ond lle nad yw'n bosibl codi'r mater yn gyntaf o dan Bolisi Disgyblu Cymru Gyfan, Polisi Cwynion Cymru Gyfan neu Bolisi Codi Pryderon GIG Cymru.
- Pryderon a Chwynion Anffurfiol. Lle bo hynny'n bosibl, mae'r polisi'n annog i ddelio â phryderon a chwynion anffurfiol yn anffurfiol ac ar y cyfle cyntaf er mwyn dod o hyd i ddatrysiad cyflym.
- Cwynion Ffurfiol. Mae gan y Polisi Trin Cwynion (CHP) weithdrefn dau gam (Cam 1 a Cham 2) ar gyfer delio â Chwynion Ffurfiol.
- Rhaid cydnabod pob Cwyn Ffurfiol o fewn 2 ddiwrnod gwaith a phenodi swyddog ymchwilio o fewn 3 diwrnod gwaith;
- Mae'r meini prawf a'r amserlenni ar gyfer trin Cwynion Ffurfiol Cam 1 a Cham 2 fel a ganlyn:

### **Cwyn Ffurfiol Cam 1 (ar gyfer datrysiaid lleol cynnar)**

Mae Cam 1 ar gyfer Cwynion Ffurfiol yr ystyrir eu bod yn symlach ac yn addas i'w datrys yn gynnar yn lleol

Lle bo modd, bydd AaGIC bob amser yn ceisio datrys Cwyn o'r fath yn gyflym, cyn pen deg diwrnod gwaith os yn bosibl.

### **Cwyn Ffurfiol Cam 2 (Ymchwiliad Mwy Manwl)**

Mabwysiadir Cam 2 lle:

- mae'r person sy'n gwneud y gŵyn yn anfodlon ag ymateb AaGIC i Gam 1 neu,
- mae'n amlwg ar unwaith bod y gŵyn yn gymhleth neu angen ymchwiliad manwl.

Bydd AaGIC yn anelu at ymateb i Gŵyn Cam 2 cyn pen 30 diwrnod gwaith. Oni bai bod rheswm da dros ofyn am fwy o amser. Lle mae angen mwy o amser bydd AaGIC yn cadarnhau hyn yn ysgrifenedig trwy lythyr daliad.

- Mae'r Polisi Trin Cwynion (CHP) yn darparu rheolaeth ganolog ar gyfer gohebiaeth sy'n ymwneud â Chwyn Ffurfiol ynghyd â chofnodi cwynion a phryderon yn ganolog.
- Mae hefyd yn manylu ar sut y bydd y Polisi Trin Cwynion (CHP) yn cael ei fonitro ac y bydd adroddiad blynyddol ar gwynion yn cael ei ddarparu i'r Pwyllgor Archwilio a Sicrwydd.

Gan fod hwn yn bolisi newydd a phwrpasol, cynigir y bydd yn cael ei adolygu o fewn blwyddyn.

## **4. MATERION LLYWODRAETHU A RISG**

Bydd dull safonol o ymdrin â'r Polisi Trin Cwynion (CHP) yn galluogi AaGIC i symleiddio ei broses cwynion a phryderon a'i nod yw ymateb i faterion a'u datrys yn gynnar a lle bo hynny'n bosibl. Bydd cofnodi pryderon a chwynion yn ganolog yn galluogi nodi meysydd pryder yn gynnar a chanolbwyntio ar ddatrys yn gyflym. Bydd hefyd yn annog dysgu gwersi o bryderon a chwynion i wella gwasanaethau wrth symud ymlaen. Mae'r Polisi Trin Cwynion (CHP) hefyd yn cadarnhau'r broses ar gyfer adrodd yn rheolaidd ar Gwynion o fewn strwythur pwyllgorau AaGIC.

Mae Asesiad Effaith Cydraddoldeb (AEC) wedi'i gynnal. Aethpwyd i'r afael â'r risgiau a nodwyd yn yr AEC isod:

- i liniaru'r risg o ragfarn anymwybodol a diffyg ymwybyddiaeth ddiwylliannol bydd y Swyddog Ymchwilio yn derbyn hyfforddiant priodol, bydd hyn yn cynnwys hyfforddiant ehangach ynghylch cymwyseddau a thueddiadau diwylliannol;
- i liniaru'r risg o ddiffyg mynediad dwyieithog i'r trefniadau polisi sydd i'w rhoi ar waith i sicrhau bod unigolion yn gallu codi eu Cwynion a'u trafod ag aelodau staff sy'n siarad Cymraeg a derbyn ymateb yn Gymraeg.

5. GOBLYGIADAU ARIANNOL

Bydd gweithredu'r Polisi Trin Cwynion yn gofyn am rywfaint o adnoddau ychwanegol ond bernir bod hyn yn swyddogaeth graidd AaGIC.

6. ARGYMHELLIAD

Gofynnir i'r aelodau **gymeradwyo'r** Polisi Trin Cwynion (Atodiad 1).

Llywodraethu a Sicrwydd			
Linc i nodau strategol Cynllun Tymor Canolig Integredig (os gwelwch yn dda ✓)	<b>Nod Strategol 1:</b> Arwain y gwaith o gynllunio, datblygu a lles gweithlu cymwys, cynaliadwy a hyblyg i gefnogi'r gwaith o gyflawni 'Cymru Iachach'	<b>Nod Strategol 2:</b> Gwellu ansawdd a hygyrchedd addysg a hyfforddiant i'r holl staff gofal iechyd gan sicrhau ei fod yn diwallu anghenion y dyfodol	<b>Nod Strategol 3:</b> Gweithio gyda phartneriaid i ddylanwadu ar newid diwylliannol o fewn GIG Cymru drwy feithrin gallu tosturiol ac arweinyddiaeth gyfunol ar bob lefel
	✓	✓	✓
	<b>Nod Strategol 4:</b> Datblygu'r gweithlu i gefnogi'r gwaith o ddarparu diogelwch ac ansawdd	<b>Nod Strategol 5:</b> Bod yn gyflogwr enghreifftiol ac yn lle gwych i weithio	<b>Nod Strategol 6:</b> I'w gydnabod fel partner, dylanwadwr ac arweinydd rhagorol
	✓	✓	✓
<b>Ansawdd, Diogelwch a Phrofiad Cleifion</b>			
Bydd dull safonol o dan Bolisi Trafod Cwynion yn galluogi AaGIC i symleiddio ei broses gwyno. Bydd y polisi hefyd yn annog dysgu gwersi o bryderon a chwynion i wella gwasanaethau wrth symud ymlaen. Bydd hyn yn gwella ansawdd hyfforddiant ac addysg ac yn cyfrannu at Ansawdd, Diogelwch a Phrofiad y Claf.			
<b>Goblygiadau Ariannol</b>			
Ni ragwelir unrhyw oblygiadau ariannol uniongyrchol - bernir bod hon yn swyddogaeth graidd i AaGIC.			
<b>Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)</b>			
Dim goblygiadau cyfreithiol.			
<b>Goblygiadau Staffio</b>			
Dim goblygiadau staffio.			
<b>Goblygiadau Hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015)</b>			
Hanes yr Adroddiad	Ystyriwyd y Polisi Trin Cwynion (CHP) drafft yn y Pwyllgor Archwilio a Sicrwydd ym mis Hydref a'i gylchredeg i'r Aelodau Annibynnol i gael sylwadau ym mis Rhagfyr.  Mae'r Polisi Gweithredol hefyd wedi cael ei ystyried gan y Tîm Gweithredol, Uwch Dîm Arweinyddiaeth, wedi'i bostio ar fewnwyd AaGIC trwy gydol mis Rhagfyr yn gwahodd sylwadau staff ac wedi'i ystyried hefyd gan y Fforwm Partneriaeth Leol ym mis Ionawr.		
Atodiadau	Atodiad 1 - Y Polisi Trin Cwynion Drafft.		

# DRAFT



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WALES

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

## Complaints Handling Policy

### Executive Sponsor & Function:

Board Secretary

### Document Author:

Board Secretary

### Approved by:

[Board Approval required]

### Approval Date:

[to be considered at Board, January 2021]

### Date of Equality Impact Assessment:

November 2020

### Equality Impact Assessment Outcome:

Completed.

### Review Date:

January 2022

### Version: v1

## EXECUTIVE SUMMARY

### Complaints Handling Policy

<b>Overview</b>	This document sets out the arrangements by which HEIW will manage and respond to a Concern or a Complaint raised in respect of the organisation.
<b>Who is the policy intended</b>	<p>A Concern or Complaint can be raised under this policy by anyone.</p> <p>A HEIW employee can raise a Concern or a Complaint under this policy where the matter does not come under the All Wales Disciplinary Policy or All Wales Grievance Policy or the NHS Wales Raising Concerns Policy.</p>
<b>Key Messages included within the policy:</b>	<p>HEIW has a unique range of functions within NHS Wales and does not deliver patient care. This has been considered in developing our Complaints Handling Policy.</p> <p>Where possible and appropriate Concerns and Complaints may be dealt with on an informal basis in order to find a swift resolution.</p> <p>HEIW has a two-stage procedure for handling Formal Complaints.</p> <p>All Formal Complaints will be acknowledged within two working days of receipt.</p> <p><b>Stage 1.</b> We will always try to resolve a Complaint quickly, within ten working days if we can.</p> <p><b>Stage 2.</b> Shall be adopted if the:</p> <ul style="list-style-type: none"> <li>• person making the Complaint is dissatisfied with HEIW's response to Stage 1 or,</li> <li>• where it is immediately clear that the Complaint is complex or in need of detailed investigation.</li> </ul> <p>The decision in respect of the Complaint is to be made as soon as possible. Unless there is a good reason for needing more time, the decision in respect of a Phase 2 Complaint will be made within 30 working days.</p>

	HEIW welcomes the comments of service users and staff, both positive and negative as these help us to improve our service. Whoever makes a Concern or Complaint will suffer no detriment as a consequence of doing so.
<b>PLEASE NOTE THIS IS ONLY A SUMMARY OF THE POLICY AND SHOULD BE READ IN CONJUNCTION WITH THE FULL POLICY DOCUMENT</b>	

## Contents

1. Policy statement – the difference between a Concern and a Complaint
2. Purpose
3. Complaints included under the policy
4. Complaints excluded under the policy
5. Roles and responsibilities
6. Process for handling a Concern
7. Process for handling a Complaint
8. Principles for handling a Complaint
9. Consent
10. Two Stage Investigation process for a Formal Complaint
11. Making a Formal Complaint
12. Staff support
13. Quality assurance
14. Reporting mechanism monitoring the process
15. Investigation undertaken by the Public Services Ombudsman for Wales
16. Equality and Welsh Language
17. Storage and management of Complaints files

**Appendix 1 – Concerns or Informal Complaints Process**

**Appendix 2 – Complaints Process**

## 1. Policy statement

- 1.1 HEIW is committed to providing education, training and workforce development for the NHS.
- 1.2 However hard we try to respond to the wishes and aspirations of those we support through these functions, we do recognise that, on occasion, our service may fall short of expectations and give rise to Concerns or Complaints.
- 1.3 We deliver our functions by working in close cooperation with partners such as NHS Health Boards, NHS Trusts and Higher Education Institutions. It is important that in considering any Concerns or Complaints we are cognisant of their role and contribution.

### The difference between a Concern and a Complaint

- 1.4 **Concern.** HEIW regards a Concern as an expression of worry or doubt over an issue considered to be important for which reassurance is sought.
- 1.5 HEIW will aim to resolve Concerns at the earliest opportunity. The process for handling a Concern is outlined in paragraph 6.
- 1.6 **Complaint.** HEIW regards a Complaint to be any expression of dissatisfaction about a HEIW action, or lack of action, or about the standard of service provided by us or on our behalf.
- 1.7 HEIW will aim to resolve a Complaint at the earliest opportunity.
- 1.8 The process for handling a Complaint informally (Informal Complaint) is outlined in paragraph 7 below.
- 1.9 Where an individual wishes to raise their Complaint formally (Formal Complaint) they may do so through raising a Complaint in accordance with paragraph 11 below.
- 1.10 **Scope.** A Concern or Complaint can be made under this policy by anyone. A HEIW employee can raise a Concern or a Complaint under this policy where the issue does not come under the All Wales Disciplinary, All Wales Grievance Policy or NHS Wales Raising Concerns Policy.
- 1.11 Whoever raises a Concern or makes a Complaint will suffer no detriment as a consequence of doing so.

## 2. Purpose

- 2.1 This document details HEIW's process for dealing with Complaints and Concerns and outlines how this should be managed.



- 2.2 Through the effective management of the process HEIW will aim, where possible and appropriate, to put things right. Where it is not possible to resolve matters to the satisfaction of the complaining party, we will explain why this is not possible and advise that they may raise the matter with the Public Service Ombudsman for Wales.
- 2.3 The HEIW Board supports organisational learning, which is then shared locally throughout HEIW. A key requirement is therefore the sharing of lessons learned arising from Complaints with the staff involved and, where relevant, the wider organisation and external stakeholders in order to share good practice and bring about real improvements.
- 2.4 HEIW welcomes the comments of service users, both positive and negative as these help us to improve our service.

### **3. Complaints included under the policy**

- 3.1 Paragraphs 3.1.1 and 3.1.2 anticipate the areas that will be considered under our Complaints Handling Policy (this is not an exhaustive list).

3.1.1 It is anticipated that matters will be raised by students, trainees and other learners, trainers, Training Programme Directors or members of the public in respect of the following areas:

- a failure to provide or an adequate level of service;
- a lack of information and clarity;
- a difficulty in contacting HEIW;
- the treatment by or the attitude of a member of our staff;
- environmental issues
- domestic issues;
- operational and procedural issues;
- a failure by us to follow the appropriate process and
- dissatisfaction with the Complaints Handling Policy.

3.1.2 A Complaint by a member of HEIW staff that cannot be raised under the All Wales Disciplinary Policy, All Wales Grievance Policy or NHS Wales Raising Concerns Policy.

### **4. Complaint excluded under the policy**

- 4.1 The following are matters which we cannot deal with under our Complaints Handling Policy:

- the subject matter can be raised by a member of staff under the All Wales Disciplinary Policy, All Wales Grievance Policy or NHS Wales Raising Concerns Policy;
- a Complaint that has been investigated by the Public Services Ombudsman for Wales;

- a Complaint which arises out of an alleged failure of the Organisation to respond to a Freedom of Organisation request or Data Subject Access Request;
- matters relating to services not provided by or funded by HEIW;
- a Complaint where the complainant has already commenced legal proceedings, or has clearly indicated and intent to do so, rather than pursue the matter under this Complaints Handling Policy;
- a previously concluded Complaint or a request to have a Complaint reconsidered where HEIW has already given our final decision;
- a Complaint covered by Health Board policies, Health Trust policies, University policies or the policies of other education or training providers;
- to academic judgement;
- to patient treatment and care as HEIW does not treat patients directly;
- to disciplinary proceedings that HEIW is taking or proposing to take, arising from the investigation of a Complaint notified and dealt with in accordance with this Policy. In such circumstances these would be via HEIW's workforce procedures.

## 5. Roles and responsibilities

### 5.1 Chief Executive

The Chief Executive has overall responsibility for dealing with Complaints. This responsibility has been delegated on a day-to-day basis in accordance with the remaining provisions of this paragraph 5.

### 5.2 Responsible officer – Board Secretary

5.2.1 HEIW has designated the Board Secretary to act as the responsible officer to oversee the day to day management of these arrangements.

5.2.2 The responsible officer ensures arrangements are in place to:

- manage and consider Complaints;
- ensure that Complaints are dealt with in compliance with this Policy;
- ensure arrangements are in place to review the outcome of all investigated Complaints to ensure that any failure in provision of service identified during the investigation are acted upon, improved and monitored in order to prevent recurrence;
- ensuring that an annual report is prepared summarising the organisation's activities in respect of Complaints.
- ensuring that arrangements for dealing with Complaints are published and that a copy of the arrangements is given free of charge to any person who requests it, in the format requested.

5.2.3 The Board Secretary can delegate responsibilities for Complaints to an authorised person but remains the accountable person in any situation.

### 5.3 Director role

- 5.3.1 Subject to paragraph 5.3.2, it is the responsibility of the appropriate Director to undertake the investigation of a Complaint, appoint the Investigating Officer and to support their managers in conducting investigations within a timely manner to achieve the response targets. They are also responsible for undertaking quality assurance reviews of Complaint responses before they are submitted to the Chief Executive and Board Secretary. Directors are required to address any issues in relation to the quality of the investigation within their areas and to ensure lessons are being learnt and shared across the organisation, as appropriate, to improve services and prevent reoccurrence.
- 5.3.2 In certain circumstances it may not be deemed to be appropriate for a Director to undertake responsibility for an investigation arising from a Complaint in respect of their Directorate. This may arise where a Director is, for example, conflicted or too closely associated with the subject matter of the Complaint. In such circumstances a Director may be appointed from a different area of the organisation to ensure objectivity.

### 5.4 Investigating Officer

Complaints should be investigated by the most appropriate manager from the service area, function or programme appointed by the relevant Director. Investigating Officers will possess subject expertise to apply to the investigation and will work with a range of other managers and staff throughout the organisation to assist investigations. Where deemed appropriate an Investigating Officer may be appointed from a different area of the organisation to ensure objectivity. The Investigating Officer will receive appropriate training, this shall include wider training around cultural competencies and biases.

### 5.5 All staff

- 5.5.1 All staff must be aware of the organisational policies and procedures to ensure they know how to:
- deal with Complaints;
  - learn from Complaints;
  - cooperate fully and openly in the investigation of Complaints.
- 5.5.2 If a member of staff is involved at any level with a Complaint that involves a conflict of interest, they must declare an interest. Any Investigating Officer or person signing off a Complaint must not have any conflict of interest with either the complainant or the person about whom the Complaint is made.

## 6. Process for handling a Concern

- 6.1 A Concern may be raised in person, by phone, by e-mail or in writing.
- 6.2 Concerns will be resolved informally, without the need to use HEIW's formal Complaints process. HEIW will always try to deal with a Concern quickly and seek a swift resolution where possible.
- 6.3 All Concerns should be logged through forwarding an email headed 'Concern' to the Board Secretary and Governance Team at [insert HEIW complaints email address]. The email shall contain a brief description of the Concern.
- 6.4 The Concern must be made within three months of the event that is being complained about

## 7. Process for handling an Informal Complaint

- 7.1 An Informal Complaint may be raised in person, by phone, by e-mail or in writing.
- 7.2 Many Complaints will be resolved informally without the need to use HEIW's formal Complaints process. HEIW will always try to deal with an Informal Complaint quickly and seek a swift resolution where possible.
- 7.3 All Complaints which are resolved informally should be logged through forwarding an email headed 'Informal Complaint' to the Board Secretary and Governance Team. The email shall contain a brief description of the Informal Complaint.
- 7.4 The Informal Complaint must be made within three months of the event that is being complained about.

## 8. Principles for handling a Formal Complaint

- 8.1 HEIW is committed to dealing with Complaints in an open, accessible and fair manner. The process set up for the investigation and handling of Formal Complaints will ensure:
  - there is a single point of entry for the submission of Complaints;
  - Complaints are properly investigated in an open and efficient manner;
  - the complainant is treated with respect and courtesy;
  - the complainant's expectations are established and their involvement in the process sought;
  - the Complainant is advised of a named person who will act as their contact throughout the handling of their Complaint;
  - the complainant is advised of the availability of assistance to enable them to pursue their Complaint;
  - the complainant receives a timely and appropriate response to their Complaint and is kept informed if there is a delay;

- the complainant is informed of the outcome of the investigation;
- the complainant is assured that if the Complaint is upheld, appropriate action has been/will be taken as a result of their raising a Complaint to prevent similar cases arising.

8.2 We will develop an understanding of why some members of the community who may wish to raise a Concern might not feel able to do so. This may be due to cultural, social, gender and other reasons, including sensory loss, any of which might result in ineffective communication. Staff should be mindful of the issues which might act as a barrier to people raising a Concern and look for ways to assure people that it is safe for them to raise an issue.

## 9. Consent

9.1 Information contained within a Complaint falls within the definition of personal data contained within the Data Protection Act 2018. Anyone can raise a Complaint and HEIW has a duty to consider whether it can be investigated. The investigation may need access to the person raising the Complaint's records.

9.2 Implied consent. Where the service user raises the Complaint regarding him or herself, then in doing so it can be deemed as implied consent to undertake an investigation. However, for the individual to be clear in the knowledge that their records may need to be accessed this should be explained in the acknowledgement letter, as this provides them with an opportunity to indicate that they do not wish their records to be accessed.

9.3 Required Consent. Where a representative raises a Complaint on behalf of someone else then they must provide proof that they have received such an instruction from the Complainant. A consent form will be made available on our website to support the process.

## 10. Two Stage Investigation process for a Formal Complaint

10.1.1 The process through which an individual should raise a Formal Complaint is outlined in paragraph 11 below. HEIW will acknowledge a Formal Complaint within two working days of receipt.

10.1.2 An Investigating Officer will be allocated to a Formal Complaint within three days of its receipt.

### 10.2 Stage One: early local resolution

HEIW will always try to resolve a Complaint quickly and within ten working days of receipt of the Complaint where possible. Where appropriate, this could mean an on-the-spot apology and an explanation if something has clearly gone wrong, and immediate action to resolve the problem. Where it is not possible to resolve a Stage One Complaint

within ten working days HEIW will confirm this in writing through a holding letter which will confirm the additional required time.

### **10.3 Stage Two: Investigation**

10.3.1 In the event that the Complaint is not resolved to the satisfaction of all parties through the Stage One process or, HEIW deems the Complaint is more complex requiring more detailed investigation, the Stage Two procedure will be followed.

10.3.2 HEIW will provide its response as soon as possible. This will be no more than 30 working days after the receipt of the Complaint unless there is clearly a good reason for needing more time. Where such additional time is required HEIW will confirm this in writing through a holding letter. Where a Complaint has been escalated from Phase 1 to a Phase 2 the 30 working days shall be measured from the date of escalation.

## **11. Making a Formal Complaint**

11.1 The person making the Formal Complaint, or their representative, should inform the Chief Executive via email headed ' Formal Complaint' to [the HEIW complaints email address] or in writing to the Chief Executive , at Ty Dysgu, Nantgarw, CF15 7QQ.

11.2 To assist HEIW to respond to the Complaint as quickly as possible it should contain the following information:

- complainant's full name and address, and email address if this is the preferred method of contact,
- when the event happened;
- where the event happened;
- how the person making the Complaint would like HEIW to resolve the matter.

11.3 The Complainant will receive an acknowledgement of their Complaint within two working days of it being received by HEIW.

11.4 The Complaint must be made, within three months of the event that is being complained about.

11.5 HEIW will accept Complaints from the representatives of a person who makes a Complaint. This is subject to us having first received confirmation in writing that the person making the Complaint has appointed a representative to act on their behalf in the matter.

## 12. Staff support

- 12.1 Information about the investigation must be given to the staff involved in a truthful and open manner although if imparting this information may jeopardise the investigation, then it is advised not to inform the member of staff.
- 12.2 The line manager of a member of staff who is a subject of a Complaint needs to consider what level of support they may need, as the member of staff may feel anxious and need reassurance and support as the investigation progresses.
- 12.3 In collaboration with the member of staff, referral to appropriate staff support services should be considered as required. Staff may also seek support from their relevant professional bodies or representative union.

## 13. Quality assurance

- 13.1 The organisations quality assurance process includes a review of investigations and response letters by the relevant Director and Board Secretary.
- 13.2 It is the organisations policy that no response letters should be sent by Managers directly to the person raising the Complaint. All final response letters must be approved and sent from the Chief Executive or nominated deputy.

## 14. Reporting mechanism monitoring the process

- 14.1 All Complaints are monitored to ensure they have been adequately investigated, remedial action taken and that lessons have been learnt. HEIW's Executive Team will consider Complaint reports and make recommendations as appropriate.
- 14.2 All serious Complaints raised will be reported to the Executive Team. Details of the subject and nature of the Complaints, together with the outcome of the investigations must be recorded.
- 14.3 Compliance with the stated time periods for response are monitored and reported. The Board will be made aware of Complaints which may adversely affect the reputation of the Board by the Chief Executive supported by the Board Secretary.
- 14.4 HEIW's performance in respect of handling Formal Complaints will be monitored and reported upon through the Corporate Section of Performance Management Framework.
- 14.5 An annual report will be provided to the Audit and Assurance Committee by the Board Secretary. The report will include the number of

Complaints notified, the number of Complaints referred to the Public Services Ombudsman for Wales and the number of matters referred to redress.

- 14.6 This Policy will be monitored by the Executive Team and the Audit and Assurance Committee and will be subject to review within one year of it being adopted or in light of new guidance legislation or organisational change.

## **15. Investigations undertaken by the Public Services Ombudsman for Wales**

- 15.1 If the person raising the Complaint remains dissatisfied following a Stage 2 the person raising the Complaint can refer the matter to the Public Service Ombudsman for Wales.
- 15.2 Contact details of the Public Services Ombudsman for Wales must be provided within the response letter to the person raising the Complaint.

## **16. Equality and Welsh Language**

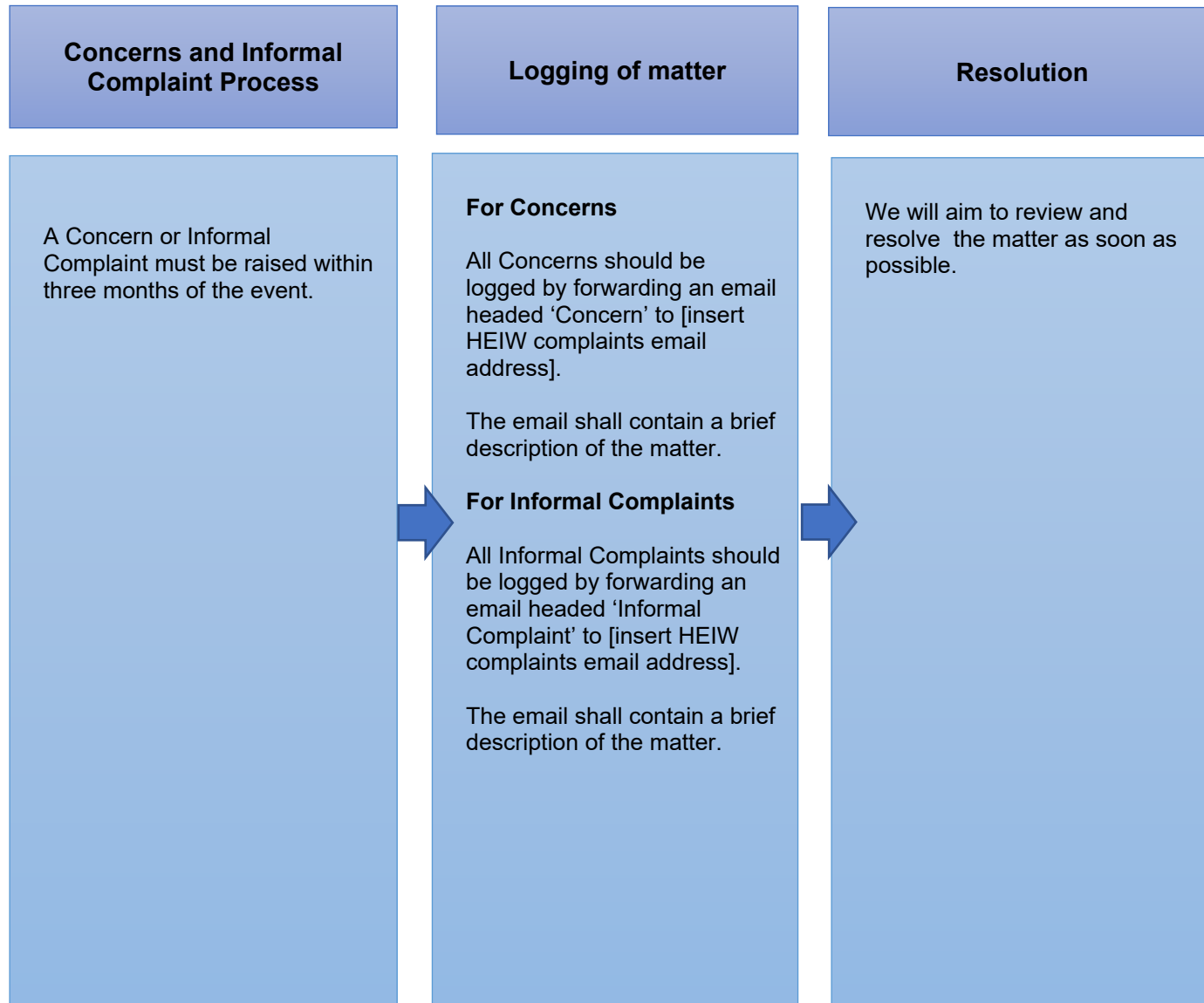
- 16.1 HEIW shall undertake the implementation of this policy in accordance with the Equality Act 2010. Under the Act people are not allowed to discriminate, harass or victimise another person on the basis of a protected characteristic defined as: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation.
- 16.2 It is important where the Welsh Language forms part of the Complaint that the Complainant is advised that as well as the Public Services Ombudsman for Wales, they can take their Complaint to the Welsh Language Commissioner if they remain unhappy. This information should be included within the final response letter as appropriate.
- 16.3 Staff should also be sensitive to the requirements of Welsh speakers in the handling of their Complaints. Arrangements should be put in place to ensure they are able to raise their Complaints, discuss them with Welsh speaking members of staff and receive a response in Welsh.

## **17. Storage and Management of Complaints Files**

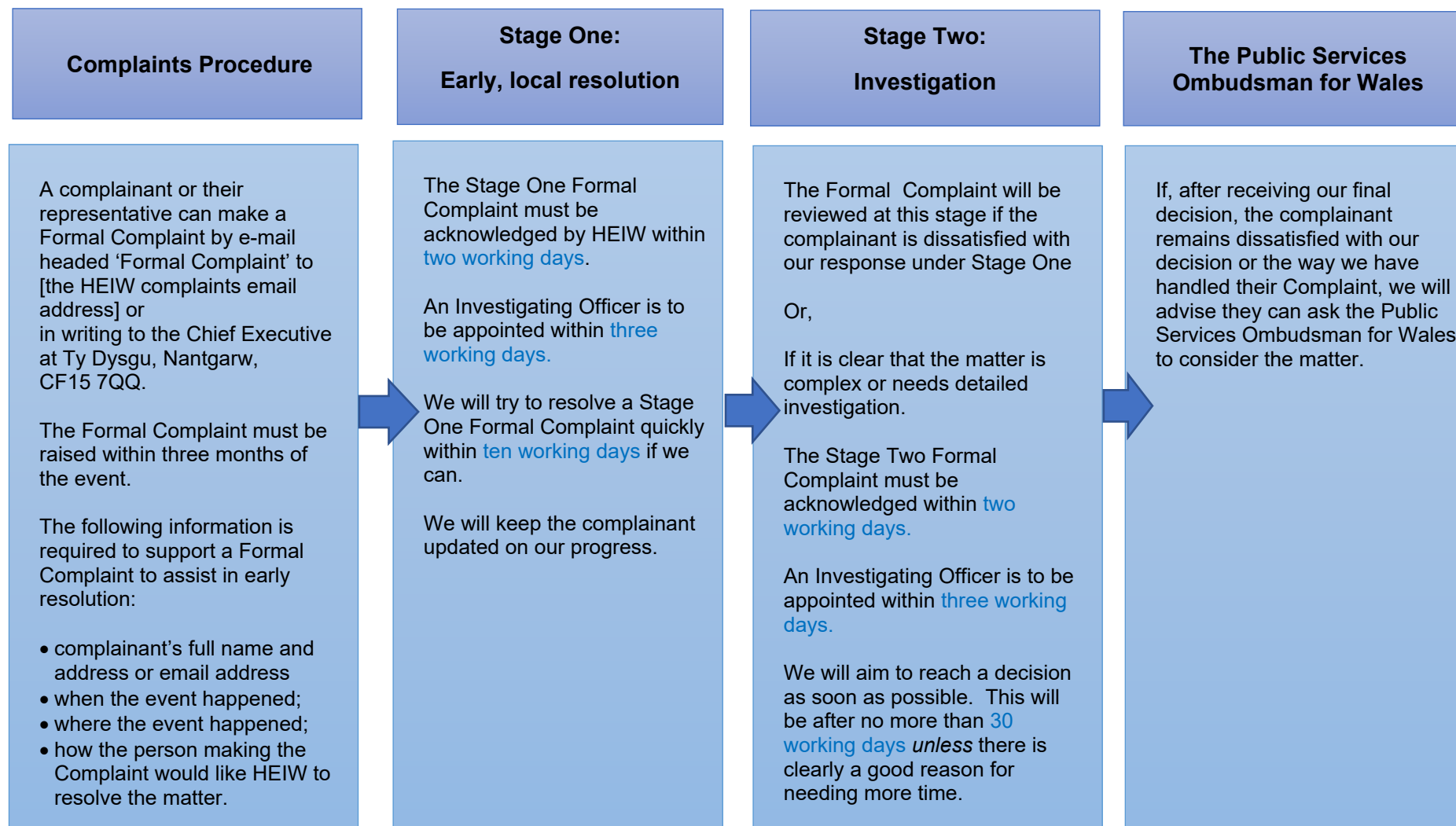
- 17.1 This file is the responsibility of the Investigating Officer. It is the responsibility of the Board Secretary to ensure that when closing the Complaint, the file is complete, accurate and holds no contentious remarks as the information is disclosable.



## APPENDIX 1 – CONCERNS or INFORMAL COMPLAINTS PROCESS



## APPENDIX 2 – FORMAL COMPLAINTS PROCESS





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

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

<b>Dyddiad y Cyfarfod</b>	<b>28 Ionawr 2021</b>	<b>Eitem agenda</b>	<b>4.5</b>
<b>Teitl yr Adroddiad</b>	<b>Adolygiad o Reolau Sefydlog AaGIC</b>		
<b>Awdur yr Adroddiad</b>	Kay Barrow, Rheolwr Llywodraethu Corfforaethol		
<b>Noddwr yr Adroddiad</b>	Dafydd Bebb, Ysgrifennydd y Bwrdd		
<b>A gyflwynir gan</b>	Dafydd Bebb, Ysgrifennydd y Bwrdd		
<b>Rhyddid Gwybodaeth</b>	Agored		
<b>Diben yr Adroddiad</b>	Cyflwyno canlyniad adolygiad blynyddol AaGIC o'i Reolau Sefydlog i'r Bwrdd.		
<b>Materion Allweddol</b>	<p>Mae'n ofynnol i sefydliadau'r GIG yng Nghymru adolygu eu Rheolau Sefydlog yn flynyddol er mwyn sicrhau eu bod yn cael y wybodaeth ddiweddaraf ac adlewyrchu unrhyw ddiwygiadau y cytunwyd arnynt gan y Bwrdd.</p> <p>Cafodd y papur hwn ei ystyried a'i gefnogi gan y Pwyllgor Archwilio a Sicrwydd yn ei gyfarfod ar 18 Ionawr.</p>		
<b>Camau Penodol sy'n Ofynnol</b> ( <i>un ✓ yn</i> unig os gwelwch yn dda)	<b>Gwybodaeth</b>	<b>Trafodaeth</b>	<b>Sicrwydd</b>
			<b>Cymeradwyo</b> ✓
<b>Argymhellion</b>	<p>Gofynnir i'r Aelodau:</p> <ul style="list-style-type: none"> <li>• <b>Nodi'r</b> diwygiadau a wnaed i'r Rheolau Sefydlog yn 2020 a</li> <li>• Chymeradwyo'r diwygiadau pellach i'r Rheolau Sefydlog fel yr amlinellir ym mharagraff 3, sydd wedi'u hymgorffori yn y fersiwn ddiwygiedig o Reolau Sefydlog AaGIC (Atodiad 1).</li> </ul>		

## ADOLYGIAD BLYNYDDOL O REOLAU SEFYDLOG AaGIC

### 1. CYFLWYNIAD A CHEFNDIR

Cymeradwyodd AaGIC y fersiwn gwreiddiol o'i Reolau Sefydlog yn ei gyfarfod cyntaf o'r Bwrdd ar 2 Hydref 2018 a fersiwn ddiwygiedig ym mis Tachwedd 2019. Cymeradwywyd nifer o ddiwygiadau i Reolau Sefydlog AaGIC gan y Bwrdd ar wahanol adegau yn ystod 2020, a oedd naill ai'n barhaol neu dros dro.

### 2. ASESIAID

Mae'r adolygiad o Reolau Sefydlog AaGIC wedi tynnu sylw at y gronoleg ganlynol o gymeradwyaethau a wnaed gan y Bwrdd yn ystod 2020:

- **Mawrth 2020 Bwrdd:**

Mewn ymateb i'r pandemig, ac yn unol â chanllawiau cenedlaethol, cymeradwyodd y Bwrdd drefniadau llywodraethu diwygiedig fel a ganlyn:

- Bwrdd (gan gynnwys Bwrdd mis Mawrth) a chyfarfodydd Pwyllgor i'w cynnal yn ffurfiol drwy delegynadledda a deialu i gyfarfod sy'n ddigonol i ffurfio cworwm.
- Ni ddisgwylir i aelodau'r cyhoedd fynychu sesiynau agored o gyfarfodydd. Er mwyn gwneud iawn am hyn a hyrwyddo bod yn agored ac yn dryloyw, cytunwyd ar y mesurau canlynol a'u gweithredu mewn perthynas â chyfarfodydd y Bwrdd a'r Pwyllgorau:
  - darparu crynodeb o'r cyfarfodydd o fewn 48 awr i gyfarfod (a estynnwyd i 72 awr ym Mis Gorffennaf y Bwrdd);
  - cyhoeddi cofnodion heb eu cadarnhau o fewn pythefnos i gyfarfod.
- Hwyluso'r ffordd newydd o weithio aelodau i anfon cwestiynau ac ymholiadau ar bapurau'r Bwrdd/Pwyllgor 24 awr cyn y cyfarfod a drefnwyd fel y gellir mynd i'r afael â hwy'n fwy effeithlon yn y drafodaeth. Yr ymholiadau i'w hanfon at y Cyfarwyddwr perthnasol a'u hanfon at Ysgrifennydd y Bwrdd.

Yn unol â Rheolau Sefydlog sefydliadau ieuchyd eraill Cymru, nid yw'r Rheolau Sefydlog wedi'u diwygio hyd yma i ymgorffori'r uchod. Mae'r cyfnod ar gyfer cynnal cyfarfodydd y Bwrdd a'r Pwyllgorau drwy delegynadledda neu fideo-gynadledda wedi cael ei ystyried a'i ymestyn yn rheolaidd gan y Bwrdd.

- **Bwrdd Mai 2020:**

- Cymeradwyodd y Bwrdd y diwygiad dros dro i'r Cynllun Dirprwyo i Gyfarwyddwyr Gweithredol, Cyfarwyddwyr a Swyddogion Eraill i ganiatáu i'r Pennaeth Addysg, Comisiynu ac Ansawdd gael ei ychwanegu fel swydd ychwanegol gyda'r Cyfarwyddwr Nyrsio yn y Terfynau Ariannol Dirprwyedig fel rhan o Atodlen 1 i'r Rheolau Sefydlog. Roedd hyn ar gyfer y cyfnod dros dro 1 Mehefin 2020 tan 31 Awst 2020.
- Cymeradwyodd y Bwrdd yr estyniad i gyfarfodydd y Bwrdd a'r Pwyllgor i'w gynnal yn ffurfiol drwy delegynadledda tan ddiwedd mis Gorffennaf 2020.

- **Bwrdd Gorffennaf 2020:**

- Cymeradwyodd y Bwrdd yr estyniad i gyfarfodydd y Bwrdd a'r Pwyllgor i'w gynnal yn ffurfiol drwy delegynadledda tan ddiwedd mis Medi 2020.
- Yn unol â Chylchlythyr Iechyd Cymru WHC 2020/011 "Diwygiadau Dros Dro i Reolau Sefydlog Enghreifftiol, Cronfeydd Wrth Gefn a Dirprwyo Pwerau - Byrddau Iechyd Lleol, Cymeradwyodd Ymddiriedolaethau'r GIG, Pwyllgor Gwasanaethau Iechyd Arbenigol Cymru, y Pwyllgor Gwasanaethau Ambiwylans Brys ac Addysg a Gwellu Iechyd Cymru", y gwelliannau canlynol a fydd yn peidio â bod yn effeithiol ar 31 Mawrth 2021 neu pan fo **penodiad(au) wedi'i wneud o dan Reoliadau'r Gwasanaeth Iechyd Gwladol (Datgysylltu Deiliadaeth Swydd Dros Dro) (Cymru) (Coronafeirws) 2020** ar ddiwedd y tymor hwnnw, pa un bynnag yw'r diweddaraf.

- Tudalen 13 – **1.2 Deiliadaeth aelodau'r Bwrdd**

1.2.1 Penodir Aelodau Annibynnol ac Aelodau Cyswllt a benodir gan y Gweinidog *dros Iechyd* a Gwasanaethau Cymdeithasol am gyfnod a bennir gan Weinidogion Cymru, ond am ddim mwy na 4 blynedd mewn unrhyw dymor. Gellir ailbenodi'r aelodau hyn ond ni ellir eu dal yn aelod neu'n aelod cyswllt ar gyfer yr un Bwrdd am gyfanswm o fwy nag 8, *mlynedd*, ac eithrio'r rhai a benodwyd neu a ailbenodwyd yn unol â Rheoliad 7 o Reoliadau'r Gwasanaeth Iechyd Gwladol (***Datgymhwyso Deiliadaeth Swydd Dros Dro) (Cymru) (Coronafeirws) 2020***. Bydd yr aelodau hyn yn dal swydd yn unol â thelerau eu penodiad neu eu hail-benodi. Nid oes angen i'r amser a weinir fod yn olynol a bydd yn dal i gael ei gyfrif tuag at gyfanswm y cyfnod hyd yn oed pan fydd toriad yn y tymor.

- Tudalen 21 – **Cyfarfod Cyffredinol Blynnyddol (CCB)**

5.2.5 Rhaid i AaGIC gynnal Cyfarfod Cyffredinol Blynnyddol yn gyhoeddus *erbyn 30 Tachwedd 2020*.

- **Bwrdd Medi 2020:**

- Cymeradwyodd y Bwrdd yr estyniad i gyfarfodydd y Bwrdd a'r Pwyllgor i'w gynnal yn ffurfiol drwy delegynadledda tan ddiwedd mis Tachwedd 2020.

- **Bwrdd Tachwedd 2020:**

- Cymeradwyodd y Bwrdd yr estyniad i gyfarfodydd y Bwrdd a'r Pwyllgor i'w gynnal yn ffurfiol drwy delegynadledda tan ddiwedd mis Mawrth 2021.
- Cymeradwyodd y Bwrdd y diwygiadau i Gylch Gorchwyl y Pwyllgor Archwilio a Sicrwydd a'r Pwyllgor Addysg, Comisiynu ac Ansawdd fel a ganlyn:
  - i gyfeirio at rôl yr Is-gadeirydd o fewn aelodaeth y Pwyllgor Archwilio a Sicrwydd;
  - cyfeirio at rôl yr Is-gadeirydd o fewn aelodaeth y Pwyllgor Addysg, Comisiynu ac Ansawdd ac, yn amodol ar ychwanegu'r tri Deon fel aelodau sefydlog 'Presenoldeb' yn hytrach nag fel aelodau llawn o'r Pwyllgor.
- Cymeradwyodd y Bwrdd y diwygiad i'r Terfynau Ariannol Dirprwyedig o £2m i £3m ar gyfer anfonebau gan NWSSP yn ymwneud â chyflogau meddygon teulu Cyflogwr Arweiniol Sengl yn unig.

### 3. CYNNIG

Yn dilyn yr adolygiad o'r Rheolau Sefydlog, cynigir y gwelliannau canlynol hefyd i'w cymeradwyo ym Mis Ionawr:

- mae'r dyddiad cau ar gyfer cynnal y Cyfarfod Cyffredinol Blynnyddol yn dychwelyd i 30 Medi ar gyfer pob blwyddyn;
- mae'r Cynllun Dirprwyo wedi'i ddiwygio i adlewyrchu penodiad a chyfrifoldebau'r Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol a'r Cyfarwyddwr Digidol;
- i adlewyrchu'r teitl cywir ar gyfer rôl y Cyfarwyddwr Cyllid;
- bydd y terfyn ariannol dirprwyedig ar gyfer y Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol a'r Cyfarwyddwr Digidol yn £50,000 ar gyfer Contractau nad ydynt yn Gontractau Addysg a Hyfforddiant.

### 4. MATERION LLYWODRAETHU A RISG

Mae'n ofynnol i sefydliadau'r GIG yng Nghymru adolygu eu Rheolau Sefydlog yn flynyddol er mwyn sicrhau eu bod yn cael y wybodaeth ddiweddaraf ac adlewyrchu unrhyw newidiadau i reoleiddio eu trafodion a'u busnes y cytunwyd arnynt gan y Bwrdd.

### 5. GOBLYGIADAU ARIANNOL

Nid oes unrhyw oblygiadau ariannol.

### 6. ARGYMHELLIAD

Gofynnir i'r Aelodau:

- **Nodi'r** diwygiadau a wnaed i'r Rheolau Sefydlog yn 2020 ac
- **Argymhell** y diwygiadau pellach i'r Rheolau Sefydlog fel yr amlinellir ym mharagraff 3, sydd wedi'u hymgorffori yn y fersiwn ddiwygiedig o Reolau Sefydlog AaGIC (Atodiad 1).

Llywodraethu a Sicrwydd			
<b>Linc i nodau strategol Cynllun Tymor Canolog Integredig</b> <i>(os gwelwch yn ddau)</i>	<b>Nod Strategol 1:</b> Arwain y gwaith o gynllunio, datblygu a lles gweithlu cymwys, cynaliadwy a hyblyg i gefnogi'r gwaith o gyflawni 'Cymru Iachach'	<b>Nod Strategol 2:</b> Gwellu ansawdd a hygyrchedd addysg a hyfforddiant i'r holl staff gofal iechyd gan sicrhau ei fod yn diwallu anghenion y dyfodol	<b>Nod Strategol 3:</b> Gweithio gyda phartneriaid i ddylanwadu ar newid diwylliannol o fewn GIG Cymru drwy feithrin gallu tosturiol ac arweinyddiaeth gyfunol ar bob lefel
	✓	✓	✓
	<b>Nod Strategol 4:</b> Datblygu'r gweithlu i gefnogi'r gwaith o ddarparu diogelwch ac ansawdd	<b>Nod Strategol 5:</b> Bod yn gyflogwr enghreifftiol ac yn lle gwych i weithio	<b>Nod Strategol 6:</b> I'w gydnabod fel partner, dylanwadwr ac arweinydd rhagorol
	✓	✓	✓
<b>Ansawdd, Diogelwch a Phrofiad Cleifion</b>			
Mae sicrhau bod y Bwrdd yn cyflawni ei fusnes yn briodol drwy ei Bwyllgorau ac yn cyd-fynd â'i reolau sefydlog yn ffactor allweddol yn ansawdd, diogelwch a phrofiad cleifion sy'n derbyn gofal.			
<b>Goblygiadau Ariannol</b>			
Dim goblygiadau ariannol i'r Bwrdd fod yn ymwybodol ohonynt.			
<b>Goblygiadau Cyfreithiol (gan gynnwys asesu cydraddoldeb ac amrywiaeth)</b>			
Mae'n hanfodol bod AaGIC yn cydymffurfio â'i Reolau Sefydlog.			
<b>Goblygiadau Staffio</b>			
Dim goblygiadau staffio i'r pwyllgor fod yn ymwybodol ohonynt.			
<b>Goblygiadau Hirdymor (gan gynnwys effaith Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015)</b>			
Nod y strwythur llywodraethu yw nodi materion yn gynnar er mwyn atal dwysáu ac mae'r Pwyllgor yn integreiddio i drefniadau cyffredinol y Bwrdd.			
<b>Hanes yr Adroddiad</b>	Cafodd y papur hwn ei ystyried a'i gefnogi gan y Pwyllgor Archwilio a Sicrwydd ar 18 Ionawr.		
<b>Atodiadau</b>	Atodiad 1 – Rheolau Sefydlog AaGIC		



**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:**

Board Secretary

**Approved by:**

HEIW Board

**Approval Date:**

28 January 2021

**Date of Equality Impact Assessment:**

19 March, 2019

**Equality Impact Assessment Outcome:**

No impact

**Review Date:**

January 2022

**Version: V4**

Health Education and Improvement Wales  
Model Standing Orders

Status: Version 4 – January 2021



## Foreword

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

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

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

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

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

# Contents

□	Foreword.....	2
□	<b>Section A – Introduction</b> .....	6
□	Statutory framework .....	6
□	NHS framework .....	7
□	Applying Standing Orders .....	8
□	Variation and amendment of Standing Orders .....	8
□	Interpretation .....	9
□	The role of the Board Secretary .....	9
□	<b>Section B – Standing Orders</b> .....	11
□	<b>1. HEALTH EDUCATION AND IMPROVEMENT WALES</b> .....	11
□	<b>1.1 Membership of Health Education and Improvement Wales Board</b> .....	12
□	<i>Executive Directors</i> .....	12
□	<i>Independent Members</i> .....	12
□	<i>Associate Members</i> .....	12
□	<i>Use of the term ‘Independent Members’</i> .....	12
□	<b>1.2 Tenure of Board members</b> .....	13
□	<b>1.3 The Role of the HEIW Board and responsibilities of individual members</b> .....	13
□	<i>Role 13</i> .....	
□	<i>Responsibilities</i> .....	14
□	<b>2. RESERVATION AND DELEGATION OF HEIW FUNCTIONS</b> .....	15
□	<b>2.1 Chair’s action on urgent matters</b> .....	16
□	<b>2.2 Delegation of Board functions</b> .....	17
□	<b>2.3 Delegation to officers</b> .....	17
□	<b>3. COMMITTEES</b> .....	17
□	<b>3.1 HEIW Committees</b> .....	17
□	<i>Use of the term ‘Committee’</i> .....	18
□	<b>3.2 Sub-Committees</b> .....	18
□	<b>3.3 Committees established by HEIW</b> .....	18
□	▪ <b>Audit and Assurance; and</b> .....	18
□	▪ <b>Remuneration and Terms of Service</b> .....	18
□	▪ <b>Education, Commissioning and Quality Committee</b> .....	18
□	<b>3.4 Other Committees</b> .....	19
□	<b>3.5 Confidentiality</b> .....	19
□	<b>3.6 Reporting activity to the Board</b> .....	19
□	<b>4. WORKING IN PARTNERSHIP</b> .....	20
□	<b>5. MEETINGS</b> .....	20
□	<b>5.1 Putting Citizens first</b> .....	20
□	<b>5.2 Annual Plan of Board Business</b> .....	21
□	<i>Annual General Meeting (AGM)</i> .....	21
□	<b>5.3 Calling Meetings</b> .....	21
□	<b>5.4 Preparing for Meetings</b> .....	22

Health Education and Improvement Wales  
Model Standing Orders

Status: Version 4 – January 2021

<input type="checkbox"/> <b>Setting the agenda</b> .....	<b>22</b>
<input type="checkbox"/> <b>Notifying and equipping Board members</b> .....	<b>22</b>
<input type="checkbox"/> <b>Notifying the public and others</b> .....	<b>23</b>
<input type="checkbox"/> <b>5.5 Conducting Board Meetings</b> .....	<b>23</b>
<input type="checkbox"/> <b>Admission of the public, the press and other observers</b> .....	<b>23</b>
<input type="checkbox"/> <b>Addressing the Board, its Committees and Advisory Groups</b> .....	<b>24</b>
<input type="checkbox"/> <b>Chairing Board Meetings</b> .....	<b>24</b>
<input type="checkbox"/> <b>Quorum</b> .....	<b>25</b>
<input type="checkbox"/> <b>Dealing with motions</b> .....	<b>25</b>
<input type="checkbox"/> <b>Voting</b> .....	<b>27</b>
<input type="checkbox"/> <b>5.6 Record of Proceedings</b> .....	<b>27</b>
<input type="checkbox"/> <b>5.7 Confidentiality</b> .....	<b>28</b>
<input type="checkbox"/> <b>6. VALUES AND STANDARDS OF BEHAVIOUR</b> .....	<b>28</b>
<input type="checkbox"/> <b>6.1 Declaring and recording Board members' interests</b> .....	<b>28</b>
<input type="checkbox"/> <b>6.2 Dealing with Members' interests during Board meetings</b> .....	<b>29</b>
<input type="checkbox"/> <b>6.3 Dealing with officers' interests</b> .....	<b>31</b>
<input type="checkbox"/> <b>6.4 Reviewing how Interests are handled</b> .....	<b>31</b>
<input type="checkbox"/> <b>6.5 Dealing with offers of gifts and hospitality</b> .....	<b>31</b>
<input type="checkbox"/> <b>6.6 Register of Gifts and Hospitality</b> .....	<b>33</b>
<input type="checkbox"/> <b>7. SIGNING AND SEALING DOCUMENTS</b> .....	<b>34</b>
<input type="checkbox"/> <b>7.1 Register of Sealing</b> .....	<b>34</b>
<input type="checkbox"/> <b>7.2 Signature of Documents</b> .....	<b>34</b>
<input type="checkbox"/> <b>7.3 Custody of Seal</b> .....	<b>34</b>
<input type="checkbox"/> <b>8. GAINING ASSURANCE ON THE CONDUCT OF HEIW BUSINESS</b> .....	<b>35</b>
<input type="checkbox"/> <b>8.1 The role of Internal Audit in providing independent internal assurance</b> .....	<b>35</b>
<input type="checkbox"/> <b>8.2 Reviewing the performance of the Board, its Committees and Advisory Groups</b> .....	<b>36</b>
<input type="checkbox"/> <b>8.3 External Assurance</b> .....	<b>36</b>
<input type="checkbox"/> <b>9. DEMONSTRATING ACCOUNTABILITY</b> .....	<b>37</b>
<input type="checkbox"/> <b>10. REVIEW OF STANDING ORDERS</b> .....	<b>37</b>
<input type="checkbox"/> <b>Schedule 1</b> .....	<b>34</b>
<input type="checkbox"/> <b>Scheme of Reservation and Delegation of Powers</b> .....	<b>34</b>
<input type="checkbox"/> <b>Deciding what to retain and what to delegate</b> .....	<b>35</b>
<input type="checkbox"/> <b>Handling arrangements for the reservation and delegation of powers</b> .....	<b>36</b>
<input type="checkbox"/> <b>Scope of these arrangements</b> .....	<b>37</b>
<input type="checkbox"/> <b>Schedule of matters reserved to the board</b> .....	<b>38</b>
<input type="checkbox"/> <b>Delegation of powers to Committees and others</b> .....	<b>44</b>
<input type="checkbox"/> <b>Delegated financial limits</b> .....	<b>49</b>
<input type="checkbox"/> <b>Schedule 2</b> .....	<b>54</b>
<input type="checkbox"/> <b>KEY GUIDANCE, INSTRUCTIONS AND</b> .....	<b>54</b>
<input type="checkbox"/> <b>OTHER RELATED DOCUMENTS</b> .....	<b>54</b>
<input type="checkbox"/> <b>HEIW Framework</b> .....	<b>54</b>
<input type="checkbox"/> <b>NHS Wales framework</b> .....	<b>54</b>
<input type="checkbox"/> <b>Schedule 3</b> .....	<b>53</b>
<input type="checkbox"/> <b>Board Committee Arrangements</b> .....	<b>53</b>
<input type="checkbox"/> <b>Standard Terms of Reference and Operating arrangements for all Committees of the Board</b> .....	<b>54</b>

□ Audit and Assurance Committee Terms of reference and operating arrangements .....	57
□ Remuneration and Terms of Service Committee terms of reference and operating arrangements.....	65
□ Education, Commissioning and Quality Committee Terms of Reference and Operating Arrangements .....	67

## 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

Health Education and Improvement Wales  
Model Standing Orders

Status: Version 4 – January 2021

relating to Welsh language.

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

### **NHS framework**

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

Citizen Centred Governance principles - are provided on the NHS Wales Governance e-manual which can be accessed at [www.wales.nhs.uk/governance-emanual/](http://www.wales.nhs.uk/governance-emanual/). Directions or guidance on specific aspects of business are also issued in hard copy, usually under cover of a Ministerial letter.

- xviii) HEIW will from time to time agree and approve policy statements which apply to the Board members and/all or specific groups of staff employed by HEIW. The decisions to approve these policies will be recorded in the appropriate Board minute and, where appropriate will be considered to be an integral part of HEIW's SOs and SFIs. Details of the key policy statements will be included in Schedule 2.
- xix) HEIW shall ensure that an official is designated to undertake the role of the Board Secretary (the role of which is set out in paragraph xxv below).

### Applying Standing Orders

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

### Variation and amendment of Standing Orders

- xxii) Although these SOs are subject to regular, annual review by HEIW, there may, exceptionally, be an occasion where it is necessary to vary or amend the SOs during the year. In these circumstances, the Board Secretary shall advise the Board of the implications of any decision to vary or amend SOs, and such a decision may only be made by the Board if:
  - The variation or amendment is in accordance with regulation 15 of the Constitution Regulations and does not contravene a statutory provision or direction made by the Welsh Ministers;

Health Education and Improvement Wales  
Model Standing Orders

Status: Version 4 – January 2021

- The proposed variation or amendment has been considered and approved by the Audit and Assurance Committee and is the subject of a formal report to the Board; and
- A formal notice of motion under Standing Order 5.5.14 has been given.

## Interpretation

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

## The role of the Board Secretary

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



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

## Section B – Standing Orders

### 1. HEALTH EDUCATION AND IMPROVEMENT WALES

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

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

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

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

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

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

**Leadership development** – HEIW will establish the strategic direction and delivery of leadership development for staff within NHS Wales at all levels;

**Careers and widening access** – HEIW will provide the strategic direction for health careers and the widening access agenda, delivering an ongoing agenda to promote health careers;

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

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

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

Health Education and Improvement Wales  
Model Standing Orders

Status: Version 4 – January 2021

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 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 *Minister 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 hold office as a member or associate member for the same Board for a total period of more than 8 years, *with the exception of those appointed or re-appointed in accordance with Regulation 7 of the **National Health Service (Temporary Disapplication of Tenure of Office) (Wales) (Coronavirus) Regulations 2020**. These members will hold office in accordance with the terms of their appointment or re-appointment.* Time served need not be consecutive and will still be counted towards the total period even where there is a break in the term.
- 1.2.2 Any Associate Member appointed to the Board under 1.1.5 will be for a period of up to one year, with a maximum term of four years if re-appointed.
- 1.2.3 Executive Directors' tenure of office as Board members will be determined by their contract of appointment.
- 1.2.4 All Independent Board members' tenure of appointment will cease in the event that they no longer meet any of the eligibility requirements, so far as they are applicable, as specified in Schedule 1 of the Constitution Regulations. Any member must inform the Chair as soon as is reasonably practicable to do so in respect of any issue which may impact on their eligibility to hold office. The Chair will advise the Minister in writing of any such cases immediately.
- 1.2.5 HEIW will require Independent Board members to confirm in writing their continued eligibility on an annual basis.

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

### Role

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

of activity.

### Responsibilities

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

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

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

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

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

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

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

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

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

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

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

Services Committee (known for operational purposes as the Shared Services Partnership Committee) which will be responsible for exercising the Trust's Shared Services functions. The Shared Services Regulations prescribe the membership of the Shared Services Committee in order to ensure that all LHBs, SHAs 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, SHAs and Trusts setting out the obligations of NHS bodies to participate in the Shared Services Committee and to take collective responsibility for setting the policy and delivery of the Shared Services to the health service in Wales. Responsibility for the exercise of the Shared Services functions will not rest with the Board of Velindre NHS Trust but will be a shared responsibility of all NHS bodies in Wales.

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

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

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

## **2.2 Delegation of Board functions**

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

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

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

## **2.3 Delegation to officers**

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

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

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

## **3. COMMITTEES**

### **3.1 HEIW Committees**

3.1.1 The Board may, and where directed by the Welsh Ministers must, appoint Committees of HEIW either to undertake specific functions on the Board's behalf or to provide advice and assurance to the Board in the exercise of its functions. The Board's commitment to openness and transparency in the conduct of all its business extends equally to the work carried out on its behalf by Committees. The Board shall, wherever possible, require its Committees to hold meetings in public unless there are specific, valid reasons for not doing so.



### Use of the term 'Committee'

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

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

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

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

## **3.3 Committees established by HEIW**

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

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

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

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

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

- The scope of its work (including its purpose and any delegated powers and authority);
- Membership and quorum;
- Meeting arrangements;
- Relationships and accountabilities with others (including the Board its

#### Committees and Advisory Groups)

- Any budget and financial responsibility, where appropriate;
- Secretariat and other support;
- Training, development, and performance; and
- Reporting and assurance arrangements.

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

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

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

### **3.4 Other Committees**

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

### **3.5 Confidentiality**

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

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

3.6.1 The Board must ensure that the Chairs of all Committees operating on its behalf report formally, regularly and on a timely basis to the Board on their activities. Committee Chairs' shall bring to the Boards specific attention any significant matters under consideration and report on the totality of its activities through the production of minutes or other written reports.

## **4. WORKING IN PARTNERSHIP**

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

## **5. MEETINGS**

### **5.1 Putting Citizens first**

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

interests of the communities served by HEIW.

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

- 5.2.1 The Board Secretary, on behalf of the Chair, shall produce an Annual Plan of Board business. This plan will include proposals on meeting dates, venues, and coverage of business activity during the year, taking account that ordinary meetings of the Board will be held at regular intervals and as a minimum six times a year. The Plan shall also set out any standing items that will appear on every Board agenda.
- 5.2.2 The plan shall set out the arrangements in place to enable HEIW to meet its obligations whilst also allowing Board members to contribute in either English or Welsh languages, where appropriate.
- 5.2.3 The plan shall also incorporate formal Board meetings, regular Board Development sessions and, where appropriate, the planned activities of the Board's Committees.
- 5.2.4 The Board shall agree the plan for the forthcoming year by the end of March, and this plan will be included as a schedule to these SOs.

### Annual General Meeting (AGM)

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

## **5.3 Calling Meetings**

- 5.3.1 In addition to the planned meetings agreed by the Board, the Chair may call a meeting of the Board at any time. Individual Board members may also request that the Chair call a meeting provided that at least one third of the whole number of Board members, support such a request.
- 5.3.2 If the Chair does not call a meeting within seven days after receiving such a request from Board members, then those Board members may themselves call a meeting.

## 5.4 Preparing for Meetings

### Setting the agenda

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

### Notifying and equipping Board members

- 5.4.3 Board members shall be sent an Agenda and a complete set of supporting papers at least 7 calendar days before a formal Board meeting. This information may be provided to Board members electronically or in paper form, in an accessible format, to the address provided, and in accordance with their stated preference. Supporting papers may, exceptionally, be provided, after this time provided that the Chair is satisfied that the Board's ability to consider the issues contained within the paper would not be impaired.
- 5.4.4 No papers will be included for consideration and decision by the Board unless the Chair is satisfied (subject to advice from the Board Secretary, as appropriate) that the information contained within it is sufficient to enable the Board to take a reasonable decision. Equality impact assessments (EIA) shall be undertaken on all new or revised policies, strategies, guidance and or practice to be considered by the Board, and the outcome of that EIA shall accompany the report to the Board to enable the Board to make an informed decision.
- 5.4.5 In the event that at least half of the Board members do not receive the Agenda and papers for the meeting as set out above, the Chair must consider whether or not the Board would still be capable of fulfilling its role and meeting its responsibilities through the conduct of the meeting. Where the Chair determines that the meeting should go ahead, their decision, and the reason for it, shall be recorded in the minutes.
- 5.4.6 In the case of a meeting called by Board members, notice of that meeting

must be signed by those members and the business conducted will be limited to that set out in the notice.

#### Notifying the public and others

5.4.7 Except for meetings called in accordance with Standing Order 5.3, at least 7 days before each meeting of the Board a public notice of the time and place of the meeting, and the public part of the agenda, shall be displayed bilingually (in English and Welsh):

- At HEIW's principal sites;
- On the HEIW website, together with the papers supporting the public part of the Agenda; as well as
- Through other methods of communication as set out in HEIW's communication strategy.

5.4.8 When providing notification of the forthcoming meeting, HEIW shall set out when and how the Agenda and the papers supporting the public part of the Agenda may be accessed, in what language and in what format, e.g., as Braille, large print, easy read, etc.

### **5.5 Conducting Board Meetings**

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

5.5.1 HEIW shall encourage attendance at its formal Board meetings by the public and members of the press as well as officers or representatives from organisations who have an interest in HEIW business. The venue for such meetings shall be appropriate to facilitate easy access for attendees and translation services; and appropriate facilities wherever practicable to maximise accessibility such as an induction loop system.

5.5.2 The Board and its Committees shall conduct as much of its formal business in public as possible. There may be circumstances where it would not be in the public interest to discuss a matter in public, e.g., business that relates to a confidential matter. In such cases the Chair (advised by the Board Secretary where appropriate) shall schedule these issues accordingly and require that any observers withdraw from the meeting. In doing so, the Board shall resolve:

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

5.5.3 In the circumstances, when the Board is not meeting in public session it shall operate in private session, formally reporting any decisions taken to the next

meeting of the Board in public session. Wherever possible, that reporting shall take place at the end of a private session, by reconvening a Board meeting held in public session.

- 5.5.4 The Board Secretary, on behalf of the Chair, shall keep under review the nature and volume of business conducted in private session to ensure such arrangements are adopted only when absolutely necessary.
- 5.5.5 In encouraging entry to formal Board Meetings from members of the public and others, the Board shall make clear that attendees are welcomed as observers. The Chair shall take all necessary steps to ensure that the Board's business is conducted without interruption and disruption. In exceptional circumstances, this may include a requirement that observers leave the meeting.

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

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

#### Chairing Board Meetings

- 5.5.7 The Chair of HEIW will preside at any meeting of the Board unless they are absent for any reason (including any temporary absence or disqualification from participation on the grounds of a conflict of interest). In these circumstances the Vice Chair shall preside. If both the Chair and vice-chair are absent or disqualified, the Independent Members present shall elect one of the Independent Members to preside.
- 5.5.8 The Chair must ensure that the meeting is handled in a manner that enables the Board to reach effective decisions on the matters before it. This includes ensuring that Board members' contributions are timely and relevant and move business along at an appropriate pace. In doing so, the Board must have access to appropriate advice on the conduct of the meeting through the attendance of the nominated Board Secretary. The Chair has the final say on any matter relating to the conduct of Board business.

#### Quorum

- 5.5.9 At least six Board members, at least two of whom are Executive Directors and four are Independent Members (including the Chair), must be present to allow

any formal business to take place at a Board meeting.

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

#### Dealing with motions

- 5.5.12 In the normal course of Board business items included on the agenda are subject to discussion and decisions based on consensus. Considering a motion is therefore not a routine matter and may be regarded as exceptional, e.g. where an aspect of delivery is a cause for particular concern, a Board member may put forward a motion proposing that a formal review of that service area is undertaken by a Committee of the Board. The Board Secretary will advise the Chair on the formal process for dealing with motions. No motion or amendment to a motion will be considered by the Board unless moved by a Board member and seconded by another Board member (including the Chair).
- 5.5.13 **Proposing a formal notice of motion** – Any Board member wishing to propose a motion must notify the Chair in writing of the proposed motion at least 12 days before a planned meeting. Exceptionally, an emergency motion may be proposed up to one hour before the fixed start of the meeting, provided that the reasons for the urgency are clearly set out. Where sufficient notice has been provided, and the Chair has determined that the proposed motion is relevant to the Board's business, the matter shall be included on the Agenda, or, where an emergency motion has been proposed, the Chair shall declare the motion at the start of the meeting as an additional item to be included on the agenda.
- 5.5.14 The Chair also has the discretion to accept a motion proposed during a meeting provided that the matter is considered of sufficient importance and its inclusion would not adversely affect the conduct of Board business.



- 5.5.15 **Amendments** - Any Board member may propose an amendment to the motion at any time before or during a meeting and this proposal must be considered by the Board alongside the motion.
- 5.5.16 If there are a number of proposed amendments to the motion, each amendment will be considered in turn, and if passed, the amended motion becomes the basis on which the further amendments are considered, i.e., the substantive motion.
- 5.5.17 **Motions under discussion** – When a motion is under discussion, any Board member may propose that:
- The motion be amended;
  - The meeting should be adjourned;
  - The discussion should be adjourned, and the meeting proceed to the next item of business;
  - A Board member may not be heard further;
  - The Board decides upon the motion before them;
  - An ad hoc Committee should be appointed to deal with a specific item of business; or
  - The public, including the press, should be excluded.
- 5.5.18 **Rights of reply to motions** – The mover of a motion (including an amendment) shall have a right of reply at the close of any debate on the motion or the amendment immediately prior to a vote on the proposal.
- 5.5.19 **Withdrawal of motion or amendments** – A motion or an amendment to a motion, once moved and seconded, may be withdrawn by the proposer with the agreement of the seconder and the Chair.
- 5.5.20 **Motion to rescind a resolution** – The Board may not consider a motion to amend or rescind any resolution (or the general substance of any resolution) which has been passed within the preceding six months unless the motion is supported by the (simple) majority of Board members.
- 5.5.21 A motion that has been decided upon by the Board cannot be proposed again within six months except by the Chair, unless the motion relates to the receipt of a report or the recommendations of a Committee/Chief Executive to which a matter has been referred.

### Voting

- 5.5.22 The Chair will determine whether Board members' decisions should be expressed orally, through a show of hands, by secret ballot or by recorded vote. The Chair must require a secret ballot or recorded vote if the majority of voting Board members request it. Where voting on any question is

conducted, a record of the vote shall be maintained. In the case of a secret ballot the decision shall record the number voting for, against or abstaining. Where a recorded vote has been used the Minutes shall record the name of the individual and the way in which they voted. Associate Members may not vote in any meetings or proceedings of the Board.

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

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

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

## **5.6 Record of Proceedings**

5.6.1 A record of the proceedings of formal Board meetings (and any other meetings of the board where the Board members determine) shall be drawn up as 'minutes'. These minutes shall include a record of Board member attendance (including the Chair) together with apologies for absence and shall be submitted for agreement at the next meeting of the Board, where any discussion shall be limited to matters of accuracy. Any agreed amendment to the minutes must be formally recorded.

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

## **5.7 Confidentiality**

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

## 6. VALUES AND STANDARDS OF BEHAVIOUR

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

### 6.1 Declaring and recording Board members' interests

- 6.1.1 **Declaration of interests** – It is a requirement that all Board members must declare any personal or business interests they may have which may affect or be perceived to affect the conduct of their role as a Board member. This includes any interests that may influence or be perceived to influence their judgement in the course of conducting the Board's business. Board members must be familiar with the Values and Standards of Behaviour Framework and their statutory duties under the Constitution Regulations. Board members must notify the Board of any such interests at the time of their appointment, and any further interests as they arise throughout their tenure as Board members.
- 6.1.2 Board members must also declare any interests held by family members or persons or bodies with which they are connected. The Board Secretary will provide advice to the Chair and the Board on what should be considered as an 'interest', taking account of the regulatory requirements and any further guidance, e.g., the Values and Standards of Behaviour framework. If individual Board members are in any doubt about what may be considered as an interest, they should seek advice from the Board Secretary. However, the onus regarding declaration will reside with the individual Board member.
- 6.1.3 **Register of interests** – The Chief Executive, through the Board Secretary will ensure that a Register of Interests is established and maintained as a formal record of interests declared by all Board members. The register will include details of all Directorships and other relevant and material interests which have been declared by Board members.
- 6.1.4 The register will be held by the Board Secretary, and will be updated during the year, as appropriate, to record any new interests, or changes to the interests declared by Board members. The Board Secretary will also arrange an annual review of the Register, through which Board members will be required to confirm the accuracy and completeness of the register relating to their own interests.
- 6.1.5 In line with the Board's commitment to openness and transparency, the Board Secretary must take reasonable steps to ensure that the citizens served by

HEIW are made aware of and have access to view the HEIW's Register of Interests. This may include publication on the HEIW website.

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

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

- 6.2.1 The Chair, advised by the Board Secretary, must ensure that the Board's decisions on all matters brought before it are taken in an open, balanced, objective, and unbiased manner. In turn, individual Board members must demonstrate, through their actions, that their contribution to the Board's decision making is based upon the best interests of HEIW and the NHS in Wales.
- 6.2.2 Where individual Board members identify an interest in relation to any aspect of Board business set out in the Board's meeting agenda, that member must declare an interest at the start of the Board meeting. Board members should seek advice from the Chair, through the Board Secretary before the start of the Board meeting if they are in any doubt as to whether they should declare an interest at the meeting. All declarations of interest made at a meeting must be recorded in the Board minutes.
- 6.2.3 It is the responsibility of the Chair, on behalf of the Board, to determine the action to be taken in response to a declaration of interest, taking account of any regulatory requirements or directions made by the Welsh Ministers. The range of possible actions may include determination that:
- i The declaration is formally noted and recorded, but that the Board member should participate fully in the Board's discussion and decision, including voting. This may be appropriate, for example where the Board is considering matters of strategy relating to a particular aspect of healthcare and an Independent Member is a healthcare professional whose profession may be affected by that strategy determined by the Board;
  - ii The declaration is formally noted and recorded, and the Board member participates fully in the Board's discussion, but takes no part in the Board's decision;
  - iii The declaration is formally noted and recorded, and the Board member takes no part in the Board discussion or decision;
  - iv The declaration is formally noted and recorded, and the Board member is excluded for that part of the meeting when the matter is being discussed. A Board member must be excluded, where that member has a direct or indirect financial interest in a matter being considered by the Board.

- 6.2.4 In extreme cases, it may be necessary for the member to reflect on whether their position as a Board member is compatible with an identified conflict of interest.
- 6.2.5 Where the Chair is the individual declaring an interest, any decision on the action to be taken shall be made by the Vice Chair, on behalf of the Board.
- 6.2.6 In all cases the decision of the Chair (or the Vice Chair in the case of an interest declared by the Chair) is binding on all Board members. The Chair should take advice from the Board Secretary when determining the action to take in response to declared interests; taking care to ensure their exercise of judgement is consistently applied.
- 6.2.7 **Members with pecuniary (financial) interests** – Where a Board member, or any person they are connected with<sup>1</sup> has any direct or indirect pecuniary interest in any matter being considered by the Board, including a contract or proposed contract, that member must at the meeting and as soon as practicable after its commencement, disclose the interest and must not take part in the consideration or discussion of that matter or vote on any question related to it. The Board may determine that the Board member concerned shall be excluded from that part of the meeting.
- 6.2.8 The Constitution Regulations define ‘direct’ and ‘indirect’ pecuniary interests and these definitions always apply when determining whether a member has an interest. These SOs must be interpreted in accordance with these definitions.
- 6.2.9 **Members with Professional Interests** - During the conduct of a Board meeting, an individual Board member may establish a clear conflict of interest between their role as a HEIW Board member and that of their professional role outside of the Board. In any such circumstance, the Board shall take action that is proportionate to the nature of the conflict, taking account of the advice provided by the Board Secretary.

### 6.3 Dealing with officers’ interests

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

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

## 6.4 Reviewing how Interests are handled

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

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

- 6.5.1 The Values and Standards of Behaviour Framework adopted by the Board prohibits Board members and HEIW officers from receiving gifts, hospitality or benefits in kind from a third party which may reasonably give rise to suspicion of conflict between their official duty and their private interest, or may reasonably be seen to compromise their personal integrity in any way.
- 6.5.2 Gifts, benefits, or hospitality must never be solicited. Any Board member or HEIW officer who is offered a gift, benefit or hospitality which may or may be seen to compromise their position must refuse to accept it. This may in certain circumstances also include a gift, benefit or hospitality offered to a family member of a Board member or HEIW officer. Failure to observe this requirement may result in disciplinary and/or legal action.
- 6.5.3 In determining whether any offer of a gift or hospitality should be accepted, an individual must make an active assessment of the circumstances within which the offer is being made, seeking advice from the Board Secretary as appropriate. In assessing whether an offer should be accepted, individuals must take into account:
- **Relationship:** Contacts which are made for the purpose of information gathering are generally less likely to cause problems than those which could result in a contractual relationship, in which case accepting a gift or hospitality could cause embarrassment or be seen as giving rise to an obligation;
  - **Legitimate Interest:** Regard should be paid to the reason for the contact on both sides and whether it is a contact that is likely to benefit HEIW;
  - **Value:** Gifts and benefits of a trivial or inexpensive (below £25), e.g., diaries/calendars, are more likely to be acceptable and can be distinguished from more substantial offers. Similarly, hospitality in the form of a working lunch would not be treated in the same way as more expensive social functions, travel, or accommodation (although in some circumstances these may also be accepted);

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

- **Frequency:** Acceptance of frequent or regular invitations particularly from the same source would breach the required standards of conduct. Isolated acceptance of, for example, meals, tickets to public, and sport, cultural or social events would only be acceptable if attendance is justifiable in that it benefits HEIW ; and
- **Reputation:** If the body concerned is known to be under investigation by or has been publicly criticised by a public body, regulators or inspectors, acceptance of a gift or hospitality might be seen as supporting the body or affecting in some way the investigation or negotiations and it should always be declined.

6.5.4 A distinction may be drawn between items offered as hospitality and items offered in substitution for fees for broadcasts, speeches, lectures, or other work done. There may be circumstances where the latter may be accepted if they can be used for official purposes.

## 6.6 Register of Gifts and Hospitality

6.6.1 The Board Secretary, on behalf of the Chair, will maintain a register of Gifts and Hospitality to record offers of gifts and hospitality made to Board members. Executive Directors will adopt a similar mechanism in relation to HEIW officers working within their Directorates.

6.6.2 Every Board member and HEIW officer has a personal responsibility to volunteer information in relation to offers of gifts and hospitality, including those offers that have been refused. The Board Secretary, on behalf of the Chair and Chief Executive, will ensure the incidence and patterns of offers and receipt of gifts and hospitality are kept under active review, taking appropriate action where necessary.

6.6.3 When determining what should be included in the Register, individuals shall apply the following principles, subject to the considerations in Standing Order 6.5.3:

- **Gifts:** Generally, only gifts of material value should be recorded. Those with a nominal value, e.g., seasonal items such as diaries/calendars would not usually need to be recorded.
- **Hospitality:** Only significant hospitality offered or received should be recorded. Occasional offers of 'modest and proportionate'<sup>3</sup> hospitality need not be included in the Register. Further detail is provided in the

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

framework policy on standards of behaviour.

6.6.4 Board members and HEIW officers may accept the occasional offer of modest and proportionate hospitality but in doing so must consider whether the following conditions are met:

- Acceptance would further the aims of HEIW;
- The level of hospitality is reasonable in the circumstances;
- It has been openly offered; and,
- It could not be construed as any form of inducement and will not put the individual under any obligation to those offering it.

6.6.5 The Board Secretary will arrange for a full report of all offers of Gifts and Hospitality recorded by HEIW to be submitted to the Audit and Assurance Committee (or equivalent) at least annually. The Audit and Assurance Committee will then review and report to the Board upon the adequacy of the HEIW's arrangements for dealing with offers of gifts and hospitality.

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

7.0.1 The common seal of the HEIW is primarily used to seal legal documents such as transfers of land, lease agreements and other important/key contracts. The seal may only be fixed to a document if the Board or Committee of the Board has determined it shall be sealed, or if a transaction to which the document relates has been approved by the Board or Committee of the Board.

7.0.2 Where it is decided that a document shall be sealed it shall be fixed in the presence of the Chair or Vice Chair (or other authorised independent Member) and the Chief Executive or Deputy Chief Executive (or another authorised individual) both of whom must witness the seal.

### **7.1 Register of Sealing**

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

### **7.2 Signature of Documents**

7.2.1 Where a signature is required for any document connected with legal proceedings involving HEIW, it shall normally be signed by the Chief Executive, except where the Board has authorised another person or has been otherwise directed to allow or require another person to provide a signature.



- 7.2.2 The Chief Executive or Deputy Chief Executive nominated officers may be authorised by the Board to sign on behalf of HEIW any agreement or other document (not required to be executed as a deed) where the subject matter has been approved either by the Board or a Committee to which the Board has delegated appropriate authority in each instance in accordance with the delegated authority.

### **7.3 Custody of Seal**

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

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

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

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

- 8.1.1 The Board shall ensure the effective provision of an independent internal audit function as a key source of its internal assurance arrangements, in accordance with the Public Sector Internal Audit Standards (PSIAS) and any other requirements determined by the Welsh Ministers.
- 8.1.2 The Board shall set out the relationship between the Head of Internal Audit (HIA), the Audit and Assurance Committee (or equivalent) and the Board. It shall:
- Approve the Internal Audit Charter (incorporating the definition of internal audit) and adopt the Internal Auditing Standards (incorporating the code of ethics);
  - Ensure the HIA communicates and interacts directly with the Board,

- facilitating direct and unrestricted access;
- Require Internal Audit to confirm its independence annually; and
- Ensure that the Head of Internal Audit reports periodically to the Board on its activities, including its purpose, authority, responsibility, and performance. Such reporting will include governance issues and significant risk exposures.

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

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

## **8.3 External Assurance**

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

- 8.3.4 HEIW shall provide the Auditor General for Wales with any assistance, information, and explanation which the Auditor General thinks necessary for the discharge of their statutory powers and responsibilities.

## **9. DEMONSTRATING ACCOUNTABILITY**

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

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

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

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

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

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

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

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

# Schedule 1

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

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

### **Introduction**

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

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

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

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

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

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

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

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

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

### **The Board**

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

### **The Chief Executive**

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

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

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

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

### **The Board Secretary**

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

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

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

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

### **Individuals to who powers have been delegated**

Individuals will be personally

- equipping themselves to deliver on any matter delegated to them,

- through the conduct of appropriate training and development activity; and
- exercising any powers delegated to them in a manner that accords with HEIW's values and standards of behavior.

Where an individual does not feel that they are equipped to deliver on a matter delegated to them, they must notify the Chief Executive of their concern as soon as possible in so that an appropriate and timely decision may be made on the matter.

In the absence of an officer to whom powers have been delegated, those powers will normally be exercised by the individual to whom that officer reports, unless the Board has set out alternative arrangements.

If the Chief Executive is absent their nominated Deputy may exercise those powers delegated to the Chief Executive on their behalf. However, the guiding principles governing delegations will still apply, and so the Board may determine that it will reassume certain powers delegated to the Chief Executive or reallocate powers, e.g., to a Committee or another officer.

## **SCOPE OF THESE ARRANGEMENTS FOR THE RESERVATION AND DELEGATION OF POWERS**

The Scheme of Delegation to officers referred to here shows only the "top level" of delegation within HEIW. The Scheme is to be used in conjunction with the system of control and other established procedures within HEIW.



## SCHEDULE OF MATTERS RESERVED TO THE BOARD<sup>1</sup>

THE BOARD		AREA	DECISIONS RESERVED TO THE BOARD
1	FULL	GENERAL	The Board may determine any matter for which it has statutory or delegated authority, in accordance with Standing Orders
2	FULL	GENERAL	The Board must determine any matter that will be reserved to the whole Board.
3	FULL	OPERATING ARRANGEMENTS	Adopt the standards of governance and performance to be met by HEIW, including standards/requirements determined by professional bodies/others, e.g., Royal Colleges
4	FULL	OPERATING ARRANGEMENTS	<p>Approve, vary, and amend:</p> <ul style="list-style-type: none"> <li>• Standing Orders (SOs);</li> <li>• Standing Financial Instructions (SFIs);</li> <li>• Schedule of matters reserved to HEIW;</li> <li>• Scheme of delegation to Committees and others; and</li> <li>• Scheme of delegation to Officers.</li> </ul> <p>In accordance with any directions set by Welsh Ministers.</p>
5	FULL	OPERATING ARRANGEMENTS	Approve HEIW's Values and Standards of Behavior Framework
6	FULL	OPERATING ARRANGEMENTS	Approve HEIW's framework for performance management, risk, and assurance
7	FULL	OPERATING ARRANGEMENTS	Approve the introduction or discontinuance of any significant activity or operation. Any activity or operation shall be regarded as significant if the Board determines it so based upon its contribution/impact on the achievement of HEIW's aims, objectives and priorities

<sup>1</sup> Any decision to reserve a matter, and the manner in which that retained responsibility is carried out will be in accordance with any regulatory and/or Welsh Government requirements

Health Education and Improvement Wales  
Model Standing Orders

Status: Version 4 – January 2021

THE BOARD		AREA	DECISIONS RESERVED TO THE BOARD
8	FULL	OPERATING ARRANGEMENTS	Ratify any urgent decisions taken by the Chair and the Chief Executive in accordance with Standing Order requirements
9	FULL	OPERATING ARRANGEMENTS	Ratify in public session any instances of failure to comply with Standing Orders and Standing Financial Instructions
11	FULL	OPERATING ARRANGEMENTS	Approve policies for dealing with complaints
12	FULL	OPERATING ARRANGEMENTS	Approve individual compensation payments in line with Standing Financial Instructions
13	FULL	OPERATING ARRANGEMENTS	Approve individual cases for the write off of losses or making of special payments above the limits of delegation to the Chief Executive and officers
14	FULL	OPERATING ARRANGEMENTS	Approve proposals for action on litigation on behalf of HEIW
15	FULL	OPERATING ARRANGEMENTS	Authorise use of the HEIW's official seal
16	FULL	OPERATING ARRANGEMENTS	Seek updates and assurance in respect of the Revalidation Process.
17	FULL	ORGANISATION STRUCTURE & STAFFING	Ratify appointment, discipline, and dismissal of the Chief Executive
18	FULL	ORGANISATION STRUCTURE & STAFFING	Approve the appointment, discipline and dismissal of the Executive Directors and any other Board level appointments
19	FULL	ORGANISATION STRUCTURE & STAFFING	Require, receive, and determine action in response to the declaration of Board members' interests, in accordance with advice received, e.g. from Audit & Assurance Committee

THE BOARD		AREA	DECISIONS RESERVED TO THE BOARD
20	FULL	ORGANISATION STRUCTURE & STAFFING	Approve, review, and revise HEIW's top level organisation structure and corporate policies
21	FULL	ORGANISATION STRUCTURE & STAFFING	Appoint, review, revise and dismiss Board committees, including any joint committees directly accountable to the Board
22	FULL	ORGANISATION STRUCTURE & STAFFING	Appoint, equip, review and (where appropriate) dismiss the Chair and members of any committee, joint committee or Group set up by the Board
23	FULL	ORGANISATION STRUCTURE & STAFFING	Appoint, equip, review and (where appropriate) dismiss individuals appointed to represent the Board on outside bodies and groups
24	FULL	ORGANISATION STRUCTURE & STAFFING	Approve the terms of reference and reporting arrangements of all committees, joint-committees and groups established by the Board
25	FULL	STRATEGY & PLANNING	Determine HEIW's strategic aims, objectives, and priorities
26	FULL	STRATEGY & PLANNING	Approve HEIW's annual business plan and three-year plan setting out how HEIW will meet the requirements set out in the remit letter.
27	FULL	STRATEGY & PLANNING	Approve HEIW's Risk Management Strategy and plans
28	FULL	STRATEGY & PLANNING	Approve HEIW's communication plan

THE BOARD		AREA	DECISIONS RESERVED TO THE BOARD
29	FULL	STRATEGY & PLANNING	Approve HEIW's partnership and stakeholder engagement and involvement Strategies
30	FULL	STRATEGY & PLANNING	Approve the HEIW's key strategies and programmes related to: <ul style="list-style-type: none"> <li>• Workforce and Organisational Development</li> <li>• Health education and training;</li> <li>• Research/evaluation;</li> <li>• Quality of education and training programmes;</li> <li>• Leadership and career development for staff within NHS Wales;</li> <li>• Workforce transformation &amp; improvement;</li> <li>• Infrastructure, including IM &amp;T, Estates and Capital;</li> <li>• Supporting delivery of 'A Healthier Wales including development of a high-level strategic workforce plan for Wales in partnership with Social Care Wales.</li> </ul>
31	FULL	STRATEGY & PLANNING	Approve HEIW's budget and financial framework (including overall distribution of the financial allocation)
32	FULL	STRATEGY & PLANNING	Proposed commissioning, specification and contract variations on education and training agreements before submission of recommendation to Welsh Government for Cabinet Secretary approval in accordance with delegations set on in the Financial
33	FULL	STRATEGY & PLANNING	Approve individual contracts (other than NHS contracts) above the limit delegated to the Chief Executive set out in the Financial Delegations
34	FULL	STRATEGY & PLANNING	Approve the National Annual Education and Training Plan before submission of recommendation to the Welsh Government for approval.

THE BOARD		AREA	DECISIONS RESERVED TO THE BOARD
35	FULL	STRATEGY & PLANNING	Approve the forward work programme for the Education Commissioning and Quality Committee.
36	FULL	PERFORMANCE & ASSURANCE	Approve HEIW's internal audit and assurance arrangements
37	FULL	PERFORMANCE & ASSURANCE	Receive reports from HEIW's Executive on progress and performance in the delivery of HEIW's strategic aims, objectives and priorities and approve action required, including improvement plans
38	FULL	PERFORMANCE & ASSURANCE	Receive assurance reports from the Board's committees, groups, and other internal sources on HEIW's performance and approve action required, including improvement plans
39	FULL	PERFORMANCE & ASSURANCE	Receive reports on HEIW's performance produced by external auditors, regulators and inspectors that raise issue or concerns impacting on HEIW's ability to achieve its aims and objectives and approve action required, including improvement plans, taking account of the advice of Board Committees (as appropriate)
40	FULL	PERFORMANCE & ASSURANCE	Receive the annual opinion of HEIW's Chief Internal Auditor and approve action required, including improvement plans
41	FULL	PERFORMANCE & ASSURANCE	Receive the annual audit report from HEIW's external auditor and approve action required, including improvement plans
42	FULL	PERFORMANCE & ASSURANCE	Receive the annual opinion on HEIW's performance against appropriate Health and Care Standards for Wales and approve action required, including improvement plans
43	FULL	REPORTING	Approve HEIW's Reporting Arrangements, including reports on activity and performance to partners and stakeholders and nationally to the Welsh Government
44	FULL	REPORTING	Receive, approve, and ensure the publication of HEIW reports, including its Annual Report & Accounts

Health Education and Improvement Wales  
Model Standing Orders

Status: Version 4 – January 2021

ADDITIONAL AREAS OF RESPONSIBILITY DELEGATED TO CHAIR, VICE CHAIR AND INDEPENDENT MEMBERS			
	CHAIR		
	VICE CHAIR		
	CHAMPION/ NOMINATED LEAD		

## **DELEGATION OF POWERS TO COMMITTEES AND OTHERS<sup>3</sup>**

Standing Order 2 provides that the Board may delegate powers to Committees and others. In doing so, the Board has formally determined:

- the composition, terms of reference and reporting requirements in respect of any such Committees; and
- the governance arrangements, terms and conditions and reporting requirements in respect of any delegation to others

In accordance with any regulatory requirements and any directions set by the Welsh Ministers.

Any delegated powers to Board Committees are set out in the Terms of reference of the relevant committee, which are appended to these SOs for the following Committees:

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

The scope of the powers delegated, together with the requirements set by the Board in relation to the exercise of those powers are as set out in i) Committee Terms of Reference, and ii) formal arrangements for the delegation of powers to others. Collectively, these documents form the Board's Scheme of Delegation to Committees.

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<sup>3</sup>As defined in Standing Orders

## SCHEME OF DELEGATION TO EXECUTIVE DIRECTORS, OTHER DIRECTORS AND OFFICERS

The HEIW Standing Orders and Standing Financial Instructions specify certain key responsibilities of the Chief Executive, the Director of Finance, and other officers. The Chief Executive's Job Description, together with their Accountable Officer Memorandum sets out their specific responsibilities, and the individual job descriptions determined for Executive Director level posts also define in detail the specific responsibilities assigned to those post holders. These documents, together with the schedule of additional delegations below and the associated financial delegations set out in the Standing Financial Instructions form the basis of the SHA's Scheme of Delegation to Officers.

DELEGATED MATTER	RESPONSIBLE OFFICER(S)
Representation in statutory partnerships	Chief Executive
Performance Management arrangements	Director of Planning, Performance and Corporate Services
Receipt and opening of quotations	Director of Finance
Land, Buildings, and assets	Director of Planning, Performance and Corporate Services
Facilities Management	Director of Planning, Performance and Corporate Services
Sustainable Development	Director of Planning, Performance and Corporate Services
Health, Safety & Fire	Director of Planning, Performance and Corporate Services
I M & T	Director of Digital
Senior Information Risk Owner (SIRO)	Board Secretary
CRB checks	Deputy Chief Executive and Director of Workforce & OD
Data Protection	Director of Digital

Health Education and Improvement Wales  
Model Standing Orders

Status: Version 4 – January 2021



<b>DELEGATED MATTER</b>	<b>RESPONSIBLE OFFICER(S)</b>
Equality & Human Rights	Deputy Chief Executive and Director of Workforce & OD
Issuing tenders and post tender negotiations	Chief Executive/ Director of Finance
Budgetary delegation arrangements	Director of Finance
Banking arrangements	Director of Finance
Ex-gratia payments	Director of Finance
Losses and special payments	Director of Finance
Professional advice on supply of goods and services	Director of Finance
External Communications incl. Media enquiries	Chief Executive, supported by Board Secretary
Healthcare Standards	Director of Nursing/ Medical Director
Risk Management	Board Secretary
Legal Claims	Director of Finance
Caldicott Guardian	Medical Director
Freedom of Information Act	Board Secretary
Welsh Language	Board Secretary
Legal advice	Board Secretary

Health Education and Improvement Wales  
Model Standing Orders

Status: Version 4 – January 2021

<b>DELEGATED MATTER</b>	<b>RESPONSIBLE OFFICER(S)</b>
Receipt and opening of tenders	Board Secretary
Civil Contingencies /Emergency Planning	Director of Planning, Performance and Corporate Services
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 Limit

Post	Education and Training Contracts	Education and Training Invoices	Revenue (Other Than Education & Training Contracts)
Board	Above £5m		No Limit
Chief Executive	up to £5m	No Limit (subject to Appropriate Contract Approval). NWSSP monthly invoices for SLE GP Salaries £3m.	£250,000
Deputy Chief Executive (when acting in that capacity)	up to £5m	No Limit (subject to Appropriate Contract Approval). NWSSP monthly invoices for SLE GP Salaries £3m.	£250,000
Director of Finance	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, Director of Digital and Director of Planning, Performance and Corporate Services			£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

Health Education and Improvement Wales  
Model Standing Orders

Status: Version 4 – January 2021

# Schedule 2

## KEY GUIDANCE, INSTRUCTIONS AND OTHER RELATED DOCUMENTS

**This Schedule forms part of, and shall have effect as if incorporated in the  
HEIW Standing Orders**

### HEIW Framework

The HEIW governance and accountability framework comprises these SOs, incorporating schedules of Powers reserved for the Board and Delegation to others, together with the following documents:

- ***SFIs***
- ***Values and Standards of Behaviour Framework***
- ***Risk and Assurance Framework***
- ***Key policy documents agreed by the Board including:***
  - ***Policies, procedures and other written control documents policy and procedure;***
  - ***Welsh Language Scheme;***

These documents must be read in conjunction with the SOs and will have the same effect as if the details within them were incorporated within the SOs themselves.

### NHS Wales framework

Full, up to date details of the guidance, instructions and other documents that together make up the framework of governance, accountability and assurance for the NHS in Wales are published on the NHS Wales Governance e-Manual which can be accessed at [www.wales.nhs.uk/governance-emanual/](http://www.wales.nhs.uk/governance-emanual/). Directions or guidance on specific aspects of HEIW business are also issued in hard copy, usually under cover of a Ministerial Letter.

# Schedule 3

## BOARD COMMITTEE ARRANGEMENTS

**This Schedule forms part of, and shall have effect as if incorporated in the HEIW Standing Orders**

The HEIW Shadow Board has agreed initially to set up two committees:

Audit and Assurance Committee; and  
Remuneration and Terms of Service Committee

The Terms of Reference and Operating arrangement for each Committee is detailed below:

### Audit and Assurance Committee

The **Audit and Assurance Committee** is responsible for reviewing the system of governance and assurance established within HEIW and the arrangements for internal control, including risk management, for the organisation and, in particular, advises on the Annual Governance Statement signed by the Chief Executive.

The Committee also keeps under review the risk approach of the organisation and utilises information gathered from the work of the Board, its own work, the work of other Committees and also other activity in the organisation in order to advise the Board regarding its conclusions in relation to the effectiveness of the system of governance and control

The Committee also has the role of providing *assurance* to the Board in relation to the arrangements for creating, collecting, storing, safeguarding, disseminating, sharing, using and disposing of information in accordance with its stated objectives, legislative responsibilities, e.g., the Data Protection Act, General Data Protection Regulations and Freedom of Information Act; and any relevant requirements and standards determined for the NHS in Wales.

### Remuneration and Terms of Service Committee

The **Remuneration and Terms of Service Committee** has the purpose of providing advice to the Board on remuneration and terms of service for the Chief Executive, Executive Directors and other senior staff within the framework set by the Welsh Government and provide *assurance* to the Board in relation to HEIW arrangements for the remuneration and terms of service, including contractual arrangements, for all staff, in accordance with the requirements and standards determined for the NHS in Wales.

## Education, Commissioning and Quality Committee

The **Education, Commissioning and Quality Committee** has the purpose to:

- **Advise** and **assure** the Board and the Chief Executive (who is the Accountable Officer) on whether effective arrangements are in place to plan, commission, deliver and quality manage education systems and provide assurance on behalf of the organisation.
- Where appropriate, **advise** the Board and the Chief Executive on where, and how, its education systems and assurance framework may be strengthened and developed further.
- Recommend to the Board education training plans including investment in new programmes and disinvestment in others. .
- Recommend to the Board on strategic matters relating to Education Commissioning and Education Quality.
- **Recommend** the specification of tender documents in respect of Education to the Board

<b>Standard Terms of Reference and Operating Arrangements for all Committees of the Board</b>	
<b>Date:</b> 1 October 2018	<b>Version:</b> Draft 1.0
<b>Review Date:</b> Annually	
<b>1. Introduction:</b> <p>Section 3.1 of the HEIW standing orders provide that “The Board may and, where directed by the Welsh Government must, appoint Committees either to undertake specific functions on the Board’s behalf or to provide advice and assurance to the Board in the exercise of its functions. The Board’s commitment to openness and transparency in the conduct of all its business extends equally to the work carried out on its behalf by committees”.</p> <p>In line with Section 3.3 of the standing orders, the Board shall as a minimum nominate annually committees which cover the following aspects of Board business:</p> <ul style="list-style-type: none"> <li>• Audit and Assurance;</li> <li>• Remuneration and Terms of Service; and</li> <li>• Education, Commissioning and Quality Committee</li> </ul> <p>This document includes content common to all committees and should be read alongside the specific terms of reference and operating arrangements for each committee.</p> <p>The provisions of Section 5 of the Standing Orders have also been taken into account when developing the committee Terms of Reference. This relates to transparency of meetings, planning board/committee business, setting agenda’s etc.</p>	
<b>2. Authority:</b> <p>Each Committee is authorised by the Board to investigate or have investigated any activity within its terms of reference. In doing so, the Committee shall have the right to inspect any books, records, or documents of the Authority relevant to the Committee’s remit, ensuring staff confidentiality, as appropriate. It may seek relevant information from any:</p> <ul style="list-style-type: none"> <li>• employee (and all employees are directed to co-operate with any reasonable request made by the Committee); and</li> <li>• any other Committee, sub-committee or group set up by the Board to assist it in the delivery of its functions.</li> </ul> <p>Each Committee is authorised by the Board to obtain outside legal or other</p>	

independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers it necessary, in accordance with the Board's procurement, budgetary and other requirements.

### **3. Sub-Committees and Groups**

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

### **4. Membership and Attendees:**

#### **4.1 Secretariat**

As determined by the Board Secretary.

#### **4.2 Member Appointments**

- The second and third paragraph of this section 4.2 shall not be applicable to the Remuneration and Terms of Service Committee as section 4.1 of the same Committee's Terms of Reference shall take precedence.
- The membership of each Committee shall be determined by the Board, based on the recommendation of the Chair - taking account of the balance of skills and expertise necessary to deliver each Committee's remit and subject to any specific requirements or directions made by the Welsh Government. The Board shall ensure succession planning arrangements are in place.
- Members shall be appointed to hold office for a period of one year at a time, up to a maximum of their term of office. During this time a member may resign or be removed by the Board. The Board should, as a matter of good practice, review the membership of each Committee every two years in order to ensure each Committee is refreshed on a regular basis whilst maintaining continuity.
- Committee members' terms and conditions of appointment, (including any remuneration and reimbursement) will be in accordance with their terms of appointment to HEIW. Where a member has been co-opted to fulfil a specific function and where they are not Independent Members or employees of HEIW this will be determined by the Board, based upon the recommendation of the Chair and on the basis of advice from the Remuneration and Terms of Service Committee.

#### **4.3 Support to Committee Members**

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

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



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

#### **4.4 Withdrawal of individuals in attendance**

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

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

### **5. Relationships and accountabilities with the Board and its Committees/Groups<sup>4</sup>**

Although the Board has delegated authority to the Committees for the exercise of certain functions, as set out within each Committee's terms of reference, it retains overall responsibility and accountability for ensuring a strategic approach to developing the Welsh health workforce for now and for the future through the effective governance of the organisation.

Each Committee is directly accountable to the Board for its performance in exercising the functions set out in each Committee's terms of reference.

Each Committee, through its Chair and members, shall work closely with the Board's other Committees, including joint (sub) committees and groups to provide advice and assurance to the Board through the:

- joint planning and co-ordination of Board and Committee business; and
- sharing of information.

Through acting in accordance with the preceding paragraph, each Committee shall contribute to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance framework.

- Each Committee shall embed HEIW values, corporate standards, priorities, and requirements through the conduct of its business.

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<sup>4</sup> Reference to the Board's Committees/Groups incorporates its sub committees, joint committees, and joint sub committees as well as other groups, such as Task and Finish Groups, where this is appropriate to the remit of the Committee.

## **6. Reporting and Assurance Arrangements:**

Each Committee Chair shall:

- bring to the Board's specific attention any significant matters under consideration by their Committee
- ensure appropriate escalation arrangements are in place to alert the Chair, Chief Executive (and Accountable Officer) or Chairs of other relevant committees of any urgent or critical matters that may affect the operation and/or reputation of HEIW.
- report formally, regularly and on a timely basis to the Board on the Committee's activities. This includes verbal updates on activity, the submission of Committee minutes and written reports when appropriate, as well as the presentation of an annual report;

The Board may also require the Committee Chair to report upon the Committee's activities at public meetings, or to community partners and other stakeholders, where this is considered appropriate. This could be where the Committee's assurance role relates to a joint or shared responsibility.

The Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous self-assessment and evaluation of each Committee's performance and operation including that of any sub committees established and groups.

<b>Terms of Reference and Operating Arrangements Audit and Assurance Committee</b>	
<b>Date:</b> October 2020	
<b>Review Date:</b> Annually	
<b>1. Introduction</b>	
<p>In line with Section 3 of the Standing Orders, the Board shall nominate annually a committee which covers Audit. This remit of this Committee will be extended to include Assurance and Corporate Governance and will be known as the <b>Audit and Assurance Committee</b>.</p> <p>The detailed terms of reference and operating arrangements set by the Board in respect of this Committee are detailed below.</p> <p>These terms of reference and operating arrangements are to be read alongside the standard terms of reference and operating arrangements applicable to all committees.</p>	
<b>2. Purpose</b>	
<p>The purpose of the Audit and Assurance Committee (“the Committee”) is to:</p> <ul style="list-style-type: none"> <li>• <b>Advise</b> and <b>assure</b> the Board and the Chief Executive (who is the Accountable Officer) on whether effective arrangements are in place, through the design and operation of HEIW’s assurance framework, to support them in their decision taking and in discharging their accountabilities for securing the achievement of its objectives, in accordance with the standards of good governance determined for the NHS in Wales</li> <li>• Where appropriate, the Committee will <b>advise</b> the Board and the Chief Executive on where, and how, its systems and assurance framework may be strengthened and developed further</li> <li>• <b>Approve</b> on behalf of the Board policies, procedures, and other written control documents in accordance with the Scheme of Delegation.</li> </ul>	
<b>3. Delegated Powers</b>	
<p>With regard to its role in providing advice to the Board, the Committee will comment specifically on the:</p> <ul style="list-style-type: none"> <li>• adequacy of HEIW’s strategic governance and assurance framework, systems, and processes for the maintenance of an effective system of governance, internal control, and risk management across the whole organisation’s activities, designed to support the public disclosure statements that flow from the assurance processes, including the Annual Governance Statement, providing reasonable assurance on:</li> </ul>	

- the organisations ability to achieve its objectives
- compliance with relevant regulatory requirements and other directions and requirements set by the Welsh Government and others
- reliability, integrity, safety, and security of the information collected and used by the organisation
- the efficiency, effectiveness, and economic use of resources
- the extent to which the organisation safeguards and protects all its assets, including its people.

In undertaking its work and responsibility the Committee will comment specifically on:

- Board's Standing Orders, and Standing Financial Instructions (including associated framework documents, as appropriate)
- accounting policies, the accounts, and the annual report of the organisation, including the process for review of the accounts prior to submission for audit, levels of error identified, the ISA 260 Report 'Communication with those charged with Governance' and managements' letter of representation to the external auditors
- Schedule of Losses and Special Payments
- planned activity and results of internal audit, external audit, and the Local Counter Fraud Specialist (including strategies, annual work plans and annual reports)
- adequacy of executive and management's response to issues identified by audit, inspection, and other assurance activity
- anti-fraud policies, whistleblowing (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
Vice Chair	Independent Member
Members	Independent Members

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:

Director of Finance  
Board Secretary  
Head of Internal Audit (or representative)  
Local Counter Fraud Specialist  
Representative of the Auditor General for Wales  
Head of Financial Accounting

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

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

## **5.3 Quorum**

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

## **6. Frequency of Meetings**

Meetings shall be held no less than quarterly and otherwise as the Chair of the Committee deems necessary – consistent with HEIW's annual plan of Board Business. The External Auditor or Head of Internal Audit may request that the Chair convene a meeting if they consider this necessary.

## **7. Relationships and accountabilities with the board and its Committees/Groups:<sup>5</sup>**

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

The Committee will consider the assurance provided through the work of the Board's other committees and sub groups to meet its responsibilities for advising the Board on the adequacy of HEIW's overall framework of assurance.

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<sup>5</sup> Reference to the Board's Committees/Groups incorporates its sub committees, joint committees, and joint sub committees as well as other groups, such as Task and Finish Groups, where this is appropriate to the remit of this Audit and Assurance Committee

## **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.



<b>Remuneration and Terms of Service Committee</b> <b>Terms of Reference and Operating Arrangements</b>	
<b>Date:</b> 1 October 2018	<b>Version:</b> Draft 1.0
<b>Review Date:</b> Annually	
<b>1. Introduction</b>  <p>In line with Section 3 of the Standing Orders and HEIW's Scheme of Delegation, the Board shall nominate annually a committee to be known as the Remuneration and Terms of Service Committee. The detailed terms of reference and operating arrangements set by the Board in respect of this committee are set out below.</p> <p>These terms of reference and operating arrangements are to be read alongside the standard terms of reference and operating arrangements applicable to all Committees.</p>	
<b>2. Purpose</b>  <p>The purpose of the Remuneration and Terms of Service Committee ("the Committee") is to provide:</p> <ul style="list-style-type: none"> <li>• <b>advice</b> to the Board on remuneration and terms of service and performance for the Chief Executive, Executive Directors and other senior staff within the framework set by the Welsh Government</li> <li>• <b>assurance</b> to the Board in relation to HEIW's arrangements for the remuneration and terms of service, including contractual arrangements, for all staff, in accordance with the requirements and standards determined for the NHS in Wales.</li> </ul> <p>The Committee shall have no powers to exercise on behalf of the Board.</p>	
<b>3. Delegated Powers</b>  <p>With regard to its role in providing advice and assurance to the Board, the Committee will comment specifically upon the:</p> <ul style="list-style-type: none"> <li>• remuneration and terms of service for the Chief Executive, Executive Directors, members of the Executive Team and other Very Senior Managers (VSMs); ensuring that the policies on remuneration and terms of service as determined from time to time by the Welsh Government are applied consistently</li> <li>• objectives for Executive Directors and members of the Executive Team and their performance assessment</li> <li>• performance management system in place for those in the positions mentioned above and its application</li> <li>• proposals regarding termination arrangements, including those under the Voluntary Early Release Scheme, ensuring the proper calculation and scrutiny of termination payments in accordance with the relevant Welsh Government guidance.</li> </ul>	

## **4. Membership, Attendees and Quorum**

### **4.1 Members**

Chair: HEIW Chair

Members: Every Independent Member of HEIW

**4.2 By Invitation** As required but usually to include:  
Chief Executive  
Deputy Chief Executive  
Director of Finance  
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.

<b>Education, Commissioning and Quality Committee Terms of Reference and Operating Arrangements</b>	
<b>Date:</b> October 2020	
<b>Review Date:</b> Annually	
<b>1. Introduction</b>	
<p>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.</p> <p>The terms of reference and operating arrangements set by the Board in respect of this Committee are detailed below.</p> <p>These terms of reference and operating arrangements are to be read alongside the standard terms of reference and operating arrangements applicable to all HEIW committees.</p>	
<b>2. Purpose</b>	
<p>The purpose of the Education, Commissioning and Quality Committee (“the Committee”) is to:</p> <ul style="list-style-type: none"> <li>• <b>Advise</b> and <b>assure</b> the Board and the Chief Executive (who is the Accountable Officer) on whether effective arrangements are in place to plan, commission, deliver and quality manage education systems and provide assurance on behalf of the organisation.</li> <li>• Where appropriate, <b>advise</b> the Board and the Chief Executive on where, and how, its education systems and assurance framework may be strengthened and developed further.</li> <li>• Recommend to the Board education training plans including investment in new programmes and disinvestment in others. .</li> <li>• Recommend to the Board on strategic matters relating to Education Commissioning and Education Quality.</li> <li>• <b>Recommend</b> the specification of tender documents in respect of Education to the Board</li> </ul>	
<b>3. Delegated Powers</b>	
<p>With regard to its role in providing advice to the Board, the Committee will:</p> <p>i. Provide assurance to the Board as to the effective management</p>	

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 of at least:

- Chair: Independent Member
- Vice Chair: Independent Member

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
- Board Secretary
- Deputy Director of Education, Commissioning and Quality
- Dental Dean

- Pharmacy Dean
- Postgraduate Medical Dean

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.



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

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

<b>Dyddiad y Cyfarfod</b>	<b>28 Ionawr 2021</b>	<b>Eitem agenda</b>	<b>4.6</b>
<b>Teitl yr Adroddiad</b>	<b>Adroddiad Cadeirydd y Pwyllgor – y Pwyllgor Archwilio a Sicrwydd</b>		
<b>Awdur yr Adroddiad</b>	Kay Barrow, Rheolwr Llywodraethu Corfforaethol		
<b>Noddwr yr Adroddiad</b>	Dafydd Bebb, Ysgrifennydd y Bwrdd		
<b>A gyflwynir gan</b>	Gill Lewis, Cadeirydd		
<b>Rhyddid Gwybodaeth</b>	<b>Agored</b>		
<b>Diben yr Adroddiad</b>	Diben yr adroddiad yw amlinellu trafodaethau a gynhaliwyd gan y Pwyllgor Archwilio a Sicrwydd.		
<b>Materion Allweddol</b>	Mae'r adroddiad hwn yn canolbwyntio ar y materion allweddol a godwyd yng nghyfarfod y Pwyllgor Archwilio a Sicrwydd a gynhaliwyd ar 18 Hydref 2021.		
<b>Camau Penodol sy'n Ofynnol</b> ( <i>un ✓ yn unig os gwelwch yn dda</i> )	<b>Gwybodaeth</b>	<b>Trafodaeth</b>	<b>Sicrwydd</b>
			<b>Cymeradwyaeth</b>
			✓
<b>Argymhellion</b>	<p>Gofynnir i aelodau'r Bwrdd:</p> <ul style="list-style-type: none"> <li>• <b>Sylwi</b> ar gynnwys yr adroddiad er mwyn cael sicrwydd.</li> <li>• <b>Sylwer</b> bod y diweddariad a'r argymhellion sy'n deillio o'r adolygiad blynyddol o Reolau Sefydlog AaGIC yr ystyrir eu cymeradwyo o dan eitem ar wahân ar agenda'r Bwrdd (eitem 4.5).</li> </ul>		

## Adroddiad Cadeirydd y Pwyllgor – y Pwyllgor Archwilio a Sicrwydd

### 1. CYFLWYNIAD

Diben yr adroddiad yw rhoi'r wybodaeth ddiweddaraf am faterion 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 18 Hydref 2021.
- **Sylwer** bod y diweddariad a'r argymhellion i ddiwygio'r Rheolau Sefydlog i'r Bwrdd, y manylir arnynt isod, sy'n deillio o'r Adolygiad Blynnyddol o Reolau Sefydlog AaGIC yn 2020, yn cael eu hystyried i'w cymeradwyo o dan eitem ar wahân ar agenda'r Bwrdd (eitem 4.5). Argymhellodd y Pwyllgor y diwygiadau canlynol i'r Rheolau Sefydlog:
  - mae'r dyddiad cau ar gyfer cynnal y Cyfarfod Cyffredinol Blynnyddol yn dychwelyd i 30 Medi ar gyfer pob blwyddyn;
  - mae'r Cynllun Dirprwyo wedi'i ddiwygio i adlewyrchu penodiad a chyfrifoldebau'r Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol a'r Cyfarwyddwr Digidol;
  - i adlewyrchu'r teitl cywir ar gyfer rôl y Cyfarwyddwr Cyllid;
  - bydd y terfyn ariannol dirprwyedig ar gyfer y Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol a'r Cyfarwyddwr Digidol yn £50,000 ar gyfer Contractau nad ydynt yn Gontractau Addysg a Hyfforddiant.
  - y fersiwn ddiwygiedig o Reolau Sefydlog AaGIC yn cael ei gymeradwyo.

### 4. MATERION LLYWODRAETHU A RISG

Rheolir unrhyw risgiau a materion llywodraethu drwy gyfarfodydd y pwyllgor a bydd adroddiadau eithriedig yn cael eu darparu i'r Bwrdd gan y cadeiryddion perthnasol.

### 5. GOBLYGIADAU ARIANNOL

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



## 6. ARGYMHELLIAD

Gofynnir i aelodau'r Bwrdd:

- **Sylwi** ar gynnwys yr adroddiad er mwyn cael sicrwydd.
- **Sylwi** bod y diweddariad a'r argymhellion sy'n deillio o'r adolygiad blynyddol o Reolau Sefydlog AaGIC yr ystyrir eu cymeradwyo o dan eitem ar wahân ar agenda'r Bwrdd (eitem 4.5).

<b>Llywodraethu a Sicrwydd</b>			
<b>Linc i nodau strategol Cynllun Tymor Canolig Integredig</b> (os gwelwch yn ddau)	<b>Nod Strategol 1:</b> Arwain y gwaith o gynllunio, datblygu a lles gweithlu cymwys, cynaliadwy a hyblyg i gefnogi'r gwaith o gyflawni 'Cymru Iachach'	<b>Nod Strategol 2:</b> Gwella ansawdd a hygyrchedd addysg a hyfforddiant i'r holl staff gofal iechyd gan sicrhau ei fod yn diwallu anghenion y dyfodol	<b>Nod Strategol 3:</b> Gweithio gyda phartneriaid i ddylanwadu ar newid diwylliannol o fewn GIG Cymru drwy feithrin gallu tosturiol ac arweinyddiaeth gyfunol ar bob lefel
	<b>Nod Strategol 4:</b> Datblygu'r gweithlu i gefnogi'r gwaith o ddarparu diogelwch ac ansawdd	<b>Nod Strategol 5:</b> Bod yn gyflogwr enghreifftiol ac yn lle gwych i weithio	<b>Nod Strategol 6:</b> I'w gydnabod fel partner, dylanwador ac arweinydd rhagorol
<b>Ansawdd, Diogelwch a Phrofiad Cleifion</b>			
Mae sicrhau bod y Bwrdd yn cyflawni ei fusnes yn briodol drwy ei Bwyllgorau ac yn cyd-fynd â'i reolau sefydlog yn ffactor allweddol yn ansawdd, diogelwch a phrofiad cleifion sy'n derbyn gofal.			
<b>Goblygiadau Ariannol</b>			
Dim goblygiadau ariannol i'r Bwrdd fod yn ymwybodol ohonynt.			
<b>Goblygiadau Cyfreithiol (gan gynnwys asesiad cydraddoldeb ac amrywiaeth)</b>			
Mae'n hanfodol bod y Bwrdd yn cydymffurfio â'i reolau sefydlog, sy'n cynnwys derbyn diweddariadau gan ei bwyllgorau.			
<b>Goblygiadau Staffio</b>			
Dim goblygiadau staffio i'r pwyllgor fod yn ymwybodol ohonynt.			
<b>Goblygiadau Tymor Hir (gan gynnwys effaith Deddf Lles Cenedlaethau'r Dyfodol (Cymru) 2015)</b>			
Mae'r adroddiad yn amlinellu gwaith a wnaed gan y Pwyllgor i adolygu perfformiad a chyllid tymor byr AaGIC yn ogystal â chanolbwyntio ar gynaliadwyedd tymor hwy. Nod y strwythur llywodraethu yw nodi materion yn gynnar er mwyn atal dwysáu ac mae'r Pwyllgor yn integreiddio i drefniadau cyffredinol y Bwrdd.			
<b>Hanes yr Adroddiad</b>	Bydd yr adroddiad hwn yn eitem sefydlog ar agenda'r Bwrdd.		
<b>Atodiadau</b>	Atodiad 1 – Crynodeb y Cadeirydd - Y Pwyllgor Archwilio a Sicrwydd		

## Atodiad 1

Dyddiad y Cyfarfod	28 Ionawr 2021	Eitem agenda	4.6
Statws Rhyddid Gwybodaeth	Agored		
Pwyllgor Adrodd	Y Pwyllgor Archwilio a Sicrwydd		
Awdur yr Adroddiad	Kay Barrow, Rheolwr Llywodraethu Corfforaethol		
Cadeirir gan	Gill Lewis, Aelod Annibynnol		
Cyfarwyddwr Gweithredol Arweiniol	Eifion Williams, Cyfarwyddwr Cyllid		
Dyddiad y cyfarfod diwethaf	18 Ionawr 2021		
Crynodeb o'r materion allweddol a ystyriwyd gan y pwyllgor ac unrhyw benderfyniadau cysylltiedig a wnaed:			
<p>Oherwydd y cyfyngiadau a osodwyd gan Lywodraeth Cymru o ganlyniad i Bandemig COVID-19, nid oedd AaGIC yn gallu cynnal ei Bwyllgor Archwilio a Sicrwydd ar 18 Ionawr 2021 yn gyhoeddus. Fodd bynnag, yn dilyn y broses briodol, gynhaliwyd y cyfarfod drwy Microsoft Teams/Telegynhadledd.</p> <p>Derbyniodd a nododd y Pwyllgor y <b>Memorandwm Cyd-ddealltwriaeth a'r Cytundeb Rhannu Gwybodaeth gyda'r Cyngor Fferylliaeth Cyffredinol</b>. Cadarnhawyd mai'r Memorandwm Cyd-ddealltwriaeth ac ISA oedd y cytundebau cyntaf o'i fath rhwng AaGIC a rheoleiddiwr ac y byddai cytundebau o'r fath yn cefnogi cydweithredu a rhannu gwybodaeth rhwng y ddau barti. Y gobaith oedd mai hwn fyddai'r cyntaf o lawer o gytundebau o'r fath rhwng AaGIC a rheoleiddwyr.</p> <p>Derbyniodd y Pwyllgor yr <b>Adroddiad Cynnydd Gwrth Dwyll</b> a nododd y byddai'r Tîm Gwrth Dwyll yn atgyfnerthu ei gamau atal drwy gynyddu sesiynau ymwybyddiaeth staff a gwella'r cyfathrebu rhwng llywodraethu da a mesurau arfer da yn yr amgylchedd rhithwir. Byddai'r Pwyllgor yn derbyn adroddiad ar ganlyniad y Fenter Twyll Cenedlaethol yn ei gyfarfod nesaf.</p> <p>Cyflwynodd Archwiliad Cymru ei <b>Adroddiad Blynyddol ar gyfer 2020</b> a oedd yn rhoi crynodeb o ganlyniad y gwaith archwilio a wnaed ac a fyddai'n cael ei gyhoeddi ar eu gwefan.</p> <p>Derbyniodd a nododd y <b>Pwyllgor Gynllun Archwilio Dangosol Archwilio Cymru ar gyfer 2021</b>a oedd yn manylu ar y gwaith archwilio ariannol a pherfformiad arfaethedig a fyddai'n cael ei wneud yn ystod 2021. Byddai'r Cynllun Archwilio terfynol yn cael ei gyflwyno yng nghyfarfod nesaf y Pwyllgor.</p> <p>Cyflwynodd yr Archwiliad Mewnol bedwar adroddiad i'r Pwyllgor:</p> <ul style="list-style-type: none"><li>• <b>Adroddiad Cynnydd</b> – Darparodd hwn ddiweddariad mewn perthynas â'r Cynllun Archwilio Mewnol ar gyfer 2020/2021 a'r mesurau sy'n cael eu hystyried pe bai COVID-19 yn parhau i amharu ar y broses o gyflawni'r rhaglen archwilio.</li><li>• <b>Y Broses Adolygu Datblygiad</b> Personol Adroddiad Archwilio Mewnol – Roedd yr asesiad cyffredinol ar gyfer yr archwiliad hwn o sicrwydd rhesymol. Fodd bynnag, nid oedd canfyddiadau'r adolygiad wedi tynnu sylw at unrhyw broblemau o ran cynllunio systemau/rheolaethau, ond dosbarthwyd pedwar mater fel gwendidau yng ngweithredu'r system/rheolaeth gynlluniedig ar gyfer y</li></ul>			

Broses Adolygu Datblygiad Personol (PDR). Roedd pedwar argymhelliad a oedd i gyd yn flaenoriaeth ganolig.

Er nad oedd AaGIC yn cyrraedd targed Llywodraeth Cymru o gyfradd cwblhau arfarniad o 85%, roedd gwaith sylweddol wedi'i wneud i ddatblygu a gweithredu proses PDR a oedd yn seiliedig ar Fframwaith Gwerthoedd ac Ymddygiad AaGIC ac a oedd yn cydymffurfio â Pholisi Dilyniant Cyflogau newydd Cymru Gyfan.

- **Adroddiad Archwilio Mewnol** Systemau Ariannol –Archwiliad cylchol oedd hwn a adolygodd wahanol agweddau ar y system ariannol. Roedd cwmipas yr archwiliad yn cynnwys adolygiad o'r gofrestr asedau; rheoli arian parod; cyfriflyfr cyffredinol; incwm a dyledwyr a thaliadau â llaw.

Nid oedd canfyddiadau'r adolygiad wedi amlygu unrhyw faterion a ddosbarthwyd fel gwendidau yn rheolaeth/dyluniad y system ar gyfer y Systemau Ariannol a adolygwyd. Er i ganfyddiadau'r adolygiad dynnu sylw at saith mater a ddosbarthwyd fel gwendidau yng ngweithredu'r system/rheolaeth gynlluniedig ar gyfer y Systemau Ariannol a adolygwyd.

Lefel gyffredinol y sicrwydd oedd sicrwydd rhesymol. Roedd saith argymhelliad ac roedd un flaenoriaeth uchel iddynt; tair blaenoriaeth ganolig a thair blaenoriaeth isel.

Nododd y Pwyllgor fod pump o'r saith argymhelliad eisoes wedi'u cwblhau a bod gwaith sylweddol eisoes wedi'i wneud gyda'r Tîm TG/Digidol mewn perthynas â'r rhestr TG i gefnogi'r Gofrestr Asedau a'r bwriad i'w chwblhau erbyn 31 Mawrth 2021.

- **Adroddiad Cryno COVID-19 Cymru Gyfan:** Croesawodd y Pwyllgor yr adroddiad hwn a oedd yn rhoi darlun cyffredinol ledled Cymru o'r themâu cyffredin ar draws y meysydd a adolygwyd a'r meysydd i'w hystyried yn y dyfodol.

Derbyniodd y Pwyllgor yr **Adroddiad** Ar Lywodraethu Gwybodaeth a Rheoli Gwybodaeth. Nododd y Pwyllgor y cynnydd sy'n cael ei wneud o ran cryfhau a chodi proffil seiberddiogelwch o fewn AaGIC. Roedd y Pwyllgor yn falch o'r cynnydd cyffredinol gyda'r Cynllun Gwaith Llywodraethu Gwybodaeth a oedd wedi'i ddiweddarau i adlewyrchu'r 10 Cam at Atebolrwydd.

Ystyriodd y Pwyllgor yr Adolygiad **Blynyddol o'r Rheolau Sefydlog** a:

- nodi'r diwygiadau i Reolau Sefydlog AaGIC yn 2020;
- cefnogi ac argymhell i'r Bwrdd i'w gymeradwyo, y diwygiadau pellach i Reolau Sefydlog AaGIC fel y nodir isod:
  - mae'r dyddiad cau ar gyfer cynnal y Cyfarfod Cyffredinol Blynyddol yn dychwelyd i 30 Medi ar gyfer pob blwyddyn;
  - mae'r Cynllun Dirprwyo wedi'i ddiwygio i adlewyrchu penodiad a chyfrifoldebau'r Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol a'r Cyfarwyddwr Digidol;
  - i adlewyrchu'r teitl cywir ar gyfer rôl y Cyfarwyddwr Cyllid;
  - bydd y terfyn ariannol dirprwyedig ar gyfer y Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol a'r Cyfarwyddwr Digidol yn £50,000 ar gyfer Contractau nad ydynt yn Gontractau Addysg a Hyfforddiant.
- argymhell y fersiwn ddiwygiedig o Reolau Sefydlog AaGIC i'w cymeradwyo gan y Bwrdd (eitem 4.5 ar wahân ar agenda'r Bwrdd).

Ystyriodd y Pwyllgor y **Cynllun Cyfrifon Blynyddol** ar gyfer 2020/21 a ddarparodd y cynllun cau cyfrifon arfaethedig ar gyfer blwyddyn ariannol 2020/21. Roedd nifer o faterion ariannol a thechnegol allweddol a allai effeithio ar gau'r cyfrifon yn cael sylw er mwyn dod i benderfyniad. Tynnwyd sylw at y ffaith y gallai fod angen symud y dyddiadau a bennwyd i'r Pwyllgor dderbyn y cyfrifon terfynol ar 26 Mai 2021, a bod y Bwrdd wedi llofnodi'r cyfrifon terfynol ar 27 Mai 2021 i ddarparu ar gyfer y cyfnod archwilio estynedig arfaethedig a'r dyddiad cyflwyno erbyn canol dydd ddydd Gwener, 11 Mehefin 2021.

**Adroddiad Cydymffurfio** â Chaffael - Cafodd y Pwyllgor trosolwg o'r gweithgarwch caffael a gynhaliwyd yn ystod y cyfnod 1 Hydref 2020 - 31 Rhagfyr 2020 ac yn unol â'r cyfeirnod 1.2 (Atodlen 2.1.2 Cod Caffael a Chontractau ar gyfer Gwaith Adeiladu a Pheirianeg) o'r Cyfarwyddiadau Ariannol Sefydlog. Tynnwyd sylw'r Pwyllgor at nifer o feysydd gweithgarwch caffael. Fodd bynnag, nid oedd unrhyw oblygiadau ariannol yn deillio o'r gweithgarwch caffael ar gyfer y cyfnod adrodd ac nid oedd unrhyw feysydd yn peri pryder.

Adolygodd y Pwyllgor y Gofrestr **Risg Gorfforaethol** a nododd y sefyllfa mewn perthynas â'r 12 risg a aseswyd. Nododd y Pwyllgor y wybodaeth ddiweddaraf mewn perthynas â'r ddau risg statws 'coch' a'r Risg newydd 19. Cymeradwyodd y Pwyllgor gyfuno Risg 1 ac 16 yn un risg 16 gyda Risg 1 yn cael ei dileu a chael gwared ar ddau risg statws 'gwyrdd'.

Ystyriodd y Pwyllgor y **Traciwr Argymhellion Archwilio** ac er ei fod yn fodlon â'r sefyllfa gyffredinol, nododd ei bod yn hen bryd cael nifer o'r argymhellion o ganlyniad i effaith COVID-19 a'r oedi wrth recriwtio'r ddwy swydd Cyfarwyddwr newydd. Dechreuodd y Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol ym mis Medi 2020 ac roedd cynnydd da yn cael ei wneud o ran datblygu'r Fframwaith Perfformiad a'r Dangosfwrdd.

Derbyniodd a nododd y Pwyllgor ei **Flaenraglen Waith** ar gyfer 2021/22.

**Risgiau a materion allweddol/materion sy'n peri pryder y mae angen i'r Bwrdd fod yn ymwybodol ohonynt:**

AMHERTHNASOL

**Argymhellion i'w hystyried gan y Bwrdd**

Mae'r Pwyllgor yn argymhell y dylai'r Bwrdd:

- Nodi'r diwygiadau i Reolau Sefydlog AaGIC yn 2020;
- Cymeradwyo'r diwygiadau pellach i Reolau Sefydlog AaGIC fel y nodir isod:
  - mae'r dyddiad cau ar gyfer cynnal y Cyfarfod Cyffredinol Blynyddol yn dychwelyd i 30 Medi ar gyfer pob blwyddyn;
  - mae'r Cynllun Dirprwyo wedi'i ddiwygio i adlewyrchu penodiad a chyfrifoldebau'r Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol a'r Cyfarwyddwr Digidol;
  - i adlewyrchu'r teitl cywir ar gyfer rôl y Cyfarwyddwr Cyllid;
  - bydd y terfyn ariannol dirprwyedig ar gyfer y Cyfarwyddwr Cynllunio, Perfformiad a Gwasanaethau Corfforaethol a'r Cyfarwyddwr Digidol yn £50,000 ar gyfer Contractau nad ydynt yn Gontractau Addysg a Hyfforddiant.
- **Cymeradwyo'r** fersiwn ddiwygiedig o Reolau Sefydlog AaGIC (eitem 4.5 ar wahân ar agenda'r Bwrdd).

<b>Camau dirprwyedig gan y Pwyllgor</b>
AMHERTHNASOL
<b>Y prif ffynonellau gwybodaeth a dderbyniwyd</b>
<ul style="list-style-type: none"> <li>• <b>Memorandwm Cyd-ddealltwriaeth (MOU) a Chytundeb Rhannu Gwybodaeth (ISA) gyda'r Cyngor Fferylliaeth Cyffredinol</b></li> <li>• Adroddiad Cynnydd Gwrth Dwyll</li> <li>• Archwilio Cymru: <ul style="list-style-type: none"> <li>○ Adroddiad Archwilio Blynyddol 2020</li> <li>○ Cynllun Blynyddol Dangosol 2021</li> </ul> </li> <li>• Archwilio Mewnol: <ul style="list-style-type: none"> <li>○ Adroddiad Cynnydd</li> <li>○ Adroddiad Archwilio Mewnol y Broses Adolygu Datblygiad Personol</li> <li>○ Adroddiad Archwilio Mewnol Systemau Ariannol</li> <li>○ Adroddiad Cryno COVID-19 Cymru Gyfan</li> </ul> </li> <li>• Adroddiad Llywodraethu Gwybodaeth a Rheoli Gwybodaeth</li> <li>• Adroddiad Cydymffurfio â Chaffael</li> <li>• Adolygiad Blynyddol o'r Rheolau Sefydlog</li> <li>• Cynllun Cyfrifon Blynyddol 2020/21</li> <li>• Cofrestr Risg Gorfforaethol</li> <li>• <b>Traciwr argymhellion archwilio</b></li> <li>• <b>Blaenraglen Waith</b></li> </ul>
<b>Uchafbwyntiau is-grwpiau sy'n adrodd i'r pwyllgor hwn</b>
AMHERTHNASOL
<b>Materion a gyfeiriwyd at Bwyllgorau eraill</b>
Ni nodwyd unrhyw un.



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

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

<b>Dyddiad y Cyfarfod</b>	<b>28 Ionawr 2021</b>	<b>Eitem agenda</b>	<b>4.7</b>
<b>Teitl yr Adroddiad</b>	<b>Materion yr Adroddwyd amdanynt yn y Pwyllgor</b>		
<b>Awdur yr Adroddiad</b>	Kay Barrow, Rheolwr Llywodraethu Corfforaethol		
<b>Noddwr yr Adroddiad</b>	Dafydd Bebb, Ysgrifennydd y Bwrdd		
<b>A gyflwynir gan</b>	Dafydd Bebb, Ysgrifennydd y Bwrdd		
<b>Rhyddid Gwybodaeth</b>	Agored		
<b>Diben yr Adroddiad</b>	Nodi'r materion allweddol a drafodwyd yng Nghyfarfod Pwyllgor Mewnol y Bwrdd a gynhaliwyd ar 26 Medi 2020.		
<b>Materion Allweddol</b>	Yn unol â Rheolau Sefydlog, mae'n ofynnol i AaGIC adrodd ar unrhyw benderfyniadau a wneir mewn sesiwn breifat i gyfarfod cyhoeddus nesaf y Bwrdd. Mae'r adroddiad yn nodi'r penderfyniadau a wnaed gan Bwyllgor Mewnol y Bwrdd ar 26 Medi 2020.		
<b>Camau Penodol sy'n Ofynnol</b> ( <i>un ✓ yn</i> unig os gwelwch yn dda)	<b>Gwybodaeth</b>	<b>Trafodaeth</b>	<b>Sicrwydd</b>
	✓		
<b>Argymhellion</b>	Gofynnir i'r aelodau: <ul style="list-style-type: none"> <li><b>Sylwi ar yr adroddiad er gwybodaeth.</b></li> </ul>		

**PENDERFYNIADAU A WNAED YN YSTOD CYFARFOD PWYLLGOR MEWNOL Y  
BWRDD  
A GYNHALIWDYD AR 26 TACHWEDD 2020**

## **1. CYFLWYNIAD**

Pwrpas yr adroddiad yw adrodd ar eitemau a ystyriwyd gan gyfarfod Pwyllgor Mewnol y Bwrdd a gynhaliwyd ar 26 Medi 2020.

## **2. CEFNDIR**

Bydd y Bwrdd yn cynnal cymaint o'i fusnes ffurfiol mor gyhoeddus â phosibl. Efallai y bydd amgylchiadau lle na fyddai hi yn fudd i'r cyhoedd i drafod mater yn gyhoeddus. Mewn achosion o'r fath, rhaid i'r Cadeirydd (a gynghorir gan Ysgrifennydd y Bwrdd lle bo hynny'n briodol) drefnu'r materion hyn yn unol â hynny a mynnu bod unrhyw arsylwr yn tynnu'n ôl o'r cyfarfod. Wrth wneud hynny, bydd y Bwrdd yn datrys:

*“Bod cynrychiolwyr y 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, a byddai cyhoeddusrwydd yn niweidiol i fudd y cyhoedd”*

Yn yr amgylchiadau hyn, pan nad yw'r Bwrdd yn cyfarfod mewn sesiwn gyhoeddus, bydd yn gweithredu mewn sesiwn breifat, gan adrodd yn ffurfiol am unrhyw benderfyniadau a wneir yng nghyfarfod nesaf y Bwrdd mewn sesiwn gyhoeddus.

## **3. MATERION LLYWODRAETHU A RISG**

Trafodwyd yr eitemau canlynol yng nghyfarfod Pwyllgor Mewnol y Bwrdd AaGIC ar 26 Medi 2020:

- **Adroddiad y Cadeirydd** - Derbyniodd a nododd y Bwrdd ddiweddariad ar lafar gan y Cadeirydd.
- **Adroddiad y Prif Weithredwr** - Derbyniodd a nododd y Bwrdd ddiweddariad ar lafar gan y Prif Weithredwr.
- **Adroddiad y Cyfarwyddwr Cyllid** - Derbyniodd a nododd y Bwrdd ddiweddariad ar lafar gan y Cyfarwyddwr Cyllid.
- **Adroddiad Materion Allweddol gan Gadeirydd y Pwyllgor Addysg, Comisiynu ac Ansawdd** - Derbyniodd a nododd y Bwrdd adroddiad mater allweddol y Cadeirydd ar gyfer y Pwyllgor a gynhaliwyd ar 8 Hydref 2020.
- **Adroddiad Materion Allweddol gan Gadeirydd y Pwyllgor Archwilio a Sicrwydd** - Derbyniodd a nododd y Bwrdd adroddiad mater allweddol y Cadeirydd ar gyfer y Pwyllgor a gynhaliwyd ar 20 Hydref 2020.

## **4. GOBLYGIADAU ARIANNOL**

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

## **5. ARGYMHELLIAD**

Gofynnir i'r aelodau **nodi'r** adroddiad er gwybodaeth.

<b>Llywodraethu a Sicrwydd</b>			
<b>Cyswllt â nodau strategol Cynllun Tymor Canolog Integredig</b> (os gwelwch yn ddau)	<b>Nod Strategol 1:</b> Arwain y gwaith o gynllunio, datblygu a lles gweithlu cymwys, cynaliadwy a hyblyg i gefnogi'r gwaith o gyflawni 'Cymru Iachach'	<b>Nod Strategol 2:</b> Gwella ansawdd a hygyrchedd addysg a hyfforddiant i'r holl staff gofal iechyd gan sicrhau ei fod yn diwallu anghenion y dyfodol	<b>Nod Strategol 3:</b> Gweithio gyda phartneriaid i ddylanwadu ar newid diwylliannol o fewn GIG Cymru drwy feithrin gallu tosturiol ac arweinyddiaeth gyfunol ar bob lefel
	✓	✓	✓
	<b>Nod Strategol 4:</b> Datblygu'r gweithlu i gefnogi'r gwaith o ddarparu diogelwch ac ansawdd	<b>Nod Strategol 5:</b> Bod yn gyflogwr enghreifftiol ac yn lle gwych i weithio	<b>Nod Strategol 6:</b> I'w gydnabod fel partner, dylanwadwr ac arweinydd rhagorol
	✓	✓	✓
<b>Ansawdd, Diogelwch a Phrofiad y Claf</b>			
Mae sicrhau bod y Bwrdd a'i Bwyllgor 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.			
<b>Goblygiadau Ariannol</b>			
Nid oes unrhyw oblygiadau uniongyrchol o ran adnoddau yn gysylltiedig â'r adroddiad hwn. Fodd bynnag, byddai unrhyw oblygiadau adnoddau wedi cael eu nodi yn y ceisiadau gwreiddiol am gadarnhad.			
<b>Goblygiadau Cyfreithiol (gan gynnwys asesiad cydraddoldeb ac amrywiaeth)</b>			
Nid oes unrhyw oblygiadau cyfreithiol yn yr adroddiad hwn. Fodd bynnag, bydd effaith benodol, lle bo hynny'n berthnasol, wedi'i hystyried mewn adroddiadau unigol y cyfeiriwyd atynt yn y diweddariad hwn.			
<b>Goblygiadau Staffio</b>			
Nid oes unrhyw oblygiadau uniongyrchol i'r gweithlu yn yr adroddiad hwn. Fodd bynnag, bydd effaith benodol, lle bo hynny'n berthnasol, wedi'i hystyried mewn adroddiadau unigol y cyfeiriwyd atynt yn y diweddariad hwn.			
<b>Goblygiadau Tymor Hir (gan gynnwys effaith Deddf Lles Cenedlaethau'r Dyfodol (Cymru) 2015)</b>			
Nid oes unrhyw oblygiadau uniongyrchol i'r Ddeddf. Fodd bynnag, bydd effaith benodol, lle bo hynny'n berthnasol, wedi'i hystyried mewn adroddiadau unigol y cyfeiriwyd atynt yn y diweddariad hwn.			
<b>Hanes yr Adroddiad</b>	Darperir yr adroddiad hwn ym mhob cyfarfod o'r Bwrdd.		
<b>Atodiadau</b>	Dim.		



Fforwm Arweinyddiaeth Cydweithredol Iechyd GIG Cymru	Cyfeirnod Papur: <b>LF-2012-01</b> Cofnodion 29/07/20
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**GIG**  
CYMRU  
**NHS**  
WALES

Cydweithrediad  
Iechyd GIG Cymru  
NHS Wales Health  
Collaborative

# Fforwm Arweinyddiaeth Gydweithredol GIG Cymru *Cofnodion Cymeradwy o Gyfarfod a gynhaliwyd ar 29 Gorffennaf 2020*

**Awdur:** Mark Dickinson

**Fersiwn:** 1 (Cymeradwy)

**Aelodau'n  
bresennol**

Ann Lloyd (Cadeirydd), Cadeirydd, Bwrdd Iechyd Prifysgol Aneurin Bevan (AL)  
Maria Battle, Cadeirydd, Bwrdd Iechyd Prifysgol Hywel Dda (MB)  
Huw George, Dirprwy Brif Weithredwr, Iechyd Cyhoeddus Cymru (HG) (ar gyfer Tracey Cooper)  
Sharon Hopkins, Prif Weithredwr Dros Dro, Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg (SHo)  
Steve Ham, Prif Weithredwr, Ymddiriedolaeth GIG Felindre (SHa)  
Vivienne Harpwood, Cadeirydd, Bwrdd Iechyd Addysgu Lleol Powys (VH)  
Alex Howells, Prif Weithredwr, Addysg a Gwella Iechyd Cymru (AH)  
Chris Jones, Cadeirydd, Addysg a Gwella Iechyd Cymru (CJ)  
Jason Killens, Prif Weithredwr, Ymddiriedolaeth GIG Gwasanaethau Ambiwlans Cymru (JK)  
Tracy Myhill, Prif Weithredwr, Bwrdd Iechyd Prifysgol Bae Abertawe (TM)  
Judith Paget, Prif Weithredwr, Bwrdd Iechyd Prifysgol Aneurin Bevan (YH)  
Mark Polin, Cadeirydd, Bwrdd Iechyd Prifysgol Betsi Cadwaladr (AS)

<b>Dyddiad:</b> 05/08/20	<b>Fersiwn:</b> 1 (Cymeradwy)	<b>Tudalen:</b> 1 o 5
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Fforwm Arweinyddiaeth Cydweithredol Iechyd GIG Cymru	Cyfeirnod Papur: <b>LF-2012-01</b> Cofnodion 29/07/20
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	Emma Woollett, Cadeirydd Dros Dro, Bwrdd Iechyd Prifysgol Bae Abertawe (EW)
<b>Yn bresennol</b>	Mark Dickinson, Cydweithfa Iechyd GIG Cymru (MD) Rosemary Fletcher, Cyfarwyddwr, Cydweithfa Iechyd GIG Cymru (RF)
<b>Ymddiheuriadau</b>	Tracey Cooper, Prif Weithredwr, Iechyd Cyhoeddus Cymru Charles Janczewski, Cadeirydd Dros Dro, Bwrdd Iechyd Prifysgol Caerdydd a'r Fro Marcus Longley, Cadeirydd, Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg Donna Mead, Cadeirydd, Ymddiriedolaeth GIG Felindre Steve Moore, Prif Weithredwr, Bwrdd Iechyd Prifysgol Hywel Dda Jan Williams, Cadeirydd, Iechyd Cyhoeddus Cymru

<b>Croeso a chyflwyniad</b>	<b>Gweithredu</b>
Croesawodd AL ei gydweithwyr i'r cyfarfod a nododd ymddiheuriadau am absenoldeb.	

<b>Cymeradwyo cofnodion y cyfarfod blaenorol (LF-2001-01)</b>	<b>Gweithredu</b>
<b>Cymeradwywyd</b> cofnodion y cyfarfod a gynhaliwyd ar 15 Ionawr 2020 fel cofnod cywir.  Bydd y cofnodion yn cael eu hanfon at ysgrifenyddion bwrdd 11 sefydliad GIG Cymru i'w nodi mewn cyfarfodydd bwrdd.	<b>MD</b>

<b>Materion yn codi o funudau (LF-2001-01)</b>	<b>Gweithredu</b>
<p><i>River House</i> Adroddodd RF fod staff Cydweithredol yn gweithio gartref hyd y gellir rhagweld, gyda staff sgerbwd yn River House. O ganlyniad, nid oes unrhyw bwysau ar lety swyddfa ar hyn o bryd a bydd y sefyllfa'n cael ei ailasesu maes o law.</p> <p><i>Rhaglen Trawma Mawr</i> Cadarnhaodd RF fod y broses sicrwydd wedi'i chwblhau a bod Cydbwyllgor WHSSC wedi cymeradwyo'r argymhelliad i Rwydwaith Trawma De Cymru 'fynd yn fyw' o 14 Medi 2020.</p> <p><i>Cyllid ar gyfer Grwpiau Gweithredu</i> Nododd RF fod cais ffurfiol wedi'i dderbyn gan Lywodraeth Cymru i'r Gydweithfa reoli'r cyllid hwn. Mae hyn wedi'i gymeradwyo gan y Grŵp Gweithredol Cydweithredol, yn amodol ar ddefnyddio dull cyfannol a bod trefniadau llywodraethu penodol yn cael eu rhoi ar waith.</p>	

<b>Dyddiad:</b> 05/08/20	<b>Fersiwn:</b> 1 (Cymeradwy)	<b>Tudalen:</b> 2 o 5
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Fforwm Arweinyddiaeth Cydweithredol Iechyd GIG Cymru	Cyfeirnod Papur: <b>LF-2012-01</b> Cofnodion 29/07/20
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<p><i>Prosiectau Gwybodeg</i></p> <p>Adroddodd RF fod gwaith ar batholeg a systemau gwybodaeth delweddu yn cael ei symud ymlaen yn unol ag adolygiadau Llywodraeth Cymru o bensaernïaeth a llywodraethu gwybodeg GIG Cymru</p> <p><i>Gwaith newydd wedi'i gomisiynu gan y Tîm Cydweithredol</i></p> <p>Adroddodd RF fod trefniadau ar gyfer rhaglen waith Gweithwyr Proffesiynol Perthynol i Iechyd (AHP) bellach yn cael eu cyflwyno gan AaGIC. Yn ogystal, mae cyfarfod wedi'i drefnu gydag Alex Howells a chydweithwyr AaGIC i drafod trosglwyddo'r rhaglen waith gwyddoniaeth gofal iechyd i AaGIC. Gofynnodd AL i'r drafodaeth hon hefyd gynnwys meysydd gwaith eraill gyda goblygiadau ar gyfer modelau gweithlu newydd.</p>	<p><b>RF / AH</b></p>
<p><b>Adroddiad Blynyddol Drafft Cydweithredol 2019/20 (LF-2007-02)</b></p>	<p><b>Gweithredu</b></p>
<p>Cyflwynodd RF gyflwyniad ar yr Adroddiad Blynyddol Drafft Cydweithredol, gan nodi y bydd gwaith pellach yn cael ei wneud, cyn ei gyhoeddi, gyda chefnogaeth tîm cyfathrebu Iechyd Cyhoeddus Cymru:</p> <div data-bbox="663 1162 724 1225" data-label="Image"> </div> <p>LF-2007 - Presentation v1.ppt</p> <p>Tynnodd RF sylw at yr astudiaethau achos a gynhwyswyd yn yr adroddiad.</p> <p>Gofynnodd CJ a oedd y Gydweithrediaeth wedi datblygu 'matrics ailosod', er mwyn cynyddu'r cyfle i newid ffyrdd o weithio yng nghyd-destunau COVID ac ôl-COVID. <b>Cytunodd</b> RF i ystyried hyn yng nghyd-destun y Cynllun Gwaith newydd.</p> <p>Wrth siarad yn rhinwedd ei swydd fel Cadeirydd WHSSC, mynegodd VH ei diolchgarwch i'r Gydweithredol am y gwaith a wnaed i gefnogi WHSSC, gan nodi Rhwydwaith Cancer Cymru a Rhwydwaith Mamolaeth a Newyddenedigol Cymru am ddiolch penodol. Ymatebodd RF fod y berthynas â WHSSC yn dangos sut y gellir cryfhau gwaith gyda'r system gyffredinol ymhellach.</p> <p>Cofnododd y Fforwm yn ffurfiol diolch i'r Tîm Cydweithredol am waith a wnaed yn 2019/20 ac i RF, fel Cyfarwyddwr, am</p>	<p><b>RF</b></p>

<b>Dyddiad:</b> 05/08/20	<b>Fersiwn:</b> 1 (Cymeradwy)	<b>Tudalen:</b> 3 o 5
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Fforwm Arweinyddiaeth Cydweithredol Iechyd GIG Cymru	Cyfeirnod Papur: <b>LF-2012-01</b> Cofnodion 29/07/20
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ei hyblygrwydd wrth ymateb i, a chwrdd â cheisiadau am feysydd gwaith ychwanegol ac arwyddocaol.	
<b>Cynllun Gwaith Amlinellol Cydweithredol 2020/21 (LF-2007-03)</b>	<b>Gweithredu</b>
<p>Cyflwynodd RF gyflwyniad ar Gynllun Gwaith Cydweithredol 2020/21 (sleidiau wedi'u cynnwys yn y cyflwyniad uchod), gan nodi'r rolau yr oedd y Gydweithrediaeth yn eu chwarae yng nghyd-destun COVID a'i effaith ar GIG Cymru.</p> <p>Nododd AS fod y ffrydiau gwaith traws-gydweithredol a ddangosir ar dudalen 4 yr adroddiad yn arbennig o arwyddocaol, ond ei bod yn anodd gweld sut roedd y gwaith hwn wedi effeithio ar gynlluniau'r timau unigol. Ymatebodd RF fod y ffrydiau gwaith hyn yn newydd, gan adlewyrchu trefniadau mewnol, a bod y Gydweithredol yn anelu at gynyddu synergeddau i'r eithaf, ond y gallai hyn gael ei wneud yn fwy eglur.</p> <p>Gofynnodd EW a oedd cwrdd y cynllun yn realistig, o ystyried pwysau COVID a bygythiad ail don. Gofynnodd EW hefyd a allai'r Gydweithrediaeth chwarae mwy o ran wrth gefnogi byrddau iechyd ar waith i fynd i'r afael ag ôl-groniadau mewn meysydd fel llawfeddygaeth arferol. Cytunodd MB fod mwy o restrau aros yn flaenoriaeth i fynd i'r afael â nhw ar y cyd ac y gallai fod adlach gan y cyhoedd.</p> <p>Ymatebodd RF fod angen bod yn hyblyg mewn ymateb i ofynion COVID a bod y Gydweithfa yn hapus i ystyried beth arall y gellid ei wneud i gefnogi gwaith ar lawdriniaeth arferol a diagnosteg. <b>Cytunwyd y</b> byddai AL, JP a RF yn cysylltu â datblygu papur byr yn gwneud argymhellion penodol am waith yn y maes hwn.</p> <p>Nododd YH fod angen ystyried y Cynllun Gwaith yng ngoleuni'r newid i Weithrediaeth GIG Cymru ac y bydd hyn yn llawn heriau. Mae ceisiadau uniongyrchol gan LIC i'r Gydweithfa i wneud gwaith eisoes yn achosi rhywfaint o ddryswch o ran llywodraethu ac atebolrwydd. Cytunodd YH i godi'r mater hwn mewn trafodaeth â chydweithwyr LIC a bydd yn cylchredeg deunydd perthnasol.</p> <p>Pwysleisiodd CJ bwysigrwydd 'ailosod' GIG Cymru, gyda mwy o ymgynghori dros y ffôn a fideo a dulliau newydd o ymdrin â chleifion allanol. Mae cyfle i ail-ddylunio 'siopau</p>	<p><b>AL / JP / RF</b></p> <p><b>JP</b></p> <p><b>MB</b></p>

<b>Dyddiad:</b> 05/08/20	<b>Fersiwn:</b> 1 (Cymeradwy)	<b>Tudalen:</b> 4 o 5
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Fforwm Arweinyddiaeth Cydweithredol Iechyd GIG Cymru	Cyfeirnod Papur: <b>LF-2012-01</b> Cofnodion 29/07/20
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<p>dros dro' i leihau cysylltiadau. Cytunodd MB i gylchredeg papur gan Hywel Dda sy'n mynd i'r afael â'r agenda hwn.</p> <p>Gofynnodd AL, o ystyried cwmphas y Cynllun Gwaith, a oedd digon o gapasiti yn y Gydweithfa. Dywedodd RF fod adolygiad o'r strwythur rheoli wedi'i gynllunio.</p> <p>Diolchodd AL am y gwaith enfawr a nodwyd yn y cynllun a fydd yn gwneud gwahaniaeth i ganlyniadau i unigolion.</p>	
<b>Dyddiad y cyfarfod nesaf</b>	
<b>Nodwyd</b> y bwriedir i'r Fforwm gwrdd nesaf am 9am ar 13 Hydref 2020	