GIG CYMRU NHS WALES | Ymddiriedolaeth GIG Prifysgol Felindre | Velindre University NHS Trust

nVCC Project Scrutiny Sub-Committee
<u>Public Session</u>

MINUTES OF THE MEETING HELD
23rd April 2026 at 10:00-12:00

Members Present:

Hilary Jones (HJ)	Independent Member (Chair)
Gareth Jones (GJ)	Independent Member

In attendance:

Carl James	Chief Executive Officer (Interim)
Anne Carey (AC)	Chief Operating Officer
Non Gwilym (NG)	Director of Corporate Governance (Interim)
Lauren Fear (LF)	Director of Place, Portfolio and Partnerships
Sarah Jenkins (SJ)	Executive Director of People and OD (Interim)
Vicki Oxley (VO)	Director of Strategy, Planning & Performance (Interim)
Mark Trumper (MT)	Senior Responsible Owner
Matthew Bunce (MB)	Executive Director of Finance
Kate Hannam (KH)	Divisional Director, VCS
Matthew Jenkins (MJ)	Welsh Government Representative
Tessa Harper-Hughes	Secretariat

Apologies:

Sara Moseley	Trust Chair
Jacinta Abraham	Executive Medical Director
Gillian Knight	Executive Director of Nursing, Allied Health Professionals and Health Science (Interim)
John Union	Independent Member
Kathy Ikin	Deputy Director, Transformation, Planning and Performance
Carl Taylor	Chief Digital Officer
David Powell	Project Director, TCS
Rachel Hennessy	Head of Planning, Performance, and Support Service/ Deputy Director, VCS
Susan Thomas	Deputy Director of OD and Workforce

1.0	**PRELIMINARY MATTERS**	
1.1	**Welcome & Introductions** *Hilary Jones, Committee Chair and Independent Member* The Chair welcomed all attendees to the meeting.	
1.2	**Apologies for Absence** *Hilary Jones, Committee Chair and Independent Member* Apologies were noted as detailed above.	

1.3	**In Attendance** *Hilary Jones, Committee Chai and Independent Member* No additional attendees noted	
1.4	**Declarations of Interest** *Hilary Jones, Committee Chair and Independent Member* The Chair invited declarations of interest. No declarations were made beyond the standing declarations recorded in the Trust's Register of Interests.	
2.0	**PROJECT DELIVERY**	
2.1	nVCC Project Highlight Report *Led by Mark Trumper, nVCC SRO* **Key points:** • It was reported that the overall project status remained **AMBER**, with the trend indicator unchanged from the previous reporting period. The Sub-Committee noted that trend arrows had now been completed across all graphs, as previously requested, enabling clearer visibility of movement and variance. • The Sub-Committee was advised that the report covered the period to the end of February, and that Programme Revision 3 had been received in mid-March. It was confirmed that due diligence had been undertaken on the revised programme and that the position remained consistent with the previous update. The Sub-Committee was advised that: • Programme Revision 3 was considered achievable, including delivery of Phase 2 practical completion on 16 March. • Delivery would require accelerated performance from the contractor and supply chain when compared to historic delivery. • Since publication of the revised programme, there had been no transgression of the critical path. • Some activities were taking longer due to complexity; however, these were not on the critical path. • Members were advised that a clearer position would be reported verbally at the end of May, allowing sufficient time to assess any emerging material issues. • In relation to quality, it was reported that the reviewable design data process was nearing completion, with final finishes and materials described as being of a high standard and compliant with requirements. Members were assured that quality would continue to be actively managed to ensure that installations met expected standards.	

	The Sub-Committee noted that: • A small number of quality concerns identified by the Independent Tester were being addressed. • Health and safety performance had improved, with the Independent Tester confirming that previously identified areas for improvement having been rectified. • Observation levels remained high, providing assurance that improved performance reflected genuine progress. The Sub-Committee discussed staff engagement, noting positively that: • Monthly staff briefing sessions were routinely attracting in excess of 100 staff members. • Engagement metrics had been strengthened to provide more meaningful insight into participation levels. • High levels of engagement had also been achieved through digital channels, with significant interaction recorded. The Sub-Committee welcomed the reported recovery within the milestone plan and sought clarification regarding specific programme elements, including aseptics commissioning. It was clarified that: • The issue represented an extension to the originally envisaged commissioning period, reflecting changes in equipment specification. This did not constitute a delay to the overall programme. • One outstanding matter relating to revenue treatment was being resolved, with engagement ongoing with Welsh Government. • The Phase 2 completion milestone and OQ at rest remained unchanged. The Sub-Committee also discussed the importance of wider system engagement, recognising the nVCC as a regional asset and the need to consider how engagement with partner health boards and regional structures could be strengthened. The Sub-Committee: • **NOTED** the nVCC Project Highlight Report. •	
2.2	**Communication and Engagement Update Report** *Led by Non Gwilym, Director of Corporate Governance (Interim)* **Key points:** It was noted that the report reflected activities undertaken to date, with members advised that the focus following the reporting period had shifted towards refreshing the communications and engagement strategy.	

<table>
<tr><td></td><td>The Sub-Committee were informed that:
Work was ongoing to review and refresh the strategy to ensure alignment with the Trust's wider organisational agenda.
Engagement activity was now being taken forward in partnership with SJ and colleagues to ensure improved coordination and strategic focus.
The refreshed approach would be brought forward for formal consideration at a future meeting.
The Sub-Committee welcomed the update and acknowledged the need to refresh the strategic framework as the project progressed towards the next phase of delivery.

The Committee agreed that the refreshed communications and engagement strategy should include:
Staff engagement arrangements.
Consideration of wider system and regional engagement, recognising the nVCC as a regional asset.
Clear alignment with readiness and organisational priorities.
ACTION:
A refreshed communications and engagement strategy, including staff and wider system engagement, to be brought back to the Sub-Committee.
The Sub-Committee:
NOTED the Communication and Engagement update report.</td><td>NG</td></tr>
<tr><td>3.0</td><td>STRATEGY</td><td></td></tr>
<tr><td>3.1</td><td>nVCC Project Arts Strategy
Led by Lauren Fear, Director of Place, Portfolio and Partnerships

Key points:
The Sub-Committee were advised that overall responsibility for Arts across the Trust rested with the Trust, with delivery split into two linked areas:
the nVCC Project Arts programme, which was intrinsically linked to the Project Agreement and Project Co obligations, and
the wider Arts and Health strategy across the Trust.
It was clarified that:
The Multi-Disciplinary Team (MDT) referenced within the strategy was chaired by the Trust's Arts Coordinator, with coordination of contractual obligations overseen through the project team.
Funding for the Arts Strategy had been approved by the Charitable Funds Committee.
The Sub-Committee was being updated to maintain visibility and assurance of progress.
Members sought assurance that the strategy met the original contractual</td><td></td></tr>
</table>

brief, including compliance with Project Agreement obligations.
It was confirmed that:

- Contractual and commercial responsibilities relating to arts installations were being actively managed by the project commercial team.
- Decisions on artistic content were taken through a broader, inclusive process aligned with the Trust-wide arts strategy.

The Sub-Committee discussed patient, public and wider stakeholder engagement, noting that:

- Previous discussions had taken place regarding broadening engagement, including patient and carer representation.
- A lead artist had been appointed, and the project was now moving into the engagement phase for individual commissions.
- Engagement with patients, carers and wider stakeholders would be undertaken as part of the commissioning process.

In relation to charitable funding, members highlighted the scale of the contribution and discussed whether greater visibility or engagement with the Charity might be appropriate.
It was acknowledged that:

- The strategy itself had been approved through the appropriate governance processes.
- Individual commissions would be delivered in line with the agreed strategy.
- Further discussion may be required to ensure that charity expectations regarding visibility and assurance were appropriately managed.

Members discussed the scope and content of the strategy, including:

- Clarification that the strategy had been developed prior to appointment of the lead artist, and that the lead artist's role was to ensure coherence across commissioned works rather than to deliver their own work.
- Assurance that safety remained the overriding criterion for all installations and that all proposals would be tested against this requirement.

The Sub-Committee considered future-proofing and flexibility, including the potential role of digital art. Members noted the value of digital installations in supporting changing content, engaging younger audiences and enabling ongoing community involvement beyond the initial project phase.

The Sub-Committee sought specific assurance on:

- Ownership and intellectual property, confirming that ownership of artworks would transfer to the Trust once commissioned and that there would be no residual intellectual property or moral rights restricting future use.
- Maintenance responsibilities, with confirmation that maintenance costs had been incorporated into soft FM arrangements agreed at

	financial close, and that this was a key factor in limiting late changes to scope. A point of detail was raised regarding the need to ensure the strategy appropriately reflected public contracts requirements, and it was agreed that this should be addressed. **ACTION**: The Project Arts Strategy document to be updated to reflect public contracts considerations. The Sub-Committee: • **NOTED** the nVCC Project Arts Strategy	**MA/LF**
4.0	**CONSENT ITEMS**	
4.1	**CONSENT FOR APPROVAL / ENDORSEMENT**	
	No items	
4.2	**CONSENT FOR INFORMATION / NOTING**	
	No items	
5.0	**STANDARD BUSINESS**	
5.1	**Minutes of the Sub-Committee Meeting held on 19th March 2026** *Hilary Jones, Committee Chair and Independent Member* • The Sub-Committee **APPROVED** the minutes of the meeting held on 19th March 2026.	
5.2	**Action Log** *Hilary Jones, Committee Chair and Independent Member* **Action 210:** to remain open until May meeting **Action 211:** to remain open until May meeting **Action 212:** to close **Action 213:** to close The Sub-Committee: • **APPROVED** the updated Action Log and the updates provided.	
6.0	**ANY OTHER BUSINESS**	
	There was no other business raised.	
7.0	**DATE & TIME OF NEXT MEETING**	
	The next meeting will be held on **Thursday, 14th May 2026** at 10:00-12:00 at Trust HQ and via MS Teams.	