

**Transforming Cancer Services (TCS)  
 Programme Scrutiny Sub-Committee  
Public Session**

**MINUTES OF THE MEETING HELD  
 20<sup>th</sup> March 2025 at 13:30-14:30  
 via Teams**

**Members Present:**

Hilary Jones (HJ)	Independent Member (Chair)
Professor Donna Mead (DM)	Trust Chair
Stephen Harries (SH)	Vice Chair
Gareth Jones (GJ)	Independent Member

**In attendance:**

Carl James (CJ)	Executive Director of Strategic Transformation, Planning & Digital
Lauren Fear (LF)	Interim Director of Transformation
Anne Carey (AC)	Interim Chief Operating Officer
Mark Trumper (MT)	Senior Responsible Owner
Matthew Bunce (MB)	Executive Director of Finance
Mark Ash (MA)	Assistant Project Director, TCS
Non Gwilym (NG)	Acting Director of Corporate Governance
David Powell (DP)	nVCC Project Director
Gavin Bryce (GB)	TCS Associate Director of Programme
Kay Barrow	Corporate Governance Manager
Christine Sion	Secretariat / Business Support Officer
Sam Pike	nVCC Project Support Assistant (Intern)
Jordan Sinnott	nVCC Project Support Assistant (Intern)
Andre Hague	Director of Service Transformation

**Apologies**

David Donegan (DD)	Chief Executive
Dr Jacinta Abraham (JA)	Executive Medical Director
Nicola Williams (NW)	Executive Director of Nursing, AHP's & Medical Scientists
Sarah Morley (SM)	Executive Director of OD & Workforce
Anne Carey (AC)	Interim Chief Operating Officer
Matthew Jenkins (MJ)	Welsh Government Representative
Rachel Hennessy (RH)	Head of Planning, Performance and Operational Services

1.0	STANDARD BUSINESS	ACTION
1.1	<b>Welcome &amp; Introductions</b> <i>Led by Hilary Jones, Interim Chair, and Independent Member</i>  HJ welcomed all attendees to the meeting and thanked colleagues for their time and continued engagement.	
1.2	<b>Apologies for Absence</b> <i>Led by Hilary Jones, Interim Chair, and Independent Member</i>  Apologies were noted as above.	

<p><b>1.3</b></p>	<p><b>Declarations of Interest</b>  <i>Led by Hilary Jones, Interim Chair, and Independent Member</i></p> <p>No declarations of interest were received.</p>	
<p><b>1.4</b></p>	<p><b>Minutes of Previous Sub-Committee Meetings held on 20<sup>th</sup> February 2025</b>  <i>Led by Hilary Jones, Interim Chair, and Independent Member</i></p> <p>The TCS Programme Scrutiny Sub-Committee <b>APPROVED</b> the minutes of the meeting held on 20<sup>th</sup> February 2025 as an accurate record.</p>	<p><b>Secretariat</b></p>
<p><b>1.5</b></p>	<p><b>Action Log</b>  <i>Led by Hilary Jones, Interim Chair, and Independent Member</i></p> <p>The Committee received the Action Log, and the following updates were provided:</p> <ul style="list-style-type: none"> <li>• <b>Action 164</b> – The Committee noted that this action was reviewed and closed at the previous meeting, on the basis that workforce detail will be included in quarterly reporting going forward. The Committee AGREED to CLOSE the action.</li> <li>• <b>Action 157b</b> – It was noted that the Interdependencies Report is still in development and has evolved in format. GJ recommended that the review of its effectiveness be deferred to the next business cycle (April 2025). The Committee AGREED to keep the action OPEN.</li> <li>• <b>Action 162</b> – The population health insights work, commissioned by the Life Sciences Hub, has been completed and incorporated into the IMTP. The action was <b>CLOSED</b>.</li> <li>• <b>Action 164b</b> – The Committee reiterated the importance of more frequent workforce reporting. CJ agreed to follow up with AC to confirm a definitive target date. An out-of-committee update will be provided. The action remains <b>OPEN</b>.</li> <li>• <b>Action 166</b> – The list of community events is still pending confirmation, as responses regarding attendance at shows are awaited. NG confirmed that an update would be provided in next month's report. The action remains <b>OPEN</b>.</li> <li>• <b>Actions 167 and 176 (TRaMS)</b> – the Committee agreed to escalate TRaMS to the Chief Executive due to the critical impact on service readiness. A deep dive is required to identify risks, operational impacts, and contingency requirements. This will align with the action captured at the Strategic Development Committee. The action remains <b>OPEN</b>. The matter will be escalated to the Chief Executive and aligned with the action captured through the Strategic Development Committee (SDC), to ensure appropriate organisational and external escalation routes are identified.</li> </ul> <p><b>Extended Discussion on TRaMS:</b>          The Committee held an extended discussion on the TRaMS programme, which features prominently across several reports and is considered a</p>	

	<p>significant unresolved risk. Members referenced the earlier SDC discussion, where it was agreed, a deep dive is required to fully understand the current position and prepare for appropriate escalation across the system, including with Shared Services.</p> <p>It was noted that the TRaMS go-live date has now slipped to <b>January 2027</b>, raising concern given its alignment with the anticipated opening of the nVCC. DM emphasised the critical impact of any further delay, especially the risk of the Trust being unable to provide aseptic medicines on site. She highlighted that the issue has now moved beyond the Trust's direct control and requires urgent strategic grip.</p> <p>SH stated that while escalation is important, the priority for the Sub-Committee is to understand the Trust's operational exposure if TRaMS is delayed or fails. HJ and SH also noted that existing reports lack key dates and do not adequately explain how these risks will be assessed or mitigated. It was confirmed that the action sits with NW and RH. The Committee AGREED to escalate the issue to the Chief Executive.</p> <ul style="list-style-type: none"> <li>• <b>Action 175</b> – The Committee was advised that the review of the Terms of Reference (ToR) and cycle of business is underway and will be aligned with the TCS Programme Closure Report. A full proposal will be presented at the next meeting. In response to the Chair's query, it was confirmed that this will also form part of a wider review of sub-committee ToRs via the Chairs' Forum. The action remains OPEN.</li> </ul> <p><b>Action – Business Case Tracking:</b>          The Chair requested that all deliverables and outcomes agreed within approved nVCC business cases be formally tracked through the Sub-Committee to ensure visibility and accountability. MT agreed to bring forward a proposal on how this can be implemented. Action to be added to the Action Log.</p> <p>The TCS Programme Scrutiny Sub-Committee NOTED the Action Log, and the updates provided, and emphasised the importance of timely resolution, improved ownership, and forward planning to address outstanding actions ahead of the next meeting.</p>	
<p><b>2.0</b></p>	<p><b>PROJECT GOVERNANCE</b></p>	
<p><b>2.1</b></p>	<p><b>nVCC Project Highlight Report</b>          Led by David Powell, Project Director</p> <p>DP presented the Highlight Report in its new Power BI format, noting this was the first time the revised structure had been submitted to the Sub-Committee.</p> <ul style="list-style-type: none"> <li>• The report now separates Plan Performance between the Authority and the overall project, with each component—plan performance, risk, and change control—assigned an individual RAG rating. The overall project status was reported as <b>Amber</b>, with the completion of the</li> </ul>	



	<p>Reviewable Design Data (RDD) process identified as the key issue on the critical path. A revised programme has been received from Project Co., and the Authority continues to maintain a 100% return rate on design submissions.</p> <ul style="list-style-type: none"> <li>• In relation to health and safety, DP confirmed that no Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDORs) or serious incidents had been reported during the period. A high volume of safety observations was recorded, which was considered a positive indicator of proactive safety culture. It was noted that reporting on Trust-led works, such as the HV intake room, would increase as activity on site progressed.</li> <li>• Members welcomed the overall structure of the revised report but raised concerns regarding the balance of visual and narrative content. The Committee emphasised the importance of incorporating additional narrative to support interpretation of data, provide clearer assurance, and enhance accessibility for public audiences. It was <b>AGREED</b> that the project team would work with Committee members to review and refine the format and content of future iterations.</li> <li>• DP confirmed that updated reporting on project milestones and visibility of the critical path would be incorporated into the next version of the report.</li> </ul> <p>The TCS Programme Scrutiny Sub-Committee <b>NOTED</b> the revised format and content of the nVCC Project Highlight Report, including the introduction of a RAG-rated structure and the reported overall project status of <b>Amber</b>. The Committee <b>WELCOMED</b> the enhanced visibility of financial data and programme progress and <b>ACKNOWLEDGED</b> the effective use of Quantified Risk Assessment (QRA) funding to date.</p> <p>The Committee emphasised the importance of further developing the report's narrative elements to support assurance, improve public accessibility, and provide appropriate strategic context. It was <b>AGREED</b> that the project team would work collaboratively with Committee members to refine the structure and content of future iterations. The Committee also <b>NOTED</b> that the Reviewable Design Data (RDD) process remains on the project's critical path, and that updated milestone reporting and critical path visibility will be included in the next version of the report.</p>	
<p><b>2.2</b></p>	<p><b>nVCC Programme Finance Report</b> <i>Led by Mark Ash, Assistant Project Director</i></p> <p>MA introduced the report, noting that the committee is now reviewing the financial report for 2025-2026, following the transition to the nVCC Scrutiny Committee. He clarified that the focus for 2025-2026 will be on the financial reporting for the nVCC and Enabling Works projects. Other aspects, including the Programme Office, service development, and Whitchurch Hospital, currently covered in the report, will be addressed through the</p>	

Trust's financial reporting regime or in discussions with corporate finance.

Mark Ash presented the nVCC Project Finance Report, outlining the financial position of key projects and the programme management office as at 28<sup>th</sup> February 2025.

The summary of the financial position for 28<sup>th</sup> February 2025 is as follows:

- For capital, the **2024–25 budget is £7.3m**, with **year-to-date spend of £6.3m** and a forecast outturn of **£7.3m**, indicating only a small underspend anticipated at year-end.
- For revenue, the **budget is £800k**, with **£640k spent year-to-date** and a break-even forecast of **£799k**

MA also confirmed receipt of additional Welsh Government funding to cover two Quantified Risk Assessment (QRA) elements for this financial year 24-25:

- Final account settlement with Asda, and
- Traffic management measures required for site access via Asda land.

#### **Whitchurch Hospital Site – Advisory Costs**

- GJ queried the narrative in paragraph 7.23 of the finance report regarding the Whitchurch Hospital site. He noted that the spend to date was described as primarily legal fees and questioned why the full £111,000 budget was forecast to be used, implying a further £30,000 of spend in March. He asked whether additional legal costs were expected and what consultancy support was still being commissioned.

MA clarified that legal fees had already been settled, and the remaining forecasted spend related to advisory costs to support the development of the site's disposal strategy. This included input from Savills, BDP Architects, and urban planning specialists. He acknowledged that the report narrative required updating to reflect this and apologised for any confusion.

- GJ sought further clarity on whether the £30,000 reflected an ongoing run rate for consultancy work and how long such expenditure was expected to continue.  
LF confirmed that the costs were not recurring but reflected the one-off cost of completing the site viability assessment exercise. An update would be brought to the Trust Board in May 2025, including any advisor costs required for the next stages as appropriate.

The TCS Programme Scrutiny Sub-Committee **NOTED** the financial position for the nVCC Project as at 28<sup>th</sup> February 2025, including a capital year-end forecast of £7.3m (with £6.3m spent to date) and a revenue forecast of £799k (with £640k spent to date). The Committee also **NOTED** the receipt of additional Welsh Government QRA funding for the Asda final account and traffic management measures, as well as clarification regarding the £111k advisory budget for the Whitchurch Hospital site. It

	<p>was further <b>NOTED</b> that the disposal strategy will be presented to the Trust Board in May 2025.</p>	
<p><b>2.3</b></p>	<p><b>Communication and Engagement Update Report</b>  <i>Led by Non Gwilym, Interim Director of Corporate Governance</i></p> <p>NG presented the update, highlighting the successful launch of staff site tours, with over 70 attendees to date. Further visits are planned, and interest from external stakeholders continues to grow, including an upcoming delegation from the Health Improvement Alliance Europe and recent participation by Audit Wales.</p> <p>LF noted the Trust’s involvement in a regional roundtable on master planning for North West Cardiff, chaired by Anna McMorrin MP, with representatives from Cardiff and Vale UHB, Cardiff Council, and Transport for Wales. This ensures the organisation remains engaged in wider system-level discussions, particularly regarding the Whitchurch Hospital site.</p> <p>In response to a query from DM on political engagement, NG confirmed that regular contact with elected representatives is ongoing, although meetings are now held less frequently than before. Future reports will provide clearer updates on this engagement.</p> <p>SH welcomed the installation of new video displays in the Outpatients Department and suggested the inclusion of nVCC construction footage to improve patient awareness. He confirmed he would follow up with a written proposal.</p> <p>The Committee <b>NOTED</b> the Communications and Engagement Update.</p>	
<p><b>3.0</b></p>	<p><b>PROGRAMME DELIVERY</b></p>	
<p><b>3.1</b></p>	<p><b>Programme Director and Interdependency Management Report</b>  <i>Led by Lauren Fear, Interim Director of Transformation</i>  <i>Presented by Gavin Bryce, Associate Director of Programmes</i></p> <p>GB introduced the report covering the period 1<sup>st</sup> February – 28<sup>th</sup> February 2025. Key updates included:</p> <ul style="list-style-type: none"> <li>• Satellite Radiotherapy Unit (SRU): The SRU has been re-baselined with a revised delivery timeline of June 2025. Emerging risks include delivery timeline pressures and the removal of a ventilation fan from the radiotherapy engineer’s office, which now requires reinstatement. Mitigations are in place to address these issues.</li> <li>• TRaMS: The revised go-live date for TRaMS is January 2027, which is closely aligned with the operational commissioning of the nVCC. Pharmacy-related commissioning may begin before this date. GB confirmed that this had been addressed earlier in the meeting under the Action Log.</li> <li>• Delivery Confidence Assessment (DCA): While there had been previous discussions around downgrading the overall programme</li> </ul>	



status to Amber, GB advised that given the emerging risks within the satellite programme and the delay in TRaMS, the Red-Amber status should remain in place. Programme teams are encouraged to adopt a 'path to green' approach to reduce sustained Amber ratings.

- Workforce Reporting: Workforce reporting has been strengthened with monthly updates including job compliance, filled positions, and pending vacancies. A tri-monthly update will be provided, with the next scheduled update for May 2025.
- Interdependencies: The interdependencies section has been revised, adding the digitisation of medical records as a formal interdependency due to the lack of physical record storage at the nVCC. GB confirmed that Digital colleagues are currently progressing feasibility work in this area.
- GB clarified that only risks formally accepted by the Board are reported, though the programme team continues to monitor emerging risks internally, contributing to the overall Amber-Red status.

The following key notes were taken from the discussion:

- GJ raised a concern regarding the clarity of the DCA rationale table (page 5, paragraph 3.3). He noted that the action status of "in progress" and vague timelines such as "March 2025" were not sufficiently detailed for tracking and monitoring. GJ emphasised the need for more specific actions and clearer deadlines to improve the utility of the table.

GB acknowledged the feedback and confirmed that future reports would include clearer timelines and more detailed updates, particularly regarding the progress of recruitment and action statuses.

CJ acknowledged the challenge of assigning precise dates to complex risks and multi-faceted actions. He assured the Committee that efforts would be made to improve the report's structure to better reflect cause-and-effect relationships.

- HJ suggested a follow-up discussion between the project team and the Committee to ensure both the Interdependencies Report and the Highlight Report meet expectations and are aligned in format and content. HJ emphasized the need for both reports to be clear and accessible to the public.
- SH raised a concern about the new interdependency regarding the digitisation of medical records, noting that while the lack of physical storage at the nVCC had been known, this issue seemed to have re-emerged as a current risk. SH queried whether the issue was due to limitations in digital infrastructure, internal resourcing, or delays within national programmes. He also asked for clarity on the status of the feasibility study—whether it focused on the digitisation solution itself or alternative arrangements.



	<p>GB clarified that a feasibility study is currently underway to assess the scope of digitisation, including determining the extent of existing paper records and the necessary actions to transition to a paperless system. The feasibility study will inform the next steps, including whether full digitisation of all records is feasible before the nVCC opens. GB reassured the Committee that these risks are being actively managed.</p> <p>CJ provided further context, explaining that the Trust's digital strategy aims for a fully paperless organisation. Several digital solutions, including ePMA (Electronic Prescribing and Medicines Administration) and radiotherapy scheduling, are already in place or in development. The feasibility study, referred to as a scoping exercise, will assess the volume, type, and location of paper records, as well as the paper expected to be generated before full digitisation is achieved. CJ confirmed that funding for addressing retrospective paper records is included in the nVCC Full Business Case, but the Trust must also consider financial constraints across NHS Wales. The findings from the scoping exercise will guide decisions on the extent of digitisation required, including whether only clinically and legally necessary records should be digitised or if all historical records need to be digitised.</p> <p>The Committee <b>NOTED</b> the Interdependencies Report, and the updates provided. The Committee welcomed the proposed improvements to future reporting, including clearer timelines, specific actions, and progress descriptions. The need for more detailed updates on the digitisation of medical records and the ongoing feasibility study was acknowledged. The Committee also <b>NOTED</b> the transition plan and ongoing support for the COO's team to ensure a smooth handover of the Interdependencies Report.</p>	
<b>4.0</b>	<b>CONSENT AGENDA</b>	
	No items were received.	
<b>5.0</b>	<b>ANY OTHER BUSINESS</b>	
	There was no other business.	
<b>6.0</b>	<b>REVIEW OF THE MEETING</b>	
	There were no additional comments or questions.	
<b>7.0</b>	<b>DATE &amp; TIME OF NEXT MEETING</b>	
	The scheduled date and time of next meeting is on Thursday 17 <sup>th</sup> April 2025.	
<b>8.0</b>	<b>CLOSE</b>	
	HJ formally closed the meeting, expressing thanks for all contributions.	