1.0.0	STANDARD BUSINESS
1.1.0	Welcome and Introductions
	Led by Chair: Stephen Harries
1.2.0	Apologies for Absence
	Led by Chair: Stephen Harries
1.3.0	Declarations of Interest
	Led by Chair: Stephen Harries
2.0.0	CONSENT
	Nil
3.0.0	STANDARD BUSINESS
3.1.0	Minutes of the Sub-Committee Meeting held on 19th July 2022
	Led by Chair: Stephen Harries
	3.1 PUBLIC TCS Programme Scrutiny Sub-Committee Minutes 19.07.22 - LF_SH.docx
3.2.0	Action Log of the Sub-Committee Meeting held on 19th July 2022
	Led by Chair: Stephen Harries
	3.2 PUBLIC TCS Programme Scrutiny Sub-Committee Action Log 19.07.22- Final.docx
4.0.0	PROGRAMME GOVERNANCE
4.1.0	Communications & Engagement
	Led by Non Gwilym, Assistant Director, Communications and Engagement To note
	4.1 160922 TCS Scrutiny Board Paper September 2022.docx
4.2.0	TCS Programme Finance Report
	Led by Mark Ash, Assistant Project Director, nVCC
	To note
	4.2 Scrutiny Finance Report (July 2022) - Cover Paper - Final.docx
5.0.0	PROGRAMME DELIVERY
5.1.0	Programme Director's Report
	Led by Carl James, Director of Strategic Transformation, Planning & Digital and Gavin Bryce, Assistant Director of Programmes To note
	5.1 TCS Programme Directors Report_Public 16 spt 22 cj_v2 BL.docx
	5.1 Appendix B_Risk Register_Sept 22_Publicpdf
5.2.0	Hefyd+
	Led by Lauren Fear, Director of Corporate Governance and Chief of Staff To note
	5.2 Hefyd Summer Update Board Report Sept 2022_nVCC_D0.1- Scrutiny Final.docx
6.0.0	ANY OTHER BUSINESS
	Prior Agreement by the Chair Required Led by Chair: Stephen Harries
7.0.0	REVIEW OF THE MEETING
	Led by Chair: Stephen Harries
8.0.0	DATE AND TIME OF NEXT MEETING
	Tuesday 18th October at 10.00-11.00am
9.0.0	CLOSE



TCS Programme Scrutiny Committee Public Session

MINUTES OF THE MEETING HELD 19th July 2022 at 2.00-3.00pm Trust Headquarters, Nantgarw (via Teams)

Members Present:

Stephen Harries (SHarries) Independent Member (Chair)

Hilary Jones (HJ) Independent Member

Professor Donna Mead Trust Chair

In attendance:

Carl James (CJ) Director of Strategic Transformation, Planning & Digital

Bethan Lewis (BL) Programme Planner & Risk Advisor

Carys Jones (CJ) Senior Programme Delivery & Assurance Manager Non Gwilym (NG) Assistant Director Communications and Engagement

Liane Webber (LW) Secretariat/Business Support Officer

Apologies:

Lauren Fear (LF) Director of Corporate Governance and Chief of Staff

Gareth Jones (GJ) Independent Member
Steve Ham (SHam) Trust Chief Executive

Matthew Bunce (MB) Executive Director of Finance

Gavin Bryce (GB) Planning Performance Programme Manager

Cath O'Brien (COB) Chief Operating Officer

Huw Llewellyn (HL) Director of Commercial and Strategic Partnerships

Emma Stephens (ES) Head of Corporate Governance

Carl Taylor (CT) Chief Digital Officer

Jacinta Abraham (JA) Executive Medical Director

Nicola Williams (NW) Executive Director of Nursing, AHP's & Medical Scientists

David Powell (DP) TCS Project Director

Mark Ash (MA) Assistant Director of Finance
Andrea Hague (AH) Director of Cancer Services

1.0	STANDARD BUSINESS	ACTION
1.1	Welcome & Introductions SHarries welcomed attendees to the meeting.	
1.2	Apologies for Absence	



	Apologies were noted as above.	
1.3	Declarations of Interest	
	No declarations of interest were received.	
2.0	CONSENT	
2.1	There were no items of consent.	
3.0	STANDARD BUSINESS	ACTION
3.1	Minutes of the Sub-Committee Meeting held on 21st June 2022	
	The minutes of the meeting held on 21st June were confirmed as an accurate record.	
3.2	Action Log of the Sub-Committee Meeting held on the 21st June 2022	
	It was agreed that due to the limited number of attendees and owners of the actions, the action log could not be fully reviewed at this stage, but that extra time would be allocated at the next meeting to provide the opportunity of a full discussion.	
4.0	PROGRAMME GOVERNANCE	
4.1	Communications & Engagement NG presented the Communications and Engagement update, noting that the final part of the document refers to several key milestones. NG wished to offer assurance that plans are in place to support the activities in order to maximise the opportunities presented. The Sub-Committee noted the Communications & Engagement Update.	
4.2	TCS Programme Finance Report	
	Noted that due to other meeting commitments there were no attendees available to present the Finance Report.	
	SHarries highlighted para 4.2 which states "The capital funding requirement of £0.434m will be provided from the Trust's discretionary capital allocation", whereas para 7.15 states it is "assumed to be provided by the Trust from its discretionary capital allocation" and sought	



	clarification on this point. CJ confirmed that the statement at 4.2 is correct and this has been approved internally. DM raised concern that the virement doesn't affect spending plans for discretionary capital. CJ gave assurance that everything identified as a priority was funded last year and this, notwithstanding the fact that this year is difficult due to the pressures in the NHS capital programme across Wales. The Sub-Committee were invited to forward any additional comments or questions to CJ by email following the meeting. The Sub-Committee received the Finance Report.	
5.0	PROGRAMME DELIVERY	
5.1	TCS Programme Stocktake	
5.2	The Sub-Committee noted the TCS Programme Stocktake. Programme Director's Report	
	The Programme Director's report was received. HJ gave positive feedback on the structure and format of the report but requested that target dates be added wherever actions are noted. HJ queried the formal handover of works to Velindre Futures and whether the scrutiny by the TCS Scrutiny Sub-Committee would continue beyond this point. CJ agreed that this certainly needs to be addressed but will require much broader discussion. DM highlighted the red risk on page 11 (Project 1 – Enabling Works), noting that previous discussions would suggest this should change. CJ believe that this is a fair reflection of the current risk and many matters are beyond immediate control. BL highlighted that the RAG status given is related to the dependency in order to ensure the team are closely monitoring from a programme perspective. CJ reported that the Programme Delivery Board are now holding fortnightly meetings to discuss the enabling works aspects. HJ noted that several queries remain but it was agreed that these would largely be addressed during the extraordinary meeting at which the stocktake will be received.	CJ
	The Sub-Committee noted the Programme Director's report, the format of which was well received by the group.	
6.0	ANY OTHER BUSINESS	



	HJ queried whether DM should be listed as a member of the committee as opposed to being listed as in attendance. CJ to clarify the position with Corporate Governance	CJ
7.0	REVIEW OF THE MEETING	
	There were no additional comments or questions.	
8.0	DATE & TIME OF NEXT MEETING	
	The next meeting of the Sub-Committee will be held on Thursday 22 nd September at 2.00-3.00pm.	



TCS Programme Scrutiny Sub-Committee

July 2022

Action Summary – PUBLIC

No.	Action	Owner	Date Raised	Target Date	Progress to date	Status (Open / Closed)
119	TCS Programme Risk Register CJ agreed to report to the April 2022 Sub- Committee on progress in getting a temporary solution in place regarding the project resource of Project 5 and looked to have the permanent way forward in place by June 2022.	Carl James	22/03/2022	18/10/22	 Project Manager post agreed, evaluated and out for advert. Interviews in September. 	OPEN
120	TCS Programme Risk Register CJ to pick up with Sarah Morley on the Transforming Cancer Services Programme Delivery Board as Workforce Director to pick up the analysis of the impact of recruitment issues across workstreams.	Sarah Morley	22/03/2022	18/10/22	 There are four actions related to recruitment (120, 121,122 and 130). Following the presentation of the Stocktake work to the Committee, a specific focus on the workforce risks and actions will be presented to the following Committee 	OPEN
121	TCS Programme Risk Register COB agreed to incorporate into the report addressing the issues that are currently scattered throughout the risk register to give assurance on the totality of the workforce issues that are being faced and what is being done to address these. COB agreed to ensure this is broken down to manage the programme of work and delivering the service and the thread that comes through it.	Cath O'Brien / Sarah Morley	22/03/2022	18/10/22	 There are four actions related to recruitment (120, 121,122 and 130). Following the presentation of the Stocktake work to the Committee, a specific focus on the workforce risks and actions will be presented to the following Committee 	OPEN

Transforming Cancer Services in South East Wales



No.	Action	Owner	Date Raised	Target Date	Progress to date	Status (Open / Closed)
	COB will work with BL and SM to articulate that and to show what is being done to address this issue.					
122	SHam acknowledged the need for clarification on the strategic approach to recruitment and noted that this would be discussed at EMB with an update brought to the July meeting of this committee, following a discussion in the June Board Development meeting	Steve Ham	04/05/22	18/10/22	 There are four actions related to recruitment (120, 121,122 and 130). Following the presentation of the Stocktake work to the Committee, a specific focus on the workforce risks and actions will be presented to the following Committee 	OPEN
130	Noted that work is underway to undertake targeted recruitment of key posts which are proving difficult to fill work with a Recruitment Marketing Agency in order to support us in doing this. Agreed to add to the agenda as a separate item at an upcoming meeting with accompanying paper detailing current needs vs baseline, etc.	Sarah Morley	21/06/22	18/10/22	 There are four actions related to recruitment (120, 121,122 and 130). Following the presentation of the Stocktake work to the Committee, a specific focus on the workforce risks and actions will be presented to the following Committee 	OPEN
131	HJ queried whether DM should be listed as a member of the committee as opposed to being listed as in attendance. CJ to clarify the position with Corporate Governance	Carl James	19/07/22	22/9/22	Confirmed DM should be listed as a member, minutes template to be amended.	CLOSED
132	Programme Director's Report HJ requested that target dates be added wherever actions are noted.	Carl James	19/07/22	22/9/22	Dates included in next version for September Committee,	CLOSED
133	Programme Director's Report	Carl James	19/07/22	18/10/22	Following agreement of changes to executive level governance, an updated Terms of Reference	OPEN

Transforming Cancer Services in South East Wales



No.	Action	Owner	Date Raised	Target Date	Progress to date	Status (Open / Closed)
	HJ queried the formal handover of works to Velindre Futures and whether the scrutiny by the TCS Scrutiny Sub-Committee would continue beyond this point. CJ agreed that this certainly needs to be addressed but will require much broader discussion				for the Scrutiny Sub-Committee will be brought for agreement. In summary, anything that is currently within the Sub-Committee's scope will remain as is. The feeds into it will be updated to reflect the change to Velindre Futures for some of the work.	



TCS PROGRAMME SCRUTINY SUB-COMMITTEE

Transforming Cancer Services Communications and Engagement Update

DATE OF MEETING	22 nd September 2022
PUBLIC OR PRIVATE REPORT	Public
IF PRIVATE PLEASE INDICATE REASON	Draft Status - Final Version will be Published in Public Domain
PREPARED BY	NON GWILYM, ASSISTANT DIRECTOR COMMUNICATIONS AND ENGAGEMENT
PRESENTED BY	NON GWILYM, ASSISTANT DIRECTOR COMMUNICATIONS AND ENGAGEMENT
EXECUTIVE SPONSOR APPROVED	LAUREN FEAR, DIRECTOR CORPORATE GOVERNANCE
REPORT PURPOSE	FOR NOTING

	REPORT PURPOSE	FOR NOTING
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COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING **COMMITTEE OR GROUP DATE OUTCOME** Noted nVCC/Enabling works project board 14/9/22 Noted TCS Programme Board 15/9/22

ACRON	NYMS
nVCC	New Velindre Cancer Centre



1. SITUATION

2. BACKGROUND

This paper provides the TCS Programme Scrutiny Sub-Committee with an update on communications and engagement since the June meeting.

3. ASSESSMENT

3.1 Supporting the Competitive Dialogue.

The <u>announcement of the successful participant of the competitive dialogue was announced on 27 July 2022</u>. A comprehensive communications pack was developed and information shared with our internal and a wide range of external stakeholders including the architectural and trade press.

3.2 Commencement of Enabling Works Communications and engagement support

The <u>announcement of the commencement of enabling works</u> for the new Velindre Cancer Centre project was published in August 2022, accompanied by the publication of a public leaflet that aimed to outline the works and raise public awareness of VUNHST's intention to host a series of public drop-ins in September to enable the public to ask questions and learn more about the project. A comprehensive communications pack was developed and information shared with our internal and a wide range of external stakeholders.

3.3 Summer Jamboree

A full programme of activity was arranged in support of the project and the Hefyd programme during August. A full evaluation report was considered by the TCS programme board and is included for discussion on the Scrutiny Committee agenda.



3.4 Preparing for local community engagement programme

A series of drop-in events were planned for September, in partnership with the Acorn team. The events were postponed following the sad passing of Her Majesty Queen Elizabeth II and the subsequent requirements of the national mourning period. The meetings are being rescheduled for early October and we shall start promoting them again following the State Funeral. The events will provide an opportunity for members of the local community, staff and patients to hear about our plans, meet the team and "ask the experts".

3.5 Visit to Down to Earth

On 25 August, VUNHST officials and Julie Morgan MS visited the Down to Earth headquarters in Gower. The purpose of the visit was to better understand the engagement methodology employed by DtE for sustainable construction, to visit some of the buildings on site and consider the benefits offered by their work in the context of the opportunities raised by the development of the new Velindre Cancer Centre.



3.6 Managing social media commentary and output - Content driven in the main by proactive posts associated with the commencement of the Enabling Works.

3.7 Responding to correspondence from a wide range of stakeholders.

The main themes of correspondence received during the reporting period include:

- Clarity on school drop off times and traffic management which has been addressed
- Positive feedback about the community newsletter
- Public safety measures and banksmen around Whitchurch Hospital site.
- The current and future plans for the emergency access route.

3.8 Political stakeholder meetings

During the reporting period, meetings with the local MS MP have taken place and a site visit with the local Councillors.

3.9 Supporting planning applications

Communications packs to support the imminent submission of planning applications have been developed.

3.10 Engagement with Whitchurch Sports Clubs

A meeting between VUNHST and representatives of Whitchurch sports clubs was held on 1 September 2022. During the meeting, we discussed the proposals for the potential Whitchurch Sports Pavilion and how both organisations could work together in the future. Key considerations for the future include:

- Aligning both developments;
- Awareness of and potential involvement in each other's engagement events;
- Opportunities for knowledge and information sharing e.g. local site surveys;



4 NEXT MONTH

4.1 Launching the nVCC Community Panel



- 4.2 A community panel is being developed as part of the Heyfd workstream, providing involvement opportunities for those across the Velindre region. Members of the Community Panel will be invited to regular online and in-person events across various locations, showcasing different aspects of our work. Members will also be first to be offered the opportunity to take part in our green volunteering activities and arts projects, and to give their views on our ongoing and upcoming work. Interest in joining the panel will be registered via our Getting Involved website page and promoted via our social channels, as well as during the September drop-in events.
- **4.3** Issuing communications to local residents to support the commencement of the section 278 works on Park Road.
- **4.4** Supporting the communications and engagement needs related to the Reserved Matters submission.
- **4.5** Supporting the communications and engagement needs related to an application to move the emergency access route from the Hollybush estate to the southern access route.
- **4.6** Supporting the communications and engagement needs related to the commencement of the Asda works due to begin in October. We are working with Asda to develop communications materials for their customers and residents in advance of commencement of works.



4.7 Supporting the emerging communications needs in support of the Integrated Radiotherapy system project.

5. IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	There are no specific quality and safety implications related to the activity outined in this report.
RELATED HEALTHCARE	Governance, Leadership and Accountability
STANDARD	If more than one Healthcare Standard applies please list below:
EQUALITY IMPACT ASSESSMENT COMPLETED	Not required
LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATIONS / IMPACT	There is no direct impact on resources as a result of the activity outlined in this report.

6. RECOMMENDATION

The TCS Programme Scrutiny Sub-Committee is recommended to **NOTE** the paper.

TCS PROGRAMME SCRUTINY SUB-COMMITTEE

TCS Programme Finance Report 2022-23 August 2022

DATE OF MEETING	22 September 2022
PUBLIC OR PRIVATE REPORT	Public
IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report
PREPARED BY	Mark Ash, Assistant Project Director, nVCC and Enabling Works Projects
PRESENTED BY	Mark Ash, Assistant Project Director, nVCC and Enabling Works Projects
EXECUTIVE SPONSOR APPROVED	Matthew Bunce, Executive Director of Finance
REPORT PURPOSE	Note

REPORT PURPOSE	Note

COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING **COMMITTEE OR GROUP** OUTCOME DATE TCS Programme Delivery Board 15/9/22 Noted

ACRONYMS	ACRONYMS		
WG	Welsh Government		
Trust	Velindre University NHS Trust		
TCS	Transforming Cancer Services		
PMO	TCS Programme Management Office		
EW	Enabling Works		
nVCC	New Velindre Cancer Centre		
IRS	Integrated Radiotherapy Solutions Procurement		
SDT	Service Delivery and Transformation		

1. BACKGROUND

- 1.1 The purpose of the accompanying report is to provide a financial update to the TCS Programme Scrutiny Sub-Committee for the financial year 2022-23, outlining spend to date against budget as at Month 05 and the current full year forecast.
- 1.2 The TCS Programme Project financial position is continually monitored and updated, with an update provided to the TCS Programme Delivery Board and Trust Board monthly.

2. FINANCIAL SUMMARY AS AT 31ST AUGUST 2022

2.1 The summary financial position for the TCS Programme for the year 2022/23 as at 31st August 2022 is provided below.

Expenditure Type	Year to Date	2022/23 Full Year		
Exponditure Type	Spend		Forecast	Variance
Capital	£4.047m	£20.964m	£20.962m	£0.002m
Revenue	£0.259m	£0.684m	£0.684m	£0m
Total	£4.306m	£21.648m	£21.646m	£0.002m

- 2.2 The Programme is currently forecasting an overall underspend of £0.002m for capital and revenue expenditure for the financial year 2022/23. The EW Project forecast position reflects an under-spend of c£0.805m. It should be noted that the EW Project was to re-provide financial support of c£0.450m which it received from the nVCC Project in 2021-22. The additional financial support will be provided from the EW QRA and does pose a low financial risk for the EW Project.
- 2.3 Following a review in August 2022, WG have agreed a virement of £1.472m of the Enabling Works Project capital funding from 2022/23 into 2023/24. This reduces the overall capital funding for 2022/23 to £21.648m. The Project will make an assessment to 'slip' funding into 2023-24 as per agreement with WG. To date the EW Project has undertaken the following adjustments into 2023-24:
 - Adjustment of £1.9m in May 22 delay in EW Project
 - Adjustment of £1.472m in August 22 delay in the Asda works
- 2.4 The previously reported risks for the Programme of an Enabling Works underspend due to delays and increased New Velindre Cancer Centre (nVCC) advisory fees have been mitigated. There are currently no financial risks for the TCS Programme.

3. IMPACT ASSESSMENT

QUALITY AND SAFETY	There are no specific quality and safety implications	
IMPLICATIONS/IMPACT	related to the activity outined in this report.	

RELATED HEALTHCARE	Governance, Leadership and Accountability	
STANDARD	If more than one Healthcare Standard applies please list below:	
EQUALITY IMPACT ASSESSMENT COMPLETED	Not required	
LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.	
FINANCIAL IMPLICATIONS / IMPACT	Yes (Include further detail below)	
	See above.	

4. **RECOMMENDATION**

4.1 The TCS Programme Scrutiny Committee are asked to **NOTE** the financial position for the TCS Programme and Associated Projects for 2022/23 as at 31st August 2022.

TCS PROGRAMME SCRUTINY SUB - COMMITTEE

TCS PROGRAMME DIRECTORS REPORT

DATE OF MEETING	22nd September 2022
PUBLIC OR PRIVATE REPORT	Public
IF PRIVATE PLEASE INDICATE REASON	Meeting held in Private & Commercially Sensitive
PREPARED BY	Gavin Bryce, Associate Director of Programmes Carys Jones, Senior Programme Delivery & Assurance Manager, TCS Bethan Lewis, TCS Risk Advisor & Programme Planner
PRESENTED BY	Carl James, Director of Strategic Transformation, Planning and Digital
EXECUTIVE SPONSOR	Carl James, Director of Strategic Transformation, Planning and Digital
REPORT PURPOSE	FOR NOTING

COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING					
COMMITTEE OR GROUP DATE OUTCOME					
TCS Programme Delivery Board	15/09/2022	NOTED			

INITIALISMS	
AOS	Acute Oncology Service
APO	Advanced Purchase Order
EMB	Executive Management Board
EW	Enabling Works
CCLG	Collaborative Cancer Leadership Group
DCA	Delivery Confidence Assessment
IRS	Integrated Radiotherapy Solution
FBC	Full Business Case
nVCC	new Velindre Cancer Centre
MIM	Mutual Investment Model
NHH	Nevill Hall Hospital
OBC	Outline Business Case
PMO	Programme Management Office
PDB	Programme Delivery Board

PMP	Project Master Plan
RSC	Radiotherapy Satellite Centre
SE Wales	Southeast Wales
TCAR	Temporary Construction Access Route
TCS	Transforming Cancer Services
UHW	University Hospital Wales
VCC	Velindre Cancer Centre
WG	Welsh Government

1. SITUATION / BACKGROUND

- 1.1 The TCS Programme will deliver a range of outcomes and benefits for patients across Southeast Wales. The Programme was established in 2015 and consists of seven well defined projects that are being delivered by the Trust in conjunction with its various partners / stakeholders.
- 1.2 In June 2022 the format of this report was revised following discussion with the Programme Director and the Chair of the TCS Programme Scrutiny Sub-Committee, reflecting the movement from the planning to delivery phase of the Programme.
- 1.3 The reporting period for this Programme Director's Report covers from **7**th **July to the 7**th **September**.

2. ASSESMENT / OVERALL PROGRAMME STATUS

- 2.1 The Programme Directors report covers the following areas:
 - a) Overall Programme Status: Delivery Confidence Assessment (DCA)
 - b) Key milestones/achievements in reporting period
 - c) TCS Programme Performance (incl. Key Areas to Highlight)
 - d) External Programme Stakeholder Communication & Engagement
 - e) Change Controls or Exception Reports in previous reporting period
 - f) Programme Benefits Realisation
 - g) Project 1 to 7 Reported Status
 - h) Master Programme Plan and Critical Path
 - i) Programme Risks
 - j) Programme Issues
 - k) Programme 3-month look ahead

a) Overall Programme Status: Delivery Confidence Assessment

- 2.2 The Delivery Confidence Assessment (DCA) is a well-used method of providing an overview of a Programmes status (it is used within the Major Projects Authority Gateway Reviews and Managing Successful Programmes methodology). The evaluation criteria for the DCA is set out in Annex A and it should be noted that the DCA is a qualitative based opinion having considered a range of evidence available across the programme i.e. it is an indicator of the position and cannot be definitive.
- 2.3 The TCS Programme Manager and Programme Director have reviewed the current position and the Programme Director's DCA for the reporting period 7th July 7th September 2022 is set out below.

Status (Trend)	Qualitative Measure	Previous Status	Status Update
	Successful delivery appears feasible but significant issues already exist requiring management attention. These appear resolvable at this stage and, if addressed promptly, should not present a cost/schedule overrun.	Amber	
	The main findings supporting the DCA are:	Mitigating Actions:	
	A. Programme Scope requires review due to new pieces of work emerging i.e. the Nuffield Trust advice, Acute Oncology Services implementation.	A. The outcomes of the Programme 'Stocktake' will provide the platform to address several issues related to Programme Scope.	A. Draft stocktake complete and draft Implementation developed rafted by PMO.
Amber ↔	B. Programme Resources require review as the programme moves from planning into its implementation phase.	B. Programme resource plan to be reviewed and refreshed once the Programme Scope is agreed.	B. As above (A). Resources cannot be addressed until the scope is approved.
	C. Several projects have been paused due to Covid and / or operational pressures e.g. Project 5.	C. Programme Delivery Board to decide following Stocktake findings and outcomes.	C. See A (above). Draft Implementation Plan developed by PMO and required approval. Outreach Project Manager interviews 9/9/22.

D. Transition to new delivery and governance arrangements within the Trust are not yet finalised e.g. the scope of Velindre Futures.	D. Decision for EMB to invoke new delivery and governance arrangements following Stocktake outcomes and recommendations.	D. Under consideration by EMB and will need to be aligned with Q5 recommendations.
E. The significant operational pressures post-Covid increase the risk of delays to delivery	E. Continue to work with operational colleagues, supporting them where operational pressures exist.	E. N/A

b) Key milestones / achievements in reporting period

The TCS Programme Master Programme Plan sets out the plan for delivery of the various projects' deliverables and related activities. The plan includes milestones together with their dependencies and it identifies the critical path. The following activities, set out in the table below, list the milestones achieved in the reporting period and identifies any missed milestones which would require escalation.

Master Programme Milestone	Project	Date	Is this on the Critical Path?	Achieved	Not Achieved	Impact on Critical Path
IRS VUNHST respond to WG comment on FBC	3a	15 th July	N	B		
RSC Project respond to WG comment on FBC	4	22 nd July	N	B		
nVCC Bidder Evaluation complete	2	8 th July	Y	R		
Trust Board and WG Approval to proceed	2	20 th July	Y	R		
Successful and unsuccessful participants informed	2	22 nd July	Y	B		
Development of FBC begins	2	25 th July	N	R		
EW CEMP Determination	1	6 th -July 10 th August	Y	R		
EW Construction (Phase 1) begins	1	15 th August	Y	B		

Key Milestone Summary:

The majority of the key milestones were delivered in Projects 1, 2, 3a and 4 during the last reporting period; including those matters which were rescheduled to the August Cardiff City Council Planning Committee and the appropriate approvals were secured.

c) TCS Programme Performance

Programme Performance Areas to Highlight:

Project 5 Outreach Resourcing

Projects 5 & 6 remain on hold due to Covid, resourcing and operational pressures which require addressing, including the wider scope and ownership of these projects. The Project Manager post for Project 5 - Outreach has interviews scheduled for 9th September.

Project 3a Integrated Radiotherapy Solution (IRS)

Progress made towards contract completion.

Project 4 Radiotherapy Satellite Centre (RSC)

The FBC has been submitted to Welsh Government for approval with the Infrastructure Investment Board (IIB) meeting to discuss feedback scheduled on 22nd September. Completing the FBC also represented a significant milestone in the Project.

Programme Stocktake & Implementation Plan

A Programme "Stock Take" has been undertaken to review the programme and has made 16 recommendations which were considered by the July TCS Programme Delivery Board.

The Programme Team has developed a draft implementation plan based on the 16 recommendations which have been prioritised and are due to be presented to the TCS Scrutiny Sub-Committee.

The Programme Team will require a mandate to deliver the recommendations having taken into consideration of the imminent outputs from the Q5 review undertaken during summer 2022.

Judicial Review Update

The Trust received notice that the Court of Appeal has refused the application for Judicial Review of the new Velindre Cancer Centre Outline Business Case. The refusal is both on the Appellant's application for permission to appeal and their application for an extension of time.

2.4 The TCS Programme Manager undertakes review of the programme performance against a number of metrics which are set out below.

Area	Status (Trend)	Risk Ref.	Position	Action	Target Date
Strategic Alignment (Reviewed Quarterly)	Green (↔)	R281 R295	The TCS Programme remains aligned to local, regional, and national cancer strategies and there are no issues identified during horizon scanning. A desktop review against these strategies was also undertaken as part of the stocktake also concluding that the programme remains aligned.	The quarterly review of strategic alignment has been undertaken and no material change/reason for misalignment are known.	December 2022

Programme Scope (Reviewed Quarterly)	Amber (↔)	R360	The TCS Programme is still valid and extant. However, additional pieces of work have emerged over the last 18 months which are integral in delivery of the overall clinical model across South East Wales e.g. Nuffield Trust Report Recommendations, Acute Oncology Service, work being undertaken within Velindre Futures.	The recommendations in the final draft TCS Stocktake Implementation Plan (awaiting approval) are required to be delivered to ascertain the future scope of the TCS and Velindre Future Programmes. The outputs of the Q5 work completed in early Sept will also inform this action.	December 2022
Programme Budget (Reviewed Monthly)	твс	R350	*Finance Report unavailable at time of publishing. Refer to main Finance Report.	See mitigating actions for risk ID R350 (Inflation Risk).	твс
Governance and Approvals (Reviewed Monthly)	Amber (↔)	R360 I061	The TCS Programme has well established governance arrangements with a Programme Delivery Board and Scrutiny Sub Committee. However, some of the Projects are on hold.	See mitigating actions for risk ID R360 (Projects 'on hold'), I061 (Outreach not resourced) Following programme scope review, formal agreement of leadership/programme for new work and use of Change Control (to transfer work to Velindre Futures and other Programmes).	November 2022
Progress against Programme Plan (Reviewed Monthly)	Amber (↔)	IRS17 R327 R351 R363 R364 R319 R313 R340 R365 R206	The Programme is currently performing to its approved plan for projects 2, 3a, 3b, 3c and 4. Project 1 has experienced a range of risks and issues which have impacted upon their project plan. As the EW is a critical path project, this has potential impacts for the wider programme. The EW/nVCC plan is currently being reviewed for multiple scenarios. Projects 5 and 6 remain on hold.	Risk Advisor reviewing risks with EW/nVCC Project at regular intervals. See mitigating actions for risk ID IRS17, R327, R351, R363, R364, R319, R313, R340, R365, R206. Actions from the Programme Stocktake to be addressed by Dec 2022.	Regularly monitored
Processes for Managing Risks and Issues (Reviewed Monthly)	Green (↔)	N/A	Programme Risk and Issues are regularly reviewed and have mitigations and owners. There is the consistent use of risk and issue methodology across the Programme. Given the scale, maturity, and complexity of the Programme the level of risk is relatively stable and commensurate with the activities being undertaken.	N/A	N/A

			See more detailed risk and issue review in sections I and J.		
Benefits (Reviewed Quarterly in Tranche 2)	Green (↔)	N/A	The Programmes' projects are mainly in the planning and procurement phases and therefore implementation and benefits delivery has not yet commenced but are quantified.	The Benefits Realisation Plan remains extant and unchanged at this point. Benefits Realisation Plan – template, process etc	As per benefits realisation plans at within programme and project business cases

d) External Programme Stakeholder Communication & Engagement

The SE Wales Collaborative Cancer Leadership Group (CCLG)

The next quarterly meeting of the CCLG originally scheduled for 13th September 2022 has been postponed due to a clash with the NHS Confederation Conference usually attended by NHS executive teams across Wales. A new meeting date has been sought which is likely to be late November / early December and a draft agenda prepared for discussion with the Chair, Suzanne Rankin.

A draft proposal to evolve the CCLG arrangements has been developed based on discussion with the South East London Cancer Alliance (SELCA) and the earlier CCLG workshop in April 2022. This will be further discussed with the South East Wales Directors of Planning and regional leads and considered at the next CCLG meeting.

An inaugural Prehab to Rehab ('P2R') Programme Board is also meeting on 30th September supported by the PMO as a key work programme for the CCLG.

As agreed by Programme Delivery Board, updates on progress made against the Nuffield Trust recommendations will be provided on a quarterly basis following approval at CCLG.

e) Change Controls or Exception Reports in previous reporting period

Ref	Change Control(s)	Exception Report(s)	Description
	0	1	EW PDB – Exception Report (11/08/22)

f) Programme Benefits Realisation

2.5 The programme has a wide range of benefits to deliver. The first phase of the programme has broadly been focused on the planning and procurement phases i.e., clinical model; developing infrastructure (business cases).

- 2.6 The Programme is now transitioning (subject to approval) into the implementation phase, and this will allow the anticipated benefits to start to be realised.
- 2.7 A programme benefits realisation plan is in place which is monitored. The status of benefits across the Programmes projects can be seen in the table below and there have been no changes from the previous reporting period:

Programme or Project	Not Required Currently	Deliverables set out in Project Brief	Benefits Quantified with Owner(s)	Benefits Being Delivered
Programme Overall		R	R	Still in planning stage
Project 1 - Enabling Works	R	B	B	Still in planning stage
Project 2 - nVCC		B	B	Still in planning stage
Project 3a - IRS		B	B	Still in planning stage
Project 4 - RSC		ABUHB	B	Still in planning stage
Project 5 - Outreach		R		Still in planning stage
Project 6 - Service Delivery		R		Still in planning stage
Project 7 - Site Decommissioning	R	R		Still in planning stage

g) Project Status

2.8 The status of each component part of the Programmes projects are set out in the table below together with an overall rating.

	Project Director	Plan	Budget	Quality	Scope	Project Resource	Overall	Proposed Action	Due Date
Project 1 – Enabling Works	David Powell				Highlight Report not ava		Status not availa	ble at time of reporting	
Project 2 – nVCC	David Powell	Amber	Green	Green	Green	Amber	Amber ↔	No actions identified on Highlight Report	N/A
Project 3a – IRS	Huw Llewellyn	Green	Green	Green	Green	Green	Green ↔	No actions identified on Highlight Report	N/A
Project 4 – RSC	Andrea Hague	Green	Green	Green	Green	Green	Green ↔	No actions identified on Highlight Report	N/A
Project 5 – Outreach	Nicola Williams	Board d	Formally placed on Hold by Programme Delivery Board due to Covid pandemic and related impact (e.g. changing outreach arrangements in LHBs due to Covid response)				Paused : No current rating ↔	Project 5: scope being refreshed, and Project Manager interviews taking place 9th September. The Programme Scope requires review to confirm existing scope or change scope to include additional work (or what is taken forward within Velindre Futures etc.) as per draft stocktake. Finalisation of executive lead and resources available to this project.	Dec 2022 (Informed by stock take)

	Project Director	Plan	Budget	Quality	Scope	Project Resour ce	Overall Status	Proposed Action	Due Date
Project 6 – Service Delivery	Andrea Hague		re Futures	ork being take and business developments	as usual s		Paused: No current rating ↔	The Programme Scope requires review to confirm existing scope or change scope to include additional work (or what is taken forward within Velindre Futures etc.) as per stocktake. Finalisation of executive lead and resources available to this project.	Dec 2022 (Informed by stock take)
Project 7 – Site Decommissioning	David Powell	To con	nmence 12	-18 months pr nVCC	ior to ope	ning of	N/A	N/A	N/A

h) Programme Master Plan and Critical Path

- 2.9 The Programme Master Plan (set out in Appendix A) is reviewed monthly.
- 2.10 The key dependencies on the master programme which are considered for focus/emerging risks are:

Summary of Dependencies & Associated Risks

Key Milestone	Description of Dependency	Linked Risk / Issue ID	Comment	Status (RAG)
Project 3a IRS – Award of the Contract	Formal award of the IRS Contract is required to ensure that timely arrangements can be made for the construction phases of the nVCC and the RSC and implementation in VCC	IRS21 / IRS25 / IRS24 / R340 / R265 / R268	A number of risks / issues associated with this dependency have now been closed and/or deescalated in the latest reporting period. The full 30 day period in which a legal challenge could be raised ended in July, after which the risk for legal challenge was closed by the Risk Owner and as such the risk of the dependency being realised has reduced significantly. The IRS contractor has commenced discussions with both nVCC and RSC contractors to ensure alignment of construction phases.	Risk Decreasing
Project 4 - RSC FBC Approval	FBC has to be approved by both VUNHST & ABUHB and Welsh Government in order for the construction works to commence as planned	R319	The FBC for the RSC Project been submitted to WG and following feedback updates have been provided back to WG. Timescales for decision on FBC remain as expected with IIB panel in late September. Until the FBC is given approval by WG the planned timescales for construction continue to have an element of uncertainty.	Risks Stablising

Key Milestone	Description of Dependency	Linked Risk / Issue ID	Comment	Status (RAG)
Project 5 – Outreach Centres Operational	The Outreach Centres need to be operational prior to the opening of the nVCC, which has been sized and designed on the basis that additional capacity will be available through the Outreach facilities	R329 / R273 / R114 / R360	The Programme Business Case refers to the Outreach Centres being operational prior to the opening of the nVCC as a key dependency / benefit of the Programme. Currently the Outreach Project remains 'On Hold' and as such progress is not being made resulting in this dependency remaining an area of concern for the Programme as a whole. Recruitment for a Project Manager role is underway with interviews being held early in September.	Risks & Issues Identified

i) Programme Risks (7th July – 7th September)

2.11 Of the current live risks, the comparison between the inherent ratings and current ratings below demonstrates that following the implementation of appropriate mitigations and controls the risk landscape of the Programme becomes more moderate, thus demonstrating efficient management of risks across the Projects and Programme.

Inherent → Current Ratings								
		Likelihood						
Impact	5. Certain	4. Likely	3. Possible	2. Unlikely	1.Rare			
5. Catastrophic 4. Major	36 →	10						
3. Moderate		84 <i>→</i>	66					
2. Minor			29 →	57				
1. Insignificant				0 →	16			

2.12 The changes to risks and issues from across the Projects and Programme in this reporting period are summarised below.

	New	Closed	Escalated	De- escalated	Total changed risks / Issues
Risks	23	9	5	4	41
Issues	9	1	1	0	11

2.13 The have been 6 new risks with a rating of 12 and above (in accordance with the Trust risk appetite) across the programme and projects during this reporting period.

ID	Description of Risk	Risk Owner	Direction of Travel	Current Rating	Comment	Mitigations on Track (Y/N)	Next Action Due Date
R371	There is a risk that the Trust may not be able to recruit sufficient resource to implement the Solution.	Gavin Bryce	New	Likelihood 3 Impact 5 Overall 15	Interim funding has been approved by Trust Board, positions are still to be filled within the implementation team as such progress on recruitment has not been able to proceed	Y	30/09/22
R391	There is a risk that commissioning bodies decline to fund the nVCC FBC, leading to a significant delay.	David Powell	New	Likelihood 4 Impact 4 Overall 16	Undertake further discussions with Health Board Commissioners to agree funding - Initial discussion have taken place, Health Boards have expressed some concern regarding funding levels required – Ongoing Engage with Welsh Government to help agree funding sources – Not Started	Y	03/10/22

R382	There is a risk that the Trust does not have enough capacity in its digital workforce to develop the programmes needed in order to meet the nVCC digital plans proposed by the successful participant, leading to reduced quality in terms of delight and commodity at the nVCC.	lan Taylor	New	Likelihood 3 Impact 4 Overall 12	1. Map out the requirements/activity required to deliver the successful participant's proposals and if necessary undertake recruitment and acquire external resource. 2. Present findings and discuss at nVCC digital board 3. Prioritise work areas and agree extended timelines for products and services that do not need to be available from 'day one'. 4. Alternatively to point 3, agree products and service that are not required.	Y	01/11/22
R383	There is a risk that the requirement for a PET CT scanner will be introduced, leading to a reduced amount of admin space at a detriment to staff experience of the nVCC.	David Powell	New	Likelihood 4 Impact 3 Overall 12	Ensure that design allows sufficient admin space that the introduction of PET CT would not lead to a sub-standard amount of admin space for staff	Υ	27/09/22

2.14 The table below identifies risks with a rating of 12 and above where the risk score has increased during the latest reporting period. For all other risks requiring reporting in accord with the Trusts Risk Management Framework please see Appendix C.

ID	Description of Risk	Risk Owner	Direction of Travel	Current Rating	Comment	Mitigations on Track (Y/N)	Next Action Due Date
R268	There is a risk that as the IRS Project needs to be phased in parallel with RSC Project, due to overlapping timeframes and interdependencies resulting in the RSC project being restricted to planning assumptions until the Equipment Project is concluded which has an inherent risk.	Andrea Hague	Risk Increasing	Likelihood 4 Impact 4 Overall 16 Previous score Likelihood 4 Impact 3 Overall 12	1) There is consistent membership sits on both project boards to provide oversight on progress across both. IRS Implementation has also been shared with the TCS Project Team. Complete 2) Meeting held between VUNHST and successful IRS supplier to finalise design requirements. Complete 3) Supplier has been identified and is now working with the RSC construction supplier and finalising design requirements and ongoing discussions regarding project timescales to keep on track of original timeline.	Y	20/10/22

R317	There is a risk that insufficient resources (people) being made available to the project will have an adverse impact on the quality of the procurement process, timeliness of completion of OBC/FBC and readiness for implementation	Gavin Bryce	Risk Increasing	Likelihood 3 Impact 4 Overall 12 Previous score Likelihood 2 Impact 4 Overall 8	FBC outlines resource requirements for implementation. IRS procurement team working with implementation team to prepare for handover and implementation. Shadow Implementation Board has been established and is meeting but progress on recruitment of required resources has not been able to proceed and as a result is causing delays with agreement for implementation plans to be finalised within contract.	Y	30/09/22
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j) Programme Three Month Look Forward –

a. The key milestones expected in the next 3 months (September – November) are:

Milestone	Project	Date	Critical Path				
September 2022							
IRS – WG approval of FBC	3a	22 nd September	Υ				
IRS Contract Award	3a	16 th September	Υ				
RSC – WG approval of FBC	4	22 nd September	Υ				
October 2022							
RSC – Kier Mobilisation Period	4	3 rd October	N				
RSC – Construction	4	31st October	Υ				
November 2022							
No key milestones reported currently							

10. IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	There are no specific quality and safety implications related to the activity outined in this report.
RELATED HEALTHCARE STANDARD	Governance, Leadership and Accountability If more than one Healthcare Standard applies,
STANDARD	please list below:
EQUALITY IMPACT ASSESSMENT COMPLETED	Not required
LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATIONS /	There is no direct impact on resources as a result of the activity outlined in this report.
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RECOMMENDATION

11. The TCS Programme Scrutiny Sub Committee are asked to **NOTE** this report.

Annex A – Delivery Confidence Assessment

Colour	Criteria Description
	Successful delivery of the project/programme to time, cost and quality appears highly likely and there are no major outstanding issues that at this stage appear to threaten delivery.
	Successful delivery appears probable. However, constant attention will be needed to ensure risks do not materialise into major issues threatening delivery.
	Successful delivery appears feasible but significant issues already exist requiring management attention. These appear resolvable at this stage and, if addressed promptly, should not present a cost/schedule overrun.
	Successful delivery of the project/programme is in doubt with major risks or issues apparent in a number of key areas. Urgent action is needed to ensure these are addressed, and establish whether resolution is feasible.
	Successful delivery of the project/programme appears to be unachievable. There are major issues which at this stage do not appear to be manageable or resolvable. The project/ programme may need rebaselining and/or overall viability re-assessed.

Appendix B – Risk Register (see separate document)

ID	TCS Ref	Risk Opened	Risk Handler	Division	Project	Risk Owner	Risk Description	Inherent Risk Rating	Inherent Risk Level	Current Controls	Current Likelihood	Current Impact	Current Risk Rating	Current Risk Level	Progress notes	Direction of Travel	Next Review Date	Target Risk Rating	Target Risk Level	Is this a Private & Confidentia I Risk?
2400	R272	30/06/2020	Lewis, Bethan	Transforming Cancer Services	Transforming Cance Services	Williams, Nicola	There is a risk that the lack of appropriate project support from the programme will lead to delays in developing the solutions required for the project success.	20	High Risk	Programme Board will look to allocate resources as appropriate. Funding request to WG to support ongoing work - Ongoing Clarification required on whether Outreach Project is an Operational or an Infrastruture Project - Ongoing TBC	4 - Probable	5 - Critical	20	High Risk	[Lewis, Bethan 09/09/22 16:03:23] 9/9/22 - Likelihood rating reverted back to previous rating of 4 and as such overall rating back to 20.	Stable/No Movement	30/09/2022	6	Moderate Risk	No
2407	R268	17/01/2020	Lewis, Bethan	Transforming Cancer Services	Radiotherapy Satellite Centre	Hague, Andrea	There is a risk that as the IRS Project needs to be phased in parallel with RSC Project, due to overlapping timeframes and interdependancies resulting in the RSC project being restricted to planning assumptions until the Equipment Project is concluded which has an inherent risk.	16	High Risk	1) RSC project requires a clear view IRS Project Risk landscape and links between the 2 projects in terms of risk registers and project plans 2) Ensure design is flexible and futureproof to allow for IRS solution 3) Review impact of delays to IRS Project on RSC Timeline	4 - Probable	4 - Major	16	High Risk	[Lewis, Bethan 06/09/22 09:54:24] 25/08/2022 - risk reviewed by Risk Owner, impact increased from 4 to a 3 increasing overall rating from a 12 to a 16.	Risk Increasing	20/10/2022	4	Low Risk	No
2528	R360	22/03/2022	Lewis, Bethan	Transforming Cancer Services	Programme	James, Carl	There is a risk that Projects remain 'On Hold' and / or incur delays impacting on the key interdependencies with other projects resulting in Programme Master Plan objectives & outcomes being delayed / not being met	16	High Risk	Stocktake of all Projects and Programme to be undertaken Refreshed Project Self-kvaluation toolkit Sl Refresh of Master Programme Plan Review Programme and Project resources / gaps and make approporiate investments where required. SI Introduce new ways of working - VF & Strategic Infrastructure Board	4 - Probable	4 - Major	16	High Risk	[Lewis, Bethan 06/09/22 09:54:24] 25/08/2022 - risk reviewed by Risk Owner, impact increased from 4 to a 3 increasing overall rating from a 12 to a 16.	Stable/No Movement	01/12/2022	6	Moderate Risk	No
2709	R391	09/09/2022	Hinton, Tracy	Transforming Cancer Services	New Velindre Cance Centre	Powell, David	There is a risk that commissioning bodies decline to fund the nVCC FBC, leading to a significant delay.	16	High Risk	Undertake further discussions with Health Board Commissioners to agree funding Engage with Welsh Government to help agree funding sources	4 - Probable	4 - Major	16	High Risk	[Lewis, Bethan 09/09/22 14:40:28] 9/9/22 - New Risk I nitial discussion have taken place, Health Boards have expressed some concern regarding funding levels required – Ongoing 2. Not started	Risk Increasing	03/10/2022	12	Significant	No
2604	R371	21/07/2022	Lewis, Bethan	Transforming Cancer Services	Integrated Radiotherapy Solution	Bryce, Gavin	There is a risk that the Trust may not be able to recruit sufficient resource to implement the Solution.	15	Significant	Interim funding has been approved by Trust Board, positions are still to be filled within the implementation team as such progress on recruitment has not been able to proceed	3 - Possible	5 - Critical	15	Significant	[Lewis, Bethan 06/09/22 09:17:21] Reviewed by Risk Owner, no changes to current rating	Risk Increasing	30/09/2022	4	Low Risk	No
2401	R317	26/02/2021	Lewis, Bethan	Transforming Cancer Services	Integrated Radiotherapy Solution	Bryce, Gavin	There is a risk that insufficient resources (people) being made available to the project will have an adverse impact on the quality of the procurement process	16	High Risk	1) Detailed project Plan to identify resource requirements 2) Approved Capital Budget for the Legal & Staffing Costs 3) Regularly monitor staff availability (annual leave & sickness)	3 - Possible	4 - Major	12	Significant	Rewis, Bethan 21/07/22 15-26-49] 21/07/22- Ukelihood of risk increased from a 2 to a 3 increasing overall rating from an 8 to a 12. Update from Project Manager on mitigating action. IRS procurement team towing with implementation team to prepare for handover and implementation. Shadow implementation Board has been established and is meeting but progress on recruitment of required resources has not been able to proceed and as a result is causing delays with agreement for implementation plans to be finalised within contract.	Risk Increasing	30/09/2022	8	Moderate Risk	No
2402	R329	10/05/2021	Lewis, Bethan	Transforming Cancer Services	Transforming Cance Services	er Williams, Nicola	There is a risk that time-consuming infrastructure work i.e. the refurbishment of a current site or identification of a new build is required to deliver the agreed outreach model of care. This could lead to delays in outreach services not being established or operational ahead of the new VCC as agreed within Programme objectives	16	High Risk	1) Identify location 2) Identify refurb / new build required 3) Establish level of local engagement with CHCs/public required 4) Identify appropriate resources from all HBs. & VUNHST (inc Project Leads, Planning etc) to ensure project is supported and managed to align with project & programme timelines 5) Establishment of ownership and governance of Project within TCS/VF environment	3 - Possible	4 - Major	12	Significant	[Lewis, Bethan 06/07/22 16:26:59] 6.7.22 - Risk reviewed by Programme Risk Advisor, no changes made to current risk ratings as no review & confirmation undertaken from Risk Owner whilst Project remains On Hold.	Stable/No Movement	30/09/2022	9	Significant	No
2405	R273	30/06/2020	Lewis, Bethan	Transforming Cancer Services	Transforming Cance Services	Williams, Nicola	There is a risk that the projected growth assumptions for outreach delivery of SACT, ambulatory care and outpatients is less than will be required, leading to undersized locations.	16	High Risk	1) Re-run projections around growth assumptions. 2) Activity model will be re-run with outputs presented to project Board. Any additional requirements will be presented to the Programme Delivery Board with recommendations. Individual meetings with Health Boards to ascertain their requirements will be undertaken.	3 - Possible	4 - Major	12	Significant	[Lewis, Bethan 06/07/22 16:26:59] 6.7.22 - Risk reviewed by Programme Risk Advisor, no changes made to current risk ratings as no review & confirmation undertaken from Risk Owner whilst Project remains On Hold.	Stable/No Movement	30/09/2022	6	Moderate Risk	No
2408	R327	22/04/2021	Lewis, Bethan	Transforming Cancer Services	Integrated Radiotherapy Solution	Bryce, Gavin	There is a risk that the approval for the FBC for the IRS Project is delayed or not approved, due to changes in approval timescless which would lead to delay to project delay, project abandonment impacting on other TCS Projects (nVCC & RSC) deliverables	16	High Risk	1) Engagement with Capital & Treasury teams - ongoing 2) Previous presentations to IIB - complete 3) OBC shared with WG Officers for comment - complete 4) WG notified of timescales for FBC so they can align resources - complete 5) Specialist advisors used to support delivery of Business Case - complete	3 - Passible	4 - Major	12	Significant	[Lewis, Bethan 21/07/22 15:29:49] 21/07/22 - Risk reviewed by Project Manager and Risk Owner no updates or changes to current ratings	Stable/No Movement	30/09/2022	8	Moderate Risk	No

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2410	R297	05/10/2020	Lewis, Bethan	Transforming Cancer Services	Programme	Morley, Sarah	Risk that there will be inadequate and / or insufficient workforce capability and capacity to meet the needs of the TCS Programme outputs. Causes - Workforce supply not available in required professionals groups or with required skills / Requirements for workforce capacity and capability no longer accurate. Consequences - Inadequate staffing of Velindre facilities across the SE Wales region / Impact on providing treatment and care to patients	12	Significant	1) Service planning is sufficiently developed to facilitate effective workforce planning techniquies to be applied 2) Ensuring each project has clear and well developed workforce plans which are predicated on clear service plans 3) Clarity of expectations for workforce team involvement 4) Clarity of Role & Responsibility for Workforce planning input team in relation to Project & Programme need 5) Workforce team to support service to ensure the right people are available and allocated to support	3 - Passible	4 - Major	12	Significant	[Lewis, Bethan 06/07/22 10:54:28] 5/7/22 - risk reviewed by Risk Owner - no change to current ratings Further action added and date updated to reflect - 6) Trust Attraction and Retention Project underway to support current and future workforce supply and shape challenges	Stable/No Movement	31/10/2022	2	Low Risk	No
2416	R274	30/06/2020	Lewis, Bethan	Transforming Cancer Services	Transforming Cancer Services	Williams, Nicola	There is a risk that potential further waves of COVID may lead to delays that effect the development & key activity of the outreach project	20	High Risk	Agreement with HBs of ways of working during any possible covid resurgence to ensure that project is able to continue making progress	3 - Possible	4 - Major	12	Significant	Lewis, Bethan 06/07/22 16:27:33] 6.7.22 - Risk reviewed by Programme Risk Advisor, no changes made to current risk ratings as no review & confirmation undertaken by Risk Owner whilst Project remains On Hold.	Stable/No Movement	30/09/2022	6	Moderate Risk	No
2417	R279	08/07/2020	Lewis, Bethan	Transforming Cancer Services	Programme	Fear, Lauren	There is a risk that there is a lack of TCS Programme wide communications plan resulting in the objectives of projects and interdependant links are not communicated effectively and the wider networked clinical model not understood.	12	Significant	1) Revise TCS website - complete 2) Improve internal TCS teams Comms - complete 3) Improvements to intranet - started 4) Improvements to the link between Programme Governance and Comms - tbc	4 - Probabile	3 - Moderate	12	Significant	Lewis, Bethan 09/09/22 15:06:10] 9/9/22 - Risk reviewed by NG, actions updated - no change to risk rating 1) Completed - TCS website moved onto MURA platform. Web presence due further review September 2022. 2) last recruitment exercise to be completed 12 Sept 2022. 3) Intranet presence due to be completed before end of October 2022. 4) Metrics under review for communications activity and development of publicly and internally available survey/feedback stations being implemented. 5) Programme communications and engagement strategy review to be completed by end of October 2022. 6) ways of working to be confirmed by end of October 2026.	Stable/No Movement	31/10/2022	4	Low Risk	No
2418	R298	05/10/2020	Lewis, Bethan	Transforming Cancer Services	Programme	Fear, Lauren	Risk that key decision makers and non-clinical stakeholders including the local community and patients from across the region publicly oppose TCS clinical model. Causes: - lack of continuous engagement with wider stakeholder group - insinformation not addressed quickly and effectively - ineffective communication & engagement with Political Stakeholders - inconsistent messaging - lack of awareness of history of programme - lack of alignment between staff working on TCS - Programme/VCC BAU & Velinder Futures leading to mixed messages delivered to stakeholders - change of political leadership on local/national level leading to policy change Consequences: - WG and elected representatives do not support key	16	High Risk	1) Communications / stakeholder engagement plan in development 2) Established digital channels including dedicated webpages for TCS Programme, Velinder Matters social media channels 3) Variety of stakeholder events held over a number of years 3) Variety of stakeholder events held over a number of years 5) Ongoing engagement with local elected members (MS, MP, Councillors) 6) Ongoing engagement with local residents and community groups 7) ongoing engagement with Ada and Cardiff Council 8) Monthly meeting with WG Head of Capital and Director General.	4 - Probable	3 - Moderate	12	Significant	(Lewis, Bethan 09/09/22 15:02:41) 09/09/22 - Risk Description updated. Risk reviewed by NG, no change to current risk rating	Stable/No Movement	31/10/2022	4	Low Risk	No
2574	R367	01/06/2022	Lewis, Bethan	Transforming Cancer Services	Radiotherapy Satellite Centre	Hague, Andrea	decisions There is a risk that delays to the RSC could lead to extra Linax needing to be installed into VCC and them moved to nVCC at a later date, impacting anicipated Project and Programme timescales and costs	12	Significant	1) Current operational capacity conversations in regards to temporary bunkers remains ongoing to ensure service can meet demand 2) Discussions with other providers to explore temporary increased capacity 3) Monitoring of Project Plans with Project team to ensure timelines are met and anticipate and mitigate any delays.	3 - Possible	4 - Major	12	Significant	[Lewis, Bethan 06/09/22 09:59:02] 25/08/2022 - risk reviewed by Risk Owner, no updates or changes to risk rating	Stable/No Movement	30/09/2022	8	Moderate Risk	Yes
2577	R345	25/05/2022	Lewis, Bethan	Transforming Cancer Services	Programme	Hague, Andrea	There is a risk that if TrAMs is not delivered to expected timescales then nVCC will not have the capacity to deliver its own service	12	Significant	Current timescales expect TrAMs delivery to run in parallel with TCS/nVCC View details project plan once final Business Case approved - Ongoing Key stakeholders in project board and ensure Chief Pharmacist and nVCC Project team remain in communication in regards to progress and project plan alignment Attend regular TrAMs Project Board and monitor project progress - Ongoing due to be established 2022/73	4 - Probable	3 - Moderate	12	Significant	(Lewis, Bethan 06/07/22 15:55:54) 5/7/22 - risk transferred from nVCC Project to Programme	Stable/No Movement	30/09/2022	6	Moderate Risk	No
2712	R382	09/09/2022	Hinton, Tracy	Transforming Cancer Services	New Velindre Cancer Centre	Powell, David	There is a risk that the Trust does not have enough capacity in its digital workforce to develop the programmes needed in order to meet the nVCC digital plans proposed by the successful participant, leading to reduced quality in terms of delight and commodity at the nVCC.	12	Significant	1. Map out the requirements/activity required to deliver the successful participant's proposals and if necessary undertake recruitment and acquire external resource. 2. Present findings and discuss at nVCC digital board 3. Prioritise work areas and agree extended timelines for products and services that do not need to be available from 'day one'. 4. Alternatively to point 3, agree products and service that are not required.	3 - Possible	4 - Major	12	Significant	[Lewis, Bethan 09/09/22 14:42:16] 9/9/22 - New Risk 1. Ongoing 2. Not started 3. Undertake if required 4. Undertake if required	Risk Increasing	01/11/2022	6	Moderate Risk	No

2713	R383	09/09/2022	Hinton, Tracy	Transforming Cancer Services	New Velindre Cancer Centre	Powell, David	There is a risk that the requirement for a PET CT scanner will be introduced, leading to a reduced amount of admin space at a detriment to staff experience of the nVCC.	12	Significant	Ensure that design allows sufficient admin space that the introduction of PET CT would not lead to a sub-standard amount of admin space for staff.	4 - Probable	3 - Moderate	12	Significant	[Lewis, Bethan 09/09/22 14:35:51] 9/9/22 - New Risk 1. Acorn have developed two design options. Option 1 provides the amount of admin space stipulated in Schedule of Accommodation (SOA) v14 (as opposed to Acom's final tender which was 326sqm short). This is the option that will be submitted for reserved matters.	Risk Increasing	27/09/2022	4	Low Risk	No
2716	R394	09/09/2022	Lewis, Bethan	Transforming Cancer Services	Programme	TBC - Tom Crosby / Jaz Abraham	Risk that internal and/or external Clinical Stakeholders publicly oppose TCS clinical model. Causes: - lack of continuous engagement with VUNHST staff including VCC SLT - misriformation shared internally and within NHS Wales Networks not addressed quickly and effectively - ineffective communication & engagement with Professional Bodies & Unions - inemfective communication & engagement with Professional Bodies & Unions - lack of alignment between TCS Programme, VCC bau & Velindre Futures and other strategic priorities across the organisation and individuals leading to disjointed engagement and communications - no clear clinical communications and engagement plan vis a vis UHB partners. Consequences: - WG and LHBs do not support key decisions - reputational damage for Velindre Trust as an	15	Significant	1) Continuous communication and engagement with staff re: projects using established VUNHST communications and engagement channels. 2) Opportunities to include staff in development plans for TCS, VF optimised. 3) Professional meeting forums held e.g. DoPs, MDs, CEO's with clear communications outputs to follow. 4) Dialogue between existing cancer forums e.g. cancer leads in SE Wales S) Clear communications strategy, plan and resource to support regional clinical activity e.g. cancer leads in SE Wales HBs - ongoing through CCLG.	4 - Probable	3 - Moderate	12	Significant	[Lewis, Bethan 09/09/22 16:22:29] 9/9/22 - New Risk - Risk Owner TBC 1) Methods established within project and programme communications plans. 2) Opportunies embedded in design project for nVCC and IRS. 3) Being pursued by senior clinical leadreship teams. 4) being pursued by senior VUNHST staff 5) plan to be developed by end of Q2 2022.	Risk Increasing	30/09/2022	3	Low Risk	No



TCS PROGRAMME SCRUINY SUB-COMMITEE

HEFYD UPDATE

DATE OF MEETING	22 ND September 2022
PUBLIC OR PRIVATE REPORT	Public
IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report
PREPARED BY	Hannah Moscrop, Project Manager RD&I
PRESENTED BY	Lauren Fear, Director Corporate Governance & Chief of Staff Hannah Moscrop, Project Manager RD&I
EXECUTIVE SPONSOR APPROVED	LAUREN FEAR, DIRECTOR CORPORATE GOVERNANCE & CHIEF OF STAFF
_	
REPORT PURPOSE	FOR NOTING

REPORT PURPOSE FOR NOTING	
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COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING										
COMMITTEE OR GROUP	DATE	OUTCOME								
TCS Programme Delivery Board	15/9/2022	NOTED								

ACRON	NYMS
	New Velindre Cancer Centre
TCS	Transforming Cancer Services [in South East Wales Programme]



1. SITUATION

- 1.1 The 'Value Added' programme of work has been renamed 'Hefyd' which means 'Also' in Welsh.
- 1.2 The paper provides an update on activity undertaken within the Hefyd programme of works, and a forward look on forthcoming activity.

2. KEY MATTERS FOR CONSIDERATION

Update on activities undertaken

Sustainable Summer Jamboree

- 2.1 The nVCC Project and Trust Sustainability Team collaborated on the development of a 'Sustainable Summer Jamboree', hosted in a giant tepee on site at the Velindre Cancer Centre Staff Well-being Hub (**Appendices A, B and C**).
 - The Jamboree comprised of a series of staff and community engagement events over the summer – linking themes of sustainability, well-being, art and the nVCC and EW Projects.
 - The Jamboree was undertake as a 'soft launch' and 'tester' for the longerterm Hefyd programme, and sought to and highlight future opportunities, which will be rolled out from/near the MIM site once the Enabling Works commence.
 - A number of events were targeted at children and young people, paving the way for future work in the Children and Education element of the Hefyd programme.
- 2.2 The green social prescribing work provided by Ray of Light at Velindre Cancer Centre has been nominated for the Mental Health and Wellbeing Wales Awards for 'Best Mental Health Support Service'.
- 2.3 To ensure alignment with the work of Acorn and Walters in the Community Benefits space, the Heyfd Social Value Sponsorship Group terms of reference has been refined to ensure clarity and separate from the contractual Community Benefits nVCC Successful Participant Workstream.



Forward look – next steps and planned work

Community Panel

- 2.4 The Community Panel launch will take place in September, seeking members from across the whole of the Velindre catchment area.
- 2.5 Members of the Community Panel will be invited to regular online and in-person events across the region showcasing different aspects of our work. They will also be first to be offered the opportunity to take part in our green volunteering activities and arts projects, and to give your views on our ongoing and upcoming work.
- 2.6 The first set of outreach events for the Community Panel will be focused on the Arts Strategy and will be held in various locations across the South East Wales region.

Green Social Prescribing and Site Enhancements

2.7 The Enabling Works Project Board have approved spend based on outline costs for a number of site enhancement activities.

Next steps include:

- 2.8 Development of a partnership arrangement with the social enterprise, Down To Earth. Initial parts programme of work will comprise:
 - A tepee being set up on the MIM site to act as a 'workshop' base for green social prescribing activities
 - The construction of a roundhouse, cleft fencing, furniture making with various groups identified by the Trust and Down To Earth – for example, refugee groups and head injury groups; as well as volunteers from the Trust and the local community.
- 2.9 Planning permission is being sought for both the tepee and roundhouse, and following the agreement on the partnership arrangement, it is intended that Down To Earth will commence their programme of work at the start of November 2022.

Volunteering

2.10 A draft Volunteering Procedure has been developed with the green social prescribing opportunities.



2.11 In due course, volunteering opportunities will be advertised online and people able to sign up to them through the Civica programme. This will include those run by Down To Earth, but may include additional opportunities run through the Hefyd programme (in additional to those within VCC, etc.).

Arts and Culture Programme

- 2.12 The Arts Strategy will be taken to the September nVCC Project Board and TCS Programme Delivery Board for approval. There will then be socialisation with the whole Board through Strategic Development and Development sessions.
- 2.13 Following this, the recruitment process for an Arts Co-ordinator post can commence (joint-funded with the Arts Council Wales).

3. IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	There are no specific quality and safety implications related to the activity outined in this report.
RELATED HEALTHCARE STANDARD	Governance, Leadership and Accountability If more than one Healthcare Standard applies please list below:
EQUALITY IMPACT ASSESSMENT COMPLETED	Not required
LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATIONS / IMPACT	There is no direct impact on resources as a result of the activity outlined in this report.



4. RECOMMENDATION

4.1 The Committee are asked to **NOTE** this paper and the attached Appendices.



Appendix A: Sustainable Summer Jamboree Proposal Document



Jambori Haf Cynaliadwy | Sustainable Summer Jamboree

What	As part of the Value Added initiative, the new Velindre Cancer Centre (nVCC), Enabling Works (EW) Projects, and the Trust Sustainability Team are arranging a series of staff and community engagement events over the summer – linking themes of sustainability, well-being, art and the nVCC and EW Projects.
Why	 Engagement with staff, Engagement with the local community, Promotion and opportunity for staff to input into implementation of the Trust's Sustainability Strategy, Promotion of the Trust's and Projects' sustainability aims, Promotion of the Trust's Well-being Objectives, Promotion of the Well-being of Future Generations goals, Serotonin boost for Trust (esp. VCC) staff. Connecting staff across the Trust (WBS, VCC, TCS and Corporate)



	opportunities, wh	This will to be a launch Value Added programme, and highlight future opportunities, which will be rolled out from/near the MIM site once the Enabling Works commence.											
Benefits	 Providing a space for staff to improve their well-being through the opportunity to take part in various workshops, engaging with the nVCC project Engaging staff with the nVCC Successful Participant and nVCC design solution; Boosting the profile of the nVCC and EW Projects as serious about the environment and sustainability; Highlighting the Trust's commitment to the Well-being of Future Generations goals and are contributing to the Trust's Well-being Objectives and raising awareness of the Act; Gathering feedback on the nVCC design, Trust's work or Future Gens and Well-being, effectiveness and impact of green social prescribing and arts/craft as a well-being tool; Engaging with the community including children and young people — something the Future Generations office has previously commended us on; Bringing together various parts of the Trust — nVCC and VCC WBS, Fundraising, HQ. 												
Dioko and													
Risks and	Risk	Mitigation											
Mitigations	Risk Low attendance	Mitigation Internal and external communications, promotion within the community, encouragement by managers for staff to attend											
		Internal and external communications, promotion within the community, encouragement by											
	Low attendance Poor publicity –	Internal and external communications, promotion within the community, encouragement by managers for staff to attend Long-term commitment to sustainability – through the Strategy and through the nVCC Project. Will show clear and tangible commitments and targets											
	Low attendance Poor publicity – 'greenwashing' Weather/Health	Internal and external communications, promotion within the community, encouragement by managers for staff to attend Long-term commitment to sustainability – through the Strategy and through the nVCC Project. Will show clear and tangible commitments and targets the Trust is striving for. Relevant assessments undertaken, working with											
	Low attendance Poor publicity – 'greenwashing' Weather/Health and Safety/Fire Accessibility issues	Internal and external communications, promotion within the community, encouragement by managers for staff to attend Long-term commitment to sustainability – through the Strategy and through the nVCC Project. Will show clear and tangible commitments and targets the Trust is striving for. Relevant assessments undertaken, working with Estates and Ops Confirmed use of disabled toilets and kitchen (water) in Staff Well-being Hub Team – Rhiannon Freshney, Kate Hammond,											



	External Resources – nVCC Successful Participant engagement sessions; Ray of Light green social prescribing, Down To Earth sustainability workshops; various voluntary organisations (Environmental, social value), and various suppliers for Arts and Crafts workshops/talks.										
When	10 th August – 1 st Septembe	0 th August – 1 st September 2022									
Where	n a giant tepee, based in the car park of the VCC Staff Well-being Hub (Noddfa). This has the added benefit of acting as a focal point for the Staff Wellbeing Hub, encouraging staff to attend Noddfa. Estates and Operational Services are supportive of this location and use.										
How Much?	To Earth – with money remark postponed in summer 2021 All other events are being postponents.	The nVCC Project has an ongoing 'Quick Wins' contract with Down To Earth – with money remaining from 'quick win' events which were postponed in summer 2021. These events will replace those. All other events are being provided by volunteers or current Velindre staff and are therefore at no cost.									
Well-being Goals and Trust Wellbeing Objectives	A Prosperous Wales Cymru lewyrchus A Resilient Wales Cymru Gydnerth A More Equal Wales Cymru ayn fwy cyfartal A Healthier Wales Cymru iachach A Wales of Cohesive Communities Cymru o gymunedau cydlynus A Wales of Vibrant Culture & Thriving Welsh Language Cymru â diwylliant bywiog lie mae'r Gymraeg yn ffynnu A Globally Responsible Wales Cymru sy'n gyfrifol ar lefel fyd-eang	Long-term Hirdymor		e Ways of m dull o we Involvement Cynnwys	_	Prevention Atal					



Velindre University NHS Trust Well-being Objectives

Reduce health inequalities, make it easier to access the best possible healthcare when it is needed and help prevent ill health by collaborating with the people of Wales in novel ways Improve the health and well-being of families across Wales by striving to care for the needs of the whole person

Create new, highly skilled jobs and attract investment by increasing our focus on research, innovation and new models of delivery

Deliver bold solutions to the environmental challenges posed by our activities

Bring communities and generations together through involvement in the planning and delivery of our services

Demonstrate respect for the diverse cultural heritage of modern Wales

Strengthen the international reputation of the Trust as a centre of excellence for teaching, research and technical innovation whilst also making a lasting contribution to global well-being

Appendix B: Sustainable Summer Jamboree Programme of Events

	Monday
SER 2022	8 Tepee Installation!
EPTEMB	15 Environmental Awareness & Hedgehog Helpline Cymru Drop In 1-4pm For Staff
UST & S	22 Down to Earth - Green Design Workshop 10-2:30pm For Families - Please Book!
AUG	29 Bank Holiday

onday Tuesday

9

Wednesday

Thursday

Arts, Crafts &

Chat!

Drop in Session

For All

Arts, Crafts &

Chat!

Drop in Session

For All

Friday

Tepee

10 Arts in Health -**Moving House Project**

Drop in Session! For All

Design a Patient Garden Drop In 10:00am - 12:00pm & 2-4pm For All

Pelvic Floor Health Workshop with Jilly Bond 12:30-1:30pm For Staff

> **Morning Motivation!** Drop In 8:30-9am For Staff **Bone Marrow Clinic** Drop In 9am-1pm For All Comic Workshop with Mike Collins Drop In 2-4pm For All **Sustainable Fashion Party** Drop In 5-7pm For All

Morning Motivation! Drop In 8:30-9am For Staff

Down to Earth - Green **Design Workshop** 10am - 2:30pm

For Families - Please Book!

12 Creepy Crawlie **Crafts Workshop** Drop In - 10am-3pm **Families**

SUSTAINABLE

SUMMER

JAMBORE

19 Fundraising Drop In For All

Yoga for Staff 12-12:20pm and 12:30-12:50pm

26 Dementia Friends Training! **Drop In 10-11am For Staff Meditation Station** Drop In 2-4pm For All

24 Young **Ambassador Event Invite Only**

Down to Earth -**Green Design** Workshop

10am - 2:30pm

For Families -**Please Book!**

Tepee Taken Down -**End of Jamboree!**

Installation!

16 connecting with nature Drop In 10:30am-12:30pm For anyone affected by cancer

Ray of Light

Drop In Afternoon

Ray of Light - connecting with nature Drop In 10:30am-12:30pm For anyone affected by cancer

Drop In Afternoon

Ray of Light 30 connecting with nature Drop In 10:30am-12:30pm For anyone affected by cancer

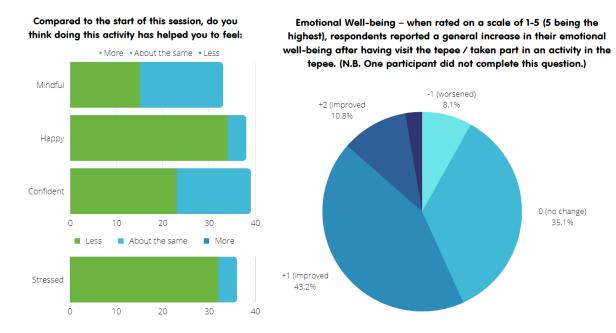
Drop In Afternoon



Appendix C: Sustainable Summer Jamboree Outcomes and Feedback

A survey was provided for those who wanted to complete before and after undertaking an activity at the tepee.

In total, 42 responses were received. It is worth noting that significantly more people attended events at the tepee, but during busier periods, we struggled to get round to asking people to complete the survey.



Further outcomes from the survey are detailed further down, and the full responses are available on request.

A daily log was kept, noting feedback, lessons learnt, visitor types, and general thoughts and outcomes from each day.

Key findings from the daily log include:

"Build it and they will come" – we noted huge numbers of staff visitors throughout the month. Initially many people curious as to what was going on, and word spread quickly. As the month progressed, repeat visitors and those who had been recommended to come by other attendees – we noted many coming back as they felt comfortable in the space. At the end, people expressed regret that the space was not permanent.

Velindre departments who visited the tepee at least once. Of these, Radiotherapy, Nursing, Medical Physics and Pharmacy were the most frequent visitors. A considerable



number of staff visiting were interested but said they did not have time to join activities or events during the working day – they often do not use their full lunch break time.

Depts visiting the tepee					
Administration	Fundraising	Pharmacy			
Cleaners	Medical Physics	Radiotherapy			
Clinical Psychology	Medical Records	SLT			
CNS Breast Team	Nuclear Medicine	TCS			
Consultant	Nursing	Therapies			
Counselling	Operations	Velindre Futures			
Estates	Other / Dept Unknown	WAST			
Exec Team	Patient Support Services	WBS			

Interest in sustainability and circular economy – staff were really keen on the sustainability work, and the circulate economy initiatives in the tepee (Working Wardrobe, Book Swap, Clothes Swap, Bra Bank). Over the month, over 50 items of clothing were donated to Working Wardrobe and over 200 books to the Book Swap. A whole Bra Bank donation bag was filled.

Unquantifiable benefits of arts and crafts – the public arts and crafts events held in the tepee were incredibly popular – with the tepee full to capacity for the duration of these events.

Families were really interested in learning about sustainability and in nature-based activities. We received some great feedback from staff members and members of the public who had brought their children along to the 'Creepy Crawlies' and 'In the Garden' Arts and Craft family events.

In addition to the specific events, general arts and crafts drop in days were held for the duration of the Jamboree, and some touching feedback was received from patients, patient families and former patients.

This feedback highlighted both the importance both of providing the opportunity to do arts and crafts (/non-treatment-based activities) at the Cancer Centre, and of having a dedicated, non-clinical space in which to do so. Considerable feedback was noted from patients and patient families who felt that having the opportunity to do arts and crafts in the tepee made the cancer centre a friendly / less scary place; the venue gave them a chance to 'escape' and to make memories with family members; and on an more basic



level – gave patient's children something to do during the school holidays rather than waiting in a hot car waiting.

Daily log note: Very emotional feedback from a former patient who had **felt lost after treatment ended** and had no support - was really grateful for the event (single parent so this **gave her some respite**, sit down and chat) and would like to see more (for kids of patients/former patients). We referred to

Daily log note: Support for this for patient families permanently - **meant a lot to many peopl**e.

Excerpt from Ray of Light Activity Leader: The teepee provides an accessible, safe and restorative environment in which to do our activities. It gave us a tranquil space, which felt a world away from the busy hospital site. The participants were visibly more relaxed in the teepee than our usual sessions in



Survey outcomes

Demographics

	Staff	Patient / Carer	Community	Other	Total
Female	13	4	9	10	36
Male	1	1	1	3	6
Total	14	5	10	13	42

	11 or under	12 to 17	18 to 25	36 to 64	64+
Female	1	1	13	20	2
Male	0	0	1	3	1
Total	1	1	14	23	3

How are you feeling? (N.B. Some participants gave more than one response)

	Нарру	OK	Sad	Stressed	Tired
How are you feeling today? (At start of visit)	20	11	1	8	14
How did you feel after visiting the tepee / taking part in activities in the tepee?	37	4	0	0	2

Do you often take part in this kind of activity?

Yes, often	Yes, occasionally	No, never
9	23	10

Emotional Well-being

When rated on a scale of 1-5 (5 being the highest), respondents reported a general increase in their emotional well-being after having visit the tepee / taken part in an activity in the tepee. (N.B. One participant did not complete this question.)

Emotional Well-being Difference	-1 (worsened)	0 (no change)	+1 (improved	+2 (improved	+3 (improved
Staff		8	6		



Patient /	1		4		
Carer					
Community		2	5	2	1
Other	2	3	5	2	
Total	3	13	16	4	1

Compared to the start of this session, do you think doing this activity has helped you to feel:

	Stressed	Mindful	Нарру	Confident
More	0	15	34	23
About the	4	18	4	16
same				
Less	32	0	0	0

If you wouldn't before, would you consider doing this sort of activity to help you to feel better when you are having a bad day?					
Yes	Maybe				
35 3					

Is there anything else you'd lil	Is there anything else you'd like to tell us?					
Kids loved it! We learnt all about hedgehogs	we all loved the time we spent with you all	Fantastic. Love this. There is such an unmet need for this. Love it!				
Thank you!	Great Activities!	Thank you!				
Learnt so much about sustainable fashion, I'll be hitting up the charity shops soon.	This is a brilliant way to enable us to feel engaged, relaxed and supported. All whilst learning new fun skills	Loved doing the activities in the tepee				
Watching our group co-operate to make the flower bunting, some are humming, some laughing, we have felt as at home in this lovely peaceful space. Its a lovely place for mindful crafts	Excellent service, bringing people together, helping mentally, learning new skills	As the session was unexpected it lifted my spirits and I have something to take home to remember the time working on my bug hotel. Thank you				
We absolutely loved it!	Very good for all the family					