4.4.0	Project 3a: IRS Update
	To be led by Gavin Bryce, Associate Director of Programmes, TCS
	VERBAL UPDATE
	10.50 - 11.00
5.0.0	Engagement and Collaboration
5.1.0	Communications & Engagement
	To be led by Non Gwilym, Director of Communications and Engagement
	To note
	11.00 - 11.05
	5.1_Comms Feb 2022 v1.docx
6.0.0	Any Other Business
6.1.0	Judicial Review Update
	To be led by Lauren Fear, Director of Corporate Governance & Chief of Staff
	VERBAL UPDATE
	11.05 - 11.10
7.0.0	Review of the Meeting
	Led by Stephen Harries, Chair
8.0.0	Date & Time of Next Meeting
	Tuesday 22nd March at 11.30am – 12.30pm via Microsoft Teams
9.0.0	Close

TCS Programme Scrutiny Committee
Public Session

MINUTES OF THE MEETING HELD
19th January 2022
14.00 – 15.00 Trust Headquarters, Nantgarw
(via Teams)

Members Present:

Stephen Harries (SHarries)	Independent Member (Chair)
Hilary Jones (HJ)	Independent Member
Gareth Jones (GJ)	Independent Member
Andrew Westwell (AW)	Independent Member
Professor Donna Mead (DM)	Trust Chairman

In attendance:

Steve Ham (SHam)	Trust Chief Executive
Carl James (CJ)	Director of Strategic Transformation, Planning & Digital
Andrea Hague (AH)	Director of Service Transformation, Velindre Cancer Centre
Lauren Fear (LF)	Director of Corporate Governance and Chief of Staff
Cath OBrien (COB)	Chief Operating Officer
Bethan Lewis (BL)	TCS Programme Planner and Risk Advisor
Carys Jones (CJones)	Senior Programme Delivery and Assurance Manager

Apologies:

Non Gwilym (NG)	Director of Communications and Engagement
Mark Ash	Assistant Director of Finance

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.	
1.4	**Minutes of the Committee Meeting held on 21st December 2021** The minutes were confirmed to be an accurate record of the meeting on 21st December 2021 and were **approved**.	
1.5	**Action Log** *Action 109: TCS Programme Managers Update:* An update was provided to the Committee to assure good progress is being made. CJ and LF are working through and finalising arrangements with the	

	University for the service specification. It was confirmed the service specification went through the TCS Programme Scrutiny Sub-Committee in December and RD&I Committee in January. The service specification will be going to Trust Board for approval. ***Action 111: TCS Finance Report:*** It was confirmed a session will be arranged with the Independent Members to discuss how best to report the whole picture going forward. During this session they will be able to focus on each project and what their priorities are going forward. This session will be valuable for all as everyone will be sighted on the issues and pressures of each project. This session will be arranged as soon as possible. All closed actions were **approved**.	
	PROGRAMME GOVERNANCE	
2.1	**TCS Finance Report** The TCS Finance Report highlights the TCS Programme are on track to breakeven on Revenue and Capital by the end of the financial year. DM queried how the trust budget for the contributions for each project and how the budgeting process works. It was confirmed the TCS Programme is funded by two primary means: capital projects and revenue funding. These are funded by Welsh Government and our commissioners. It was suggested to avoid using the phrase "core budgets" in the future to help avoid confusion. The Sub-Committee **Noted** the TCS Finance Report.	
2.2	**TCS Programme Risk Register** The TCS Programme Risk Register report was presented to the Sub-Committee. The paper outlines the monthly reviews of each project and programme risk. **ACTION**: BL to add the due date to IO62: Bridge Construction Timeline as there is no date against this particular risk. It was highlighted due to the tight timeframe with the Christmas break and the papers being published some of the risks haven't been reviewed this month by each project. The teams will continue to monitor and review these risks each month. **ACTION**: BL to confirm with project team regarding R350: Inflation. This risk has been allocated a new scoring of 12 and they are waiting for mitigations and	**BL** **BL**

	actions to be determined. This is marked as being a high risk, but the scoring is 12. BL to gain clarification and update accordingly. It was highlighted as items are brought across into Datix, there might a short period cross over where the ID's not necessarily match up but the team are looking at how they can improve this. The issues will be continued to be monitored and logged via excel as there is no way of inputting that information into the Datix system. Datix is only used for risks not issues. It was confirmed there is no module in Datix for issues currently. **ACTION**: BL to contact the Datix team to enquire as to whether the concept of issues may be considered as being in scope of the Datix system in future. The Sub-Committee **Noted** the Paper.		**BL**
	PROGRAMME DELIVERY		
3.1	**TCS Programme Managers Update** ***Velindre @ UHW Programme Progress Update*** The Velindre @ UHW work programme continues to progress well with notable progress in respect of the Cardiff Cancer Research Hub and the Acute and Unscheduled Care projects. The Tripartite Cardiff Cancer Research Hub Clinical Output Specification has been completed which details the future service model and high level plan for a phased approach, which includes the infrastructure and workforce required to deliver research success. The proposal endorsed by the Joint Cardiff and Vale University Health Board, Velindre University NHS Trust and Cardiff University Partnership Board and will be received by Trust Board for approval on 27th January 2022. The first Velindre @ UHW Programme Board meeting is scheduled for 20th January. The Unscheduled Care Acute project is making good progress. Workshops are being held to work through clinical details around the pathways between Velindre University NHS Trust and Cardiff and Vale University Health Board. ***Velindre Futures Programme*** The December Velindre Futures Programme Board was stood down due to the unavailability of key attendees. The Sub-Committee **Noted** the Paper.		
3.2	**Nuffield Trust Report – Progress Update** The work involved within the Nuffield Trust Report has been paused due to Covid pressures for the time being. The committee were updated that the Collaborative Cancer Leadership Group workshop has also been postponed		

	due to Covid pressures. The workshop was originally scheduled for January but is being rearranged for the end of March. The Sub-Committee **Noted** the verbal update.	
3.3	**Value Add Engagement Programme** The Value Add Engagement paper was presented to the committee, the following items were identified: • In building a new hospital, it intensifies the opportunities for further areas in which the Trust can lead or collectively sponsor to add further value. • There are opportunities to enhance the site itself. • Within the organisation, there will be a sponsorship group to lead collaboration across the matrix of activities. • This will be led by engagement with our patients, staff and community as to what matters most to them. The initial view of scope has been identified as: • Community Benefits Programme e.g. sports clubs developments, apprenticeships • Early site enhancement works • Community Fund with small grants • Engagement programme • Future Green agenda – e.g., green transport (including metro, bus routes, cycling schemes – for patients and staff) and green spaces. • Research Development and Innovation Programme e.g., sustainability and future generation research • Charity investment programme • Arts Charity and Community Fund proposals The site enhancements for the works and timescales were provided between Autumn 2021 – 2024. The collaboration group will be the place where we can reflect on our work and outcomes to date, develop our ambitions for future 'value added' projects, and provide updates for our Communications and Engagement Team to best promote our work to the wider community and ensure effective and meaningful engagement and community benefits. It was confirmed the various elements of scope will go through their own governance routes as appropriate. The Sub-Committee **Noted** the Paper.	
4.0	**PROJECT DELIVERY**	

4.1	**Project 1: Enabling Works Update** A verbal update was provided to the Committee regarding the Enabling Works. Good progress is being made with the FBC sign off. The Sub-Committee **Noted** the verbal update.	
4.2	**Competitive Dialogue Update** A verbal update was provided to the Committee regarding competitive dialogue. The process is on track and expectation is that there will be two high quality designs for the Trust Board to make a decision on. The Sub-Committee **Noted** the verbal update.	
4.3	**Project 3a: Integrated Radiotherapy Solution Update** A verbal update was provided to the Committee regarding Integrated Radiotherapy Solution. The Integrated Radiotherapy Solution team are working through the final details to issue the re-run of the Invitation to Submit Final Tender which will be brought to the January Trust Board for approval. The Sub-Committee **Noted** the verbal update.	
5.0	**ENGAGEMENT & COLLABORATION**	
5.1	**Communications & Engagements** The Sub-Committee **Noted** the Paper.	
8.0	**DATE AND TIME OF NEXT MEETING**	
	22nd February 2022 at 10am via Microsoft Teams.	

Acronyms:

CCLG – Cancer Collaborate Leadership Group
nVCC – New Velindre Cancer Centre
AOS – Acute Oncology Service

TCS Programme Scrutiny Sub-Committee

February 2022

Action Summary – PUBLIC

No.	Action	Owner	Date Raised	Target Date	Progress to date	Status (Open / Closed)
109	**TCS Programme Managers Update:** The Cardiff Cancer Research Hub at UHW are drafting the first proposal. A full update will be provided at the TCS Programme Scrutiny Sub-Committee. (25/10/2021 – 3.1)	**Carl James**	25/10/2021	February 2022	Service Specification was approved by Trust Board in January.	**CLOSED**
111	**TCS Finance Report:** Meeting with Independent Members and Steve Ham to discuss how best to report whole picture across the portfolio of projects going forwards. (21/12/2021 – 2.1)	**Steve Ham**	21/12/2021	February 2022	**Updated 16/02/2022:** Meeting held. Importance of interdependencies discussed in detail – and how reporting and papers will make this clearer going forwards	**CLOSED**
112	**TCS Programme Risk Register:** BL to add the due date to IO62: Bridge Construction Timeline as there is no date against this particular risk. (19/01/2022 – 2.2)	**Bethan Lewis**	19/01/2022	22/02/2022	**Update: 11/02/2022** Date of resolution for this Issue will be TBC for now. The possible mitigations being considered will take some time to understand which will be best depending on how the EW progresses.	**OPEN**
113	**TCS Programme Risk Register:** BL to check with project team regarding R350: Inflammation. This risk has been allocated a new scoring of 12 and they are	**Bethan Lewis**	19/01/2022	22/02/2022	**Update: 11/02/2022** The risk score was amended, the correct rating is 12.	**CLOSED**

No.	Action	Owner	Date Raised	Target Date	Progress to date	Status (Open / Closed)
	waiting for mitigations and actions to be determined. This is marked as being a high risk, but the scoring is 12. BL to gain clarification and update accordingly. (19/01/2022 – 2.2)					
114	**TCS Programme Risk Register:** BL to contact the Datix team to enquire as to whether the concept of issues may be considered as being in scope of the Datix system in future. (19/01/2022 – 2.2)	**Bethan Lewis**	19/01/2022	22/02/2022	**Update: 11/02/2022** This has been discussed with the Datix team. This could be possible in the future One For Wales version.	**OPEN**

TCS PROGRAMME SCRUTINY SUB-COMMITTEE

TCS PROGRAMME FINANCIAL REPORT FOR 2021-22 JANUARY 2022

DATE OF MEETING	22nd February 2022

PUBLIC OR PRIVATE REPORT	Public

IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report

PREPARED BY	Mark Ash, Assistant Project Director
PRESENTED BY	Mark Ash, Assistant Project Director
EXECUTIVE SPONSOR APPROVED	Matthew Bunce, Executive Director of Finance

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	15/02/2022	NOTED

ACRONYMS

TCS	Transforming Cancer Services
Trust	Velindre University NHS Trust
PBC	Project Business Case
PMO	Programme Management Office
EW	nVCC Enabling Works
nVCC	New Velindre Cancer Centre
WG	Welsh Government
IRS	Integrated Radiotherapy Solution
SDT	Service Delivery and Transformation

1.   PURPOSE

1.1   The purpose of this report is to provide a financial update to the TCS Programme Delivery Board for the financial year 2021-22, outlining spend to date against budget as at Month 10.

2.   BACKGROUND

2.1   In January 2015 the Minister for Health and Social Services approved the initial version of the Strategic Outline Programme 'Transforming Cancer Services in South East Wales'. Following the completion of the Key Stage Review in June/July 2015, approval was received from the Minister to proceed to the next stage of the Programme.

2.2   As at March 2021, the Cabinet Secretary for Health, Well-being and Sport, had approved capital and revenue funding for the TCS Programme and associated Projects of £20.710m and £1.678m respectively.

2.3   Included in this approval was funding for the IRS Procurement Project (Project 3a). The PBC for this project was endorsed by WG in 2019-20, providing capital funding of £1.110m from July 2019 to December 2022. The provision was £0.250m in 2019-20, £0.548m in 2021-22, and £0.312m in 2021-22.

2.4   In addition to WG funding, NHS Commissioners agreed in December 2018 to provide annual revenue funding towards the TCS Programme. £0.400m was provided in the initial year of 2018-19, with £0.420m annually thereafter.

2.5   Further revenue funding was provided by Trust in 2019-20 and 2020-21 from its own baseline revenue budget. Funding of £0.060m and £0.030m respectively was provided for nVCC Project Delivery (previously provided by WG until March 2019). Another £0.039m (2019-20) and £0.166m (2020-21) was provided to cover the costs of staff secondment from Velindre Cancer Centre.

2.6   The total funding and expenditure for the TCS Programme and associated Projects by the end of March 2021 was £23.923m: £20.710m Capital, £3.213m Revenue.

3.   FUNDING

3.1   Funding provision for the financial year 2021-22 is outlined below.

3.2   In August 2021, the Trust Board approved that the nVCC Project provide interim funding of **c£0.350m** to the EW Project. The funding is to support the work packages associated with tree and vegetation clearance (c£0.250m) and site management and security (c£0.100mk). The EW Project has secured the funding from the approval of its FBC in January 2022.

3.3   The Trust has provided revenue funding of **£0.110m** to the nVCC Project.

Description	Funding	
	Capital	Revenue
Programme Management Office There is no capital funding requirement for the PMO at present	**£ nil**	**£0.246m**
Allocation of £0.240m from £0.420m funding provided from Commissioners for 2021-22 to cover direct clinical/management support and Programme Management was provided in April 2021		£0.240m
Allocation from WG 2021-22 revenue pay award funding was provided in September 2021		£0.006m
Project 1 – Enabling Works for nVCC Capital funding from WG was provided on 24 March 2021	**£0.250m** £0.250m	**£ nil**
Project 2 – New Velindre Cancer Centre Capital funding from WG was provided on 24 March 2021	**£3.460m** £3.460m	**£0.110m**
The Trust provided revenue funding in September 2021 for Project Delivery		£0.026m
The Trust has provided revenue funding for the Judicial Review costs incurred between August 2021 and December 2021		£0.084m
Project 3a – Radiotherapy Procurement Solution Final 9 months of a 28 month project, running from 1st August 2019 to 31st December 2021, with a funding allocation of £0.312m for 2021-22 from an overall funding allocation of £1.110m, provided in April 2021	**£0.576m** £0.312m	**£ nil**
Additional funding provided by the Trust for the Project's increased legal and staff costs November 2021.	£0.264m	
Project 4 – Radiotherapy Satellite Centre The project is led and funded by the hosting organisation, Aneurin Bevan University Health Board; no funding requirement is expected from the Trust for 2021-22	**£ nil**	**£ nil**
Project 5 – SACT and Outreach A review of all the Trust Programme & Project resources is being undertaken to identify how these are deployed against Trust priorities. This project is on hold pending this review.	**£ nil**	**£ nil**

Description	Funding	
	Capital	**Revenue**
Project 6 – Service Delivery, Transformation and Transition	**£ nil**	**£0.313m**
Allocation of £0.180m from £0.420m funding provided from Commissioners for 2021-22 to cover direct clinical/management support and Programme Management was provided in April 2021		£0.180m
Funding provided from the Trust's core revenue budget towards the costs of the Project Director post and the Project Manager post in April 2021		£0.116m
Allocation from WG 2021-22 revenue pay award funding was provided in September 2021		£0.009m
Additional funding provided from the Trust's core revenue budget towards the cost of the Project Manager post in November 2021		£0.008m
Project 7 – VCC Decommissioning A review of all the Trust Programme & Project resources is being undertaken to identify how these are deployed against Trust priorities. This project is on hold pending this review.	**£ nil**	**£ nil**
Total funding provided to date	**£4.286m**	**£0.669m**
	£4.955m	

4. FINANCIAL SUMMARY AS AT 31ST JANUARY 2022

4.1 The summary financial position for the TCS Programme for the year 2021-22 as at 31st January 2022 is outlined below:

- **CAPITAL** spend of **£2.815m to M10** with a forecast outturn of **£4.282m and variance of £0.004m underspent;** and
- **REVENUE** spend is **£0.546m to M10** with a forecast outturn of **£0.669m and variance of £nil**

TCS Programme Budget & Spend 2021-22

CAPITAL	Cumulative to Date			Financial Year		
	Budget to Jan-22	Spend to Jan-22	Variance to Jan-22	Annual Budget	Annual Forecast	Annual Variance
	£	£	£	£	£	£
PAY						
Project Leadership	157,702	157,580	123	193,000	191,641	1,359
Project 1 - Enabling Works	100,000	178,503	-78,503	100,000	215,121	-115,121
Project 2 - New Velindre Cancer Centre	698,098	595,077	103,021	1,008,500	795,649	212,851
Project 3a - Radiotherapy Procurement Solution	301,514	301,158	356	362,675	361,606	1,069
Capital Pay Total	**1,257,314**	**1,232,318**	**24,997**	**1,664,175**	**1,564,017**	**100,158**
NON-PAY						
nVCC Project Delivery	53,410	53,084	326	78,500	78,204	296
Project 1 - Enabling Works	144,167	458,957	-314,791	150,000	880,294	-730,294
Project 2 - New Velindre Cancer Centre	1,205,204	915,105	290,098	2,180,000	1,545,215	634,785
Project 3a - Radiotherapy Procurement Solution	164,792	155,226	9,566	213,165	214,234	-1,069
Capital Non-Pay Total	**1,567,572**	**1,582,372**	**-14,800**	**2,621,665**	**2,717,946**	**-96,281**
CAPITAL TOTAL	**2,824,887**	**2,814,690**	**10,197**	**4,285,840**	**4,281,963**	**3,877**

REVENUE	Cumulative to Date			Financial Year		
	Budget to Jan-22	Spend to Jan-22	Variance to Jan-22	Annual Budget	Annual Forecast	Annual Variance
	£	£	£	£	£	£
PAY						
Programme Management Office	178,612	167,918	10,694	224,833	224,833	0
Project 6 - Service Change Team	260,528	265,825	-5,297	312,633	312,367	266
Revenue Pay total	**439,139**	**433,742**	**5,397**	**537,466**	**537,200**	**266**
NON-PAY						
nVCC Project Delivery	21,381	20,991	389	26,000	26,000	0
nVCC Judicial Review	82,904	82,904	0	84,000	84,000	0
Programme Management Office	6,423	8,263	-1,840	21,534	21,534	0
Project 6 - Service Change Team	0	222	-222	0	266	-266
Revenue Non-Pay Total	**110,708**	**112,380**	**-1,673**	**131,534**	**131,800**	**-266**
REVENUE TOTAL	**549,847**	**546,123**	**3,725**	**669,000**	**669,000**	**0**

5. FINANCIAL POSITION FOR TCS PROGRAMME AND ASSOCIATED PROJECTS AS AT 31ST JANUARY 2022

CAPITAL SPEND

Project 1 – Enabling Works

5.1 There is a cumulative capital spend to date of **£0.637m** against a budget of **£0.244m**, with a forecast spend for the year of **£1.095m** against a budget of **£0.250m with a forecast variance of £0.845m overspend**.

Work package	Spend to 31st January 2022 £m	Forecast Annual Spend £m
Pay	**£0.179**	**£0.215**
Third Party Undertakings	£nil	£0.058
Technical Advisers	£0.265	£0.423
Works	£0.134	£0.605
Legal Advice	£0.122	£0.122
Enabling Works Reserves	-£0.063	-£0.328
Non-pay	**£0.459**	**£0.880**
Total	**£0.637**	**£1.095**

5.2 The forecast overspend within the Project has been mitigated by the use of underspends from the nVCC Projects.

Project 2 – nVCC

5.3 There is a cumulative capital spend to date of **£0.968m** against a budget of **£2.114m**. The forecast spend for the years is **£2.611m** against a budget of **£3.460m with a forecast variance of £0.850m underspent**.

Work package	Spend to 31st January 2022 £m	Forecast Annual Spend £m
Pay	**£0.753**	**£0.987**
Project Delivery costs	£0.053	£0.078
Competitive Dialogue – PQQ & Dialogue	£0.878	£1.377
Legal Advice	£0.012	£0.053
Planning	£0.051	£0.141
nVCC Reserves	-£0.026	-£0.026
Non-pay	**£0.968**	**£1.623**
Total	**£1.721**	**£2.610**

5.4 The forecast underspend will be used to cover the Enabling Works forecast overspend for the year.

Project 3a – Integrated Radiotherapy Procurement Solution

5.5 There is a cumulative capital spend to date of **£0.456m** for the IRS Project against a budget of **£0.466m**. The Project is currently forecasting a spend of **£0.576m** against a budget of **£0.576m**.

Work package	Spend to 31st January 2022 £m	Forecast Annual Spend £m
Pay	**£0.301**	**£0.362**
Legal Advisors	£0.143	£0.175
Financial Advisors	£nil	£nil
Business Case Advisors	£0.010	£0.019
Procurement Advisors	£nil	£nil
IRS Reserves	£0.002	£0.019
Non-pay	**£0.155**	**£0.214**
Total	**£0.456**	**£0.576**

REVENUE SPEND

Programme Management Office

5.6 The PMO spend to date is **£0.176m** (£0.168m pay, £0.008m non-pay) against a budget of **£0.185m**. The Project is forecasting a spend of **£0.246m** (£0.225m pay, £0.022m non-pay) in the financial year 2021-22 against a budget of **£0.246m**.

Projects 1 and 2 Delivery Costs

5.7   There is a revenue project delivery cost to date for the nVCC and Enabling Works Projects of **£0.021m** against a budget of **£0.021m,** with a budget and expected spend for the year of **£0.026m**. This spend relates to costs associated with office costs and project support, such as audit, training and Competitive Dialogue support.

nVCC Judicial Review

5.8   There is a revenue spend to date of **£0.083m** against a budget of **£0.084m** for the legal advice to deliver the requirements of the judicial review process as the Trust is an interested party. This is also the current forecast spend for the year.

Project 6 – Service Delivery, Transformation and Transition (Service Change)

5.9   Service Change spend to date is **£0.266m** against a budget of **£0.261m,** made up of pay costs. The Project is currently forecasting a spend of **£0.313m** for the year against a budget of the same.

6.   Financial Risks & Issues

6.1   There are no current financial risks or issues for the TCS Programme.

7.   CONSIDERATIONS FOR BOARD

7.1   This report is included as an appendix to the Trust Board Finance Report.

8.   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	Staff and Resources
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.

9.   RECOMMENDATION

9.1   The TCS Programme Scrutiny Sub-Committee are asked to **NOTE** the financial position for the TCS Programme and Associated Projects for 2021-22 as at 31st January 2022.

TCS PROGRAMME SCRUTINY SUB-COMMITTEE

TCS Programme & Project Risk

DATE OF MEETING	22nd February 2022

PUBLIC OR PRIVATE REPORT	Public

IF PRIVATE PLEASE INDICATE REASON	

PREPARED BY	BETHAN LEWIS – PROGRAMME PLANNER & RISK ADVISOR
PRESENTED BY	BETHAN LEWIS – PROGRAMME PLANNER & RISK ADVISOR
EXECUTIVE SPONSOR APPROVED	CARL JAMES - DIRECTOR OF STRATEGIC TRANSFORMATION, PLANNING AND DIGITAL

	For Approval

COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING		
COMMITTEE OR GROUP	DATE	OUTCOME
TCS Programme Delivery Board	15/02/2022	Approved

ACRONYMS	
TCS	Transforming Cancer Services

1. **BACKGROUND**

1.1 Monthly reviews of the Project and Programme Risk Registers are undertaken with Projects and Risk Owners, where the current risk landscape/s - including new risks, ratings review, emerging risks, emerging / new issues, are discussed and scrutinised.

1.2 This report will provide an update on the latest risk position for the TCS Programme and Projects and will present risks that meet the threshold of a 'current score' of 12 and include the Risk Register as an appendix.

2. ASSESMENT / SUMMARY OF MATTERS FOR CONSIDERATION

2.1   Note latest TCS Programme Risk Landscape.

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 Programme Scrutiny Sub-Committee are asked to:

- Note the latest risk position for the TCS Programme and Projects
- Note changes and updates to Project Risks & Issues
- Note the latest PMO Risk Register

TRANSFORMING CANCER SERVICES PROGRAMME

(South East Wales)
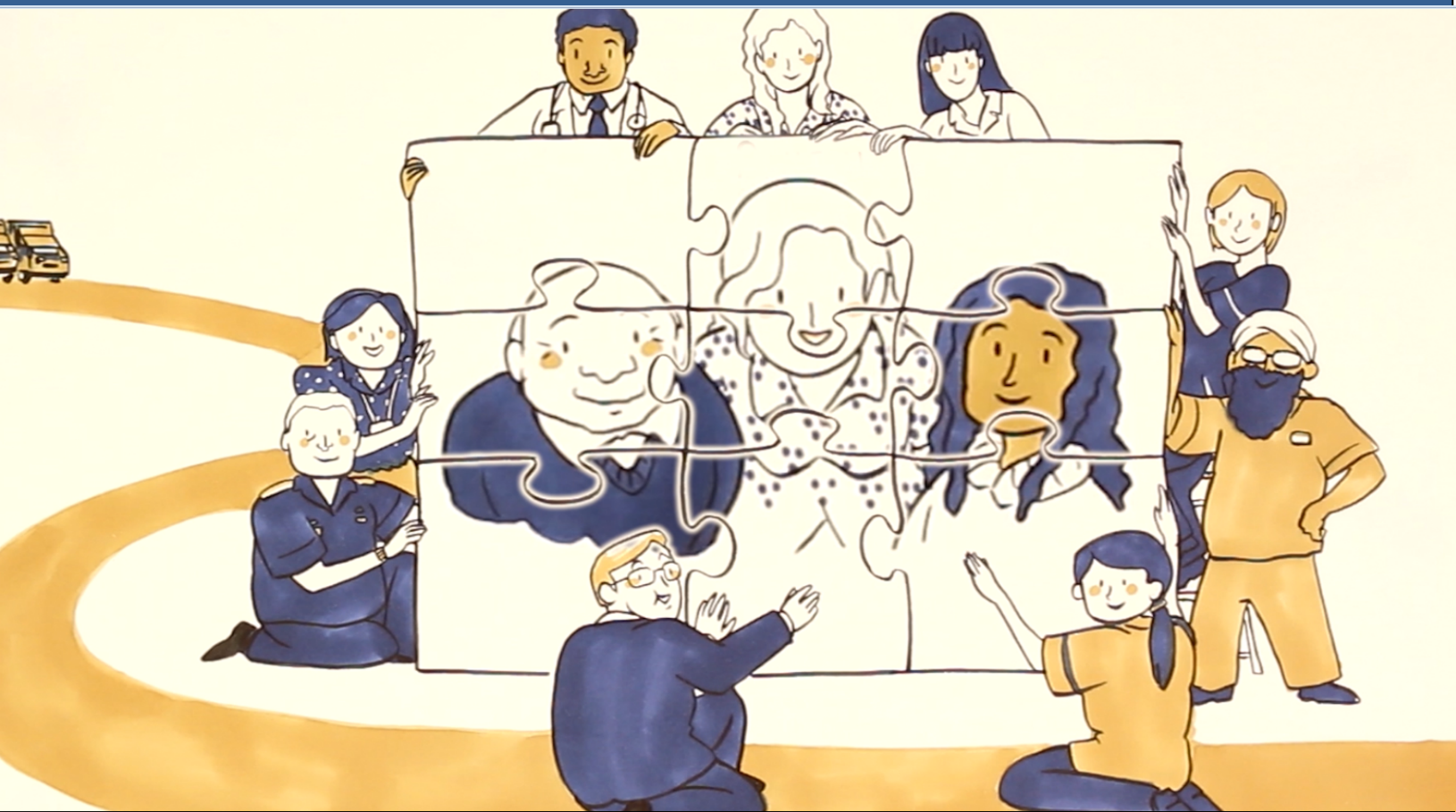
TCS Programme & Project Risk

Version 0.2

TCS Programme & Project Risk

DOCUMENTATION CONTROL SHEET

The source of the document will be found in the following location: Programme Management Shared Folder; Project Folders;

Document Version History:

Version Number	Date	Author	Summary of changes
0.1D	11/02/2022	Bethan Lewis	Commencement of Document

Approvals

This document requires the following approvals:

Title / Group	Date	Version/Option
TCS Programme Delivery Board	15/02/2022	0.1

Distribution

This document has been distributed to:

Name	Title	Date	Version

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APPENDICES

1.1 The below tables provide the most up to date data in regards to risk across the TCS Programme and its Projects which continue to be monitored and updates provided to the Programme Delivery Board each month. There are currently 122 risks in the Programme Risk Register; Figure 1 below provides a view of the number of risks broken down by project and current risk rating. Figure 2 demonstrates the proportion of risks by rating, with the majority 47% currently rated as 'Amber' and 34% rated as 'Yellow'.

1.2 Figure 3 provides the breakdown of the number of risks from across the Projects and Programme which would have an impact on any of the other Projects; as expected the nVCC Project has the highest number of risks which could impact that project owing to the various dependencies and reliance's across the Programme to ensure its Critical Path is maintained.

Figure 1: Breakdown of Risks Emerging from Project

Figure 2: Proportion of Risks by Rating Score
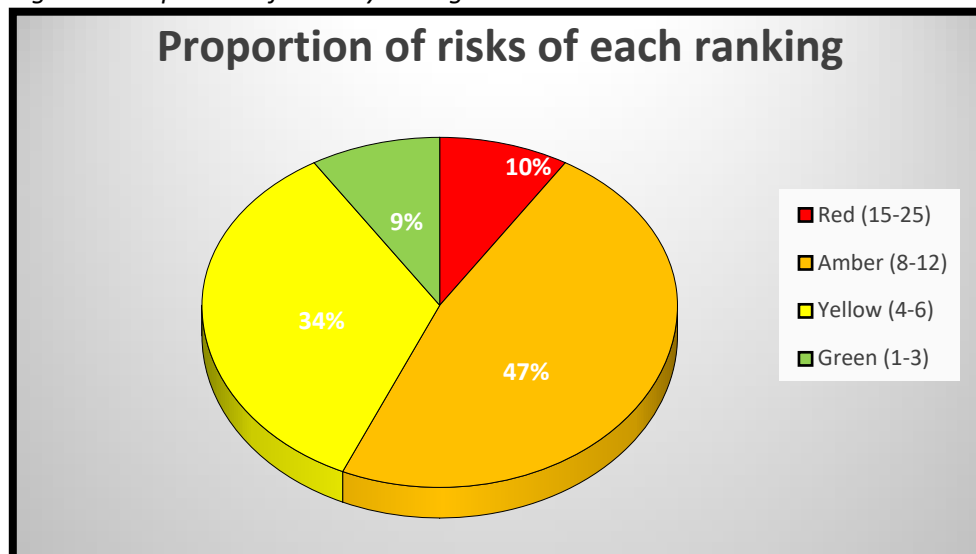
Figure 3: Breakdown of Risks Impacting upon Projects
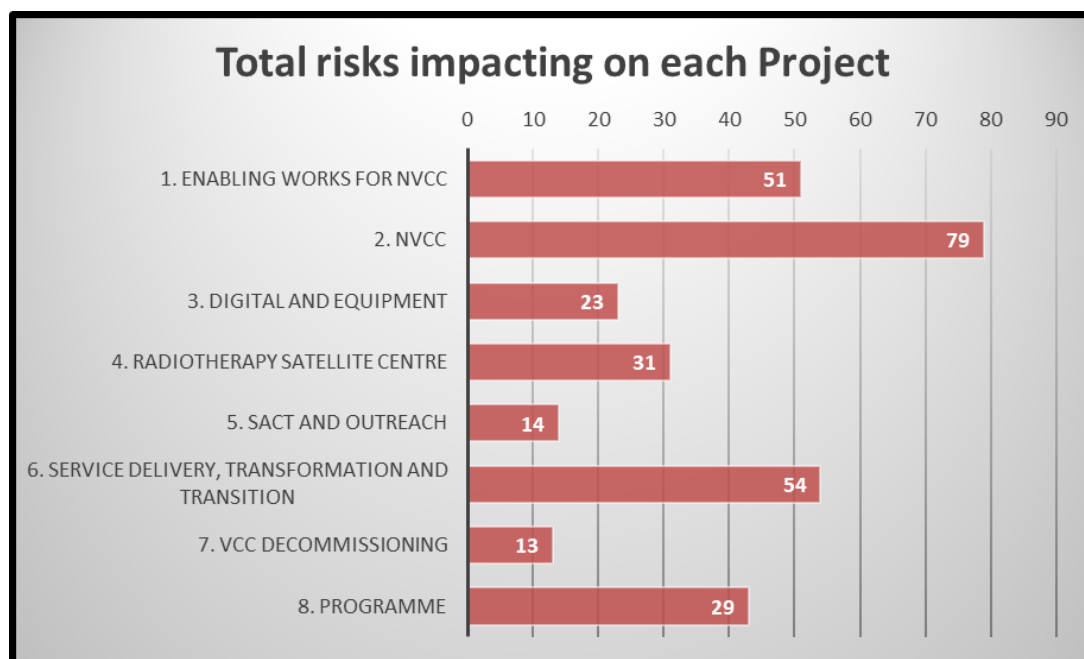
2.1   Monthly reviews are undertaken with each of the projects to establish progress made and understand their latest risk position.

Projects 1 & 2 – Enabling Works for nVCC & nVCC

	New	Closed	Escalated	De-escalated	Total changed risks / issues
Risks	3	1	0	7	8
Issues	3	1	0	0	1

- There has been 1 new risk raised and 2 risks de-escalated for Project 1 (Enabling Works) in this reporting period. There has also been 2 new issues raised and 1 issue closed.
- There have been 1 new issue raised, 3 new risks raised and 5 de-escalated risks for Project 2 (nVCC) in this reporting period.
- Detail of the issues and risks which meet the threshold for reporting to Programme Delivery Board can be seen below:

Issue No.	Issue Raised	Description (Cause)	Description (Effect)	Priority	Status (what is being done about this issue?)	Action Owner	Due Date
I065	Feb 22	TCAR expiry in 2024 means that significant proportion of construction period only has Asda access available.	Bidder construction programmes will take longer if using the Asda access route only after Nov 2024.	**High**	Utilise s73 application to extend TCAR expiry date.	David Powell	August 2022
I064	Feb 22	Velindre S278 Motts were requested to undertake a soil resource survey which has been delayed. We are unable to submit S278 planning application until this has been received.	TCAR2 construction may be delayed with impacts on the wider construction programme.	**Medium**	Engaged alternative supplier to achieve SRS. Completed 15/02/22. Analysis will be available by 01/03/22 for submission to CCC.	David Powell	March 2022

ID		Description		Rating	Comment	Owner	Date
I063	Feb 22	Asda S278 There was a delay in submission of drawings from Sandersons to discharge the S278 conditions.	Trees unable to be felled along Longwood Drive will cause delays to Asda works.	**Medium**	1. Mini S278 application (as suggested by Cardiff Council) is submitted to CCC to allow tree felling along Longwood Drive. Approval expected by 18/02	David Powell	Feb 2022
I062	Jan 22	Bridge Construction Timeline The most recent proposal for the bridge into the site shows a completion date of June 2023, three months after Project Co are intended to start on site.	If Project Co are required to wait for this element of construction to be completed it would cause a three month delay to the nVCC timeline and increase project costs.	**High**	Potential mitigations include: 1. Begin construction of the nVCC via the TCAR only. **Construction action - undertake in 2023** 2. Complete some elements of the bridge after construction of the hospital is completed to shorten the timeline. **Construction action - undertake in 2023** 3. Utilise S73 application to extend the date by which MIM start on site must occur, to reduce the impact of any delays to the start of construction. Planning issues occur if this is delayed beyond 27th March 2023. **August 2022**	David Powell	2023

ID	Description of Risk	Direction of Travel	Current Rating	Comment
R356	**CAPEX** There is a risk that the competitive dialogue participants tenders exceed the CAPEX limit leading to increase project costs and potential delays.	**NEW**	Likelihood 3 Impact 4 Overall 12	**Risk Owner – Mark Ash** 1. Paper on affordability provided to WG. Ongoing

Project 4 – Radiotherapy Satellite Centre (RSC)

	New	Closed	Escalated	De-escalated	Total changed risks / issues
Risks	1	0	0	1	2
Issues	0	0	0	0	0

- There has been 1 new risk raised and 1 risk de-escalated in this reporting period. Neither of these meet the threshold for reporting to the Programme Delivery Board.

Project 5 – Outreach

	New	Closed	Escalated	De-escalated	Total changed risks / issues
Risks	0	0	0	0	0
Issues	0	0	0	0	0

- There have been no review or changes to the Outreach Project Risk Register in this reporting period due to the Project remaining 'On Hold'.

Project 6 – Service Delivery & Transition

	New	Closed	Escalated	De-escalated	Total changed risks / issues
Risks	0	0	0	0	0
Issues	0	0	0	0	0

- All of the Project 6 risks have been reviewed in regards to ownership and status. Recommendations for actions to be taken has been agreed and will be brought to Programme Board for approval in alignment with formal change request for Project 6 / scope of TCS Programme.

2.0 TCS Programme Risk Update

	New	Closed	Escalated	De-escalated	Total changed risks / issues
Risks	0	0	0	0	0
Issues	0	0	0	0	0

3.1   There have been no changes to the Programme Risk and Issues Register in this reporting period.

3.2   There has been no new issues raised; updates have been provided in relation to the 2 current Programme issues, detail of which can be seen in the below table:-

Issue No.	Issue Raised	Description (Cause)	Description (Effect)	Priority	Status (what is being done about this issue?)	Action Owner	Due Date
I061	Sept 21	**Programme Objectives & Key Dependency not met** The Outreach Project has been placed 'on hold' and is not able to progress with its own objectives and as such has wider implications across the TCS Programme.	The objectives of the TCS Programme as outlined in the Programme Business Case will not be met, along with they key dependency on Outreach facilities being operational prior to the nVCC opening in order to meet the need and ability to provide SACT across SE Wales	Medium	Initial investment has been identified for Project Manager and Clinical time and awaiting approval in December, subject to approval recruitment will take place.	Steve Ham	4/3/22

I054	June 21	**Programme Resource** 1.0 WTE Band 4 Co-ordinator vacancy within PMO as a result of the internal promotion of the previous post holder	Lack of general administration support within the Programme Team, particularly in relation to providing secretariat support to the Programme Delivery Board.	**Medium**	Vacancy Scrutiny Panel approved business case. Proceeding to job advert via Trac. Remaining PMO staff currently absorbing additional workload.	Carys Jones	4/3/22

3.4   There are 19 risks in the February 2022 TCS Programme Risk Register with a current rating score of 12 and above, the detail of these can be seen in the Risk Register which is included as Appendices to this report.

3.5   The Programme Delivery Board are asked to:

- Note changes to Project Risks & Issues
- Note the latest Programme Risk Register

ID	Opened	Handler	Division	Project	Risk Owner	Risk Title	Risk Description	Risk Cost	Current Controls	Likelihood (current)	Impact (current)	Rating (current)	Risk level (current)	Progress notes	Direction of Travel	Next Review Date	Likelihood (Target)	Impact (Target)	Rating (Target)	Risk level (Target)	Is this a Private & Confidential Risk?
2400	30/06/2020	Lewis, Bethan	Transforming Cancer Services	Transforming Cancer Services	Williams, Nicola	Risk that there is lack of project support	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.		1) Programme Board will look to allocate resources as appropriate. Funding request to WG to support ongoing work - Ongoing 2) Clarification required on whether Outreach Project is an Operational or an Infrastructure Project - Ongoing TBC	4 - Probable	5 - Critical	20	High Risk	7/12/21 - No review or change to risk - Project remains On Hold.	Stable/No Movement	31/01/2022	2 - Unlikely	3 - Moderate	6	Moderate Risk	No
2402	10/05/2021	Lewis, Bethan	Transforming Cancer Services	Transforming Cancer Services	Williams, Nicola	Risk of time-consuming infrastructure work	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		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	4 - Probable	4 - Major	16	High Risk	7/12/21 - No review or changes to risk - Project remains On Hold	Stable/No Movement	31/01/2022	3 - Possible	3 - Moderate	9	Significant	No
2403	08/06/2020	Pinocci, Francesca	Transforming Cancer Services	Enabling Works	Young, Mark	Risk that enabling works construction exceeds timescale	There is a risk that enabling works construction, including bridges, exceeds 15 months, leading to delays to nVCC construction and incurring financial loss claims from the MIM contractor.	£5-6m	1. Regular review of possible areas which may cause delay: Most recent review of the plan shows only minimal slack between the end of the enabling works construction and beginning of MIM construction Ongoing 2. Partial mitigation through normal contract condition re liquidated and ascertained damage – where events in the contractors control can result in compensation for costs incurred by the client resulting from time or cost overruns. Need to be within expected reasonable limits. Care required in setting that limit to steer away from punitive damages as few contractor would price the works, pushing up tender prices. Scaling delay damages clause added to tender documentation to ensure contractor is incentivised to complete work on time. Complete 3. Focus to be applied to detailed construction programme following return of EW D&B bids. Complete	4 - Probable	3 - Moderate	12	Significant	3/2/22 - impact reduced from 4 to 3, reducing overall rating from 16 to 12	Stable/No Movement	04/03/2022	3 - Possible	3 - Moderate	9	Significant	No
2486	07/12/2021	Pinocci, Francesca	Transforming Cancer Services	Enabling Works	Young, Mark	There is a risk that the Section 278 application takes longer than expected to be approved,	S278 Application There is a risk that the Section 278 application takes longer than expected to be approved, meaning that works traffic accessing the 'straight' TCAR are delayed, leading to a delay to construction and longer overall construction timeline.		This application process has started.	3 - Possible	4 - Major	12	Significant	3/2/22 - update to mitigating action 1. Mark Farrar has engaged with the planning authority to ensure that CCC commits to quick turnaround of applications.	Risk Increasing	04/03/2022	2 - Unlikely	3 - Moderate	6	Moderate Risk	No
2423	08/09/2021	Lewis, Bethan	Transforming Cancer Services	Integrated Radiotherapy Solution	Bryce, Gavin	Risk that IRS evaluation process is delayed due to resource pressures	There is a risk that as the nVCC Competitive Dialogue clashes with the IRS Final Tender evaluation, there is pressure on resource availability leading to delays in finalising the evaluation process		1) Works has started to understand which staff and resource are impacted to explore availability and potential impact of this to the Project	4 - Probable	3 - Moderate	12	Significant	3/2/22 - risk reviewed by Project Manager, no change to current rating and/or control actions		03/03/2022	2 - Unlikely	3 - Moderate	6	Moderate Risk	No
2408	22/04/2021	Lewis, Bethan	Transforming Cancer Services	Integrated Radiotherapy Solution	Bryce, Gavin	Risk that IRS Project FBC is delayed or not approved	There is a risk that the approval for the FBC for the IRS Project is delayed or not approved, due to changes in approval timescales which would lead to delays to project delay, project abandonment impacting on other TCS Projects (nVCC & RSC) deliverables		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 - ongoing	3 - Possible	4 - Major	12	Significant	3/2/22 - Risk reviewed by Project Manager and Risk Owner, no change to current rating and controls / actions	Stable/No Movement	03/03/2022	2 - Unlikely	4 - Major	8	Moderate Risk	No
2401	26/02/2021	Lewis, Bethan	Transforming Cancer Services	Integrated Radiotherapy Solution	Bryce, Gavin	Risk of insufficient resources being made available to the Project	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		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	3/2/22 - Risk reviewed by Project Manager, likelihood changed from 5 to a 3, reducing overall rating from 20 to 12	Stable/No Movement	03/03/2022	2 - Unlikely	4 - Major	8	Moderate Risk	No
2410	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 needs of the TCS Programme	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		1) Service planning is sufficiently developed to facilitate effective workforce planning techniqies 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 - Possible	4 - Major	12	Significant	02/12/21 - Risk reviewed by Risk Owner - no change to current ratings	Stable/No Movement	18/03/2022	2 - Unlikely	1- Negligible	2	Low Risk	No
2431	23/07/2021	Lewis, Bethan	Transforming Cancer Services	Programme	James, Carl	There is a risk that the impact of Covid-19 on Programme activity will continue to cause longer-term disruption	There is a risk that the impact of Covid-19 on Programme activity will continue to cause longer-term disruption resulting in potential misalignment of project activity and as such further impacts to Programme Plans and Deliverables		1) Project plans being reviewed with programme support to ensure they are up to date and where projects are now 'unpaused' to bring plans in line with more mature projects. 2) Master Programme Plan updated to reflect update to projects and to show dependencies across projects and programme activity. Complete 3) Review and reporting on Master Plan to PDB and Scrutiny committee. Ongoing	3 - Possible	4 - Major	12	Significant	9.12.21 - Whilst intial risk to Project and Programme activity from Covid distruption has reduced; there remains uncertainty around transmission of the newest emerging variant and the impact this could have on clinical workforce managing their priorities between ongoing clinical work and Project & Programme. As such risk rating remains the same.	Stable/No Movement	04/03/2022	2 - Unlikely	2 - Minor	4	Low Risk	No

ID	Date	Owner	Directorate	Area	Handler	Risk Title	Risk Description	Mitigating Actions	Likelihood	Impact	Score	Rating	Update	Movement	Review Date	Likelihood	Impact	Score	Rating	Closed
2417	08/07/2020	Lewis, Bethan	Transforming Cancer Services	Programme	Fear, Lauren	Risk that there is lack of TCS Programme Comms Plan	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.	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 - Probable	3 - Moderate	12	Significant	10/11/21 - risk reviewed, no change to current rating and/or control actions	Stable/No Movement	04/03/2022	2 - Unlikely	2 - Minor	4	Low Risk	No
2418	05/10/2020	Lewis, Bethan	Transforming Cancer Services	Programme	Fear, Lauren	Risk that TCS Programme does not have support from Stakeholders	Risk that the TCS Programme does not have support from Stakeholders (pts, HB, politicians, WG, clinicians) Causes - Lack of engagement with all relevant stakeholders/ Misinformation shared from external sources / Inconsistent engagement from specialist resource / Change of views over a period of time / Lack of alignment between TCS programme and other strategic priorities across the organisation and individuals / Political leadership change Consequences - WG and LHBs do not support key decisions / Reputational damage for Velindre Trust as an organisation / Petitions & opposition to plans for TCS Programme /	1) Further engagement is being planned with specialist stakeholders – broader and more targeted who are not fully supportive. Programme Communications resource in place & recruitement of additional comms resource to support comms/engagement activities 2) Better use of technology being reviewed and rolled out to share key messages 3) Variety of stakeholder events held over a number of years - complete 4) Clinical workshops held throughout Programme lifetime - ongoing 5) Professional meeting forums held e.g. DoPs, MDs, CEO's etc - ongoing 6) Ongoing engagement with local elected members (MS, MP, Councillors) 7) Dialouge beteen exisiting cancer forums e.g. cancer leads in SE Wales HBs - ongoing through CCLG	4 - Probable	3 - Moderate	12	Significant	10/11/21 - Risk reviewed, no change to current rating and/or control actions	Stable/No Movement	04/03/2022	2 - Unlikely	2 - Minor	4	Low Risk	No
2413	29/06/2020	Lewis, Bethan	Transforming Cancer Services	Radiotherapy Satellite Centre	Hague, Andrea	Risk that Radiotherapy Satellite Centre will not have required skilled staff in place to run facility	There is a risk that the Radiotherapy Satellite Centre will not have required skilled staff in place to run the facility once ready to be operational. This would impact on radiotherapy capacity and resilience for the Trust.	1) An integrated Radiotherapy and Physics workforce plan is required to consider the service as a whole taking account of a full operating model that includes current activity, projected activity, IRS and RSU. 2) Provisions from across the whole service will be reconfigured to meet the requirements of the satellite unit.	4 - Probable	3 - Moderate	12	Significant	11/01/22 - risk reviewed by risk owner update to mitigating actions & controls provided:- 1) Workforce plan subgroup concluding in January 22. Recruitment for additional posts has been undertaken (including some roles that will be required for RSC). Draft Workforce Plan will be shared at RSC Project Board meeting. 2) Workforce model approved for OBC to be included in FBC. This has been reviewed and no changes made. 3) This work is being picked up by the workforce plan subgroup who will continue to develop Action Plan which will be done by the service.	Stable/No Movement	30/06/2022	3 - Possible	2 - Minor	6	Moderate Risk	No
2407	17/01/2020	Lewis, Bethan	Transforming Cancer Services	Radiotherapy Satellite Centre	Hague, Andrea	Risk of overlapping timeframes and interdependancies between RSC & IRS Projects	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.	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	3 - Moderate	12	Significant	11/01/22 - Risk reviewed by Risk Owner updates provided against mitigating actions 1) There is consistent membership sits on both project boards to provide oversight on progress across both. 2) Paper outlining additional costs for future proofing of the building and bunker design submitted by NWSSP-SES to WG has been approved. 3) Agreement with Kier & ABUHB design to the more significant strategy to manage any risk to the project delay as a result of IRS delays and any refinement of design required once preferred bidder known will be managed through formal change control. "	Stable/No Movement	20/05/2022	2 - Unlikely	2 - Minor	4	Low Risk	No
2501	14/01/2022	Hinton, Tracy	Transforming Cancer Services	New Velindre Cancer Centre	Powell, David	Risk of Inflation leading to increased costs	There is a risk that increased rates of inflation lead to the capital costs of the project exceeding the affordability envelope.	1. Paper on affordability submitted to WG. Ongoing	4 - Probable	3 - Moderate	12	Significant	4/2/22 - update to mitigating control provided	Risk Increasing	04/03/2022	4 - Probable	3 - Moderate	12	Significant	No
2502	14/01/2022	Hinton, Tracy	Transforming Cancer Services	New Velindre Cancer Centre	Powell, David	Risk of delay to start on site	There is a risk that the start of construction is delayed beyond the date stipulated in the outline planning permission decision notice 17/01735/MJR (27th March 2023), leading to delays to the project and a possible loss of planning permission.	1. Submit section 73 application to extend the date by which MIM start on site must occur, to reduce the impact of any delays to the start of construction. Started 2. Regular monitoring and management of other projects/workstreams which may affect start on site date including enabling works and nVCC procurement. Ongoing	3 - Possible	4 - Major	12	Significant	4/2/22 - update to mitigating actions 1. Work is currently being undertaken on the section 73 application. Started 2. Ongoing	Risk Increasing	01/03/2022	2 - Unlikely	2 - Minor	4	Low Risk	No
2517	14/02/2022	Hinton, Tracy	Transforming Cancer Services	New Velindre Cancer Centre	Powell, David	There is a risk that the competitive dialogue participants tenders exceed the CAPEX limit leading to increase project costs and	CAPEX There is a risk that the competitive dialogue participants tenders exceed the CAPEX limit leading to increase project costs and potential delays.	1. Discuss with Welsh government.	4 - Probable	3 - Moderate	12	Significant	4/2/22 - update provided against mitigating action 1. Paper on affordability provided to WG. Ongoing		01/03/2022	4 - Probable	3 - Moderate	12	Significant	No
2487	07/12/2021	Hinton, Tracy	Transforming Cancer Services	New Velindre Cancer Centre	Powell, David	IRS Delays Impact on nVCC Procurement	There is a risk that the IRS procurement may be delayed or experience legal challenge, meaning that the date at which the specific equipment to be procured is definitely known is delayed, leading to delays or other issues during the nVCC procurement process	1. Ongoing monitoring of buffer period between the key dependency dates of both projects. 2. If issue occurs work with bidders to design around potential solutions so that work can continue.	4 - Probable	3 - Moderate	12	Significant	4/2/22 - update provided to mitigating action 1. IRS procurement award has been delayed work is still ongoing to determine timelines but buffer is likely to have reduced significantly. Ongoing. 2. Not started - reactive.	Risk Increasing	01/03/2022	3 - Possible	4 - Major	12	Significant	No
2405	30/06/2020	Lewis, Bethan	Transforming Cancer Services	Transforming Cancer Services	Williams, Nicola	Risk that projected growth assumptions for Outreach will be less than required	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.	1) Re-run projections around growth assumptions. 2) Activity model will be re-run with outputs presented to project Board. Any additional requirments will be presented to the Programme Delivery Board with recommendations. Individual meetings with Health Boards to ascertain their requirments will be undertaken.	3 - Possible	4 - Major	12	Significant	7/12/21 - No review or changes to risk - Project remains On Hold	Risk Decreasing	31/01/2022	2 - Unlikely	3 - Moderate	6	Moderate Risk	No
2416	30/06/2020	Lewis, Bethan	Transforming Cancer Services	Transforming Cancer Services	Williams, Nicola	Risk that COVID may lead to delays on Project progress	There is a risk that potential further waves of COVID may lead to delays that effect the development & key activity of the outreach project	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	7/12/21 - No review or change to risk - Project remains On Hold.	Risk Decreasing	31/01/2022	2 - Unlikely	3 - Moderate	6	Moderate Risk	No

TCS PROGRAMME SCRUITINY SUB-COMMITTEE

TCS PROGRAMME MANAGERS REPORT

DATE OF MEETING	22.02.2022

PUBLIC OR PRIVATE REPORT	Public

IF PRIVATE PLEASE INDICATE REASON	

PREPARED BY	Carys Jones, Senior Programme Delivery & Assurance Manger
PRESENTED BY	Carys Jones, Senior Programme Delivery & Assurance Manger
EXECUTIVE SPONSOR	Carl James, Director of Strategic Transformation, Planning & Digital

REPORT PURPOSE	FOR NOTING

COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING		
COMMITTEE OR GROUP	DATE	OUTCOME
n/a	n/a	n/a

ACRONYMS	
CCLG	Collaborative Cancer Leadership Group
nVCC	new Velindre Cancer Centre
OBC	Outline Business Case
PMO	Programme Management Office
PMP	Project Master Plan
RSC	Radiotherapy Satellite Centre
TCS	Transforming Cancer Services
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 South East Wales. The Programme has been established since 2015 and consists of seven defined projects that are being delivered by the Trust in conjunction with its various partners / stakeholders.

1.2 This report provides a summary update against wider TCS Programme matters only. Details pertaining to the specifics of the constituent Projects within the Programme are captured in their respective Highlight Reports also reported at the same Programme Delivery Board (PDB). A brief update against the elements of each project which impact upon the wider programme and Master Programme Plan are contained at the end of this report.

2. ASSESMENT / SUMMARY OF MATTERS FOR CONSIDERATION

2.1 The report is set out in the following way:

   a) External updates
   b) Internal Programme updates
       i. Wider Programme updates
       ii. Notable Updates from the Seven Projects affecting the Programme

3. EXTERNAL PROGRAMME ARRANGEMENTS

Velindre @ UHW Programme Progress Update

3.1 The inaugural Velindre@UHW Programme Delivery Board met on the 20th January 2022, with the first meeting being chaired by the Executive Director of Planning at Cardiff & Vale UHB, but alternating chairing with Velindre University NHS Trust's Director of Strategic Transformation, Planning and Digital.

3.2 The first meeting was attended by all members of the Programme Board and was focused on:

   • revisiting the original programme brief agreed by the joint CAVUHB and Velindre UNHST in May 2021,
   • confirming the associated governance and oversight arrangements for the programme,
   • agreeing the Terms of Reference, and,
   • setting out how the programme would communicate with other governance structures and cancer focused meetings.

3.3 It was agreed that the role of the Programme Delivery Board would be to provide assurance that the projects were delivering against their project plans, ensure coordination and cohesion between the interdependent projects, and provide a means of escalation to 'troubleshoot' where the projects were unable to progress.

3.4   The Programme Delivery Board was advised that the Velindre@UHW work programme continued to progress well. During the reporting period the tripartite Cardiff Cancer Research Hub (CCRH) Clinical Output Specification (COS) had been endorsed by the Velindre University Trust Board on 27th January 2022, subject to the provision of further detail on the joint working and contractual arrangements, Intellectual Property (IP) rights and the investment strategy.

3.5   In respect of the unscheduled care/acute elements, a third workshop to agree the pathway for deteriorating patients was held on 19th January 2022, which provided a forum to sharing knowledge and protocols between the two organisations, as well as an opportunity to further develop the pathway.

3.6   There has been no progress to report on the Haemato-oncology project in this period.

Velindre Futures Programme

3.7   The January Velindre Futures Programme Board was held on the 28th January 2022, where updates on a number of key organisation programmes (such as the Digital Health and Care Record (DCHR)), together with the updates from each of VCC's Development & Delivery Groups.

3.8   The usual Transforming Cancer Services update presentation was provided by the TCS Senior Programme Delivery and Assurance Manager and circulated to VF Programme Board members. Notable highlights included, the re-run of the IRS tender and revised timescales and progress within the nVCC competitive dialogue, particularly the Hospital Design workstream.

3.9   The next VF Programme Board will take place on 28th February 2022.

Value Add Collaboration

3.10   The first Value Add Sponsorship Group meeting was held on 4th February 2022, which convened a number of personnel, representing a range of projects and disciplines, from across the Trust.

3.11   The purpose of the group is to act as a sponsorship group within the organisation to lead collaboration across a matrix of activities, intensifying the opportunities the Trust can lead on, or collectively sponsor, to bring further value.

3.12   A key element of the nVCC procurement on which bidders are evaluated is their Community Benefits offering – to be initiated by the successful bidder once construction starts. However, the nVCC Project is creating some fantastic opportunities 'here and now' to develop 'added value' activities. The aim is to ensure that the Trust makes the most of these opportunities, by maximising their impact and potential.

3.13   Not only can we lead on or collectively sponsor opportunities that will enhance the nVCC site, but we can also ensure that are adding value through establishing programmes of work that will include: arts and culture, educational outreach, the future green agenda, community benefits, community grants, research and innovation, and charity investment.

3.14   The Sponsorship Group will meet bimonthly, with the next meeting in April 2022, potentially in a different part of the region and focussing on a specific theme e.g. Art and Culture.

VF and TCS Programmes/Projects Review – 'Wiring diagram' and interdependencies

3.15   At the request of the Chief Operating Officer (COO), a small group of project & programme personnel from across the TCS and Velindre Futures programme PMOs have begun to map the interdependencies between the full breadth of project, programme, transformation and continuous improvement work underway.

3.16   This is with the aim of improving communication and reporting between the various workstreams, together with better prioritisation of resources across the organisation.

3.17   The COO is collating the outputs of this exercise to inform discussion at EMB in February.

Collaborative Cancer Leadership Group (CCLG)

3.18   Dates for the forward scheduled of CCLG meetings in 2022-23 are currently being planned, with the next CCLG meeting proposed for the end of April 2022.

3.19   The intention is that the CCLG will resume its core business meetings following an externally facilitated workshop at the end of March/early April.

3.20   This workshop address Recommendation 1 of the Nuffield Trust advice and seeks to review how best to take forward the CCLG in future, agree regional cancer priorities (and potentially a regional cancer strategy), together with considering the most suitable governance arrangements / means of organising to achieve these priorities.

4.   INTERNAL PROGRAMME ARRANGEMENTS

Notable Updates from the Six Projects affecting the Programme

4.1   This section *does not* provide a full update against each project; only matters which have a potential impact on the delivery or coherence of the overall programme (such as scope or timescales), are highlighted below. Details pertaining to the specifics of the constituent Projects are captured in their respective Highlight Reports.

4.2   **Enabling Works (EW)** – the Full Business Case (FBC) for the Enabling Works was approved by Welsh Government on 14th January 2022, representing a major milestone in the project. Tree clearance preparation work started w/c 10th January securing the areas with temporary netlon fencing and creating safe zones, ready for the trees to be felled week commencing 17th January. An interim injunction was granted by the High Court on the 27th January 2022 to address any future unlawful Direct Action on site, with a High Court hearing scheduled for May 2022 to apply for a full injunction for the duration of the project. Further engagement with the public is planned in relation to the ongoing work and closures of Public Rights of Way, in the form of leaflet drops and signage along the route of the agreed diversion route.

4.3   **nVCC** – Competitive Dialogue (CD) commenced w/c 6th September and has now reached week 23 of the 28 week dialogue schedule which will culminate in the submission of draft tenders by the two participating consortia in March 2022. The preferred bidder will be announced in the summer 2022. Preparation is underway for Capital Approval Point 3 (CAP3) meeting with WG, with the reading week w/c 7th February and interviews w/c 14th February. A Senior Digital Lead joined the project January 2022 to support the dialogue process, with Equipment and Engagement posts yet to be filled. A Value Added Sponsorship Group met for the first time on 4th February to maximise the value through connecting and coordinating the range of initiatives underway.

4.4   **Integrated Radiotherapy Solution** – no compliant bids were received in response to the original tender. The tender is now being re-run and was re-issued on the 31st January, to close 28th February 2022. The team met with all participants ahead of this date to provide final instruction.

4.5   **Radiotherapy Satellite Centre** – the Stage 4 (detailed) design presentation took place on 27th January 2022, including the SMART hospital requirements and 1:50 layouts. FBC submission to Boards is now scheduled for May 2022 with an anticipated 'Beam On' date of July 2024. More focus is now required on updating the Service Level Agreement (SLA), the associated project revenue costs and the workforce elements. The Economic Case and Benefits Realisation Plan are being reviewed in January 2022 via Archus.

4.6   **Outreach** – Project on hold due to resourcing constraints.

4.7   **Service Delivery and Transition** – has not progressed within the TCS programme however the Velindre @ and VF programme address many of the areas of the original project scope. Under the change control process and revised governance arrangements in development, it is anticipated that this project will transfer to the Velindre Futures programme.

Master Programme Plan

4.8   The Master Programme Plan and critical path for the TCS Programme have been reviewed by the Programme Team working with the Projects, and an

updated plan has been produced and is presented as a substantive item on the agenda. The Master Programme Plan has now been developed at a more granular level allowing attendees to see the impacts on interdependent Projects more clearly.

4   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.

5   RECOMMENDATION

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

TCS SCRUTINY SUB-COMMITTEE

UPDATE ON COMPETITIVE DIALOGUE TO SELECTION OF PREFERRED BIDDER

DATE OF MEETING	22nd February 2022

PUBLIC OR PRIVATE REPORT	Public

IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report

PREPARED BY	Peter Sowerby, Senior Project Manager Andrew Davies, Principal Project Manager
PRESENTED BY	David Powell, Project Director
EXECUTIVE SPONSOR APPROVED	Steve Ham, Chief Executive

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	15/2/22	NOTED

ACRONYMS	
CAP	Commercial Approval Point
ITPD	Invitation to Participate in Dialogue
ITSFT	Invitation to Submit Final Tenders
nVCC	New Velindre Cancer Centre
OBC	Outline Business Case
PS	Procurement Strategy

1. SITUATION/BACKGROUND

1.1 The Completive dialogue for the nVCC procurement is progressing towards the Preferred Bidder stage. The project is now in a position to communicate in more detail the steps that will take the project through to selecting a winner – how we will implement the processes outlined at a strategic and technical level in the nVCC Procurement Strategy (PS) and the Invitation to Participate in Dialogue (ITPD).

1.2 The following table presents key milestone dates and activities to inform the selection process through to Financial Close w/c 20th March 2023. A detailed breakdown is included at Appendix 1:-

	Activity/ Milestone	Date
1	Completion of competitive dialogue meetings *To include Welsh Government Assurance Review - Commercial Approval Point 3*	Up to 14 March 2022
2	**Receipt of bidders' Draft Tenders**	**14 March 2022**
3	Velindre review of draft tenders and feedback to bidders	15 March -28 March 2022
4	"Bootcamp" - intensive discussion with bidders to resolve all outstanding issues	28 March -18 April 2022
5	Welsh Government Assurance Review Commercial Approval Point 4 *(note overlap with bootcamp)*	11 April -28 April 2022
6	Board approve issue to bidders of an Invitation to Submit Final Tenders	w/c 25 April 2022
7	**Velindre issues Invitation to Submit Final Tenders**	**w/c 2nd May 2022**
8	Bidders prepare their Final Tenders	w/c 2 May to w/c 30 May 2022
9	**Receipt of Final Tenders (*day to be advised in ITSFT*)**	**w/c 30 May 2022**
10	Final Tender Evaluation – *to include bidder presentations to stakeholders, Welsh Government approvals and Trust Board Approvals*	w/c 30 May – w/c 25 July 2022
11	**Selection of successful participant**	**w/c 25 July 2022**
12	Successful Participant stage – *to include finalisation of design, Full Business Case, Full Planning Permission*	July 2022– March 2023
13	**Financial Close and anticipated award of contract**	**w/c 20 March 2023**

1.3   The project are keen to explore bringing the Preferred Bidder appointment (point 11 in the table above) to early July 2022 if we can facilitate getting planning approvals in 2022.

1.4   Smooth progress through the appointment of Preferred /bidder will depend to a degree on whether the Preferred Bidder sits within the affordability envelope set at OBC.

2.   ASSESSMENT / SUMMARY OF MATTERS FOR CONSIDERATION.

2.1   Over the next few weeks a sequence of events are planned to ensure the project is best placed to select a preferred bidder. Outputs from these events will inform the decision making process.

2.2   **Completion of dialogue (up to 14th March 2022)**
   - During February/ early March 17 dialogue meetings are planned with participants to conclude this element of the dialogue
   - On February 8-9th each workstream is carrying out a 'stock take' review of the quantity and quality of information received from each participant
   - CAP 3 (Mid Dialogue assessment): Information has been provided to the Welsh Government (WG) team for Commercial Approval Point review which will take place on week commencing 14 February. Report recommendations will be addressed in advance of the draft tender stage.
   - There will be a dry run of the evaluation process in late February. The evaluation teams will undertake 'mock evaluations' with the information they have to date in order to familiarize themselves with the process and practicalities of applying criteria and methodology to varied evidence and explaining their choices.
   - A Status update on both proposals will be provided for Independent Members at the Trust Board briefing session on 17th February 2022, with further briefing sessions to be arranged to ensure member are up to speed.
   - An update will be provided to Welsh Government's Health Strategic Board

2.3   **Draft tender stage(14th -28th March 2022)**
   - Each participant will submit a draft tender on the same templates and supporting deliverables as the Final Tender by 5 pm on 14 March (as set out in the Invitation to Participate in Dialogue – ITPD)
   - Participants will not be given an assessment against the evaluation criteria for their Draft Tenders but the authority will provide a list of outstanding issues that need to be resolved.

- Times have been identified in the two week review stage for the authority and its advisors to read, analyse and discuss the draft tenders to generate this list of issues (see detailed timeline)

2.4 **Bootcamp and CAP 4 (28th March- 28th April 2022)**
- A timetable has been outlined for discussions with participants during the 3 week bootcamp period to resolve all issues identified from review of their draft tenders (refer to detailed timeline)
- The precise agenda will reflect the specific issues identified in the review of the Draft Tenders
- The agenda includes meetings with the participants and on-going liaison with Welsh Government.
- CAP 4: The bootcamp process overlaps with CAP 4
- Subject to satisfactory bootcamp process and CAP 4 review, the authority will be assured that both participants are able to provide compliant bids capable of meeting its needs as outlined in the ITPD. The Board will be asked to approve the issuing of the Invitations to Submit a Final Tender (ITSFT)

2.5 **Invitation to Submit a Final Tender (ITSFT) and submission of Final Tenders (28th April – w/c 2nd May 2022)**
- The ITSFT will be issued in the week commencing 2 May
- The bidders will then have 4 weeks to produce their Final Tenders for evaluation with the formats and requirements set out in the ITPD. It is anticipated that the Final Tenders will have developed from the draft versions reviewed earlier.
- Final Tenders will be received in the week commencing 30 May.

2.6 **Evaluation of Final Tenders and selection of preferred bidder. (w/c 2nd May – w/c 25th July 2022)**
- The evaluation scoring and methodology will be transparently applied as set out in the procurement documentation.
- Stakeholders will be engaged in evaluating tenders as detailed in the paragraph below
- Detailed agendas and timetables for the evaluation team meetings and the stakeholder engagement meeting will be finalized in advance.
- Initial evaluation training has been provided by Commerce Decisions who are supplying the online Evaluation software, and further sessions are planned to take place in May
-

2.7 **Stakeholder contribution to dialogue and evaluation**

- **Up to the issuing of the ITSFT**
  - Stakeholders have been, and will continue to be, involved in influencing the evolution of the participant proposals
  - Representatives of clinical and operational staff have been meeting with participants to comment on emerging designs throughout the process. All staff have been invited to 4 feedback sessions to provide comment and demonstrate how their earlier comments have been taken on board.
  - Technical colleagues from NHS Wales Shared Services Specialist Estates Service have provided feedback on proposals.
  - The local MSP and MP have been consulted on progress
  - Community panels have been identified to comment on participants' Community Benefit proposals. These include local sports and community groups, local councilors, the local Community Health Council, Friends of Forest Farm. These engagement meetings are scheduled for 16th and 17th February
  - The Design Commission for Wales has received presentations of the emerging proposals and given comments to the participants
- **During the final evaluation**
  - During this period bidders will be invited to present their final proposals to a wider stakeholder meeting. The stakeholder views will be captured and taken into account by the evaluation teams as they weigh up the merits of both proposals
  - The invitees list will include patient and family representatives and all the parties listed above.

2.8   **Overall assessment.**
- The steps to implement the next stages of the nVCC procurement up to selection of the preferred bidder are clearly planned in detail up to the ITSFT stage.
- Detailed agendas and timetables for the evaluation of the final tender will be developed.
- The implementation steps outlined are in line with the nVCC Procurement Strategy, nVCC Procurement Documentation and Procurement Regulations

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	Yes (Include further detail below)
	The activities outlined in this paper are compliant with Procurement Regulations
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 TCS Programme Scrutiny Sub-Committee are asked to **NOTE** the contents of this report

BOARD PAPER COMPETITIVE DIALOGUE UPDATE.

APPENDIX 1.

1. Overview Timeline: from last stages of dialogue to selection of final bidder

	Activity/ Milestone	Date
1	Completion of competitive dialogue meetings *To include Welsh Government Assurance Review - Commercial Approval Point 3*	Up to 14 March
2	Receipt of bidders' Draft Tenders	14 March
3	Velindre review of draft tenders and feedback to bidders	15 March -28 March
4	"Bootcamp" - intensive discussion with bidders to resolve all outstanding issues	28 March -18 April
5	Welsh Government Assurance Review Commercial Approval Point 4 *(note overlap with bootcamp)*	11 April -28 April
6	Board approve issue to bidders of an Invitation to Submit Final Tenders	w/c 25 April
7	Velindre issues Invitation to Submit Final Tenders	w/c 2nd May
8	Bidders prepare their Final Tenders	w/c 2 May to w/c 30 May
9	Receipt of Final Tenders *(day to be advised in ITSFT)*	w/c 30 May
10	Final Tender Evaluation by Authority – *to include bidder presentations to stakeholders, Welsh Government approvals and Trust Board Approval*	w/c 30 May – w/c 25 July
11	Selection of successful participant	w/c25 July
12	Successful Participant stage – *to include finalisation of design, Full Business Case, Full Planning Permission*	July 2022– March 2023
13	Financial Close and anticipated award of contract	w/c 20 March 2023

2. Detailed Timeline: from last stages of dialogue to selection of final bidder

Project Stage		Day	Date	Activities		
dialogue						
		Tuesday	01-Feb			
		Wednesday	02-Feb	SQM workstream dialogue meeting –(Future Health)		
		Thursday	03-Feb	SQM workstream dialogue meeting (Acorn) Digital Dialogue (Future Health)		
		Friday	04-Feb			
		Saturday	05-Feb			
		Sunday	06-Feb			
		Monday	07-Feb			
		Tuesday	08-Feb	Workstream stocktake meetings Design –digital integration dialogue meeting - Acorn		
		Wednesday	09-Feb	Workstream stocktake meetings Design –digital integration dialogue meeting – Future Health		
		Thursday	10-Feb			
		Friday	11-Feb			
		Saturday	12-Feb			
		Sunday	13-Feb			
	CAP 3	Monday	14-Feb	CAP 3 Interviews		
		Tuesday	15-Feb	CAP 3 Interviews		

Project Stage		Day	Date	Activities		
		Wednesday	16-Feb	CAP 3 Interviews Equipment Dialogue Meeting – Future Health Community Benefits Community Panel		
		Thursday	17-Feb	Equipment Dialogue Meeting – Acorn Community Benefits Community Panel		
		Friday	18-Feb	Community Benefits dialogue meeting (Acorn) Digital dialogue meeting – Future Health Digital dialogue meeting – Acorn		
		Saturday	19-Feb			
		Sunday	20-Feb			
		Monday	21-Feb			
		Tuesday	22-Feb	Community Benefits dialogue meeting – Future Health Depts. dialogue meeting - Acorn		
		Wednesday	23-Feb	FM dialogue meeting – Future Health		
		Thursday	24-Feb	FM dialogue meeting – Acorn		
		Friday	25-Feb			
		Saturday	26Feb			
		Sunday	27-Feb			
		Monday	28 Feb			
			1-Mar			
			2-Mar	Legal/commercial dialogue meeting – Future Health		
			3-Mar	Legal/commercial dialogue meeting – Acorn Hospital Design Dialogue meeting - Acorn		

Project Stage		Day	Date	Activities		
			4-Mar			
			5-Mar			
			6-Mar			
			7-Mar			
			8-Mar			
			9-Mar			
			10-Mar			
			11-Mar			
			12-Mar			
			13-Mar			
*		Monday	14-Mar	5pm submission of draft final tenders		
Review of draft tender		Tuesday	15-Mar	Reading day + technical analyses		
		Wednesday	16-Mar	Reading day +technical analyses		
		Thursday	17-Mar	Reading day: discussion with equipment, dept digital, clinical sub-groups and stakeholder panels		
		Friday	18-Mar	Reading day: discussion with equipment, dept digital, clinical sub-groups and stakeholder panels		
		Saturday	19-Mar			
		Sunday	20-Mar			
		Monday	21-Mar	workstream discussion meetings		

Project Stage	Day	Date	Activities		
	Tuesday	22-Mar	workstream discussion meetings		
	Wednesday	23-Mar	Senior and cross-workstream review of outputs of workstream discussions	Legal/MIM transactor pre-derogation submission meeting	
	Thursday	24-Mar	sign-off of final reports for each bidder and issue		
	Friday	25-Mar		Derogation submission	
	Saturday	26-Mar			
	Sunday	27-Mar			
	Monday	28-Mar		Legal meetings with bidders	
	Tuesday	29-Mar		Legal meetings with bidders	Derogation response deadline
bootcamp	Wednesday	30-Mar		Commercial meetings with bidders.	Internal team Velindre touch base. Commercial derogation call (DLAP and MIMT) Update with Welsh Government Senior Responsible Officers

Project Stage	Day	Date	Activities		
	Thursday	31-Mar		Other workstream issue meetings	Issue any derogation requests formally to MIMT
	Friday	01-Apr		Other workstream issue meetings	Update with Welsh Government Senior Responsible Officers
	Saturday	02-Apr			
	Sunday	03-Apr			
	Monday	04-Apr		Legal meetings with bidders	
	Tuesday	05-Apr		Legal meetings with bidders	
	Wednesday	06-Apr		Commercial meetings with bidders	Internal team Velindre touch base. Commercial derogation call (DLAP and MIMT) Update with Welsh Government Senior

Project Stage		Day	Date	Activities		
						Responsible Officers
		Thursday	07-Apr		Other workstream issue meetings	Issue any derogation requests formally to MIMT
		Friday	08-Apr		Other workstream issue meetings	
		Saturday	09-Apr			
	CAP 4	Sunday	10-Apr			
		Monday	11-Apr		Legal meetings with bidders	
		Tuesday	12-Apr		Legal meetings with bidders	
		Wednesday	13-Apr		Commercial meetings with bidders	Internal team Velindre touch base. Final derogation submission Update with Welsh Government Senior Responsible Officers

Project Stage		Day	Date	Activities		
		Thursday	14-Apr		Other workstream issue meetings	MIMT/MIMPO response to final derogation submission
		Friday	15-Apr		Other workstream issue meetings	Update with Welsh Government
		Saturday	16-Apr			
		Sunday	17-Apr			
		Monday	18-Apr			
		Tuesday	19-Apr			
		Wednesday	20-Apr			
		Thursday	21-Apr			
		Friday	22-Apr			
		Saturday	23-Apr			
		Sunday	24-Apr			
		Monday	25-Apr			w/c 25 April Trust Board agree issue of ITSFT
		Tuesday	26-Apr			
		Wednesday	27-Apr			
		Thursday	28-Apr			
		Friday	29-Apr			
		Saturday	30-Apr			
		Sunday	01-May			
*		**Monday**	**02-May**	**issue of Invitation to submit final tenders in w/c 2nd May**		
	Preparation of Final	**4 weeks**				

Project Stage		Day	Date	Activities		
	Tender by bidders					
*		w/c	30 May	Receipt of Final Tenders (day to be advised in ITSFT)		
	Final Tender Evaluation	8 weeks		To include bidder presentations to stakeholder groups WG approvals and Trust Board Approval		w/c 18 July – Trust
*		w/c	25 July	Selection of successful participant		
	Successful participant stage	7 ½ months				
*		w/c	20 March 2023	Financial Close and anticipated award of contract		

TCS PROGRAMME SCRUTINY SUB-COMMITTEE

NVCC NON-CLINICAL RD&I GROUP UPDATE

DATE OF MEETING	22nd February 2022

PUBLIC OR PRIVATE REPORT	Public

IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report

PREPARED BY	Hannah Moscrop, Project Manager, TCS
PRESENTED BY	Hannah Moscrop, Project Manager, TCS
EXECUTIVE SPONSOR APPROVED	STEVE HAM, CHIEF EXECUTIVE

REPORT PURPOSE	FOR NOTING

COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING		
COMMITTEE OR GROUP	DATE	OUTCOME
RD&I Sub-Committee	13/01/2022	NOTED
TCS Programme Delivery Board	15/02/2022	NOTED

ACRONYMS	
nVCC	New Velindre Cancer Centre
RD&I	Research, Development and Innovation
ToR	Terms of Reference

1.   SITUATION

1.1   In January 2021, the nVCC project began the process of establishing an nVCC Non-Clinical RD&I Group to produce a programme of RD&I project work to inform and learn from the nVCC Project – a Dynamic Project Evaluation process.

1.2   Work has been ongoing during this time, and the appended report provides the overall context of the work and an overview of the ongoing projects and identified opportunities.

2.   KEY MATTERS FOR CONSIDERATION

2.1   To ensure visibility of this work and effective alignment across Trust and Project priorities, the Group will provide quarterly updates to the nVCC Project Board, TCS Programme Delivery Board and Trust RD&I Sub-Committee.

2.2   The attached update paper outlines the scope of this work, key activities, deliverables and dependencies, plus a high level timeline plan.

2.3   Additionally, the paper includes a log of completed and ongoing projects and identified opportunities, and maps the work against the Well-being of Future Generations (Wales) Act.

3.   KEY UPDATES FOR JANUARY 2022

3.1   The Group has funding available to support a number of small research Projects. In addition to looking at those identified as 'opportunities' in Appendix A, a comms message has been put out to all staff seeking research ideas, proposals, and sponsors.

3.2   The Group is writing out to key stakeholders and partners in January 2022 to advise them of the ongoing work and opportunities and to seek collaborative working. This communication is being sent with an update on the Collaborative Centre for Learning and Innovation.

3.3   Business Management students from the University of South Wales will be joining the nVCC Project as interns from January – March 2022, during which time they will undertake their own research projects, relevant to both the nVCC Project and their own degree course.

3.4   A number of medical students from Cardiff University will be undertaking their Student Selected Component research assignments with the support of Andrea Hague, Robyn Davies and Rhiannon Freshney.

3.5   Work is commencing to develop the Value Added Sponsorship Group – a number of projects falling under the 'Value Added' work will also give rise to Non-Clinical RD&I research opportunities, which this group will consider.

4.   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.

5.   RECOMMENDATION

5.1   The TCS Programme Scrutiny Sub-Committee are asked to **NOTE** the content of this report and Appendix A: nVCC Non-Clinical RD&I Project Log

nVCC Non-Clinical RD&I Group

Update Report

January 2022
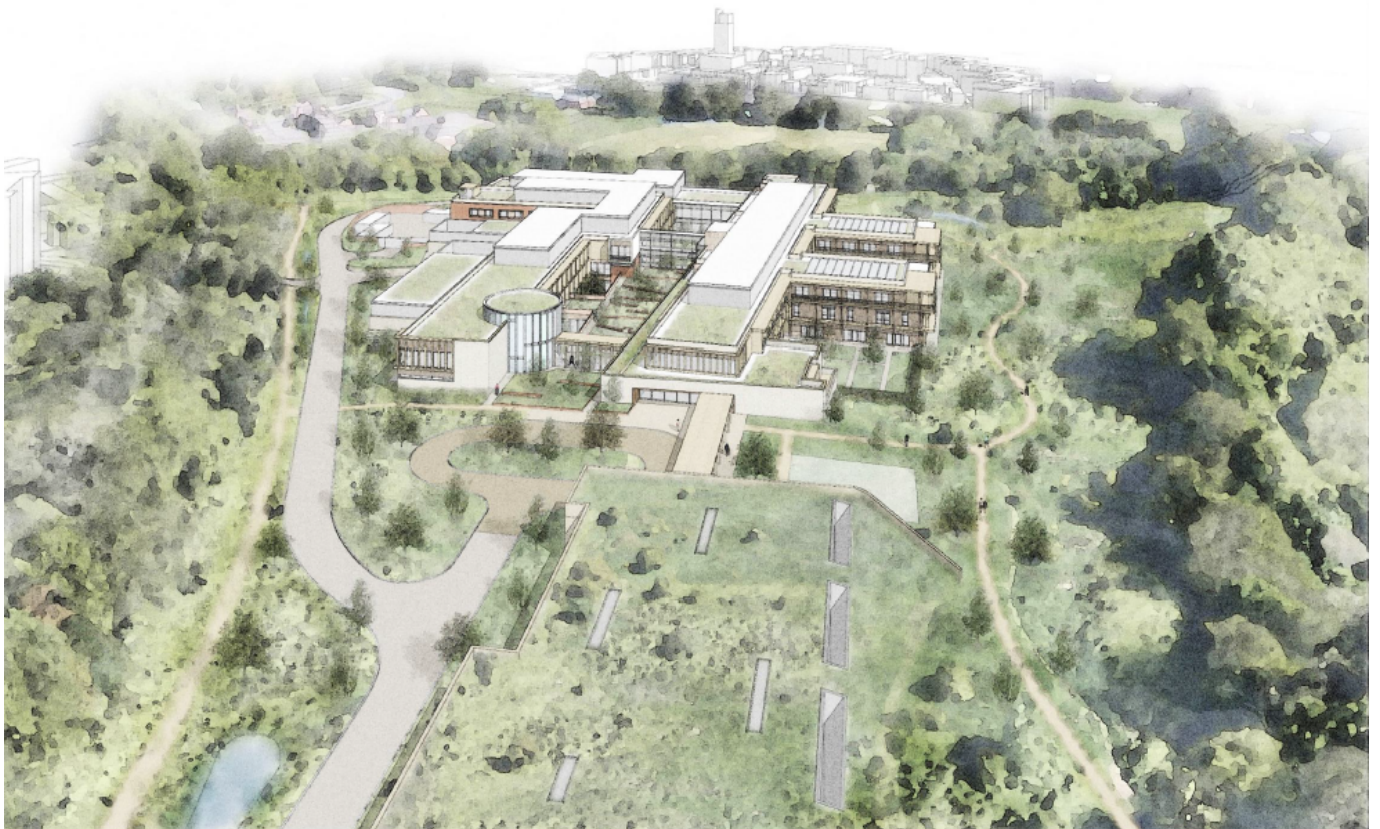
Document Control and Contents

The source of the document will be found in the following location: X:\Project 2 - nVCC\nVCC RD&I\Board Papers

Document Version History:

Version Number	Date	Author	Summary of changes
0.1	12.10.2021	Hannah Moscrop	Initial draft

Approvals:

This document will be shared with the following:

Title / Group	Date	Version / Option
nVCC Project Board	17th Jan 2022	
TCS Programme Delivery Board	17th Jan 2022	
Trust RD&I Sub Committee	13th Jan 2022	

Contents:

1. Overview

1.1. A key, but often overlooked, element of any project is evaluation and consideration of lessons learned. This is often undertaken as post-project evaluation – after the project has delivered its objectives and key team members may have left. Post-project evaluation is, therefore, too frequently treated as an afterthought and a short tick-box exercise – as team members are keen to move onto the next thing.

1.2. The nVCC Project aims to avoid this pitfall by undertaking a process of ***Dynamic Project Evaluation*** – that is, ongoing evaluation of the project, producing reports and outcomes by which to measure success and learn lessons throughout the life of the project. This can then feed into a comprehensive post-project evaluation.

1.3. It is hoped that this approach will identify and develop valued lessons for ongoing and future projects, as well as delivering opportunities for innovative approaches to evaluation.

1.4. In addition, this approach offers opportunities to inform the Project as it progresses – for example, undertaking research and comparative analysis to improve the nVCC Project ways of working, design ambitions and community benefits impacts.

1.5. This approach is facilitated and overseen through the nVCC Non-Clinical RD&I Group, which meets regularly to receive updates and discuss work being undertaken and future ambitions.

2. Scope of Work

2.1 The Project and Velindre Fundraising have identified an opportunity for unique fundraising projects to be undertaken for the nVCC, in addition to the ongoing fundraising activities undertaken ('business as usual').

2.2 The scope of this work is limited to those opportunities presented by the Trust procuring a new cancer centre – for example, opportunities related to the MIM procurement approach, the nVCC site, green building ambitions.

2.3 To guide priorities, the Group has divided the key areas of focus into 'Outcomes' and 'Method'.

Outcomes	Method

Design Principles – Delight
  -   Patient
  -   Staff
  -   Community
	Application of Well-being of Future Generations Act
	  - General
	  - Engagement

Design Principles – Firmness - Resilient	Project Management (time, budget, etc.)

- Green - Practical	
Design Principles – Commodity - Efficient - Flexible - Digital - The Velindre Way	Commercial Management - Risk transfer - Value for money - Funding package - Commercial movement from Competitive Dialogue to Financial Close, and Financial Close to completion
Community Benefits - Jobs / apprenticeships - Other benefits	Quality Checks - Snagging - Paymech deductions (Yr 1 and 2)
Facilities Management (FM) - Ongoing Paymech deductions	RD&I - Number of papers / grants - Quality (i.e. published / impact)
	Collaborative partnerships
Evaluated dynamically by:	**Evaluated dynamically by:**
- Where are we now - Where do we want to be - [In X years' time] Where are we now, did we get to where we wanted to be	- How we must do it (should) - What is best practice (could) - How did we do, versus how it should and could have been done - What would we change in hindsight (would)

3. List of Key Activities

3.1 The work outlined here will be undertaken by members of the nVCC Non-Clinical RD&I Group, supported by the nVCC PMO. Additionally, some work is undertaken by external partners with the sponsorship of nVCC Non-Clinical RD&I Group members – for example, University students undertaking research projects.

3.2 Using the key priority areas noted in 2.3, the Group has developed a list of projects and opportunities. A number of these have commenced already, and others remain TBC as noted in **Appendix A**.

3.3 Opportunites / future projects are to be mapped out against the nVCC Project timeline, to identify when they can be undertaken in order to provide the best value for the nVCC Project.

3.4 The Group aims to promote the opportunities available for RD&I to VCC staff, and wider – amongst University partners and other organisations – and will be working

with the Comms team to establish a presence on the VUNHST website and to include opportunities in internal and external Comms mailouts.

3.5 Within the nVCC Non-Clinical RD&I space are a lot of activities relating to indivudal research projects and opportunity development. However, as a whole, the overall high level key activities of the evaluation work are identified as:

- Ongoing development of opportunities – *nVCC Non-Clinical RD&I Group*
- Mapping of identified opportunities against nVCC Project timeline – *nVCC Project Team*
- Promotion to key stakeholders via website presence, newsletter content, engagement – *nVCC Non-Clinical RD&I Group, nVCC Project Team, [incl. via Comms Team]*
- Outputs interface with nVCC Competitive Dialogue participants / preferred bidder – *nVCC Project Team*
- Ongoing interface with preferred bidder prior to, during and following the construction of the nVCC – *nVCC Project Team*
- Ongoing monitoring to assess impact of projects implemented [i.e. impact of embodied carbon research findings on final nVCC] – *Project-dependent*
- Publication of final nVCC Project evaluation to inform future projects – *nVCC Project Team*

4. Key Deliverables

4.1 The Project has identified the following key deliverables to progress this work from engagement to final Fundraising outputs and delivery:

- ToR, aligned with Trust RD&I Sub Committee – *nVCC Project Team*
- Project log – *nVCC Project Team*
- Website presence – *nVCC Project Team*
- Project briefs and project outcome papers – *Project-dependent*
- Individual project deliverables – *Project-dependent*
- Final nVCC Project Evaluation report – *nVCC Project Team*

5. Key Dependencies

5.1 The Project has identified the following dependencies one which the completion of the Key Deliverables rely:

- nVCC Project Team resources to support Non-Clinical RD&I work, website development / update, analyse outputs
- Future nVCC resources to analyse outcomes
- External resource and interest to take forward opportunities

- Funding constraints
- MIM funding restrictions and final Project Agreement with successful participant
- nVCC Competitive Dialogue and evaluation timings to preferred bidder

6. Timeline Plan

6.1 High level activity plan:

Activity	Oct-21	Nov-21	Dec-21	Preferred bidder stage	nVCC Construction	nVCC Opening – Yr 1	Yr 2 onwards
Ongoing development of opportunities							
Mapping of identified opportunities against nVCC Project timeline							
Promotion to key stakeholders via website presence, newsletter content, engagement							
Outputs interface with nVCC Competitive Dialogue participants / preferred bidder							
Ongoing interface with preferred bidder prior to, during and following the construction of the nVCC							
Ongoing monitoring to assess impact of projects implemented [i.e. impact of embodied carbon research findings on final nVCC]							
Publication of final nVCC Project evaluation to inform future projects							

7. Well-being of Future Generations (Wales) Act 2015 / Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015

7.1 One of the key work areas for the nVCC Non-Clinical RD&I Group is the Well-being of Future Generations Act.

7.2 In addition, projects and opportunities identified for the Group are all aligned to one or more of the seven Well-being Goals. These have been mapped out as detailed in **Appendix A.**

8. Key Updates for January 2022

8.1 The Group has funding available to support a number of small research Projects. In addition to looking at those identified as 'opportunities' in Appendix A, a comms message has been put out to all staff seeking research ideas, proposals, and sponsors.

8.2 The Group is writing out to key stakeholders and partners in January 2022 to advise them of the ongoing work and opportunities and to seek collaborative working. This communication is being sent with an update on the Collaborative Centre for Learning and Innovation.

8.3 Business Management students from the University of South Wales will be joining the nVCC Project as interns from January – March 2022, during which time they will undertake their own research projects, relevant to both the nVCC Project and their own degree course.

8.4 A number of medical students from Cardiff University will be undertaking their Student Selected Component research assignments with the support of Andrea Hague, Robyn Davies and Rhiannon Freshney.

8.5 Work is commencing to develop the Value Added Sponsorship Group – a number of projects falling under the 'Value Added' work will also give rise to Non-Clinical RD&I research opportunities, which this group will consider.

Appendix A: nVCC Non-Clinical RD&I Project Log

Topic	Task Name	Description	Status	Future Gens Ways of Working				Future Gens Goals						
				Involvement	Collaboration	Long-term	Prevention	A Healthier Wales	A Globally Responsible Wales	A Prosperous Wales	A Resilient Wales	A Wales of Vibrant Culture & Thriving Welsh Language	A Wales of Cohesive Communities	A More Equal Wales
Biodiversity	Nature-based systems	To study how 'nature-based systems', including the external landscape features, biodiversity and indoor planting an impact upon both the mental and physical health of building users. To study the viability of delivering a landscape that is as near to nature as possible, that enhances and supports biodiversity and yet is capable of being effectively managed and maintained in the long-term.	Not started - opportunity			Y	Y	Y	Y				Y	
Commercial	Masters Research Project	Embedding Social Value into Procurement	Completed											
Commercial	Cardiff Business School PhD	TBC - pending CU update. (MA)	Not started		Y					Y				
Education	CC4L Design Brief + Bevan Commission Engagement	CCfLI Partnerships Report	Completed	Y	Y					Y				
Education	Med Students SSCs 2019/2020 - 1	How can hospital design be improved to reduce the carbon footprint of the NHS?	Completed				Y		Y					
Education	Med Students SSCs 2019/2020 - 2	Evaluating Cancer Incidence and Trends to Assess the Planning Assumptions of the Transforming Cancer Services Programme	Completed		Y			Y						
Education	Med Students SSCs 2022 - 2	Sustainability / meat-free diets - details TBC pending initial meeting (RF)	Not started	Y				Y	RF					
Education	Med Students SSCs 2022 - 3	Smart Hospitals (AH) What are examples of best practice around the world of smart hospitals, what lessons can we learn from these, and specifically what recommendations might be made to be incorporated into a new Velindre Cancer Centre – how might these recommendations impact on outcomes for cancer patients?	Not started	Y				Y						

Category	Project	Description	Status						
Education	USW Internships 2022 - 1 and 2	TBC - students commencing 18/01/2021	Not started						
Energy - Green, Renewable, in Building Design	Green Status Tracker - Pt 1	Pt 1 - to produce research brief. To develop a smart live green status checker for the nVCC and staff. (Pt 2 - to research and develop requirements; Pt 3 - to develop and create the solution for nVCC)	In progress	Y	Y			Y	Y
Energy - Green, Renewable, in Building Design	Green Status Tracker - Pt 2	Pt 2 - to research and develop requirements To develop a smart live green status checker for the nVCC and staff. (Pt 3 - to develop and create the solution for nVCC)	Not started - opportunity	Y	Y			Y	Y
Energy - Green, Renewable, in Building Design	Green Status Tracker - Pt 3	Pt 3 - to develop and create the solution for nVCC To develop a smart live green status checker for the nVCC and staff.	Not started - opportunity	Y	Y	Y		Y	Y
Energy - Green, Renewable, in Building Design	Operating energy	To study the operating energy and proposals for reducing energy demand. This includes regulated energy for Heating Ventilation and Air Conditioning and lighting and also for unregulated small power and specialist equipment. (PJ / PR)	Not started			Y	Y		Y
Energy - Green, Renewable, in Building Design	HVAC	To study innovative ways of heating, cooling and ventilating hospitals to achieve low energy performance. (PJ / PR)	Not started				Y		Y
Energy - Green, Renewable, in Building Design	Renewable energy and storage	To study the viability and availability of an energy supply from integrated renewable, private wire agreements and green grid energy combined with energy storage. (PJ / PR)	Not started			Y	Y		Y
Engagement and Its Impact	Minecraft for Education	Children and young people design competition through Minecraft for Education - engagement aim: engagement with and educated children and young people on environmental, sustainability, community benefits, and WBFGA; consultation element - obtain feedback and project knowledge on	Completed	Y	Y				Y

Category	Item	Description	Status										
		preferences for, e.g. community benefits, green site facilities											
Engagement and Its Impact	Digital Conversation - Down To Earth	ENRAW sponsored through Welsh Government. Consultation process via digital and in-person (drop-in) events. To obtain feedback on preferences for green and sustainable hospital design, site design, community benefits and site facilities. To obtain knowledge on effectiveness of 'digital conversation' as means of engaging	Completed										
Engagement and Its Impact	Children and Young People Engagement	Green Design Workshop - education for C&YP (health benefits of being outdoors), visual feedback for VCC - images to display in canteen. (FC / HM)	Completed	Y	Y				Y	Y			
General Green / Low Carbon Design	Develop a library of appropriate publications, research papers and case studies	Develop and share a library of appropriate publications, research papers and case studies - including established public research and research conducted as part of the nVCC Non-Clinical RD&I Group. Next action: publish online - establish website, promote via email. (All)	In progress			Y				Y			
Low / Zero Carbon	Embodied Carbon - Pt 1	Part 1: nVCC Reference Design. To study the embodied carbon in construction, including the use of timber, low carbon concrete and environmentally friendly finishes. Shared with CD participants. (PJ / PR / PM / HD)	Completed			Y	Y			Y			
Low / Zero Carbon	Embodied Carbon - Pt 2	Part 2: CD Participant(s) Design(s). To study the embodied carbon in construction, including the use of timber, low carbon concrete and environmentally friendly finishes. Ongoing dialogue with CD participants. (PJ / PR / PM / HD)	In progress			Y	Y			Y			
Low / Zero Carbon	Carbon off-setting	To study carbon sequestration to offset energy use, and to advice the nVCC Project on how to offset nVCC development in short- and long-term. (PJ / PR)	In progress			Y				Y			

Theme	Project	Description	Status	1	2	3	4	5	6	7	8	9	10	11	12
Placemaking	Ventilation and infectious disease e.g. COVID	To study the impact of Covid on design requirements in terms of space requirements, infection control, ventilation, and the choice of materials. (PJ / PR)	In progress				Y	Y	Y	Y		Y			
Placemaking	Digital design	To study the possibilities of digital design to enhance the user experience within the nVCC building. To study how digital systems can be designed and specified to align with Velindre's Zero-Carbon targets.	Not started - opportunity	Y					Y	Y					Y
Placemaking	Transitional space	To study the design of transitional spaces (such as entrances, retail areas, seasonal spaces, and covered car parking) and external spaces (such as external car parking, pedestrian routes, external activity areas, and external seating areas) on the health and wellbeing of building users.	Not started - opportunity	Y					Y						
Placemaking	Indoor Environment	A study of indoor conditions for health and comfort, including thermal comfort, visual comfort and indoor air quality. Also, how the internal conditions thus created are appropriate to enhancing the health and wellbeing of building occupiers at and the various users of the building. To include consideration of the impact of materials on air quality toxicity and ambiance.	Not started - opportunity				Y	Y	Y	Y					
Placemaking	Review	To study how placemaking relates to the design and operation of hospitals.	Not started - opportunity				Y	Y	Y						
Smart / Digital	AI - Data Science Academy 2	Automated conversation analysis (AL)	Completed	Y					Y						
Smart / Digital	AI - CU Data Science Acacdemy - 1	Sentiment Analysis of users and community on proposed hospital design. (AL)	Completed	Y					Y						
Smart / Digital	Med Students SSCs 2022 - 1	AI - details TBC pending initial meeting (RD / other)	Not started		Y				Y						
Well-being of Future Generations	nVCC Art Gallery	Creation of Velindre Art Charity and programme. (RD / RF / DB)	In progress	Y										Y	

Well-being of Future Generations	Sustainability App	Development of Trust Sustainability App for staff, patients (RF)	Not started	Y					Y	Y				
Well-being of Future Generations	The Therapeutic Benefits of Art	This proposal primarily focuses on A Wales of Vibrant Culture & Thriving Welsh Language as it seeks to determine a research project into the therapeutic qualities of art. Within the Journey Tracker (Appendix 1), the most relevant recommendations related to art are contained within Valuing Creativity, Culture for Change Culture Enabling Prosperity, and Culture Available to All sub-headings. Any research project will cross reference each Well-being Goal to determine the contribution to the Act. Any potential activity, however, will not be exclusively related to this Well-being Goal. (RF - drafted outline to start this project - for student?)	Not started - opportunity	Y	Y			Y			Y	

TCS PROGRAMME SCRUTINY SUB-COMMITTEE

ENABLING WORKS INJUNCTION UPDATE

DATE OF MEETING	22nd February 2022

PUBLIC OR PRIVATE REPORT	Public

IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report

PREPARED BY	*Lauren Fear, Director Corporate Governance and Chief of Staff* *Carl James,* Director Strategic Transformation, Planning and Digital
PRESENTED BY	*Lauren Fear, Director Corporate Governance and Chief of Staff* *Carl James,* Director Strategic Transformation, Planning and Digital
EXECUTIVE SPONSOR APPROVED	*Lauren Fear, Director Corporate Governance and Chief of Staff* *Carl James,* Director 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
Trust Board – Previous injunction papers	2/12/2021 7/1/2022	Approved Noted
TCS Programme Delivery Board	15/02/22	Noted

ACRONYMS	
TCS	Transforming Cancer Services
nVCC	New Velindre Cancer Centre
OBC	Outline Business Case
FBC	Full Business Case
WG	Welsh Government
IIB	Infrastructure Investment Board

1. SITUATION/BACKGROUND

1.1 In an Extraordinary Trust Board meeting on 2nd December 2021, the Board considered whether to start an application process for an injunction to be in place in relation to the Enabling Works programme for the new Velindre Cancer Centre.

1.2 Based on the previous experience in October 2021 of the significant direct action in relation to ground investigation works, the recommendation was to start an injunction process, which involved collating evidence and serving notice on those who had reached a significant enough threshold of direct action. The Board **approved** "the application for an injunction to commence if there is direct action with disrupts the ground investigation works commencing 6th December 2021."

1.3 The Trust Board then had an update in early January meeting on the direct action that had taken place during the December works and the application that was therefore going to be progressed.

1.4 The purpose of this paper is to formally note latest position through TCS Programme Delivery Board and TSC Programme Scrutiny Sub-Committee.

2. ASSESSMENT / SUMMARY OF MATTERS FOR CONSIDERATION

2.1 Following a hearing in the High Court on 27th January 2022, the Order for an Interim Injunction was granted. The Injunction prohibits the Defendants named or identified in the Order, which includes "persons unknown" – that is to say anyone – from undertaking direct action within the Land specified in the Order. Direct action is defined in full in the Order but effectively means anyone unlawfully taking specific action to disrupt the Works.

2.2 The Interim Injunction Order will remain in place, subject to the Trust receiving a Final Injunction Order, at a trial now set for later in April. If approved at this point, the Injunction will be extended for the duration of the hospital build until 2025.

2.3 During the January and February works to date, there has been limited direct action on site. Any examples are continuing to be documented and will be updated in the trial documentation for late April.

3. IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes (Please see detail below)
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	Yes (Include further detail below)
	Throughout paper
FINANCIAL IMPLICATIONS / IMPACT	Yes (Include further detail below)
	Costs across legal processes are being summarised for the Board

4. RECOMMENDATION

4.1 The TCS Programme Scrutiny Sub-Committee is asked to **NOTE** that following Trust Board approval to commence an injunction process has been progressed and an Interim Injunction has been granted by the High Court.

TCS PROGRAMME SCRUTINY SUB-COMMITTEE

Communications and Engagement Update

DATE OF MEETING	22nd February 2022

PUBLIC OR PRIVATE REPORT	Public

IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report

PREPARED BY	FRANCESCA CARPANINI, SENIOR COMMUNICATIONS AND ENGAGEMENT MANAGER
PRESENTED BY	NON GWILYM, ASSISTANT DIRECTOR COMMUNICATIONS AND ENGAGEMENT
EXECUTIVE SPONSOR APPROVED	LAUREN FEAR, DIRECTOR CORPORATE GOVERNANCE

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	15/02/2022	Noted

ACRONYMS	
nVCC	New Velindre Cancer Centre

1.   SITUATION

2.   BACKGROUND

This paper provides the Board(s) with an update on communications and engagement during the course of January 2022.

The Programme Board approved the Transforming Cancer Services (TCS) Programme Communications and Engagement strategy in December 2019. The strategy emphasises the importance of good one-to-one stakeholder engagement, building positive relationships and informing our patients, staff and communities of interest.

3.   ASSESSMENT

Over the reporting period we focused our efforts on:

- **Strategic counsel and preparing communications and engagement support ahead of site clearance on site**
    1. Producing communications action plan and drafting subsequent content for internal and external stakeholders
    2. Coordinating briefing meetings with identified stakeholders; this included MS MP, ward Councillors, Hollybush Estate Residents Association and liaison with other key community groups.
    3. Direct mail bilingual letters to be delivered to residents living locally to the site
    4. Sharing content across Velindre Matters channels and monitoring social media, including responding to questions and messages
    5. Liaison with Walters and Nexus, as well as ASDA to manage communications
    6. Liaison with South Wales Police, Welsh Government and Cardiff Council communications to provide appropriate updates

- **Managing media enquiries and related social media commentary** as part of the site clearance works beginning. Coverage outlined below, with a summary of digital activity as separate attachment
  - https://www.thenational.wales/environment/19888624.huge-art-protest-site-new-velindre-cancer-centre/
  - https://nation.cymru/news/campaigners-set-up-new-camp-to-protest-development-on-cardiffs-northern-meadows/

- **Responding to correspondence from a wide range of stakeholders.** There continues to be a significant amount of incoming correspondence over the past month in response to the preparatory works that took place on site. The key recurring themes are:
  - enabling works, contractors and the required permissions
  - challenges in relation to the clinical model and patient safety
  - impact on trust in the Velindre brand and its wider reputation within the community
  - decision on the Hollybush emergency bridge and the potential alternative

- **Political stakeholder meetings** – in addition to the regular meetings with the local constituency MS and MP, we continue to build relationships with the existing ward Councillors and liaison with candidates standing for election in May 2022.

- **Development of "you asked, we say"** to mitigate the ongoing misinformation regarding key aspects of the project, which will include ecological, clinical and management information

- **Engagement hub space within VCC** – two hubs are now installed in the cancer centre to provide content and related surveys to gain further insight and engagement for the green ambitions and overall plans for the new Velindre Cancer Centre

- **Supporting the development of a wider value added package –**for socialising with staff and stakeholders in early 2022.

For the next month, our priorities will be as follows:

- Continue to support the second phase site clearance communications and engagement activity to ensure project team and contractors are appropriately supported;
- Implementing a plan to promote clinical messaging, which will support the "you asked, we say" but also provide a wider context for media and additional digital content for the project and Trust as a whole;
- Implementing the feedback plan through the engagement hubs at Velindre Cancer Centre that allows us to track and score staff and patient sentiment, understanding and ideas;
- Update and publish new FAQs onto Trust website;
- Recruitment of project Engagement Manager and Communications Manager
- Continue to socialise the value add engagement programme to garner support and develop appropriate plans for each aspect of the programme to deliver in 2022;
- Publish next issue of Velindre Matters digital newsletter;
- Drafting and approving Velindre Matters community newspaper content;
- Support meetings with MS and MP;
- Promote new content on the Velindre Matters social channels;
- Continue to monitor opposition social media channels and advise accordingly;
- Supporting the new Velindre Cancer Centre research and development working group, alongside its Trust counterpart;
- Supporting the patient engagement framework and related activities.

4.   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.

5. RECOMMENDATION

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