Public: Transforming Cancer Services Programme Scrutiny Sub-Committee

Mon 19 June 2023, 10:00 - 10:30

Bevan Meeting Room, TCS Office, Postgrad 2, Velindre Cancer



Agenda

10 min

10:00 - 10:10 1. STANDARD BUSINESS

1.1. Welcome & Introductions

Discussion Stephen Harries, Chair

1.2. Apologies for Absence

Discussion Stephen Harries, Chair

1.3. Declarations of Interest

Discussion Stephen Harries, Chair

1.4. Minutes of the Sub-Committee Meeting held on 20th April 2023

Discussion Stephen Harries, Chair

To Approve

1.4 PUBLIC TCS Programme Scrutiny Sub-Committee Minutes 20.04.23.pdf (4 pages)

1.5. Minutes of the Sub-Committee Meeting held on 23 March 2023

Decision Stephen Harries, Chair

To Approve

PUBLIC TCS Programme Scrutiny Sub-Committee Minutes 23.03.23-LF.pdf (4 pages)

1.6. Action Log

Decision Stephen Harries, Chair

To Approve

1.5 PUBLIC TCS Programme Scrutiny Sub-Committee Action Log 20.04.23.pdf (4 pages)

10:10 - 10:20 2. PROGRAMME GOVERNANCE 10 min

2.1. Communications & Engagement

Discussion Non Gwilym, Assistant Director of Communications and Engagement

To note

2.1 Communications and Engagement.pdf (19 pages)

3. PROGRAMME DELIVERY 10:20 - 10:30

10 min

3.1. Programme Director's Report

Decision Gavin Bryce, Associate Director of Programmes

To Note

3.1 Programme Directors Report.pdf (21 pages)

3.1 Appendix B_Risk Issues Checklist_PSSC_June 23_Public.pdf (1 pages)

3.1 Appendix C_Risk Register_PSSC_June 23_Public_Final.pdf (1 pages)

3.1 Appendix D Issues Register PSSC June 23 Public.pdf (1 pages)

10:30 - 10:30 4. ANY OTHER BUSINESS

0 min

Decision Stephen Harries

Prior Agreement by the Chair Required

10:30 - 10:30 5. REVIEW OF THE MEETING

0 min

Discussion Stephen Harries

10:30 - 10:30 6. DATE & TIME OF NEXT MEETING

0 min

Discussion Stephen Harries

Thursday 20th July at 1.30-3pm

Velindre Headquarters

10:30 - 10:30 7. CLOSE

0 min

The Board is asked to adopt the following resolution:

That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest in accordance with Section 1(2) Public Bodies (Admission to Meetings) Act 1960 (c.67).





TCS Programme Scrutiny Committee <u>Public Session</u>

MINUTES OF THE MEETING HELD 20th April 2023 at 1.30-3.00pm Trust Headquarters, Nantgarw (via Teams)

Members Present:

Stephen Harries (SH) Independent Member (Chair)

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

In attendance:

Steve Ham (SHam) Trust Chief Executive

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

Gavin Bryce (GB) Planning Performance Programme Manager

Andrea Hague (AH)

Mark Ash (MA)

Matthew Bunce (MB)

Director of Service Transformation

Assistant Director of Finance

Executive Director of Finance

Cath O'Brien (COB) Chief Operating Officer

Tom Deacon (TD) Senior Communications Manager

Stephen Allen (SA) Chief Officer, CHC

Carys Jones (CJones) Senior Programme Delivery & Assurance Manager

Bethan Lewis (BL) Programme Planner & Risk Advisor Cory Davies (CD) Project and Programme Co-ordinator Liane Webber (LW) Secretariat/Business Support Officer

Apologies:

Professor Donna Mead (DM) Trust Chair

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

Dr Jacinta Abraham (JA) Executive Medical Director

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

Sarah Morley (SM) Executive Director of OD & Workforce

Non Gwilym (NG)

Assistant Director Communications and Engagement

David Powell (DP) TCS Project Director

Huw Llewellyn (HL) Director of Commercial and Strategic Partnerships

1.0	STANDARD BUSINESS	ACTION		
1.1	Welcome & Introductions			
	SH welcomed attendees to the meeting.			
1.2	Apologies for Absence			
20077	Apologies were noted as above.			
1.3	Declarations of Interest			
	No declarations of interest were received.			

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1.4	Minutes of the Sub-Committee Meeting held on 23 rd March 2023 As the minutes of the meeting held on 23 rd March 2023 were a late circulation members were requested to review and return with any comments or questions by Tuesday 25 th April. Updated/amended minutes to be brought to the next meeting for final approval.	LW				
1.5	Action Log					
	LF gave a brief update on the outstanding actions. In terms of the four outstanding actions relating to the Programme Tranche Report it was agreed, that in the light of the approaching governance cycles for May and potentially June and the focus on the Final Business Case and deal, it would present an appropriate opportunity to review the Programme Tranche Report and reset the role of the Sub-Committee following this phase. These actions would then be brought to the July meeting on the assumption that financial close would have been completed by this date (if timings change this would need to be reflected in consideration of approach). The remaining actions were updated as follows:					
	GJ highlighted the extensive work to be undertaken to reach financial close and suggested that the focus be on this rather than tying staff to a May deadline date of actions which, although important, should not impede the more urgent tasks at hand.					
	The Sub-Committee approved the action log.					
2.0	PROGRAMME GOVERNANCE					
2.1	Communications & Engagement TD presented the Communications and Engagement update and the following points were raised:					
	• LF reported on the recently received initial summary graphic from the Spring Jamboree which had proven to be a very successful event. Noted that over 40 families from the local community, 12 patients and their children, along with 104 staff members had attended the event. SA requested to receive a copy of the summary graphic for information.	LF				
	SA highlighted the Residents Engagement event and requested a list of the comments fed back by the community along with the responses given. TD to provide this.	TD				
	The Sub-Committee noted the Communications and Engagement and Staff Feedback updates.					
2.2						

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	 was agreed that this would be further reviewed and clarity provided in due course. MB raised a question asked by DM prior to the meeting in which clarity was sought on two similar entries within Appendix 2 (TCS Programme Funding for 2022-23). MB clarified these as follows: Trust revenue funding £0.060M Funds for the recruitment of a Project Manager given the concerns raised regarding high-risk outreach project. Trust revenue funding from reserves £0.063M £30K funded from Trust reserves since the TCS programme was established, £33K one-off judicial review legal fees over and above available capital funding. 					
3.0	The Sub-Committee noted the TCS Programme Finance Report. PROGRAMME DELIVERY					
3.1	 Programme Director's Report GB gave a brief summary of the Programme Director's Report which was discussed as follows: MB highlighted the paragraph which reads "The FBC was considered at all commissioner Board meeting in March, with approval subsequently being achieved at three of the five meetings. The remaining two commissioners did not feel at this stage they could currently confirm their financial support for the nVCC FBC and have requested further engagement". As a point of clarity MB noted that this should state "approval subsequently being achieved by four of the six meetings" and that the remaining two commissioners supported the strategic direction and management case but could not approve the financial case on affordability grounds. SA queried whether a list of all current TCS schemes, along with a timeline of completion, was available as this would be a useful reference document to provide information and assurance to the public. SH and GB thanked SA for offering this external view and agreed to look at providing a one-page, bullet 	GB				
	 HJ highlighted the section 'Activities to support financial close' and requested that where statements such as "a decision is required" and "further detailed planning to be undertaken" are used, this is accompanied by details of deadline dates and accountable persons. HJ queried the Project Status table, noting that Project 3a shows a 'green' 	OB .				
200 p	rating for all elements with an overall status of 'amber'. COB agreed that this appeared to be an anomaly and would be reviewed. • GJ highlighted the section entitled 'Project 6 Service Delivery, Transformation & Transition' in which it is stated that "transition planning has also been raised by the WG Scrutiny process as of critical importance…" and wished to clarify that concerns around this have been previously flagged by this Sub-Committee. SHam noted that use of the term 'transition' is vague and requires clear distinction when used – in terms of the comment around WG Scrutiny process it referred to the physical move whereas within the organisation it has been used to refer to transition of the service to the new model.	СОВ				

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	The Sub-Committee noted the Programme Director's Report.				
4.0	CAPITAL PROJECTS HIGHLIGHT REPORTS FOR CONSENT				
	It was noted that these reports were intended to form part of the Programme Director's Report and will be presented as such for future meetings.				
4.1	Project 1 – Enabling Works Highlight Report				
4.2	Project 2 – nVCC Highlight Report				
4.3	Project 3 – IRS Implementation Highlight Report				
	HJ sought further detail on the Top Risks and Summary section which states "Resource risks to the programme, absence in core establishment, digital expertise, recruitment challenges for skills set". COB advised that following a step up in recruitment to support the programme, issues around digital recruitment remain - although a firm recovery plan is in place – along with Medical Physics which is under review with remedial action in place to address this.				
4.4	Project 4 – RSC Highlight Report				
	As an overall observation, GJ noted that although the graphic representations were helpful, further narrative would be useful.				
	HJ highlighted that some information, particularly within the main report, may be commercially sensitive and not appropriate for public papers. AH to pick up with the team outside of the meeting.	АН			
	The Sub-Committee noted the Project 1, Project 2, Project 3 and Project 4 Highlight Reports.				
5.0	ANY OTHER BUSINESS				
	There were no additional items of business brought for discussion.				
6.0	REVIEW OF THE MEETING				
	There were no additional comments or questions.				
7.0	DATE & TIME OF NEXT MEETING				
	The next meeting of the Sub-Committee will be held on Thursday 18 th May at 10.00-11.30am				





TCS Programme Scrutiny Committee <u>Public Session</u>

MINUTES OF THE MEETING HELD 23rd March 2023 at 10.00-11.00am Trust Headquarters, Nantgarw (via Teams)

Members Present:

Stephen Harries (SH) Independent Member (Chair)

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

Professor Donna Mead (DM) Trust Chair

In attendance:

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

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

Dr Jacinta Abraham (JA) Executive Medical Director
David Powell (DP) TCS Project Director

Non Gwilym (NG)

Assistant Director Communications and Engagement
Huw Llewellyn (HL)

Director of Commercial and Strategic Partnerships

Andrea Hague (AH) Director of Service Transformation
Mark Ash (MA) Assistant Director of Finance
Matthew Bunce (MB) Executive Director of Finance

Bethan Lewis (BL) Programme Planner & Risk Advisor Cory Davies (CD) Project and Programme Co-ordinator Liane Webber (LW) Secretariat/Business Support Officer

Apologies:

Steve Ham (SHam) Trust Chief Executive

Gavin Bryce (GB) Planning Performance Programme Manager
Carys Jones (CJones) Senior Programme Delivery & Assurance Manager

Cath O'Brien (COB) Chief Operating Officer

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

1.0	STANDARD BUSINESS	ACTION
1.1	Welcome & Introductions	
	SH welcomed attendees to the meeting.	
1.2	Apologies for Absence	
200	Apologies were noted as above.	
1.3	Declarations of Interest No declarations of interest were received.	

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1.4	Minutes of the Sub-Committee Meeting held on 26th January 2023	
	An omission from the minutes of 26 th January was highlighted, as follows:	
	Given the infrequency of TCS Scrutiny meetings over the last few months HJ expressed the importance of returning to the monthly cycle and this was agreed by the group.	
	Pending the addition of the above, the minutes of the meeting held on 26 th January 2023 were confirmed as an accurate record.	
1.5	Action Log	
	It was noted that many of the actions relate to the receipt of the Programme Tranche Report which it was agreed will be brought to a meeting of the TCS Scrutiny Sub-Committee, the timing of which would be confirmed in the April meeting. GJ noted that the target dates require review as they are now out of date.	LF
	The Sub-Committee approved the action log.	
2.0	PROGRAMME GOVERNANCE	
2.1	Communications & Engagement	
	LF presented the Communications and Engagement update and the following points were raised:	
	DM highlighted the lack of public attendance at the community engagement events and requested that this be closely kept under review due to the associated commitments of holding such events.	
	 The staff survey was discussed at length and it was noted that there are many staff engagement events, the data from which will not have been included in the results. NG to discuss with the team how to pull all of the data together and present it in an efficient and effective manner. 	NG
	The Sub-Committee noted the Communications and Engagement update.	
2.2	TCS Programme Finance Report	
	MA outlined the TCS Programme Finance Report which was discussed as follows:	
300	GJ highlighted the request for funding from Welsh Government, noting that this would not be received by year end and sought clarity on the financial commitment for the Trust in the interim. MA advised that from 1st April c£10m will be available from the Enabling Works which could release funds to be replenished upon receipt of Welsh Government funding. GJ raised concern of the potential risk should the full amount not be signed off by Welsh Government, however MB explained that WG are fully sighted on the request	

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	and that the potential for risk was unlikely. MA and MB to meet with WG to gain more clarity around the governance view and provide formal update at the next meeting.	МВ/МА
	The Sub-Committee noted the TCS Programme Finance Report.	
3.0	PROGRAMME DELIVERY	
3.1	Programme Director's Report	
	CJ gave a brief summary of the Programme Director's Report which was discussed as follows:	
	DM queried the timescale of the Northern Access restriction arising from Asda potentially not completing on time. DP gave a brief explanation and it was noted that the development agreement states that the Northern Access route would not be permitted until the highway works are completed next year.	
	 GJ requested an update to the Public Right of Way Determination on Page 7 which states that a deadline of 13th March had been set. LF clarified that the date was a self-imposed deadline, does not hold any particular significance in terms of being a statutory period and does not affect the impact on critical path. 	
	The Sub-Committee noted the Programme Director's Report.	
4.0	PROJECT DELIVERY	
4.0	PROJECT DELIVERY Project 2	
4.1	Project 2	
4.1	Project 2 Full Business Case Commercial Case Progress Update MA gave a verbal update. It was noted that the FBC Commercial Case is currently	
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4.1.1 4.1.2 4.2	Project 2 Full Business Case Commercial Case Progress Update MA gave a verbal update. It was noted that the FBC Commercial Case is currently being updated and is expected to be shared with Board members next week. The Sub-Committee noted the Full Business Case Commercial Case Progress Update. Prep for Gateway Review – Gate 3	
4.1.2 4.1.2 4.2.1	Project 2 Full Business Case Commercial Case Progress Update MA gave a verbal update. It was noted that the FBC Commercial Case is currently being updated and is expected to be shared with Board members next week. The Sub-Committee noted the Full Business Case Commercial Case Progress Update. Prep for Gateway Review – Gate 3 The Sub-Committee noted the Prep for Gateway Review – Gate 3.	

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5.0	ANY OTHER BUSINESS					
	There were no additional items of business brought for discussion.					
8.0	REVIEW OF THE MEETING					
	There were no additional comments or questions.					
9.0	DATE & TIME OF NEXT MEETING					
	The next meeting of the Sub-Committee will be held on Thursday 20 th April at 1.30-3.00pm.					





TCS Programme Scrutiny Sub-Committee

April 2023

Action Summary – PUBLIC

No.	Action	Owner	Date Raised	Target Date	Progress to date	Status (Open / Closed)
120	Multiple actions linked to work on Programme Tranche Report – in Appendix below 120 121 122 130	Cath O'Brien / Sarah Morley/ Steve Ham	22/03/2022	20/07/2023	Following the completion of the nVCC Business Case process, the Programme Tranche Report needs to be refreshed and presented to the Committee for discussion in order to frame the future scope and structure of the TCS work	OPEN (To be addressed in line with Programme Tranche Report)
137	Comms & Engagement The staff survey was discussed at length and it was noted that there are many staff engagement events, the data from which will not have been included in the results. NG to discuss with the team how to pull all of the data together and present it in an efficient and effective manner.	Non Gwilym	23/03/23	18/05/23	Work to consolidate the various sources of staff engagement insight underway and will be brought together in the May paper onwards	CLOSED
138	GJ raised concern of the potential risk should the full amount of funding not be signed off by Welsh Government, however MB explained that WG are fully cited on the request and that the potential for risk was unlikely. MA and MB to meet with WG to gain more clarity	Matt Bunce/ Mark Ash	23/03/23	20/04/24	To be covered as part of Finance update during 20 th April meeting	CLOSED

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Transforming Cancer Services



in South East Wales

No.	Action	Owner	Date Raised	Target Date	Progress to date	Status (Open / Closed)
	around the governance view and provide formal update at the next meeting.					
139	As the minutes of the meeting held on 23 rd March 2023 were a late circulation, members were requested to review and return with any comments or questions by Tuesday 25 th April. Updated/amended minutes to be brought to the next meeting for final approval.	Secretariat	20/04/23	25/04/23	Updated/amended minutes brought to the April Meeting.	CLOSED
140	Spring Jamboree - SA requested to receive a copy of the summary graphic for information.	Lauren Fear	20/04/23	30/06/23	Final version still being finalised and will then be circulated to the whole Committee, including SA.	OPEN
141	SA highlighted the Residents Engagement event and requested a list of the comments fed back by the community along with the responses given. TD to provide this.	Tom Deacon	20/04/23	19/06/23	No residents attended the following engagement events discussed but any future feedback and responses will be included in our report going forward.	CLOSED
142	HJ queried the statement that the Implementation Project will not be reported by the TCS Project and queried the reporting process if this was the case. It was agreed that this would be further reviewed and clarity provided in due course.	Steve Ham	20/04/23	19/06/23	IRS implementation highlight report as part of standard Scrutiny Committee agenda	CLOSED
143	SA queried whether a list of all current CS schemes, along with a timeline of completion, was available as this would be a useful reference document to	Gavin Bryce	20/04/23	19/06/23	No update received	OPEN

Transforming Cancer Services in South East Wales



No.	Action	Owner	Date Raised	Target Date	Progress to date	Status (Open / Closed)
	provide information and assurance to the public. GB agreed to look at providing a one-page, bullet point update summary.					
144	HJ queried the Project Status table, noting that Project 3a shows a 'green' rating for all elements with an overall status of 'amber'. COB agreed that this appeared to be an anomaly and would be reviewed.	Cath O'Brien	20/04/23	19/06/23	Corrected in highlight report	CLOSED
145	Project 4 – RSC Highlight Report HJ highlighted that some information, particularly within the main report, may be commercially sensitive and not appropriate for public papers. AH to pick up with the team outside of the meeting.	Andrea Hague	20/04/23	19/06/23		CLOSED

Appendix: Actions related to Programme Tranche Report

121	TCS Programme Risk Register COB agreed to incorporate into the report addressing the issues that are currently scattered throughout the risk register to give assurance on the totality of the workforce issues that are being faced and what is being done to address these. COB agreed to ensure this is broken	Cath O'Brien / Sarah Morley
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Transforming Cancer Services

in South East Wales

	in South East Wales		
	down to manage the programme of work and delivering the service and the thread that comes through it. COB will work with BL and SM to articulate that and to show what is being done to address this issue.		
122	SHam acknowledged the need for clarification on the strategic approach to recruitment and noted that this would be discussed at EMB with an update brought to the July meeting of this committee, following a discussion in the June Board Development meeting	Steve Ham/ Sarah Morley	
130	Noted that work is underway to undertake targeted recruitment of key posts which are proving difficult to fill work with a Recruitment Marketing	Sarah Morley	





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TCS PROGRAMME SCRUTINY SUB-COMMITTEE

Communications and Engagement Update

DATE OF MEETING	19 th June 2023			
PUBLIC OR PRIVATE REPORT	Public			
IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report			
REPORT PURPOSE	INFORMATION / NOTING			
		_		
PREPARED BY	Thomas Deacon, Senior Communications Manager			
PRESENTED BY	Non Gwilym, Director of Communications and Engagement			
EXECUTIVE SPONSOR APPROVED	Lauren Fear, Director of Corporate Governance & Chief of Staff			
EXECUTIVE SUMMARY	A summary of activity by the communications and engagement team to promote the work of the TCS programme during the reporting period.			
RECOMMENDATION / ACTIONS	The Board is asked to note the paper.			
	·			
Level 7 Level 6 Level 5 Level 5	evel 4 Level 3 Level 2 Level 1 Level	0		

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ASSURANCE RATING ASSESSED

BY EXECUTIVE SPONSOR



COMMITTEE / GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING		
COMMITTEE OR GROUP	DATE	
nVCC & EW Project Board	14/06/2023	
Strategic Capital Board 15/06/2023		

SUMMARY AND OUTCOME OF PREVIOUS GOVERNANCE DISCUSSIONS

ACRONY	MS

APPENDICES	
A	Latest staff feedback from intranet survey

1. SITUATION

This report outlines the activities and achievements of the TCS communications and engagement team since the previous meeting.

2. ASSESSMENT

3. Communications

3.1 Proactive digital communications

nVCC project blog

An internal nVCC project blog has been launched which will house all updates on the project going forward. The blog is displayed prominently on the intranet landing page providing easy access for staff across the Trust to follow and stay informed about the progress of the project. More than four articles have already been published as part of the blog and the intention is to post regularly including not only key announcements, e.g

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project team members. In total the posts have had more than 600 views from staff members.

Posts shared include:

• Asda bridge images – 453 views

The first post shared images of the Asda bridge beams being installed at the beginning of May. The post has received more than 400 views. This was also shared on the Velindre Matters social media accounts with a higher-than-normal level of engagement and most of the reaction was positive. The comm was also sent to all local stakeholders.

• Design award shortlist - 73 views

We also shared positive news that the nVCC has been shortlisted for the European Healthcare Design Awards 2023 in the Future Healthcare Design category.

This was also shared on our Velindre Matters social media accounts with a higher-than-normal level of engagement and again most of the reaction was positive. The comm was also sent to all local stakeholders.

• Un Peth Bach - 56 views

We have shared two updates on the Un Peth Bach project, highlighting to staff which themes are upcoming and how they can provide feedback.

• 'Meet the team' - 25 views

We have share the first in a regular series of 'meet the team' posts where members of the project will give a brief overview of their work on the nVCC in order to raise awareness across the Trust of the work underway.

Vegetation clearance works

Messaging was issued via social media and sent to all local stakeholders on May 25 ahead of some routine vegetation clearance taking place at the beginning of June.

3.2 Media queries

During the reporting period we received two requests for comment from the media. Both requests came from Nation Cymru on receiving press releases from Save the Northern Meadows. The first article surrounds claims over Aviva being involved in both the nVCC and the Barry Biomass plant and claims that these "contradict" one another.

The following response was issued:

"The new Velindre Cancer Centre is being developed under the Welsh Governments' Mutual Investment Model (MIM) policy which supports additional investment in social and economic infrastructure projects and improves public services in Wales. Our funding solution is sourced from a funding group via the Acorn consortium as is required via a MIM project."

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The second article was based on claims that regulation legislation was being "ignored" by the Trust regarding procurement related to the nVCC. It comes after previous articles were published on the business practices of Kajima and Sacyr in Japan and Spain respectively.

The following comment was issued:

"The capital cost of the new Velindre Cancer Centre is being finalised in discussions with the Acorn Consortium ahead of financial close of the project agreement. "Furthermore, and as previously stated, it is also important to remember that the cost includes not only the capital value of construction, but also the cost of funding, maintenance and lifecycle investment over the contract life of 25 years from opening. "As outlined previously, our current cancer centre does not have the facilities or space to meet the future needs of patients. The new cancer centre is vital for us to keep pace with increasing demand for non-surgical cancer services as the number of people referred to us with cancer grows every year. Over the coming decades, the state-of-the-art cancer centre will support the region in significantly improving the quality of care, patient experience and outcomes."

3.3 Correspondence

Responding to correspondence from a wide range of stakeholders.

The level of correspondence has maintained and the main themes of correspondence received during the reporting period include:

- Complaints about the conduct of some individuals commenting on Velindre Matters social media posts
- Noise caused by some enabling works
- Questions about the new development and services provided
- The ongoing works to build the Asda bridge following the distribution of our comms

3.4 Engagement

Staff engagement

Several initiatives to engage staff around the nVCC are now underway. Un Peth Bach – Just One Thing has been underway for more than eight weeks and has so far focused on staff facilities, art, equipment, landscaping and most recently digital. Hundreds of staff members and patients are being spoken to each week and valuable feedback has been received both verbally and via the dedicated online staff feedback form.

Pop-up events are being held in in the VCC café with regular updates on what's happening in the nVCC project and handouts linked to each topic. Previous UPB polls will remain open and we have received some further responses since the respective weeks finished.

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All feedback received is being collated and shared with project team leads and we are in the process of finalising a format where we can present comments back to staff in a 'you said, we did' approach.

A SWOT analysis has been carried out on the series so far and several recommendations have been made. A report summary is available at Appendix A. A further workshop session is planned for June 21.

The staff survey remains live on the intranet to gather feedback from colleagues and help inform future decisions. The survey is live, available here, and has over one hundred completed responses. In May 38 responses were received:

- The majority continue to say that they are "well-informed" about the nVCC project
- The majority continue to say that the best way to stay informed about nVCC is through digital channels like social media and the website and the staff newsletters

Patient Engagement

Two evening patient and carer workshops are scheduled to take place on June 21 and July 19 on themes of wayfinding and interior design.

Targeted invites have been sent to key patient groups including those with additional needs. Feedback from these sessions will be relayed once complete.

Resident drop-in

A resident drop-in event was held on May 25 at Whitchurch Library. Members of the team from enabling works, the communications and engagement team, Walters and Acorn representatives were in attendance. Due to low numbers attending, an alternative time and date will be used going forward.

MS/MP/Councillor meeting

Two meetings were held with elected representatives during the reporting period. The first meeting was a site visit to the Asda bridge site following the beam installation and to TCAR2.

We attended a community day arranged by the local politicians at Whitworth Square which provided an opportunity to discuss plans for the new centre.

Community Panel

The community panel has now launched, and registrations opened on May 25. Comms were shared with staff and on Velindre Matters social media. A weekly review is currently being carried out to monitor recruitment and social media. A poster is attached in Appendix B for further information.

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4. Next month

- Finalising the refresh of the TCS and Velindre Cancer Centre public website to provide an updated and improved experience including a new FAQ section and explainer on the clinical model
- Communications support for the enabling works project over the coming weeks
- Continuation of Un Peth Bach staff engagement initiative

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Appendix A

Un Peth Bach – Just One Thing Staff Engagement Series – Response Summary





staff interactions at pop-up sessions

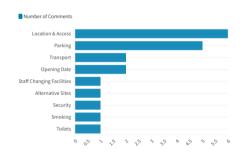


144 poll responses

- √ Series launched March 13 2023
- √ Five key themes to date
 - Ask the Team
 - Staff Facilities
 - o Art
 - Equipment
 - o Landscaping
- √ Pop-up events in Velindre Café supported by online poll questions

FEEDBACK - Ask the Team





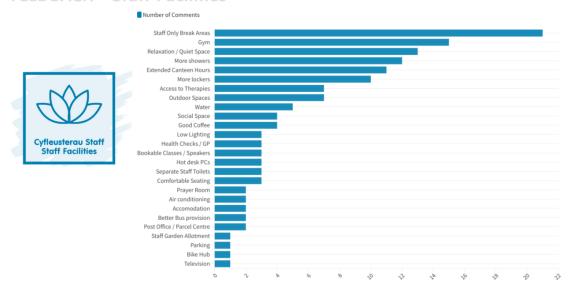
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FEEDBACK - Staff Facilities



FEEDBACK - Art





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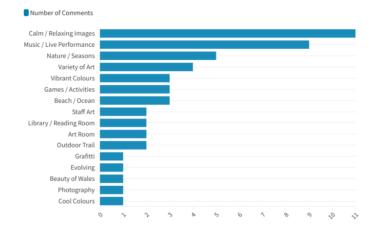
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FEEDBACK - Art





FEEDBACK - Equipment





Equipment for the new Velindre Cancer Centre covers everything from small items (such as drip stands) to large medical equipment.

Just thing...

We will be transferring a number of items, but most equipment will be new.

We will have...

360,760 06307,885 1750 1750

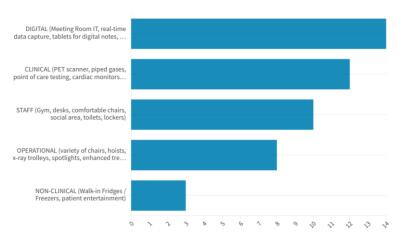
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FEEDBACK - Equipment Number of Comments





FEEDBACK - Landscaping





Just 1 thing...

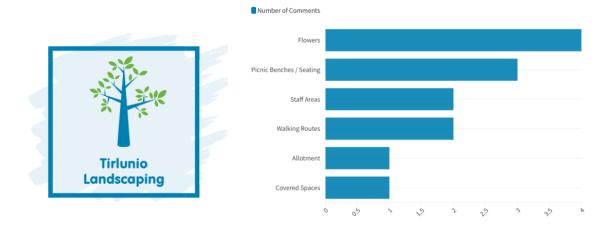


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FEEDBACK - Landscaping



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Appendix B – key themes from Patient Leadership Group meetings

Wednesday 22 February 2023

Key Themes

Lower Ground Floor Entrance

√ Given that it is likely that this will be the "main" entrance for majority of patients
(highest footfall) we need to make sure this still has the "wow" factor of the lolfa
space as well as providing the welcome you would expect from Velindre. This needs
to be as appealing.

Wayfinding

- ∀ Each entrance needs human touch to support wayfinding, in addition to digital /

 signposting solutions
- Opportunity for pre-appointment engagement. Could we offer tours, led by volunteers
 / patient leaders?
- √ Could Meet & Greet space / volunteers be visualised in images?
- ∀ How will the floors / departments be differentiated without graphic pollution?
- √ Interested in use of VR to visualise space

Car Parking

- √ Disappointing to see that the walkway from the car park is uncovered. Walking this
 distance in our climate will undoubtedly mean that patients / carers will get soaked
 on rainy days.
- If it cannot be covered, what are the alternative options? Electric minibus around the car park?

Digital

What are the plans for wifi provision?

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Patients with children

- √ What provision will there be for patients who are bringing children with them?
- √ For example, when having a scan / treatment etc.

Outpatients

√ Very pleased to hear that the previous suggestion for a quiet / discreet exit has been incorporated into the design

Wednesday 22 March 2023

Key Themes

Young People Lounge

- √ What is the criteria for 'young people'?
- √ Is it more of a lifestyle consideration rather than age?

Radiotherapy Reception

- √ What is the capacity in this area? Need a balance of space with enough seating.
- √ How will I be notified I am next without a phone?
- √ Looks great, non-clinical
- √ Relaxing feel, doesn't look like a hospital
- √ Concerned about low lamps & people hitting their heads
- √ Like that it's not uniform furniture
- √ Need device chargers next to most, if not all, seating
- orall The environment needs to support the digital experience, charging pads and sockets
- ∀ Will there be screens / notification system? And what are the non-digital alternatives?

 Can't solely rely on either
- √ Volunteer role in meet and greet / information post help patients to navigate the building. They provide a warm, natural welcome and become a familiar face you recognise (like the volunteers at Maggie's)
 - Maps need to be available



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- ∀ Pre-appt information guide / welcome pack needs to be a similar introduction with
 or without digital
- √ Virtual tour of departments / opportunity for pre-visit (with volunteer to greet?)
- ∀ Acknowledging worry that patients have about first visit
- √ Volunteer recruitment is very important, need to have the right people with the right skills & personal qualities
- √ Will there be a "newbie" lounge like the YP lounge?

Café

- √ Looks a bit clinical in contrast to other spaces, but I like the bar
- √ Hygiene standard very important
- ∀ Floor looks quite dark
- √ Not enough contrast dementia friendly?
- √ Restaurant looks better than café
- √ Seating is very much designed for "twos" those visiting alone / in a larger group need to
 be accommodated too (without feeling like they are taking up space for others)

Inpatient Rooms

- √ Glass doors look like the zoo
- √ Goldfish bowl, intrusive
- ∀ Privacy and personalisation needed
- √ Access to blinds / switch / frosting
- √ Space looks like private health, I'd look forward to going
- √ Not cluttered
- √ Communal areas for socialising / eating?
- ∀ Getting used to all the wood
- √ Clean and fresh
- ✓ Access to smart TV
- ∀ Emergency packs for unplanned admissions (PJs, toiletries etc) and support to contact home / loved ones

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5. RISKS

ARE THERE RELATED RISK(S) FOR THIS MATTER	Choose an item.
WHAT IS THE RISK?	
WHAT IS THE CURRENT RISK SCORE	
HOW DO THE RECOMMENDED ACTIONS IN THIS PAPER IMPACT THIS RISK?	
BY WHEN?	
ARE THERE ANY BARRIERS TO IMPLEMENTATION?	Choose an item.
All risks must be evidenced ar	nd consistent with those recorded in Datix

6. SUMMARY OF MATTERS FOR CONSIDERATION

A summary of activity by the communications and engagement team to promote the work of the TCS programme during the reporting period.

7. IMPACT ASSESSMENT

	RELATED STRATEGIC TRUST ASSURANCE FRAMEWORK RISK	Choose an item.	
		Choose an item.	
		Safe	
200		Timely	
06	2017	Effective	
		Equitable	
	·5 <70	Efficient	
		Patient Cantered	

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QUALITY AND SAFETY IMPLICATIONS / IMPACT	Please include narrative to explain the selected domain. Click or tap here to enter text. The Key Quality & Safety related issues being impacted by the matters outlined in the report and how they are being monitored, reviewed and acted upon should be clearly summarised here and aligned with the Six Domains of Quality as defined within Welsh Government's Quality and Safety Framework: Learning and Improving (2021).		
SOCIO ECONOMIC DUTY	Choose an item.		
ASSESSMENT COMPLETED	Click or tap here to enter text.		
TRUST WELL-BEING GOAL IMPLICATIONS/IMPACT	Choose an item. If more than one Well-being Goal applies please list below: The Trust Well-being goals being impacted by the matters outlined in this report should be clearly indicated If more than one strategic risk applies please list below: Click or tap here to enter text.		
FINANCIAL IMPLICATIONS / IMPACT	Choose an item. This section should outline the financial resource requirements in terms of revenue and / or capital implications that will result from the Matters for Consideration and any associated Business Case. Narrative in this section should be clear on the following: Source of Funding: Choose an item. Please explain if 'other' source of funding selected:		

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	Click or tap here to enter text.	
	Type of Funding: Choose an item.	
	Scale of Change Please detail the value of revenue and/or capital impact:	
	Click or tap here to enter text. Type of Change	
	Choose an item. Please explain if 'other' source of funding selected: Click or tap here to enter text.	
EQUALITY IMPACT	Choose an item.	
ASSESSMENT COMPLETED	Onloge an item.	
6	Click or tap here to enter text.	
6 ADDITIONAL LEGAL		
6	Click or tap here to enter text.	

367. 6287. 1363. 1384. 1384. 1384. 1384. 1384. 1384. 1384. 1384.

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APPENDIX 1

Detailed Definitions of 7 Levels of Evaluation to Determine RAG Rating / Operational Assurance and Summary Statements of 7 Levels

| RAG
rating | ACTIONS | OUTCOMES | RAG
rating | SUMMARY STATEMENTS OF 7 LEVELS |
|---------------|---|---|---------------|--|
| Level 7 | Comprehensive actions identified and agreed upon to address specific performance concerns AND recognition of systemic causes/reasons for performance variation. | Evidence of delivery of the majority or all of the agreed actions, with clear evidence of the achievement of desired outcomes over a defined period of time i.e., 3 months. | 7 | Improvements sustained over time - BAU |
| Level 6 | Comprehensive actions identified and agreed upon to address specific performance concerns AND recognition of systemic causes/reasons for performance variation. | Evidence of delivery of the majority or all of the agreed actions, with clear evidence of the achievement also of desired outcomes. | 6 | Outcomes realised in full |
| Level 5 | Comprehensive actions identified and agreed upon to address
specific performance concerns AND recognition of systemic
causes/reasons for performance variation. | Evidence of delivery of the majority or all of the agreed actions, with little or no evidence of the achievement of desired outcomes. | 5 | Majority of actions implemented; outcomes not realised as intended |
| Level 4 | Comprehensive actions identified and agreed upon to address
specific performance concerns AND recognition of systemic
causes/reasons for performance variation. | Evidence of several agreed actions being delivered, with little or no evidence of the achievement of desired outcomes. | 4 | Increased extent of impact from actions |
| Level 3 | Comprehensive actions identified and agreed upon to address specific performance concerns AND recognition of systemic causes/reasons for performance variation. | Some measurable impact evident from actions initially taken AND an emerging clarity of outcomes sought to determine sustainability, with agreed measures to evidence improvement. | 3 | Actions for symptomatic, contributory and root causes. Impact from actions and emerging outcomes |
| Level 2 | Comprehensive actions identified and agreed upon to address specific performance concerns. | Some measurable impact evident from actions initially taken. | 2 | Symptomatic issues being addressed |
| Level 1 | Initial actions agreed upon, these focused upon directly addressing specific performance concerns. | Outcomes sought being defined. No improvements yet evident. | 1 | Actions for symptomatic issues, no defined outcomes |
| Level 0 | Emerging actions not yet agreed with all relevant parties. | No improvements evident. | 0 | Enthusiasm, no robust plan |

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TCS Programme Scrutiny Sub-Committee

Transforming Cancer Services (TCS) Programme Director's Report (PDR)

| | 40/00/0000 | | |
|----------------------------|---|--|--|
| DATE OF MEETING | 19/06/2023 | | |
| | | | |
| PUBLIC OR PRIVATE REPORT | Public | | |
| PUBLIC ON PRIVATE REPORT | Public | | |
| | | | |
| IF PRIVATE PLEASE INDICATE | | | |
| REASON | | | |
| | | | |
| | Gavin Bryce, Associate Director of Programmes | | |
| | Carys Jones, Senior Programme Delivery & | | |
| PREPARED BY | Assurance Manager, TCS | | |
| TREFARED BY | Bethan Lewis, TCS Risk Advisor & Programme | | |
| | Planner | | |
| | Cory Davies, Programme Co-ordinator | | |
| PRESENTED BY | Carl James, Director of Strategic Transformation, | | |
| | Planning and Digital | | |
| EXECUTIVE SPONSOR | Carl James, Director of Strategic Transformation, | | |
| EXECUTIVE SPONSOR | Planning and Digital | | |
| | | | |
| REPORT PURPOSE | FOR NOTING | | |
| | | | |

| REPORT PURPOSE | FOR NOTING |
|----------------|------------|
|----------------|------------|

COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING **COMMITTEE OR GROUP** DATE **OUTCOME** EMB Shape (Transformation) 19/06/2023 Noted

| INITIALISMS | |
|-------------|---------------------------------------|
| | |
| AOS | Acute Oncology Service |
| CCLG | Collaborative Cancer Leadership Group |
| CP | Conditions Precedent |
| CTSIM | Computerised Tomography Simulator |
| DCA | Delivery Confidence Assessment |
| EMB | Executive Management Board |
| EW | Enabling Works |
| FRSL | European Protected Species License |
| FBE | Full Business Case |
| IRS: | Integrated Radiotherapy Solution |
| NRW | Natural Resources Wales |

1

| nVCC | new Velindre Cancer Centre |
|----------|-------------------------------------|
| MIM | Mutual Investment Model |
| NHH | Nevill Hall Hospital |
| OBC | Outline Business Case |
| | |
| PMO | Programme Management Office |
| PDB | Programme Delivery Board |
| PDR | Programme Directors Report |
| PMP | Programme Master Plan |
| RSC | Radiotherapy Satellite Centre |
| SCB | Strategic Capital Board |
| SE Wales | Southeast Wales |
| TCAR | Temporary Construction Access Route |
| TCS | Transforming Cancer Services |
| UHB | University Health Board |
| 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 was established in 2015 and consists of seven well defined projects that are being delivered by the Trust in conjunction with its various partners / stakeholders.
- 1.2 The reporting period for this Programme Director's Report covers from **period 4**th **May 8**th **June 2023**

2. ASSESMENT / OVERALL PROGRAMME STATUS

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



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a) Overall Programme Status: Delivery Confidence Assessment

- 1.1 The Delivery Confidence Assessment (DCA) is a well-used method of providing an overview of a Programme's or Projects status (it is used by the Infrastructure Projects Authority (IPA) Gateway Reviews and recognised in the Managing Successful Programmes methodology). The evaluation framework for the DCA is set out in **Appendix A** and it should be noted that the DCA is a qualitative based judgement having considered a range of evidence available across the programme i.e. it is an indicator of the position and cannot be definitive.
- 1.2 The TCS Associate Director of Programmes and TCS Programme Director have reviewed the TCS Programme's current and predicted performance for the reporting **period 4**th **May 8**th **June 2023**.
- 1.3 The TCS Programme team have been working with the projects to refine the highlight reporting guidance which has resulted a number of changes to the RAG status increasing for a number of projects. It was felt previously that there may have been a degree of optimism in previous reporting, therefore the RAG status in the highlight reports have elevated, particularly in projects 1 & 2, whilst other projects remain largely on track (see Section (g) for Project Status/RAG).
- 1.4 It is recommended by the Programme Director and Associate Director of Programmes that despite an increase in RAG reporting that the DCA should remain at Amber status, until Financial Close and FBC approval is achieved because projects 1, 3 and 4 remain on track. This assessment also takes into account all of the Trust's commissioners agreeing to fund (to an acceptable level) the revenue consequences, both recurring and no-recurring, relating to the nVCC project which is a major milestone.

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| Status
(Trend) | Qualitative Measure | Previous | Status - Amber |
|-------------------|---|--|---|
| | Successful delivery appears feasible but significant issues already exist requiring management attention. These appear resolvable at this stage and, if addressed promptly, should not present a cost/schedule overrun. | Aı | mber |
| Amber | The main findings supporting the DCA are: | Mitigating Actions: | Action Status: |
| \leftrightarrow | A. Programme Scope requires review as a result of new delivery and governance arrangements. Programme Resources require review as the Programme moves from planning into its implementation phase. | A. The PDB have approved the Programme Stocktake and draft implementation plan. This has been further augmented into a Tranche Review. An informal briefing session has also been held with Independent Members. | A. The Tranche review has now been reviewed, with a view of it being received by EMB Shape (Transformation Board) once it's been approved by the Programme Director. Programme resource plan to be updated once the Programme Scope is agreed and as part of standing up the new arrangements. |



4

| Amber ↔ | The main findings supporting the DCA are: | Mitigating Actions: | Action Status: | | |
|----------|--|--|--|--|--|
| | B. A range of Project 2 (nVCC) risks have increased relating to commercial and planning matters required to achieve financial close in end Oct 2023. | B. There has been a range of activities instigated to optimize the close out of commercial and planning matters. i. Exec Directors given leadership responsibility for specific areas. ii. Mission Control Board and regular agile meetings are in place twice weekly. iii. Enhanced reporting (Programme to Financial Close paper) iv. Deep Dives have commenced in a range of specific areas, ranging from equipment to energy. v. Weekly FBC meetings have been convened to oversee and track progress ahead of financial close. | i. Exec areas of responsibility agreed and support ongoing. ii. Weekly MCB meetings ongoing and regular provided across a range of key matters. iii. Programme to FC paper provided fortnightly. Version 18 now in place. iv. Deep dives ongoing, and informing the necessary actions being taken. v. Weekly FBC Co-ordination meeting ongoing and composite case near completion for consideration by Trust Board end June. | | |

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b) Key milestones / achievements in reporting period

The TCS Programme Master Programme Plan sets out the plan for delivery of the various key projects' deliverables and related activities. The following activities, set out in the table below, list the milestones achieved in the latest reporting period and identifies any missed milestones or any that are imminently forecast to be missed, which require escalation.

| Master Programme Milestone | Project | Date | Is this on
the Critical
Path? | Achieved (Y/N) | Impact on
Critical
Path |
|---|---------|---|-------------------------------------|----------------|-------------------------------|
| WG Approval of FBC | 2 | 28 th -Feb
Oct 2023 | Υ | N | Y |
| Financial Close | 2 | 20 th March
June 2023
Oct – Dec 2023 | Υ | N | Y |
| Temporary Electrical installation | 1 | 17 th April
16 th June | Y | N | Y |
| nVCC FBC – Health Boards Letters of Support | 2 | w/c 3rd April
End of May | Y | Y | Y |
| Water Main Design Completion & Costs | 1 | 28 th April
15 th May | Y | Y | Y |
| Velindre Trust Board Sign-off (5 Cases) | 2 | w/c 25 th May
June 2023 | Y | N | Y |
| Issue FBC to WG | 2 | w/c 15th May
August 2023 | Y | N | Y |
| Bridge Beam Installation Completion | 1 | 15 th May | Y | Υ | Y |
| Estates Annex to Shared Services | 2 | 31 st May
July 2023 | Y | N | Y |

| | | July 2023 | | | |
|-----|---|--|--|--|--|
| | Key: | | | | |
| -50 | Red Red | Missed date, with no revised date for delivery | | | |
| ` | Amber Missed date, but with revised date for delivery or delivered late | | | | |
| | 73 Miles | against original target date | | | |
| | Green | Delivered on time | | | |

6

c) TCS Programme Performance

Programme Performance Areas to Highlight:

Project 1 Enabling Works

Asda Works

The car park and resurfacing works are ongoing. There is a continued delay in approval of the planning permission for the McDonald's layby which was submitted in April 2022. It is expected to be resolved mid-June following further discussion between CC and the Urbanist.

Velindre Works - nVCC Enabling Works Design & Build Contract (EW D&B)

The bridge construction is progressing. The steel beams were installed on 12th and 13th May as scheduled and work to the bridge deck is ongoing. Works are ongoing to the listed pillar and curved wall at the entrance to the Whitchurch Hospital Grounds off Park Road.

The utilities scope is being progressed with positive discussion held in relation to electricity, drainage and telecoms to the site. In respect of the electricity supply, an alternative 1MVA route across the old railway cutting to the Hollybush Estate is being designed and costed due to the delay in the approval from C&V UHB. The site water supply hydrant was installed on 25th May.

The 28-day public notice period for the s.257 Public Rights of Way (PROW) diversion application ended on 12th May 2023 with no further objections, meaning this matter no longer poses a threat to the project.

Project 2 nVCC

MIM Procurement - Progress towards Financial Close

The Project continues to meet weekly with Acorn to close out a series of key commercial issues and issued v8 of the Project Agreement (PA) on 28th April 2023. A further PA meeting was held with Acorn on 9th May. PA v9 will be issued in June 2023. The project are aiming to close out the PA by the end of August 2023.

Planning & Site Readiness

Following site boundary and reptile fencing being established in early April, reptile trapping and translocation has been commenced and continues into May 2023. A footpath diversion for the existing PRoWs, within the fenced area, has been established.

The project continued to work with C&VUHB and CC and identified additional replacement habitat land to support the planning application and final land agreement is being sought, supported by Welsh Government.

Project 3a Integrated Radiotherapy Solution (IRS)

During the reporting period there has been progression of service capacity, phasing and service change plans to successfully deliver implementation, all reviewed with ongoing monthly updates planned going forward.

There is ongoing work to incorporate the delivery Programme for the RSC and identifying the need to resolve transition governance arrangements.

Project 4 Radiotherapy Satellite Centre (RSC)

The RSC Project formally handed over from TCS to Velindre Futures and the Radiotherapy Satellite Centre Lead Radiographer Kate Evans now in post. Jason Hoskins will chair the VCS Project Board.

Project initiation is in progress including the development of key project documentation. The Project governance is currently being worked through and the first RSC Project Board is scheduled for 20th June. The RSC Project Workstreams have been established and appropriate leads identified.

RSC Project Team meetings continue with ABUHB including conversations around a refresh of the governance and a review of the Programme Plan in the joint meeting held on 13th June.

The CT Sim procurement is on track with the specification completed on 31st May, which is now with NWSSP to progress a mini tender process.

Project 5 Outreach

Scoping work has been undertaken and meetings taken place to complete the formal project handover to Velindre Futures (Cath O'Brien as Senior Responsible Officer). All project risks have also been transferred. A review of the modelling work has commenced to update as required, and Executive level discussions are planned with LHBs to ensure a shared mandate for the next stages of the work prior to re-establishing the programme boards/project boards etc.

Project 6 Service Delivery, Transformation & Transition

Transition & Commissioning planning has commenced led by Director of Service Change. Some preparatory work has been undertaken with nVCC and Velindre Futures / VCS Senior Leadership Team to map out the spilt of transition responsibilities and commence a review of the necessary transition projects. However, in agreement with the SRO, detailed work on transition has been deferred a few months given the delays in the nVCC programme.

Additionally, there are regular detailed discussions with ACORN regarding the phasing and Commissioning programme for the initial move into the new nVCC facility.

1.5 The Associate Director of Programmes undertakes review of the programme performance against a number of metrics which are set out below.

| Area | Status
(Trend) | Risk
Ref. | Position | Action | Target
Date |
|---|----------------------|--------------|--|--|----------------|
| Strategic
Alignment
(Reviewed
Quarterly) | Green
(↔) | R281
R295 | As part of the refresh of the nVCC Full Business Case a review of alignment of local, regional, and national strategies was undertaken. There were no issues identified during horizon scanning. The CCLG is also refreshing its regional governance arrangements and work Programme to ensure a strategically aligned approach across the region (see section d) below). | The quarterly review of strategic alignment was undertaken in June 2023 and no material change/reason for misalignment are known. Next review in September 2023. CCLG regional approach is being reviewed following further engagement with stakeholders. All existing members have been written to seeking their views about future arrangements to inform an options paper. Several responses have now been received and a paper is being developed for consideration by CCLG members and CEOs. | Sept 2023 |
| Programme
Scope
(Reviewed
Quarterly) | Amber/
Red
(个) | R360 | The TCS Programme Scope requires reconfirmation following the implementation of the new Trust governance arrangements. | The responsibility to deliver several projects has now transferred to the Velindre Futures. Some confusion exists regarding the reporting and governance arrangements (see also governance and approvals below). | July
2023 |
| Programme Budget (Reviewed Monthly) | Green | R350 | *Finance Report was unavailable
at the time of writing. Refer to main
Programme Finance Report on
agenda. | See mitigating actions for risk ID R350 (Inflation Risk). | твс |
| Governance
and
Approvals
(Reviewed
Monthly) | Red
(↑) | R360 | The Trust is implementing new governance arrangements which have seen the creation of a SCB and the migration of certain projects to Velindre Futures. There is some confusion as a result as to the status of the TCS programme as a collective and this has manifested itself in disparate | See mitigating actions for risk ID R360 (Projects 'on hold'), The new governance arrangements have been stood up from April 2023 as agreed by EMB. These will be reviewed alongside the Terms of Reference in Oct 2023 to ensure the new structure is operating as intended. | July
2023 |

| | | | reporting and approval arrangements. | A series of change control notices were approved at the final March PDB which documented the handover over of several projects | |
|--|----------------------|------|--|--|--|
| Progress
against
Programme
Plan
(Reviewed
Monthly) | Amber/
Red
(个) | R360 | The Programme is currently performing to its approved plan for projects 3a and 4 – now under Velindre Futures. Projects 1 & 2 have experienced a range of risks and issues which have impacted upon their project plan to financial close and construction timeline. As the EW is a critical path project, this has potential impacts for the wider Programme. Due to delays in the approval of the EPSL license, the Project 2 (nVCC) has revised its project plan which sees financial close now being achieved in October 2023 at the earliest, which represents a minimum delay of 7 month from the original date. | Risk Advisor reviewing risks with EW/nVCC Project at regular intervals. | Regularly
monitored |
| Processes
for
Managing
Risks and
Issues
(Reviewed
Monthly) | Amber
(个) | N/A | Programme Risk and Issues are regularly reviewed and have mitigations and owners. There is the consistent use of risk and issue methodologies across the Programme. However, the now disparate nature of the programme means tracking and mitigation risk is increasing complex without clear line of sight reporting. Given the scale, maturity, and complexity of the Programme the level of risk is relatively stable and commensurate with the activities being undertaken. See more detailed risk and issue review in sections I and J. | Programme & Project Risks and Issues Procedure currently being reviewed and updated as a result of new delivery and governance arrangements to ensure a consistent approach and continued alignment to Corporate Trust Risk Policy. A full risk review was undertaken in June resulting in the addition of several risks. The TCS team continues to engage with the Velindre Future programme to ensure risk management is aligned where possible. | Regularly
monitored |
| Benefits (Reviewed Quarterly in Tranche 2) | Amber
(个) | N/A | The Programmes' projects are mainly in the planning and procurement phases and therefore implementation and benefits | Benefits Realisation Plan has been reviewed with no changes. | As per
Benefits
Realisation
Plans |

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| delivery has not yet commenced Once there is clarity on | n the within |
|---|-------------------|
| but are quantified. One member of scope and mandate, this | s will Programme |
| the PMO team has recently inform the benefits frame | ework and project |
| attended a management of and strategy currently u | under business |
| benefits course. The Programme development. | cases |
| benefits register was reviewed as | |
| part of the nVCC Full Business | |
| Case development. | |
| Jass 25.5.5pmont | |
| As with risk and issues above, the | |
| disparate nature of the programme | |
| means tracking benefits is | |
| increasing complex without clear | |
| line of sight reporting and a clear | |
| scope and mandate of the | |
| programme. | |
| programmo. | |
| | |
| | |

d) External Programme Stakeholder Communication & Engagement

The SE Wales Collaborative Cancer Leadership Group (CCLG)

The future role of the CCLG is still under consideration. This includes its relationship with the SE Wales regional planning mechanisms which have been established to oversee a regional Programme of work consisting of diagnostics, orthopaedics, ophthalmology, and stroke services.

Chief Executives have agreed that there is merit in exploring the possibility of including cancer services within this forum in order to avoid duplication and to capitalise on an existing regional governance structure with the appropriate membership and autonomy.

All responses from the feedback exercise to gather the opinions of all CCLG stakeholders have been shared with the SE Wales Regional Programme Director, Jonathan Watts, who has drafted a paper for consideration and is being discussed initially by the SE Wales Directors of Planning in July. The intention is this will then by refined and consideration further by the CCLG and regional CEOs.

Nuffield Trust Recommendation

A joint update on regional progress against delivery the Nuffield Trust recommendations is currently being drafted with responses expected from all individual health boards by 16th June. This will then be collated into a single collective response for SE Wales in line with the process agreed previously at CCLG. In the absence of the CCLG meeting, a regional sign off mechanism will need to be considered.

| <i>e)</i> | Chang | Change Controls or Exception Reports in reporting period | | | | | | | | | |
|-----------|-------|--|-----------|-------------|--|--|--|--|--|--|--|
| Sorrie | Ref | Change | Exception | Description | | | | | | | |
| 20,7 | | Control(s) | Report(s) | | | | | | | | |
| Z., | \$. | 0 | 0 | | | | | | | | |
| | ·:5 | | | | | | | | | | |

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| Programme or Project | Not
Required
Currently | Deliverables
set out in
Project
Brief | Benefits
Quantified
with
Owner(s) | Benefits Being
Delivered |
|----------------------------------|------------------------------|--|--|---|
| Programme
Overall | | ✓ | ✓ | Still in planning stage |
| Project 1 - Enabling Works | ✓ | ✓ | ✓ | In implementation stage |
| Project 2 - nVCC | | ✓ | ✓ | Still in planning stage |
| Project 3a - IRS | | √ | ✓ | In implementation stage being Implemented by VF |
| Project 4 - RSC | | ABUHB | ✓ | Still in planning
stage, being
managed by VF &
ABUHB |
| Project 5 - Outreach | | ✓ | | Still in planning
stage, being
managed by VF |
| Project 6 - Service
Delivery | | √ | | Still in planning stage |
| Project 7 - Site Decommissioning | ✓ | √ | | Still in planning stage |

f) Programme Benefits Realisation

- 3.1 The programme has a wide range of benefits to deliver. The first phase of the programme has broadly been focused on the planning and procurement phases i.e., clinical model; developing infrastructure (business cases).
- 3.2 The Programme is now transitioning into the implementation phase, and this will allow the anticipated benefits to start to be realised.
- 3.3 Following a Benefits Management Review by Cory Davies, 10 steps have been recommended to improve current Benefits Management throughout the Trust. The initial step is to implement a Trust wide Benefits Management Framework and Strategy. Initial conversations are being held with the Corporate Governance Team and a draft strategy is being drafted, but requires further clarity around the programme scope and mandate to be fully developed.
- 3.4 A specific piece of work is being undertaken to explore the claiming of greater monetised benefits that will increase the benefit cost ratio of the nVCC FBC Preferred Option following feedback from the MiM Transactor
- A Programme benefits realisation plan is in place which is monitored. The status of benefits across the Programmes' projects can be seen in the Table below and there have been no changes from the previous reporting period:

g) Project Status

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

| | Project
Director | Plan | Budget | Quality | Scope | Project
Resource | Overall
Status | Proposed Action | Due
Date |
|-------------------------------------|---------------------|--------|---|--------------------|---|---|-------------------|--|--------------|
| Project 1 –
Enabling Works | David
Powell | Amber | Amber | Green | Green | Green | Amber
↔ | No specific actions identified on Highlight Report. Project 1 Team to review the project and financial plans and identify mitigating actions. | 30/6 |
| Project 2 – nVCC | David
Powell | Amber | Red | Green | Green | Red | Amber
↔ | Project to deliver a Recruitment Plan to address Project
Resources. Project to re-baseline all project plans to reflect an October
Finance Close. | 14/7
30/6 |
| Project 3a | Cath
O'Brien | Green | Green | Green | Green | Green | Green
↔ | No actions identified on Highlight Report | N/A |
| Project 4 – RSC | Jason
Hoskins | Green | Green | Green | Green | Green | Green
↔ | N/A | N/A |
| Project 5 –
Outreach | | | | N/A | | | | N/A | N/A |
| Project 6 –
Service Delivery | Andrea
Hague | | Service change work being taken for
ward within Velindre Futures and business as
usual service developments | | Paused:
No
current
rating
↔ | Change control approved at March PDB meeting to transfer this project to Velindre Futures Programme. Dual reporting arrangements for Project 6c Transition to be established. | July
2023 | | |
| Project 7 – Site
Decommissioning | David
Powell | To con | nmence 12 | -18 months
nVCC | s prior to o | pening of | N/A | N/A | N/A |

h) Programme Master Plan and Critical Path

- 5.1 The Programme Master Plan sets out the key activities and milestones across the Projects and Programme allowing for greater understanding of the various dependencies and is reviewed monthly to ensure ongoing ownership and management of the milestones and dependencies.
- 5.2 The key dependencies on the Programme Master Plan which are currently a focus for priority, risk and issues management are set out in the table overleaf:

Summary of Dependencies & Associated Risks

| Key Milestone | Description of Dependency | Linked Risk /
Issue ID | Comment | Status (RAG) |
|--|---|--|--|--------------|
| Project 1 EW –
Asda
Construction | Should the Asda Enabling Works not complete on time, the impact would be that the Northern Access would not be available for the nVCC construction and as such could lead to the extension in overall construction time of the nVCC and potential impact on Project and Programme milestones including completion of construction, commissioning of equipment and overall opening date to patients. | R206 / I087 /
I063 / R428 /
R439 | Due to the delay of nVCC Financial Close the likelihood of the Northern Access being available for start of construction is now currently looking more likely than not. As a result the status of this dependency has de-escalated, with the likelihood now rated 'Possible' and the impact 'Moderate'. Both the Water Main diversion resolution and the McDonalds layby consent also remains outstanding which when resolved would de-escalate this scenario further. | AMBER
↓ |
| Project 1 EW –
Velindre EW
Main Contract | There are a number of elements to the Velindre Enabling Works, all of which lead to the site being prepared and accessible for the construction of the nVCC. Should the Velindre Enabling Works not complete on time, the impact would be that the access & facilities would not be available for MiM construction and as such could lead to the extension in overall construction time and potentially ultimate completion and opening | R395 / R400 /
R401 / R402 /
R403 | The Northern Access completion continues to be estimated to be at a 6-month delay. In relation to the Northern Access, the likelihood of this scenario remains 'Likely' and the impact 'Moderate'. | AMBER
↔ |

| | of the nVCC and wider Programme activity including the IRS Implementation. | | | |
|--------------------------------------|---|-----------------------|---|------------|
| Project 1/2 –
Planning
Matters | The importance of the Planning matters being resolved for the nVCC Project to progress would mean that if they are not resolved the impact would be felt across the TCS Programme, impacting several dependencies including construction of the nVCC and therefore ultimately the planned opening date and planned workforce, digital and equipment dependencies and deliverables and the IRS implementation. Worst case would see the need for re-design of nVCC scheme leading to major delays and likely cost increases. | R373 / I087 /
R438 | The approval of the McDonalds layby planning application is still awaited, however this is not currently impacting project progress relating to the required s278 works. Based on the latest status regarding the outstanding Planning matters the likelihood of this dependency scenario would currently remain as 'Possible' and the impact 'Moderate'. | AMBER
↔ |

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- i) Programme Risks from 4th May 2023 8th June 2023
- As part of the monthly reporting cycle for the Transforming Cancer Services Programme there is a Risks and Issues Management process that is followed and is set out below. Monitoring and updating of risks and issues is also dealt with on a day-to-day basis with the Risks and Issues Registers being live documents.

| Risk / Issue Process | Completed by |
|---|--------------------------------------|
| Review of Risk Register undertaken by Risk Advisor | BL – Risk Advisor |
| Risks sorted and Risk Owners asked to review and update by deadline | BL – Risk Advisor |
| Updated Project Risk Registers received from Risk
Owners and/or meeting held with Risk Owners and
Risk Advisor to review and update | BL – Risk Advisor
and Risk Owners |
| Programme Risk & Issues Register Updated | BL – Risk Advisor |
| Change Log Updated | BL – Risk Advisor |
| Datix Updated | BL – Risk Advisor |
| Data & updates from Projects & Risk Owners analysed and input into PDR where required (also check back with Risk Owners for clarification where required) | BL – Risk Advisor |
| Extract report from Datix for Risk appendices | BL – Risk Advisor |
| Complete manual updates to Risk and Issues appendices to ensure requirements and accuracy met for PDB & PSSC | BL – Risk Advisor |
| Check of Risk & Issues appendices to ensure all data is accurate as per reporting period timescale | BL – Risk Advisor |

- 6.2 A risk checklist has been developed to ensure that the Risk and Issues Management process is being adhered to and to provide QA for accurate monthly reporting. The checklist can be found in **Appendix B** to this report.
- 6.3 Of the current live risks, the comparison between the inherent ratings and current ratings below demonstrates that following the implementation of appropriate mitigations and controls the risk landscape of the Programme becomes more moderate, thus demonstrating efficient management of risks across the Projects and Programme.

| Inherent → Current Ratings | | | | | | | | | | | |
|----------------------------|------------|-------------|-------------|-------------|--------|--|--|--|--|--|--|
| | | | Likelihood | | | | | | | | |
| Impact | 5. Certain | 4. Likely | 3. Possible | 2. Unlikely | 1.Rare | | | | | | |
| 5. Catastrophic | 10 → | 2 | | | | | | | | | |
| 4. Major | 10 7 | | | | | | | | | | |
| 3. Moderate | | 52 → | 41 | | | | | | | | |
| 2. Minor | | | 23 → | 35 | | | | | | | |
| 1. Insignificant | | | | 1 → | 8 | | | | | | |



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

| | New | Closed | Escalated | De-
escalated | Transferred | Total changed risks / Issues |
|--------|-----|--------|-----------|------------------|-------------|------------------------------|
| Risks | 17 | 5 | 0 | 6 | 24 | 52 |
| Issues | 0 | 5 | 0 | 0 | 0 | 5 |

- 6.5 Please note that in accordance with the updated Corporate Risk Appetite Framework and the Risk Domain levels associated with the Programme and Project Risks with a current rating score of '15' are subject to corporate reporting and escalation. These can be seen in **Appendix C** to this report.
- 6.6 All risks which require escalation in accordance with the Trust Risk Management Framework (current rating '15' and above) are also input and updated on the Datix system.
- 6.7 Following the approval of the 'Programme Delivery Board Close Down & Transition to New Arrangements' Report at the March '23 Programme Delivery Board, transfer of the risks from the Radiotherapy Satellite Centre Project, Service Transformation & Transition Project and relevant Programme Risks to the management of the Velindre Futures Programme has been completed.
- 6.8 The Programme Risk Advisor has undertaken an in-depth risk review providing recommendations to Risk Owners on all live risks and issues. Particular focus of the review was on the Project and Programme Risk Landscape as a result of the delay to Financial Close and the updated analysis of the risks to delivery of Financial Close in Q4 of 2023. This has led to the 17 new risks being raised all of which reflect the current uncertain landscape of the nvCC Project and TCS Programme as a result of the delay to Financial Close with mitigations and control being reflective of the work required to achieve update dates for FBC approval and Financial Close.
- 6.9 The outcome of this review has been shared with the Project Director, Principal Project Manager and Director of Corporate Governance with all new risks registered in the Programme Risk Register.
- 6.10 There has been 2 new risks with a rating of 15 and above across the programme and projects during this reporting period which can be seen in the table below.
 - 11 There have been no risks with a rating of 15 and above where the risk score has increased during the latest reporting period

| ID | Description of Risk | Risk
Owner | Direction of Travel | Current
Rating | Owner / Mitigations | Mitigations
on Track
(Y/N) | Next
Action
Due Date |
|------|---|-----------------|---------------------|--|--|----------------------------------|----------------------------|
| R435 | Clearance Limitations There is a risk that the NRW Licence puts limitations on clearance resulting in delays to construction | David
Powell | NEW | Likelihood 3
Impact 5
Overall 15 | 1) application has been submitted stating the anticipated planned clearance areas and schedule to provide NRW with clear view of works including habitat creation requirements 2) alternative plan should concurrent days of clearing not be permissible by the licence 3) Secure 3rd party opinion on clearance - ongoing | Y | 10/07/23 |
| R444 | EPSL Application Approval There is a risk that the EPSL application will not be approved or takes longer than planned to be approved by the NRW leading to delays to required clearance or miss the clearance window causing approx 6 month further delay. | David
Powell | NEW | Likelihood 3
Impact 5
Overall 15 | 1) Resolution of habitat management matters to provide NRW with assurance they require - ongoing 2) Respond to any queries as a matter of priority - ongoing 3) Liaise with Cardiff Council to agree approach - ongoing 4) Work with WG to intervene if required - ongoing 5) Maintain Actions Tracker - ongoing | Y | 30/06/23 |

j) Programme Issues

- 7.1 There have been no new 'High' rated issues across the Programme.
- 7.2 The Issues Register can be seen in **Appendix D** to this report.

k) Programme Look Forward

8.1 The key milestones expected in the next 2 months (June – July) are:

| Milestone | Project | Date | Critical Path | | | | | | | | |
|---|---------|-----------------------|---------------|--|--|--|--|--|--|--|--|
| June 2023 | | | | | | | | | | | |
| Temporary Electrical Installation Completed | 1 | end June | Y | | | | | | | | |
| Completion of PCPs | 2 | 30 th June | Y | | | | | | | | |
| July | 2023 | | | | | | | | | | |
| Estates Annex to Shared Services | 2 | July | Y | | | | | | | | |
| | | | | | | | | | | | |



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

I) RECOMMENDATION

The TCS Programme Scrutiny Sub-Committee in discharging its Transformation Function are asked to **NOTE** this report.



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Appendix A – Delivery Confidence Assessment

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

Appendix B – Risk Checklist (see separate document)

Appendix C – Risk Register (see separate document)

Appendix D – Issues Register (see separate document)



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| Item | Yes / No (Further Comment) | Checked by: | QA by: |
|---|----------------------------|-------------|--------|
| All Risks / Issues have an Owner | Yes | BL | GB |
| All Risk / Issues Descriptions are clearly written | Yes | BL | GB |
| All Mitigations / Actions have an Owner | Yes | BL | GB |
| All Mitigations / Actions are clearly written (SMART) | Yes | BL | GB |
| All Risks / Issues have been reviewed and updated by Owners | Yes | BL | GB |
| All Risks / Issues have correct Next Review Date / Next Action Due Date | Yes | BL | GB |
| All Risks / issues have been correctly recorded as Private & Confidential | Yes | BL | GB |
| | 07.06.2023
Carbose | | |



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| | | | 1 | Project | s Impa | ting C | n | | | | | | | | | | | | | | |
|------|--------------------|------------|--------------------------|-------------|------------|--------|------|-------------|---------------|--|------------------|--|--|--------------|------------------------|-------------------------|---------------------|-----------------------------|---------------------|-----------------------|--|
| ID | Date
Registered | Originator | Risk
emerging
from | nVCC
D+F | RSC
S+0 | Decomm | Prog | Owner | Exec
Owner | Description of Risk | Last
Reviewed | Proposed Mitigation Actions / Action Plan | Actions Status | Actionee | Next
Review
Date | Likelihood
(Current) | Impact
(Current) | Risk
Rating
(Current) | Direction of Travel | Target Risk
Rating | Is the Risk
Private &
Confidential |
| R435 | 05-jun-23 | | 2. nVCC | x x | | x x | x Da | ivid Powell | David Powell | Clearance Limitations There is a risk that the NRW Licence puts limitations on clearance resulting in delays to construction | 05-jun-23 | 1) Application to be clear on expected plan for clearance works 2) Alternative plan should limitations be put in place 3) Sceure 3rd party opinion on clearance | 1) application has been submitted stating the anticipated planned clearance areas and schedule to provide NRW with clear view of works including habitat creation requirements 2) alternative plan should concurrent days of clearing not be permissable by the licence 3) Ongoing | David Powell | 10-jul-23 | 3 | 5 | 15 | New Risk | 6 | No |
| R444 | 05-jun-23 | | 2. nVCC | x x | | x x | x Da | vid Powell | David Powell | EPSL Application Approval There is a risk that the EPSL application will not be approved or takes longer than planned to be approved by the NRW leading to delays to enguired clearance or miss the clearance window causing approx 6 month further delay. | 05-jun-23 | 1) Resolution of habitat management matters to provide NRW with assurance they require 2) Respond to any queries as a matter of priority 3) Linke with Carofff Council to agree approach 4) Work with WG to intervene if required 5) Marhain Actions Tracker 5) Marhain Actions Tracker | 1) Ongoing
2) Ongoing
3) Ongoing
4) Ongoing
5) Ongoing | David Powell | 30-jun-23 | 3 | 5 | 15 | New Risk | 6 | No |

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| Issue | Date Raised | Prog /
nVCC Proj | Owner | Description (cause) | Prev
Risk ID | Description (effect) | Priority
(High,
Med,
Low) | Reported by | Reported to | Status (what is being done about this issue?) | Target issue resolution Date |
|-------|-------------|---------------------|-------------|--|-----------------|---|------------------------------------|--------------|--|--|------------------------------|
| 1063 | 20-jan-22 | Enabling
Works | Phil Morgan | Asda S278 There was a delay in submission of drawings from Sandersons to discharge the S278 conditions. | | S278 (roundabout works in entrance to Asda car park - CCC highways) cannot commence until the agreement is sealed with Cardiff Council, resulting in delay to access through Asda, with cost and Programme impact to the MIM scheme. Current programme anticipates March '24 completion, delay of 3 months | Medium | David Powell | nVCC Project
Board | Final drawings with corrections submitted from Sandersons to Cardiff Council. Approval of S278 awaited from CC. Ongoing Drawings have been finalised for the S278 legal agreement to be drafted. S278 agreement needs to be sealed by Cardiff Council. Ongoing | |
| 1087 | 31-jan-23 | Enabling
Works | | Asda - McDonald's layby planning application There is a delay to the approval of the McDonald's layby planning application. If the layby is not constructed, there is a safety risk associated with the McDonald's HGV deliveries and a potential hazard to the traffic flow. | | Application submitted April 2022. Awaiting Cardiff Council decision - could delay overall timeline of Asda works. | Medium | Alex Bowles | nVCC and
Enabling
Works Project
Board | Urbanists following up weekly with Cardiff Council for discharge of condition. This has been escalated within Cardiff Council, confirmation of approval is expected in June 2023 - ongoing | jun-23 |

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