



**PWYLLGOR ARCHWILIO A SICRWYDD RISG
AUDIT AND RISK ASSURANCE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	25 August 2020
TEITL YR ADRODDIAD: TITLE OF REPORT:	Financial Assurance Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Huw Thomas, Director of Finance
SWYDDOG ADRODD: REPORTING OFFICER:	Huw Thomas, Director of Finance

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The Audit & Risk Assurance Committee (ARAC) requires assurance on a number of financial areas as outlined in the body of the report.

Cefndir / Background

The Standing Orders require that ARAC provides assurance to the Board that the University Health Board's assurance processes are operating effectively. Critical to this is Financial Assurance, which cannot be measured only by the UHB's main finance report, and requires further information in order to assess the control environment in place; the risk assessment and management process; and the control activities.

Asesiad / Assessment

This report outlines the assurances which can be provided to the Committee.

Argymhelliad / Recommendation

The Audit & Risk Assurance Committee is asked to note the report, and approve the losses and debtors write offs noted within.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference Cyfeirnod Cylch Gorchwyl y Pwyllgor	4.4 The Committee's principal duties encompass the following: 4.4.2 Seek assurance that the systems for financial reporting to Board, including those of budgetary control, are effective, and that financial systems processes and controls are operating. 5.13 Approve the writing off of losses or the making of special payments within delegated limits.
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	5.15 Receive a report on all Single Tender Actions and extensions of contracts.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	BAF SO9-PR20 BAF SO10-PR33
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability 7. Staff and Resources
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Statement	Improve efficiency and quality of services through collaboration with people, communities and partners

Gwybodaeth Ychwanegol: Further Information:

Ar sail tystiolaeth: Evidence Base:	Monitoring returns to Welsh Government based on the Health Board's financial reporting system. Activity recorded in the AR and AP modules of the Oracle business system, activity recorded in the procurement Bravo system.
Rhestr Termiau: Glossary of Terms:	AP-Accounts Payable AR –Accounts Receivable CF –Counter Fraud COS-Contracted Out Service VAT COVID-19 – Coronavirus COP- Confirmation of Payee ECN- Error Correction Notice EOY – End Of Year ERs NI-Employers National Insurance HMRC-Her Majesty's Revenue and Customs HOLD- Invoices that cannot be paid, as there is a query with the price or quantity or validity ICF – Integrated Care Fund IFRS – International Financial Reporting Standards NWSSP-NHS Wales Shared Services Partnership NIC-National Insurance Contribution PID –Patient identifiable data PO –Purchase Order POL –Probability of loss PSPP-Public Sector Payment Policy RTI-Real Time Information(transmitted to HMRC from the Payroll system) SFI – Standing Financial Instructions SLA – Service Level Agreement STA-Single Tender Action

	VAT-Value Added Tax WRP – Welsh Risk Pool
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg: Parties / Committees consulted prior to Audit and Risk Assurance Committee:	UHB's Finance Team UHB's Management Team Executive Team Finance Committee

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Financial implications are inherent within the report.
Ansawdd / Gofal Claf: Quality / Patient Care:	Risk to our financial position affects our ability to discharge timely and effective care to patients.
Gweithlu: Workforce:	Overpayments are reported within this report.
Risg: Risk:	Financial risks are detailed in the report.
Cyfreithiol: Legal:	The UHB has a legal duty to deliver a breakeven financial position over a rolling three-year basis and an administrative requirement to operate within its budget within any given financial year.
Enw Da: Reputational:	Adverse variance against the UHB's financial plan will affect our reputation with Welsh Government, Audit Wales and with external stakeholders.
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable

Financial Assurance Report

1.1 Purpose

- The purpose of this report is to outline the financial assurances which the Audit & Risk Assurance Committee requires.
- The framework agreed is included below in Figure 1, and the remainder of the report is based on this.

Figure 1: Compliance requirements for the Audit and Risk Assurance Committee		
Compliance requirement	Reporting	Frequency
Scheme of delegation changes	<ul style="list-style-type: none"> • Exception reporting for approval 	As and when
Compliance with Purchase to Pay requirements	<ul style="list-style-type: none"> • Breaches of the No PO, No Pay policy • Aged payable analysis (over 3 month delayed and £10k in value) for noting • Waivers of Standing Financial Instructions for noting • Public Sector Payment Policy (PSPP) compliance • Invoices on Hold • Tenders awarded for noting • Single tender action 	Quarterly
Compliance with Income to Cash requirements	<ul style="list-style-type: none"> • Aged receivable analysis (over 3 month delayed and £10k in value) for noting • Overpayments of staff salaries and recovery procedures for noting 	Quarterly
Losses & Special payments and Write offs	<ul style="list-style-type: none"> • Write off schedule • Approval of losses and special payments 	
Compliance with Capital requirements	<ul style="list-style-type: none"> • Scheme of delegation approval for capital 	Following approval of annual capital plan
Compliance with Tax requirements	<ul style="list-style-type: none"> • Compliance with VAT requirements • Compliance with employment taxes 	Quarterly
Compliance with Reporting requirements	<ul style="list-style-type: none"> • Changes in accounting practices and policies • Agree final accounts timetable and plans • Review of annual accounts progress • Review of audited annual accounts and financial statements 	Annually
	<ul style="list-style-type: none"> • Statement of assurance from the Finance Committee 	Quarterly

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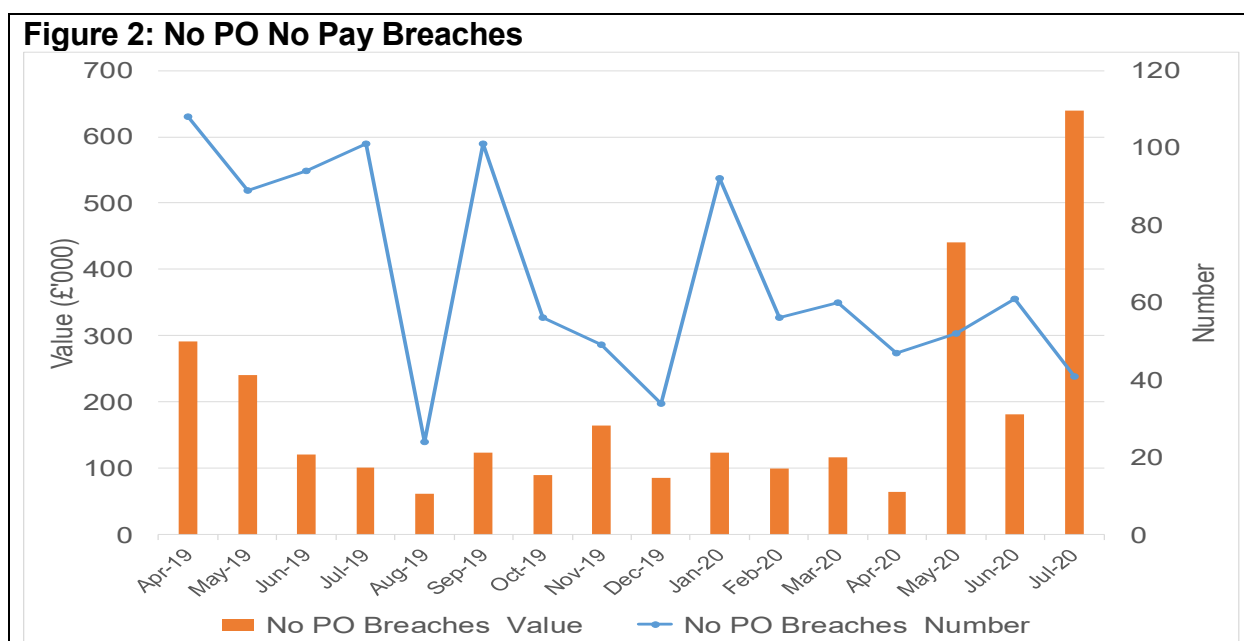
2.1 Scheme of delegation changes

- No changes to report.

2.2 Compliance with Purchase to Pay Requirements

2.2.1 Breaches of the No PO, No Pay Policy

- The Health Board has adopted the All Wales No PO, No Pay Policy, which will ensure that all non-pay expenditure (unless listed as an exception) is procured and received through the Oracle system.
- Figure 2 below illustrates the numbers and value of breaches against the No PO, No Pay policy. This consisted of 198 breaches totalling £1.3m between the months of April 2020 – July 2020, the cumulative position as at end of July was 246 breaches, £1.1m in total (29th February cumulative was 254 breaches, £438k in total).



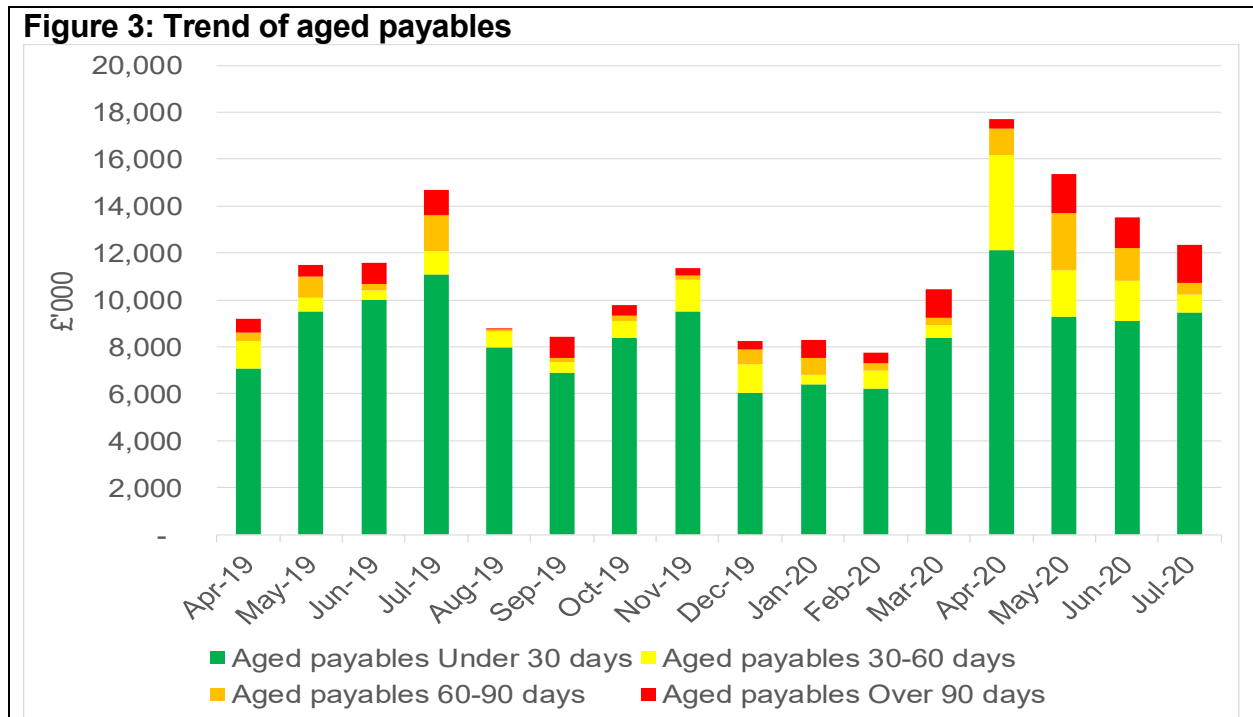
- The increase in the volume of PO breaches between April and June is as a result of user Departments non-compliance with the No PO, No Pay Policy. July's data shows a positive reduction in volume in comparison to the few previous months. The higher value of breaches in May is partly due to an invoice totalling £252k for Pembrokeshire County Council and the higher value of breaches in July is largely due to an invoice totalling £605k for Carmarthenshire County Council.

2.2.2 Aged Payable Analysis

- The Health Board's Aged payable trend analysis is shown in Figure 3 below. Appendix 3 includes details of the payables in excess of £10,000 and 3 months, and demonstrates the actions which have been taken to resolve these issues.

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- As at 31st July there were £12.4m of unpaid supplier invoices in the Oracle financial ledger system (£10.5m at the end of March). Of these, £2.9m were over 30 days old, representing 24% of the overall outstanding number of invoices (£2.08m at the end of March).



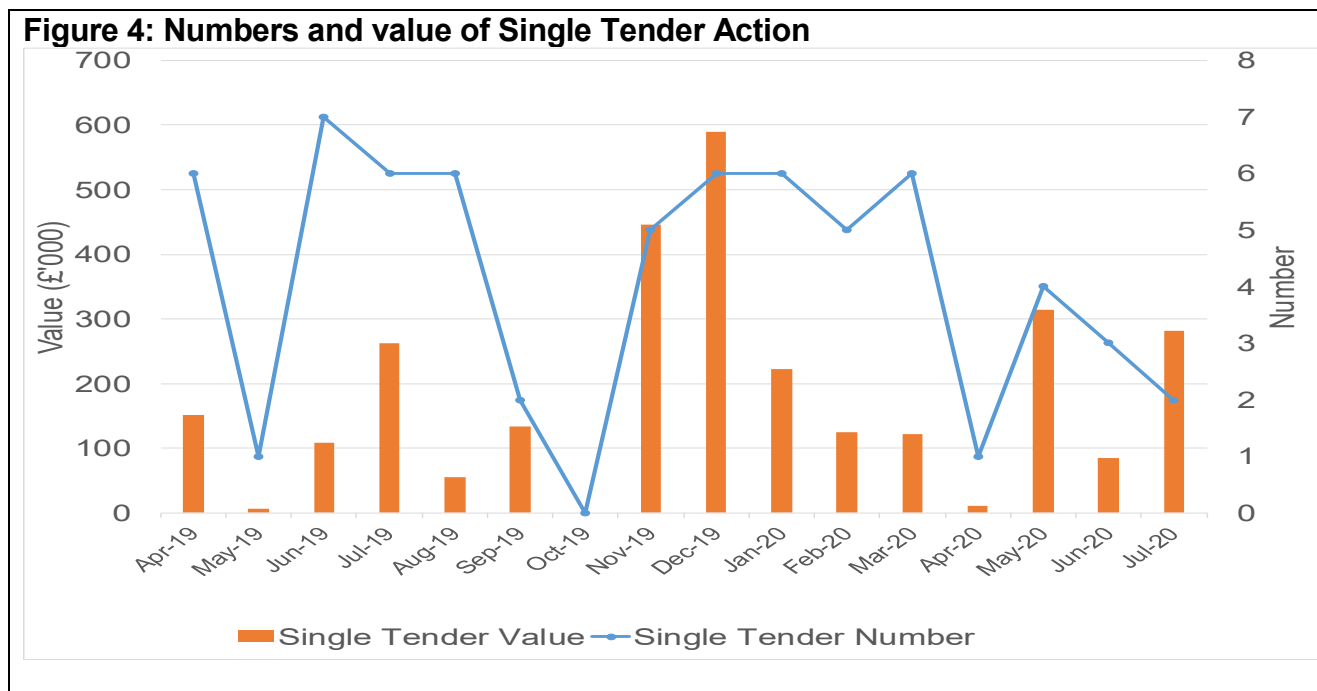
2.2.3 Public Sector Payment Policy (PSP) Compliance

- The Health Board achieved its PSP target of paying 95% of its non-NHS invoices within 30 days in July 2020 with 95%, and a cumulative position of 95.05%.

2.2.4 Single Tender Actions

- The use of single tender waivers is carefully managed and controlled by the Health Board.
- The Audit & Risk Assurance Committee agreed that use of the Single tender waiver process for maintenance agreements where no other options are available is no longer a requirement. From April 2020, Procurement will continue to log these as 'Maintenance Waivers' in order to capture cost savings / efficiency opportunities but they will not appear as part of the Single tender waiver process and will not be included within future Financial Assurance Committee reports.
- There were 6 Single Tender Actions (in excess of £25,000) approved in the period from 1st April 2020 to 31st July 2020 totalling £650,427 as detailed in Appendix 1.
- The graph below (Figure 4) shows the trend of all Single Tender Actions approved from April 2019 to 31st July 2020.

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2.2.5 Tenders Awarded

- There were 2 competitive tenders awarded locally during the period from 1st April 2020 to 31st July 2020, totalling £0.2m, details of which can be seen in Appendix 2.
- A contract was awarded to Bluestone in accordance with Procurement Policy Note - Responding to COVID-19 which allows for Direct Award due to extreme urgency using Regulation 32(2)(c) under the Public Contract Regulations 2015. Due to the value of the contract exceeding £1m, approval was sought and received from Welsh Government.

2.2.6 Change due to Impact of COVID-19 on Suppliers

- One of the initiatives introduced in April at an All Wales level, agreed by Directors of Finance, to help suppliers was to introduce a relaxation of the three way matching process; whereby payment would be made for invoices with a value up to £500 (excluding VAT), but only where a PO has been raised. This was primarily introduced to help smaller suppliers with their cashflow during the COVID-19 pandemic.

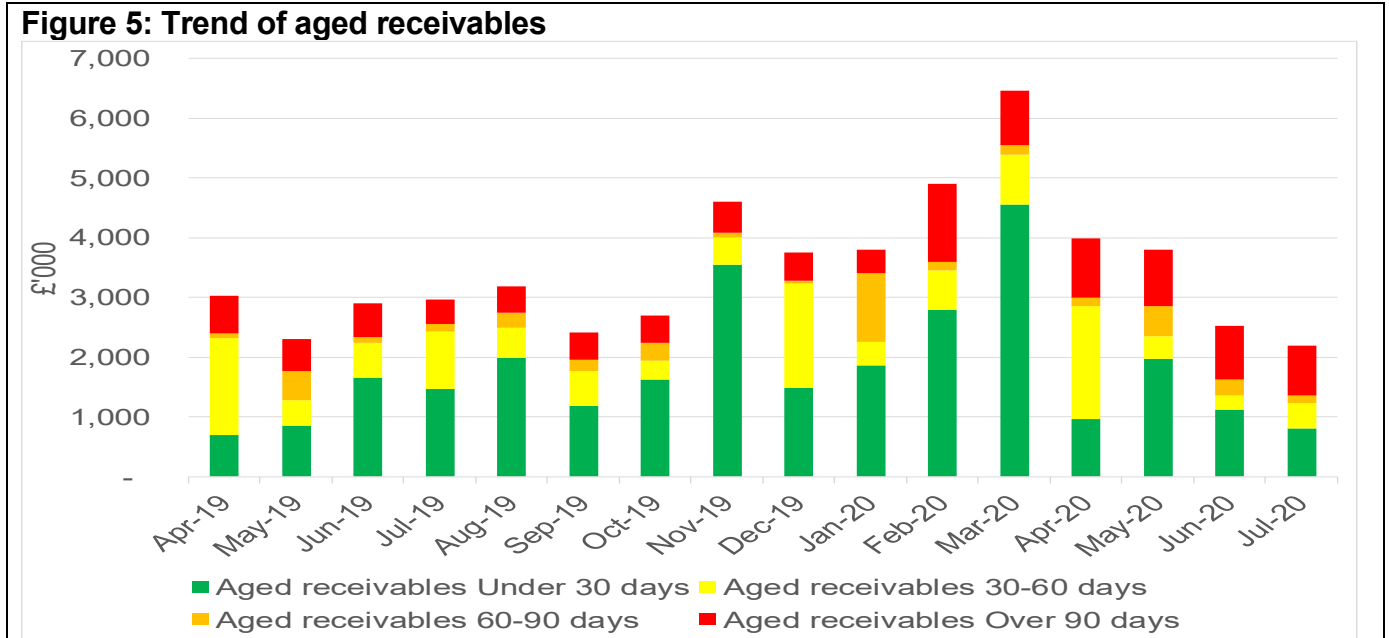
2.3 Compliance with Income to Cash

2.3.1 Aged Receivables

- As at the end of July 2020 there was £2.2m (31st March 2020 £6.5m) of debt owed to the Health Board, of this £0.8m (36%) (31st March 2020 £4.6m, 71%) was under 30 days old.
- Appendix 4 includes details of the receivables in excess of £10,000 and 3 months and demonstrates the actions which have been taken to resolve these longstanding issues.

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- The trend of aged receivables is illustrated in Figure 5. Debts in excess of 90 days up to 31st July 2020 amounted to £0.8m (31st March 2020 £0.9m). Of this sum, £0.647m is being managed on our behalf by our debt recovery agency, CCI.
- A sum of £30,377 is being repaid directly to the Health Board by instalment or salary deduction.

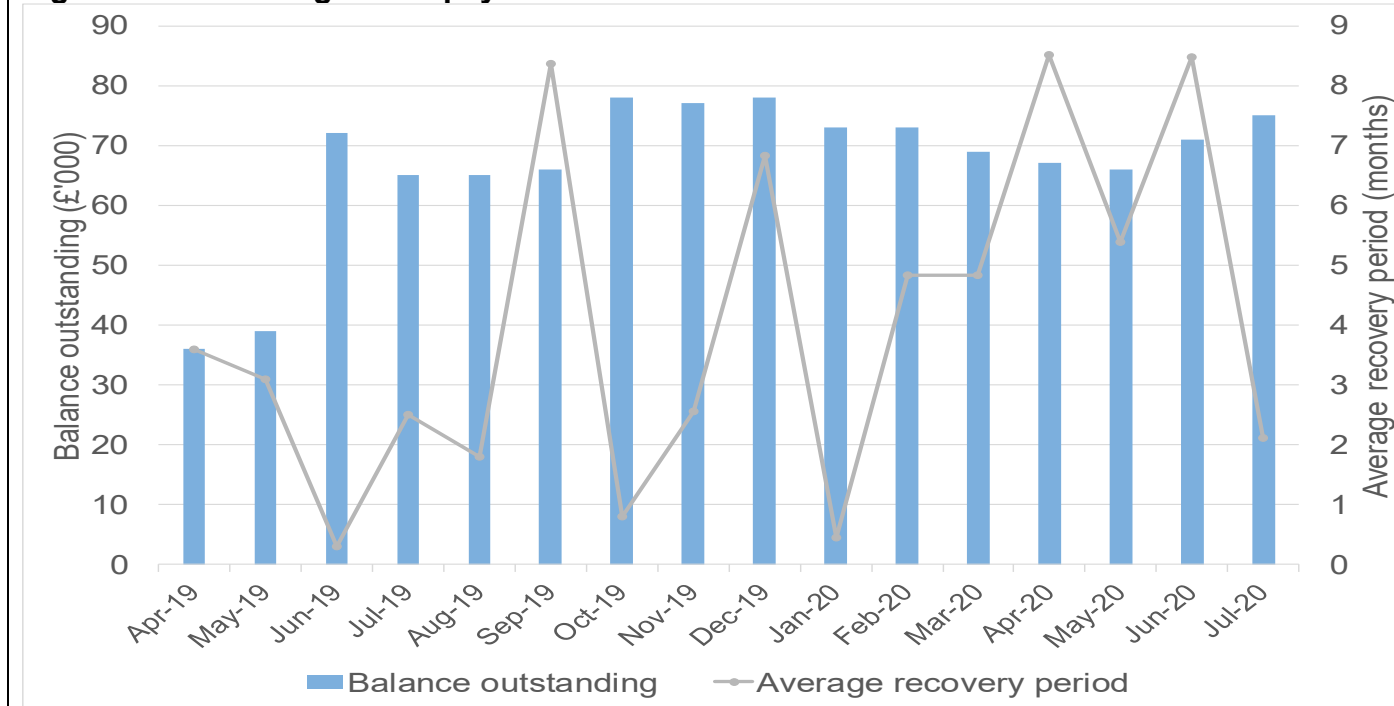


2.3.2 Overpayment of Salaries

- The Health Board has a duty to ensure that staff are paid appropriately, and that overpayments are not incurred. However, these do occur from time to time. In that context, it is imperative that any overpayments are collected over a reasonable timeframe to not introduce a significant risk to the Health Board’s financial recovery.
- Appendix 6 shows the numbers and value of overpayments recovered in the period April 2020 – July 2020.
- The graph (Figure 6) demonstrates the total balance outstanding against the average recovery period. The average recovery period reflects the number of debts settled in the current period only. July 2020 has seen a slight increase in the debt balance and a decrease in the average recovery period which shows that the debt balance is increasing slightly but we are recovering income more quickly.

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Figure 6: Trend of aged overpayments and recoveries



The Overpayments Task & Finish group consists of representatives from Finance, Payroll, ESR and Counter fraud. The updated actions are as follows:

- The Group has developed a draft Overpayments and Underpayments policy. Once the Group has finalised the review, this will be circulated to relevant parties for consultation.
- A new procedure was initiated to ensure that the Local Counter Fraud Specialist had first sight of any potential cases of overpayment fraud. This involves referral from the Payroll Team of any instances of overpayment which cover a period of 3 months or more, or are over a value of £5,000.
- Work is ongoing in eliminating the use of paper forms by developing a resource pack, to ensure that all forms / links to forms are easily accessed, and that there is clear signposting and clarity around the termination process.
- Work is ongoing between Hywel Dda and NWSSP around developing electronic forms which was due to be rolled out in March 2020; this has now been delayed due to the COVID-19 outbreak.
- Overpayments are in future to be reported to the Directorate Performance Reviews, to ensure that there is increased accountability. Payroll will share a report of 'repeat offenders' on a monthly basis with Finance for inclusion in reporting packs.

2.4 Losses and Special Payments for Approval

- Losses and special payments require the Audit & Risk Assurance Committee's approval, given their contentious nature. These are outlined in Appendix 5.
- Losses and special payments amounting to £81,580 have been made for the period 1st April to 31st July 2020. The majority of this is due to Pharmacy write offs, £76,072. The values per site are Bronglais £23,857, Withybush £24,550, Glangwili £25,632; with the remainder in Prince Phillip and Mental Health.

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2.5 Compliance with Capital Requirements

- No issues to report.

2.6 Compliance with Tax Requirements

2.6.1 Compliance with VAT Requirements

- An update on the existing issues regarding VAT are set out in the following table:

Key VAT issue	Update
HMRC 2018-19 COS VAT recovery review	<p>No progress has been made in respect of this item since the last Committee meeting, due to there not being a mutually acceptable method for transferring the requested confidential data from HDdUHB to HMRC. HMRC continue to look into providing a dispensation for NHS Wales' Secure File Sharing Portal so that the review can resume. HMRC does not itself offer a secure file sharing solution which the Health Board may make use of.</p> <p>HMRC have separately informed the Health Board that it will postpone this review, in light of the COVID-19 outbreak.</p>
Home Technology Salary Sacrifice scheme (closed schemes)	<p>The Health Board has now disclosed to HMRC the final amounts of under-accounted output tax in connection with the closed scheme. The last remaining salary sacrifice contracts under the scheme came to an end in 2020 with the associated end of scheme asset values (on which the output VAT is to be accounted) reported to HMRC in July 2020. The additional output VAT due to HMRC amounts to £69,000. The Health Board now awaits the payment request from HMRC.</p> <p>The Health Board continues to await the final assessment and payment request from HMRC in respect of the £58,000 declared in the first disclosure.</p> <p>Due to the very specific circumstances in which the output tax in question has arisen, there is some uncertainty as to whether these potential liabilities will crystallise and become payable but our current view is that it is probable.</p>
Capital Front of House Scheme (Bronglais Hospital)	<p>There are no updates in respect of this issue since the last report.</p> <p>As previously, the Health Board awaits the completion of the final financial report in respect of the scheme, based upon which it will prepare a final scheme VAT calculation for HMRC's review. It is understood that completion of the final financial report has been delayed due to the COVID-19 outbreak and its expected completion date is currently uncertain.</p>

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2.6.2 Compliance with Employment Tax Requirements

- An update on the key current issues within Employment Taxes are set out in the following table:

Key Employment Tax issue	Health Board response and mitigating action
Issues with Payroll transmitting RTI information to HMRC	<p>The Health Board has overpaid PAYE tax due to an imbalance which arose from an aged interface error between HMRC and the Health Board's payroll software provider IBM. It is understood that the matter is not currently being progressed due to the recent disbanding of the HMRC team dealing with the issue.</p> <p>The Health Board has expressed its dissatisfaction at this situation to its HMRC Customer Compliance Manager and has requested that HMRC repay the overpayment in question to the Health Board while the issue is being resolved. A further request for an update has been submitted to HMRC in August 2020. The Health Board awaits HMRC's response.</p>

2.7 Compliance with Reporting Requirements

- Statutory Accounts 2019-20** – the Statutory accounts have been audited and were submitted to Welsh Government on the required deadline, Tuesday 30th June 2020. There were no material issues reported via the ISA260 issued by Audit Wales.
- IFRS 17** – Insurance Contracts. Following the deferred implementation of the standard, we await advice from Welsh Government. This will be issued once the IFRS 17 working group at Treasury reconvenes.
- IFRS 16** – HM Treasury have agreed with the Financial Reporting Advisory Board (FRAB) to defer the implementation of IFRS 16 leases until 1st April 2021. This means that IFRS 16 implementation in the NHS Wales Annual accounts has been deferred to 1st April 2021.
- Standing Financial Instructions (SFIs)** – the approval through Welsh Government was due for completion by the end of June 2020. There has been no update received to date.
- Confirmation of payee (COP)** – this has now been implemented by our commercial bank. There has been no update in relation to implementation by government banking.

2.8 Medical Negligence cases and Personal Injury

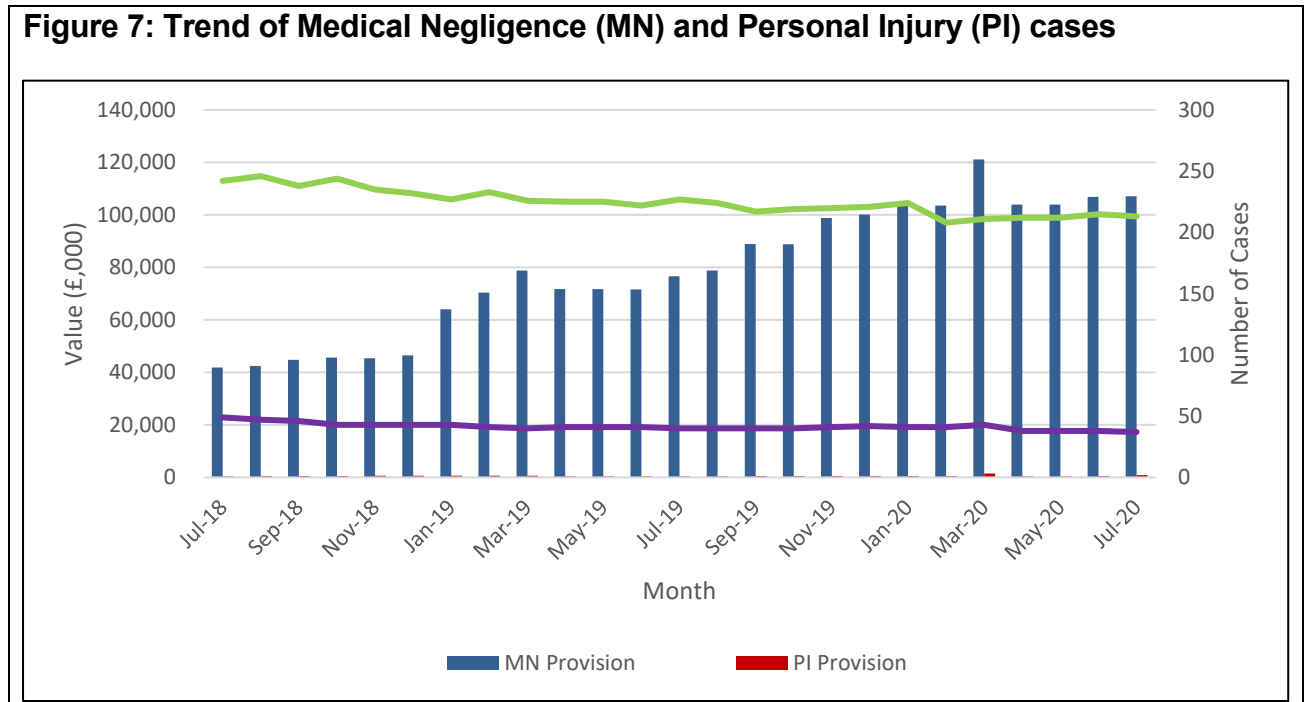
- The Health Board's medical negligence and personal injury cases are managed through NWSSP Legal. As at the end of July 2020, as reported via NWSSP Legal, the number of cases and level of provision are as follows:

	No of cases	Level of provision
Medical negligence	213	£107.1m

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Personal injury	37	£0.8m
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- The graph below (Figure 7) illustrates the level of Medical Negligence (MN) and Personal Injury (PI) provisions for a rolling year, from July 2018 onwards. The level of provision has decreased from March 2020 to July 2020 by £14million, due to 1 case which has settled via a periodic payment order; all cases of this nature transfer back to Welsh Risk Pool.



- The Health Board is liable for the first £25,000 for all cases, the value of the remaining balance of each case is dealt with by Welsh Risk Pool who have an annual revenue allocation from Welsh Government. In the event that the annual revenue allocation is not sufficient to meet the value of forecast in year expenditure, then the excess will be subject to an agreed risk sharing arrangement with NHS bodies.

3.1 Recommendations

The Committee is asked to note the report and approve the losses and special payments and write off of irrecoverable debts noted in the report.

Appendix 1: Single Tender Actions (in excess of £25,000)

Ref	Period covered by this report:		1 Apr 2020	31 Jul 2020	Justification provided
	Supplier	Value (£)	One-off or Period	Department	
HDD514	SGS	84,000	12 months	HSDU	<p>By reprocessing medical devices, HSDU departments inherently 'manufacture' medical equipment for direct patient use. It is therefore both a legal obligation along with a mandatory Welsh Government requirement that compliance with the Medical Devices Regulations 93/42 EEC exists in support of the processes that take place within the HSDU's. Maintaining compliance to the Medical Device Regulations offers verification of quality assured processes which are underwritten by a third party auditor working on behalf of the Medicines and Healthcare products Regulatory Agency. The Health Board has always had to pay for this service.</p> <p>The reason for the STA is therefore as follows:</p> <ul style="list-style-type: none"> • There is no current procurement framework in place for third party auditing available to the NHS in Wales • All HSDUs within the Hywel Dda UHB use SGS UK Ltd as a single notified body. This enables each HSDU to be treated the same way under the same inspection regime and supports the 'Once for Wales' policy of Welsh Government • As all HSDUs are complying with the same set of standards and policies (ISO 13485, Medical Devices Directive and Welsh Health Technical Memoranda), having the same Notified Body reduces unnecessary variation in line with prudent healthcare principles. This also enables a smooth transaction of certification services and avoids unnecessary delays in certificates being issued.

Appendix 1: Single Tender Actions (in excess of £25,000)

HDD517	Optum	£213,032	2 years	Medicines Management	<p>Scriptswitch System Support</p> <p>The reason for not obtaining quotes or using the tendering procedure was that this patented software has no competitors which are able to provide the same or similar functionality. Previously the company has reduced costs by £37k pa. Remaining with the company will mean there is no need for extensive upheaval both in setting up a new system (which will take many hours of work) and to GP practices. This is the only known system that will work with Vision360 which is the system used in the majority of GP practices use in Hywel Dda. The alternative system OptimiseRx is updated centrally and has the ability to provide individual patient specific messages, however as this system is held on an external server it is much slower and experience in another Health Board has resulted in 25% of practices switching off the software despite a financial incentive to use it. OptimiseRx is also more expensive software than ScriptSwitch and the return on investment is smaller.</p> <p>In 2019/2020 for a licence fee of £106,078 there were a total number of 76,915 interventions and savings of £568,767. Therefore for every £1 spent ScriptSwitch® saved £5.36.</p> <p>Based on the updated list sizes, and the discounted rate per patient, renewal of ScriptSwitch® will be as follows :</p> <p>394,504 total pts in Hywel Dda x 0.27p per patient = £106,516.08 per annum.</p>
HDD519	Keytracker	£27,961	One off	Central Operations	<p>Electronic Key Boxes</p> <p>This scheme allows the extension of the electronic key management system for pool cars which is already in place at BGH. For consistency it is essential that the same company to provide the key boxes to allow integration into their key management software which we have already paid for and are using.</p> <p>The cost for development of the system has already been paid for as part of the initial purchase for BGH. As a result of having met these costs the Health Board is capable of achieving a more favourable rate as part of this subsequent purchase.</p> <p>The current electronic key box present in BGH has demonstrated considerable savings resulting from 24/7 pool car access. We now plan to roll out key box pilot out to all other sites which currently have pool cars. Using these boxes will allow us to utilise the electronic key management system that we already have in places in BGH and avoid the need for any additional software procurement.</p> <p>Keytracker are the only suppliers of the bespoke key management system in the UK. A failure to support this STA would result in a procurement process that would be unable to</p>

Appendix 1: Single Tender Actions (in excess of £25,000)

					<p>deliver a competitive return as there is only one supplier in the UK market. This would incur avoidable administrative costs to the NHS in Wales.</p> <p>Central management of car keys would be rendered impossible and thus impracticable for the team to administer without extending through the nominated supplier.</p>
HDD520	eHealth	£43,176	One off	Diabetes and Endocrinology	<p>Production of videos</p> <p>Grant funding has been awarded from Welsh Government (specifically slippage funds from the All Wales Diabetes Implementation Group) following a competitive grant call and national panel review to support the expansion of the pre-existing all-Wales digital patient education system for diabetes (Pocketmedic) specifically in conjunction with eHealth Digital Media as a partner. The grant call was an open and competitive process requiring NHS organisations and implementation groups to partner with industry. The funding has been awarded to develop digital content for people with learning difficulties living with diabetes and people with diabetes considering and going through the new diabetes remission programme.</p> <p>This system has previously received funding from the All Wales Diabetes Implementation Group. This working relationship has been in place now for the last 6 years. The system was initially developed and tested in Hywel Dda UHB. The All Wales Diabetes Implementation Group have agreed to fund Hywel Dda University Health Board to specifically work with eHealth Digital Media, Swansea Bay University Health Board and other members of the implementation group to enhance the system. Following funding approval, the content that could populate the system is already under development. With the onset of the COVID-19 crisis we have seen an increased demand to access the digital resources. This will support people living with chronic conditions that will not be seen regularly by health care professionals due to the massive reconfiguration of clinical services.</p> <p>Explicit reasons for single supplier -</p> <ul style="list-style-type: none"> • The supplier uniquely has an evidence based system and proven technology for managing the condition (evidence base below). • The current COVID-19 crisis means that digital resources for people living with chronic conditions have become even more vital. This system is already in use across Wales and the UK. Here we look to build on this resource and expand the content during this difficult time. • We are an NHS and patient driven group with digital media partners that has been developed out of clinical need. We have an established evidence base showing both

Appendix 1: Single Tender Actions (in excess of £25,000)

					<p>clinical effectiveness and importantly a deployment mechanism. We are aware that no other digital systems can offer the same level of evidence or levels of use. The system is the Standard that is in use throughout Hywel Dda and across Wales and its use incentivised through the National Direct Enhanced Service for Diabetes in Wales.</p> <ul style="list-style-type: none"> • The competitive process run by the All Wales Diabetes Implementation group was equally open to other private and public organisations to bid. This exercise underpins this procurement. • We have an established relationship with the funding body (The All Wales Diabetes Implementation Group) and have applied for and been awarded funding specifically to work with eHealth Digital Media as a partner with expertise in behavioural change through self-determination theory focused films. They have a track record of delivering award winning, high quality content in a timely fashion. This funding application process was an open-call and was a competitive process reviewed by a national panel and would have been open to any potential group who wishes to undertake the same work. • The solution is tried and tested and represents significant value. We have estimated that for each patient the cost of accessing the films is 1-3 pence as a one off cost. The level of HbA1c improvement (diabetes control) that we observed in our published study is of a level of improvement you would expect to see with a diabetes drug costing £30 per month. This is all estimated figures but is an indication that what we have developed is really a very cost effective product. • Delays could result in patient interest being lost and the inability to develop a product that can have a real and immediate impact to health outcomes.
HDD521	British Red Cross	£229,500	9 months	Secondary Care	<p>Provision of Emergency Department Well Being and Home Safe Service Following the success of the pilot scheme, NWSSP in conjunction with the National Programme of Unscheduled Care and Welsh Government agreed that a more permanent service should be in place. As such, it was agreed that an open procurement process should be undertaken in order to open up the competition to the market. A tender process went live in early March 2020 for the provision of an emergency department well-being and home safe service across all emergency departments across Wales. Just after the tender went live, COVID-19 pandemic hit the UK and potential bidders for this procurement raised their concerns as to their ability to respond to the tender whilst reacting to the national emergency and continuing to provide their respective services.</p>

Appendix 1: Single Tender Actions (in excess of £25,000)

					<p>In addition, the increased pressures on clinical staff in response to the pandemic has led to uncertainty regarding their availability to evaluate tenders and conclude the procurement process. Furthermore, there is also the potential for procurement services staff to be redeployed to support frontline services.</p> <p>As a consequence of the COVID-19 pandemic, NWSSP Procurement Services in conjunction with the National Programme of Unscheduled Care, deemed it prudent to postpone the tender exercise.</p> <p>Given these unprecedented and uncertain times, there is a requirement to maintain the service on an interim basis from 1st July 2020 until the 31st March 2021. The Service provision will be in place for 9 months and will allow a competitive tender exercise to be undertaken in this time, providing that the current impact of the pandemic decreases as is currently predicted.</p> <p>British Red Cross is the incumbent provider and so is familiar with working in the specific Health Boards/hospitals; the service can continue with very little disruption to an environment which is already pressurised as a result of the COVID-19 pandemic.</p>
HD522	Edmunds Webster	£52,758	One-off	Unscheduled Care	<p>Construction Services for Social Distancing</p> <p>There are currently 46 four bed bays on Teifi, Picton, Derwen, Preseli and Merlin Wards at Ward Blocks 01 & 02, GGH. The internal dimensions of these bays does not allow for adequate social distancing and space isolation. Dividing partitions are required within these bays to ensure the areas are clinically safe and enable social distancing and space isolation as set out in the COVID-19 guidance for Bed Spacing in Healthcare Setting. There is an urgency to completing this work to ensure compliance with the required safety guidance.</p>

Appendix 2: Competitive Tenders awarded

	Period covered by this report:		1 Apr 2020	31 Jul 2020	
Ref	Supplier	Value (£)	One-off or Period	Department	Reason for tender
HDD-COVID-19-21948-21	Cando Laundry Service Ltd and Thomsons Laundry	£TBC not currently being used as Field Hospitals, not populated	4 months initially with month to month extensions	Estates	Temporary laundry service for Field Hospitals
HDD-DCO-CCS-21948-23	ICNH Ltd	£199,957	To 31/3/21	ICT	Dr Doctor System

Appendix 3: Payables in excess of £10,000 and 3 months

	Period covered by this report:		1 April 2020	31 Jul 2020	
Ref	Supplier	Value (£)	Date raised	Dispute	Progress to resolve
1	Becton Dickinson (CME) U.K. Ltd	12,600.00	03/04/20	N	The invoice has been receipted 13/08/2020 and a request has been made to release it for payment.
2	Benmore Medical (UK) Ltd	18,305.40	11/03/20	Y	Invoice was sent in advance of goods being received. Goods originally due end of March but this has been delayed multiple times due to COVID-19 pressures on supplier. Accounts Payable team has requested the invoice to be cancelled and re-issued when goods have been received.
3	Carmarthenshire County Council	16,500.00	11/03/20	N	New PO requisition has now been raised, once PO is approved payment will be made
4	Carmarthenshire County Council	604,787.14	01/05/20	Y	Query with the Council regarding duplicate invoices raised for the same service, awaiting response from the Council
5	NHS Supply Chain	36,960.00	29/02/20	N	Initial problem with Purchase order has been resolved, this is now with the service to receipt the order and payment should be made w/c 10 th August 2020
6	Pembrokeshire County Council	200,000.00	23/03/20	Y	This is an ICF capital invoice and the Health Board is awaiting sign off of the legal documentation surrounding the capital purchase before making payment
7	Pembrokeshire County Council	252,230.00	08/04/20	Y	Invoice has been approved for payment and will be paid w/c 10 th August 2020
8	Tees R Us (HW) Ltd	36,516.00	01/04/20	N	Query regarding receipt of goods, this is being pursued with the service dept.
	TOTAL	1,177,898.54			

Appendix 4: Receivables in excess of £10,000 and 3 months

	Period covered by this report:		1 April 2020	31 July 2020	
Ref	Supplier	Value (£)	Date raised	Dispute	Progress to resolve
1	NHS Birmingham and Solihull CCG	112,874.00	25/11/19	No	Letters have been sent to DOFs pursuing the debts, without success and, have subsequently been sent to CCI. CCI have made contact with the Debtor to recover overdue amounts
2	NHS Dartford, Gravesham & Swanley CCG	17,621.00	25/11/19	No	Letters have been sent to DOFs pursuing the debts, without success and, have subsequently been sent to CCI. CCI are continuing with efforts to recover the outstanding debt
3	NHS Enfield CCG	11,327.00	25/11/19	No	Letters have been sent to DOFs pursuing the debts, without success and, have subsequently been sent to CCI. CCI are continuing with efforts to recover the outstanding debt
4	NHS West Cheshire CCG	60,871.00	25/11/19	No	Backing data re-sent to Debtor and Debtor has confirmed the invoice is in their workflow for processing
5	NHS Birmingham and Solihull CCG	18,370.00	19/02/20	No	Letters have been sent to DOFs pursuing the debts, without success and, have subsequently been sent to CCI. CCI have made contact with the Debtor to recover the outstanding debt
6	NHS Surrey Downs CCG	16,133.00	30/03/20	No	Personal Identifiable Data re-sent to debtor along with reminder letter, CCI referral pending
7	NHS Eastern Cheshire CCG	10,346.00	20/04/20	No	Debtor requested Personal Identifiable Data be re-sent. Re-sent 04/08/20
8	NHS Nene CCG	23,261.00	21/04/20	No	Personal Identifiable Data re-sent to Debtor, another reminder letter sent 30/07/20
9	Merck Sharp & Dohme LTD	12,998.14	20/02/20	No	Payment received 05/08/20
10	Wales Offender Personality Disorder Pathway	12,320.57	16/03/20	No	Debtor has confirmed payment will be made w/c 10 th August 2020
11	Ex Staff	14,261.75	15/08/17	No	With CCI to Pursue Legal Action – Debtor has provided a defence for Health Board consideration

Appendix 4: Receivables in excess of £10,000 and 3 months

12	Ex Staff	19,389.85	05/06/19	No	With CCI to Pursue Legal Action – Supporting documents requested.
	TOTAL	329,773.31			

Appendix 5: Losses and Special Payments for approval

Ref	Losses and Special Payments Category	Value (£)	Explanation
	Period covered by this report:		1 April 2020 2019 to 31 July 2020
1	Accommodation Charge	44.00	Uneconomical to pursue via debt collection
2	Accommodation Charge	36.37	Uneconomical to pursue via debt collection
3	Accommodation Charge	9.19	Uneconomical to pursue via debt collection
4	Hearing Aid	68.00	Uneconomical to pursue via debt collection
5	Hearing Aid	68.00	Uneconomical to pursue via debt collection
6	Hearing Aid	68.00	Uneconomical to pursue via debt collection
7	Hearing Aid	68.00	Uneconomical to pursue via debt collection
8	Hearing Aid	68.00	Uneconomical to pursue via debt collection
9	Hearing Aid	68.00	Uneconomical to pursue via debt collection
10	Hearing Aid	68.00	Uneconomical to pursue via debt collection
11	Ex Gratia	108.00	Replacement glasses
12	Ex Gratia	100.00	Lost bag and trainers
13	Ex Gratia	73.25	Replacement dentures
14	Ex Gratia	5,000.00	Mailroom loss compensation
15	Ex Gratia	200.00	Damage to car
16	Ex Gratia	26.50	Patients travelling costs incurred through cancellations
17	Pharmacy	76,072.45	Expired drugs in Pharmacy
	Total Losses (for approval)	82,145.76	

Appendix 6: Overpayment of Salaries

Period covered by this report: 01 April 2020 – 31 July 2020			
Ref	Reason for Overpayment	Value (£)	Number of invoices
1	Timing issue due to termination mid-month	16,800.75	26
2	Recovery of overpaid hours	497.08	1
3	Recovery of unauthorised absence	256.77	1
4	Recovery of bank shifts	68.56	1
		17,623.16	29