



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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	19 October 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Capital Governance Review
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lee Davies, Director of Operational Planning & Strategic Development
SWYDDOG ADRODD: REPORTING OFFICER:	Lee Davies, Director of Operational Planning & Strategic Development

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

This report presents the Audit & Risk Assurance Committee (ARAC) with the internal Capital Governance Review, which has been requested by the Board and ARAC.

Cefndir / Background

Following discussions at ARAC on 10th June 2021, the Committee requested that an internal Capital Governance Review be undertaken, and a report be prepared for the October 2021 meeting.

Asesiad / Assessment

The Terms of Reference for this review were prepared and presented to the 24th August 2021 ARAC meeting.

Work on the review has now concluded. Details of the findings, recommendations and action plan can be seen in the attached report.

The review makes the following recommendations:

Continue with the following work already commenced in the following areas:

- Standardisation of documentation being used for projects
- Checklist of items for sign off & assurance
- Complete the Capital Project Management framework
- Sign off to the contract type and level of damages included at internal business case approval
- Continue with a rolling programme for the Lessons Learnt and Post Project Evaluation and the development of a Lessons Learnt log
- Review the Terms of Reference for Capital, Estates and Information Management & Technology Sub-Committee (CEIM&TSC) and subgroups to reflect the new Committee structure and requirements for the future

Further consideration be given to the following areas:

- Setting up of an internal scrutiny process for business cases prior to them being finalised and presented to CEIM&TSC for approval
- Consideration be given to whether CEIM&TSC and the Groups that sit underneath it should have delegated approval limit
- The current and future capacity of the existing core teams who support the capital process to deliver the UHB's ambitious capital agenda
- For future complex schemes the UHB might want to consider the resourcing of additional scrutiny of the Supply Chain Partner, dependent on a legal review of the implications of doing so
- Consider the appointment, training and backfilling of Project Directors' time
- The process for the prioritisation of schemes for the Infrastructure Investment Enabling Plan

Argymhelliad / Recommendation

The Audit & Risk Assurance Committee is asked to:

- Take assurance from the review and final report;
- Consider the recommendations made;
- Note the action plan developed.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference
Cyfeirnod Cylch Gorchwyl y Pwyllgor

3.1 The Committee shall review the adequacy of the UHB's strategic governance and assurance arrangements and processes for the maintenance of an effective system of good governance, risk management and internal control, across the whole of the organisation's activities (both clinical and non-clinical) that supports the achievement of the organisation's objectives.

3.3 In carrying out this work, the Committee will primarily utilise the work of Internal Audit, Clinical Audit, External Audit and other assurance functions, but will not be limited to these audit functions. It will also seek reports and assurances from directors and managers as appropriate, concentrating on the overarching systems of good governance, risk management and internal control, together with indicators of their effectiveness.

Cyfeirnod Cofrestr Risg Datix a Sgôr
Cyfredol:
Datix Risk Register Reference and
Score:

Not applicable

Safon(au) Gofal ac Iechyd:
Health and Care Standard(s):

Governance, Leadership and Accountability

Amcanion Strategol y BIP: UHB Strategic Objectives:	3. Striving to deliver and develop excellent services 4. The best health and wellbeing for our individuals, families and communities 5. Safe sustainable, accessible and kind care 6. Sustainable use of resources
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Audit Reports Capital Investment Guidance
Rhestr Termau: Glossary of Terms:	Contained within the body of the report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg: Parties / Committees consulted prior to Audit and Risk Assurance Committee:	Capital Estates and IM&T Sub-Committee Strategic Delivery and Operational Planning Committee Estates, Finance and Planning Teams

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Not applicable
Ansawdd / Gofal Claf: Quality / Patient Care:	Not applicable
Gweithlu: Workforce:	Not applicable
Risg: Risk:	Not applicable
Cyfreithiol: Legal:	Not applicable
Enw Da: Reputational:	Not applicable
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Not applicable



HYWEL DDA UNIVERSITY HEALTH BOARD

CAPITAL GOVERNANCE REVIEW

Version	Status (draft or approved)	Date	Author/Editor
V0.1	Draft	29 Sept	ER
V0.2	Draft	30 Sept	PW
V0.3	Draft	1 Oct	ER & PW
V0.4	Draft	6 Oct	ER
V0.5	Final	7 Oct	ER

1. Introduction

Capital Governance has been and remains an important focus for the UHB and is a subject which has many facets. The UHB capital schemes are the subject of scheme audits, Gateway reviews and reporting to CEIM&T and SD&OD Committee. Recent experience particularly in relation to the Wards 9 & 10 scheme in Withybush Hospital and the fact that the W&C Phase II scheme in Glangwili Hospital remains a complex and difficult project, has highlighted some specific concerns, and this report seeks to address those specific concerns and also address the potential for wider learning and practical improvements in the governance of UHB capital projects. The scope for this review was agreed in discussion between the Chair of ARAC and the Director of Strategic Planning and Operational Delivery and is attached as an annex to this report.

Approach:

Having agreed the scope of work with the Chair of ARAC the team have;

- Discussed the scope of work in the CEIM&T Sub Committee
- Discussed the scope of work with Audit and have jointly identified the key themes emerging from the capital audits undertaken over the past 5 years
- Considered the review of UHB capital governance undertaken by Audit to learn the lessons following the Welsh Audit Office review of the Ysbyty Glan Clwyd scheme which had identified major control failings.
- Considered the challenges currently being managed on UHB capital schemes with specific reference to the Women & Children's Phase 2 scheme.
- Considered the recommendations from the recently concluded post project evaluation of the Withybush ward 9 and 10 scheme
- Considered the recommendations of the recently concluded PAR review in support of the Healthier Mid and West Wales Programme
- To discuss with Welsh Government Capital colleagues their impression of Hywel Dda UHB performance with regard to capital governance
- To consider best practice in other UHB's

The approach is to be challenging of current practice and transparent in consideration of potential areas for improvement .

Structure of the report:

- Introduction
- Governance Structure
- Context
- Reflections from the Ysbyty Glan Clwyd Review
- Audit themes
- Themes from external review
- Issues emerging through resourcing review
- Conclusions
- Recommendations

2. Capital Governance

Currently the Capital Governance reporting structure is from Capital, Estates, IM&T Sub Committee (CEIM&T), into Strategic Development and Operational Delivery Committee (SD&OD) and up to Board. The purpose of CEIM&T is to:

- Oversee delivery of the Health Board's capital programmes and projects included in the planning cycle (in year and longer term).
- Recommend to the Board, via the Strategic Development and Operational Delivery Committee (SD&OD), the use of the Health Board's Capital Resource Limit (CRL).
- Oversee the development of the Estates Strategy and Infrastructure Enabling Plan aligned to the A Healthier Mid and West Wales Strategy for consideration by SD&OD, prior to Board approval.
- Oversee the development of an innovative IM&T and Digital Health Strategy for IM&T (to cover all functions of the UHB's services i.e. primary, community, acute, etc) aligned to the A Healthier Mid and West Wales Strategy for consideration by SD&OD, prior to Board approval.
- Oversee the development and delivery of implementation plans for the Estates and IM&T and Digital Health Strategies agreeing corrective actions where necessary and monitoring its effectiveness.

The Terms of reference are reviewed annually and will need to be updated to reflect the recent changes in the UHB's Committee structure.

Standard Agenda items for the Sub-Committee reflect the following

- Finance and Capital Programme Update – joint report by Finance and Capital Planning
- Governance update which includes project update reports and flags up specific project risks
- Audit Update on recommendations associated with capital
- Risk Update
- Project Dashboards
- Infrastructure Investment Enabling Plan update

Individual Project Groups and governance structures are set up to deliver and manage the larger capital schemes funded through the All Wales Capital Programme.

3. Context

This review has reflected back on the period from 2014/15 in terms of

- capital works undertaken and schemes delivered
- audit reports and reviews undertaken.

In the period since 2014/15 significant capital projects delivered have included the following

Scheme	Site	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21
		£m	£m	£m	£m	£m	£m	£m
Front of House	BGH	3.449	2.594	2.374	2.167	1.022		
Pathology Labs	PPH/WGH	3.425	0.529					
Cardigan ICC	Cardigan	0.695	1.415	0.337	0.591	9.569	9.059	
Women & Children's Phase 1	GGH	3.858						
Mynydd Mawr	PPH	4.386	0.080					
MRI GGH	GGH	1.572						
Unscheduled care	PPH		1.113	0.315				
Ward Refurbishment	GGH		0.554					
X-ray room	PPH			0.935				
Pharmacy Robots	Multiple			1.756				
Bronglais Fire Escape Elevator	BGH				2.684	0.044		
Anti Ligature works	Multiple				1.283			
Aberaeron ICC	AICC				0.778	1.493		
Ward 9 & 10 refurb	WGH					1.330	1.891	
Fishguard	Fishguard					0.627		
MRI BGH	BGH						4.430	
Cross Hands ICC	Cross Hands						0.907	
Imaging equipment	Multiple						1.333	
MRI WGH	WGH							0.814
WGH Fire Precaution work	WGH							0.462
Women & Children's Phase 2	GGH	2.277	0.048	0.628		4.078	11.052	6.848
TOTAL		19.662	6.333	6.345	7.503	18.163	28.672	8.124

All of these schemes will have made a significant positive impact on the environment in which patients are treated and staff operate.

4. Reflections from Ysbyty Glan Clwyd Governance Review

Scope of work reference:

- *Review our Capital Governance and reporting, governance and monitoring processes against other organisations following engagement with NSWWP Shared Services Audit*

In 2020/21 the UHB commissioned NHS Wales Shared Services Partnership : Audit and Assurance to undertake a Capital Governance Arrangement Advisory Review following the Audit Wales factual account into significant failings associated with the Ysbyty Glan Clwyd Refurbishment Project. The review considered the observations made as part of the YGC review and considered any learning or recommendations for Hywel Dda from this process.

Whilst the report comments that '*Hywel Dda UHB has well established capital governance and control arrangements that do not required fundamental changes*' there were 8 suggested recommendations issued as part of the report.

Work is underway which has already strengthened or will strengthen capital governance against these recommendations

- All future major project/programme business cases will include an Integrated Assurance and Approval Plan in accordance with the NHS Wales Infrastructure Investment guidance.
- Whilst Executive Lead/Chief Executive agreement of business cases was evident. The existing arrangements could be strengthened to provide key executive sign-off, ensuring acceptance and ownership of respective elements of the business case e.g. service, finance, IM&T, facilities etc.
- Improved transparency, reporting and formal sign-off of responses to the Welsh Government business case scrutiny process (and associated UHB/third party actions etc.), should be demonstrated
- It would be prudent for governance arrangements (particularly for major investment programmes/projects), to be signed off at Committee/Board level at the project initiation stage (including e.g. delegated limits etc.).
- There is an opportunity to standardise and define expected UHB governance arrangements within procedures, including for example, standardised terms of reference for Project Boards/ Groups etc
- Contracts submitted for signature will be endorsed by the Project Director and lead Executive, outlining how the contract reconciles with the overall funding approval.

- The UHB will continue to ensure that appropriate in house specialist expertise is maintained ensuring external consultant teams are appropriately monitored and where necessary challenged on projects of significant value within NHS Wales.
- The UHB's established capital governance and control arrangements will be reviewed and enhanced, together with its existing procedural documentation, to comprehensively document the control framework.

5. Themes from audit recommendations and reviews

Scope of work reference:

- *Review audit recommendations made on Capital Governance and Projects since 2014/15 (Estates Assurance Reviews and Digital are excluded) and common themes that have emerged:*
 - *how these have effected changes to processes and procedures*
 - *to ensure our processes reflect best practice*
 - *to ensure any further changes/amendments required are embedded into working practice*
 - *the scope of works are clearly understood at the outset of Projects*
 - *sign off of the contractual terms of All Wales Capital contracts*
 - *appropriate management of live contracts*
 - *ensuring robust Lessons Learnt and Post Project Evaluation process*
 - *the governance arrangements are proportionate and appropriate to the scale of schemes*

5.1 Audit Recommendations

Since 2014/15, 15 other audit reviews relevant to capital projects and systems have been undertaken by NHS Wales Shared Services Partnership : Audit and Assurance.

The reports have generated 133 recommendations. The audit recommendations from these reports can be themed into the following areas

- Governance
- Monitoring and Reporting
- Planning
- Process and Procedures
- Procurement, Tendering and Quotation
- Project Management
- Financial Management
- Strategy

The UHB has a process of reviewing audit recommendations and agreed management actions with the Audit and Assurance Team. When the Audit and Assurance Team are satisfied that the appropriate action has been instigated the audit recommendation is then closed off.

At the point of preparing this report there are 26 audit recommendations outstanding

Changes to processes and procedures as a consequence of audit recommendations are continually made by the Estates, Finance and Planning Team. Over the past few months a small task and finish group with representation from Estates, Finance and Planning have been reviewing the Health Board's current procedures and documentation and reviewing them against the procedures

and documentation developed in other Health Boards. In undertaking this review it is apparent that there is an opportunity for the UHB to pull this together into one Capital Project Management framework which will be a route map that brings together the existing procedures, processes and documentation.

5.2 Project Scope of Works to be delivered

For this review the project scope is defined as the elements of building works being considered as part of the project.

The Designed for Life (DFL) Building for Wales Framework was first introduced in June 2006.

The introduction of the framework was to improve the delivery of major capital schemes across NHS Wales in terms of quality, time and cost and reduce the often, adversarial nature of the traditional procurement routes caused by the split between design and construction.

As part of the business case development process for major capital the supply chain partner (SCP) is normally appointed early in the development of the outline business case (OBC). The SCP will appoint a design team that consists of Architects/Principal Designer, Building Services Engineers, Structural and Civil Engineers plus a Principal Mechanical and Electrical installer, they are all employed directly by the SCP.

As part of the DFL framework the Employer is responsible for the delivery of a project brief, under the DFL framework it is the SCP responsibility to ensure the appropriate level of input to enable them to design, delivery and cost the brief. Where information about the building and infrastructure is available from the Employer, it should be shared, but if it is not available it is the SCP's responsibility to undertake the required survey work to ascertain this.

Work on the older UHB sites on certain schemes has recently found that additional works have been required during the construction stage of the project. On certain schemes this has been a reflection on the level of survey work undertaken by the SCP during the planning stages of the project and in these instances the cost of additional work has been the liability of the SCP. For future complex schemes the UHB might want to consider the resourcing of additional scrutiny of the SCP, dependent on a legal review of the implications of doing this given the current contractual position which makes this the responsibility of the SCP.

Additional works identified during the construction work on Ward 9 & 10 in Withybush did result in additional costs being incurred by the HB. As part of our Lessons Learnt Review on this scheme it has been agreed that the UHB will review the project contingency provision required when working on the UHB's older hospital sites.

5.3 Contractual Obligations



The current iteration of the DFL frameworks is split into a Regional Framework for schemes with works cost of between £4m and £12m and a National Framework for schemes in excess of £12m. The framework utilises the NEC3 Engineering and Construction Contract Option C Target Cost as its standard form. The NEC contract differ from traditional contract as the key clauses of the contract are based on mutual trust and co-operation.

All Health Boards in Wales are mandated to use the DFL framework and associated NEC3 form of contract for works valued at more than £4m

The NEC 3 contract makes a provision for the Employer to recover damages from the SCP if they fail to complete the works by an agreed completion date.

Damages are split into 2

- Delay Damages - are contractually enforceable estimates of direct losses or cost that parties agree. These need to be genuine pre-estimates of actual losses that the employer would incur as a result of a breach otherwise they will not be enforceable by law.
- Consequential damages – are indirect cost incurred by the Employer but which are directly attributable to the breach e.g. lost sales

For work below the £4m DFL threshold Joint Contract Tribunal (JCT) contracts are used by the UHB, these contracts again allow for the Employer to recover damages in the same way as NEC 3 contracts.

Historically there has been no formal sign off to the contract used or the levels of losses and ascertained damages included in the contracts for schemes.

For future projects it is recommended that as part of the internal business case approval process, sign off to the contract type and level of damages included is also sought.

5.4 Lessons Learnt and Post Project Evaluation

During 2021/22 the Capital Planning Team have instigated a programme of Post Project Evaluation Reviews (PPE) which will incorporate

- A comprehensive lessons' learnt process incorporating all stakeholders and wider reflections in the project.
- An assessment of whether the project has achieved its objectives, by exploring the original business case and benefits realised to date.
- Opportunity to revisit audit recommendations.
- Assessing the latest position and agreeing with the service the current risks outstanding and benefits to be tracked and monitored going forward.

- Development of a lessons learnt log for sharing with current and future projects

The Programme of work for 2021/22 includes the evaluation of the following PPE

- Ward 9 & 10, Withybush – reported to CEIM&T in September 2021
- Cardigan Integrated Care Centre
- Front of House Scheme, Bronglais
- Aberaeron Integrated Care Centre
- MRI, Bronglais

Lessons Learnt Review

- Women and Children Phase II – reported to CEIM&T in July 2021

A rolling review of completed projects will be included in the ongoing work programme of CEIM&T and a Lessons Learnt log developed

Recommendations emerging from the post project evaluation of the Withybush Hospital Ward 9 & 10 scheme are as follows:

- The role of stakeholder groups, communication and engagement methods
- Management of expectations of key stakeholders in the project
- Clear roles and responsibilities and the setting of expectations at the project outset.
- Review the project contingency provision required when working on the UHB's older hospital sites

5.5 Governance arrangements

Having reflected on the UHB's current formal project governance arrangements, there is a need to incorporate and document these arrangements into the Capital Project Management Framework being developed. This will ensure that a standardised approach is being taken when Projects are established.

6. Issues emerging through external review of capital governance process

Scope of Work Reference:

- *Review our*
 - *Capital Reporting and Project scrutiny at Groups and Committee structure to ensure these are appropriate and fit for purpose*
 - *Understanding of WG's perception of our processes*
 - *The role and remit of the Capital, Estates and Information Management Technology Sub-Committee and provide recommendations to how the governance can be improved*

6.1 Reporting and role of Capital, Estates and Information Management Technology Sub-Committee

Section 2 of the review details the UHB's current Governance structure. During the review we have examined other UHB's capital reporting structures. This process has shown that all organisations have adopted different approval and governance structures. Some areas of good practice that the organisation might wish to consider strengthening its capital assurance processes are:

- The setting up of an internal scrutiny process for business cases prior to them being finalised and presented to CEIM&T for approval
- And consider if CEIM&T and the Groups that sit underneath it should have delegated approval limit

6.2 Welsh Government Feedback

Welsh Government (WG) NHS Capital, Estates & Facilities Team were asked as part of this review for their reflection of our processes. The comments made were focussed around the following points

- Capacity - a key concern given the significant capital agenda in the organisation currently and going forward was around the capacity of the UHB's teams to deliver. WG suggested that the UHB needs to ensure resilience in the system and would need to provide confidence that the organisation has capacity to deliver its programme of works as part of the approval process
- Prioritisation - the need to prioritise the projects included in our Infrastructure Investment Plan
- Visualise – consideration to generate a diagrammatic representation of our Governance and approval structure
- Internal Challenge – consideration to setting up an internal group to challenge business cases
- Communication - between the central WG Team and the UHB and is good with WG always aware of when business cases are being submitted, they like the no surprises approach.
- Lessons Learnt and Post Project Evaluation - Positive feedback was given on the work currently being undertaken

7. Issues emerging through resourcing review

Scope of Work Reference:

- *Review how our projects are resourced*
 - *to deliver against the governance requirement*
 - *to ensure appropriate definition of project roles and responsibilities at Project Director and Project Groups/Team/admin level*
 - *to ensure appropriate input from Operational services and identify any gaps in knowledge, skills and training*

Over the last 10 years the roles assigned to senior capital project leads are rarely specific project appointments. Roles such as SRO and Project Directors are assigned to senior members of the operational and corporate teams. SRO's are normally members of the Executive Team and Project Director roles are assigned to a senior member of the team where the scheme will have operational impact e.g. County Director or General Manager. The involvement and engagement of the operational teams in the delivery of projects is key as often the capital delivery is an enabler to service change and without service involvement can be seen as an estates driven solution.

Time is not currently ring fenced or released for these key project members to have specific project related time in their working week, it is expected that this role is picked up in addition to their operational duties. This can be difficult especially when there are operational pressures being faced.

Issues that have recently emerged on certain schemes have required significant and additional input from the Project Director as well as additional input from technical and professional teams to manage and progress.

Whilst specific Project Director/SRO briefings have been undertaken previously, training has not been provided in the organisation recently. Whilst there is an organisational desire to maintain operational input at Project Director level there will always be a need, for the support of additional technical input from the Estates and other teams to support.

The step up in the UHB's capital and infrastructure ambition over the next few years is significant with the aspiration to deliver the

- A Healthier Mid and West Wales Programme Business Case (PBC)
- Major Infrastructure PBC
- Statutory Fire Schemes at Withybush and Glangwili.

The current level of resourcing within the core technical teams are insufficient to deliver successfully against this agenda.

Further consideration should be given following this review to

- the appointment of Project Directors with appropriate skill set for the Project delivery
- the training provided to Project Directors

- the releasing/backfilling of Project Director for a portion of the working week if they are clinical or operational team members
- the appropriate resourcing of core teams to successfully deliver our Infrastructure ambition

8. Conclusions

Whilst there are areas of good practice and significant evidence of schemes that have delivered to time, budget and quality, the review has provided an opportunity to review external practice and reflect internally on:

- areas where the organisation needs to maintain the progress with the work currently in train to review processes, procedures and documentation.
- areas where further consideration is required to determine the way forward for the organisation

The recommendations below and action plan attached in Appendix B are split into these categories.

9. Recommendations

The Capital Governance Review makes the following 12 recommendations

Continue with the following work already commenced in the following area

- Standardisation of documentation being used for projects
- Checklist of items for sign off & assurance
- Complete the Capital Project Management framework
- Sign off to the contract type and level of damages included at internal business case approval
- Continue with a rolling programme for the Lessons Learnt and Post Project Evaluation and the development of a Lessons Learnt log
- Review the Terms of Reference for CEIM&T and subgroups to reflect the new Committee structure and requirements for the future

Further consideration be given to the following areas

- Setting up of an internal scrutiny process for business cases prior to them being finalised and presented to CEIM&T for approval
- Consideration be given if CEIM&T and the Groups that sit underneath it should have delegated approval limit
- The current and future capacity of the existing teams who support the capital process to deliver the UHB's ambitious capital agenda
- For future complex schemes the UHB might want to consider the resourcing of additional scrutiny of the SCP, dependent on a legal review of the implications of doing so
- Consider the appointment, training and backfilling of Project Directors' time
- The process for the prioritisation of schemes for the Infrastructure Investment Enabling Plan

APPENDIX A - Terms of Reference for the Review

SCOPE OF CAPITAL GOVERNANCE REVIEW

Purpose

To provide assurance that appropriate Capital Governance processes are in place to ensure that the organisation learns the lessons from past and current projects to improve governance, organisational processes and the delivery of future projects.

<p style="text-align: center;">Scope</p>	<p>Scope</p> <p>The review will be undertaken to:</p> <ul style="list-style-type: none"> • Review audit recommendations made on Capital Governance and Projects since 2014/15 (Estates Assurance Reviews and Digital are excluded) and common themes that have emerged: <ul style="list-style-type: none"> ○ how these have effected changes to processes and procedures ○ to ensure our processes reflect best practice ○ to ensure any further changes/amendments required are embedded into working practice ○ the scope of works are clearly understood at the outset of Projects ○ sign off of the contractual terms of All Wales Capital contracts ○ appropriate management of live contracts ○ ensuring robust Lessons Learnt and Post Project Evaluation process ○ the governance arrangements are proportionate and appropriate to the scale of schemes • Review our Capital Governance and reporting, governance and monitoring processes against other organisations following engagement with NSWWP Shared Services Audit • Review our <ul style="list-style-type: none"> ○ Capital Reporting and Project scrutiny at Groups and Committee structure to ensure these are appropriate and fit for purpose ○ Understanding of WG's perception of our processes ○ The role and remit of the Capital, Estates and Information Management Technology Sub-Committee and provide recommendations to how the governance can be improved • Review how our projects are resourced <ul style="list-style-type: none"> ○ to deliver against the governance requirement ○ to ensure appropriate definition of project roles and responsibilities ○ at Project Director and Project Groups/Team/admin level ○ to ensure appropriate input from Operational services ○ and identify any gaps in knowledge, skills and training
<p>Timing</p>	<ul style="list-style-type: none"> • Field work late July – end September 2021 • Report Audit Committee October 2021 (provisional)
<p>Review to be undertaken</p>	<p>The review will be directed by the Director of Operational Planning and Strategic Developments with support from the Capital Planning Team.</p>

Report Structure

- Introduction
- Context of review in terms of what has been delivered in terms of capital projects
- Reflections from the Ysbyty Glan Clwyd Review based on the report previously presented to ARAC
- Themes raised through audit recommendations and reviews
 - How the recommendation have been actioned
 - Further action being taken
- Issues emerging through external review of capital governance processes
- Issues emerging through resourcing review
- Recommendations with timescales for improvements

APPENDIX B

Action Plan		
Action	Responsibility	Completion
Develop a Capital Project Management Framework	Capital Planning Team	February 2022
Develop Standardised Project Governance Documentation including a checklist for sign off and assurance	Capital Planning Team	February 2022
Sign off to the contract type and level of damages included at internal business case approval	Estates & Capital Planning Team	Already actioned
Continuation of Post Project Evaluation and Lessons Learnt Evaluation	Capital Planning Team	Ongoing
Develop a Lessons Learnt Log	Capital Planning Team	December 2021
Terms of Reference for CEIM&T to be reviewed	Capital Planning Team	January 2022
Consideration		
Setting up of an internal scrutiny process for business cases prior to them being finalised and presented to CEIM&T for approval		
Consideration be given if CEIM&T and the Groups that sit underneath it should have delegated approval limit		
The current and future capacity of the existing core teams who support the capital process to deliver the UHB's ambitious capital agenda		
For future complex schemes the UHB might want to consider the resourcing the additional scrutiny of the SCP		
Consideration of Project Director role		
Training for Project Director		
Review the resourcing of capital projects for Project Director		
The process for the prioritisation of schemes for the Infrastructure Investment Enabling Plan		