

PWYLLGOR DIGIDOL, DATA AC ARLOESI
DIGITAL, DATA AND INNOVATION COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	22 April 2025
TEITL YR ADRODDIAD: TITLE OF REPORT:	Monitoring of Ministerial Directions
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Huw Thomas, Executive Director of Finance Jill Paterson, Director of Primary Care, Community Strategy and Long-Term Care
SWYDDOG ADRODD: REPORTING OFFICER:	Rachel Williams, Head of Assurance and Risk

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

The purpose of this report is to provide the Digital, Data and Innovation Committee (DDIC) with a status update and assurance that all NHS Non-Statutory Instruments, otherwise known as Ministerial Directions (MD), received from Welsh Government (WG) which were previously aligned to Sustainable Resources Committee (SRC) and now under the remit of DDIC, have been implemented/adopted by Hywel Dda University Health Board (HDdUHB).

Cefndir / Background

Acts of Parliament, Acts of Senedd Cymru, Assembly Measures and Assembly Acts enable Welsh Ministers to develop more detailed legislation, known as secondary or subordinate legislation, usually by means of Statutory Instruments (SI).

Non-Statutory Instruments (NSI) are legislative in character; they alter legal rights and duties, however they are not SIs. NSIs, which are issued by Welsh Ministers, include codes of practice and guidance.

In complying with the requirements of various governance codes and the Annual Governance Statement requirements, HDdUHB has a duty to provide assurance of compliance with the NSIs.

During the review of the Annual Governance Statement, the Audit and Risk Assurance Committee (ARAC) requested that the internal assurance process regarding the adoption of and actions in response to, these requirements be strengthened. As MDs potentially form part of the process of the roll out of digital systems, DDIC will receive a regular assurance report on compliance.

Asesiad / Assessment

The table attached at Appendix 1 details the MDs relating to the National Health Service issued between 1 February 2024 and 31 March 2025, as well as MDs issued previously which are still in the process of being implemented.

The following RAG status is now applied to MDs:

- **Green** = completed
- **Amber** = a plan is in place and on schedule to be completed by the timescale provided by the Lead Officer
- **Red** = behind schedule to the timescale provided by the Lead officer, or a plan (with date for implementation) is not yet in place
- **Blue** = External i.e., the means to achieve compliance is currently outside the gift of the Health Board

A review of governance arrangements has been undertaken to improve the alignment of the Health Board's Committees to the 6 domains of targeted intervention as outlined by Welsh Government to strengthen the Health Board's focus on digital, finance, performance and strategic planning. The Board agreed the revision of governance arrangements at its meeting in January 2025. With the disestablishment of SRC from 31 March 2025, and the establishment of DDIC, Finance & Performance Committee, and Strategy & Planning Committee, MDs have now been re-aligned to the new Committees as appropriate.

MDs noted as complete (Green):

MD	Lead Director	Progress on Implementation	Date notified of completion
<p>2023. No 27 - The Primary Care (E-Prescribing Pilot Scheme) Directions 2023 (issued 01/06/23)</p>	<p>Director of Primary Care, Community Strategy and Long Term Care</p>	<p>The Health Board has now established the E-prescribing scheme with GMS contractors.</p> <p>Electronic Prescription Service (EPS) is now live across 10% of GP practices in Wales, with 278 community pharmacies now using the service. A national implementation plan is in place driven by Digital Health and Care Wales (DHCW) with direct implementation with GP practices and community pharmacies. Egton Medical Information Systems (EMIS) system is the only GP practice system that supports EPS, therefore practices within Hywel Dda on Vision system are migrating before they are eligible for EPS implementation. All Pharmacy Patient Medication Record (PMR) systems are now EPS-compliant within Wales, however there is still development work to be completed for dispensing doctors systems.</p> <p>Hywel Dda UHB have representation on the national EPS advisory group to provide local intelligence and approve and share local implementation plans.</p>	<p>Apr-25</p>

		As of April 2025, EPS is live in three practices in Hywel Dda, and across 32 community pharmacies. An implementation plan to roll out EPS to eligible practices in Hywel Dda has been approved in collaboration between the practices, DHCW and the Health Board. The proposed plan is to implement EPS in an additional 18 practices by the end of quarter 2 of 2025/26, representing 43% of practices.	
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MDs noted as external (Blue):

MD	Lead Director	Progress on Implementation	Health Board Completion Date
2023. No 08 - Local health boards and NHS Trusts reporting on the introduction of new medicines into the National Health Service in Wales Directions 2023 (issued 24/03/23)	Director of Primary Care, Community Strategy and Long-Term Care	<p>Implementation of this MD is aligned to the Welsh Health Circular 032-22 (Further extending the use of Blueteq in secondary care).</p> <p>The national roll out of Blueteq to the Health Boards will be managed and coordinated via the All-Wales Blueteq Steering Group, with management support from All Wales Therapeutics & Toxicology Centre on behalf of Welsh Government (WG).</p> <p>The Welsh Health Specialised Services Committee (WHSSC) Data Protection Impact Assessment (DPIA) and Cyber Security Impact Assessments, approved at National level, have now been approved at a local level by the Health Board.</p> <p>The steering group are continuing to develop and approve the drug proformas to be used within Blueteq and are working with the supplier to optimise the system to meet workflows within Welsh Health Boards.</p> <p>The phased implementation should begin in 2025/26 for HDUHB. Until implementation, use and monitoring of high-cost drugs will continue within current service provisions.</p>	Not Known

Argymhelliad / Recommendation

The Committee is requested to:

- **NOTE** the re-alignment of Digital-related MDs previously reportable to SRC in line with revised governance arrangements as approved by Board at its meeting in January 2025.
- **RECEIVE ASSURANCE**, or otherwise, from the lead Executive Director or Supporting Officer on the management of MDs within their area of responsibility, particularly in respect of understanding when the MD will be delivered, any barriers to delivery, impacts of non/late delivery and assurance that the risks associated with these are being managed effectively.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.1.19 – seek assurance on the delivery of the requirements arising from the Health Board’s regulators, WG and professional bodies.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Risks to delivery of MDs identified on operational risk registers.
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:

Ar sail tystiolaeth: Evidence Base:	Underpinning WHC actions on the WHC Tracker from across HDdUHB's services reviewed by the lead Executive/Director or Supporting Officer.
Rhestr Termau: Glossary of Terms:	Contained within the report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Digidol, Data ac Arloesi Parties / Committees consulted prior to Digital, Data and Innovation Committee:	Relevant Lead Executives/Lead Directors or Supporting Officers

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	No direct impacts from report however organisations are expected to have effective monitoring systems in place and take steps to ensure actions are delivered effectively.
Ansawdd / Gofal Claf: Quality / Patient Care:	No direct impacts from report however organisations are expected to have effective monitoring systems in place and take steps to ensure actions are delivered effectively.
Gweithlu: Workforce:	No direct impacts from report however organisations are expected to have effective monitoring systems in place and take steps to ensure actions are delivered effectively.
Risg: Risk:	No direct impacts from report however organisations are expected to have effective audit and assurance mechanisms in place, along with risk management systems in place for any associated risks.
Cyfreithiol: Legal:	No direct impacts from report.
Enw Da: Reputational:	Poor management of MDs can lead to loss of stakeholder confidence. Organisations are expected to have effective monitoring systems in place and take steps to ensure actions are delivered effectively.
Gyfrinachedd: Privacy:	No direct impacts from report.
Cydraddoldeb: Equality:	No direct impacts from report however each action is outlined in description of overarching actions required.