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University Health Board

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bywydau iach

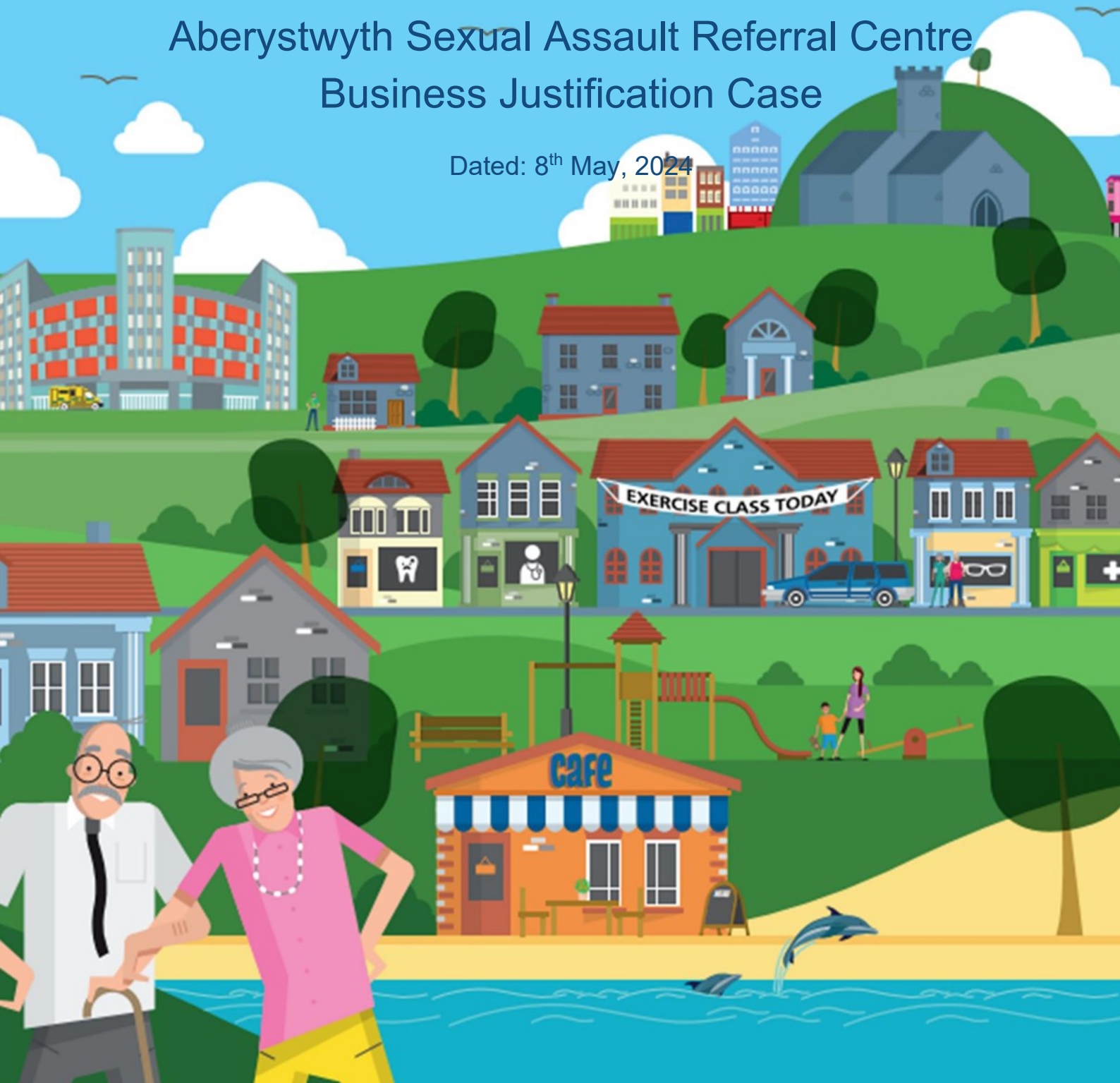
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DRAFT Hywel Dda University Health Board

Aberystwyth Sexual Assault Referral Centre Business Justification Case

Dated: 8th May, 2024



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Hywel Dda University Health Board Aberystwyth Sexual Assault Referral Centre

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	Name	Date	Comments
Prepared by:	Greg Haddock, PwC	5 th July 2023	Submitted for Review to WG on Budget Cost Estimates.
	Malvika Mundkur, PwC Darren Kane, PwC	3 rd May 2024	Reflects updates in response to the WG informal scrutiny comments and SARC Key Project Group and SARC Board Stakeholders.
Budget Cost Estimates Reviewed by:	SARC Aberystwyth Project Group, Project Director and SRO	12 th June 2023	Review completed for BJC on budget cost estimates
	University Health Board Scrutiny Key Leads	12 th June 2023	Review completed for BJC on budget cost estimates
	SARC Board	12 th June 2023	Review completed for BJC on budget cost estimates
	Executive Team	21 st June 2023	Review completed for BJC on budget cost estimates
	Hywel Dda Board	27 th July 2023	Review completed for BJC on budget cost estimates
	Strategic Development and Operational Delivery Committee	26 th June 2023	Review completed for BJC on budget cost estimates
	Welsh Government	11 th September 2023	Reviewed with informal feedback provided on BJC with budget cost estimates.
Tender Return Costs Reviewed by:	SARC Key Project Group and SARC Board Stakeholders	26 th April 2024	Reviewed completed for BJC on tender return costs.
	Project Group	7 th May 2024	Reviewed completed for BJC on tender return costs.
	Executive Team	15 th May 2024	Review to be completed for BJC on tender return costs.
	SDODC (Chairs Action)	TBC	Review to be completed for BJC on tender return costs.
Approved by:	Hywel Dda Board	30 th May 2024	Review to be completed and approved for onward submission to WG.
	Welsh Government	June to August 2024	To be completed - scrutiny and approval of capital funds.

Glossary of Abbreviations

Abbreviation	Definition
ABE	Achieving Best Evidence
AHMWW	A Healthier Mid & West Wales
AICC	Aberystwyth Integrated Care Centre
BJC	Business Justification Case
CSF	Critical Success Factor
DPP	Dyfed-Powys Police
DPPCC	Dyfed Powys Police and Crime Commissioners
FCA	Flood Consequence Assessment
FFLM	Faculty of Forensic & Legal Medicine
HDUHB	Hywel Dda University Health Board
HMCPSI	HM Crown Prosecution Service Inspectorate
IAAP	Integrated Assurance Approval Plan
ISVA	Independent Sexual Violence Adviser
MEAT	Most Economically Advantageous Tender (MEAT)
POCT	Point of Care Testing
RES	Remote Evidence Site
RPA	Risk Potential Assessment
SARC	Sexual Assault Referral Centre
SOC	Strategic Outline Case
VAWDASV	Violence Against Women, Domestic Abuse and Sexual Violence
VfM	Value for Money
WG	Welsh Government
WHSSC	Welsh Health Specialised Services Committee
WSAS	Welsh Sexual Assault Services

Executive Summary

1. This Business Justification Case (BJC) seeks the approval of Welsh Government (WG) for Hywel Dda University Health Board (the University Health Board or HDUHB) to invest in the refurbishment of premises on the ground and first floors of the Canolfan Rheidol Ceredigion County Council Offices in Aberystwyth, so that they can accommodate a new Sexual Assault Referral Centre (SARC) (the Project). Following this refurbishment, Dyfed-Powys Police (DPP) and its partners will provide an adult SARC Hub as part of the Mid and West Wales Hub and Spoke model of care for adults, under the national SARC programme of work.
2. The delivery of all SARC hubs is being led by the NHS in Wales. The purpose of the Project is to deliver sustainable ISO-standard infrastructure for SARC services in Aberystwyth, to replace the current SARC facility, which is made available to Dyfed-Powys Police (DPP) under an agreement with Ceredigion County Council and will not be available from 1 April 2025 (see letter attached at Appendix 1) (Note: the current project completion date is 26 May 2025, discussions with the provider of Bow Street facility to gain an extension from 1 April 2025 are in progress).
3. The Project is a tranche within the national SARC programme of work, which is being delivered by three regional Service Delivery Groups (South-west, South-east and North Wales) and governed by the Welsh Sexual Assault Services (WSAS) Programme Board. A letter of support from the WSAS Programme Board's Chair is attached at Appendix 2, highlighting the urgent need for the project to be delivered. The role of the University Health Board is to deliver a capital solution by procuring the new SARC to ISO 15189:2022 quality standards. The University Health Board will be the signatory of the lease with Ceredigion County Council for the space in which the new SARC will be located, with a term of twenty years.
4. The Forecast Project Out-turn Cost based on tender costs is £3,353,761 (post-VAT recovery). The project completion date under the timeline agreed for the Project is May 2025.
5. The BJC has been the subject of a robust internal University Health Board scrutiny review through the Health Board's Key Stakeholders, Aberystwyth SARC Project Group, SARC Programme Board, the University Health Board's Executive Team, and the Board.
6. DPP's role is to develop the detailed accommodation plan to ensure that the Quality Standards of the Faculty of Forensic & Legal Medicine (FFLM) are met and maintained, and forensic provision meets ISO standards, maximising the opportunity to secure convictions.¹ However, it is to be noted that the responsibility of the ISO accreditation is with the ISO team as part of the overall regional collaboration, and not the sole responsibility of the DPP. The 3rd Sector's role is to develop the detailed accommodation plan for the first floor.
7. The Project is required because of the following:
 - 7.1. Closure of the SARC located at Cartref Tregerddan, Bow Street, Aberystwyth (the Bow Street SARC).**
 - 7.1.1. Acute demand in Aberystwyth is currently met by the Bow Street SARC, operated by third sector provider New Pathways. The facility's capacity is limited as it is next to a care home with no scope for expansion, and does not meet disabled access standards, therefore would have needed to be relocated at some point.

¹ The FFLM Quality Standards have been developed in response to the recognition by the Home Office that the Faculty of Forensic & Legal Medicine (FFLM) is responsible for the standards to be expected from all healthcare providers involved in custody healthcare and forensic examination; and in response to the Violence Against Women and Children Taskforce Report along with the Government's interim response, where it was agreed that the FFLM should set these standards in conjunction with the Forensic Regulator. Further information is available at <https://fflm.ac.uk/resources/publications/fflm-quality-standards-for-nurses-and-paramedics-general-forensic-medicine-gfm/>

7.1.2. Ceredigion County Council have also confirmed that the facility will no longer be available from 1st April 2025 (see letter attached at Appendix 1) (Note: the current project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress).

7.2. Meeting an anticipated 166% increase in acute demand due to the closure of the Newtown and Carmarthen SARC to acute cases under the national SARC programme.

7.2.1. This will see 6% of acute cases currently serviced at Carmarthen and 87% of acute cases currently serviced in Newtown transferred to Aberystwyth. These figures do not include growth in demand due to increased incidence and/or reporting of sexual assault as there is no predicted future case load data to reference.

8. Services must continue to be provided in Aberystwyth with no break in service continuity, therefore it is imperative that the Project is completed by 1st April 2025. If an ISO 15189:2022-compliant facility with the appropriate space and capacity to meet the needs of service users is not put in place by the statutory deadline of October 2025 there is also a risk that it may not be possible to collect admissible evidence for all cases.
9. The new SARC will be a 342.08m² facility located on the ground and first floors of the Canolfan Rheidol Ceredigion County Council Offices in Aberystwyth.
10. The new SARC facility will provide 24-hour access 365 days of the year to acute specialist health and forensic assessments on the ground floor. There will be dedicated space for non-acute services on the first floor, to be provided by the third sector for victims of sexual assault within North Dyfed Powys region.
11. This BJC follows the five-case model, and an overview of the cases follows:

A. Strategic Case

- I. The strategic case for the Project is the need to replace the Bow Street SARC with a facility that is fit for purpose. In addition, Ceredigion County Council has served notice to DPP to vacate by 1st April 2025 (note: as the current project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress).
- II. The new facility must meet the ISO 15189:2022 standards and be capable of meeting anticipated demand.
- III. The design of the Project will mean that Aberystwyth will have a facility that can cater to acute and non-acute cases, including for collection of forensic evidence, collecting recorded evidence with the capability to support remote court presence. In addition, the facility will include counselling rooms and examination rooms to support the non-acute cases.
- IV. The Project will align with:
 - The objectives of The Well-being of Future Generations (Wales) Act.
 - A Healthier Wales: long term health and care strategy.
 - The national WSAS Programme.
 - The Hywel Dda University Health Board 'A Healthier Mid and West Wales: Our Future Generations living well' (AHMWW) strategy.
 - The Ceredigion Local Well-being Plan 2023-28.
- V. It is also informed by relevant strategies, including: The Violence Against Women; Domestic Abuse and Sexual Violence (VAWDASV) Strategy (Wales) 2022-2026; The Victims' Strategy 2018; The Race Equality Action Plan; and Together for Mental Health.
- VI. Main benefits of the Project include:

- It will contribute to the achievement of the objectives of the national SARC programme.
- It will secure continuation of Business as Usual for SARC services during a time of change in the sector.

VII. Main risks include:

- Failure to secure capital funding in time and / or in entirety – the Aberystwyth SARC Project Group is mitigating this risk by entering dialogue with WG early and addressing comments received.
- Failure to have the new SARC in place by 1st April 2025 (note: the current project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress). In addition, the Aberystwyth SARC Project Group is also mitigating this risk through utilising the technical capability of the SARC project group and the support from and technical capability of wider WSAS programme. Failure to have a SARC that meets ISO standards and provide admissible evidence to court- this risk is being mitigated by ensuring the design of the new facility follows the ISO guidelines and appointing an ISO accreditation expert.

B. Economic Case

- I. The University Health Board has identified three options for analysis:
 - Option 1 – the “do nothing” option.
 - Option 2 – include the Project within the development of the Aberystwyth Integrated Care Centre (AICC).
 - Option 3 – development of the new SARC facility within the Canolfan Rheidol Ceredigion County Council Offices in Aberystwyth.
- II. Option 1 is not feasible – Ceredigion County Council has terminated the lease on the premises in Bow Street, Aberystwyth, which will not be available for use after 1st April 2025 (note: the current project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress).
- III. Option 2 is not feasible – drafting of the Strategic Outline Case (SOC) for the Aberystwyth Integrated Care Centre (AICC) has not commenced and the timing of delivery of the AICC is uncertain.
- IV. Option 3 is the preferred options as it enables the Project to achieve its Spending Objectives and Critical Success Factors.

C. Commercial Case

- I. The University Health Board will procure the refurbishment (including works, furniture, medical equipment and IT hardware and software, infrastructure, networking, installation, and construction commissioning) of an area of 342.08m² on the ground and first floors of the Canolfan Rheidol Ceredigion County Council Offices in Aberystwyth.
- II. Suppliers will be procured under an approved framework - the Hywel Dda University Health Board Construction Framework (Lot 4). Lot 4 is a multi-supplier framework for the provision of construction works in respect of the Hywel Dda Region. This ensures that the suppliers have been verified and carry the appropriate skills, knowledge, and experience to deliver the Project.
- III. The Forecast Project Out-turn Cost of the Project based on tender costs is £3,353,761 (post-VAT recovery).
- IV. Under the timeline agreed for the Project, sustainable infrastructure for ISO compliant SARC services in Aberystwyth, to replace the current SARC facility, will be delivered by May 2025.

D. Financial Case

- I. Total Capital Costs are estimated at £3,353,761. Annual Operating Costs – including lease and service charge costs, IT revenue costs and equipment maintenance - are estimated at £144,283. These operating costs will be funded primarily through the WSAS cost pooling arrangement, as well as the residual budget that has been allocated for SARC. For full details, including impacts on the University Health Board’s balance sheet, see the Financial Case and financial annex at Appendix 5. To be clear, although the University Health Board will be the signatory of the leases with Ceredigion County Council, it will not be liable for any Operating Costs, as all such costs will be covered by funds from the WSAS Programme.

E. Management Case

- I. The University Health Board established the Aberystwyth SARC Project Group (the Project Group) on 17th October 2022, responsible for governance and delivery of the Project and the expected benefit outcomes. The Aberystwyth SARC Project Group is accountable to the Senior Responsible Officer (SRO), being the Director of Strategy and Planning; and the Project Director, being the Ceredigion County Director.



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Peter Skitt

County Director Ceredigion at Hywel Dda University
Health Board

1 Strategic case

1.1 Organisational overview

- 1.1.1** This section provides brief descriptions of the three main parties within the Project – the University Health Board, DPP and New Pathways - and of their roles in the Project.
- 1.1.2 University Health Board:** The University Health Board is the planner and provider of NHS healthcare services for a population of approximately 385,000 in Carmarthenshire, Ceredigion, Pembrokeshire, and bordering counties. The University Health Board delivers services through its four main hospital sites (Bronglais in Aberystwyth, Glangwili in Carmarthen, Prince Philip in Llanelli and Withybush in Haverfordwest), community hospitals, minor injuries units, centres and clinics and mental health sites.
- 1.1.3** The University Health Board leads the Aberystwyth SARC Project Group described in the Management Case. The role of the University Health Board within the Aberystwyth SARC Project Group is to procure the refurbishment of premises on the ground and first floors of the Canolfan Rheidol Ceredigion County Council Offices in Aberystwyth, so that they can accommodate the Project. An assessment has been undertaken and described within the Economic Case which evaluates other potential options and reasons for choosing the Canolfan Rheidol site. Along with New Pathways, the Health Board shall supply the workforce for the units, however the cost of the staff shall be solely born by the Health Board.
- 1.1.4** The University Health Board will also be the signatory of the leases with Ceredigion County Council for the space in which the new SARC will be located (details of the leases are provided in the Commercial Case and the draft leases are attached at Appendix 3).
- 1.1.5** The University Health Board will not be responsible for the ISO accreditation of the premises, nor for the delivery of SARC services.
- 1.1.6 DPP:** DPP serves Carmarthenshire, Ceredigion, Pembrokeshire, and Powys. The resident population is more than 515,000 people, which rises significantly with tourists each year. the strategic direction and priorities for Dyfed-Powys Police are set by the Police and Crime Plan 2021-25. They are:
- Victims are supported.
 - Harm is prevented.
 - Our justice system is more effective.
- 1.1.7** DPP has an agreement with Ceredigion County Council which permits it to make the Bow Street SARC available to Castlerock Recruitment Group CRG Medical Services to deliver forensic examination and to a crisis worker supplied by New Pathways (see below) to deliver victim / client support.
- 1.1.8** The role of DPP in the Project is to develop the detailed accommodation plan to ensure requirements of FFLM standards are met and maintained, and forensic provision meets ISO standards requirements, maximising the opportunity to secure convictions. It is to be noted that the responsibility of the ISO accreditation is with the ISO team as part of the overall regional collaboration, and not the sole responsibility of the DPP. No capital funding will be provided by DPP towards the new facility.
- 1.1.9 New Pathways:** The third sector is represented in the Aberystwyth SARC Project Group by New Pathways, the largest sexual violence support provider in Wales, with 30 years' experience of delivering specialist therapeutic support to adults and children affected by rape, sexual assault or sexual abuse. As a charitable organisation, New Pathways offers a full range of free

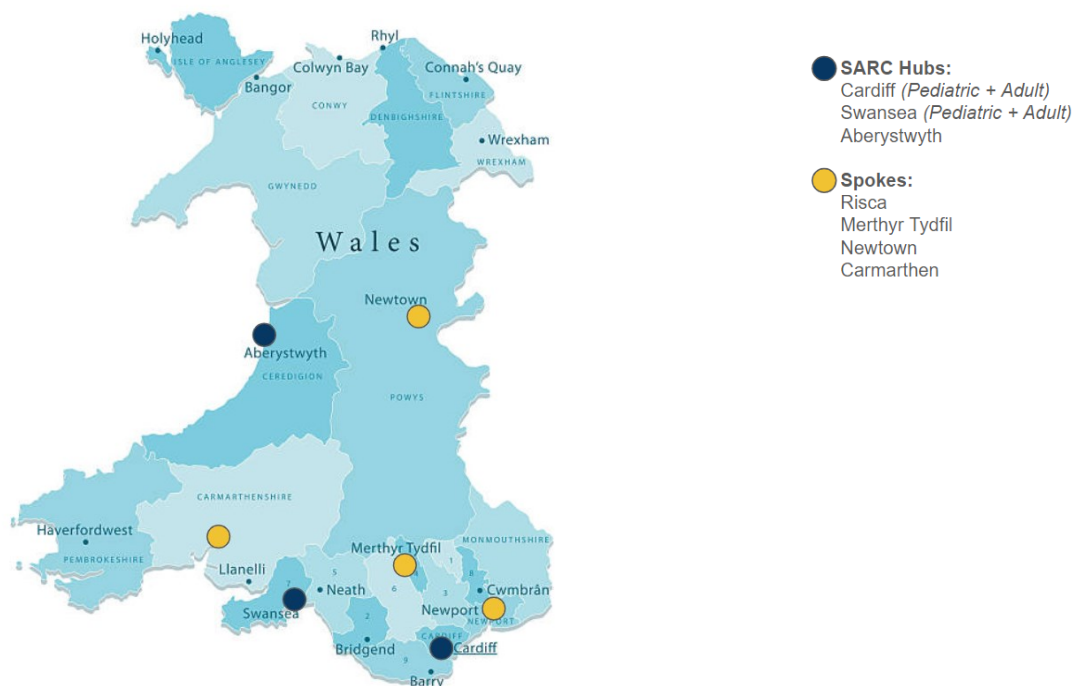
specialist crisis, advocacy, wellbeing and counselling services and supports nearly 4,000 people each year. New Pathways runs the Bow Street SARC.

- 1.1.10 The role of New Pathways in the project is to work with the Aberystwyth SARC Project Group to develop the detailed accommodation plan for non-acute services in the Project.
- 1.1.11 The workforce from the existing Aberystwyth hub located at Bow Street, who have been supplied by the Health Board and New Pathways, shall be transferred, and form the new workforce at the refurbished Aberystwyth facility. This workforce will be funded through the Health Board and the cost pooling arrangement, and New Pathways shall not be contributing to the staff costs. The workforce transferred from the Bow Street facility is sufficient for the Canolfan Rheidol facility, and therefore no new additional staff are being recruited.

1.2 Strategic context

- 1.2.1 In 2013, WG commissioned a review to examine the extent to which the SARCs fulfilled the requirements of Public Health Wales service specifications, victims’ needs, any unmet gaps in provision and the interdependencies between SARCs and other services. The findings from the review formed the case for change for a multi-agency review of sexual assault services across Mid, South and West Wales, led by the National Health Service (NHS) Wales Health Collaborative (Phase 1). A Project Board was established comprising representatives from health, the police force and the third sector, to oversee the development of a service model.
- 1.2.2 In 2019, following an options appraisal process, Health Boards, police forces, Police and Crime Commissioners, in partnership with the third sector, agreed an integrated service model for the delivery of sexual assault referral services in South Wales, Dyfed Powys and Gwent. This agreed regional model is based on a “hub and spoke” approach, with three adult SARC hubs in Cardiff, Swansea and Aberystwyth and two paediatric SARC hubs in Cardiff and Swansea. The SARC hubs will also act as a spoke for the local population and will be supported by additional spokes in Risca (Newport), Merthyr Tydfil, Newtown and Carmarthen. North Dyfed Powys should be served by one acute SARC hub to be based in Aberystwyth, with victims in South Dyfed Powys accessing acute SARC services in Swansea. The delivery of all SARC hubs is being led by the NHS in Wales.

Figure 1: Map showing location of Hub and Spoke Facilities in Wales

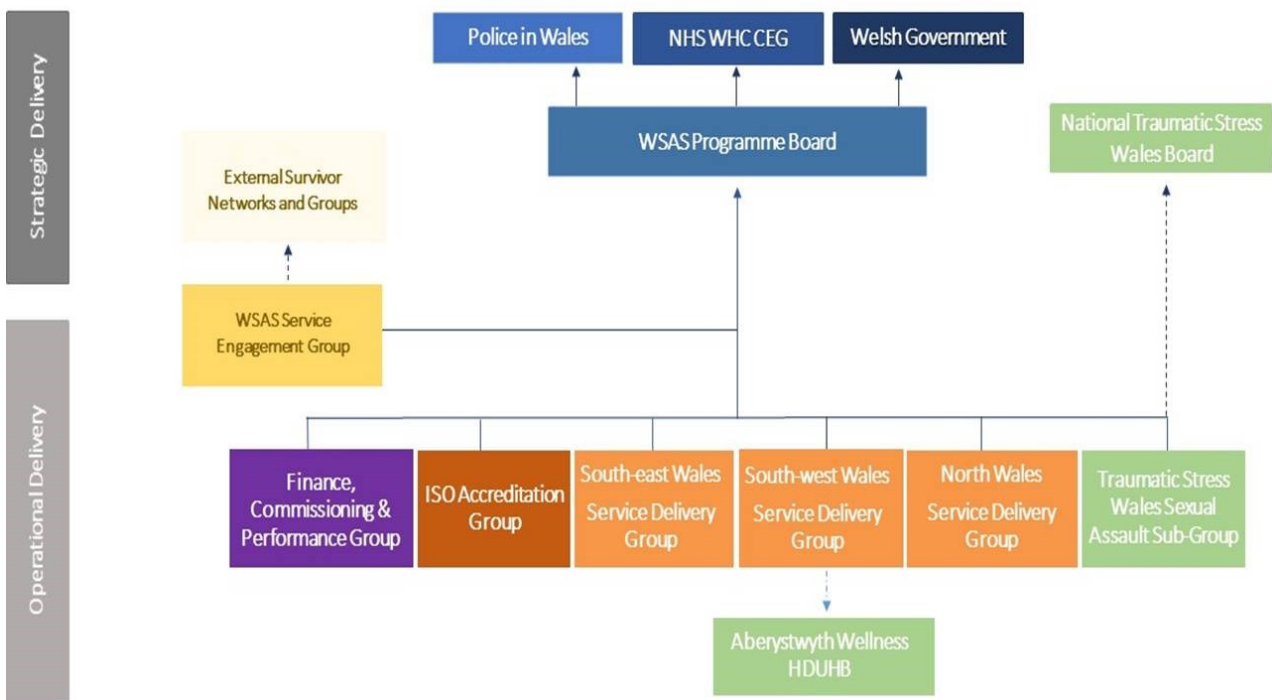


1.2.3 For North Dyfed Powys, Aberystwyth was chosen as the acute hub due to several benefits that can be realised for individuals. Overall, the recommendation for the SARC adult hub in Dyfed Powys being in Aberystwyth, supports the development of an overarching strategic picture of sexual assault referral centres across Wales with proposed SARC Hubs located in Colwyn Bay, Cardiff, Swansea and Aberystwyth, supported by more local SARC spokes. Some of these benefits include:

- Minimal travel time for the population compared to the model in Phase 1 where forensic examinations would be provided from Carmarthen for the whole of the region.
- The service will be holistic, providing a more complete forensic examination with health assessment to be undertaken in line with FFLM guidance and best practice standards.
- The service will have better links with local services such as sexual health and third sector.
- The service will be more likely to attract the specialist workforce required to run a safe and sustainable service.
- A critical mass of individuals will create more opportunities for the workforce to develop and retain necessary skills and competencies; and
- Greater opportunity for integration between sectors, including health, resulting in a more seamless service for the individual.

1.2.4 The Project is a tranche within this regional hub and spoke model of care for South-west Wales, which in turn is part of the national WSAS programme, which is being delivered through the structure shown in the graphic below:

Figure 2: WSAS Programme Chart



1.2.5 The WSAS programme is being hosted by NHS Wales Executive and delivered jointly with the police. It is governed by the WSAS Programme Board.

- 1.2.6** The South-west Wales Service Delivery Group, which is chaired by the Interim General Manager for Women and Children’s Directorate of the University Health Board, is a multiagency group and leads the delivery of the WSAS programme across South-west Wales.
- 1.2.7** The Aberystwyth SARC Project Group (described in the Management Case) is responsible for delivering the Project.
- 1.2.8** SARC’s must meet the quality standards of ISO 15189:2022 – Medical laboratories: Requirements for quality and competence, which replaces the 2016 and 2012 standards. It is applicable to medical laboratories in developing their management systems and assessing their competence. It is also applicable for confirming or recognising the competence of medical laboratories by laboratory users, regulatory authorities, and accreditation bodies; and to point-of-care testing (POCT).
- 1.2.9** The Project is being developed in alignment with:
- The Well-being of Future Generations (Wales) Act.
 - A Healthier Wales: long term health and care strategy.
 - The national WSAS Programme.
 - The Hywel Dda University Health Board ‘A Healthier Mid and West Wales: Our Future Generations living well’ (AHMWW) strategy.
 - The Ceredigion Local Well-being Plan 2023-28.
- 1.2.10** The design of the facility is also informed by:
- The Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV) Strategy (Wales) 2022-2026, a strategy to tackle violence against women, domestic abuse and sexual violence in Wales. The University Health Board, DPP and Powys Teaching Health Board form part of the Mid and West Wales VAWDASV Partnership. The Project will support delivery of the Partnership’s objective to improve responses to those experiencing violence and ensure equal access to appropriate support services.
 - The Victims’ Strategy 2018, a strategy which aims to develop a systematic process that places the needs of victims of crime at the heart of policing in South Wales, providing support through their engagement with the Criminal Justice System. The Project will support the Victims’ Strategy by ensuring the reporting process for and the design of the centre itself are sensitive to the victims and their families and/or support system.
 - The Race Equality Action Plan, which aims to achieve a Wales that is anti-racist by 2030 and sets out measures to tackle structural racial inequalities in order to make meaningful and measurable changes to the lives of Black, Asian and Minority Ethnic people.
 - Together for Mental Health, WG’s 10 year cross-governmental strategy to improve mental health and well-being across all ages; and Together for Children and Young People, focused on improving emotional wellbeing and mental health services for children and young people in Wales. The Project will support these strategies by providing counselling and therapy rooms as part of the holistic healing for victims.

1.3 Case for change

1.3.1 Introduction- This section sets out- i) Existing Arrangements and ii) Business Needs.

- 1.3.1.1 Existing Arrangements:** As previously described, SARC services in Aberystwyth are currently provided from the Bow Street SARC, a facility which occupies rooms above a residential home owned by Ceredigion County Council at Cartref Tregerddan, Bow Street, Aberystwyth. Notwithstanding recent investment to make the Bow Street facility compliant with the requirements of ISO 15189:2022, the WSAS Programme Board has determined that the facility is not fit for purpose. In addition, on 4th April 2023, Ceredigion County Council served notice to DPP that Bow Street must be vacated by 1st April 2025 (see Appendix 1). (Note: The current

project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress).

1.3.2 This section looks at existing arrangements under the headings of- ISO accreditation, Demand, and Meeting the needs of all service users.

1.3.2.1 ISO accreditation- In December 2022 the Bow Street SARC was refurbished to ISO 15189:2022 standards and was due to receive the accreditation award to reduce risks to the collection of admissible evidence until the Project is operational (which must occur before the Bow Street lease is terminated on 1st April 2025 (Note: the current project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress). The new facility must also meet the statutory deadline of October 2025 to be ISO compliant.

1.3.2.2 Demand- There is expected to be an increase in the number of cases referred to the Aberystwyth SARC. Table 1 below shows the number of acute and non-acute cases referred to the Aberystwyth Bow Street, Swansea, Carmarthen, and Newtown SARCs from 2018/19 to 2023/24. Table 2 then shows the resulting annual average case load at each of the SARCs. Based on the data, the observed trend indicates an increase in total number of acute cases from 158 in 2018/19 to 199 in 2023/24 (with the maximum cases seen during COVID in 2021/22). This data also shows that the number of acute cases referred in Aberystwyth has ranged between 9 and 17 per annum, with an average annual caseload of 13 (one per month). The number of non-acute cases has ranged between 9 and 13 per annum, with an average annual caseload of 20 (1.63 per month).

Table 1 – Number of individuals attending SARCs by assault type

(Source: NHS Wales Collaborative, April 2024)

	2018/19			2019/20			2020/21			2021/22			2022/23			2023/24		
	Acute	Non-Acute	Historic	Acute	Non-Acute	Historic	Acute	Non-Acute	Historic	Acute	Non-Acute	Historic	Acute	Non-Acute	Historic	Acute	Non-Acute	Historic
Aberystwyth	13	16	26	9	14	13	10	9	18	17	26	40	12	34	39	15	21	23
Carmarthen	58	77	112	65	88	133	37	80	130	81	72	185	86	106	227	70	101	152
Newtown	18	23	42	32	37	46	11	22	34	31	46	89	33	38	46	16	32	32
Swansea	69	50	152	86	68	92	62	74	140	132	123	231	113	104	190	98	126	192
Total	158	166	332	192	207	284	120	185	322	261	267	545	244	282	502	199	280	398

Note:

Acute cases refer to those cases that have occurred within the last 7 days, and that require forensic examination.

Non- acute cases refer to those cases that have occurred outside of the 7 days acute forensic window, and within the past 5 years.

Historic cases refer to those that have occurred over 5 years ago.

Table 2- Annual average number of cases at SARC

	Annual Average		
	Acute	Non-Acute	Historic
Aberystwyth	13	20	27
Carmarthen	66	87	157
Newtown	24	33	48
Swansea	93	91	166
Total	196	231	397

1.3.2.3 Meeting the needs of service users- The WSAS Programme Board identified concerns that the Bow Street SARC was not fit for purpose were it to become the main 'hub' for the region (please see letter from the Chair of the WSAS Board attached at Appendix 2), including:

- The facility is in a housing estate at the back of a care home. Access is via a set of concrete steps and through a small door, meaning that the site is not accessible to those with a disability and cannot cater to any disabled patients or their families, and may be off-putting to other service users.
- Space limitations mean that the facility is unable to support the holistic needs of victims and their families.
- The facility shares toilet facilities with the care home, which puts patients' anonymity at risk.
- The facility is housed within a residential care home, which could not be accessed due to restrictions during the pandemic. As a result, the facility had to be shut down and was unable to provide any services. There is a risk that this could be repeated in a future pandemic situation.
- The site has no room for expansion and is therefore not conducive to future proofing for developments in remote technologies, such as live links to court for vulnerable witnesses and / or provision of additional services e.g., counselling.

1.3.3 Business Needs: The business need for the Aberystwyth SARC Project is to procure a new SARC facility which will be capable of 4 main objectives:

1.3.3.1 Securing ISO 15189:2022 accreditation

1.3.3.1.1 As discussed in the existing arrangements section, although the Bow Street SARC has been refurbished to a standard which allows for ISO15189:2022 accreditation, Ceredigion County Council has terminated the lease stating that the premises must be vacated by 1st April 2025 (note: the current project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress). There is therefore a business need to find alternative premises accredited to ISO15189:2022 standard to facilitate forensic evidence collection and admissibility in Court.

1.3.3.2 Meeting acute demand in Aberystwyth (redistribution from Newton and Carmarthen)

- 1.3.3.2.1 Under the new hub and spoke model, acute cases currently referred to Newtown or Carmarthen will be referred to either the Aberystwyth or Swansea "hubs". The percentage of cases redistributed to Aberystwyth and Swansea from Carmarthen and Newtown are assumed to be roughly the same as was witnessed in 2021/22.
- 1.3.3.2.2 Acute demand- Table 3 below shows that based on the percentage of cases redistributed to Aberystwyth in 2021/22- i.e. 6% of acute referrals from Carmarthen, and 87% of acute referrals from Newtown, the percentage redirected would mean that the annual acute caseload in Aberystwyth would increase by 166% to 33 per annum, from the 15 cases per annum seen in 2023/24. To estimate the projections for 2024/25, this has been rounded up to the nearest 10, resulting in 40 annual cases at Aberystwyth in total.
- 1.3.3.2.3 Non acute demand- The 21 non acute cases seen in Aberystwyth in 2023/ 24 have also been rounded up to the nearest 10, projecting an estimated 30 annual non acute cases in Aberystwyth accounting for redistribution from Newtown and Carmarthen.
- 1.3.3.2.4 As stated above, Table 3 shows the redistribution of acute cases to Aberystwyth due to closure of Carmarthen and Newton, and Table 4 shows the existing caseload in 2023/24 compared to the projected case load in 2024/25, considering the closure of Carmarthen and Newtown.

Table 3- Redistribution of acute demand from Carmarthen and Newtown to Swansea and Aberystwyth
(Source: NHS Wales Collaborative, April 2024)

Description	No. of Cases in 2023/24	% redistributed*
Total no. of acute referrals to Carmarthen	70	
% to go to Swansea	62	88%
% to go to Aberystwyth	4	6%
Total no. of acute referrals to Newtown	16	
% to go to Swansea	0	3%
% to go to Aberystwyth	14	87%
Total no. of acute referrals to Aberystwyth in 2023/24	15	
Potential total with clients from Carmarthen and Newtown added	= 15 + 4 + 14 = 33 (rounded to nearest 10 for projections in 24/25)	

Table 4 – Projected demand (2024/25) following closure of Carmarthen and Newtown to acute cases.
(Source: NHS Wales Collaborative, April 2024)

	2023/24			2024/25		
	Acute	Non- acute	Historic	Acute	Non- acute	Historic
Aberystwyth	15	21	23	40	30	30
Carmarthen	70	101	152	-	110	160
Newtown	16	32	31	-	40	40
Swansea	98	126	192	160	130	200
Total	199	280	398	200	310	430

1.3.3.3 Meeting growth in demand due to increased incidence and/or reporting of sexual assault

- 1.3.3.3.1 It is difficult to predict demand going forward due to differences between anticipated prevalence and current activity, however the Project will allow us to deal with future growth whereas the current provision is insufficient and unavailable beyond April 2025. A letter

confirming the above position on projected demand from the Welsh Sexual Assault Services Programme Director is attached at Appendix 4.

- 1.3.3.3.2 In addition to the increased cases due to redistribution, based on the following analysis, the Project is also likely to experience growth in acute demand due to increased incidence and/or reporting of sexual assault:
 - 1.3.3.3.3 The Crime Survey for England and Wales (CSEW) reported in March 2023 that the volume of sexual offences recorded by the police has been increasing over the last decade, although the numbers remain well below the number of victims estimated by the survey: the latest figures for the year ending March 2022 show an increase of 31%, compared with the previous year.² In relation to the 50 predicted acute attendances to the new Aberystwyth site, if there was an increase of 31% this would equate to an extra 15.5 acute attendances in a year.
 - 1.3.3.3.4 In addition to this it is estimated by the CSEW that 1.1 million adults aged 16 years and over across England and Wales experienced sexual assault in the year ending March 2022 (798,000 women and 275,000 men). This equates to a prevalence rate of approximately 2.3% of adults (3.3% women and 1.2% men). It also estimates that approximately 16.6% of adults aged 16 years and over (7.9 million) had experienced sexual assault (including attempts) since the age of 16 years; 1.9 million were a victim of rape (7.7% women and 0.2% men).
 - 1.3.3.3.5 Based on the statistics from the CSEW, the estimate of sexual assault incidence for the area the Project will cover is approximately 2,700 per year, and for the current Aberystwyth site (the Bow Street SARC), this estimate would be 950 per year.
 - 1.3.3.3.6 In addition to this, demand can also be affected by the impact of high-profile incidents, media coverage, and campaigns on people's willingness to report both recent and historical incidents to the police are likely to result in annual variations in the number of offences recorded by the police.
- 1.3.3.4 Meeting the needs of all service users-** The Programme Group has identified the need for a dedicated facility to:
- 1.3.3.4.1 Provide access 24 hour 365 days of the year to acute forensic assessments for victims of sexual assault within Dyfed Powys region.
 - 1.3.3.4.2 House a full multi-agency SARC suite including a forensic examination room delivered to ISO 15189:2022 accreditation standards, police interview and recording rooms, evidence storage facilities, shower facilities, family waiting area and clinical consultation room. A complete Schedule of Accommodation is available as part of Appendix 6 and Table 12 in this document.
 - 1.3.3.4.3 Provide IT that supports the safe and confidential movement of information electronically between health and police or third sector and the delivery of remote court access.
 - 1.3.3.4.4 Provide space within which holistic care can be delivered, including Independent Sexual Violence Adviser (ISVA) support, crisis workers and counsellors for all victims of sexual assault, including children, and their families.

1.4 Spending Objectives

1.4.1 The Spending Objectives for the Project are shown in Table 5 below. All are Specific, Measurable, Achievable, Realistic and Time-bound:

Table 5 – Spending Objectives

No.	Driver	Spending Objective	Specific	Measurable	Achievable	Realistic	Time-bound
1.	Effectiveness	To deliver an acute and non-acute Aberystwyth SARC facility which meets ISO standards from which DPP, the University Health Board and the third sector can deliver their respective services.	✓	✓	✓	✓	✓
2.	Efficiency	To deliver an acute and non-acute Aberystwyth SARC facility that meets the standards required for ISO 15189:2022 to meet an anticipated increase in acute demand of 166% resulting from the consolidation of services from Newtown and Carmarthen.	✓	✓	✓	✓	✓
3.	Economy	To deliver an acute and non-acute Aberystwyth SARC facility that is compliant with accredited standards to allow for the consolidation of services and the rationalisation of estate.	✓	✓	✓	✓	✓
4.	Compliance	To deliver an acute and non-acute Aberystwyth SARC facility which meets the standards required for ISO 15189:2022 and complies with the requirements of the Equality Act on disabled access.	✓	✓	✓	✓	✓
5.	Replacement	To replace the current acute and non-acute Aberystwyth SARC facilities to provide business continuity and prevent the loss of essential SARC services serving Aberystwyth and surrounding areas.	✓	✓	✓	✓	✓

1.5 Main Benefits

1.5.1 Anticipated benefits of the Project are shown in Table 6 below. Benefits have been classified by Beneficiary, Type and Class, as follows:

- Cash Releasing Benefits such as reductions in costs (CRB).
- Non-Cash Releasing Benefits such as staff time saved (Non-CRB).
- Quantifiable Benefits such as achievement of targets (QB).
- Qualitative Benefits such as improved staff morale (Qual).

Table 6: Main benefits

Benefit	Expected outcome	Measures	Beneficiary	Benefit class
Driver – Effectiveness				
Spending Objective 1: To deliver an acute and non-acute Aberystwyth SARC facility compliant with ISO accredited standards from which DPP, the University Health Board and the third sector can deliver their respective services.				
1.	Contribution to achievement of the objectives of the national SARC programme.	Improved access – 24/7, 365 days of the year – to acute specialist adult health and forensic assessments; and ongoing therapeutic support for victims of sexual assault within Dyfed Powys region, as well as south Gwynedd.	National SARC performance measures being introduced in April 2023. National PREMS/PROMS	Direct – service users, HDUHB, DPP, third sector Non-CRB QB Qual
Driver – Efficiency				
Spending Objective 2: To deliver an acute and non-acute Aberystwyth SARC facility that meets the standards required for ISO 15189:2022 to meet an anticipated increase in acute demand of 166% resulting from the consolidation of services from Newtown and Carmarthen.				
2.	Ability to support acute and non-acute cases presenting in Dyfed Powys region, as well as south Gwynedd.	Enhanced integration of clinical, forensic, social and therapeutic services across the region.	National SARC performance measures being introduced in April 2023. National PREMS/PROMS. ISO accreditation. Criminal Justice data.	Direct – service users, HDUHB, DPP, third sector. Non-CRB QB Qual
Driver – Economy				
Spending Objective 3: To deliver an acute and non-acute Aberystwyth SARC facility that is compliant with accredited standards to allow for the consolidation of services and the rationalisation of estate.				
3.	Rationalisation of Estate.	Outcomes related to cost efficiency.	ISO accreditation for one facility and not three. Part of Integrated Care Centre.	Direct – DPP, third sector CRB
Driver – Compliance				
Spending Objective 4: To deliver an acute and non-acute Aberystwyth SARC facility which meets the standards required for ISO 15189:2022 and complies with the requirements of the Equality Act on disabled access.				
4.	An ISO-compliant SARC.	Improved quality of evidence collected and in doing so mitigate potential defence challenges and loss of prosecutions in court.	Audit ratings and quality measures.	Direct – Patients, HDUHB, DPP, third sector Non-CRB QB Qual
Driver – Replacement				

Benefit	Expected outcome	Measures	Beneficiary	Benefit class	
Spending Objective 5: To replace the current acute and non-acute Aberystwyth SARC facilities to provide business continuity and prevent the loss of essential SARC services serving Aberystwyth and surrounding areas					
5.	Continuation of Business-as-Usual continuity for SARC services.	Continuation of BAU SARC Services.	National SARC performance measures being introduced in April 2023. National PREMS/PROMS	Direct – Patients, HDUHB, DPP, third sector	QB

1.6 Main Risks

1.6.1 Table 7 below shows the main business and service risks identified with the Project, and proposed mitigations against each. Risks are managed through the Aberystwyth SARC Project Group, and the approach to risk management is described in the Management Case.

Table 7 – Main risks

No.	Risk categories	Counter measures
Business risks retained by the Project's Partners (University Health Board, Local Authority, Dyfed Powys Police, third sector)		
1.	Reputational risk arising from failure to provide infrastructure that: <ul style="list-style-type: none"> Meet required timescales. Meets quality standards. Is sustainable. 	Technical capability of the Aberystwyth SARC project group. Support from and technical capability of wider WSAS programme. (note: the current project completion date is 26 May 2025, discussions with the provider of Bow Street facility to gain an extension from 1 st April 2025 are in progress)
2.	Non-compliance with ISO 15189 Accreditation Standards.	Technical capability of the Aberystwyth SARC project group and wider Wales Sexual Assault Services programme. Award of ISO 15189 Accreditation Standards. The WSAS Programme Board has procured specialist ISO accreditation resource for the new Aberystwyth and Swansea SARCs.
3.	Design does not meet regulatory standards.	Technical capability of the SARC Project Group and wider Wales Sexual Assault Services programme.
4.	Failure to secure capital funding in time and / or in entirety.	Engagement with WG.
5.	Capital and / or revenue costs are higher than projected.	Technical capability of the Aberystwyth SARC Project Group and wider Wales Sexual Assault Services programme. Engagement with WG. A risk allowance has been included in the capital estimates - 2% risk allowance under the main contract plus provisional sums + 15% planning contingency + 1% cost indices for late approval linked to Q3 to Q4 2024
6.	Delay in Approval leading to Tender Cost Increase	Risk contingency figure for cost indices associated with late approval for Q3 to Q4 included within Development Approval Cost Form
Service Risks (may be shared with the supply side)		
7.	Failure to achieve building regulations approvals.	Engagement with local authorities as required.
8.	Noise pollution during construction.	Noise reduction / abatement as detailed in tender specifications.
9.	Tendered price is higher than costs estimated in this BJC.	Estates team to follow the University Health Board's project approval process prior to tender for construction and engineering projects based on three key stages: Stage 1: Provisional cost estimate. Stage 2: Budget cost estimate. Stage 3: Pre-tender estimate.

No.	Risk categories	Counter measures
		University Health Board, Shared Services and WG will review and scrutinise the full Business Justification Case fully tendered costs.
10.	Risk associated with potential reduction in parking spaces, including disabled spaces, during construction.	Requirements detailed in tender specifications.

1.7 Constraints

1.7.1 Table 8 below shows the external conditions and parameters within which the Project must be delivered:

Table 8 – Constraints

Area	Constraint
Policy decisions	The Project is constrained by the scope and timescales of the national SARC programme.
Legal considerations	The Project is constrained by the need to reach an acceptable agreement with Ceredigion County Council as lessor.
Regulations	The new SARC must meet the quality standards of ISO 15189:2022 – Medical Laboratories: Requirements for Quality and Competence.
Timescales	The project must be delivered by 1st April 2025 following a termination of the lease by Ceredigion County Council (note: the current project completion date is 26 th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1 st April 2025 are in progress).
Affordability – Capital / Revenue	The space must be delivered within the affordability constraints shown in the Financial Case.
Quality of refurbishment	The SARC must be of sufficient quality to serve for a typical operational life of 20 years.

1.8 Dependencies

1.8.1 Table 9 below sets out the dependencies outside the scope of the Project upon which successful delivery is dependent.

Table 9 – Dependencies

Area	Dependency
Other Projects	Other projects in the SARC programme.
External factors	Lease / HoTs
Partner operations	Integrated working between LA, UHB, DPP and New Pathways
Legislation	The Project will be dependent on receiving accreditation under ISO 15189:2022 – Medical Laboratories: Requirements for Quality and Competence.
Approvals	The Project will be dependent on internal approvals from the University Health Board and the SARC Programme Board and external approvals from WG.
Availability of capital	The Project will be dependent on capital funding from WG. This could be vulnerable to inflation and / or competing priorities at a national level.
Supply market availability	The Project will be dependent on the capacity of the supplier market to meet the Project's requirements.

2 Economic Case

2.1 Critical Success Factors

2.1.1 The Critical Success Factors (CSFs) for the Project are shown in Table 10 below. They were developed by the Aberystwyth SARC Project Group described in the Management Case.

Table 10 – CSFs

No.	CSF	Description
1.	Strategic fit	The option meets the Spending Objective Drivers of Effectiveness, Efficiency, Economy, Compliance and Replacement.
2.	Business needs	The option will provide an ISO-compliant SARC facility which will meet projected demand and the needs of all service users.
3.	Value for Money (VfM)	The option will: <ul style="list-style-type: none"> • Provide a robust and sustainable solution. • Optimise costs and benefits. • Provide flexibility to meet future service needs.
4.	Supplier capacity and capability	The scope and timeline of the option are consistent with the capacity and capability of the supplier market.
5.	Affordability	The option is affordable from a capital and revenue perspective.
6.	Achievability	The option is deliverable, specific, measurable, realistic, and timely.

2.2 Options

2.2.1 The Aberystwyth SARC Project Group have identified three options which could feasibly meet the business needs and Spending Objectives described in the Strategic Case, namely:

- Option 1: The “do nothing: business as usual” option.
- Option 2: The development of the new SARC facility as part of the Aberystwyth Integrated Care Centre (AICC).
- Option 3: The development of the new SARC facility within the Canolfan Rheidol Ceredigion County Council Offices in Aberystwyth.

2.2.2 An assessment of the options against the CSFs is shown in Table 11 below.

Table 11 – Summary of options appraisals

Option 1	Do Nothing: Business As usual (BAU)
Description	Services would continue to be delivered at the Bow Street SARC, recently updated as described in the Strategic Case. There would be no further capital investment. Revenue costs would continue to be funded from existing sources and SARC services would continue at current levels.
Net Costs	Nil
Advantages	CSF 5 - Affordability The Bow Street SARC has already benefited from a refurbishment to ISO 15189:2022 standards, therefore no further investment would be required.
Disadvantages	CSF 1 - Strategic fit The option will not meet the Spending Objectives CSF 2 - Business needs The facility does not meet the business needs as it will no longer be available after 1 st April 2025 (note: the current project completion date is 26 th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1 st April 2025 are in progress)

	<p>CSF 3 – VfM</p> <p>The option does not deliver value for money as the property will need to be vacated by 1st April 2025 (note: the current project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress)</p> <p>CSF 4 - Supplier capacity and capability</p> <p>This is not relevant as the SARC refurbishment is completed.</p>
Conclusion	<p>The option is unachievable as it does not meet the needs of all service users and Ceredigion County Council has stated that the accommodation at Bow Street, Aberystwyth will not be available after 1st April 2025. (Note: the current project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress).</p> <p>Furthermore, the option does not enable the University Health Board to meet the Spending Objectives and CSFs for the reasons stated above.</p>
Option 2	Development of the new SARC facility as part of the Aberystwyth Integrated Care Centre (AICC)
Description	The SARC would be located within the proposed AICC.
Net Costs	Not known – a Strategic Outline Case (SOC) has not yet been developed for the AICC.
Advantages	<p>CSF 1 - Strategic fit</p> <p>The option would be capable in principle of meeting the Spending Objectives.</p> <p>CSF 3 - VfM</p> <p>Locating the SARC within the AICC and integrating its costs within the AICC budget could be economically efficient when compared with developing a separate SARC.</p> <p>CSF 5 - Affordability</p> <p>The option could create economies of scale which could make it attractive from an affordability perspective.</p>
Disadvantages	<p>CSF 1 - Strategic fit</p> <p>Because the Bow Street SARC must be vacated by 1st April 2025, (note: the current project completion date is 26 May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress). the option is not capable of meeting the Replacement Spending Objective.</p> <p>CSF 2 - Business needs</p> <p>As the AICC has not yet reached SOC stage, it is not possible to be certain as to the timescale within which the new SARC facility will be delivered. Services will therefore need to continue to be delivered from the Bow Street SARC, however these premises must be vacated by 1 April 2025 (note: the current project completion date is 26 May 2025, discussions with the provider of Bow Street facility to gain an extension from 1 April 2025 are in progress).. The option is therefore not capable of meeting the business needs, meeting acute demand in Aberystwyth consolidated from Newtown and Carmarthen; and meeting growth in demand due to increased incidence and/or reporting of sexual assault.</p> <p>CSF 4 - Supplier capacity and capability</p> <p>This will need to be assessed within the context of the development of the whole AICC. This cannot be undertaken until a SOC for the AICC is developed.</p> <p>CSF 5 – Affordability</p> <p>Funding for the AICC has not yet been agreed, therefore it is not possible to assess the affordability of the option.</p> <p>CSF 6 - Achievability</p> <p>It will not be possible to achieve the option within the timescales required for the Project.</p>
Conclusion	<p>Although this option may comply with the requirement to make a new ISO 15189:2022-accredited SARC facility available, the timescale within which it can be delivered is uncertain. This would mean that services would have to continue to be delivered from the Bow Street SARC, which cannot meet the needs of all service users and will no longer be available after 1st April 2025. (Note: the current project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress).</p>
Option 3 Preferred Option	Development of the new SARC facility within the Canolfan Rheidol Ceredigion County Council Offices in Aberystwyth

Description	The University Health Board will sign a lease of twenty years with Ceredigion County Council for space on the ground and first floors of the Canolfan Rheidol building, within which it will refurbish the premises to ISO accreditation standards. The site selection process for the Canolfan Rheidol building is further detailed in 2.2.3 below. (Heads of Terms have been finalised and can be found in Appendix 3)
Net Costs	The Forecast Project Out-turn Cost of the Project is £3,353,761 (post-VAT recovery). This is based on tender cost estimates.
Advantages	<p>CSF 1 - Strategic fit</p> <p>The option will meet the Spending Objective Drivers as follows:</p> <p>Effectiveness: The option will deliver an acute and non-acute Aberystwyth SARC facility compliant with ISO accredited standards.</p> <p>Efficiency: The new SARC will be capable of meeting an anticipated in acute demand of 166% resulting from the consolidation of services from Newtown and Carmarthen.</p> <p>Economy: By enabling the consolidation of acute demand from Carmarthen and Newtown, the option will allow for the consolidation of services; by providing an accredited replacement for the Bow Street SARC which better meets the needs of service users, it will meet WG policy around estate rationalisation.</p> <p>Compliance: The Project will meet the standards required for ISO 15189:2022 and comply with the requirements of the Equality Act on disabled access.</p> <p>Replacement: The Project will enable the current acute and non-acute Aberystwyth SARC facilities to be replaced before the vacation of the Bow Street SARC by 1st April 2025, (note: the current project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress). which will provide business continuity.</p> <p>CSF 2 - Business needs</p> <p>The option will provide a solutions for the business needs identified in:</p> <ul style="list-style-type: none"> ● Meeting demand in Aberystwyth consolidated from Newtown and Carmarthen. ● Meeting growth in demand due to increased incidence and/or reporting of sexual assault. ● Meeting the needs of all service users (including disabled access, better car parking provision, etc). ● Providing an ISO-compliant SARC facility. <p>CSF 3 - VfM</p> <p>The option will</p> <ul style="list-style-type: none"> ● Provide a robust and sustainable solution: the new facility will have a design life of twenty years. ● Optimise costs and benefits: as a modern facility with superior access when compared with the Bow Street SARC, the Project will offer: <ul style="list-style-type: none"> ○ Improved access to acute and non-acute services. ○ Enhanced integration of clinical, forensic, social and therapeutic services. ○ Improved quality of evidence collected. ○ Continuation of BAU SARC Services. ● Provide flexibility to meet future service needs – the Project will provide a larger space than the Bow Street SARC within which future improvements will be possible; its location will also provide the possibility of future integration in the AICC. <p>CSF 4 - Supplier capacity and capability</p> <p>Suppliers will be procured utilising the OJEU compliant Swansea Bay and Hywel Dda University Hospitals Construction Framework – Agreement 4 (Lot 4), which is a multi-supplier framework between the Authority and Framework Suppliers for the provision of Construction works in respect of the Hywel Dda Region. This means that the suppliers have been qualified as carrying the appropriate skills, knowledge and experience to deliver the Project. Due to the value, scope of extent and specification requirements the Project is classed as intermediate scale (change of use from offices to clinical environment).</p> <p>CSF 5 - Affordability</p> <p>The capital costs are considered affordable by the University Health Board on the assumption these are fully funded through this business case, and no capital funding will be provided by DPP.</p> <p>The revenue costs will be subject to the Welsh Sexual Assault Services (WSAS) cost pooling arrangement, with the gross estimated annual revenue costs of approximately £132,762 of the facility being covered in full</p>

	<p>together by funds made available through the WSAS Programme as well as the residual budget allocated to SARC.</p> <p>CSF 6 - Achievability</p> <p>The Project is a small-scale refurbishment of existing office space with the County Council offices, and as such is easily achievable by the available contractors. The existing staff from the Bow Street facility will be transferred to the new facility, and no new staff need be hired, making the transition smooth and requiring no additional time resources to onboard or hire new staff.</p> <p>The national SARC Programme has procured specialist ISO accreditation resource who will scope the transition from the Bow Street SARC to the new Aberystwyth SARC for ISO accreditation to maintain services for victims and their families.</p>
Disadvantages	<p>CSF 2 - Business needs</p> <p>The premises are not owned by the University Health Board; therefore occupancy is on the conditions set out in the leases to be agreed with Ceredigion County Council for terms of twenty years. This carries some risk in comparison with a University Health Board-owned site to the achievement of the business needs.</p> <p>However, this risk is mitigated by the fact that the University Health Board and Ceredigion County Council are partners with a shared interest in providing SARC services to the population.</p>
Conclusion	<p>This option aligns with the Spending Objectives and CSFs, as demonstrated in the analysis above.</p> <p>There is some risk to the achievement of the business needs over the longer-term if Ceredigion County Council were to terminate one or both of the leases before the end of their twenty-year terms, however this risk is mitigated by the fact that the University Health Board and Ceredigion County Council are partners with a shared interest in providing SARC services to the population.</p> <p>The Aberystwyth SARC Project Group has therefore concluded that Option 3 is the only option which is realistically capable of providing SARC infrastructure to ISO 15189:2022-accredited standards in the required timeframe (Note: the current project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress) and therefore of mitigating the risk of prosecutions failing or not being possible because admissible evidence cannot be collected.</p>

2.2.3 Site selection for Option 3 – Preferred Option.

- 2.2.3.1 To locate a new facility, the Aberystwyth SARC Project Group undertook an extensive assessment of site options in Aberystwyth. These options were discounted largely due to a mismatch in the timescales of the Project, and more specifically the site restrictions that would not be suitable for SARC, including- lack of car parking, change of use planning, and insufficient area.
- 2.2.3.2 One such potential option was the Rheidol Block on the Llanbadarn Campus. However, this option was discounted as the site possessed several disadvantages, primarily due to the significant investment that would be required to bring it up to standards, notwithstanding the removal of asbestos present on site. In addition, the site was located away from the city centre and within an existing campus, making it less accessible. Moreover, the Rheidol Block could only be considered on the basis of a sale and was not available to lease. Overall, this site option could not be taken forward as it would not meet the timescales for the project, and alternatives were needed.
- 2.2.3.3 The Aberystwyth SARC Project Group then considered the Canolfan Rheidol site at Aberystwyth (see Figure 3), which was initially assessed as part of the AICC Project This site possessed several advantages for the new SARC, including:
- It is located close to the DPP, at the town centre, making it accessible in the case of incidents as well as promoting collaboration across DPP, the Health Board and New Pathways,
 - It would be located within the Local Authority building for therapy services,
 - It meets the WG Policy around estate rationalisation (see attached letter from WG in Appendix 7), which includes an ambition to share accommodation with other NHS bodies and the wider public sector, and
 - Several site-specific benefits including quality of the building, car parking availability and adaptability of the design.

Figure 3: Canolfan Rheidol site location map



2.3 Recommended option

- 2.3.1** Based on the appraisal above, Option 3 is the Recommended Option. The Financial Annex showing the financial appraisal of Option 3 is attached at Appendix 5.

3 Commercial Case

3.1 Introduction

3.1.1 This Commercial Case describes:

- The outputs to be procured.
- The route for procuring the outputs.
- Payment terms.
- How the procurements will be contracted.
- Legal and personnel implications of the Recommended Option.

3.2 Outputs to be procured

- 3.2.1** The Developed Design has been informed by the demand profile described in the Strategic Case, with input from the Aberystwyth SARC Project Group (described in the Management Case).
- 3.2.2** The design of the Project (described in detail in the Commercial Case) will mean that Aberystwyth will have one acute facility for collection of forensic evidence and two suites for collecting recorded evidence at any one time with the capability to support remote court presence.³
- 3.2.3** In relation to the first-floor non-acute accommodation, each of the support rooms (for counselling / Independent Sexual Violence Adviser (ISVA) support) could be in use at the same time as they will be soundproofed. There are three rooms, so three clients could be in session simultaneously. Additionally, there are two meeting rooms which have multiple uses including training or larger group support work.
- 3.2.4** The facility will also comply with the requirements of the Equality Act with regards to disabled access.
- 3.2.5** The Schedules of Accommodation for the ground and first floors are shown on pages 6 and 8 of Appendix 6 and are summarised in Table 12 below:

Table 12: Schedule of Accommodation summary

Room	Description
Ground floor	
Reception	Admin will be based there to meet and greet clients and visitors.
Waiting room	A space for clients to wait for their appointment.
Monitor rooms x 2	Police will be based in these rooms to monitor the Achieving Best Evidence (ABE) interview.
Interview rooms x 2	Clients will provide their Evidence in Chief from these rooms in the form of an Achieving Best Evidence interview. One room will have dual purpose and be the RES (Remote Evidence Site) space too.
Dirty utility	A space to store clinical waste prior to collection following an examination. Cleaning equipment to be stored here.
Clean corridor	Sits within the forensic space which will be accessed controlled. Only in use during a forensic medical examination. The corridor will have to be forensically de-contaminated after each use.
Examination waiting room	A forensic space for the client to be taken to ahead of the examination.

³ See 'Achieving Best Evidence' and use of recording interviews <https://www.gov.uk/government/publications/achieving-best-evidence-in-criminal-proceedings>

Examination room	Forensically clean room that is accessed controlled. Only used to carry out forensic medical examinations.
Patient change	A space for the client to change in.
Cons' store	An access-controlled room where all of the forensic modules will be stored.
PPE staff change	A space for staff to change into their PPE before entering the forensic examination room.
Evidence room	This will hold the forensic, fridge, freezer and dry stores following self-referral (non-police reported) forensic examinations.
General	Staff office space, storeroom, staff break-out area, staff lockers and shower, WCs, stairwell giving access to the first floor, escape corridor and safe exit, corridor, IT hub, services plant area.
	The design also includes an internal access / entrance point to the facility, which will be a controlled internal entrance point via an access control system linked to the reception with a further security door added to the circulation.
First floor	
Meeting room	One to one support sessions will take place in this room, with the client and ISVA. A space for advocacy and support needs to be met.
Counselling rooms x 3	One to one counselling sessions will take place in these rooms, with the client and the counsellor.
Waiting area	For clients and carers to wait before and during sessions.
General	Open plan office area, corridor and tea point, stairwell

3.2.6 The Forecast Project Out-turn Cost of the Project is £3,353,761. A Development Approval Cost Form setting out the outputs to be procured and their estimated costs is provided at Appendix 8, and these are summarised in Table 14 of the Financial Case (please note that the table may contain rounding effects). As stated in the Executive Summary, the Forecast Project Out-turn Cost is based on tender cost estimates.

3.2.7 Procurement route: Introduction and underlying principles

3.2.7.1 The procurement route for all goods, services and works pertaining to the Aberystwyth SARC will comply with Hywel Dda Standing Orders and Standing Financial Instructions and ensure due regard to statutory requirements (including Public Contract Regulations), WG and central government policy and Audit Commission guidelines are followed.

3.2.7.2 The procurement process will strive to:

- Achieve VfM on behalf of NHS Wales, with VfM defined as the optimum combination of whole-life cost and quality (or fitness for purpose) to meet the user's requirement. Depending on the nature of the contract, whole-life cost may include implementation costs, ongoing operating costs, training, and end-of-life disposal.
- Ensure that all suppliers compete on a fair and equal basis.
- Ensure compliance and probity.
- Ensure that all equipment and consumable products purchased are of appropriate specification for their intended purpose.
- Ensure that key processes and procedures are in place to ensure the right quality, price, source, quantity and timing are achieved.
- Monitor and manage contract performance to ensure the contract is being delivered as specified.

3.2.7.3 All contracts will be awarded based on the most economically advantageous tender (MEAT), providing an opportunity to balance the quality of the goods, services and works being procured against price and to frame specifications in a way which encourages innovation rather than defining the solution. Contract Award will be in-line with Section 10 of the NHS Wales Infrastructure Investment Guidance. HDUHB, intend to establish a single Call-Off Contract via NHS Wales Shared Services Partnership's ("NWSSP") Construction Framework. Call-off Contract will be actioned by the Design Team, utilising standard JCT contract templates (Intermediate Form of Contract & Agreements in place by Legal Team - Bevan

- Brittan). The framework is structured by awarding contracts on a rotational basis. The Call-Off option of direct award is available subject to supplier being next on rotation.
- 3.2.7.4 This multi-supplier framework agreement covers the provision of qualified construction contractors to undertake various packages of minor/intermediate and major works which meets HBUHB’s requirements. All suppliers have been added to the framework following a robust and compliant tendering process enabling the inclusion of suppliers both willing and able to provide customers with the construction related works required to meet the Health Board’s strategic objective.
- 3.2.7.5 The professional consultants that have been appointed thus far have also been sighted of the NHS Net Zero Building Standard, which directs the development of sustainable, resilient, and energy-efficient buildings that meet the needs of patients now and in the future. The NHS Building Standard document also further provides guidance on the design and construction of energy efficient, low carbon footprint buildings, and provides a whole-life carbon compliance tool to help ensure that the buildings meet these standards.
- 3.2.7.6 The NHS NWSSP Construction Framework did have social value as part of the framework award and John Weaver (Contractors) Ltd have been asked scored questions as part of their tender submission. The purpose of the questions was to allow John Weaver (Contractors) Ltd the opportunity to demonstrate its commitment to support HDUHB in meeting its obligations under the Well-being of Future Generations (Wales) Act 2015 (“WCFG”), strengthening local supply chains in Wales, and reducing carbon to support the NHS becoming net zero carbon by 2030.
- 3.2.7.7 The new facility in Aberystwyth is designed at a clinical grade and sensitive to the services it will provide. The design has been drafted and modelled using Autodesk’s REVIT architectural package. This BIM software can aid decarbonisation by reducing the carbon footprint of the construction industry by eliminating uncertainties or interpretation errors at a design stage that lead to increased emissions and wasted materials through delays and rework. The software can also help to optimise the energy efficiency of the facility by simulating the energy performance of a building and identifying areas for improvement. This can help to reduce the carbon footprint of the site over its lifetime. The NS Building Standard document that is being used to guide the design of the facility also provides guidance on how to report on operational energy and carbon compliance.
- 3.2.7.8 A Project Programme Timeline is provided at Appendix 9. Key dates are shown in Table 13 below. Given that the existing Bow Street facility needs to be vacated by 1st April 2025 (note: the current project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress).

Table 13 – Key dates

(Note: the current project completion date is 26th May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress).

BJC HB Internal Scrutiny	April to May 2024
BJC WG Scrutiny	June to August 2024
Contractor Mobilisation	September 2024
Construction Period	September 2024 to April 2025
Commissioning Period	May 2025
Project Completion	May 2025
ISO Validation Period - Award	May 2025 to November 2025

3.2.8 Contracts

- 3.2.8.1 NHS Wales Shared Services Partnership's ("NWSSP") Construction Framework 4 West: Hywel Dda University Health Board - £200k to £2million is compliant with UK/EU procurement legislation. This framework included several potential providers who had achieved inclusion on the framework following a qualification process. The project was procured on a traditional single stage basis under the JCT Intermediate Building Contract 2016 for refurbishment of the premises located within the Canolfan Rheidol Ceredigion County Council Offices in Aberystwyth.
- 3.2.8.2 The tender was assessed in detail against subcontractor pricing, framework agreed uplift percentages and the works requirements utilising industry data to benchmark submitted rates to confirm acceptability.
- 3.2.8.3 Based on the value, scope of extent and specification requirements of the Project, it was classified as intermediate scale (change of use from offices to clinical environment). Typical intermediate work under Lot 4 comprises building alterations, remedial, enablement and refurbishment work within a health care setting, including:
- Office refurbishments.
 - Room adaptations.
 - Alterations and conversions.
 - External improvements.
 - Clinical areas.
 - Extensions.
 - New build.
 - Multi-phased working.
- 3.2.8.4 Specification and Build requirements were in line with the relevant Health Building Notes (HBN), Health Technical Memoranda (HTM), approved documents under the Building Regulations Act and specific National Building Specification (NBS), where deemed applicable. The NHS Wales Terms and Conditions for Contract for Goods or Services will form the basis of any contract entered with suppliers unless otherwise agreed.
- 3.2.8.5 The main contract standard form and option was JCT Intermediate Form of Contract.

3.2.9 Payment terms

- 3.2.9.1 Payment terms have been agreed in principle as per the tender documents, and the terms and conditions of the form of contract used.
- 3.2.9.2 The price and payment structure of the contract is based on a lump sum with monthly interim payments. Half of the retention is released upon practical completion the remainder is released when the rectification/defects liability period has expired and the relevant certification under the contract has been issued to confirm this.
- 3.2.9.3 The tender costs have been agreed for a period of 6 months, expiring on 29th September 2024. To account for any delays during the scrutiny or approvals from WG, a 1 month contingency has been included which aligns with the expiry of the standstill period.

3.3 Legal and Personnel Considerations

3.3.1 Leasehold agreement with Ceredigion County Council

- 3.3.1.1 The University Health Board has now finalised Heads of Terms of the leasehold agreement with Ceredigion County Council. The draft Heads of Terms of the lease are attached at Appendix 3, and key details are included in Table 14 below. The lease costs for the new

facility will be funded through the WSAS cost pooling arrangement and no funding is being sought from Welsh Government.

Table 14: Lease Terms

Landlord	Ceredigion County Council
Tenant	Hywel Dda University Health Board
Security of Tenure	Lease to be excluded from provisions of Part II Landlord & Tenant Act 1954
Term	20 years from date to be agreed
Rent (ground floor)	£21,250 per annum excluding VAT
Rent (first floor)	£12,270 per annum excluding VAT
Break Clause	Either party can break the lease (both ground and first floors) at the 10 and 15 years, with 6 mos. advance written notice. Additionally, the first floor has a tenant only break from the year 3, and every year thereafter, on providing a 12 months. advance written notice.
Other	Exclusive of all outgoing Cleaning/repairs and maintenance to be carried out by Ceredigion County Council and recharged to the tenant Apportioned building insurance to be recharged to the tenant Reinstatement at the end of occupation shall be carried out by the tenant to the satisfaction of the landlord, with the space to be returned bare shell. Fixtures and fittings may be retained with prior approval from the landlord

3.3.2 Planning permission

- 3.3.2.1 The University Health Board has engaged and appointed Asbri Planning Ltd as Planning consultants to prepare, submit and manage the change of use planning application. In addition, a Flood Consultant was appointed through Asbri Planning Ltd and prepared a Flood Consequence Assessment (FCA) as the Local Authority's building is situated within a flood zone.
- 3.3.2.2 As at the date of this BJC Asbri Planning Ltd has confirmed that they have received feedback from the Drainage and Highways Planning sections of Ceredigion County Council, and both have no objection to the proposal. In addition, it has been confirmed that a Sustainable Drainage Systems Approval is not required.
- 3.3.2.3 The Canolfan Rheidol site has received Planning Permission from Ceredigion County Council as on 14 September 2023, evidence of which is attached in Appendix 10. Further to this, discussions with the Local Authority Building Control are underway to include their specific requirements as part of the design for the pre-application for Building Regulations submissions.
- 3.3.2.4 Building Regulations:

Application for Building Control Approval with Full Plans was submitted to Ceredigion County Council on 10th April 2024, evidence of which is Attached in Appendix 11.

4 Financial Case

4.1 Capital Costs

4.1.1 The capital costs of the Recommended Option are shown in Table 15 below. The costs are also provided in the Financial Annex attached at Appendix 5. Please note that the table may include rounding effects.

Table 15 – Capital costs of the Recommended Option (£s)

Costs	Total	Y1	Y2	Y3	Y4	Y5	Notes
Capital		2023/ 24	2024/ 25	2025/ 26	2026/ 27	2027/ 28	
Works	2,156,731		1,844,914	311,818			Based on the VAT assessment conducted by an independent consultant, the VAT recovery is recommended at 20% under the Contracted-Out Service (“COS”) in relation to the refurbishment works.
Fees	414,462	69,501	281,019	63,942			100% VAT recovery is recommended on the professional fees including design, architecture, quantity surveying and cost advisory.
Non- works	480,026	4,449	133,911	341,666			
Equipment	120,000			120,000			0% VAT recovery has been recommended on the purchase of the equipment
Contingency	323,510		228,360	95,150			Contingency at 10%
Sub Total	3,494,729	73,950	2,488,204	932,576			
Less recoverable VAT	- 131,237	- 11,584	- 108,334	- 21,051			VAT assessment will be undertaken with VAT advisors on approval of funding. VAT recovery % to be notified to WG. Recovery shown here relates to VAT on fees, assumed to be fully recoverable.
Total Capital Costs	3,353,762	62,367	2,379,870	911,525	-	-	

4.1.2 To be clear, the University Health Board is seeking funding only for these capital costs element of the Project.

4.1.3 An adequate risk allowance has been built into the capital estimates. This includes a 2% risk allowance under the main contract plus provisional sums, a 15% planning contingency, and a 1% cost index for late approval linked to Q3 to Q4 2024.

4.1.4 The Financial Annex does not include an appraisal of option 1: in this case the “do nothing” option does not exist, as it is not possible for the existing Bow Street SARC to remain at its current premises after 1st April 2025 (see Appendix 1). Note that the current project completion date is 26th

May 2025, discussions with the provider of Bow Street facility to gain an extension from 1st April 2025 are in progress.

- 4.1.5** The Financial Annex also does not include an appraisal of option 2: it is not possible to cost option 2 as this will be done within the SOC for the AICC, the development of which has not yet commenced.

4.2 Operating Costs and Revenue

- 4.2.1** The operating costs and revenues of the Recommended Option are shown in Table 16 below.

Table 16 – Operating costs and revenues of the Recommended Option

Costs	Total	Y1	Y2	Y3	Y4	Y5	Notes
Operating							
Lease costs	163,200		40,800	40,800	40,800	40,800	Annual lease rent estimate on basis of discussion between HBUHB and Ceredigion County Council
Other premises costs	286,448			95,483	95,483	95,483	Costs based on estimates developed from information provided by Ceredigion County Council and reviewed by HDUHB Estates team. Annual cost comprises £83k of service charge + £10k of contingency + VAT to reflect uncertainty and inflation risk.
IT revenue costs	15,000			5,000	5,000	5,000	Estimate provided by HDUHB IT department.
Equipment costs	9,000			3,000	3,000	3,000	Estimate of service contract on colposcope.
Staff Costs	-	-	-	-	-	-	As the existing staff from Bow Street will be transferred to the new facility, no additional costs are being sought to fund the workforce for the new facility.
Total Operating Costs	473,648		40,800	144,283	144,283	144,283	
Revenue							
Recharge to WSAS	435,828		37,540	132,763	132,763	132,763	Recharge confirmed by WSAS.
Net Costs to University Health Board	3,391,583	62,366	2,383,130	923,045	11,520	11,520	

- 4.2.2** These costs are also shown in the Financial Annex attached at Appendix 5.

- 4.2.3** The operating costs shown in the Financial Annex include an assumption that the lease is payable to Ceredigion County Council during the works period, however this is to be negotiated therefore the University Health Board may not be liable for the lease until completion. This assumption has been included however to be prudent.
- 4.2.4** The University Health Board will pay a service charge to Ceredigion County Council, detailed in Appendix 12 Canolfan Rheidol Service Charge Costs.
- 4.2.5** The operating costs of the SARC will be recharged and subject to the Welsh Sexual Assault Services (WSAS) cost pooling arrangement (see letter attached in Appendix 13- WSAS Funding Confirmation) and recharged. Therefore, the gross estimated annual revenue costs of approximately £132,762 of the facility will therefore be funded through the cost pooling arrangement. The balance net costs to the Health Board of £11,520 will be covered by the residual budget that has been allocated for SARC.

4.3 Balance Sheet Treatment

- 4.3.1** The estimated depreciation charges are £125,217 per annum for the Recommended Option. It is assumed that additional depreciation charges will be funded by WG.
- 4.3.2** It is estimated that the Recommended Option will impact on the balance sheet of the University Health Board by increasing the value of fixed assets by £2,340,200.
- 4.3.3** The estimated impairment of this scheme on completion will be £1,013,561. The University Health Board is assuming that Annually Managed Expenditure (AME) impairment on completion of the new build will be funded as AME funding via WG.
- 4.3.4** The calculations underlying the above figures are attached at Appendix 15.
- 4.3.5** The lease of the building space will create a Right of Use asset on the University Health Board's balance sheet with an estimated value of £450,000 as a result of recently implemented accounting standard IFRS 16 "Accounting for Leases", with associated additional depreciation charges of approximately £23,000. There is a separate, scheduled process for requesting the necessary funding adjustments for IFRS 16 leases however, therefore these figures are not presented in this BJC.

5 Management Case

5.1 Project management and governance

- 5.1.1** The Project will be delivered in line with NHS Wales Infrastructure Investment Guidance and using established project management methodology.
- 5.1.2** The University Health Board set up the Aberystwyth SARC Project Group on 17 October 2022. The Aberystwyth SARC Project Group has the following responsibilities:
- To ensure the Project is aligned to the SARC programme of work.
 - To ensure that all activity is managed and monitored so that the safe, efficient, and effective delivery of SARC services in Aberystwyth is not compromised.
 - To ensure that all governance processes are in place, including the management of risks, issues, decisions, emerging opportunities, constraints, and dependencies.
 - To ensure appropriate escalation of any issues which may compromise patient care and / or the reputation of the University Health Board and DPP.
- 5.1.3** The Aberystwyth SARC Project Group's full Terms of Reference are provided at Appendix 16.
- 5.1.4** The Aberystwyth SARC Project Group is accountable to the SRO, being the Director of Strategy and Planning of the University Health Board; and the Project Director, being the Ceredigion County Director of the University Health Board. Their key responsibilities are outlined in Table 16 below.

Table 17 – SRO and Project Director roles and responsibilities

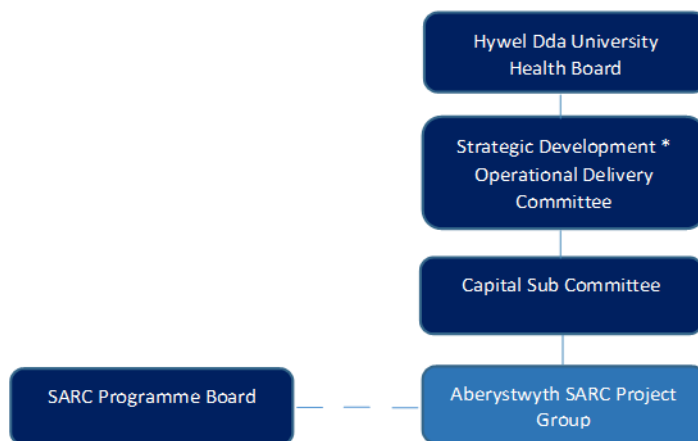
Role	Responsibility
<p>Senior Responsible Owner (SRO) Lee Davies, Director of Strategy and Planning</p>	<p>Defines the project objectives, ensuring that they are met to agreed time, cost and quality constraints.</p> <p>Represents the University Health Board in defining what is required and oversees the effectiveness of the Aberystwyth SARC Project Group, ensuring the appropriate project management structure is in place to deliver the project objectives and that the benefits are realised.</p> <p>Provides a broad specification of what the Project should deliver and ensures that any change in circumstance affecting the Project is evaluated and appropriate action taken.</p>
<p>Project Director Peter Skitt, Ceredigion County Director</p>	<p>Provides project management and direction.</p> <p>Acts as the lead reporting officer for Board, Committees and Sub-committees.</p> <p>Briefs key stakeholders on the Project's progress, benefits, risks and financial arrangements.</p> <p>Manages the University Health Board's interest in the Project, including coordination of and production of the brief for contractors.</p> <p>Selects and appoints consultants and contractors who will undertake the design and construction activity and ensures they deliver according to the Programme Plan.</p> <p>Acts as the point of contact in all dealings with contractors and other external organisations and provides all decisions and directions on behalf of the University Health Board.</p>

- 5.1.5** The Project Director will be supported by the Project Manager, whose role will be to work closely with the Project Director and the Aberystwyth SARC Project Group to enable the successful delivery of the Project and the Project's Management Case.

5.1.6 The Aberystwyth SARC Project Group’s SARC University Health Board lead is Lisa Humphrey, Interim General Manager for Women and Children’s Directorate, who chairs the SARC Southwest Wales Service Delivery Group. Joanna Williams, NHS Wales Collaborative, is the SARC Programme Lead. The University Health Board’s Clinical Lead for the Project is Helen Munro, Clinical Director for Clinical Effectiveness Hywel Dda University Health Board and Consultant in Sexual Health. We have undertaken an Equalities and Health Impact Assessment on the proposed scope of the project which provides an overview of how the project might have positive and/or negative impacts on different groups of people with ‘protected characteristics. The assessment is a living document and provide ongoing assurance that we will seek to minimise the risk of any discrimination against the groups of people with protected characteristics, that any negative consequences can be eliminated or minimised, and opportunities for promoting equality are maximised.

5.1.7 The Aberystwyth SARC Project Group is integrated within the University Health Board’s governance structure as shown in Figure 3 below.

Figure 3– Aberystwyth SARC Project Group Reporting Structure



5.1.8 As part of its principal duties, the Aberystwyth SARC Project Group’s highlight reports are submitted to the Capital Sub Committee on a bi-monthly basis, drawing specific attention to any significant matter under consideration by the sub-groups.

5.1.9 No external specialist advisers have been brought in to assist in the implementation of the Project (other than some external business case writing support).

5.2 Project assurance

5.2.1 To ensure the quality delivery and management of the project, an Integrated Assurance and Approval Plan (IAAP) has been included at Appendix 14 In addition, as the Project develops, monthly reporting will be made by the responsible sub-groups to the Aberystwyth SARC Project Group. Furthermore, the bimonthly reports provided to the Capital Sub-Committee will include a RAG status report.

5.2.2 The project reporting arrangements are summarised in Table 18 below.

Table 18 – Reporting requirements

Forum	Requirement	Format
Committees of the Board: Strategic Development and Operational Delivery Committee (SDODC) Audit and Risk Assurance Committee	Updates or approval requests from the SRO (when required)	Written or verbal.
Executive Team	Update or approval requests from the SRO (when required)	Written or verbal.
Capital Sub-Committee (CSC)	CSC highlight reports	Written or verbal
Project Group	<p>Monthly Standing Items:</p> <p>RIBA Stage development</p> <p>Project Finance</p> <p>Project timeline</p> <p>Project risk register</p> <p>Construction risk register</p> <p>Project Issues register.</p> <p>Project Decisions register</p>	Written or verbal

5.2.3 In addition to the above reporting, the Aberystwyth SARC Project Group may provide project status highlight reports to SDODC and the Board of the University Health Board as and when required.

5.3 Communication and Engagement

5.3.1 Communication and Engagement- Communication and Engagement for this project is driven by the SARC Programme. The University HB has assigned as part of the Aberystwyth SARC Project Group a Senior Communications Officer and Engagement Officer to lead on all project related communication and engagement activity to assist in the delivery of the project. A Communication and Engagement plan for the Aberystwyth SARC Project is in development with partners and will be available on request following sign off initially by the SARC Programme Board and subsequently the SARC Aberystwyth Project Group.

5.4 Benefits realisation

5.4.1 A benefits realisation exercise will form part of the Project Closure Report (PCR), a key product in the post implementation and evaluation process (further detailed below). This process will ensure that a robust analysis is carried out to understand whether the Project has achieved its Spending Objectives, through an assessment of the extent to which benefits have been realised.

5.4.2 The benefits realisation exercise will compare the current position at the time of the post-project evaluation against the Measures shown in Table 5: Main Benefits. 2023/24 data will be used as the baseline. The benefits owner is the SARC Programme Director in the NHS Wales Health Collaborative, which is part of the NHS Executive.

5.4.3 The PCR, its contents and process will be informed by best practice guidance from project methodologies such as PRINCE2 and Better Business Case guidance.

5.5 Project risks

5.5.1 Risk management

5.5.1.1 The risk management process, conducted through the Project Group to date, has comprised the following steps:

- Completion of a Risk Potential Assessment (RPA) – attached at Appendix 17.
- Establishment of a project risk register.
- Assigning / agreeing the ownership of risks.
- Actively managing the agreed actions to mitigate risk.

5.5.1.2 Each risk is assigned an owner responsible for its management. The Project Manager assists the owners of the risks by monitoring and overseeing their progress in managing the risk.

5.5.2 Risk Registers

5.5.2.1 There are two Risk Registers:

- The Project Risk Register – managed by the Project Manager; and
- The Construction Risk Register – this will be managed by the University Health Board's Estates Project Manager.

5.5.2.2 The risk registers enable all risks – either project or construction related – to be captured.

5.5.2.3 The Project Risk Register is a risks, issues and decisions register used to capture the organisational risks that sit outside of the construction programme, actions from the respective project groups, issues and key decisions made in the Project. It is a live document reviewed and updated on a daily basis, and then as required, by the Project Manager during the Project Group meetings. The Project Manager may also convene monthly meetings to review and update the risk register. During these meetings, new risks identified are added, and existing risks revisited to agree whether the risk factor should be altered and ensure that the agreed management action is being adequately undertaken by the risk owner.

5.5.2.4 The risks in the Project Risk Register are scored a factor of 1 to 5 in terms of likelihood and 1 to 5 for impact.

5.5.2.5 The Construction Risk Register will be similar to the Project Risk Register and created following the appointment of the Principal Contractor. All risks that the Principal Contractor can foresee at the outset of the Project will be included and updated at the monthly project review.

5.5.2.6 All risk actions in the Construction Risk Register will be labelled as shown in Table 19 below:

Table 19: Risk action labels

Avoid	Risks that can be managed out, usually by design.
Reduce / share	Risks that have a high probability of occurring, which have some latitude in limiting the impact. There are few instances in construction where risk can be shared.
Transfer	Risks that can be transferred onto insurers or against contingencies.

5.5.3 Risk reporting

- 5.5.3.1 The Project Risk Register forms an integral part of the monthly Project Group meetings. High risk items are included in the weekly Project Group agenda packs to ensure that mitigations are discussed and escalations can be agreed. The Executive Team as sponsoring group for the Project will be informed of risks which are of particular concern and / or do not have appropriate mitigation in place.

5.6 Contract management

- 5.6.1 Issues arising from the Construction Risk Register will be managed by University Health Board's Estates Project Manager and discussed with the Project Group will be assessed and appropriate contingency built into contracts with suppliers. Contingency has been included within the costs detailed in the Commercial Case.

5.7 Project evaluation

- 5.7.1 The Project will be evaluated by the Project Manager one-year post-implementation of the Recommended Option. This Post-Implementation Review will be undertaken to ensure that:
- The Project has achieved its Spending Objectives, mainly through assessing the extent to which benefits have been realised:
 - Lessons are captured so that they can be absorbed into the Capital Planning Project Framework to aid the delivery of future capital projects.
 - A formal project closure can take place, with any outstanding risks and remaining benefits to be tracked and monitored identified.
 - Any outstanding audit recommendations are considered, addressed, reported on and closed.

Appendices

No.	Title	Paragraph reference	Description
1.	Termination Letter from Ceredigion County Council	1.3.1.1, 4.1.3,	The letter confirms that vacation of premises currently occupied by the Bow Street SARC will be required by 1 st April 2025.
2.	Letter of support from the Chair of the Welsh Sexual Assault Service Programme Board	1.3.2.3	This letter confirms support for the Project by the WSAS Programme Board.
3.	Heads of Terms of lease	1.1.4, 3.3.1.1 Table 14 Lease Terms	Sets out the draft heads of terms of leasehold agreements between Ceredigion County Council as landlord and Hywel Dda University Health Board as tenant, with respect to the accommodation at the Canolfan Rheidol building in which the Project will be located.
4.	Letter from the Welsh Sexual Assault Services Programme Director on anticipated demand	1.3.3.3.1	This letter provides information on anticipated growth in demand for SARC services.
5.	Financial Annex	2.3.1, 4.1.1, 4.1.3, 4.2.2, 4.2.3	This appendix sets out projected capital and operating costs and revenues for the Recommended Option (Option 3).
6.	RIBA Stage 3 - Developed Design	1.3.3.4.2	Provides concept design and schedule of accommodation for the new Aberystwyth SARC.
7.	Estates Rationalisation Letter	2.2.3.3	Letter from Health Board stating the strategic plan to rationalise real estate portfolio
8.	Development Approval Cost Form	3.2.6	This document provides a Tender Cost Estimate for Capital Expenditure under the Recommended Option (Option 3). It has been used as the basis for the figures shown under Option 3 in the Financial Annex, and in the Financial Case.
9.	Programme Plan	3.2.7.7, 5.1.4 - Table 17 SRO and Project Director Roles and Responsibilities	This appendix sets out the current (draft) anticipated Project Programme for the Recommended Option (Option 3).
10.	Planning Permission	3.3.2.3	This document evidences the planning decision by Ceredigion County Council as granted for the Canolfan Rheidol Rhodfa Padarn site and approved for the use class change from B1 (offices) to D1 use (Health Centre) for localised areas on the floor plan.
11.	Full Plans Submission Form	3.3.2.4	Evidence of Full Plans submission
12.	Canolfan Rheidol Service Charge Costs	4.2.4	Details the service charges which will be payable to Ceredigion County Council as lessor.
13.	WSAS Funding Confirmation	4.2.5	Letter from WSAS Board confirming funding for operating costs through the cost pooling arrangement
14.	Integrated Assurance Approval Plan	5.2.1	This appendix sets out the assurance activities that will be undertaken at portfolio, programme, and project level, using pre-defined Gateway 0-5 and flexible Assurance Products (PAR, PVR, Critical Friend) as appropriate and proportionate.
15.	Estimated DEL and AME Charges	4.3.4	Departmental Expenditure Limits (DEL) and Annually Managed Expenditure (AME) Excel calculations
16.	Project Group Terms of Reference	5.1.3	This document provides current Terms of Reference for the Project Group described in the Management Case.
17.	Risk Potential Assessment	5.5.1.1	Risk analysis document to assess strategic risk of the Project

List of Tables

No.	Title
1.	Number of individuals attending SARC'S by Assault Type, 2018 – 2023
2.	Annual average number of cases at SARC
3.	Redistribution of demand from Carmarthen and Newtown to Swansea and Aberystwyth
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