

Health and safety group meeting 1st March 2016

MEETING	510 Health & Safety Group Meeting
DATE	Tuesday 1 st March 2016 10am
VENUE	Media Resource Centre, Llandrindod Wells

	Organisation	Name	Jobtitle
1.	Bron Afon Community Housing	Gemma Clark	Health & Safety Advisor
2.	Bron Afon Community Housing	Lisa Hewitt	Health & Safety Manager
3.	Cardiff Community Housing Association	Allan Brinkley	Contracts Manager
4.	Cartrefi Conwy	Richard Burrows	H&S Advisor
5.	Celtic Horizons	Mark Williams	Senior Operations Manager
6.	Community Housing Cymru	Shea Jones	Energy and Sustainability Officer
7.	CT Cantref	Hefin Jones	Property Services Officer
8.	CT Cantref	Lyndon Evans	
9.	Cynon Taf Community Housing Group	Kerry Hansford	Senior Technical Services Officer
10.	First Choice HA	Andrew Mouncher	Maintenance Manager
11.	Grwp Cynefin	Dewi Maelor Evans	Health and Safety Coordinator
12.	Grwp Gwalia Cyf	Nefyn Cardwell	Health and Safety Manager (interim)
13.	Health & Safety Executive	Paul Harvey	
14.	Hendre Group Ltd	Kevin Bateman	Health & Safety Co-ordinator
15.	Hendre Group Ltd	Leon Clifford	Health and Safety Manager
16.	Hugh James Solicitors	Leon Lloyd	Senior Associate - Insurance and Corporate Risk
17.	Linc-Cymru Housing Association	Adrian Brain	Health and Safety Manager

18.	Melin Homes	Ian Hall	Head of Health & Safety
19.	Melin Homes	Sean Twamley	Building Contracts Team Leader
20.	Merthyr Tydfil HA	Paul Berry	Senior Maintenance Operations Officer
21.	Merthyr Valleys Homes	Gary Colston	Property Services Manager
22.	Pembrokeshire Housing	Seamus Doyle	Health and Safety Manager
23.	RCT Homes	Andrew Davies	Health and Safety Compliance Officer
24.	Seren Group Ltd	Emma Pearson	Health & Safety Manager
25.	Taff HA Ltd	Jonathan Jones	Building Surveyor
26.	Taff HA Ltd	Phil Street	Building Surveyor
27.	Taff HA Ltd	Tom Price	Building Inspector/Clerk of Works
28.	Tai Calon Community Housing	Kieron Golding	Health & Safety Advisor
29.	Tai Calon Community Housing	Liz Rogers	Director of OD, HR & IT
30.	Vision Products	Simon Langston	
31.	Wales & West Housing	Sean Gough	Contracts Manager

Matters arising/action from the last meeting

Following a question raised in the last meeting, it can be confirmed that a North West Wales health and safety group exists, but this isn't run by CHC. It's a group that works under the Safety Groups UK banner and does a lot with the local IOSH Group and RoSPA. The administration is undertaken by Bangor Uni hence the location of most of their monthly talks. You can also access information on the following link:

<http://hsgroup.bangor.ac.uk/>

Hugh James has offered to put on an event for liability property teams/finance managers looking at the defence ability on claims, etc. This could be in the form of a mock trial. CHC is currently liaising with Hugh James.

CHC would like to see members make more use of its health and safety Yammer page. CHC's collective external Yammer network has now been live since July and members can post issues on the site, share and discuss good and bad practice, etc. CHC currently runs several external networks on Yammer which cover various policy areas including health and safety. These external networks are a great way to

continue discussions in between forum/network meetings and to share ideas and good practice. Information discussed in these external networks is only seen by members of the Yammer network and every network is administered by a member of CHC. All members will be invited to join. Once you are part of the external network, you can then choose which group/s within that network you want to listen to/contribute to. Please let shea-jones@chcymru.org.uk know if you'd like me to re-send your yammer invite, if you need any assistance with your account, or if any other staff members from your organisation need an invitation. We can send you a "Yammer – a 'how to' guide" to assist you in signing up

Paul Harvey, Health and safety executive

To view the presentation, please email Paul.Area11.Harvey@hse.gsi.gov.uk

Hand arm vibrations

The graph has gone up a lot-HAVS-health surveillance regime-Paul said well done as most HA's are implementing schemes but some aren't (particularly those who didn't attend this health and safety meeting today)

Paul noted some HA's are doing health surveillance but aren't managing/ implementing schemes properly-they are just sitting on a shelf.

Some HA's have really good practice- Deal with legacy cases.

Action: those with best practice with Hand arm vibrations to present at a future CHC meeting. Ask Paul.Area11.Harvey@hse.gsi.gov.uk to identify those with the best practice

HSE are looking at those who haven't reported anything. What are you doing to manage hand arm vibration risk?

Category 1: those who haven't submitted any policies and procedures.

Category 2: those who have submitted policies and procedures but are not implementing properly. Those who submitted and are implementing policies and procedures -HSE do nothing way

Enforcement management model-takes HSE through process-consider prosecution? For HAVS. Prosecution if no intention to put actions in place

Please see the slides-health is very much on HSE's agenda. Occupational cancers etc-HA's need to be implementing their policies and procedures. There is plenty of guidance on health on the HSE website. An issue is that people don't perceive risk as high-HA's need people in organisations to change culture to appreciate health issues more. E.g. risks of dusts

Control of contractors

This is not a tick box process-it's a qualitative process. Who is appraising the risk assessments and method statements (RAMS) in your organisation? Paul mentioned the HSE expected certain people to have certain level of knowledge and experience-ask Paul.Area11.Harvey@hse.gsi.gov.uk for more info on the types of qualifications he noted. A balance of skills, knowledge, experience and training is needed-its not just about qualifications and getting minimum qualifications.

HA's need partnership with contractors -run annual training sessions to let them know they aren't out there on their own. It's not a tick box process. Make sure they've got quality in their risk assessments and method statements. They need to be competent to make sure the job is being assessed properly.

Have contractors got ability to manage health and safety? What is their policies and procedures and do they follow them? There is an obligation of HA's to find this out and monitor contractors to ensure compliance

A risk assessment has to be suitable and sufficient. The HSE put themselves in the minds of people and recipients who are exposed to the risk. Does the HA have polices and procedures in place to deal with this? The recipient could be people who uses kit, or a supervisor running the team. Identify and consider control methods such as limit exposure, have you got health surveillance in place? The recipient should know what limited exposure is, they should know health surveillance is in place etc.

Action: Paul noted that Andrew from RCT Homes sounds like he has this in place so Andrews to present on this at a future meeting?

HA's need a task based risk assessment that links to polices and procedures etc

Known hazards-plan for this and do a risk assessment based on the known hazrads. Have a Pro active risk assessment!

Unknown hazards-the case for a dynamic risk assessment? Need to make sure people have the ability, skills, knowledge and experience to be able to do dynamic risk assessments

The law doesn't say you need a method statement but you should have one. How should I do this job safely? Level of detail you put in depends on the level of risk. Method statement might mean you don't need a permit of work (covers high hazard, working in confined space-specialised stuff) but you might need both?

Client duties are extended under CDM. It's about clients setting standards for the job right at the start. Is the building built safely etc. Those people have the ability to manage health and safety themselves.

Respiratory diseases could be the next big issue like HAVS has been. Lots of issues with disrepair claims such as damp! Respiratory issues are prevalent in construction, and RCT have Face fit Testing for Respiratory Protective Equipment for their staff who may be exposed to construction dust.

There are big changes in legal aid which is pushing solicitors to find work elsewhere. RCT Homes has Health Surveillance in place and is supported by an external contractor 'Workforce Wellbeing'. They have introduced a procurement process that covers H&S contractor sign off to ensure they have considered Health Surveillance in their risk assessments and method statements

As part of the recruitment process, RCT inform potential candidates that if successful they would conduct an initial health Surveillance check and previous work history and if health surveillance had been conducted.

Action: Andrew has to get permission to share RCT procedures on Health Surveillance WRULD/ Occupational diseases /Working at height /Control of contractors- please email AndrewD@rcthomes.co.uk if you would like more information.

What is "Reasonably practicable" in law will gradually increase due to technology and innovation. It's a balance of Cost and practicability. Where there's law AND guidance-that would generally be reasonable and practicable to achieve. When there is no guidance on a subject, a HA needs to work out cost and practicability. CDM-a designer can be a principal designer as long as they are a designer who must be able to challenge designers in the process. Look at constructability and usability. Are designers executing their role as designers? PD can exist internally within an organisation. If you are a PD, you must be a designer. Construction Design Management Coordinators were a CDM 2007 duty holder, this has been removed and no longer exists. CDM 2015, The Principal Designer duty holder role was created and must have designer and H&S skills knowledge and experience to fulfil the duty (this may be an individual or an organisation) however architects companies do not have the H&S knowledge and the CDM (c) did not have the designer knowledge. The HSE are waiting for organisations to change to the regulations over the next few years, not ideal but that is their stand point, Clients (organisations that are conducting construction work) must comply with the regulations, so must ensure they appoint a PD in accordance with the regulation or they have to fulfil the role (some organisations do not have the designer / H&S skills to do this)

PD needs to have the relevant competences. Might have to bring in someone externally with the expertise.

Architects need to be better understand what the role of principal designer is

Inverse duty-shouldn't take on what they can't take on (the CDMC?). There is an obligation on HA to make sure person has skills, knowledge, experience. Ask Paul.Area11.Harvey@hse.gsi.gov.uk for more information on the inverse duty

Whole range of auditing companies, health and safety consultants. In relation to Sub contractors-if being taken on, have main contractors checked they are competent when assessing information given by the HA for policies procedures, relevant skills, knowledge and experience etc? Get contractors to provide evidence they are managing their processes safely.

Regulation 13 CDM-every contractor has an obligation to plan manage and monitor

Window restrictors

Where should we fit them and where shouldn't we? Are neighbourhood management putting the correct people in the correct accommodation? Is a Risk assessment for the tenant for the use of the property being provided? This is key and should be the key question as you can't always solve by mechanical means. Need to balance what you need against is the tenant in correct property?

Timber frame-Paul mentioned STA guidance on fire safety! Ask Paul.Area11.Harvey@hse.gsi.gov.uk which document this is. CHC previously had a presentation on website from STA and fire safety in a CHC fire safety meeting. The presentation can be seen here:

<http://chcymru.org.uk/en/events/networks/network-information/fire-safety-network/>

Access to service heating

RCT Homes attempt 3 phone calls and a text, letters. One HA noted that there are 2 arranged appointments and if they miss this, then they seek notice for possession. Another HA mentioned a 2 stage process:

- 11 months for people easier to get into homes
- 9 months for those when struggle to get into their property

Different types of tenancies impact this? Short, long tenancies. Peabody do it?

Forcing access is the last resort and HA's must have a court order for eviction (this is evidence based and any anomalies are normally found in favour of the tenant, magistrate does not want to make a tenant homeless and also child protection issues) HA's are unable to force access unless they have been to court to get the order. The issue is that no accesses are quite high and it would be impractical to evict the number HA's can have.

The cyclical timings for Gas are 10 months at RCT Homes for all properties, they would look to cap the gas if they are unable to gain access beyond the compliance date of one year, as this is high on their risk register

Andrew mentioned court case where an RSL had not done enough to work with tenants to gain access? Fair enough if a month and gone on holidays. But 3 months?

Try and get tradespersons in within one hit for checks for legionella, gas, electrical etc. RCT have flexible approach-get it from your contractor-Saturday visits are carried out.

Andrew Moucher-use an expensive valve for care settings-ask for more info. Email andrewmoucher@fcha.org.uk for more information. L8 legionella-Andrew recently went to a seminar. Need full tests for legionella systems for all properties? Financial impacts-need to look at risks. Managing a range of elements

Taff risk assessed different property types (ask phils@taffhousing.co.uk for more info) and wrote in a newsletter what tenants should be doing. Taff gets a consultant in each year to check what they are doing works well. Check tanks annually, check smoke detectors, **disinfect something?**

The Landlords guide to electrical safety was noted. This below might be the correct document or not:

<http://www.electricalsafetyfirst.org.uk/mediafile/100116977/Landlords-Guide-A5-Leaflet-2014.pdf>

The Welsh Housing Quality states “Electrical lighting and power installations must be checked and certified safe by an appropriately qualified person at least every 10 years as a minimum (Primary)”. Concensus from the group for 5 years checks?

“Electrical lighting, wiring and power installations should be checked and certified safe by an appropriately qualified person as required by law”.

Action: Paul HSE offered to attend once a year and answers questions in between meetings.

Action: Simon Langston, vision products, was due to talk at the meeting about window restrictors/windows installation but couldn't make it. Simon to attend the next health and safety meeting.

Statutory / Non Statutory compliance

RCT have a monthly audit/risk compliance. Consider the following topics (not all of these are reported-hierarchy-what do we report and how do we report to committee's? You can send them too much information):

Andrew has sent CHC RCT homes approach to Statutory / Non Statutory compliance-it can be seen on the CHC website. Statutory regulations and laws are legal requirements; non-statutory regulations are not law but can be used in a court of law as evidence to claim compliance with a statutory requirement or approved code of practice.

Statutory

RCT approach to asbestos. Doing every property. Paul Harvey mentioned maintenance impacts when assessments are done?

It's not a requirement for HA's to have an independent electrical consultants in to look at systems as long as the person inspecting the installation has the correct and in date certification.

Safety glazing-put through as a statutory requirement? Ian mentioned glass safety-is a fit for purpose not just in terms of fire? There was a case where a mobility scooter drove through glass and it wasn't strong enough

MENCI system-cables on roofs

Carbon monoxide (statutory or non statutory?)

Ladders. RCT have working at height training

Action: Ian Hall to help set up a working group to identify what's statutory and what's non statutory compliance and what do RSLs's report to committee. Ian is happy to scope this out. What have we decided as a group as best practice....

Non statutory

Look at Andrews document. Electrical. Change of tenancy/voids. Look at vulnerable tenants. Consensus it's a 5 year rotation. Need to be aware of electrician's skills and recommendations. There is someone employed to do that role in RCT

Live and deb tests or?

Health and housing safety system will help with windows??

Simon Langston, Vision Products, Window restrictors and window installation

Simon could not make the meeting so can be added to a future meeting agenda.

Health Surveillance WRULD/ Occupational diseases Working at height /Control of contractors

Risk assessment on the person is key!!!

RCT homes-got face fit testing for respiratory-for health surveillance-trained 18 people in house. RCT homes have 18 Face fit trained testers course through 3M

Andrew mentioned that United Welsh have a great process-give a bag with certain equipment/giving the PP bag. They put the ownership on the worker to keep the bag. Workers have warnings then if they don't have their bag with them and then performance management for their own health and safety. Take ownership for their own health and wellbeing/safety.

Balance the decision-RCT do provide masks for people with beards also, but provide 1 mask only? RCT consulted with unions regarding equality issues with religious groups (?) etc. Ownership of PP's.

Filtering Facepiece Assigned protection Factor 3 (Respiratory Protective Equipment)-most RSLs use this.

Fit for work/back to work assessments-if risk assessing individuals, think about impact on others. Work with occupational health etc

HAVies-very expensive items but good-HSE says you can't rely on them

Action: Ian-what info needs to go to audit/risk, what needs to go to EMT, what needs to go line management/directors-what is non statutory and statutory? People agreed to send info to Ian to collate. Kevin agreed to send info and Allan from CCHA. Ian to present findings at next meeting, get feedback and then look to set up a template.

Andrew-group needs a focus. Need more involvement from other people in the group and we need to develop pieces of work. People to feed in issues to the chair AndrewD@rcthomes.co.uk to cover in future meetings

NEBOSH fire safety training-This is a course offered by most H&S / Compliance training organisations, Fire Risk Assessment training has been provided to RCT Homes employees so they can conduct this internally rather than going out to an external supplier, thus reducing costs.

HSL training mentioned earlier –can be expensive. Online asbestos awareness courses are available but certification normally costs in the region of £10 - £15, if you

can demonstrate skills knowledge and experience, and have a relevant training qualification this may be delivered internally. Andrew noted he was Cat B, P405 Managing Asbestos in Non Domestic properties qualified and he used to manage asbestos but have since handed this over to a colleague and deputise so he can concentrate on Contract delivery, management and compliance.

United Welsh are holding principal designer training

Action: Control of contractors-central database for contractors, can CHC set this up for the sector? A database already exists-can we replicate it?

Leon Lloyd, Hugh James, guidance and notices with regards to falls from windows and balconies

Please look at the slides. These are all workplace regulations.

Duty to prevent harm, duty to prevent prosecutions

Deliberate fall-suicide-there are steps you can take to stop to try help stop this

No specific regulations that applies to service users, but there is legislation for employees to follow

Shall be the duty-cant transfer to someone else. Can't delegate the responsibility to e.g. contractor for faulty work??

Employees and contractors need to be covered by good conduct? Could risk assessment have spotted that thing happening? Look at occupancy, who is using the premises, you need to know what their needs and requirements are. Look at risk assessment-has the persons needs changed? Health deteriorated etc?

Regulation 13-applies to balconies, but could be applied to windows. Take away the cause rather than the effect i.e. stop falling items in first place as well as making people wear hard hats

Approved code of conduct-this is different to working at height regulation which is basically any height?- ACOC has been updated and replaced by work at height – but offers some good guidance.

Regulation 15-easy to open window without risk to health? (**Injury?**) Inside the property (stretching to open skylight etc could be an issue) and outside (visible so people don't walk into it?) Is the person vulnerable, if so, then need to apply these?

working at height regulations are a statutory duty but to employees

Legislation covers anyone who comes onto your property. Is the risk created by the RSL? e.g. wiring or by the tenant? E.g Lighter fluid.

If it's a dangerous act by a person this might mean that the HA is not liable but the HA needs to safeguard if e.g. aware that tenant sleepwalks, need to ensure barriers to getting on the roof e.g. restricting access to higher floors

Duty is lowered for trespassers-only need to guard against things (that you know of or ought to know of) but still requirements on the HA?

When occupancy of building changes, need to look at any risks this might offer

If putting windows in as a means of escape, then is there another way which is more suitable to get someone out? Has every other potential means of escape been exhausted? If other potential means of escape have been exhausted, then windows might be able to be used for a means of escape

Change of person? Change of use? Keeps coming back to this.

Where any risk is identified adequate controls need to be put in place

Will balcony present greater risk to certain people? Consider in risk assessment. Maintenance regime should be judged on use of building by the person. E.g. vulnerable people-visit more is property still performing in way it should be. Service user-consider mental disorder, alcohol and drugs etc (look at the slides). Consider the person going in the property for risk assessment. Revisit risk assessment if persons health changes. How often to HA's do this? General needs building-how are you supposed to know needs have changed? HA's would be expected to know more in extra care facilities about peoples health, etc. Under law, if something does get flagged up, you would need to consider this. HA's should say in tenancies if your circumstances change, then let landlord know so they can act. No reason to expect you don't owe a person a duty? Has the building changed, use changed etc? do you know the person is vulnerable? Tenants needs to interact. You can't force people to move either if the property isn't suitable? Is the property fit for your purpose? End up spending lots on adaptations etc Have you done all you can have done as far as reasonably practicable? Record every conversation with people, repeat in writing with a letter and keep it on file. If you've done everything as far as reasonably practicable, then you can discharge your duty.

Temperature? Look at slides. Type of person-more likely to fall? Is the person young /vulnerable?

BSI friend or foe slides-think about a higher level than British standards. Look at slides-regular inspection etc

Case studies are for service users

Lewis case-old building-750mm-fell short of current building regulations-the judge felt if it was 800mm like under current building regulations, the accident still wouldn't have been avoided.

Pollock case-they left the window open and he was vulnerable! (he was blind). They left window open, misjudged the risk and failed to discharge their duty to him.

What's a window restrictor and what's a tamper proof restrictor? There was some discussion around this – essentially tamper proof is something that requires tools to altered/adjusted or removed

Have a look at premier inn case in Scotland. Prosecuted as didn't have sufficient risk assessment in place despite the person tampering and deliberately jumping. Assess against the person in the property!

Don't have to have a restrictor on every window? **WHQS-it's in the guidance?**
Difference in restrictor and locks? Permanent restrictor that can't be tampered with. One HA has window restrictors on all properties-2 storeys and above and all general needs? Some HA's have made sure there are restrictors on the outside of a window to stop people getting into the building with people in it including vulnerable people. Control risk where possible.

Forum members update-an opportunity for open discussions

A.O.B and meeting close (raise five year electrical checks; Building Regulations section G 3 Hot Water Systems)

Seamus Doyle (Pembs HA) is Vice Chair of the West Wales IOSH Branch and recently they had a presentation (HSE 5 year plan) By Paul Kloss (HSE Principal Inspector).

Paul asked how the HSE could get the message out –Paul to potentially attend CHC's next health and safety group

Seamus has also sent through information with regards to contractor assessment. This process is free to use, it may be something that could form part of the July meeting also by inviting someone from the procurement service or Pembs HA procurement manager along to do an overview. The information Seamus sent through is below:

Welsh Government
Value Wales



In This Edition...

1. Barclaycard Precisionpay
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6. New OJEU Forms and Notices now available on Sell2Wales
7. BravoSolution Upgrade- 3rd Feb 2016
8. Procurement Policy Development and Delivery Group
9. Vacancies

Barclaycard Precisionpay - A Virtual Card Solution

The web-based solution creates a unique card number for each purchase (or specific set of purchases)

Pre-approval workflow (with spend limits) and a simple reconciliation process

- Organisations can monitor who's spending what, where and when through web-based reporting functionality
- Interest-free payment terms and monthly account cycles which can extend your working capital
- Integrates into organisations existing systems / processes with real-time secure connection
- Automatic reconciliation against a unique virtual account number, and a reference for each transaction
- Compliance is improved and maverick spend is minimised by setting payment amounts and dates, and by pre-approving all payment requests

Precisionpay is suitable for low value transactions or supplier which are not used on regular basis, saving the resource and time in setting up suppliers within the AP system.

If you would like further details please visit:

<http://www.barclaycard.co.uk/business/making-payments/business-payment-solutions/barclaycard-precisionpay-solutions/barclaycard-precisionpay>

or contact your ePS lead via: eProcurementService@wales.gsi.gov.uk

New Supplier Feedback Service

Value Wales will be delivering a new service to provide a single point of contact for suppliers to ask questions, provide feedback and improve understanding about procurement in the Welsh public sector.

We want to ensure that public sector procurement in Wales is being carried out in a fair, open and consistent manner and is in line with Welsh procurement policy. By providing feedback and improving understanding of policy and legislation, suppliers can work with the public sector to drive further improvements through procurement.

This new service is intended to enable suppliers to easily engage with the procurement process. By asking us questions and seeking clarification on procurement rules, regulations and policy we will hopefully help suppliers develop their own knowledge and understanding of public procurement in Wales.

After the service becomes operational, we will expect the majority of supplier questions and queries to still be raised directly with you as the Contracting Authority. If a query is raised in relation to your organisation and the supplier requests further information, we will contact the Head of Procurement (or nominated senior contact).

The Supplier Feedback Service will be launched by the Minister for Finance & Government Business on the 9 March.

Procurement Fitness Check Update

During November 2015 Value Wales delivered two Procurement Fitness Check events across South and North Wales to demonstrate the refreshed PFC models and to clarify the arrangements for the next round of checks. The events were well attended and we received valuable feedback on our proposed timescales to roll out the 2016/17 programme. We appreciate that January to March is always a busy time for colleagues and have

therefore taken on board your concerns regarding our original timescales, and the next round of fitness checks is now planned for delivery post-April 2016. Plans are underway to appoint a service provider to work with us to deliver the third party assessments and perform the validation on the self assessments and we will advise you when this is completed.

Procurement Competency Framework

Over recent weeks colleagues have enquired whether a specific Competency Framework had been agreed for use across the WPS. We recognise and are thankful for the amount of good work that colleagues kindly invested in the development of the Welsh Procurement Competency Framework which was developed under the ESF Homegrown Talent Project. We value and appreciate the time and effort that has been invested in its development however to provide continued support to maintain the framework is resource intensive. In light of this, consideration has been given to the adoption of existing models and as the CIPS Global Standard for Procurement & Supply Competency Framework has been developed by the profession for the profession a decision has been taken to promote this as the recognised model for use in Wales. A link to the on line version is below.

<http://globalstandard.cips.org/>

If you have any queries please contact Denise Raffill -
denise.raffill@wales.gsi.gov.uk.

Organisational eProcurement Benefits model and Calculator

We have also received a few queries regarding deadlines for completing the Organisational eProcurement Benefits model and Calculator. There are no longer completion deadlines for these models as they are now incorporated into the Procurement Fitness Checks process, and form part of evidence requested in Maturity Model questions – 1.2, 6.1, 6.5, 8.2.

New OJEU Forms and Notices now available on Sell2Wales

Further to our previous article earlier this month, Sell2Wales is releasing the new OJEU forms in two phases. The first phase is the release of the new contract notices, contract award notices and prior information notices on 22 January. A document explaining the impact on buyers is available at the link below:

https://www.sell2wales.gov.uk/Guides/Guide_Download.aspx?id=8820

If you have any queries or require further guidance on completing the new OJEU forms on Sell2Wales please contact the Sell2Wales support team on 0800 222 9004 or help@sell2wales.gov.uk

BravoSolution Upgrade- 3rd Feb 2016

The upgrade release is now only a short while away, please see links to the presentations from the recent National User Group that relate to functionality used across the Welsh Public Sector. Please take a moment of your time to review and accustom yourselves to the new look and feel of the refreshed site.

If you have any queries or questions relating the forthcoming changes, please do not hesitate to contact your ePS lead or email

eProcurementService@wales.gsi.gov.uk

Presentation: [Preparing for the upgrade](#)

Presentation: [Introducing the New User Interface](#)

Procurement Policy Development and Delivery Group

To help inform development of future procurement policy and regulation and to support adoption of the Wales Procurement Policy Statement, Procurement Board has agreed the establishment of the Procurement Policy Development and Delivery Group (PPDDG).

The PPDDG, which reports to the Procurement Board, met for the first time on 15 January and considered an agenda including: European Single Procurement Document; Supplier Feedback Service; Ethical Code of Practice for Suppliers; Procurement Regulation; and Procurement Fitness Checks.

A communique will be issued to PPDDG members to share with sector colleagues. Sector representatives include Mark Roscrow (NHS), Gail Jones (LG - Powys Council), Lee Williams (LG - Blaenau Gwent Council), Mike Halstead (LG - Conwy Council), Howard Allaway(HEPCW), Lyn Jones (Fire & Rescue), Chris Chapman (WLGA), Judith Budding (Welsh Government) and Sian Freeman (Police). Julie Harrison of NPS and Rhys Morris of Welsh Government's Business Wales will also attend future meetings.

For any queries relating to the VW Bulletin, including any articles or to unsubscribe please email: Daniel.Duddridge@wales.gsi.gov.uk. If you would like to receive this bulletin in Welsh [please click here](#).

ABOUT VALUE WALES

Value Wales is a Division within the Welsh Government that drives best practice in procurement across the Welsh public sector. The Value Wales Bulletin aims to provide updates and developments from across Value Wales, along with procurement related training opportunities and job vacancies.

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wales.gov.uk/valuewales

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