

CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

DYDDIAD Y CYFARFOD:	16 April 2020
DATE OF MEETING:	
TEITL YR ADRODDIAD:	Management of operational and corporate risks during
TITLE OF REPORT:	the Covid-19 Pandemic
CYFARWYDDWR ARWEINIOL:	Steve Moore, Chief Executive Officer
LEAD DIRECTOR:	
SWYDDOG ADRODD:	Joanne Wilson, Board Secretary
REPORTING OFFICER:	Charlotte Beare, Head of Assurance and Risk

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate) Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA SBAR REPORT Sefyllfa / Situation

The Board is asked to consider and agree how operational and corporate risks should be managed by the Health Board during the Covid-19 pandemic.

Cefndir / Background

The Health Board is in unprecedented times, preparing to deal with a global pandemic of Covid-19. However, Boards do not stop being accountable at times of national crisis and because it is precisely at such times that Boards must step up and do – and be seen to be doing – the right thing (Good Governance Institute, 2020).

Whilst substantial amounts of management time will be focussed on ensuring that the Hywel Dda response is coordinated and effective, there is a risk that quality governance and oversight is not as robust as attention is diverted.

In addition, the Minister of Health and Social Services announced on 13th March 2020, a framework of actions, within which local health and social care providers could make decisions to ensure that preparations could be made in a planned and measured way for managing Covid-19. These were:

- 1. Suspend non-urgent outpatient appointments and ensure urgent appoints are prioritised
- 2. Suspend non-urgent surgical admissions and procedures (whilst ensuring access for emergency and urgent surgery)
- 3. Prioritise use of Non-Emergency Patient Transport Service to focus on hospital discharge and ambulance emergency response
- 4. Expedite discharge of vulnerable patients from acute and community hospitals
- 5. Relax targets and monitoring arrangements across the health and care system
- 6. Minimise regulation requirements for health and care settings
- 7. Fast track placements to care homes by suspending the current protocol which give to right to a choice of home
- 8. Permission to cancel internal and professional events, including study leave, to free up staff for preparations.

- 9. Relaxation of contract and monitoring arrangements for GPs and primary care practitioners.
- 10. Suspend NHS emergency service and health volunteer support to mass gatherings and events.

Asesiad / Assessment

The purpose of risk management is to fulfil the following requirements:

- Conformity with mandatory obligations
- Assurance to the Board that internal control activities are proportionate, aligned, comprehensive, embedded and dynamic
- Support decision-making
- Achieving effective and efficient strategy, operations and compliance to ensure best outcome and reduce uncertainty

At present, the Risk Module on Datix holds 492 live risks, 432 of which are currently over the Board's agreed tolerance level. There are 26 corporate risks and 466 operational risks that sit at Directorate or Service level.

The majority of these risks relate to fragile services, poor patient flows, poor environments and aging equipment mainly as a result of staffing and funding (capital and revenue) challenges. These risks, which relate to potential events or impacts, will continue to remain whilst the Health Board prepares and deals with the emerging Covid-19 pandemic, and may become more of a reality over the next few months whilst the Health Board experiences increased demand for services, however their management needs to be balanced with the Health Board's ability to manage the threat of a global pandemic, as the Board remains accountable for the risks that is carrying.

To enable Services to prepare and deal with the Covid-19 pandemic, all Executive Team Performance Reviews have been stood down to the end of June 2020, and only essential Committee meetings are going ahead with reduced membership, therefore whilst risk reporting can be stood down, it remains that management remain accountable for the service they provide.

Whilst there is recognition of the significant pressure on services, there needs to be a proportionate response to risk balanced with the current capacity pressures and challenges presented by the COVID pandemic and managing the 'business as usual' issues and risks. This assessment needs to be undertaken by management, as they have the ownership (accountability and authority) and depth of understanding to make the right decision for the right reason.

Management of Corporate Risks

The corporate risk register (CRR) is agreed by the Executive Team and is scrutinised by the Board level Committees three times a year and the Board twice a year. However as the Board and Committee cycle has been amended to allow for COVID planning, it proposed that the CRR is reviewed and agreed by Executive Team on a monthly basis prior to Board, with QSEAC retaining scrutiny role of the corporate risks aligned to the safety and quality of services.

The Executive Team will review the existing corporate risks in light of the emerging COVID pandemic,

• Existing risks may need to be reviewed and updated to reflect the impact of COVID on them and may reduce/increase in risk score.

- Existing risks may need to be de-escalated from the CRR as they do not reflect the current priorities of the Health Board.
- New and emerging risks relating to the potential impact of COVID planning and management will need to be assessed.
- Executive Directors/Directors will also need to consider their risks from their Directorate risk registers as to whether they should be considered for escalation to CRR.

Management of Operational Risks

It is proposed that a directive is sent to Executive Directors (Corporate functions) and General Managers (Operations Directorates) confirming that whilst monitoring and scrutiny is being suspended in respect of the management of operational risks up to 30 June 2020, there is still the expectation that management will ensure their service is safe and the risk of harm to patients and staff is managed appropriately, therefore managers will need to manage their existing risks and any new risks to prevent harm, minimise loss and reduce damage. Managers will also need to decide whether they have the capability (available resources and skills) to implement their planned actions, and maintain the effectiveness of their existing controls.

To do this, The CEO will ask for Executive Directors/Directors to review their existing operational risks on Datix Risk Module (taking into account the positive /negative impacts that COVID may have had on them) and

- Agree the risks that remain a priority to manage and mitigate during the COVID pandemic
- Agree (archive) the risks that do not present a significant risk during the COVID pandemic (however they must ensure that existing controls are in place and remain effective otherwise risk could increase)
- Consider new and emerging risks to their service as a result of the COVID pandemic (including potential risks in respect of returning to normal business)

Risk Appetite and Tolerance

The Board agreed its Risk Appetite and Tolerance levels in September 2018. The Risk Appetite Statement should act as a strategic driver at Board level, and it provides staff with guidance as to the risk boundaries that are acceptable and how risk and reward are to be balanced, as well as providing clarification on the level of risk the UHB is prepared to accept. The Board could review its Risk Appetite and Tolerance levels and set new levels for the staff to follow during the COVID-19 pandemic. The current statement is available via the following link -

http://www.wales.nhs.uk/sitesplus/documents/862/Item%205.4%20Board%20Assurance%20Fr amework%2C%20Corporate%20Risk%20Register%20and%20Risk%20Appetite.pdf

Argymhelliad / Recommendation

The Board is asked to agree the following:

- Management of Corporate Risks Agree that the CRR is reviewed and agreed by Executive Team on a monthly basis prior to Board, with QSEAC retaining scrutiny role of the corporate risks aligned to the Committee.
- Management of Operational Risks Agree the proposed option for the management operational risks up to 30 June 2020 (with a further review undertaken at end of June 2020.
- Agee whether the Risk Appetite and Tolerance levels should be reviewed during the COVID-19 pandemic.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)		
Cyfeirnod Cofrestr Risg Datix a Sgôr	N/A	
Cyfredol:		
Datix Risk Register Reference and		
Score:		
Safon(au) Gofal ac lechyd:	Governance, Leadership and Accountability	
Health and Care Standard(s):	Choose an item.	
Hyperlink to NHS Wales Health &	Choose an item.	
Care Standards	Choose an item.	
Amcanion Strategol y BIP:	All Strategic Objectives are applicable	
UHB Strategic Objectives:	Choose an item.	
Hyperlink to HDdUHB Strategic	Choose an item.	
Objectives	Choose an item.	
Amcanion Llesiant BIP:	Not Applicable	
UHB Well-being Objectives:	Choose an item.	
Hyperlink to HDdUHB Well-being	Choose an item.	
Statement	Choose an item.	

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth:	The Good Governance Pocket Guide for NHS Wales
Evidence Base:	Boards (2017)
	Building a Framework for Board/Governing Body
	Assurance (2014)
	Board Assurance: A toolkit for health sector
	organisations (2015)
Rhestr Termau:	In report
Glossary of Terms:	
Partïon / Pwyllgorau â ymgynhorwyd	Audit and Risk Assurance Committee Chair
ymlaen llaw y Cyfarfod Bwrdd lechyd	Health Board Chair
Prifysgol:	Chief Executive Officer
Parties / Committees consulted prior	
to University Health Board:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian:	If the Health Board decides to suspend the management
Financial / Service:	of all its risks during the Covid-19 pandemic, the Health
	Board may not achieve value for money and miss
	efficiency opportunities.
Ansawdd / Gofal Claf:	If the Health Board decides to suspend the management
Quality / Patient Care:	of all its risks during the Covid-19 pandemic, the Health
	Board may not be delivering safe and effective care to

	patients who are being who are receiving non-covid-19 related care and treatment.
Gweithlu: Workforce:	Given the current workforce pressures associated with the planning and dealing with Covid19 pandemic, the Health Board may not have the workforce capacity to manage its risks.
Risg: Risk:	With less management focus, isks may be more likely to materialise whilst the Health Board focuses on Covid-19 planning.
Cyfreithiol: Legal:	No direct impacts from this report.
Enw Da: Reputational:	If the Health Board decides to suspend the management of all its risks during the Covid-19 pandemic, the above impacts may materialise and the Health Board will need to be able to justify its decision to suspend this work.
Gyfrinachedd: Privacy:	No direct impacts
Cydraddoldeb: Equality:	 Has EqIA screening been undertaken? No Has a full EqIA been undertaken? No