



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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	22 October 2019
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Business Planning & Performance Assurance Committee Assurance Report around the Discharge of their Terms of Reference
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Karen Miles, Director of Planning, Performance, Informatics and Commissioning
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Karen Miles, Director of Planning, Performance, Informatics and Commissioning

**Pwrpas yr Adroddiad** (dewiswch fel yn addas)

**Purpose of the Report** (select as appropriate)

Er Sicrwydd/For Assurance

### ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

The External Governance Review undertaken during 2015 recommended that the Executive Lead of each Board level Committee attends the Audit & Risk Assurance Committee on an annual basis to allow the Committee the opportunity to scrutinise the controls and assurances on which it relies, agreeing actions where appropriate.

The purpose of this report is to provide assurance to the Audit & Risk Assurance Committee that the Business Planning & Performance Assurance Committee's (BP&PAC) Terms of Reference, as set by the Board, are being appropriately discharged for the period 2018/19.

The Committee is asked to note the content of this report and comment on any issues in respect of the operation of BP&PAC going forward.

#### Cefndir / Background

The Business Planning & Performance Assurance Committee (BP&PAC) has been established as a Committee of the Hywel Dda University Health Board (UHB) and constituted from 1st June 2015. The purpose of BP&PAC as expressed in its Terms of Reference, as per the March 2019 Board approved version, is to:

- Provide assurance that the planning cycle is being taken forward and implemented in accordance with UHB and Welsh Government requirements, guidance and timescales.
- Provide assurance that all plans put forward for the approval of the UHB for improving the local population's health and developing and delivering high-quality, safe and sustainable services to patients, and the implementation of change, are consistent with the Board's overall strategic direction and any requirements and standards set for NHS bodies in Wales.
- Provide assurance to the Board that, wherever possible, UHB plans are aligned with partnership plans developed with Local Authorities, Universities, Collaboratives, Alliances and other key partners.
- Provide support to the Board in its role of scrutinising performance and assurance on overall performance and delivery against UHB plans and objectives, including delivery of Tier 1 (i.e. key deliverable) targets, and giving early warning on potential performance issues and

making recommendations for action to continuously improve the performance of the organisation and, as required, focus in detail on specific issues where performance is showing deterioration or there are issues of concern.

- Assure the Board that the data on which performance is assessed is reliable and of high quality and that any issues relating to data accuracy are addressed.
- Seek assurance on the management of principal risks within the Board Assurance Framework (BAF) and Corporate Risk Register (CRR) allocated to the Committee and provide assurance to the Board that risks are being managed effectively and report any areas of significant concern e.g. where risk tolerance is exceeded, lack of timely action.
- Recommend acceptance of risks that cannot be brought within the UHB's risk appetite/tolerance to the Board through the Committee Update Report.
- Receive assurance through Sub-Committee Update Reports that risks relating to their areas are being effectively managed across the whole of the UHB's activities (including for hosted services and through partnerships and Joint Committees as appropriate).

As BP&PAC is directly accountable to the Board for its performance, it provides an assurance to the Board through a formal written update report which is received at the subsequent Board meeting. A full set of the papers for each Committee meeting is routinely made publicly available from the Health Board's website, whilst also providing an annual report to the Board; the 2018/19 report can be accessed via [this weblink](#).

During 2018/19, the Committee met on 6 occasions and was quorate at all meetings, as follows:

- 24th April 2018
- 26th June 2018
- 28th August 2018
- 30th October 2018
- 18th December 2018
- 26th February 2019

In discharging its role, the Committee is required to oversee and monitor the business planning & performance assurance agenda for the UHB, and in respect of its provision of advice to the Board, ensure the implementation of the business planning & performance assurance agenda against the following areas of responsibility:

- Business Planning
- Performance Management
- Risk
- Governance
- Collaboration

To support BP&PAC in discharging its responsibilities there are four Sub-Committees which report to it. The Sub-Committees reporting to Business Planning & Performance Assurance Committee during 2018/19 were as follows:

Capital, Estates & IM&T Sub-Committee – established to:

- Oversee delivery of the UHB's capital programmes and projects included in the planning cycle (in year and longer term).
- Recommend to the Board, via the Business Planning and Performance Assurance Committee (BPPAC), for the use of the UHB's Capital Resource Limit (CRL).
- Oversee the development of the Estates Strategy aligned to the Clinical Services Strategy for consideration by BPPAC, prior to Board approval.

- Oversee the development of an innovative IM&T and Digital Health Strategy for IM&T (to cover all functions of the UHB's services i.e. primary, community, acute etc.) aligned to the Clinical Services Strategy for consideration by BPPAC, prior to Board approval.
- Oversee the development and delivery of implementation plans for the Estates and, IM&T and Digital Health Strategy agreeing corrective actions where necessary and monitoring its effectiveness.

#### Health & Safety and Emergency Planning Sub-Committee – established to:

- Provide assurance around the UHB arrangements for ensuring the health, safety, welfare and security of all employees and of those who may be affected by work-related activities, such as patients, members of the public, volunteers, contractors etc.
- Provide advice on compliance with all aspects of health and safety legislation.
- Oversee the development, maintenance and evaluation of the UHB's Emergency Management Plan that will be underpinned by policy and protocols, planning and performance targets and strategies to address risks to business continuity.

#### Information Governance Sub-Committee – established to:

- The purpose of the Information Governance Sub-Committee is to provide assurance to the Business Planning & Performance Assurance Committee, which is a Committee of the Board, on compliance with information governance legislation, guidance and best practice, and to:
  - Provide evidence based and timely advice to assist the UHB in discharging its functions and meeting its responsibilities with regard to the quality and integrity; safety and security; and appropriate access and use of information (including patient and personal information) to support its provision of high quality healthcare.
  - Provide assurance in relation to the Board's arrangements for creating, collecting, storing, safeguarding, disseminating, sharing, using and disposing of information in accordance with its stated objectives; legislative responsibilities, e.g., the Data Protection Act 2018, General Data Protection Regulations (May 2018) and Freedom of Information Act 2000; and any relevant requirements, standards and codes of practice.
  - Provide assurance that risks relating to information governance are being effectively managed across the whole of the UHB's activities (including for hosted and contracted services, through shared services, partnerships, independent contractors and Joint Committees as appropriate).

#### Planning Sub Committee - established to:

- Provide assurance to the Business Planning & Performance Assurance Committee that the planning cycle is (designed and managed) being taken forward and implemented in accordance with the UHB and Welsh Government requirements, guidance and timescales.
- Ensure the development of, and quality assure, all Together For Health delivery plans, ensuring their alignment with the UHB's strategy and priorities, and also ensuring their alignment to the planning cycle.
- Have an overview of on-going regional planning work and the impact on local planning including strengthening of the commissioning of these services, determining local targets, and repatriation opportunities.
- Ensure that risks relating to planning are being effectively managed across the whole of the UHB's activities.
- Receive updates from Hywel Dda Community Health Council (CHC) Service Planning Committee.
- Agree issues to be escalated to the Business Planning and Performance Assurance Committee with recommendations for action.

Up until September 2018, a Finance Sub-Committee sat under BP&PAC, and was established to:

- Provide additional and detailed scrutiny of the UHB's financial position in view of the current challenges in terms of achieving a balanced financial position.
- Maintain a robust grip and oversight of the UHB's financial position by monitoring the financial contingency plan.
- Consider in detail in year financial matters in relation to all aspects of the business of the Health Board.

However, further to discussions at both BP&PAC and the Finance Sub Committee, in view of the continuing focus that is required to be given to the UHB's financial position, it was deemed prudent to elevate the status of the Finance Sub Committee to that of a Committee of the Board. This change is proposed to ensure that the highest level of scrutiny is applied to financial management in order to stabilise the position and meet the expectations required for seeing progress in respect of finance, further to the additional support received resulting from the zero based review. This change of status was approved by the Board in September 2018, with revised BP&PAC Terms of Reference agreed.

Each of the Sub Committees provides an update report on a bi-monthly basis to BP&PAC, as well as providing an annual report at the end of the financial year. In-turn, BP&PAC produces update and annual reports to Board.

Furthermore, as per their respective Terms of Reference, the Sub Committees are required to review their Terms of Reference on an annual basis.

### Asesiad / Assessment

With respect to the purpose of BP&PAC, Table 1 is intended to provide the Audit & Risk Assurance Committee with assurance that these responsibilities are being discharged.

<b>Table 1</b>	
<b>Purpose of the Business Planning and Performance Assurance Committee</b>	<b>Assurances to the Audit &amp; Risk Assurance Committee</b>
Provide assurance that the planning cycle is being taken forward and implemented in accordance with University Health Board and Welsh Government requirements, guidance and timescales.	<p>In 2018/19, the 2019/22 Planning cycle and development of the Plan was presented to BP&amp;PAC at the following meetings:</p> <ul style="list-style-type: none"> <li>• 28<sup>th</sup> August 2018</li> <li>• 30<sup>th</sup> October 2018</li> <li>• 26<sup>th</sup> February 2019</li> </ul> <p>To provide BP&amp;PAC with assurance on the development of the Planning Cycle, an Integrated Planning Assurance Report (IPLAR) was developed and presented at the following meetings:</p> <ul style="list-style-type: none"> <li>• 26<sup>th</sup> June 2018</li> <li>• 28<sup>th</sup> August 2018</li> <li>• 30<sup>th</sup> October 2018</li> <li>• 18<sup>th</sup> December 2018</li> <li>• 26<sup>th</sup> February 2019</li> </ul>

	<p>Additionally, on a quarterly basis BP&amp;PAC was provided with a monitoring report on the progress of the actions noted in our 2018/19 Plans, with a RAG rating against both the overall plan and each action, in the following dates:</p> <ul style="list-style-type: none"> <li>• Quarter 1 - 28<sup>th</sup> August 2018</li> <li>• Quarter 2 - 30<sup>th</sup> October 2018</li> <li>• Quarter 3 – 26<sup>th</sup> February 2019</li> <li>• Quarter 4 was taken to BP&amp;PAC meeting on 30<sup>th</sup> April 2019</li> </ul>
Provide assurance that all plans put forward for the approval of the Health Board for improving the local population's health and developing and delivering high-quality, safe and sustainable services to patients, and the implementation of change, are consistent with the Board's overall strategic direction and any requirements and standards set for NHS bodies in Wales.	<p>During 2018/19, this work included:</p> <ul style="list-style-type: none"> <li>• Wales Major Trauma Network</li> <li>• Capital reports – All Wales and Discretionary Funds</li> <li>• Business Cases</li> <li>• Together for Health Delivery Plans</li> <li>• Operational and Digital projects</li> <li>• Public Health – Flu Vaccination</li> <li>• Monitoring of Welsh Health Circulars</li> </ul>
Provide assurance to the Board that, wherever possible, University Health Board plans are aligned with partnership plans developed with Local Authorities, Universities, Collaboratives, Alliances and other key partners.	<p>The agenda at each BP&amp;PAC meeting has a section on 'Collaborative Update Reports' and in 2018/19 this included reports/papers/decisions with regards to:</p> <ul style="list-style-type: none"> <li>• A Regional Collaboration for Health (ARCH)</li> <li>• Llanelli Wellness and Wellbeing Centre</li> <li>• West Wales Regional Partnership Board</li> <li>• Carers</li> <li>• Together for Health Delivery Plans</li> <li>• Strategic Partnership Plans</li> </ul>
Provide support to the Board in its role of scrutinising performance and assurance on overall performance and delivery against Health Board plans and objectives, including delivery of key deliverable targets, giving early warning on potential performance issues and making recommendations for action to continuously improve the performance of the organisation and, as required, focus in detail on specific issues where performance is showing deterioration or there are issues of concern.	<p><b>Performance monitoring</b></p> <ul style="list-style-type: none"> <li>• The Integrated Performance Assurance Report (IPAR) is presented at every BP&amp;PAC bi-monthly meeting. The IPAR is brought to BP&amp;PAC's attention to examine and consider the University Health Board's latest performance data, achievements, challenges and needs. This is a requirement of the NHS Wales Delivery Framework 2018/19. In addition, an abridged version of the IPAR is used to inform the Board of performance improvements and areas of concern.</li> <li>• A series of performance dashboards have been developed to support the IPAR and provide a data 'drill-down' for areas of concern.</li> <li>• The Performance Report section of the Health Board's 2018/19 Annual Report highlighted where progress was made and further improvement needed.</li> </ul> <p><b>Performance management</b></p> <p>The Executive Team Performance Reviews were established in June 2018. The reviews enable the Executive Team to</p>

	scrutinise operational teams on their performance across a wide range of topics including risks, audits, inspections, incidents, concerns, sickness, core skills compliance, staff appraisals, agency usage, locums, key deliverable targets, finance/turnaround, planning and information governance.
Assure the Board that the data on which performance is assessed is reliable and of high quality and that any issues relating to data accuracy are addressed.	<p>All data included in the IPAR is sense and quality checked. Any concerns over accuracy are relayed to the data provider for investigation.</p> <p>Welsh Government recognise the IPAR as a reliable source of data, with the IPAR being used to inform performance related conversations with Welsh Government including Quality and Delivery (Q&amp;D) meetings, Targeted Intervention (TI) meetings and Joint Executive Team (JET).</p>
Seek assurance on the management of principle risks within the BAF and CRR allocated to the Committee and provide assurance to the Board that risks are being managed effectively and report any areas of significant concern e.g. where risk tolerance is exceeded, lack of timely action.	This is a newly assigned responsibility as per the revised September 2018 Board approved version of the BP&PAC Terms of Reference. As a consequence this has formed part of the on-going BP&PAC work programme and is reported on at its meetings bi-monthly.
Recommend acceptance of risks that cannot be brought within the UHBs risk appetite/tolerance to the Board through the Committee Update Report.	This is a newly assigned responsibility as per the revised September 2018 Board approved version of the BP&PAC Terms of Reference. As a consequence this has formed part of the on-going BP&PAC work programme and is reported on at its meetings bi-monthly.
Receive assurance through Sub-Committee Update Reports that risks relating to their areas are being effectively managed across the whole of the Health Board's activities (including for hosted services and through partnerships and Joint Committees as appropriate).	<p>Update reports from each of the BP&amp;PAC Sub Committees are produced and presented at each bi-monthly BP&amp;PAC meeting:</p> <ul style="list-style-type: none"> <li>• Capital, Estates and IM&amp;T</li> <li>• Health &amp; Safety and Emergency Planning</li> <li>• Information Governance</li> <li>• Planning</li> <li>• Finance – prior to the revised Board approved governance structure in September 2018, whereby Finance became a Committee of the Board</li> </ul>

### Argymhelliad / Recommendation

The Audit & Risk Assurance Committee is asked to note the content of this report and take assurance that the Business Planning and Performance Assurance Committee has been operating effectively during 2018/19.

**Amcanion: (rhaid cwblhau)**  
**Objectives: (must be completed)**

Committee ToR Reference Cyfeirnod Cylch Gorchwyl y Pwyllgor	5.8 Invite Lead Directors of Board level Committees to attend the Audit & Risk Assurance Committee at least annually to receive assurance that they are effectively discharging their Terms of Reference.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability Choose an item. Choose an item. Choose an item.
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable Choose an item. Choose an item. Choose an item.
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Statement</a>	Not Applicable Choose an item. Choose an item. Choose an item.

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Terms of Reference: <ul style="list-style-type: none"> <li>• Business Planning and Performance Assurance Committee</li> <li>• Capital, Estates and IM&amp;T Sub Committee</li> <li>• Health &amp; Safety and Emergency Planning Sub-Committee</li> <li>• Information Governance Sub Committee</li> <li>• Planning Sub Committee</li> </ul>
Rhestr Termiau: Glossary of Terms:	Included within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg: Parties / Committees consulted prior to Audit and Risk Assurance Committee:	Not Applicable

**Effaith: (rhaid cwblhau)  
Impact: (must be completed)**

<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	Not Applicable
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	Implicit within the report
<b>Gweithlu: Workforce:</b>	Implicit within the report

<b>Risg: Risk:</b>	Not Applicable
<b>Cyfreithiol: Legal:</b>	Not Applicable
<b>Enw Da: Reputational:</b>	Not Applicable
<b>Gyfrinachedd: Privacy:</b>	Not Applicable
<b>Cydraddoldeb: Equality:</b>	Not Applicable