

- 4.2 Structured Assessment 2019 - Progress to Date
Presenter: Audit Wales/Joanne Wilson
SBAR Structured Assessment 2019 ARAC June 2020
Appendix 1 - Management Response SA2018 (Updated)
Appendix 2 - Management Response SA2019

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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	23 June 2020
TEITL YR ADRODDIAD: TITLE OF REPORT:	Audit Wales Structured Assessment Report and Management Response for Structured Assessment 2019 and Revised Responses to Previous Recommendations that are 'not yet complete'
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Steve Moore, Chief Executive Officer
SWYDDOG ADRODD: REPORTING OFFICER:	Joanne Wilson, Board Secretary

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

This paper provides the Audit and Risk Assurance Committee with an update on progress against the recommendations made by Audit Wales (AW) in their Structured Assessment process for 2019, as well as the recommendations from Structured Assessment 2018 that AW assessed as 'not yet completed'.

Cefndir / Background

The structured assessment work undertaken by AW enables the Auditor General to discharge his statutory requirement under section 61 of the Public Audit (Wales) Act 2014 to be satisfied that NHS bodies have made proper arrangements to secure economy, efficiency and effectiveness in their use of resources.

The Structured Assessment 2019 report groups the findings under five themes - Strategic planning; transformation and organisational structure; performance and turnaround; governance arrangements; and managing the workforce. The report can be accessed via the following link -

https://www.audit.wales/system/files/publications/hywel_dda_structured_assessment_2018_english.pdf.

The overall conclusion from AW was 'that the Health Board continues to strengthen governance and management arrangements. It has a clear strategic direction and is developing the infrastructure to support delivery of strategic plans. There are improvements in performance but challenges in relation to finance and unscheduled care remain. Finally, oversight and scrutiny of planning needs clarifying'. AW made 3 recommendations in relation to:

- Monitoring delivery of plans
- Performance management reviews
- Staff engagement

The Structured Assessment work in 2019 also paid particular attention to the progress made to address recommendations and opportunities for improvement identified in 2018 and previous years and advised that the Health Board would also need to address any outstanding recommendations. Within the report, AW considered that four previous recommendations were 'not yet complete'. These are related to:

- Operational meetings - R8 (2017) and R3 a, b and c (SA2018)
- Strategic planning - R4 (SA2018)

Asesiad / Assessment

Structured Assessment 2018 (SA18)

Appendix 1 reports the current progress against the SA18 recommendations AW assessed as 'not yet complete'.

RAG

Red – Not completed/behind schedule

Amber – Not completed but on schedule

Green – Completed

Rec	Exec Lead	Date for Implementation	RAG status as at 09/06/20
3a	Director of Planning, Performance & Commissioning/Director of Operations	Apr20 Not known	Red
3b	Director of Planning, Performance & Commissioning/Director of Operations	Mar20	Green
3c	Medical Director/Director of Operations	Apr20 Dec20	Red
4	Director of Finance	Mar20	Green

Update on Recommendations behind schedule

Recommendation 3a - Prior to COVID-19, development of a new Operating Framework was underway which included a review of the performance management arrangements. In early March the scoping work for the new operating model was put on hold to allow staff time to prepare for and manage the COVID-19 pandemic. Alongside this, the Executive Performance Review (EPR) meetings were also stood down to allow staff more time to focus on COVID related tasks. At present, there are no plans to resume the EPR meetings. A new Transformation Steering Group has been established, with the first meeting held on 8 June 2020. This group will refresh thinking and determine what the Health Board priorities will now be for the new operating model, in light of COVID-19.

Recommendation 3c – The review of all job plans in the current and post-COVID-19 period is being agreed with Clinical Leads/Hospital Directors. The allocation of time to allow Clinical Directors and Senior leaders to attend management meetings (including EPR's) will be included within this process.

Structured Assessment 2019 (SA19)

Appendix 2 reports the current progress against the agreed management response for 2019.

Rec	Exec Lead	Date for Implementation	RAG status as at 09/06/20
1	Board Secretary	Apr20	Green

2	Director of Planning, Performance and Commissioning	Apr20 Not Known	
3	Action 1 - Medical Director	Apr20	
	Action 2 - Medical Director	Feb20	
	Action 3 - Medical Director	Jun20	
	Action 4 - Director of Planning, Performance and Commissioning	Jul20	
	Action 5 - Director of Planning, Performance and Commissioning	Jun20	
	Action 6 - Director of Nursing, Quality and Patient Experience	Apr20 Not Known	
	Action 5 - Director of Planning, Performance and Commissioning	Jul20	
	Action 8 – Director of Workforce and OD	Apr20	

Update on Recommendations behind schedule

Recommendation 2 – As per 3a above.

Recommendation 3 –The Directors of Workforce and OD and Nursing, Quality and Patient Experience have provided updates to advise that COVID-19 has impacted delivery of their actions. At time of writing had not been received from the Strategic Programme Director on behalf the Executive Leads. An update will be circulated to Members when received.

Argymhelliad / Recommendation

The Audit and Risk Assurance Committee is asked to consider progress made in respect of the recommendations from the Structured Assessment 2018 and 2019, and note the recommendations that have now been implemented to date.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference
Cyfeirnod Cylch Gorchwyl y Pwyllgor

5.3 In carrying out this work the Committee will primarily utilise the work of Internal Audit, Clinical Audit, External Audit and other assurance functions, but will not be limited to these audit functions. It will also seek reports and assurances from directors and managers as appropriate, concentrating on the overarching systems of good governance, risk management and internal control, together with indicators of their effectiveness.

Cyfeirnod Cofrestr Risg Datix a Sgôr
Cyfredol:
Datix Risk Register Reference and Score:

N/A

Safon(au) Gofal ac Iechyd:
Health and Care Standard(s):

Governance, Leadership and Accountability

Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Statement	Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Structured Assessment 2019.
Rhestr Termiau: Glossary of Terms:	Included in document.
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg: Parties / Committees consulted prior to Audit and Risk Assurance Committee:	All relevant Executive Directors have been asked to contribute to the management response.

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	No direct impacts from this report.
Ansawdd / Gofal Claf: Quality / Patient Care:	No direct impacts from this report.
Gweithlu: Workforce:	No direct impacts from this report.
Risg: Risk:	No direct impacts from this report.
Cyfreithiol: Legal:	No direct impacts from this report.
Enw Da: Reputational:	No direct impacts from this report.
Gyfrinachedd: Privacy:	No direct impacts from this report.
Cydraddoldeb: Equality:	No direct impacts from this report.

UPDATED Management response to Structured Assessment 2017 & 2018 (Following WAO Feedback in Structured Assessment 2019)

Ref	Management response	Completion date	Progress as at 9 June 2020
R3a (SA18)	<p>Recommendation - Operational meetings</p> <p>To free up capacity for both executive and operational teams, and to enable a more joined up focus on the use of resources, the Health Board should streamline the number of holding to account (HTA) or performance review meetings with operational teams by:</p> <p>(a) reviewing the frequency and timing of these meetings;</p> <p><i>SA19 FEEDBACK - separate Holding to Account meetings are held with the Turnaround Director. Additional Holding to Account meetings are held with the Chief Executive and a number of Executive Directors where directorates are escalated. Separate check and challenge meetings are also taking place. The number of meetings that directorates have to attend, including the transformation groups, place considerable time pressures on directorate teams and the executives. The Health Board has recognised the opportunity to bring the Holding to Account meetings into the EPRs, particularly with the recent appointment of the Turnaround Director into the Executive Director of Operations role. The Health Board has increased the frequency of EPRs for directorates which are underperforming, although this is not yet reflected in the performance management framework.</i></p> <p><i>Intended Benefit/Outcome –</i></p> <ol style="list-style-type: none"> 1. Increased capacity for both executive and operational teams. 2. Increased engagement from medical leads. 3. Improved visibility of executive teams across the Health Board. 4. A more streamlined focus on the use of resources. <p>Responsible Officers – Director of Planning, Performance & Commissioning/Director of Operations</p> <p>Ensure the Holding To Account (HTA) meetings merge with the Executive Team Performance Reviews (ETPR) from April 2020 as this will reduce the burden on service leads and will make it more feasible for medical leads to attend (see R3c below for further details).</p> <p>Consideration to be given to the scheduling of the new meetings. ETPR meetings are currently held on Wednesday mornings to protect Wednesdays as a corporate day, with Executive Team meetings</p>	<p>April-2020 Not Known</p>	<ul style="list-style-type: none"> • On 15 January 2020 the Director of Planning, Performance & Commissioning, the Director of Operations, the Principal Project Manager for Turnaround and the Performance Manager met to hold an initial discussion on the HTA / ETPR merger. • The proposed new Board governance arrangements were approved on 30 January 2020 for implementation from 1 April 2020.

Ref	Management response	Completion date	Progress as at 9 June 2020
	<p>scheduled on Wednesday afternoons. However, Clinical Directors have since advised their attendance at the ETPRs will be increased if the reviews are scheduled for Thursday mornings to coincide with their protected time for managerial meetings (see R3c below).</p> <p>The Executive to continue to have ongoing discussions relating to performance management arrangements as part of the Board governance review and review of managerial arrangements in the Operations Directorate. A new Performance Management Assurance Framework will be presented to Board for approval on 26th March 2020. A schedule and agenda outline will be developed for the new combined meetings by 31st March 2020. The Principal Project Manager for Turnaround and the Performance Manager will lead on developing the new performance review schedule and agenda.</p>		<ul style="list-style-type: none"> • An initial draft outline of the new performance management arrangements has been developed by the Director of Planning, Performance, Informatics and Commissioning in conjunction with the CEO, Director of Operations and Director of Finance. Work will continue over the next few weeks to determine how this can best be implemented. • On 17 February 2020, the CEO led a workshop with Executive Team members/nominated deputies and presented a proposed new operating model for 2020/21. The new model was structured around our three year plan actions, organisational risks and performance management. The new model looked to merge HTA and EPR meetings into the same process to reduce the burden on service leads. Executive Directors would be given greater responsibility for performance management within their directorate. Service areas would only be seen by the CEO twice a year (ahead of JET meetings) or if a performance trigger was met. Following the workshop, work began on scoping performance triggers and what groups were already in place and new ones needed to oversee the key elements of the new operating model i.e. plan actions, risks and performance management. • In early March the scoping work for the new operating model was put on hold to allow staff time to prepare for and manage the COVID-19 pandemic. • Alongside this, the EPR meetings were also stood down to give staff more time to focus on COVID-19 related tasks. At present, there are no plans to resume the EPR meetings. • A new Transformation Steering Group has been established, with the first meeting held on 8 June 2020. This group will refresh our thinking and determine what our priorities will now be for the new operating model, in light of COVID-19.
R3c (SA18)	<p>Recommendation - Operational meetings</p> <p>To free up capacity for both executive and operational teams, and to enable a more joined up focus on the use of resources, the Health Board should streamline the number of holding to account (HTA) or performance review meetings with operational teams by:</p> <p>(b) aligning these meetings with management sessions contained within job plans for clinical directors to enable them to participate fully.</p>		

Ref	Management response	Completion date	Progress as at 9 June 2020
	<p><i>SA19 FEEDBACK - Medical representation at these meetings is still lacking. The newly appointed Deputy Medical Director for Acute Hospital Services is taking a lead identifying and streamlining which meetings require clinical directors and realigning job plans to allow them to attend meetings, such as the EPRs, which should improve medical attendance over time.</i></p> <p><i>Intended Benefit/Outcome –</i></p> <ol style="list-style-type: none"> 1. Increased capacity for both executive and operational teams. 2. Increased engagement from medical leads. 3. Improved visibility of executive teams across the Health Board. 4. A more streamlined focus on the use of resources. <p>Responsible Officers – Medical Director/Director of Operations</p> <p>The Deputy Medical Director for Acute Hospital Services is now in post and has been working to fill vacancies within the clinical leadership structure, which will help to strengthen medical representation at operational meetings. The Deputy Medical Director for Acute Hospital Services will communicate the need for job plans for those clinicians holding managerial and leadership positions to be robust and for protected time to be allocated to enable clinical director engagement with relevant executive and operational meetings. The job plans of clinical leads need to ensure that leadership responsibilities can be managed and prioritised accordingly. Details of meetings requiring attendance need to be regular and consistent with sufficient advance communication to be provided of any changes to meeting arrangements (at least 6 weeks if the change results in a clash with clinical commitments) to enable clinicians/medical leads to attend without the risk of any disruption to service provision.</p>	<p>April 2020 December 2020</p>	<p>The Deputy Medical Director for Acute Services has identified time for Clinical Directors to attend managerial meetings. However this does not currently align with the current or proposed schedule for ETPRs. Performance management arrangements are currently under review by the Director of Planning, Performance, Informatics and Commissioning in conjunction with the CEO, Director of Operations and Director of Finance. Work will continue over the next few weeks to determine how this can best be implemented.</p> <p><i>The review of all job plans in the current and post-COVID-19 period is being agreed with Clinical Leads/Hospital Directors. The allocation of time to allow Clinical Directors and Senior leaders to attend management meetings (including EPR's) will be included within this process.</i></p>
<p>R4 (SA18)</p>	<p>Recommendation - Strategic planning</p> <p>To ensure the delivery of its health and care strategy, the Health Board should seek to resolve the outstanding request for funding from the Welsh Government to support the capacity needed to implement the strategy with the intended timescales.</p> <p><i>SA19 FEEDBACK - Funding relating to costs incurred in 2018-19 was agreed by Welsh Government in December 2018 and allocation received in January 2019. Recurring funding for 2019-20 has not yet been confirmed.</i></p>		

Ref	Management response	Completion date	Progress as at 9 June 2020
	<p>Intended Outcome/benefit –</p> <ol style="list-style-type: none"> 1. Increased capacity to implement the Health and Care Strategy. 2. Reduced risk of delays to implementing the strategy. 		
	<p>Responsible Officer – Director of Finance</p> <p>The Health Board have identified that funding of £4.4m per annum is required in total in order to provide support to deliver the programme of change and to undertake work to develop the Programme Business Case.</p> <p>Welsh Government have confirmed that funding of £1.6m will be made available to the Health Board. This leaves a shortfall of £2.8m, which will need to be addressed as part of our planning deliberations.</p>	<p>March 2020</p>	<p>Work still underway.</p> <p>The financial consequences of the requirement have been incorporated into our financial plans. Discussions on this year's funding envelope for the Health Board are ongoing with WG in view of the ongoing COVID-19 pandemic. Suggest recommendation is closed.</p>

Completed Recommendations (previously reported to ARAC)

Ref	Management response	Completion date	Completed as at 9 June 2020
R8 (SA17)	<i>Recommendation - To show leadership, visibility of the executive directors across the Health Board needs to extend to all directors and consideration needs to be made to holding meetings with operational teams away from the headquarters. (See R3b SA18 below)</i>		
R3b (SA18)	<p>Recommendation - Operational meetings</p> <p>To free up capacity for both executive and operational teams, and to enable a more joined up focus on the use of resources, the Health Board should streamline the number of holding to account (HTA) or performance review meetings with operational teams by:</p> <p>(c) reviewing the location of these meetings, to improve visibility of the executive team.</p> <p><i>SA19 FEEDBACK - The executive team are now much more visible through the EPRs and the Transformation Programme, although executive visibility in front-line operational services could be further strengthened as meetings continue to be held at headquarters.</i></p>		
	<p><i>Intended Benefit/Outcome –</i></p> <ol style="list-style-type: none"> 1. Increased capacity for both executive and operational teams. 2. Increased engagement from medical leads. 3. Improved visibility of executive teams across the Health Board. 4. A more streamlined focus on the use of resources. 		
	Responsible Officers – Director of Planning, Performance & Commissioning/Director of Operations		
	<p>Due to car parking issues, corporate meetings will not be routinely held at our hospitals in order to protect as many parking spaces as possible for our patients and hospital staff. Therefore, the Executive Team Performance Reviews / Holding To Account meetings (and their successor (see SA18 3b below)) will continue to be held in Hafan Derwen, Carmarthen.</p> <p>However, the Health Board agrees Executive Directors need to be visible across the organisation and, as recognised in the 2019 Structured Assessment, steps have already been taken to improve and we continue to build on this.</p>	<p>Completed</p> <p>(reported to ARAC Feb20)</p>	<ul style="list-style-type: none"> • There has been an increase in the number of Board walkabouts which has led to greater Executive Director and Independent Member presence across the organisation. Meeting dates for the coming months are: <ul style="list-style-type: none"> ○ 3rd February 2020 - Ward 5 PPH ○ 18th February 2020 - Ystwyth Ward, BGH ○ 10th March 2020 - PPH ○ 17th March 2020 – site to be confirmed ○ 1st April 2020 – site to be confirmed ○ 4th May 2020 – a.m. Carmarthenshire and p.m. GGH ○ 18th May 2020 - site to be confirmed (BGH or GGH)

Ref	Management response	Completion date	Completed as at 9 June 2020
			<p>These will continue further, with on 2-3 meetings per month already scheduled until May 2021.</p> <ul style="list-style-type: none"> • The Clinical Executive Directors and Director of Operations are visiting the acute sites: <ul style="list-style-type: none"> ○ 2nd December 2019 – Withybush General Hospital ○ 16th January 2020 – Glangwili General Hospital ○ 14th February 2020 – Prince Philip Hospital <p>Date to be confirmed – Bronglais General Hospital</p>

Management response

Report title: Structured Assessment

Completion date: December 2019

Document reference: 1661A2019-20

Ref	Management response	Completion date	Progress as at 31 st January 2020
R1	<p>Recommendation (High Priority)</p> <p>We found scope to reduce potential duplication of assurance between the Business Planning and Performance Assurance Committee (BPPAC) with the Health and Care Strategy Delivery Group (HCSDG). The Health Board should clarify the reporting lines of the Health and Care Strategy Delivery Group to ensure that the risk of duplication of assurance is mitigated.</p>		
	<p><i>Intended Benefit/Outcome</i> – Simplified lines of assurance in relation to delivery of the Health Board’s plans, which reduces duplication between HCSDG and BPPAC</p>		
	<p>Responsible Officers – Board Secretary</p> <p>The Board agreed the new governance arrangements at its meeting held on 30th January 2020. The paper clearly detailed the roles of the new BPPAC and the HCSDG (HCSDG will report to Executive Team instead of the Board which will reduce the risk of duplication with BPPAC). Terms of Reference and the Scheme of Delegation in terms of matters delegated to Committees will be reviewed and revised and presented to the Board in March 2020. The new arrangements will come into operation from 1st April 2020.</p>	<p>April 2020</p>	<p>As a result of COVID-19, the new governance arrangements have been implemented in a phased approach from 1 April 2020. The new BPPAC, the People, Planning and Performance Assurance Committee (PPPAC) will have its first meeting on 30 June 2020. Terms of Reference for all assurance Committees PPPAC were reviewed and revised and approved by the Board in March 2020. The Scheme of Delegation in terms of matters delegated to Committees was also reviewed and revised and presented to the Board in April 2020.</p> <p>A Transformation Steering Group has been established, reporting directly to the Board under the leadership of the Chief Executive, to provide advice to the Board on changes to be adopted into current services and ways to enhance future plans. This is intended to become a permanent feature of the Health Board arrangements and will be a key driver of our ambition to deliver our social model for health. Its inaugural meeting was held on 8 June 2020.</p>

Ref	Management response	Completion date	Progress as at 31 st January 2020
R2	<p>Recommendation (High Priority)</p> <p>We found that the Executive Performance Reviews (EPRs) do not apply to corporate directorates, with the exception of Estates. The Health Board should apply EPRs to corporate directorates not already covered within the process.</p> <p><i>Intended Benefit/Outcome – Consistent performance management processes across both clinical and non-clinical areas</i></p> <p>Responsible Officers – Director of Planning, Performance and Commissioning</p> <p>The Health Board agrees corporate directorates should also be included in the EPRs. The Executive continue to have discussions relating to performance management arrangements as part of the Board governance review and review of managerial arrangements in the Operations Directorate. A new Performance Management Assurance Framework will be presented to Board for approval on 26th March 2020, this will include the merger of the existing EPRs and Holding To Account meetings as well as the inclusion of corporate teams in the performance review process. A schedule and agenda outline will be developed for the new meetings by 31st March 2020. The Principal Project Manager for Turnaround and the Performance Manager will lead on developing the new performance review schedule and agenda.</p>	<p>April 2020 Not Known</p>	<ul style="list-style-type: none"> On 17 February 2020 the CEO led a workshop with Executive Team members / nominated deputies and presented a proposed new operating model for 2020/21. The new model was structured around our three year plan actions, organisational risks and performance management. The model was health board wide i.e. included corporate directorates. Following the workshop, work began on scoping performance triggers plus what groups were already in place and what new groups were needed to oversee the key elements of the new operating model i.e. plan actions, risks and performance management. In early March the scoping work for the new operating model was put on hold to allow staff time to prepare for and manage the COVID-19 pandemic. Alongside this, the EPR meetings were also stood down to give staff more time to focus on COVID-19 related tasks. At present there are no plans to resume the EPR meetings. <p>A new Transformation Steering Group has been established, with the first meeting scheduled for 8 June 2020. This group will refresh our thinking and determine what our priorities will now be for the new operating model, in light of COVID-19.</p>
R3	<p>Recommendation (High Priority)</p> <p>We found that there is scope to empower the wider workforce to contribute to the transformational change agenda. The Health Board should implement practical solutions to engage the wider workforce in the change programme, for example by identifying change champions within individual services.</p> <p><i>Intended Benefit/Outcome – Increased engagement from staff in the transformational change agenda</i></p> <p>Responsible Officers – Medical Director/Director of Planning, Performance and Commissioning</p>		

Ref	Management response	Completion date	Progress as at 31 st January 2020
	<ul style="list-style-type: none"> (Medical Director) Through the appointment of the clinical team within the TPO there is a focused direction of reaching the workforce to become engaged in delivering the Strategy. Leads are attending meetings within service areas to increase awareness, understanding and help staff to become involved. 	April 2020	
	<ul style="list-style-type: none"> (Medical Director) Formation of a core clinical group, comprising of the Associate Medical Director of Acute Services, Associate Medical Director of Primary Care, Associate Medical Director Transformation, Lead for Therapies & Health Sciences, Lead for Nursing, Medicines Management Lead. 	February 2020	
	<ul style="list-style-type: none"> (Medical Director) Prioritise the re-formation of a wider clinical reference group to support the clinically led delivery of the Strategy with a programme of regular workshops to test / challenge and inform the delivery of the strategic programmes. 	June 2020	
	<ul style="list-style-type: none"> (Director of Planning, Performance and Commissioning) Re-introduce workplace champions (developed during the Transforming Clinical Services programme Discover and Design phases) in 2020 for delivery of the Strategy. 	July 2020	
	<ul style="list-style-type: none"> (Director of Planning, Performance and Commissioning) Development of the use of a newsletter to engage with wider staff to empower them to contact clinical and project leads and become involved transformation projects and in champion roles. 	June 2020	
	<ul style="list-style-type: none"> (Director of Nursing, Quality and Patient Experience) Cohort 2 of the EQliP programme have ensured projects identified are supportive of teams delivering change projects in line with the Strategic direction. 	April 2020 Not Known	Cohort 2 of EQliP has been placed on hold due to COVID. The projects initially chosen by selected teams will now need to be reviewed to ensure their continued relevance in light of service changes associated with the operational response to COVID and how services will be 'reset'. Team projects will align to improvements which reflect the UHB Risk Register and/or the

Ref	Management response	Completion date	Progress as at 31 st January 2020
			strategic priorities. The start date for cohort 2 will be determined by the level of COVID related service activity.
	<ul style="list-style-type: none"> (Director of Planning, Performance and Commissioning) Development of the “Hywel Dda Way”, a single gateway-managed process, standardised for all change programmes, large and small, that wraps governance and control around delivery whilst supporting all staff to be involved and lead in change; Providing project buddy system to advise and guide change projects, alongside appropriate project management skills development and training. 	July 2020	
	<ul style="list-style-type: none"> (Director of Workforce and OD) Continuation of leadership development programme delivery for: System Level Leadership for Improvement (SLLIP), Aspiring Medical Leaders Programme (AMLP), Medical Leadership Forum (MLF), Senior Nurse Leadership Development (STAR), with alignment to strategy direction and feeding in programme cohort graduates into involvement on priority change projects 	April 2020	All leadership programmes continue to be delivered and expanded. A workshop was held with all participants on the leadership programmes to discuss how they could become more involved in shaping the delivery of the strategy moving forward. Regrettably COVID-19 has impacted on these programmes. However regular contact and support has been provided to participants as well as coaching provision to enable them to continue on their leadership journey. Discussions are underway to establish new ways of connectivity to enable group learning to be reviewed later this year.