



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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	22 February 2022
TEITL YR ADRODDIAD: TITLE OF REPORT:	Planning Objectives Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Director of Strategic Development and Operational Planning Director of Nursing, Quality and Patient Experience Director of Operations Director of Workforce and OD Medical Director Director of Primary Care, Community and Long Term Care Director of Therapies and Health Science Board Secretary
SWYDDOG ADRODD: REPORTING OFFICER:	Charlotte Beare, Head of Assurance and Risk

**Pwrpas yr Adroddiad (dewiswch fel yn addas)
Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

As part of the Annual Recovery Plan for 2021/22, the Board agreed a refreshed set of Strategic Objectives that set out the aims of the organisation *ie.* the horizon that the HB is driving towards over the long term, as well as a set of specific, measurable Planning Objectives, which move the organisation towards that horizon over the next three years.

Each of the Planning Objectives has an Executive Lead and this paper is to provide the Audit and Risk Assurance Committee (ARAC) with an update on the progress made in the delivery of the Planning Objectives aligned to this Committee, under the Executive Leadership of the following Directors, for onward assurance to the Board:

- Director of Strategic Development and Operational Planning
- Director of Nursing, Quality and Patient Experience
- Director of Operations
- Director of Workforce and OD
- Medical Director
- Director of Primary Care, Community and Long Term Care
- Director of Therapies and Health Science
- Board Secretary

Cefndir / Background

This report is presented as an update to demonstrate where progress has been made in delivering those Planning Objectives aligned to ARAC.

There are 3 Planning Objectives in total:

- 3B *Delivering Regulatory Requirements*
- 3F *Board Assurance Framework*
- 3H *Planning Objective Delivery Learning*

Asesiad / Assessment

Appendix 1 (attached) provides an update on each of the Planning Objectives aligned to ARAC, identifying their current status, whether these are achieving/not achieving against their key deliverables, together with a summary of progress to date.

A summary of this information is set out below:

Planning Objectives	Lead Executive	Status	If Planning Objective is 'behind'
3B	<ul style="list-style-type: none">• Director of Strategic Development and Operational Planning• Director of Nursing, Quality and Patient Experience• Director of Operations• Director of Workforce and OD• Medical Director• Director of Primary Care, Community and Long Term Care• Director of Therapies and Health Science• Board Secretary	Behind	<p>This Planning Objective was not included in the proposed set of Planning Objectives for 2022/23 submitted to Board in January 2022.</p> <p>There is a process in place for how we manage, track, escalate and report on compliance on requirements/ recommendations from our auditors, inspectorates, regulators, with assurance on this process received through the annual Structured Assessment process, this is part of routine 'business as usual' work.</p>
3F	Board Secretary	Completed	N/A
3H	Board Secretary	Deferred to 2022/23	N/A

Argymhelliad / Recommendation

The Audit and Risk Assurance Committee is asked to receive an assurance on the current position in regards to progress on the Planning Objectives aligned to ARAC, in order to onwardly assure the Board where Planning Objectives are progressing and are on target, and to raise any concerns where Planning Objectives are identified as behind in their status and/or not achieving against their key deliverables.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.4.4 Receive an assurance on delivery against relevant Planning Objectives aligned to the Committee in accordance with Board approved timescales, as set out in HDdUHB's Annual Plan.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	All Health & Care Standards Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives:	9. All HDdUHB Well-being Objectives apply

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	3 Year Plan and Annual Plan Decisions made by the Board since 2017-18 Recent <i>Discover</i> report, published in July 2020 Gold Command requirements for COVID-19 Input from the Executive Team Papers provided to Public Board in September 2020 and January 2022
Rhestr Termiau: Glossary of Terms:	AW – Audit Wales CHC – Community Health Council CIW – Care Inspectorate Wales DU – Delivery Unit GMC – General Medical Council HCPC – Health and Care Professions Council HEIW – Health Education and Improvement Wales HIW – Healthcare Inspectorate Wales HSE – Health & Safety Executive IA – Internal Audit LMC – Local Medical Committee MWWF&R – Mid & West Wales Fire & Rescue PSOW – Public Services Ombudsman Wales RCs – Royal Colleges
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg: Parties / Committees consulted prior to Audit and Risk Assurance Committee:	Public Board - September 2020 and January 2022 Executive Team

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Any financial impacts and considerations are identified in the report

Ansawdd / Gofal Claf: Quality / Patient Care:	Any issues are identified in the report
Gweithlu: Workforce:	Any issues are identified in the report
Risg: Risk:	Consideration and focus on risk is inherent within the report. A sound system of internal control helps to ensure any risks are identified, assessed and managed
Cyfreithiol: Legal:	Any issues are identified in the report
Enw Da: Reputational:	Any issues are identified in the report
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Not applicable

APPENDIX 1 – Update of Planning Objectives aligned to ARAC as at 20th January 2022

PO Ref	Planning Objective	Executive Lead	Date of Completion of PO	Current Status of achieving PO within Completion Date (Delete as appropriate)	<ul style="list-style-type: none"> • Summary of Progress to date (including barriers to delivery) • For actions behind schedule, please provide an explanation • For actions behind schedule, what quarter will these now be achieved
3B	Over the next 3 years to deliver the requirements arising from our regulators, WG and professional bodies	Jo Wilson (<i>AW and IA</i>) Lee Davies (<i>CHC</i>) Mandy Rayani (<i>CIW/HIW, Coroner, HSE, PSOW</i>) Andrew Carruthers (<i>DU & MWWF&R</i>) Lisa Gostling/Phil Kloer (<i>HEIW</i>) Phil Kloer (<i>peer reviews, RCs, GMC</i>) Jill Paterson (<i>GMC, LMC, other Independent contractors</i>) Alison Shakeshaft (<i>HCPC</i>)	31/03/2024	Behind	This Planning Objective was not included in the proposed set of Planning Objectives for 2022/23 submitted to Board in January 2022. There is a process in place for how we manage, track, escalate and report on compliance on requirements/ recommendations from our auditors, inspectorates, regulators, with assurance on this process received through the annual Structured Assessment process, this is part of routine 'business as usual' work.
3F	Develop a Board Assurance Framework to support the delivery of the Health Board strategic objectives over the 3 years from April 2021 supported by a clear, comprehensive and continuously updated Risk Register	Jo Wilson	30/09/21	Completed	The refreshed Board Assurance Framework Dashboard was presented to the Board in September 2021.

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3H	From April 2021 establish a process to gather and disseminate learning from the delivery of all Planning Objectives as part of the organisation's formal governance systems with equal importance placed on this as is placed on risk management and assurance. This learning will come from both within the organisation as it implements objectives and from our local population in their experience of the services delivered as a result of the objective being achieved.	Jo Wilson	N/A	Deferred	The Board Secretary has met with CEO and agreed a way forward for the new financial year.