



PWYLLGOR DATBLYGU STRATEGOL A CHYFLENWI GWEITHREDOL STRATEGIC DEVELOPMENT AND OPERATIONAL DELIVERY COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	15 December 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Strategic Development and Operational Delivery Committee (SDODC) Self-Assessment 2020/21– Action Plan
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mr Maynard Davies, SDODC Chair Mr Lee Davies, Director of Strategic Development & Operational Planning
SWYDDOG ADRODD: REPORTING OFFICER:	Mrs Joanne Wilson, Board Secretary Ms Karen Richardson, Corporate & Partnership

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 purpose of this report is to present to the Strategic Development and Operational Delivery Committee (SDODC) progress on the SDODC Self-Assessment 2020/21– Action Plan, and to consider whether this meets the expectations of the Committee.

Cefndir / Background

Members of the People, Planning & Performance Assurance Committee (PPPAC) (the predecessor to SDODC) completed a questionnaire to consider the Committee's effectiveness, during 2020/21.

For 2020/21, a new approach to self-assessment had been introduced to elicit greater feedback in order to shape and influence the agenda of the SDODC going forward.

In addition to specific domain questions, comments were invited on any improvements for consideration to assist the Committee in drawing up its own plan for improvement. The recognition of what has worked well has been a helpful platform to move forward, and the greater focus on organisational risks to inform the agenda and work of the Committee will enable a further move towards providing a strategic outlook.

Asesiad / Assessment

Each question started with a statement, which set out 'what good looks like'. In response, Members described at least one example from 2020/21 in which the Committee had been effective in this domain and shared at least one idea for improving the Committee's effectiveness in this domain over the coming year.

The responses included a number of useful suggestions regarding ways in which the governance and operation of PODCC might be improved. Following presentation of the

responses and suggested improvements to the PPPAC meeting on 24th June 2021, it was agreed that an update on the progress of actions be presented to a future meeting of the PODCC.

Question 1

The Committee seeks assurances in regard to compliance with legislation, guidance and best practice around the workforce and organisational development agenda; plans put forward for the approval of the Health Board for improving the local population's health, 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; the overall performance and delivery against Health Board plans and objectives, including delivery of key targets and making recommendations for action to continuously improve the performance of the organisation, particularly where performance is showing deterioration or there are issues of concern. It constantly seeks to strengthen the ways in which it achieves this, challenging itself to avoid tokenism, welcome contributions, engage with criticism, account for and learn from failings.

Suggestions Made for Improvement	Health Board Response	Response
The Committee could ask for "deep dives" in areas of concern to better understand what is being done/could be done to improve performance.	Propose that this is added into the new Committee Terms of Reference (ToRs).	Complete – Included within Section 3.7 of the SDODC ToRs.
Greater clarity and expectations of timelines and action plans	The newly developed guidance on report writing will be shared with all report writers following issue of the draft agenda and call for papers.	Complete
Scrutiny and oversight of major infrastructure projects where risk may be increasing because of delays and with patient quality and safety (and financial) implications impacting on health board services.	Propose that this is a standing agenda item on the new Committee.	Included within the Planning Objectives Update presented to each meeting.
	Reporting arrangements will also be enhanced following the review being undertaken by the Director of Strategic Development and Operational Planning.	The review has been presented to the Audit & Risk Assurance Committee (ARAC) on 19 th October 2021. The management response which details the improvements that need to be made to develop arrangements, will be presented to ARAC on 14 th December 2021.
To ensure the Committee's approach to seeking assurance keeps pace with the Health Board's highly dynamic	This area will be reviewed further through the Committee Chairs' meeting and through	Complete - Committee Chairs' meeting's commenced September 2021.

operating environment, in which ambiguity and uncertainty are the key features. Traditional forms of assurance are increasingly unfit for purpose in this context. A practical example would be to pursue the need to provide performance analysis in intelligent ways that enable well-informed decision-making (SPC improvements).	discussion with the Chair of the Committee and the Executive Lead.	
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Question 2

The Committee works strategically. This means it aligns its work with the Health Board’s overarching strategic priorities and delivery plans. It commissions work in support of those priorities, providing the Board with the assurance necessary to have confidence in its ability to deliver.

Suggestions Made for Improvement	Health Board Response	Response
Should papers include some reference to the University Health Boards (UHB) 6 strategic objectives and which ones are affected by the paper.	All papers presented will be aligned to the Health Board’s Strategic Objectives with assurance on delivery and gaps in control incorporated into the Board Assurance Framework.	Complete
Delivery of new planning objectives will be driven by a new Sub-Committee ensuring oversight of all objectives.	The new Committee structure ensures the Committees are aligned to the Health Board’s Planning Objectives.	The SDODC ToRs include reference to the Health Board’s Planning Objectives. In addition an update on progress will be a standing agenda item for SDODC.

Question 3

The Committee works systemically. This means it works effectively with the Board, other Board Level Committees, its sub-committees and other relevant parts of the organisation’s governance and assurance system, in order to ensure that we spot connections and themes which have an impact on people, planning and performance. It guards against silo working and gives balanced and meaningful ‘air time’ to the full range of the Health Board’s service portfolio.

Suggestions Made for Improvement	Health Board Response	Response
A regular review of agendas between Committee Chairs to ensure areas of mutual concern are identified and a single committee takes the lead.	This will be an item for consideration at the Committee Chairs’ meeting which will be	Complete - Committee Chairs’ meeting’s commenced September 2021.

	established in the near future.	
Rather than same papers going to multiple committees, the author needs to highlight the impact for that committee to ensure the correct discussions take place in the right committee.	The new Committee Chairs' meetings will ensure this is taken forward. In addition, the rationale for reports being presented to Committees should be confirmed during agenda setting meetings. Further support will be provided by issuing guidance on report writing.	All actions complete. Committee Chairs' meeting's commenced September 2021.
Where there is a need for assurance from a PPPAC perspective and a QSEAC perspective – we need to discuss how these two committees work better together.	This will be an item for consideration at the Committee Chairs' meeting which will be established in the near future.	Complete – items for consideration are being monitored at the Committee Chairs' meetings which commenced September 2021.
This connection will be strengthened further as performance analysis improves and shines a much brighter light on interdependent issues e.g., deteriorating access (waits) and their impact on quality and safety outcomes	Propose monitoring by regular updates to the Committee. Links also to the work undertaken at Board Seminars in regard to the development of performance management arrangements.	Complete - the Performance Update presented to each meeting includes this data.

Question 4

The Committee works intelligently. This means it draws on a diverse range of reliable data (both quantitative and qualitative) to triangulate information and reveal themes or patterns in regard to people, planning and performance. It uses a dashboard of key quality indicators to inform improvement. This relies on accurate interpretation of the data, which requires skill from both the providers and readers of the data.

Suggestions Made for Improvement	Health Board Response	Response
Utilise Statistical Process Control (SPC) charts data presentation.	Links to the work undertaken at Board Seminar on the development of performance management arrangements and the transition to SPC reporting. This will be a standing agenda item for the new Committee.	Complete - the Performance Update presented to each meeting includes this data.
Continue the move to the use of SPCs and improve the targeting of deep dives to those areas	Links to the work undertaken at Board Seminar regarding the	Complete - the Performance Update

where there is obviously a systemic failure.	development of performance management arrangements and the transition to SPC reporting. This will be a standing agenda item for the new Committee.	presented to each meeting includes this data.
Although progress with the Integrated Performance Assurance Report (IPAR) this year has been good, it seemed to take a long time to reach the decision to undertake this review. More rapid recognition of the need for change where possible would be good.	Links to the work undertaken at Board Seminar on the development of performance management arrangements and the transition to SPC reporting.	Complete - the Performance Update presented to each meeting includes this data.
Embed and consolidate the early improvements made towards SPC implementation	Links to the work undertaken at Board Seminar on the development of performance management arrangements and the transition to SPC reporting. This will be a standing agenda item for the new Committee.	Complete - the Performance Update presented to each meeting includes this data.

Question 5

The Committee facilitates learning. This means it works openly and honestly, encouraging contributions from attendees which are a fair and reasonable reflection of the realities faced across all services. The Chair sets the leadership tone and is supported by other Independent Members and the Executive Directors to hold this learning space. The style is one of high support/high challenge.

Suggestions Made for Improvement	Health Board Response	Response
<p>Reports have started to come in more concise now, if that can be maintained it would be more effective for meetings in the future.</p> <p>When an item of importance is being brought to the Committee, perhaps include a short presentation giving a better understanding of the way the organisation is working in the area to allow the Committee to learn more about the organisation and intelligently act on the report.</p>	<p>This area will be reviewed further through the Committee Chairs' meeting. All reports should provide sufficient detail outlining the rationale for being presented to the Committee in accordance with newly developed guidance on report writing. Further to this, the presenter, should outline the key points for consideration in accordance with the</p>	<p>All actions complete.</p> <p>Items for consideration are being monitored at the Committee Chairs' meeting's which commenced in September 2021.</p>

<p>Sometimes difficult for more detailed consideration due to timing of meeting and size of agenda.</p> <p>There is scope in all committees to get smarter at 'joining the dots' – identifying and scrutinising issues which are connected and as such interact with each other when change is made somewhere within the system.</p>	<p>handy hints guide for presenters.</p>	
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Question 6

The Committee champions continuous improvement. This means it uses an improvement mindset, as well as methodologies, which enable it to lead and oversee a clear journey of improvement in respect of the Health Board's Three Year Plan; Workforce & Organisational Development Strategy and Enabling Plan; and Performance Management Framework.

Suggestions Made for Improvement	Health Board Response	Response
<p>Should the Committee ask that all papers answer the question "What improvements do the actions described in the paper bring to the organisation." It may be that it just improves the life of one person, but there should be a positive outcome otherwise why are we spending time doing it.</p>	<p>Where appropriate, improvements should be outlined within the report. However, not all reports to Committees are linked to improvements; a number are required on statutory matters and therefore are legally required to be presented.</p>	<p>Where relevant, report writers have been issued guidance on report writing to ensure that they provide sufficient detail for the Committee.</p>
<p>Improve the quality of presented papers by the use of more pertinent performance measures e.g., run charts, SPC etc.</p>	<p>Links to the work undertaken at Board Seminar on the development of performance management arrangements and the transition to SPC reporting. This will be a standing agenda item for the new Committee.</p>	<p>Complete - the Performance Update presented to each meeting includes this data.</p>
<p>The rigour of continuous improvement is not yet embedded in the Health Board's ways of working, and efforts are often disjointed. The Committee could usefully ask itself what contribution it might make to support this organisation-wide commitment.</p>	<p>Agreed. This area will be reviewed further through the Committee Chairs' meeting and further discussion with the Committee Chair and Lead Executive Director.</p>	<p>Complete - Committee Chairs' meetings commenced September 2021.</p>

Question 7

The Committee works proactively. This means it is organised in its workplan, sensitive to the dynamic environment in which the Health Board operates and searching in its enquiries. It is curious, and willing to pursue demanding issues in the interests of excellent patient care. It uses the organisation's risk management processes effectively to scrutinise risks and ensure that longstanding risks and issues do not become normalised or tolerated beyond the Board's risk appetite.

Suggestions Made for Improvement	Health Board Response	Response
To add weight to the need to take a long, hard look at the risk management processes that underpin the Board Assurance Framework (BAF), and challenge any process which tolerates 'intolerable' risks year after year (some of the risks have been scored above tolerance for many years – this is surely a broken approach).	A new approach with the BAF and risks assigned to Committees will support this. Further to this, it is the role of Committees to challenge where assurances in respect of any component are missing or inadequate. Any areas of significant concern should be escalated to the Board. The Health Board has a robust policy and procedure in place; compliance and ownership are required to be monitored.	Complete - the refreshed BAF was presented to the Board on 22 nd June 2021.
Many of the capital schemes are planned for years ahead – perhaps there should be a longer term (>1 year) workplan that identifies when an in depth progress report should be presented to PPPAC.	Reporting arrangements will also be enhanced following the review being undertaken by the Executive Director of Strategic Development and Operational Planning.	The review has been presented to ARAC on 19 th October 2021. The management response which details the improvements that need to be made to improve arrangements, will be presented to ARAC on 14 th December 2021.

Question 8

The Committee has sought to play a proactive role in the COVID-19 response, specifically in terms of assurance around the wellbeing of staff, readiness in terms of assurance on the workforce plan and the performance consequences relating to patient care and implications arising from it. It has made a range of adjustments to reflect the rapidly changing circumstances that the Health Board has faced. Even better if...?

Suggestions Made for Improvement	Health Board Response	Response
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<p>What learning points should we take with us post COVID-19?</p>	<p>Any learning points will be incorporated into the ToRs and Work Programme for the new Committees.</p>	<p>Complete – the revised Governance Arrangements and Committee ToRs were approved at the Board on 29th July 2021.</p>
<p>The collective mindset (not only methods) of the Committee keeps up with the highly dynamic and ambiguous context. Sometimes we are still searching for a level of assurance or risk reduction that is just not realistic.</p>	<p>This area will be reviewed further through the Committee Chairs' meeting.</p>	<p>Complete – continued monitoring will take place at the Committee Chairs' meeting's which commenced September 2021.</p>
<p>Committees don't need to be made up of lots of interested parties as a way of sharing information – needs to be have people there who can make decisions, discuss topics and engaging with other stakeholders continue to occur prior to Committees for views.</p>	<p>There will be a review of membership as part of the move to the new Committee governance structure, with a proposed reduction of key members identified in all ToRs, recognising these are assurance Committees with decisions being made at Board, and in accordance with, the scheme of delegation.</p>	<p>Complete – the revised Governance Arrangements and Committee ToRs were approved at Board on 29th July 2021.</p>
<p>The Hywel Dda supertanker has been surprisingly nimble and hasn't run aground in the extremely stormy waters of the past year. The crew cannot however continue to operate at this high pace without time to rest and recover properly. Parts of the tanker are also in urgent need of repair and refurbishment.</p>	<p>In terms of planning, this should be monitored by the new Committee.</p>	<p>Complete – included within the Performance Update, which is a standing agenda item for SDODC.</p>
<p>Good governance doesn't need to be bureaucratic. Nimble approaches can strengthen the quality of the conversation (lengthy process-driven papers are a comfort blanket, albeit a false comfort. Cutting back on papers amplifies the need for dialogue).</p>	<p>As demonstrated throughout the COVID-19 pandemic, governance arrangements have been more agile and this agility will be taken forward into the new governance framework. The new Committee Chairs' meetings, together with the newly developed guidance on report writing and presenting should also assist.</p>	<p>All actions complete.</p> <p>The revised Governance Arrangements and Committee ToRs were approved at Board on 29th July 2021.</p> <p>Committee Chairs' meeting's commenced September 2021.</p> <p>The Committee Services Officer includes the guidance on report writing,</p>

		when issuing the call for papers email.
<u>Argymhelliad / Recommendation</u>		
The Strategic Development & Operational Delivery Committee is requested to:		
<ul style="list-style-type: none"> Receive assurance that any actions from the SDODC Self-Assessment 2020/21 are being progressed within the agreed timescales. 		

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	10.5 The Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous self assessment and evaluation of the Committee's performance and operation, including that of any sub committees established.
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):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	SDODC Terms of Reference Published guidance from the Good Governance Institute
Rhestr Termiau: Glossary of Terms:	Included within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Datblygu Strategol a Chyflenwi Gweithredol:	SDODC Members PPPAC meeting on 24 th June 2021

Parties / Committees consulted prior to Strategic Development and Operational Delivery Committee:	
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Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Not applicable
Ansawdd / Gofal Claf: Quality / Patient Care:	Not applicable
Gweithlu: Workforce:	Not applicable
Risg: Risk:	Not applicable
Cyfreithiol: Legal:	Not applicable
Enw Da: Reputational:	Not applicable
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Not applicable