

PWYLLGOR ADNODDAU CYNALIADWY SUSTAINABLE RESOURCES COMMITTEE

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| DYDDIAD Y CYFARFOD: DATE OF MEETING: | 23 February 2022 |
| TEITL YR ADRODDIAD: TITLE OF REPORT: | Sustainable Resources Committee (SRC) Self-Assessment 2020/21 - Action Plan |
| CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR: | Winston Weir, Finance Committee Chair Huw Thomas, Executive Director of Finance |
| SWYDDOG ADRODD: REPORTING OFFICER: | Joanne Wilson, Board Secretary Karen Richardson, Corporate & Partnership Governance Officer |

**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 Sustainable Resources Committee (SRC) progress on the SRC Self-Assessment 2020/21 Action Plan, and to consider whether this meets the expectations of the Committee.

Cefndir / Background

Members of the Finance Committee (FC) (the predecessor to SRC) 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 SRC 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 SRC might be improved. Following presentation of the responses

and suggested improvements to the SRC meeting on 23rd August 2021, it was agreed that an update on the progress of actions be presented to a future meeting of the Committee.

Question 1

The Committee seeks assurances in regard to:

- Financial performance and delivery against Health Board (HB) financial plans and objectives, giving early warning of potential performance issues, making recommendations for action to continuously improve the financial position of the organisation, and focusing in detail on specific issues where financial performance is showing deterioration, or there are areas of concern.
- Financial and revenue consequences of investment planning (both short term and in relation to longer term sustainability) and the financial implications of major business cases, projects, and proposed investment decisions on behalf of the Board.
- The management of principal risks within the Board Assurance Framework and Corporate Risk Register allocated to the Committee (financial risks), providing assurance to the Board that risks are being managed effectively and that any areas of significant concern are reported.
- Regular review of contracts with key delivery partners, to ensure they continue to deliver value for money.
- The development and regular review of the financial performance management framework and reporting approach, ensuring that it includes meaningful, appropriate, integrated and timely performance data and clear commentary relating to the totality of the services for which the Board is responsible.
- The Committee constantly seeks to strengthen the ways in which it achieves this, challenging itself to avoid tokenism, welcoming contributions, engaging with criticism and accounting for and learning from failings.

| Suggestions Made for Improvement | Health Board Response | Response |
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| Develop a longer term timeframe for financial recovery. | This is linked to the HDdUHB Annual Recovery Plan, which will be the focus of discussion at the weekly Executive Team meetings. In addition as one of the planning objectives aligned to the SRC, this will be monitored on a regular basis by the Committee. | Deep Dive reports will be requested in a measured manner, whilst recognising the exceptional operational context arising from the health pandemic. This means that operational direct attendance at SRC may not always be possible. This is an area for further review going forward |
| Develop a clearer work plan which responds to: <ul style="list-style-type: none"> • Value, including Social Value and Foundational Economy • How we shift resources across the system | These four identified areas are all components of planning objectives that have been approved by the Board. Delivery against the planning objectives will be | The SRC Terms of Reference (ToRs) include reference to the Health Board's Planning Objectives, in addition to an update on progress, |

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| <ul style="list-style-type: none"> • Digital response • Commissioning response | <p>monitored on a regular basis at either SRC or Strategic Development & Operational Delivery Committee (SDODC).</p> | <p>which is a standing agenda item for SRC</p> |
| <p>Continue with in-depth scrutiny of specific areas, such as scrutiny of the contracts and financial arrangements for the Field Hospitals, but also carry out deep dive reviews into other areas.</p> | <p>Where risks or planning objectives aligned to the Committee are not delivering in accordance with their agreed timescales, a deep dive report would be presented.</p> | <p>Deep dive reports will be forward planned on the SRC work programme during the year as appropriate.</p> |
| <p>Use the monthly performance information to identify areas of concern and carry out deep dive reviews in areas of on-going concern.</p> | <p>As in the above, it is proposed to agree a schedule of deep dive reports at the next agenda setting meeting for the remainder of the year to be included within the Committee work plan.</p> | <p>As above</p> |
| <p>It is anticipated that during the coming year a speedy response to 'normal' will occur, with an improved focus on delivery of the Financial Plan, putting a spotlight on the Route Map to Financial Balance and the Committee's responsibility for providing assurance around the delivery of some of the HB's Strategic Objectives.</p> | <p>Whilst the new Committee structure ensures the Committees are aligned to the Health Board's strategic and planning objectives, the Committee will receive an assurance on any strategic and planning objectives linked to the successor Committee to the Finance Committee.</p> | <p>SRC has continued to scrutinise the delivery of the financial plan; in October and December 2021 and will continue to do so</p> |
| <p>There could be more detailed information provided about the revenue/ expenditure consequences of capital expenditure. This could be negative and positive. The Committee has discussed during the year the need to improve our understanding of benefits realisation. These need not always be hard financial outcomes, but it would be helpful to simply state how the benefits of a particular investment will show in performance or some other measure - not just financial. Some things may need to be</p> | <p>As part of the changes to the governance structure, this requested change to information reported to the Committee will be taken forward by the Director of Finance and the Finance Team.</p> | <p>The Capital Update Reports do not currently indicate the revenue consequences of this expenditure in future or current years</p> <p>Future Capital Reports will include revenue consequences. Benefits realisation assessments will also be concluded by the Planning Team and the benefits incorporated within the Health Board's Opportunities Framework</p> |

done because they are the right thing to be done - not just financially driven or expedient.

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 |
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| Develop a longer term timeframe for financial recovery. | This is linked to the HDdUHB Annual Recovery Plan, which will be the focus of discussion at the weekly Executive Team meetings. In addition as one of the planning objectives aligned to the SRC, this will be monitored on a regular basis by the Committee. | The SRC ToRs include reference to the Health Board's Planning Objectives, in addition to an update on progress, which is a standing agenda item for SRC. |
| Develop a clearer work plan which responds to: <ul style="list-style-type: none"> • Value, including Social Value and Foundational Economy • How we shift resources across the system • Digital response • Commissioning response | These four identified areas are all components of planning objectives that have been approved by the Board. Delivery against the planning objectives will be monitored on a regular basis at either SRC or SDODC. | As above |
| It will be important to ensure that there are realistic savings programmes in place but also more scrutiny of how the budget is spent efficiently. The alignment of the strategic objectives of the Health Board with the assurance work of each committee will improve the effectiveness of the Committee. The Committee has received some reports already on how the Health Board can be a driver/ value-provider for the local economy. There is probably more we should do in this arena. By improving the | This is already incorporated within the ethos of the planning objectives and has been subject to regular discussions at Board. | No response required |

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| economic wellbeing of our area we can help facilitate better-paid, more secure employment and act as a catalyst for change. These are potentially long term but far-reaching public health benefits. There is scope for greater focus on this with the identification of specific things the Health Board can do. | | |
| The Committee could receive reports from other committees, where Members of those committees feel that strategic goals are being hindered by financial concerns. | This will be an item for consideration at the Committee Chairs' meetings commencing in September 2021. | Work in progress - Committee Chairs' meeting's commenced September 2021. |
| Developing an effective reporting and monitoring arrangement for providing assurance to the Board regarding the delivery of a range of Strategic Objectives as part of the overall governance of the Annual Plan. | <p>This is linked to the HDdUHB Annual Recovery Plan, which will be a focus for discussion at the weekly Executive Team meetings in addition to discussions at Board Seminar throughout the year.</p> <p>The Executive Director of Strategic Development and Operational Planning is further developing the monitoring and reporting arrangements which will be utilised by all Committees in due course.</p> | The SRC ToRs include reference to the Health Board's Planning Objectives, in addition to an update on progress, which is a standing agenda item for SRC. For assurance, all Board level Committee's use a standard template to report progress on their assigned Planning Objectives. |

Question 3

The Committee works systemically. This means it works effectively with the Board, other Board Committees, its sub-groups and other relevant parts of the organisation's governance and assurance system, in order to ensure that connections and themes are identified which have an impact upon financial performance and financial strategy. It guards against 'silo' working. It gives balanced and meaningful 'air time' to the full range of the Health Board's finance portfolio.

| Suggestions Made for Improvement | Health Board Response | Response |
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| As the demarcation of portfolios becomes increasingly blurred (e.g. VBHC linking the Medical Director, Director of Finance and Director of Nursing, Quality and Patient Experience), there is an increasing opportunity for closer | Each planning objective has an identified Executive Director Lead who is responsible for delivery of the planning objective, and other Executive Directors will | The SRC ToRs include reference to the Health Board's Planning Objectives, in addition to an update on progress, which is a standing agenda item for SRC. For |

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| <p>working across Committees. We need to think about the best mechanism to do this (e.g. Board Seminars; how we use the Integrated Performance Assurance Report; role of Committee Chairs).</p> | <p>support the delivery where this is cross portfolio.</p> | <p>assurance, all Board level Committee's use a standard template to report progress on their assigned Planning Objectives.</p> |
| <p>By continuing to ensure that existing links (i.e., between VBHC and the Quality agenda) are maintained.</p> | <p>In agreement - propose regular updates are forward planned on to the Committee's work programme.</p> | <p>The SRC ToRs include reference to the roll out of Value Based Health Care (VBHC), and its links to the Health Board's Planning Objectives, which is a standing agenda item for SRC.</p> |
| <p>The Committee could establish more formal links with the other committees (possibly via shared membership) so that areas of financial concern can be more regularly passed to the Finance Committee for consideration.</p> | <p>Through Committee Chairs meetings, each Committee Chair could potentially highlight areas to other Committee Chairs to add to their annual work plan.</p> <p>Reports that impact upon the work programme of other Committees are already shared for information purposes. However, it is imperative that each Committee operates within its ToRs and avoids duplication of discussion.</p> | <p>Ongoing – Committee IMs are members of other committees SDODC, People & OD Committee, Health & Safety Committee, Audit, QSEC, Charitable Funds Committee. IMs read across financial issues from other committees to inform SRC and vice versa. Committee chairs meeting does not yet have formal reports between committees as this is picked up at Board meetings.</p> |
| <p>The Chair, Chief Executive and Board Secretary are looking again at the governance and sub-committee structures, including the relationship with the Improving Together agenda and the Strategic Enabling Group. This is with the intention (hopefully) of ensuring a greater, more integrated view of the Board's strategic agenda. It is anticipated that this work will also (sensibly) see 'performance' move from PPPAC to Finance Committee. However, the constant challenge the HB faces is to improve the quality of its short, medium and longer-term</p> | <p>This is an operational matter and therefore outside of the scope of the Committee's terms of reference. For assurance, the areas identified will be shared with the relevant Executive Director leads.</p> | <p>No response required.</p> |

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| <p>planning – in particular the ability to demonstrate a cohesive plan which connects money, workforce and activity in a way which ensures quality and avoids harm. This will require greater involvement and leadership of clinicians – something which has been lacking until now but which will need to be addressed.</p> | | |
| <p>There is probably scope for a periodic meeting of chairs of committees to provide a forum to discuss issues which may be of concern to each individual but which, because of the remote working or limited opportunity for informal discussion, may go unsaid. At the conclusion of each meeting there could be a stock-take as to whether there are any issues or discussions which could be shared with other committees which may be better placed to take forward, or at least to ensure the IMs on those committees are aware of the discussion which has taken place in Finance Committee. This may reduce any notion of silo working.</p> | <p>Already agreed, the Committee Chairs' meetings will commence in September 2021.</p> | <p>Complete - Committee Chairs' meetings commenced September 2021.</p> |

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 financial performance. It uses a dashboard of key indicators to monitor the performance of plans and initiatives in terms of financial and qualitative benefits. This relies upon the provision of accurate data, and upon accurate interpretation of the data provided.

| Suggestions Made for Improvement | Health Board Response | Response |
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| <p>More integration of all resources such as Transformation Funds, Integrated Care Fund, Cluster Funds as well as traditional budget allocations.</p> | <p>This is outside of the remit of the Committee's terms of reference. For information purposes, this is being taken forward by the HDdUHB Vice Chair as Chair of the Regional Partnership Board.</p> | <p>No response required</p> |
| <p>Not sure if it's possible, but could Statistical Process Control</p> | <p>Links to the work undertaken at Board</p> | <p>Complete - the Performance Update</p> |

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| (SPC) charts be used to improve the understanding of some spend areas? | Seminar on the development of performance management arrangements and the transition to SPC reporting. | presented to each meeting includes this data. |
| We have asked the Finance Team to develop a scorecard which demonstrates the interconnectedness of the various pieces of analysis and initiatives to ensure that they are all moving us in the right direction, initially towards successfully delivering the 2021-22 Annual Plan and longer-term strategic ambitions. | Propose that this is discussed at the next agenda setting meeting to agree a timescale for receiving the scorecard, and for this to be added to the Committee work plan. | The Finance Report is currently being reviewed to develop it alongside the performance report in a consistent fashion and to allow comparisons and judgements to be reached. This will utilise SPC reporting where appropriate and highlight risk areas and areas for deep-dive reviews. This will be completed in Q4 21/22 |
| The roll out of the use of SPC charts will enable the Committee to have a better understanding of issues affecting the Health Board, the areas for attention and type of attention required. | 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. |

Question 5

The Committee facilitates learning. This means it works openly and honestly, encouraging contributions from attendees which represent 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 Executive Members in facilitating and protecting this learning space. The style is based upon robust support/ robust challenge.

| Suggestions Made for Improvement | Health Board Response | Response |
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| Papers have sometimes been late, which doesn't allow IMs sufficient time for scrutiny. | Preparing papers for a monthly meeting has been challenging, therefore bi-monthly meetings should improve the timely dissemination of meeting papers. | The number of late papers has significantly reduced following the commencement of bi-monthly meetings. |
| Supporting the Executives in developing local economy initiatives and challenging the shared services approach where appropriate. | In agreement – Independent Members should hold the Executive to account for the delivery of the strategy; and offer purposeful, constructive | No response required. |

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| | scrutiny and challenge, where necessary. | |
| It would be good if presentations could be arranged to cover areas that are of concern to other committees but which have an impact on the financial position of the Health Board. This would help the Committee in its discussions on financial pressures. | Through Committee Chairs meetings, the Finance Committee Chair could potentially highlight areas to other Committee Chairs to add to the annual work plan. Reports that impact upon the work programme of other committees are already shared for information purposes. | Complete – items for consideration are being monitored at the Committee Chairs’ meeting’s which commenced September 2021. |
| The appointment of a new IM (Finance) plus a range of other new IMs, together with the need to urgently demonstrate that the Board is serious about achieving financial balance, will drive the Finance Committee to improve knowledge and awareness about the overall financial position and the hard choices that will need to be taken if we are to navigate our way through the next 3 to 5 years. | The new Committee structure ensures that Committees are aligned to the Health Board’s strategic and planning objectives, which should assist in this regard. | The SRC has considered the route map to financial balance in September, October and December 2021 as an ongoing item. There has been a Financial awareness session from Welsh Government in July 2021 and further opportunity for IMs to receive refresher training on finance. The focus on attaining financial balance remains an ongoing priority for SRC |
| In a non-judgemental way, it would be useful to focus/ carry out deep dives into parts of the organisation with the greatest challenges. As a mirror to that, it would also be good to look at those parts which have achieved the most progress, learn what they did and share it. | It is proposed to agree a schedule of deep dive reports at the next agenda setting meeting for the remainder of the year to be included within the Committee work plan. Each planning objective has an identified Executive Director Lead who is responsible for delivery of the planning objective, and other Executive Directors will support the delivery where this is cross portfolio. | Subsequent to this action, the SRC decided to consider a workshop/seminar style session where the option of deep dives will be discussed. |

Question 6

The Committee champions continuous improvement. This means it adopts a mindset and methodologies which enable it to lead and oversee a clear journey of improvement in respect of

the Health Board's Financial Strategy and delivery of Financial Balance over the medium-to-long term.

| Suggestions Made for Improvement | Health Board Response | Response |
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| <p>Carrying out/ commissioning deep dive reviews into individual service areas, seeking assurance of cross-organisational working being undertaken.</p> | <p>It is proposed to agree a schedule of deep dive reports at the next agenda setting meeting for the remainder of the year to be included within the Committee work plan.</p> <p>Each planning objective has an identified Executive Director Lead who is responsible for delivery of the planning objective, and other Executive Directors will support the delivery where this is cross portfolio.</p> | <p>SRC Deep Dive reports will be requested in a measured manner, whilst recognising the exceptional operational context arising from the health pandemic. This means that operational direct attendance at SRC may not always be possible. This is an area for further review going forward</p> |
| <p>Make better use of the Health Board's modelling expertise to analyse different options.</p> | <p>This is outside of the remit of the Committee's terms of reference, however could be taken forward by finance colleagues.</p> | <p>The Finance Report is currently being reviewed to develop it alongside the performance report in a consistent fashion and to allow comparisons and judgements to be reached. This will utilise SPC reporting where appropriate and highlight risk areas and areas for deep-dive reviews. This will be completed in Q4 21/22</p> |
| <p>More of the same, but with the added challenge of ensuring all IMs are up to speed and understand the significance of the various tools and models being developed to support and enable the delivery of the 2021-22 Annual Plan.</p> | <p>This will form part of the Board Seminar sessions that will focus on delivery of the 2021-22 Annual Plan.</p> | <p>Complete - updates on progress of the delivery of the 2021-22 Annual Plan are regularly received at Board Seminar sessions.</p> |
| <p>In a non-judgemental way it would be useful to focus upon/ conduct deep dives into parts of the organisation with the greatest challenges. As a mirror to that, it would also be good to look at those parts which have achieved the most progress, to</p> | <p>It is proposed to agree a schedule of deep dive reports at the next agenda setting meeting for the remainder of the year to be included within the Committee work plan.</p> | <p>SRC will seek to undertake deep dives in a measured manner, recognising the exceptional operational context. This is ongoing</p> |

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| learn what they did and to share it. | Where risks or planning objectives aligned to the Committee are not delivering in accordance with their agreed timescales, a deep dive report would be presented. | |
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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 achieving financial balance and in promoting the sustainable use of resources to achieve better outcomes. It uses the organisation’s risk management processes effectively to scrutinise risks and ensure that long-standing risks and issues do not become normalised or tolerated beyond the Board’s risk appetite.

| Suggestions Made for Improvement | Health Board Response | Response |
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| More time may be required to reflect on what Committee members want to see on future work plans for the Committee. It may be worth doing this as a workshop following this feedback. | <p>Whilst suggestions from Members are welcomed, these will need to be within the scope of the Committee’s terms of reference.</p> <p>For assurance, it has been agreed that any suggestions regarding topics for the work plan will be taken forward by the Chair and Executive Lead for consideration, which should negate the requirement for a workshop.</p> | No response required. |
| Using the risk register, areas of concern with financial implications could be escalated to the Committee. | It is proposed that the risk register is reviewed at agenda setting meetings, with a deep dive report added to the agenda from areas of concern. This process is currently undertaken at QSEAC agenda setting meetings. | No response required. |
| See answer to Q4. (i.e. We have asked the Finance Team to develop a scorecard which | It is proposed that this is discussed at the next agenda setting meeting to | No response required. |

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| demonstrates the interconnectedness of the various pieces of analysis and initiatives to ensure that they are all moving us in the right direction, initially towards successfully delivering the 2021-22 Annual Plan and longer-term strategic ambitions). | agree a timescale for receiving the scorecard and for this to be added to the Committee work plan. | |
| One of the biggest challenges facing the Health Board is the enormous backlog in Planned Care. The need to work towards financial balance, but at the same time addressing this, will be challenging to say the least. Looking at how finance will act as an enabler to do what we are charged with - <i>i.e.</i> to treat patients - should be an area that merits attention. | Additional funding to address the Planned Care backlog has now been received from WG, which will be included within the HDdUHB Annual Recovery Plan. For assurance, this will be a focus at the weekly Executive Team meetings in addition to discussions at Board Seminar throughout the year. | SRC have received report on the deployment of resources to address the backlog in Planned Care. SRC will continue to review and assure the board of the financial, contractual operational and long term commitment that this represents. This is ongoing |

Question 8

Are there any domains of effective assurance which you think are not covered above? What are they?

| Suggestions Made for Improvement | Health Board Response | Response |
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| Too soon to say. | No response required. | No response required. |
| <i>See answer to Q3. (i.e. the Chair, Chief Executive and Board Secretary are looking again at the governance and sub-committee structures, including the relationship with the Improving Together Agenda and Strategic Enabling Group. This is with the intention (hopefully) of ensuring a greater, more integrated view of the Board's strategic agenda. It is anticipated that this work will also (sensibly) see 'performance' move from PPAC to FC. However, the constant challenge the HB faces is to improve the quality of its short, medium and longer term, planning – in particular the ability to demonstrate a</i> | This is an operational matter and therefore outside of the scope of the Committee's terms of reference. For assurance, the areas identified will be shared with the relevant Executive Director leads. | Complete |

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| <p><i>cohesive plan which connects money, workforce and activity in way which ensures quality and avoids harm. This will require greater involvement and leadership of the clinicians – something which has been lacking until now but will need to be addressed).</i></p> | | |
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Question 9

Extraordinary question for 2020/21 relating to COVID-19 –

The Committee has sought to play a proactive role in the COVID-19 response, specifically in terms of assurance around financial risks and other implications arising from the pandemic. It has made a range of adjustments to reflect the rapidly changing circumstances that the Health Board has faced. In your view: Even better if...?

| Suggestions Made for Improvement | Health Board Response | Response |
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| <p>As we go into the new year, it's important that there is more attendance from key Executives. We need to better define who we need to attend and the frequency of their attendance. The Finance Committee meets each month, so attendance from Executives is quite an onerous requirement. We need to better define the work plan, which may then require Executives not to attend each meeting, but to come in a managed way.</p> | <p>As part of the changes to the governance structure, it has been proposed that Board Level Committees have a more streamlined membership, with EDs only attending to present their agenda items.</p> <p>Further to this, going forward, the SRC will meet on a bi-monthly basis in line with other Board assurance Committees.</p> | <p>No response required.</p> |
| <p>The HB had been able to directly control aspects of the above, (i.e. Test, Trace, Protect Strategy. Policy regarding Nursing and Care Homes. PPE procurement. Field Hospitals. Vaccination strategy), e.g. inviting people for vaccinations.</p> | <p>No response required.</p> | <p>No response required.</p> |
| <p>Not sure – I have some concerns about the lack of savings achieved, but nothing specific springs to mind.</p> | <p>For assurance, savings delivery and their requirements will be a standing agenda item on SRC.</p> | <p>Complete - the Opportunities and Savings Plan 2021/22 report includes progress in achieving the savings required to deliver the</p> |

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| | | financial year 2021/22 Annual Plan. |
| Hard to say in hindsight, given that the exigencies of the pandemic meant the normal rules of governance and assurance didn't really apply. However, I do think that relying on the Local Authorities to undertake the early running on the contractual/ financial arrangements for the Field Hospitals before handing the arrangements over left the HB financially exposed until it was clear what financial support would be available from WG. | The COVID-19 pandemic was unprecedented, however the decision to proceed with Field Hospital planning had been discussed and agreed at Board. | No response required. |
| We had the benefit of hindsight! | No response required. | No response required. |

What learning points should we take with us post-COVID?

| Suggestions Made for Improvement | Health Board Response | Response |
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| The importance of local resilience and supporting local communities to develop local solutions. | In agreement, however this is outside of the Committee's terms of reference. | No response required. |
| See previous answer (i.e. Hard to say in hindsight, given that the exigencies of the pandemic meant the normal rules of governance and assurance didn't really apply. However, I do think that relying on the Local Authorities to undertake the early running on the contractual/ financial arrangements for the Field Hospitals before handing the arrangements over left the HB financially exposed until it was clear what financial support would be available from WG). | The COVID-19 pandemic was unprecedented, with the Board required to act proactively in order to respond to rapidly changing modelling assumptions from WG. For assurance, the decision to proceed with Field Hospital planning had been discussed at Gold Command and agreed at Board. | No response required. |
| The speed at which we act is more within our control than we may think. | No response required. | No response required. |
| A greater focus on outcome rather than process. | This is linked to the HDdUHB Annual Recovery Plan, which will be a focus at the weekly Executive Team meetings in addition to discussions | Complete - updates on progress of the delivery of the 2021-22 Annual Plan are regularly received at Board Seminar sessions. |

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| | at Board Seminar throughout the year. | |
| Do we really need so many management consultants? It has taught us that we know the answers and what we may have lacked is the confidence to do what we thought we needed to do. | This is a workforce matter and therefore outside of the Committee's terms of reference. For assurance, the Executive Director of Workforce & Organisational Development is developing a new process for management Consultants and Strategic Advisors. | Consultants and Strategic Advisors are only commissioned in areas where additional expertise is required to support Executive Director's delivering the Health Board's Strategic Objectives. |
| Be receptive to ideas from others and learn from others but be confident in our own ability. Know when we know the answers, don't get others to look for the answer, but where appropriate, ask for help in delivering the answers if we lack the capacity to do so ourselves - but that should be a last resort, not a first resort. | In agreement, however this is outside of the remit of the Committee's terms of reference. | No response required. |

Argymhelliad / Recommendation

The Sustainable Resources Committee is requested to receive assurance that any actions from the SRC Self-Assessment 2020/21 are being progressed within the agreed timescales.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

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| Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor: | 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 |

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| 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: | |
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| Ar sail tystiolaeth: Evidence Base: | SRC Terms of Reference Published guidance from the Good Governance Institute |
| Rhestr Termau: Glossary of Terms: | Included within the body of the report |
| Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Adnoddau Cynaliadwy: Parties / Committees consulted prior to Sustainable Resources Committee: | FC/SRC Members SRC meeting on 23 rd August 2021 |

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

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|------------------------------------|----------------|
| Enw Da: Reputational: | Not applicable |
| Gyfrinachedd: Privacy: | Not applicable |
| Cydraddoldeb: Equality: | Not applicable |