



**CYFARFOD BWRDD PRIFYSGOL IECHYD
UNIVERSITY HEALTH BOARD MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	27 May 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Maintaining Good Governance COVID-19
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Maria Battle, Chairman Steve Moore, Chief Executive Officer
SWYDDOG ADRODD: REPORTING OFFICER:	Maria Battle, Chairman Steve Moore, Chief Executive Officer

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Trafodaeth/For Discussion

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

This paper updates the previous Maintaining Good Governance COVID-19 report to Board in March 2021, setting out the Health Board's approach to ensuring the appropriate level of Board oversight and scrutiny to discharge its responsibilities effectively, whilst recognising the reality of Executive focus and time constraints during the COVID-19 pandemic.

The paper also provides an update on the report presented to Board in March 2021 regarding the approach to managing risk and outstanding recommendations from auditors, inspectorates and regulators by the Health Board during the pandemic.

It was always intended that the approach set out in the previous reports would remain under review by the Chair, Chief Executive and Board Secretary; however, this will now represent the final Maintaining Good Governance COVID-19 report to Board, as the Health Board proposes to stand down its COVID-19 Command and Control structure and consolidate this into revised formal governance arrangements in light of discussions held at Board Seminar on 15th April 2021. These new arrangements will be based upon lessons learned from the streamlining of assurance structures necessarily undertaken in response to the COVID-19 pandemic, and to align structures more closely to the Strategic and Planning Objectives set out in HDdUHB's Annual Plan.

The Board is therefore asked to note this update and support the approach set out in this final Maintaining Good Governance COVID-19 report.

Cefndir / Background

The Board's fundamental role and purpose has not changed. It must require, and receive, positive assurance, not only on service preparedness and response but also on clinical leadership, engagement and ownership of developing plans; on the health and wellbeing of staff; on proactive, meaningful and effective communication with staff at all levels and on health and care system preparedness.

This updated report sets out the Board's revised approach towards ensuring the appropriate level of Board oversight and scrutiny to discharge its responsibilities effectively and its

proposed future governance arrangements for the Board's assurance Committees, aligning these more closely to the Strategic and Planning Objectives set out in HDdUHB's Annual Plan.

Asesiad / Assessment

The previous reports to Board set out in detail the proposed ways of working and governance principles, and set out below is an update on the decision-making arrangements, both currently in place and those newly proposed, across the Board and its Board assurance Committees:

Decision Making – in respect of the changes made to HDdUHB's Standing Orders in response to the National Health Service (Temporary Disapplication of Tenure of Office) (Wales) (Coronavirus) Regulations 2020 dated 5th July 2020 and subsequently approved by the Board in July 2020, these ceased to apply on 31st March 2021.

Welsh Government (WG) has also confirmed that many of the governance principles agreed at the start of the COVID-19 pandemic, set out in correspondence dated 26th March 2020, are now of limited relevance and can be withdrawn where they specifically refer to actions required to respond to the pandemic, including the Guidance Note: Discharging Board Committee Responsibilities during COVID-19 response phase, as these are also no longer relevant (see Appendix 1, correspondence from Jo-Anne Daniels, Director – NHS Governance and Test Trace and Protect, WG).

The current Board Scheme of Delegation and specifically the matters the Board reserves for its own decisions, in line with Schedule 1 of the revised Standing Orders (*see agenda item 2.7.1 on the May 2021 Public Board agenda*), will therefore remain. In the event of a requirement for a critical or urgent decision(s), use of Chair's Action will be made and subsequently recorded and ratified in the public domain.

Whilst during COVID-19, the Chief Executive deployed certain decision making through the Command and Control structure established; since the March 2021 Board meeting, the following changes are proposed:

- To formally stand down the COVID-19 Command and Control structure i.e. Gold, Silver and Bronze Groups, given the reduction in community transmission and number of incidences of COVID-19; however, this will be kept under review should data indicate a resurgence of cases. It has been agreed to continue with provision for 'on request' status for Gold Command Group meetings in case of the requirement to convene an urgent meeting should any unexpected issues requiring new or amended planning requirements emerge. The Gold Command Group met on 11th May 2021 to approve the extent of the humanitarian assistance provided to India by HDdUHB. A further meeting of the Gold Command Group was held on 18th May 2021 to approve the extension of temporarily recruited Community Testing Unit staff fixed term contracts beyond the end of Quarter 1 2021/22, and the Gold Command Group will continue to work within the Board approved Standing Orders and Standing Financial Instructions and refer appropriate decisions to the Board for approval and ratification. In terms of Silver (Tactical) Group and Bronze (Operational) Cells, whilst it is proposed to stand these down as part of the Command and Control structure, their function and discipline, particularly in terms of their agile working, will be retained as part of the underpinning arrangements for the new operational governance structure, and further discussion will take place to link this in with the proposed arrangements for the Transformation Steering Group and the Strategic Enabling Group.

- The formal session, convened as part of weekly Executive Team meetings to discuss standard agenda items related to COVID-19, including an update from the various cells supporting the Gold Command structure, functional and workforce capacity updates, and the identification of any new or emerging risks, to be replaced by weekly Executive Team meetings focused on reviewing progress and updating and coordinating efforts across all the Strategic/Planning Objectives and Gold Command requirements set out in HDdUHB's Annual Plan.

Board Meetings

- In accordance with Standing Orders, the Board has resumed a bi-monthly schedule of public Board meetings from July 2020 onwards. These bi-monthly Board meetings will continue to be held virtually to ensure compliance with current social distancing guidance, and be concise (maximum 3 hours), to enable the Board to ratify or make decisions in public with a focus on recovery from the pandemic and 'normal' business. Board Seminar Sessions have similarly been resumed since June 2020, and it is proposed to recommence Board Development sessions imminently.
- The Board will continue to conduct as much of its formal business in public as possible. To this end, live streaming of the Public Board re-commenced from May 2020 onwards and continues. However, there may be circumstances where it would not be in the public interest to discuss a matter in public, e.g. business that relates to a confidential matter. The Board can therefore operate in accordance with Section 1(2) Public Bodies (Admission to Meetings) Act. In these circumstances, when the Board is not meeting in public session it shall operate in private session, formally reporting any decisions taken to the next meeting of the Board in Public session.
- These decisions will be kept under review, including the nature and volume of business conducted in private session, to ensure such arrangements are adopted only when absolutely necessary.

Given that the Board will not meet in person for some time, electronic meetings and communication will remain key to the Board's functionality. As a result of this, members of the public will be unable to attend public Board meetings, however with the re-introduction of live streaming from May 2020, the public are enabled to observe proceedings, and as soon as it is safe and appropriate, members of the public will be admitted. To continue to facilitate as much transparency and openness as possible, the Health Board will continue to undertake to:

- Publish agendas as far in advance as possible – ideally 7 days against the 10 day standard within Model Standing Orders.
- Publish reports as far in advance as possible. Any oral updates will be captured in the meeting minutes.
- Publish a clear link to our website pages and social media accounts signposting to further information.

The agenda for Board meetings in Public during the pandemic period covered the minimum standard items as agreed at the April 2020 Board meeting. From July 2020 onwards, more routine business had been considered as the Board reverted to its bi-monthly schedule and was enabled, via live streaming, to conduct its proceedings in view of the public. From November 2020 onwards, a more streamlined agenda had been in place as routine business was replaced with the requirement to respond to the second wave of COVID-19. This has been reviewed and given the reduction in community transmission and number of incidences, more routine business has now been introduced onto the Board agenda.

The electronic Resource Centre, established for Independent Members to access minutes, action logs and associated papers from the Command and Control structure meetings alongside any relevant information relating to the pandemic, continues to be populated on a regular basis, albeit on new e-Board software.

Board Level Committee Meetings

Following discussion at Board Seminar on 15th April 2021, the following is proposed in relation to the configuration of HDdUHB's assurance committees, aligning these to HDdUHB's Strategic Objectives, where applicable:

Quality Safety and Experience Assurance Committee (QSEAC)

- The Quality, Safety and Experience Assurance Committee reverted to its bi-monthly frequency from August 2020 onwards, with the previous formal fortnightly meetings between the Chair of QSEAC and the Director of Nursing, Quality and Patient Experience stood down. In light of the second wave of the pandemic and the requirement to escalate arrangements in line with the response to the first wave, these fortnightly meetings were reinstated in view of the dynamic COVID-19 situation, to serve as a touchpoint on all QSEAC matters, including areas specific to COVID-19 such as clinical work capacity, outbreak control and mass vaccination arrangements. A subsequent briefing is prepared for all Independent Members to form part of the formal record of proceedings. Monthly COVID-19 specific QSEAC meetings were also reinstated from 13th November 2020 to alternate with the routine bi-monthly QSEAC meetings, meaning there was a monthly forum in which assurance could be sought. These additional COVID-19-specific QSEAC meetings continued to utilise a slide-set style of reporting based on a templated approach which, in addition to being more time efficient and focused, supported the presentation of precise and more up to date reporting on the very rapidly changing situation. These arrangements were always due to be reviewed early in the new financial year and in light of the reduction in community transmission and number of incidences of COVID-19, the routine bi-monthly QSEAC meetings will no longer be supplemented by the monthly COVID-19 specific QSEAC meetings; however, the previous formal fortnightly meetings between the Chair of QSEAC and the Director of Nursing, Quality and Patient Experience will be reinstated to serve as a touchpoint on all QSEAC matters. Work is also ongoing in relation to reviewing the underpinning governance arrangements for QSEAC. Following discussion at Board Seminar on 15th April 2021, where this Committee's role as an oversight committee to take a 'cross-cutting view' of Board priorities was acknowledged, it was agreed to retain the term 'Safety' within the Committee's title, given that Quality and Safety is one of the Committees Health Boards are required to establish as a minimum within WG Model Standing Orders. In terms of the Sub-Committees underpinning the Quality, Safety and Experience Assurance Committee, it is proposed to move the Research and Development Sub-Committee (R&DSC) from this Committee to the Committee to which this particular Strategic Objective is most closely aligned in future, the People, Culture and Organisational Development Committee (see below).

All other Sub-Committees will remain in place.

Health and Safety Assurance Committee

- Given the further assurance received at the Extraordinary meeting of the Health and Safety Assurance Committee (HSAC) convened in June 2020, the Committee reverted to its routine bi-monthly schedule. A more streamlined agenda had been adopted from

November 2020 onwards, limiting the attendance of Executive Directors required to two, together with key officers. The Committee agreed that, due to the progress made, the meeting scheduled to be held in December 2020 would be stood down and the next scheduled meeting of the HSAC took place on 17th February 2021. From 10th May 2021 onwards, HSAC meetings will revert to a more routine agenda, given the reduction in community transmission and number of incidences. Following discussion at Board Seminar on 15th April 2021, the need was agreed to retain this Committee as required by legislation.

Audit and Risk Assurance Committee

- The Audit and Risk Assurance Committee (ARAC) has met throughout the pandemic and will continue to meet on a bi-monthly basis, with In Attendance membership reflecting only those required to attend to present the items identified on the agenda. Both the External and Internal Audit plan remain under review to consider only those audits which remain appropriate to undertake, and the operational staff capacity to contribute and support the audits. Whilst it was agreed to defer ARAC's programme of scrutiny from December 2020 to February 2021, the Board agreed in November 2020 that a review of outstanding recommendations should take place to develop a prioritised plan to enact when the Health Board moves into a recovery phase. This was discussed at ARAC in February 2021 with a formal paper being presented to the April 2021 meeting. It was subsequently agreed that this exercise would be undertaken on an annual basis given the significant number of outstanding recommendations that had resulted in being closed. Following discussion at Board Seminar on 15th April 2021, this Committee's role as an oversight committee to take a 'cross-cutting view' of Board priorities was acknowledged.

People, Planning and Performance Assurance Committee

- People, Planning and Performance Assurance Committee meetings have been re-established, with limited Executive Director membership, with effect from the 30th June 2020 meeting. Whilst the Committee will continue with its bi-monthly schedule of meetings, following discussion at Board Seminar on 15th April 2021, it is proposed that it becomes the **Strategic Development and Operational Delivery Committee** and covers off **either** the 'Performance' and 'Planning' elements of the previous PPPAC, to receive an assurance on all Planning Objectives falling under Strategic Objective 4 (*The best health and wellbeing for our individuals, families and our communities*) and Strategic Objective 5 (*Safe, sustainable, accessible and kind care*), as set out in HDdUHB's Annual Plan, with a focus on:
 - NHS Delivery Framework requirements
 - Public Health, health inequalities and screening services
 - Transformation fund
 - Emergency planning and civil contingencies planning
 - Delivery of the "A Healthier Mid and West Wales" and Bronglais Hospital plan
 - Transforming MH and Transforming LD plan
 - Integrated locality plan
 - Children's and young people plans
 - Out of Hours care
 - National clinical audits compliance
 - National IT programmes delivery
 - Fragile services plans
 - Care home/domiciliary care market support & development

Or only the 'Planning' elements of the previous PPPAC to become the **Strategic Development and Operational Planning Committee**, to receive an assurance on all Planning Objectives falling under Strategic Objective 5 (*Safe, sustainable, accessible and kind care*) as set out in HDdUHB's Annual Plan, with a focus on:

- Delivery of the "A Healthier Mid and West Wales" and Bronglais Hospital plan
- Transforming MH and Transforming LD plan
- Integrated locality plan
- Children's and young people plans
- Out of Hours care
- National clinical audits compliance
- National IT programmes delivery
- Fragile services plans
- Care home/domiciliary care market support & development

Further discussion will be held at the Board Seminar in June 2021 on the extent of the role and remit proposed for the Strategic Development and Operational Delivery Committee vs the Strategic Development and Operational Planning Committee.

To cover the 'People' element of the previous PPPAC, following discussion at Board Seminar on 15th April 2021, it is proposed that a new Committee be established – the **People, Culture and Organisational Development Committee** - to receive an assurance on all Planning Objectives falling under Strategic Objectives 1 (*Putting people at the heart of everything we do*), 2 (*Working together to be the best we can be*) and 3 (*Striving to deliver and develop excellent services*) as set out in HDdUHB's Annual Plan, with a focus on:

- Education and development of staff, recruitment, retention and talent management. Becoming an employer of choice
- Performance and Quality management systems, business intelligence capabilities and improvement training
- Patient experience, engagement and empowerment
- HR policies, diversity and inclusion
- Carers support
- Regulatory and professional bodies compliance
- Arrangements to support on-going transformation and board assurance framework development
- Research, development and innovation planning/delivery

Finance Committee

- Monthly Finance Committee meetings have taken place throughout the pandemic, albeit with a more focused agenda and with In Attendance membership reflecting only those required to attend to present the items identified. A set agenda for the Committee had been agreed to the end of the financial year to include the following:
 - In-Year Financial Performance – ongoing scrutiny and challenge of the financial position for 2019-20
 - Financial Plan to March 2021
 - Financial Strategy to 2027/28

Fortnightly meetings also continued to take place between the Chair of the Finance Committee and the Director of Finance, with Members requested to channel all assurance questions relating to the finance agenda through the Chair of the Committee; these were discussed in the subsequent meeting, followed by communications to all Board Members as necessary.

Following discussion at Board Seminar on 15th April 2021, it is proposed that the Finance Committee become the **Sustainable Resources and Operational Delivery Committee** to receive an assurance on **either** all Planning Objectives under Strategic Objective 4 (*The best health and wellbeing for our individuals, families and our communities*) and Strategic Objective 6 (*Sustainable use of resources*), with a focus on:

- NHS Delivery Framework requirements
- Public Health, health inequalities and screening services
- Transformation fund
- Emergency planning and civil contingencies planning
- Financial plans and delivery of the Route Map to financial recovery
- Improving value
- PROMS/FROMS roll out and impact
- Carbon reduction and green health initiatives
- Foundational Economy work
- Budget setting

Or only the Planning Objectives under Strategic Objective 6 (*Sustainable use of resources*) to become the **Sustainable Resources Committee**, with a focus on:

- Financial plans and delivery of the Route Map to financial recovery
- Improving value
- PROMS/FROMS roll out and impact
- Carbon reduction and green health initiatives
- Foundational Economy work
- Budget setting

It is also proposed that a bi-monthly schedule of meetings be introduced for this Committee going forward.

Further discussion will be held at the Board Seminar in June 2021 on the extent of the role and remit proposed for the Sustainable Resources and Operational Delivery Committee vs the Sustainable Resources Committee.

Charitable Funds Committee

- Charitable Funds Committee (CFC) meetings have been re-established from 15th September 2020. In light of the second wave of COVID-19, the CFC meeting on 30th November 2020 focused on urgent matters, supported by streamlined reports and papers and required only the attendance of two Executive Directors. Similar arrangements were put in place for the Committee's subsequent meeting on 9th March 2021; however, routine arrangements will resume from its forthcoming meeting scheduled for 30th June 2021. Following discussion at Board Seminar on 15th April 2021, the need was agreed to retain this Committee as required by legislation, with its quarterly meeting frequency.

Mental Health Legislation Assurance Committee

- Quarterly Mental Health Legislation Assurance Committee (MHLAC) meetings have been re-established from 1st September 2020. In light of the second wave of COVID-19, the MHLAC meeting that had been scheduled to take place on 2nd December 2020 was stood down, with the provision for any urgent mental health legislation issues for consideration to be received at the November 2020 Board meeting. The Committee's subsequent meeting took place on 2nd March 2021 with its next meeting scheduled for 3rd

June 2021. Following discussion at Board Seminar on 15th April 2021, the need was agreed to retain this Committee as required by legislation, with its routine quarterly meeting frequency.

Remuneration and Terms of Service Committee

- The Remuneration and Terms of Service Committee last met formally on 4th February 2021, with all subsequent meetings to only be convened for any urgent business. The next meeting of the Committee had been scheduled to take place on 14th April 2021; this was replaced by a virtual meeting with a focus on Honours Awards. Following discussion at Board Seminar on 15th April 2021, the need was agreed to retain this Committee as required by legislation.

Sub-Committee Meetings

- All Sub-Committees, including the Operational Quality, Safety and Experience Sub-Committee, Listening and Learning Sub-Committee, Research and Development Sub-Committee, Capital Estates and IM&T Sub-Committee (CEIM&TSC), Information Governance Sub-Committee and Charitable Funds Sub-Committee have re-commenced their routine schedule of meetings in order to discharge the responsibilities required of them by their host Board level Committees and to provide the necessary assurance. The Listening and Learning Sub-Committee will move to a bi-monthly frequency and, as referenced above, the Research and Development Sub-Committee will report to the People, Culture and Organisational Development Committee.

Advisory Groups

- Statutory Advisory Group arrangements have also been re-established; a scaled-back version of the Staff Partnership Forum has continued to meet during the pandemic between the Director of Workforce and OD and Trade Union representatives, and this arrangement will continue for the foreseeable future. The Stakeholder Reference Group (SRG) last met on 16th April 2021 with a report providing an update from this meeting on the May 2021 Board agenda. The next SRG meeting is scheduled to take place on 16th April 2021. The Healthcare Professionals Forum is currently being supported to continue with its previous schedule of business with an update report from its meeting on 15th March 2021 presented separately on the May 2021 Board agenda.

It is proposed that a non-statutory Advisory Group, a **Diversity and Inclusion Advisory Group**, be established to incorporate the Black, Asian and Minority Ethnic (BAME) Advisory Group, Enfys LGBTQ+ Network and other parts of our workforce that may feel excluded, including night working or lone working staff as potential examples.

Communications Update

Detailed below is an update on the communications which have and will continue during the pandemic:

- The Chair and Chief Executive remain in contact daily. The Chair will also continue to attend Gold Command as an observer Member.
- The joint virtual briefing meeting with all Independent Members established by the Chair and Chief Executive on a fortnightly basis, will move to a monthly frequency.
- The separate virtual briefings established by the Chair with all Independent Members on a fortnightly basis will also move to a monthly frequency.

- In terms of the other communication arrangements put in place:
- Daily bulletin to all staff (including all Board Members) to be retained
- Weekly Teams Meeting between Chair and CEO and local MSs/MPs to move to a monthly frequency (currently suspended during the pre-election period).
- Weekly Teams Meeting between Chair and CEO and local authority leaders and CEOs to move to a monthly frequency.
- Fortnightly Teams Meetings between CEO and Chair/CHC Chair and Chief Officer to move to a monthly frequency.
- Vice Chair to keep in touch with Primary Care and Mental Health operational lead
- Chair/Vice Chair ongoing conversations with the weekly telephone call moved to fortnightly.
- Daily SitRep to continue to be sent directly to all Board Members from the Gold Command Office to include vaccination Sit Rep when available.
- Vaccine bulletin.

Management of outstanding recommendations from Auditors, Inspectorates and Regulators

Since the previous report to Board in March 2021, audit and inspection activity has continued:

- Healthcare Inspectorate Wales (HIW) inspections restarted in late February. These are being undertaken remotely with onsite activity being reserved for instances where there is a clear high level of risk to patient safety that cannot be explored remotely. HIW have advised that they intend to introduce more on-site activity to their work programme from 26th April 2021, and to fully recover full their routine onsite inspection programme from 1st July 2021. HIW are currently considering the 'quality check' approach undertaken during the pandemic to assess its impact and potential usage over the longer term as part of the mix of assurance activity they undertake.
- The planned audit work identified in the Internal Audit (IA) plan for 2020/21 is almost complete with a small number of audit reports currently being finalised. As reported previously to the Board, the plan has been under weekly review by Internal Audit (IA) and the Board Secretary to ensure planned audits are considered against operational pressures. The Head of Internal Audit has issued his draft opinion based on last year's activity and awarded the Health Board 'reasonable' assurance. The ARAC agreed the Internal Audit Plan for 2021/22 at its meeting in April 2021, and this will remain under weekly review by Internal Audit and the Board Secretary.
- The External Audit Plan for 2021 was discussed at the Audit and Risk Assurance Committee in February 2021. Work will continue remotely as much as possible for the foreseeable future, however the Audit Wales (AW) performance audit lead will continue to liaise with the Board Secretary on the organisation's abilities to support and partake in the audit work required. An initial timetable for the completion of the audit work is outlined in the plan, however, given the ongoing uncertainties around the impact of COVID-19 on the health sector, some timings may need to be revisited through the year.
- The Mid and West Wales Fire and Rescue Service (MWWFRS) and Health and Safety Executive (HSE) have remained active through the pandemic. Progress to address outstanding fire enforcement notices and the HSE improvement notices and material breaches, is overseen by the Health and Safety Assurance Committee.

ARAC continues to provide oversight on behalf of the Board on the implementation of outstanding recommendations, with particular focus on those recommendations that the Board agreed, as a minimum during the pandemic, must be progressed, as planned or in line with revised timescales:

- Immediate improvement recommendations (pre-COVID-19) from HIW and recommendations from their current programme of Quality Checks.
- Enforcement notices from the MWWFRS.
- Improvement Notices and material breaches from HSE.
- High priority recommendations from IA and AW.

In regard to other outstanding recommendations, Services/Directorates remain accountable for addressing gaps identified in audits and inspections, and will need to assess this responsibility alongside other operational work/pressures. They will continue to receive a bi-monthly assurance and risk report which details outstanding recommendations and requests progress updates against these.

Whilst an escalation process is in place for late or non-responses to be reported to Directors, with ARAC following up where there are significant concerns about the pace of progress, particularly where there are direct impacts on patient quality and safety, ARAC had agreed to defer this programme of scrutiny, in recognition of the operational pressures being experienced by Services/Directorates. As pressures ease and we enter the recovery phase, ARAC have agreed to resume their programme of scrutiny where there are areas of concern.

The prioritised plan requested by the Board in November to indicate when the outstanding (red) recommendations are likely to be addressed has been developed by the Board Secretary/Head of Assurance and Risk with the relevant Executive Directors and was presented to ARAC in April 2021. This work resulted in 86 red recommendations being closed, with revised dates for the remaining red recommendations (84 as at end of February 2021) being agreed with Executive Directors.

Risk Management

As reported to the Board in March 2021, risk management activities have continued throughout the pandemic, albeit work has been balanced with capacity pressures and challenges, which have led to some delays in risk identification and review.

Principal Risks

Following Board approval of the Draft Annual Recovery Plan 2021/22, a series of workshops have been held with the Executive Team to articulate the principal risks to the achievement of strategic objectives. These will form the Board Assurance Framework that will be presented to Board going forward to report the key risks, controls and assurances in respect of the strategic objectives.

Corporate Risks

The Executive Team has a monthly meeting to consider and agree the Corporate Risk Register (CRR). Corporate risks are risks that reflect the most significant operational risks within the organisation. These can be identified by the Executive Team or have been escalated from clinical and/or corporate directorates by an Executive Director, and are agreed by the Executive Team for entry on the CRR. Corporate risks are currently under review following the approval of the Draft Annual Recovery Plan 2021/22. Reporting arrangements will be reviewed following any changes to the Health Board's governance structures.

Operational Risks

It is the responsibility of each service to ensure they assess new risks and review existing risks in the context that they are currently working within i.e. their current delivery objectives, operational delivery and compliance with legislation/standards. Each Directorate receives a bi-monthly risk dashboard report to enable them to view all their risks ranked highest to lowest, identify those over tolerance, and those where action is required. These are also reported

through the Board Committees and Sub-Committees, as well as through Directorate management governance structures.

Whilst this represents the final update on the Health Board's approach to ensuring an appropriate level of Board oversight and scrutiny to discharge its responsibilities effectively during the COVID-19 pandemic, together with its approach to managing risk and outstanding recommendations from auditors, inspectorates and regulators, a further report will be prepared for the July 2021 Public Board meeting, consolidating the proposals contained within this update into more formal governance arrangements for the Board's approval, accompanied by revised Terms of Reference for the newly agreed and constituted Board assurance Committees, together with their attendant, more streamlined, membership.

Argymhelliad / Recommendation

The Board is asked to:

- **NOTE** the update since the Board in March 2021 regarding the approach undertaken to ensuring the appropriate level of Board oversight and scrutiny to discharge responsibilities effectively during the COVID-19 pandemic, together with the proposals for revised formal governance arrangements in light of discussions held at Board Seminar on 15th April 2021 and based upon lessons learned from the streamlining of assurance structures necessarily undertaken in response to the COVID-19 pandemic, to more closely align these to the Strategic and Planning Objectives set out in HDdUHB's Annual Plan.
- **CONSIDER**, in particular, the role and remit of the Strategic Development and Operational Delivery Committee vs the Strategic Development and Operational Planning Committee, and the Sustainable Resources and Operational Delivery Committee vs the Sustainable Resources Committee, for further discussion on their respective roles and remits at the Board Seminar in June 2021.
- **NOTE** that a further report will be presented to the July 2021 Public Board meeting, consolidating the proposals into more formal governance arrangements for the Board's approval, accompanied by revised Terms of Reference for the newly agreed and constituted Board assurance Committees, together with their attendant, more streamlined, membership.
- **NOTE** the update since the Board in March 2021 regarding the approach to managing risk and outstanding recommendations from auditors, inspectorates and regulators by the Health Board during the COVID-19 pandemic.

Amcanion: (rhaid cwblhau)	
Objectives: (must be completed)	
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): Hyperlink to NHS Wales Health & Care Standards	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives: Hyperlink to HDdUHB Strategic Objectives	All Strategic Objectives are applicable

Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	9. All HDdUHB Well-being Objectives apply
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Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Standing Orders Standing Financial Instructions
Rhestr Termau: Glossary of Terms:	Contained within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Chair CEO All Board Members

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	There are no financial implications associated with this paper
Ansawdd / Gofal Claf: Quality / Patient Care:	Adherence to the Standing Orders ensures the correct governance procedures are in place to support quality, safety and patient experience
Gweithlu: Workforce:	There are no staffing implications associated with this report
Risg: Risk:	The Health Board has a statutory responsibility to ensure it has Standing Orders in place by which to manage its day-to-day business.
Cyfreithiol: Legal:	<p>The Health Board has a statutory responsibility to ensure it has Standing Orders in place by which to manage its day-to-day business.</p> <p>NHS (Wales) Act 2006 – Schedule 3, Part 2, paragraph “An NHS trust may do anything which appears to it to be necessary or expedient for the purposes of or in connection with its functions.”</p> <p>Public Bodies (Admission to meetings) Act 1960 – S.1(2) A body may, by resolution, exclude the public from a meeting (whether during the whole or part of the proceedings) whenever publicity would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted or for other special reasons stated in the resolution and arising from the nature of that business or of the proceedings; and where such a resolution is passed, this Act shall not require the meeting to be open to the public during proceedings to which the resolution applies.</p>

	Para 6.5.2 of the revised Standing Orders indicates that board meetings will be held in public where possible (the point being that there will be occasions that it is not possible).
Enw Da: Reputational:	The Health Board has a duty to ensure the decisions made during the pandemic are undertaken in an open and transparent way.
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable



To: Board Secretaries and Directors of Corporate Governance – Local Health Boards, NHS Trusts and Special Health Authorities
Committee Secretaries – Welsh Health Specialised Services Committee, Shared Services Partnership Committee and Emergency Ambulance Services Committee

4 May 2021

Dear Colleague

NHS Governance and COVID-19

I am writing further to my letters of 26 March 2020 and 27 May 2020 regarding the agreed governance principles adopted in response to the COVID-19 pandemic. The report of the Auditor General for Wales *'Doing it Differently, Doing it Right'* acknowledged how the NHS was governed differently whilst responding to the pandemic and outlined a number of improvements, suggesting that some should be evaluated and retained as organisations recover. This work will support the action in the NHS Governance Improvement Plan - *To identify governance lessons that can be learnt from the response to COVID-19 and developing ways of ensuring these are captured and embedded within systems and practice.*

Further information on taking forward the delivery of the Improvement Plan will be shared with you soon.

One area highlighted in the Auditor General's report related to virtual meetings. As advised previously it is important for organisations to ensure this is appropriately resourced to mitigate and fulfil the requirements of the Public Bodies (Admission to Meetings) Act 1960. I hope the learning and developments of virtual solutions are being considered fully going forward and benefits are realised including accessibility for the public. There is also the need to consider how virtual meetings have led to a reduction in travel and the potential benefits in helping to deliver your organisations obligations under the *NHS Wales Decarbonisation Strategic Delivery Plan.*

I understand from discussions with Welsh Government colleagues that Board Secretaries have collectively advised governance arrangements have returned to a more normal state with committees initially stood down now meeting.

I am therefore writing to formally acknowledge the governance principles agreed in my letter of 26 March 2020 are now of limited relevance and can be withdrawn where they refer specifically to actions required to respond to the pandemic.

I would also like to advise of the withdrawal of the *Guidance Note : Discharging Board Committee Responsibilities during COVID-19 response phase* as this is no longer of relevance.

Finally, I would once again like to thank you for your continued efforts in ensuring high standards of governance during these very challenging times and the continual evolution to deliver improved governance. The report of the Audit General for Wales is a testament to you all.

Yours sincerely



Jo-Anne Daniels
Director – NHS Governance and Test Trace and Protect

Copy: Chairs, Local Health Boards, NHS Trusts and Special Health Authorities,
Welsh Health Specialised Services Committee, Shared Services
Partnership Committee and Emergency Ambulance Services
Committee
Chief Executives, Local Health Boards, NHS Trusts and Special Health
Authorities
Sian Lewis, Managing Director, Welsh Health Specialist Services Committee
Stephen Harry, Chief Ambulance Services Commissioner
Neil Frow, Managing Director, NHS Wales Shared Services Partnership
Dr Andrew Goodall, Director General and NHS Wales Chief Executive, Welsh
Government