

CTMUHB RESPONSE TO THE INDEPENDENT (STEVE COMBE) REPORT INTO THE HANDLING OF THE SECONDEE CONSULTANT MIDWIFE REPORT INTO MATERNITY SERVICES, CTMUHB

Recommendation	Management Action	Implementation Completion Due Date	Lead
Organisational Culture The Board should commission external support to establish an appropriate organisational culture based on listening to staff, patients and stakeholders. It is understood work has already commenced in this area.	Work commissioned and commenced in August 2019.	COMPLETE Aug 2019	DoWOD
	The UHB continues with the delivery of the organisation-wide Values and Behaviours Programme. 'Let's Talk Culture' workshops held & surveys completed. Survey analysis being undertaken.	January 2020	DoWOD
	Activate Values & Behaviours – Feedback and refine the outcome of phase 1.	February 2020	DoWOD
	Lead with Values & Behaviours to commence in March 2020, include in recruitment and induction.	April 2020	DoWOD
	On-going programme identified for supporting the wide-spread implementation and embedding of the agreed Values and Behaviours.	April 2020	DoWOD



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Review of Standing Orders The Welsh Government have recently circulated revised model Standing orders for health bodies in Wales. The Board should specifically consider the sections on "Decisions reserved for the Board" and the "Scheme of Delegation" to ensure there is clarity on such issues as the authority to commission service reviews and Executive portfolios. The Board could also mandate through Standing Orders that any external reports are brought to the attention of the Board or the appropriate Board Committee, possibly at draft stage. One option is for the Board to consider developing an appropriate escalation framework to	Model Standing Orders issued by Welsh Government were adopted fully by the Audit Committee at its meeting in October 2019 and formally approved at the meeting of the Health Board in November 2019.	COMPLETE Nov 2019	DoCG
	The Scheme of Delegation is being reviewed to ensure it reflects the new Operating Model being developed that will, in turn, provide the framework for performance and risk management and escalation.	October 2020	DoF
	Executive portfolios are routinely reviewed by the Executive Team, led by the Chief Executive with reference to the Remuneration Committee.	March 2020	DoWOD
	The Board agreed, at its meeting in September 2019, to introduce a new system to receive, securely, all reports at draft stage from inspections or reviews. This is managed and supported by the Corporate Governance department who hold a log of all reviews and reports that is routinely reported to Executive Team.	COMPLETE Sept 2019	DoCG



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set out its expectations in this area.			
Board Assurance Framework The Audit Committee should review the Board Assurance Framework and Risk Register to satisfy itself that these are robust in the light of the events set out in this report.	Risk Management Strategy currently under review. Corporate Risk Register updated to ensure accurate information is reported. Board Assurance Framework in draft for consideration by Audit Committee in January 2020, and will then require Board approval in March 2020. The BAF will be further developed as the Risk Strategy emerges to align Board Risk Appetite with the achievements of the uHB Objectives in the IMTP 2020/2023.	March 2020 COMPLETE Dec 2019 March 2020 December 2020	DoCG DoCG DoCG DoCG
Non Officer member training – It is important that Non Officer Members receive the appropriate level of training and development to assist them in knowing how to ask critical questions of the executive. Consideration should be	Deloitte Peer Review Survey results will inform individual IM development plans, linking with IM appraisal held with the Chair. All appraisals with the Chair to include individual feedback to IMs that they will share to inform their personal development plan. Formal Board Development Programme, run and delivered by Deloitte, will include a workshop on good practice in board governance and focus on	March 2020 April 2020	DoCG DoCG



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<p>given to establishing a formal programme to include risk management. This would help them triangulate the information provided to them. This should be supported by Non Officer Member walkabouts. The Board could also consider establishing a formal buddying arrangement between individual Non Officer Members and a designated Executive Director to share knowledge and experience.</p>	<p>operating as a unitary board; effective scrutiny; relationship between the board and committees; and effective risk management.</p> <p>A separate board development session will be held to support the development of the Risk Management Strategy in determining the risk appetite of the Board.</p> <p>Informal walkabouts launched following each Board Development session for IMs to better meet staff and experience environments in an informal, engaging manner.</p> <p>IMs are invited to attend 'Let's Talk' staff and patient engagement events held every 2 months across all 3 localities to gain exposure and talk with staff.</p> <p>Exec/IM buddy safety walkabouts reinstated, providing a source of assurance to support information received at Committees and Board.</p>	<p>April 2020</p> <p>COMPLETE Sept 2019</p> <p>COMPLETE Sept 2019</p> <p>COMPLETE Sept 2019</p>	<p>DoCG</p> <p>DoCG</p> <p>DoCG</p> <p>DoN</p>
<p>Board Development sessions – The Board should set out how it wishes to use these sessions and ensure no</p>	<p>Agreed. No decisions are made at Board Development sessions and the discussion is purposely not minuted.</p>	<p>COMPLETE August 2019</p>	<p>DoCG</p>



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<p>and previous meeting date to allow Members to cross reference information. Similarly if action plans are updated between meetings (eg the Maternity Improvement Plan) the changes should be highlighted for ease of reference.</p> <ul style="list-style-type: none">• Tabled reports – The Board should set out the occasions when tabled reports are acceptable. Draft presentations should be sent out with Board/Committee papers, except in exceptional circumstances agreed in advance	<p>supported by the Corporate Governance Department. This will be included in guidance for report writing and included in the training to officers.</p> <p>Changes/updates in actions plans being reported to board or committees will be clearly marked up or highlighted by the report author. This will be included in guidance for report writing and included in the training to officers.</p> <p>Tabled Reports - Tabled reports are only permitted with explicit agreement by the committee/board Chair, having taken advice from the Director of Corporate Governance and only in exceptional circumstances.</p>	<p>May 2020</p> <p>COMPLETE</p>	<p>DoCG</p> <p>DoCG</p>
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with the meeting Chair.			
<p>Openness – The Board should consider what issues it should consider “In Committee”. Good practice would indicate that the reasons for considering a matter “In Committee” are:</p> <ul style="list-style-type: none"> • When individual patient confidentiality could be compromised; • When a matter is commercially sensitive; • When a draft report is being considered prior to future publication. <p>Consideration should be given to including the reason why a report should be considered “In Committee” in the</p>	<p>Since November 2019, the Board meet in public prior to any meeting convened in private.</p> <p>The revised Board and Committee report template that has been in use since November 2019 clearly identifies whether a report is to be considered in public or private session, and if ‘private’ is selected from the options, the author has to select from justifications outlined in the HB’s ‘Freedom of Information Publication Scheme’ and include;</p> <ul style="list-style-type: none"> • Commercially Sensitive • Draft status – final version will be published in due course • Potentially identifiable/sensitive information • Business sensitive 	<p>COMPLETE Nov 2019</p> <p>COMPLETE Nov 2019</p>	<p>DoCG</p> <p>DoCG</p>



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covering paper to a report.			
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