

AG	ENDA	ITEM	

5.1

# **CTM BOARD**

# RESETTING CTM OPERATING FRAMEWORK GOVERNANCE AND ASSURANCE PROPOSAL

Date of meeting	29/06/2020	
FOI Status	Open/Public	
If closed please indicate reason	Not Applicable - Public Report	
Prepared by	G Galletly, Director of Corporate Governance (Interim)	
Presented by	G Galletly, Director of Corporate Governance (Interim)	
Approving Executive Sponsor	Director of Corporate Governance	
Report purpose	FOR APPROVAL	

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)		
Committee/Group/Individuals Date Outcome		Outcome
CTM Resetting Management Team CTM Management Board	11 <sup>th</sup> June 2020 22 <sup>nd</sup> June 2020	ENDORSED FOR APPROVAL

ACRONYMS	



## 1. SITUATION/BACKGROUND

The 'Resetting CTMUHB Operating Framework' (The Framework) for Quarter 1 2020/2021 was received and approved by the Board at its meeting on 28 May 2020.

The delivery of The Framework requires clear governance arrangements to support effective and robust decision-making. The Board will require sound assurances on the delivery and quality of decision-making.

This paper sets out initial proposals of how we can establish the governance to deliver the new Framework to ensure it is integrated and complementary to other 'core elements' of the Health Board. The approach utilises learning from the experiences of agile governance and timely decision-making arising from responding to Covid-19 and sets out how the Board could make decisions and receive assurances whilst eliminating any unnecessary bureaucracy.

Given Gold/Silver/Bronze command has now been stood down, and 'Resetting CTM Framework' established, it is imperative that the Executive establish a robust mechanism that demonstrates risk-based decision making that takes account of quality, activity and resources. It will also however, in the current environment, be influenced by National Policy, how Covid-19 affects our population and staff and availability of reliable intelligence to inform decision-making.

The proposal is presented in the following 2 sections;

- Governance of the management and delivery of the Framework
- Board assurance mechanism on the delivery of the Framework

# 2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

# **Governance of the Management and Delivery of the Framework**

It has been determined that the delivery of 'Resetting CTMUHB' Operational Framework will be managed in an agile way, based on a 6 week planning cycle. This will enable the Health Board to adapt to the iterative quarterly frameworks being issued by Welsh Government to inform our local Health Board quarterly frameworks. The delivery of the overarching programme will be supported by the Planning Team and further detail on objectives, measures and outcomes will need to be addressed separately to this proposal.



#### 2.1.1 Structure

The delivery of Resetting CTMUHB Framework will sit alongside, be complementary to and indeed inform the core business of the Health Board. It is therefore essential to ensure clarity of purpose and function of meetings involving many of the same individuals.

The Chief Executive will be held accountable for the delivery of the Framework, The Chief Executive has established a 'Resetting CTM Management Team' to assist and support her in managing the delivery. The Resetting CTM Management Team has membership of;

- Chief Executive
- Director of Finance & Procurement
- Director of Operations
- Director of Planning & Performance
- Medical Director
- Director of Nursing, Midwifery and Patient Services
- Director of Therapies and Health Sciences
- Director of Workforce and Organisational Development
- Director of Public Health
- Director of Corporate Governance / Board Secretary
- ILG Director, Bridgend Locality
- ILG Director, Merthyr Cynon Locality
- ILG Director, Rhondda Taff Ely Locality

# 2.1.2 Decision Making

To ensure robust governance, it is essential to have clearly documented decision-making. It has been widely acknowledged that in Gold/Silver/Bronze command structure, the decision making framework (on a page) assisted agile and timely decision making. It is proposed that a similar approach is adopted moving forward to support the delivery of the Framework (Appendix 1). It is proposed that this replaces the Gold/Silver/Bronze delegations put in place during the immediate response to Covid19.

Decision making can also be supported by 'Decision Justification'. A high level business case, outlining the considerations made in reaching the decision to be taken. This could be adopted as the template for all proposals presented to the CTM Resetting Management Team to assist robust, auditable justifications for decisions taken (draft at Appendix 2).

All decisions taken need to be tested against the four principles within the Resetting CTM Operating Framework, namely;



#### PAUSE

work specifically to deliver the immediate emergency response

#### **LET GO**

of work and ways of working which are now unfit for purpose

#### **AMPLIFY**

new ways of working which show signs of promise for the future

#### **RESTART-REFRAME**

work which had stopped but we now need to continue

All pre-Covid activity will be mapped through the Framework against these principles to ensure robust decision making across all activity and that all aspects of the CTMUHB once reset, has addressed all areas without unintended gaps (ie avoiding a 'non decision').

In relation to the financial position of the Board the Health Board is operating at risk. The Welsh Government has indicated that it will in principle provide support for the costs of responding to Covid-19, but it has not yet agreed specific revenue or capital funding.

The projected full year costs of Covid-19 resulting from the commitments made up to May 2020 through the Gold/Silver/Bronze governance process totalled £50.8m in revenue costs and £9.9m in capital costs. This was endorsed by the Board at the meeting on 28 May 2020.

It is vital that going forward the Board has clear oversight and ownership of future decisions and the projected financial consequences arising from those decisions. It is therefore proposed that financial controls are tightened to support the Chief Executive in decisions with significant financial consequences.

Whilst operating outside the budget it approved in March 2020, the Board will want to;

- Approve the Resetting CTM Operating Framework (Quarterly as it iterates) as a plan for delivery
- Approve any new proposals which would have a significant financial impact\* in advance of significant resources being committed (and so are not proposed to be delegated to the CEO), and provide business cases to Welsh Government for such approved cases.
- Keep under review the financial impact of Covid-19 and the Resetting Operating Framework to ensure that;
  - Board endorses decisions under powers delegated to the CEO,
  - value for money considerations are properly taken into account,
  - o efficiency savings are delivered to the maximum possible extent,
  - o cost reductions resulting from Covid-19 are factored in, and
  - cost increases, and existing sources of funding are re-purposed where possible.



- Continue to seek clarity on Welsh Government funding for Covid-19 and the Resetting Programme.
- \* It is proposed that the following financial limits are put in place for managing the delivery of the Resetting CTM Operating Framework where decisions have a significant financial impact. This would be reflected in an amendment of the Scheme of Delegation

Authority	Revenue Limit
Full Board/Chair's Urgent Action	No limit (risk based decisions)
Chief Executive	£500k

## 2.2 Board Assurance Mechanism on the Delivery of the Framework

# 2.2.1 Options for Board and Committee configuration

During the Health Board's initial response to Covid-19, adjustments were made to the Board assurance arrangements. The approach taken allowed innovative ways to address how the Board gained assurances on how the Health Board was responding but also presented challenges in demonstrating robust governance.

Taking learning from the adjustments made, with a continued commitment to instil 'agile governance' and minimise unnecessary bureaucracy, we have a number of options to provide assurance to the Board;

# Option 1

- Continue to meet as a Board bi-monthly
- Continue to utilise Quality & Safety (Q&S) Committee and Audit & Risk Committee as key forums for scrutiny on behalf of the Board which will continue to meet bi-monthly
- Re-introduce Planning, Performance & Finance (PPF) Committee bimonthly to ensure oversight of planning, performance and financial aspects of Re-Setting CTM
- Hold quarterly meetings for all other Committees with the exception of the Charitable Funds Committee (CFC) which would revert to once a year until we are in a position to re-focus resources on exploring the development of the charity further.

Not recommended due to infrequency of Board meetings and oversight by Board resulting in potential risk to timely, agile decision-making.



## Option 2

- Continue to meet as a Board bi-monthly
- Establish a <u>specific oversight committee</u> to meet monthly, to monitor and scrutinise decisions on behalf of the Board, reporting to the Board.
- Continue to hold bi-monthly Q&S and Audit & Risk Committee meetings
- Hold quarterly meetings for all other Committees with the exception of CFC which would revert to once a year until we are in a position to refocus resources on exploring the development of the charity further.

Not recommended due to infrequency of Board meetings and oversight by Board resulting in potential risk to timely, agile decision-making and potential over reliance on small representation of Board members.

## Option 3

- Board to meet <u>monthly</u> as collective oversight of all aspects of the delivery of the Framework
- Core business delivered in line with agreed programme for the year, with additional meetings scheduled in the intervening months to focus on Resetting CTM Framework
- Continue to utilise Q&S Committee and Audit & Risk Committee as key forums for scrutiny on behalf of the Board which will continue to meet bi-monthly
- Hold quarterly meetings for all other Committees with the exception of the Charitable Funds Committee which would revert to once a year until we are in a position to re-focus resources on exploring the development of the charity further.

Recommended preferred option due to frequency of Board meetings to support timely decision making (in line with proposed delegations in 2.1.2 above, providing collective scrutiny and ownership by Board to allow timely triangulation.

If supported, this approach would be reviewed in December 2020 and again in March 2021.

# 2.2.2 General Approach to Assurance

Independent Members will be encouraged to seek assurances in ways other than in meetings and from as many sources as possible. Limited contact resulting from social distancing etc will require innovative ways of seeking assurances in different ways to avoid an over reliance on information being 'provided' rather than 'sought'. It is likely that Executives will be interacting with IMs more regularly on a 1:1 basis for this to be achieved. Weekly briefings



between the Chair, IMs, and Execs was established during the initial Covid19 crisis phase and have continued as required. It is proposed these will continue to inform colleagues for as long as IMs deem them helpful.

The approach adopted during the Covid19 response has led to a number of improvements in how the Board can seek assurance through meetings including;

- Ensure <u>all</u> agendas are focussed on key issues and are not overburdened;
- Utilise Consent Agendas for all meetings;
- Continue with virtual meetings via Teams;
- Continue to seek Q&As in advance of the meeting to better inform discussion at the meeting and reduce the length of the meetings;
- Commit to conclude all Board and Committee meetings in 2 hours max.

## 3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

The 'Resetting CTM Management Team' supported this proposal at their meeting on 22<sup>nd</sup> June 2020 to strengthen the governance around the delivery of the Resetting Operating Framework and support the Chief Executive in discharging the responsibilities of delivering the framework with close oversight and ownership of the Health Board.

#### 4 IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)	
	The number one focus of the Board and its business is to ensure good quality and safe patient care across all areas of its activity.	
Deleted Health and Cons	Governance, Leadership and Accountability	
Related Health and Care standard(s)	The 22 Health & Care Standards for NHS Wales are mapped into the 7 Quality Themes but within a Governance Framework.	
Equality impact assessment completed	Not required	
-	No specific impact identified.	



Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications	There is no direct impact on resources as a result of the activity outlined in this report.
/ Impact	
Link to Main Strategic Objective	To ensure good value based health care and treatment for our patients in line with the resources made available to the Health Board
Link to Main WBFG Act Objective	Service delivery will be innovative, reflect the principles of prudent health care and promote better value for users

#### **5 RECOMMENDATION**

Members of the Board are asked to **APPROVE:** 

- The governance and decision making approach outlined in the paper (including the amendment to the Scheme of Delegation on financial limits); and
- The proposals for governance, decision making and Option 3 of the Board assurance mechanism.



# **APPENDIX 1**

NON FINANCIAL DECISIONS (i.e. clinical/workforce etc)		CAPITAL CONSEQUENCES	REVENUE CONSEQUENCES
Impact across >2 work streams  and/or  Outside Policy  and/or  RED QIA  (NB Urgent approval of Red QIA delegated to Medical Director and Nurse Director to be noted at Board)  and/or  RED RISK RATING	BOARD  (or urgent = CEO, Chair plus 2 x IMs)	>£1m  Justification case which has already been agreed by ECMG and Resetting Team	>£0.5m  Justification case which has already been agreed by Resetting Team
Impact across >2 work streams within policy and/or AMBER QIA and/or AMBER RISK RATING	CEO SUPORTED BY RESETTING TEAM	£0.1m to £1m  Justification case which has already been agreed by ECMG	Up to £0.5m  Subject to reporting to Health Board within monthly financial reporting and thus Board opportunity for retrospective review
Impact within one or two work streams  and/or  GREEN & YELLOW QIA  and/or  GREEN & YELLOW RISK RATING	WORKSTREAM SROs	No delegation	No delegation



#### **APPENDIX 2**

# **DECISION JUSTIFICATION**

"Re-Setting CTMUHB"
Decision – Summary & Intended Outcome
e.g. To purchase the equipment listed below to support the timely delivery of field hospital capacity in line with modelling assumptions for COVID-19 bed requirements.
Decision - Rationale
Decision - Risks
Decision – Cost (include value and state Capital or Revenue)
Decision – QIA score
Decision – CHC Service Change Proforma
Decision – Assessment against UHB Values
Sign off route
ILG   Executive Team   Resetting Management Team   Health Board    Currenting factors
Supporting factors