

Structured Assessment 2021 (Phase One) – Operational Planning Arrangements: Cardiff & Vale University Health Board

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Summary report

About this report

- 1 This report sets out the findings from phase one of the Auditor General's 2021 Structured Assessment on the operational planning arrangements at Cardiff & Vale University Health Board (the Health Board). Our Structured Assessment is designed to help discharge the Auditor General's statutory requirement to be satisfied that NHS bodies have made proper arrangements to secure economy, efficiency, and effectiveness in their use of resources under section 61 of the Public Audit (Wales) Act 2014.
- 2 Health bodies are required to submit a three-year Integrated Medium-Term Plan (IMTP) to the Welsh Government on an annual basis. In January 2020, health bodies submitted IMTPs, covering the period 2020-2023, for approval. However, the Welsh Government suspended the process for approving IMTPs to allow health bodies to focus on responding to the unprecedented and ongoing challenges presented by the COVID-19 pandemic.
- 3 The Minister for Health, Social Services and Sport set out shorter planning cycles for health bodies covering 2020-21. Guidance set out key considerations for planning, with the requirement for health bodies to produce a quarter one plan by 18 May 2020, a quarter two plan by 3 July 2020, and a combined plan covering quarters three and four by 19 October 2020.
- 4 The planning framework for quarters three and four 2020-21 covers the maintenance of effective and efficient operational planning arrangements in health bodies to guide their continuing response to the pandemic as well as responding to winter pressures and the implications of EU transition. Health bodies also need to continue to lay the foundations for effective recovery beyond 2020-21.
- 5 In our 2020 Structured Assessment [report](#) we considered the Health Board's planning arrangements for developing the quarters one and two plans. This report considers the planning arrangements underpinning the development of the operational plan for quarters three and four of 2020-21.

Key messages

- 6 Overall, we found that the Health Board's **arrangements for developing operational plans are effective, but opportunities to strengthen arrangements for monitoring and reporting on delivery of operational plans remain.**
- 7 The Health Board's 2020-21 Quarters Three-Four Plan (the Quarters 3-4 Plan) satisfied Welsh Government planning guidance and was submitted within the required timeframe following engagement with Independent Members and the Community Health Council.
- 8 The Quarters 3-4 Plan is a progression of the previous two quarterly plans and is underpinned by robust modelling and high-quality operational, financial, and workforce data. The Health Board ensured effective engagement with Clinical Boards, enabler services (such as finance), and relevant external partners as part of the planning process. The Health Board's planning arrangements are sufficiently flexible and agile to respond to changing circumstances.
- 9 Whilst reporting to the Board on key areas within the Quarters 3-4 Plan has increased, there remains a need for the Health Board to strengthen its overall arrangements for monitoring and reporting on operational plan delivery.
- 10 We have not made any new recommendations based on our 2021 Structured Assessment phase one work.

Detailed report

Scope and coverage of the 2020-21 Quarters Three-Four Plan

- 11 Our work considered the scope and coverage of the Health Board's 2020-21 Quarters Three-Four Plan (the Quarters 3-4 Plan) in line with Welsh Government planning guidance.
- 12 We found that **the Quarters 3-4 Plan satisfied Welsh Government planning guidance and was submitted within the required timeframe following engagement with Independent Members and the Community Health Council.**
- 13 The Quarters 3-4 Plan and accompanying Minimum Data Set ('MDS') were submitted to Welsh Government by 19 October 2020. It was shared with Independent Members at a Board Development Session on 29 October 2020 and retrospectively approved by the Board on 26 November 2020.
- 14 The Health Board ensured greater Independent Member involvement in the development of the Quarters 3-4 Plan than the previous two quarterly plans. For example, the Health Board used Board Development Sessions to give Independent Members the opportunity to discuss and shape the Quarters 3-4 Plan prior to submission. The Health Board also continued to strengthen stakeholder engagement as part of the development of the Quarters 3-4 Plan. For example, the draft plan was shared with the Community Health Council for comment, and regular updates were provided to the Local Partnership Forum and Stakeholder Reference Group.
- 15 The Quarters 3-4 Plan is detailed, comprehensive, and satisfies the requirements of the operating framework set by Welsh Government. However, as was the case with the previous quarterly plans, it does not include a clear summary of key actions, timescales, and measures against which progress can be monitored and reported. Whilst the MDS contains some gaps, the Health Board has provided an explanation for the absence of these data. For example, the Health Board does not hold the data for the 'Screening Programmes' tab as screening services are provided by Public Health Wales.

Arrangements for developing operational plans

- 16 Our work considered the Health Board's arrangements for developing the Quarters 3-4 Plan to support its ongoing response to COVID-19, maintain essential services, and resume more routine services.
- 17 We found that **the Health Board's operational planning arrangements are robust and sufficiently flexible and agile to respond to changing circumstances.**
- 18 The Health Board's plan for 2020-21, which was developed in quarter 1 and refined in quarter 2, describes its response to the pandemic through a series of phases underpinned by a gearing approach (**Exhibit 1**). The Quarters 3-4 Plan, which focusses on phases 4 and 5, therefore, is a clear progression of the previous

quarterly plans, which concentrated on delivering phases 1 to 3. In developing the Quarters 3-4 Plan, the Health Board reflected and acted upon feedback received from Welsh Government on previous quarterly plans, such as providing greater clarity on mitigating actions for key identified risks. However, the Quarters 3-4 Plan does not provide an overview of Health Board’s performance in delivering the previous quarterly plans. Nor does it include an overview of the key learning captured by the Health Board as part of its wider programme of evaluating new ways of working introduced during the pandemic.

Exhibit 1: Cardiff & Vale University Health Board’s phased approach for responding to COVID-19

Phase 1	Repurposing capacity and zoning within UHB hospitals
Phase 2	Commissioning new infrastructure and additional capacity within UHB facilities
Phase 3	Commissioning short-term surge capacity outside UHB Facilities
Phase 4	Ongoing response to the pandemic
Phase 5	System renewal

- 19 The Health Board’s approach to quarterly planning remained unchanged. The process was co-ordinated by the Strategic Planning Team with strong input from the Clinical Boards and enabler services including workforce and organisational development, and finance. The Head of Strategic Planning meets with the Director of Operations, Deputy Director of Workforce and Organisational Development, and the Assistant Director of Finance on a fortnightly basis to facilitate collaboration and integration. All four senior managers reported that this arrangement works well. It enables them to share timely information and ensure an aligned and rapid response to any significant changes to the Health Board’s operating environment.
- 20 The Health Board also has a Strategy Development and Delivery Group (SDDG), which is a senior management forum to oversee the development of integrated strategic business plans and monitor plan delivery. The Health Board continued to make effective use of the SDDG to oversee the preparation of the Quarters 3-4

Plan and to provide formal scrutiny and advice on planning matters that had cross Clinical Board and corporate function implications.

- 21 Clinical Boards have continued to be actively involved in the planning process. The process was simplified to allow Clinical Boards to engage appropriately in planning whilst not impeding their ability to respond effectively to the pandemic. A streamlined and pre-populated template was introduced, setting out the planning assumptions and parameters within which they were expected to operate during the period. Clinical Boards were asked to review and update the templates as necessary, and the information provided formed the basis of the Quarters 3-4 Plan. Clinical Boards have responded positively to this simplified approach.
- 22 Partnership working is generally effective, and the Health Board has engaged with its partners as part of the planning the process. The Quarters 3-4 Plan sets out the Health Board's approach to working with local, regional, and national partners to deliver aspects of the plan, such as Test, Trace, and Protect. The Winter Protection Plan, which was developed through the Regional Partnership Board, provides more detail on the Health Board's approach to collaborative planning and delivery.
- 23 The Quarters 3-4 Plan, like the previous quarterly plans, has been informed by robust modelling and high-quality operational, financial, and workforce data. The Health Board developed three broad, high-level scenarios for quarters 3 and 4 to support its planning and response: COVID-19 'worst-case', 'best-case', and 'central' scenarios. Detailed modelling was undertaken to understand the likely impact of anticipated demand in each scenario covering a range of factors, such as bed capacity. The 'central' scenario was adopted as the Health Board's triangulation point for the purpose of writing the Quarters 3-4 Plan in the context of the four harms associated with COVID-19 and clinical prioritisation.
- 24 The Health Board's planning approach and operating model have remained flexible, agile, and dynamic throughout the pandemic. The Health Board's gearing approach (see **paragraph 18**) reflects the need for its operating model to be adaptable and to respond differently depending on the prevalence of COVID-19 and the resulting impact on service provision. Consequently, the Health Board operates within rolling six-week planning cycles, informed by data and modelling, which allows it to 'gear' service provision appropriately to changing levels of demand.
- 25 The Health Board has continued to maintain a focus on its 10-year strategy - Shaping Our Future Well-being. The Management Executive has completed a mid-strategy review and is in the process of setting out the work needed to deliver the next key milestones though the Annual Plan 2021-22 and other strategic programmes. The Health Board has also progressed work on strategic programmes during the pandemic, such as Shaping Our Future Clinical Services. However, there has been minimal alignment between longer-term strategic plans and quarterly operational plans during 2020-21. This is because, in developing the quarterly operational plans, the Health Board has focussed largely on satisfying the

requirements of the Welsh Government operating framework. Going forward, the Annual Plan 2021-22 will be used as a vehicle for progressing the Health Board's medium to longer-term priorities and implementing the learning captured during the pandemic.

Arrangements for monitoring delivery of operational plans

- 26 Our work considered the Health Board's arrangements for monitoring and reporting on the delivery of the Quarters 3-4 Plan.
- 27 We found that **reporting to the Board on key areas within the Quarters 3-4 Plan has increased, but opportunities to strengthen arrangements for monitoring and reporting on overall delivery of operational plans remain.**
- 28 There is frequent reporting to the Board on key areas within the Quarters 3-4 Plan via the monthly Coronavirus Update Report. However, these updates provide a general description of activity rather than progress against delivery of Quarters 3-4 Plan commitments. Reports on the Health Board's financial position and performance against key indicators have continued to be presented to the Management Executive and to the Board and its relevant committees on a frequent basis.
- 29 Whilst these reporting arrangements are generally effective, there has been no monitoring or reporting of the Health Board's overall performance in delivering the Quarters 3-4 Plan. This is partly due to the lack of a clear summary of key actions, timescales, and measures against which progress can be monitored and reported. As a result, there has been limited scrutiny and assurance by the Board and its committees on delivery against the Quarters 3-4 Plan in its entirety. This was also the case during quarters 1 and 2 as highlighted in our 2020 Structured Assessment report.
- 30 The Health Board is currently in the process of enhancing its monitoring and reporting arrangements. Planned developments include introducing an Integrated Board Assurance Report, and a Strategy & Delivery Dashboard which will allow the Board and its committees to monitor, scrutinise, and challenge performance on delivery of the Health Board's plans and strategies. There are also plans to review the arrangements to monitor and report operational plan delivery at other health bodies, with a view to identifying positive practice that could potentially be adopted by the Health Board.



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