

# Structured Assessment 2021 (Phase One) – Operational Planning Arrangements - Swansea Bay University Health Board

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# Contents

Summary report	
About this report	4
Key messages	4
Detailed report	
Scope and coverage of the 2020-21 Quarters Three-Four Plan	6
Arrangements for developing operational plans	7
Arrangements for monitoring delivery of operational plans	9

# 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 Swansea Bay 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. For the Health Board, this was in the form of an annual plan for 2020-21, set in the context of the three-year period. 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 and Social Services 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 **the Health Board has robust arrangements for developing, and monitoring the delivery of, operational plans which are supported by effective data modelling to be able plans to respond to changing circumstances.**
- 7 The Health Board's Quarter 3-4 Plan was submitted to the Welsh Government on time, covers all required areas within the planning guidance and received appropriate Board scrutiny and approval.

- 8 The Health Board's operational planning approach is robust and underpinned by effective data modelling to enable agile responses to changing circumstances.
- 9 The Health Board has set out clear actions and milestones for delivery of its Quarters 3-4 Plan, and progress of delivery is monitored regularly by the Board and its committees.
- 10 We have not made any 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 **the Health Board's Quarters 3-4 Plan was submitted to the Welsh Government on time, covers all required areas within the planning guidance and received appropriate Board scrutiny and approval.**
- 13 The Health Board submitted their Quarters 3-4 Plan along with their Minimum Data Set (MDS) to the Welsh Government on time. Due to timing, the plan was approved by Chair's Action prior to formal submission to the Welsh Government on 19 October 2020. The plan was subsequently ratified by the Board on 26 November 2020.
- 14 The Welsh Government set out its requirements in the NHS Wales Operating Framework for Quarters 3 and 4 (2020-21) which was issued to NHS bodies on 24 September 2020. Anticipating the need for a short turnaround to produce a six-month plan within the timescales set, the Health Board started its planning process in July to produce the plan, focusing on recovery and maintaining essential services.
- 15 The Quarters 3-4 Plan is comprehensive and builds on the previous quarterly plans with good consideration of actions delivered to date. The Quarters 3-4 Plan also clearly sets out how the Health Board would continue to respond to the ongoing demand from COVID-19, demand from all other emergency admissions and the delivery of essential services. The Quarters 3-4 Plan is aligned with the Health Board's Outpatient Transformation Programme and also the refreshed national delivery milestones for the Strategic Programme for Primary Care. The Quarters 3-4 Plan refers to the four harms<sup>1</sup> but also recognises the workforce challenges that would be experienced if the level of demand from COVID-19 was to exceed maximum levels anticipated.
- 16 All independent members were involved in the development of the Quarters 3-4 Plan through board member briefing sessions, and they were given the opportunity to submit any comments before the plan was finalised. In addition, an update paper on the development of the Quarters 3-4 Plan was presented to Board in September 2020.
- 17 The Health Board's Quarters 3-4 Plan received positive verbal feedback from the Welsh Government, reflecting that it had demonstrated good alignment of available

<sup>1</sup> The Welsh Government's planning framework for 2020-21 required health bodies to consider four types of harm in the plans and address all of them in a balanced way. The four types of harm are: harm from COVID-19 itself, harm from overwhelmed NHS and social care system, harm from reduction in non-COVID-19 activity and harm from wider societal actions/ lockdown.

workforce and financial resources, to service delivery, and an open and realistic assessment of deliverability with clear contingencies. Feedback noted the Health Board achieved the highest level of completion for their MDS, despite difficulties in obtaining some of the data not routinely collected.

## Arrangements for developing operational plans

- 18 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.
- 19 We found **the Health Board's operational planning approach is robust and underpinned by effective data modelling to enable agile responses to changing circumstances.**
- 20 The Quarters 3-4 Plan builds on the previous two quarterly plans, and the process used to develop them. Although the Quarters one and two plans were focused on a shorter timeframe, the Health Board learnt from the approach used and developed a reset and recovery structure, with a number of underpinning workstreams. The process used also reflected the need to balance the four harms.
- 21 The planning process has changed considerably during the pandemic, so as to take pressure off operational teams and to enable a quick turnaround to meet the Welsh Government timescales. Planning team members were aligned with operational teams to develop the plan and used a standard template. The Quarters 3-4 plan underpinning plans were also developed with the planning team's involvement to ensure that they were appropriately integrated and consistent.
- 22 The Director of Strategy has overseen the planning process, and the Quarters 3-4 plan was agreed and signed off by the Senior Leadership Team and the Executive Board. Scrutiny and challenge of the Quarters 3-4 plan was provided by the Board. Whilst the approach remained light touch for the Quarters 3-4 plan, the planning process was rigorous.
- 23 The Health Board's Winter Seasonal Plan was integrated into the plan and this element was signed off through the Regional Partnership Board and the multi-agency community group set up as part of the Health Board's command structure. This group was set up in response to the pandemic and includes third sector and local authority members. Partnership working has also extended to other health boards, namely Hywel Dda and Cardiff & Vale University Health Boards, who were also involved in the sign off process of sections of the plan there were joint working arrangements.
- 24 During Quarter two, the Health Board undertook substantial work to capture learning from the new ways of working utilised during the early part of the pandemic. This was captured in the Health Board's 'Insight' Report, which was presented to the Board in November 2020. The learning from new ways of working informed the Quarters 3-4 Plan. In addition, the Health Board has undertaken work to consider how service developments implemented to help respond to COVID-19

have helped to deliver the priorities set out in its Clinical Services Plan 2019-2024, and consequently the relevancy on the longer-term plan. This work has informed the development of the priorities in the Annual Plan 2021-22.

- 25 The need for agile decision making to make necessary service changes has meant that the Health Board has not been able to fully engage staff and service users. However, a small number of short engagement sessions were established with the Community Health Council (CHC) and Health Board staff at the early stages of developing the Quarters 3-4 Plan. Ongoing fortnightly engagement with the CHC has worked well and was underpinned with a Memorandum of Understanding and a recognition that the Health Board has needed to redesign services at pace. There is agreement that where the Health Board considers making any of the service changes permanent, these would be subject to CHC consultation.
- 26 The Quarters 3-4 Plan has been supported by detailed modelling to understand the requirements for core/surge/super surge and critical care capacity using the national scenarios as a basis for planning. This modelling demonstrated that while the Health Board had the physical capacity to respond to demand, there would be significant workforce challenges at super surge capacity. A Workforce Deployment Plan has been developed to enable the movement of staff to help meet critical and urgent needs if necessary, but this is reliant on the Health Board adjusting some services for a period of time to support the surge.
- 27 Detailed modelling has also helped the Health Board understand the potential demand on the unscheduled care system through the winter, and the modelling has informed the Winter Seasonal Plan. The Health Board's Service Groups have also worked well together to improve estimates of workforce data (such as vacancies, annual leave, sickness and COVID related absences and used this data to model the level of care that can be safely staffed. The Health Board's modelling has allowed for more informed decision making, one example being whether field hospitals needed to be opened during the second wave.
- 28 Whilst the Quarters 3-4 Plan was written at a point of time, the plan was adaptable and the underpinning data modelling, has enabled informed and flexible decision-making reflecting changing circumstances and operational needs. For example, the ability and capacity to deliver elective surgery was necessarily reduced to enable the Health Board to respond to the second peak of COVID-19, which was earlier than predicted by national modelling.



## Arrangements for monitoring delivery of operational plans

- 29 Our work considered the Health Board's arrangements for monitoring and reporting on the delivery of the Quarters 3-4 Plan.
- 30 We found **the Health Board has set out clear actions and milestones for delivery of its Quarters 3-4 Plan, and progress of delivery is monitored regularly by the Board and its committees.**
- 31 The Quarter 3-4 Plan clearly sets out the key actions and milestones for each service area. These have been collated into an operational plan tracker which is used to monitor and measure delivery.
- 32 Delivery of the actions are monitored and reported to the Executive Board and Senior Leadership Team. The Performance and Finance Committee, the Quality and Safety Committee and the Board each receive operational plan progress report each quarter.
- 33 The operational plan progress report provides a high-level summary of performance against actions and clearly show where actions have been delivered and where delivery is off track, a description of the mitigating action taken. This is supplemented with the operational plan tracker which RAG rates delivery, and links each of the actions to delivery against one of the four harms, A further report gives a comprehensive overview of the progress to date with a series of charts and tables to give Board members assurance of progress.
- 34 Due to delivery pressures resulting from the second wave of COVID-19, the reporting arrangements were temporarily stood down during December 2020 and January 2021.



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