



Meeting Date	19 November 2019	Agenda Item	4.2	
Report Title	Performance Management, Governance and Accountability			
Report Author	Darren Griffiths, Associate Director of Performance			
Report Sponsor	Chris White, Chief Operating Officer			
Presented by	Darren Griffiths, Associate Director of Performance			
Freedom of Information	Open			
Purpose of the Report	The purpose of this report is to describe the Performance Management, Governance and Accountability arrangements within the Health Board.			
Key Issues	<p>Performance management, governance and accountability are present in all aspects of Health Board operations.</p> <p>This report focusses on these elements as they relate to the principal targeted intervention areas.</p> <p>There are formal and informal ways in which performance is managed, governed and assured, but the two main formal routes are quarterly performance reviews of the units and individual performance appraisals</p> <p>The current system is clear and simple, and whilst these are positive attributes of any system, work is currently underway to consider what a more sophisticated performance management framework could look like for the Health Board once its future structure and operating model are implemented.</p>			
Specific Action Required (please choose one only)	Information	Discussion	Assurance	Approval
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendations	<p>The Committee is asked to: -</p> <ul style="list-style-type: none"> • NOTE the arrangements currently in place • NOTE the proposal to develop a new Performance Management Framework in Quarter 4 for implementation in 2020/21. 			

PERFORMANCE MANAGEMENT, GOVERNANCE AND ACCOUNTABILITY

1. INTRODUCTION

At the agenda planning session for the November Performance and Finance Committee, its chair requested an update on the arrangements for performance management, governance and accountability within the Health Board.

This report sets out, at a high level focussed primarily on targeted intervention areas, the current arrangements along with the proposed next steps.

2. BACKGROUND

Clear governance and accountability arrangements are important in discharging responsibilities for key aspects of Health Board activities such as financial management and performance delivery.

This paper describes one of the systems of performance management, governance and accountability as it relates to targeted intervention performance areas.

Unclear or ambiguous arrangements run the risk of confused accountabilities and potential shortfalls in performance delivery.

There are formal and informal ways in which performance is managed, governed and assured, but the two main formal routes are quarterly performance reviews of the units and individual performance appraisals

The current system is clear and simple, and whilst these are positive attributes of any system, work is currently underway to consider what a more sophisticated performance management framework could look like for the Health Board once its future structure and operating model are implemented.

3. GOVERNANCE AND RISK ISSUES

This section of the report sets out the current Swansea Bay University Health Board (SBUHB) arrangements for the management of performance delivery at an organisational and individual level.

There are a variety of local and informal methods for handling performance improvement and delivery, but this paper focuses on the formal arrangements currently in place.

This section of the report covers the following areas: -

- Quarterly Unit Performance Reviews
- Service Improvement Boards
- Financial Management Group
- Weekly Delivery and Assurance Meetings

- Personal Appraisal Development Review (PADRs)

3.1 Quarterly Unit Performance Reviews

Each of the Health Board's five delivery units has a formal performance review every quarter. The Quarter 1 and Quarter 3 reviews focus on more immediate matters of performance and the Quarter 2 and Quarter 4 reviews are broader discussions taking in the half year and year end positions.

From a unit perspective the senior management team attends every review. From a corporate perspective the Executive Team attends every review with the exception of the Chief Executive Officer. The Quarter 2 and Quarter 4 reviews are chaired by the Chief Executive Officer and are also attended by an Independent Member.

There is an embedded discipline for the reviews whereby guidance is issued ahead of each review by the Corporate Performance team for content of papers. Papers are then supplied by the units and a review pack is prepared. Each review is minuted carefully and the Unit Director receives written feedback in the form a letter with a supporting action log. The action logs are then updated ahead of the next quarterly review to maintain the governance loop.

The quarterly reviews are the primary performance governance process for the Health Board. During these reviews, units are asked to describe their contributions to wider systems, such as unscheduled care, but as the reviews focus on unit accountability, they are very much based on unit to executive discussions.

3.2 Service Improvement Boards

Service Improvement Boards are also in place to allow cross system discussions to be held with each stakeholder in that system who is present. They focus on key performance areas but rather than provide a unit focus, they provide a system focus. Whilst the boards are not part of the accountability arrangements of the organisation, they provide the opportunity for assurance to be gained on the connectivity of plans to improve whole system performance. The Boards, typically held bi-monthly, are chaired by the lead executive officer for each area have broad representation across the system and are recorded by formal minutes. They comprise:

- Cancer Improvement Board
- Planned Care Delivery Board
- Unscheduled Care Board
- Infection Prevention and Control Board

The above bullet points are not exhaustive but reflect the arrangements for the key performance areas as determined by the Health Board's Targeted Intervention status.

3.3 Financial Management Group

There is a monthly financial cross system meeting in place. This meeting is chaired by the Chief Executive Officer and has key executive and unit representation in attendance. This meeting receives updates from the Delivery Support Team (DST) and from the weekly financial review meetings.

3.4 Weekly Delivery and Assurance Meetings

Underpinning the formal quarterly review process is a range of weekly meetings which enable the executive leads for each area to track performance, agree actions, check delivery of plans and provide support where necessary. Whilst not a formal part of the performance system, these weekly meetings are key to keeping decision making agile, to understanding how performance is changing and to give authority to act across the system where necessary.

- **RTT (referral to treatment – planned care)** – meeting with unit leads also attended by NHS Wales Delivery Unit colleagues in a supportive role
- **Unscheduled Care** – weekly Service Director meeting (with support from Chief Operating Officer, Associate Director of Digital Services and Associate Director of Performance)
- **Cancer** – unit leads meet with Service Director for Mental Health and learning Disabilities (Health Board performance lead for cancer) and the cancer information team.
- **Finance** – weekly review meetings rotate through recovery, workforce and savings assurance discussions on a cyclical basis. Unit Senior Leadership Team meets with Director of Finance and other Executive Director colleagues as relevant to the agenda for that particular week.

3.5 Personal Appraisal Development Review (PADRs)

Underpinning all of the above are the personal objectives and accountabilities of leaders and teams which are cascaded through individual performance reviews or PADRs. These performance delivery objectives (which are balanced in terms of delivery, quality and safety) are cascaded from the Chief Executive Officer, through the Chief Operating Officer to Unit Directors and then onwards to their teams. Progress is checked through all of the above areas but is formally recorded through the PADR process and the individual performance reviews.

3.6 Performance Statement

Finally, on a monthly basis, each delivery unit receives a detailed performance statement document from the Corporate Performance team setting out a rolling 13 month picture of performance against a wide range of indicators. This isn't subject to a monthly review but every three months feeds the quarterly review process. The detail is provided monthly to units to facilitate their own internal performance management discussions.

4. FINANCIAL IMPLICATIONS

There are no financial implications associated with this paper.

5. NEXT STEPS

As Swansea Bay University Health Board takes its revised form following the Bridgend boundary change and post the currently being discussed changes to the management structure, it is opportune to consider a revised Performance Management Framework.

Research has been undertaken to consider frameworks in other organisations and consideration is being made as to the type of framework the Health Board would like to introduce, taking specific consideration of the Health Board's values, targeted intervention status and complex nature.

Discussions will be held early in the new 2020 calendar year to test some of the options currently being worked up with a view to implementing a new Performance management Framework for 2020/21

6. RECOMMENDATION

The Committee is asked to: -

- **NOTE** the arrangements currently in place
- **NOTE** the proposal to develop a new Performance Management Framework in Quarter 4 for implementation in 2020/21.

Governance and Assurance		
Link to Enabling Objectives <i>(please choose)</i>	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
Health and Care Standards		
<i>(please choose)</i>	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
Robust performance management, governance and accountability arrangements support leadership and delivery. Quality, Safety and Patient Experience are supported and enhanced by strong arrangements in these areas.		
Financial Implications		
There are no direct financial implications of this paper. Health Board finance management is an element of this system.		
Legal Implications (including equality and diversity assessment)		
There are no legal implications arising from this paper.		
Staffing Implications		
There are no direct staffing implications of this paper. PADRs are a key component of the process.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
The delivery of safe, timely, appropriate care within a stable financial framework will provide long term benefits for the delivery of health care and the promotion of health and wellbeing. Appropriate performance management, governance and accountability arrangements will support the delivery of performance improvement and transparent appropriate decision making to provide the system described in the paragraph above.		
Report History	There have been no previous reports addressing this specific request.	
Appendices	n/a	

