

# Cwm Taf Morgannwg University Health Board (CTMUHB)

## Annual Assessment of Board Effectiveness 2020-2021

### 1. SITUATION

The Board is required to undertake an annual self-assessment of its effectiveness. The purpose of this report is to bring together the sources of assurance that support this assessment process.

### 2. BACKGROUND

During the year the Health Board has undertaken and/or engaged in a number of assessments that would provide internal and external sources of assurances to support the Board in undertaking its annual effectiveness assessment, these are outlined below:

#### Internal Sources of Assurance

- An assessment against the **Corporate Governance in Central Governance Departments: Code of Good Practice 2017**, has been completed using the "Comply" or "Explain" approach. The Self-Assessment against the code of good practice is attached at Appendix 1.
- **Board Committee Effectiveness** – There is a programme in place to ensure Committees of the Board review the following activity on an annual basis.
  - Terms of Reference and Operating Arrangements
  - Committee Effectiveness Annual Surveys
  - Committee Cycle of Business
  - Annual Committee Reports on Activity to the Board

#### External Sources of Assurance & Review

- **Audit Wales Structured Assessment** – was undertaken during 2020 and the full report and management response is attached at Appendix 2. The recommendations are monitored via the Audit & Risk Committee through to completion.
- **Deloitte's Board Development Programme** - A Board Development session on Business Chemistry (June 2020), covering good practice in board governance and a reflection of how the Board has developed over the past 12 months (December 2020) informed by;
  - A re-run of the Board evaluation questionnaire that was undertaken a year ago; and
  - Observations from the Board and Committee meetings (Oct-Nov 2020)

The presentation to the Board Development Session in December 2020 – “Outcome of the Board Member Survey – 2019 & 2020 Responses” is attached as Appendix 3.

Deloitte are scheduled to hold a Board Development Session for Independent Members in March 2021 on good practice in Charing, Assurance and scrutiny.

- **Internal Audit Report on Risk Management** – Appendix 4.

In its review of Quality Governance HIW and Audit Wales recommended that the Health Board:

- Improve its Service Group to Board risk management – review and update risk management strategy and framework.
- Ensures there are clear and comprehensive risk management systems at directorate and corporate level, including the review and population of risk registers. This should include clarity around the escalation of risks and responsibilities at directorate and corporate level for risk registers.

The Health Board commenced a Risk Management Improvement Plan and an Internal Audit Review undertaken by NWSSP Internal Audit Services in November & December 2020, reviewed the Risk Management process and systems and concluded an assessment of *Reasonable Assurance*, with an overall positive report recognising the improvement in the Health Board’s Risk Management journey.

- **Joint Escalation and Intervention Arrangements status**

Joint Escalation and Intervention Arrangements, the Welsh Government (WG) meets with Audit Wales and Healthcare Inspectorate Wales twice a year to discuss the overall assessment of each Health Board and Trust in relation to the arrangements.

Following WG correspondence of the 5<sup>th</sup> October 2020, it was confirmed that WG officials will be recommending to the Minister that the escalation status of the Health Board remains unchanged at ‘targeted intervention’ with maternity services remaining in ‘special measures’.

It should be noted that within the correspondence the professional and considered way in which the NHS and the Health Board responded to the extraordinary circumstances of the pandemic response was recognised. Furthermore the tripartite group acknowledged the positive way the Health Board has continued to respond in an open and transparent manner, including how it is engaging with external review bodies. The group also noted the improved partnership and stakeholder engagement, particularly with the Local Authority partners and the positive way the status of the emergency department at the Royal Glamorgan had been concluded.

### 3. ASSESSMENT

Following due consideration of section two and revisit of the supporting appendices, the Board are asked to consider what it considers the overall level of maturity to be for the Health Board in respect of governance and board effectiveness for 2020-2021, based on the following criteria:

Assessment Matrix level	Level 1	Level 2	Level 3	Level 4	Level 5
Tick the matrix box that most accurately reflects how your service is doing with this standard	We do not yet have a clear, agreed understanding of where we are (or how we are doing) and what / where we need to improve.	We are aware of the improvements that need to be made and have prioritised them, but are not yet able to demonstrate meaningful action.	We are developing plans and processes and can demonstrate progress with some of our key areas for improvement.	We have well developed plans and processes and can demonstrate sustainable improvement throughout the service.	We can demonstrate sustained good practice and innovation that is shared throughout the organisation and which others can learn from
			✓		

### 4. RECCOMENDATIONS

The Board has concluded its maturity rating in respect of Board Effectiveness / Governance, Leadership and Accountability to be **"Level 3"**.

The above assessment will be reported in the Accountability Report.

In concluding this process and in demonstrating continued self-reflection and an appetite for continuous improvement, the Board Members are asked to identify any areas of activity or improvement in relation to the questions on pages 4 and 5.

**IN THE BOARD'S  
OPINION WHAT  
ARE WE DOING  
WELL?**

- Virtual Meetings have overall been a positive experience in that it has allowed meetings to continue and also continued scrutiny.
- Assurance that Committee Effectiveness is working well via:
  - Annual Review of Terms of Reference
  - Highlight Reports from Committees to Board
  - Annual Committee Reports
  - Development of Board and Committee Cycles of Business
  - Annual Committee Effectiveness surveys.
- The Health Board has robust committee structures and governance arrangements
- The Health Board is open and transparent.
- The Health Board embraces its values.
- Partnership working, with significant progress on the Health Boards communications, with staff and stakeholders alike.
- The Board is becoming more mature as a Board, improving its committee processes and is also on a journey of improving it's focused questioning of at meetings in an informed manner.
- The quality of our messaging, and the availability of a simultaneous Welsh language version, with embedded links to further details for those who are particularly interested in any topic is very welcome.

**IN THE BOARD'S  
OPINION WHAT  
COULD WE BE  
DOING BETTER?**

- Development of a Legislative Assurance Framework to provide regular updates on compliance with legislative and regulatory requirements.
- Report Writing Training to:
  - Continue to improve the quality of reports received at Board and Committee meetings to include more concise representation of data.
  - Ensure reports focus on what the Board or Committee is being asked to do, for what purpose and the intended outcome.
- Independent Members to continue to improve their questioning skills and follow up questions.
- Cross Committee Boundaries and Referrals – integration across committee boundaries to be clearer especially with the introduction of new Committees.

	<ul style="list-style-type: none"> <li>• Continue to improve co-productive engagement with our communities, including geographical communities, demographic communities, communities of interest (which include our patients and carers).</li> <li>• Increased Benchmarking of our services.</li> <li>• Continue to improve engagement with our partners to address more effectively and urgently the huge population health challenges faced by the Health Board.</li> <li>• Improved stakeholder involvement and staff engagement in service change</li> <li>• Tangibly improve the behaviours which we all live every day, in line with the Health Boards Values and Behaviours.</li> <li>• Development of an overarching strategy for the Health Board which addresses the twin goals of improving population health and also the delivery of services.</li> <li>• Reflect and review to ensure that the Health Boards service delivery plans are truly patient centred balanced with clinical need.</li> </ul>
<p><b>IS THERE ANY BOARD TRAINING/DEVELOPMENT NEEDS?</b></p>	<ul style="list-style-type: none"> <li>• This has improved over the past two years. The engagement of Deloitte and the targeted work with IMs in respect of their role and work of committees has been good.</li> <li>• Ongoing work with Independent Members (IMs) around their development and understanding of services is crucial.</li> <li>• Mentorship of new IMs. Current Chairs could assist in mentoring less experienced members in Chairing skills.</li> <li>• Joint development days with Execs around service development and improvement.</li> <li>• Data analysis and understanding is an ongoing area that IMs will need development around.</li> </ul>