



AGENDA ITEM

3.2.8

CTM BOARD

COVID 19 PUBLIC INQUIRY PREPAREDNESS

Date of meeting	20 th September 2022
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Cally Hamblyn, Assistant Director of Governance & Risk
Presented by	Georgina Galletly, Director of Corporate Governance
Approving Executive Sponsor	Director of Corporate Governance / Board Secretary
Report purpose	FOR NOTING

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome
Executive Leadership Group	12.9.2022	Noted
Quality & Safety Committee	20.9.2022	Noted

ACRONYMS

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1. SITUATION/BACKGROUND

- 1.1 The purpose of this paper is to provide the Board with a position statement in respect of the Health Board's preparedness for the Covid-19 public inquiry.
- 1.2 The Covid-19 pandemic, which took hold in March 2020, has been one of the greatest challenges faced by the country and in the history of the NHS; challenges which have been predicated on unprecedented levels of demand across the whole system that have called for an equally unparalleled response.

- 1.3 In 2021, the Prime Minister announced his intention to commission an independent public inquiry into the Covid-19 pandemic enabling the UK government to discharge its obligations and examine the actions it took to respond to the pandemic and to learn every possible lesson for the future.
- 1.4 On the 15th December 2021, the Rt Hon Baroness Heather Hallett DBE was appointed as Chair of the forthcoming public inquiry into the Covid-19 pandemic.
- 1.5 On the 28th June 2022, the final Terms of Reference for the Inquiry were published and these are available here: [UK Covid-19 Inquiry Terms of Reference - UK Covid-19 Inquiry \(covid19.public-inquiry.uk\)](https://www.covid19.public-inquiry.uk).
- 1.6 In July 2022, the Rt Hon Baroness Hallett, officially launched the UK Covid-19 Inquiry, and opened its first investigation. The Inquiry will be split into three modules. Below is a very brief summary of these modules:
- **Module 1**, which opened on the 21st July 2022, will examine the resilience and preparedness of the UK for the coronavirus pandemic. This first module will include a review of public health services.
 - **Module 2**, will be split into parts and will examine core political and administrative governance and decision-making by the UK government and devolved governments.
 - **Module 3**, will investigate the impact of Covid-19, and governmental and societal responses to it, on healthcare systems, including on patients, hospital and other healthcare workers and staff.
- 1.7 The Chair of the Inquiry has set out the timetable for the next 12 months. The Inquiry's first procedural hearings will begin in September and October 2022 for Modules 1 and 2. Public hearings for Module 1 will begin in spring 2023 for Module 1 and summer 2023 for Module 2. More information on Module 3 timings will be available in the coming weeks.
- 1.8 Further detail is available via the following links:
- The Inquiry will announce further modules in 2023. The full opening statement can be found here:
[UK-Covid19-Inquiry-Launch-Statement.pdf](#)
 - The timetable and an overview of the opening statement can be found here:
[UK Covid-19 Public Inquiry \(covid19.public-inquiry.uk\)](https://www.covid19.public-inquiry.uk)

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

- 2.1 The Health Board Members are collectively and statutorily accountable for the safe and effective provision of health services to the population of Wales

both in peace time and during a crisis with the responsibilities of the organisation set out in legislation.

- 2.2 Regulatory and inspectorate bodies such as Audit Wales and Internal Audit have already concluded, during separate reviews, that the Health Board largely maintained good governance throughout the pandemic to ensure the right decisions were made in the right way and at the right time. However, many decisions were made tactically, pragmatically and delivered at speed within newly formed operational strategies during this time and it is vital, therefore, that the Health Board takes steps now to ensure that the wealth of evidence has been collated in full and reviewed to ensure that it has all been catalogued and securely stored.

Inquiry Preparedness for Module 3

- 2.3 The main focus of the Health Board's preparedness will relate to the remit of Module 3. The Board will recall that an update was provided to the March Board outlining the activity that was underway to support the Health Board's preparedness for the inquiry. The intention therefore is not to repeat that activity but to outline the further actions that have been taken forward since the last update in March 2022.

2.4 *Core Participant Status*

Organisations had an opportunity to apply for Core Participant Status for Module 1 and Module 2. The Health Board sought advice from its Legal Advisers where it was agreed that they did not see any reason for the Board to be a Core Participant for Module 1 or 2. The position of the Health Board regarding this has been shared with the Welsh NHS Confederation who were asked by Welsh Government to establish whether any Health Board or NHS Trust were putting themselves forward to be a core participant for module 1. Core Participant Status will be reviewed at the relevant point for Module 3.

2.5 *Programme Management Approach*

The Health Board's Covid-19 Pandemic Inquiry Working Group, chaired by the Director of Corporate Governance continues to meet monthly and considers the following activity as standard business:

- National Updates
- CTMUHB Preparedness Plan Activity. *The preparedness plan and membership of the Working Group was revisited in response to the publication of the Inquiry Terms of Reference to ensure all aspects were incorporated as appropriate.*
- Covid-19 Inquiry Programme Risk Register
- Plans to support the Health & Wellbeing of Our Staff
- Communication and Engagement Plan

2.7 *Nosocomial Activity:*

The Health Board is complying with the requirements of the National Framework 'Management of patient safety incidents following nosocomial transmission of Covid-19'. A separate report on the CTMUHB Nosocomial Covid-19 Incident Management Programme has been prepared for the

Quality & Safety Committee members and is available to the full Board upon request.

2.8 *All Wales Reflections Document for Completion in Preparedness for the Covid-19 Inquiry*

In conjunction with the Strategic Lead for Wellbeing & Employee Experience the All Wales Tool has been adapted to ensure it captures some key messaging and support mechanisms available from the Health Board and this was endorsed for use at the Working Group at the end of August 2022.

Future Preparation Activities

2.10 *Timeline and Information Management*

A substantial timeline of the pandemic describing the powers that the Executive Team and Tactical Commanders were using at the time crucial decisions were being made is a key piece of work is necessary to track and order the Health Board's evidence against these timelines. This is a substantial piece of work that remains ongoing and will take time and resources; however, it will clearly and easily demonstrate the steps that were taken and the decisions that were made as the pandemic guidance evolved.

2.11 Develop a full catalogue/repository of decisions, policies, procedures, communications, legislation and guidance that are linked to the Health Board's Covid-19 preparations and ongoing response (all relevant electronic and hard copy information).

2.12 Identify a secure, searchable electronic storage tool identified and being developed.

2.13 On the 28th July 2022, the Inquiry published a protocol for the transfer and handling of documents, the main aim of which is to facilitate the prompt delivery of documents to the Inquiry by ensuring that all Core Participants, Material Providers and the Public are aware of and understand the Inquiry's procedures for the provision of documents to the Inquiry and how the Inquiry will treat such documents. The protocol is available via the following link and has been considered by the Working Group. <https://covid19.public-inquiry.uk/wp-content/uploads/2022/07/2022-07-28-Protocol-for-the-Transfer-and-Handling-of-Documents.pdf>. The Inquiry have advised that a separate protocol relating to the redaction of documents will follow.

2.13 It is important to note that the pace of progress in relation to the activity outlined in points 2.10-2.12 will be adversely impacted by the departure of the Covid-19 Pandemic Information Manager with effect from the 4th September. Recruitment processes have been initiated for the successor to this position, however, this is a risk to the Health Boards preparedness position, please see Section 3 regarding risks.

2.6 *Meeting with Counsel 27th September 2022*

At the time of drafting this report a meeting has been arranged with the Health Boards Leading Counsel to discuss initial preparations and to allow Counsel to answer any early questions. The Working Group have inputted

into the questions and the Health Board will be represented at this meeting by the Director of Corporate Governance and Assistant Director of Governance & Risk. Any actions arising from this meeting will be led by the Working Group.

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

- 3.1 As outlined in 2.1.3, the pace of progress will be adversely impacted by the departure of the Covid-19 Pandemic Information Manager with effect from the 4th September. Recruitment processes have been initiated for the successor to this position, however, this is a risk to the Health Boards preparedness position.
- 3.1 The Working Group has developed a Programme Risk Register and reviews any risks for escalation to the Organisational Risk Register at each meeting. One risk has been endorsed for escalation at this time, and that is Datix Risk ID 4922 – “Covid-19 Inquiry Preparedness - Information Management”, which was escalated to the Organisational Risk Register on the 23rd November 2022.
- 3.3 The Assuring Committee assigned to these risks is the Quality & Safety Committee.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
Related Health and Care standard(s)	Governance, Leadership and Accountability If more than one Healthcare Standard applies please list below:
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	If no, please provide reasons why an EIA was not considered to be required in the box below. Not required.
Legal implications / impact	Yes – and Legal Representatives have been instructed.
Resource (Capital/Revenue £/Workforce) implications / Impact	Yes (Include further detail below) Staff time and resource.
Link to Strategic Goals	Improving Care

5. RECOMMENDATION

- 5.1 The Board is asked to:
- **NOTE** the contents of the report and receive assurances on the preparations for the inquiry to date.
 - **NOTE** the next steps the Covid-19 Pandemic Inquiry Working Group will take to consider the full programme of work identified in this report and outline how this could be managed.