

APPENDIX 3



Llywodraeth Cymru
Welsh Government

OGC Gateway™ Assurance of Action Plan

Programme Title:	Swansea Bay UHB Field Hospitals
IAH ID number:	AH/20/64

Version number:	Final v1.0
Senior Responsible Owners (SRO) for the purposes of this review:	Ian Gunney Darren Griffiths
Date of issue to SRO:	12/10/2020
Department/Organisation of the Programme/project	Capital, Estates & Facilities, Health and Social Services Group, Welsh Government Swansea Bay University Health Board
Review date:	12/10/2020
Review Team Leader:	Martin Dove
Review Team Members:	Sandi Cooper Mel Crisp
Previous Review:	Programme Assessment Review (PAR) 27/07/2020 to 29/07/2020 Delivery Confidence Assessment (DCA) - Amber / Red
Security Classification:	Official

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1.0 Delivery Confidence Assessment (DCA)

<u>Delivery Confidence Assessment:</u>	Amber
<p>This Assurance of Action Plan review finds that the DCA for the Swansea Bay University Health Board (SBUHB) Field Hospitals has improved from Amber / Red to Amber. This means that successful delivery appears feasible. The DCA reflects the assessment of the Action Plans put in place in response to the previous review recommendations, the re-assessment of the DCA against the terms of reference for the previous PAR review, and the readiness of the Bay Field Hospital to be used in 'super surge' conditions.</p> <p>Action has been taken to substantially complete or progress all recommendations from the previous assurance review and much work has been undertaken to establish revised operational plans (having vacated Llandarcy Field Hospital) for mobilising the first phase of the Bay Field Hospital. However, there remain significant issues requiring management attention. These include:</p> <ul style="list-style-type: none">• Imminent changes to the governance and management arrangements with the introduction of an additional Operational Silver Tactical Group. The value of using a Major Incident Gold Command structure to govern and manage SBUHB effectively for a year (including Q3/Q4) has been questioned, rather than business as usual arrangements.• Whether both the Field Hospital Groups are required as the Bay Field Hospital moves from establishment and planning to operations.• The opportunity to make more use of delivery tools and techniques to support Field Hospital delivery.• The Bay lease awaiting signature by Welsh Government.• If and when contingency arrangements are needed for regional working, beyond individual Health Board self-contained plans for 'super surge'.• The need for a high level project plan (providing clarity around each phase of the hospital) and a milestone plan (with key decision points) to enable a shared understanding of the development of the Bay Field Hospital.• A communications plans for the opening of the Bay Field Hospital should be prepared and approved. <p>The Review Team also recognises the inherent uncertainties in the use of the Bay Field Hospital in Q3/Q4 including:</p> <ul style="list-style-type: none">• What the reality is of the next phase of the pandemic, notwithstanding learnt practice and good modelling, and how the peaks of surge and super-surge impact.• The risk of Covid-19 outbreaks among patients, staff, volunteers in the hospitals of SBUHB and their partners and suppliers.• The challenging 'emergency' workforce models and demands which will be required as and when phase 2 of the Bay Field Hospital is used. The risk register records both recruitment and sickness of staff as the highest risks for phase 1 and 2 of using the Bay Field Hospital.• The risk of Covid-19 transmission from neighbouring areas and any need to provide whole system assistance to other Health Boards with their surge and super-surge challenges.• The impact of potential super surge on emergency and essential services, and the opening of the Field Hospital.	

The Review Team understands that the position with the Covid-19 pandemic is currently fast moving and preparations are taking place to be ready to mobilise Phase 1A of the Bay Field Hospital within 72 hours and it is anticipated this may happen within three weeks from the date of this review. The Review Team heard that operationally there is a plan in place to open and staff the Bay Field Hospital Phase 1 (with sub-phases A,B and C) providing 80 beds, 6 assessment beds and a discharge lounge.

1.1 Delivery Confidence Assessment

The Delivery Confidence assessment RAG status uses the definitions below.

<u>RAG</u>	<u>Criteria Description</u>
Green	Successful delivery of the programme/project to time, cost and quality appears highly likely and there are no major outstanding issues that at this stage appear to threaten delivery.
Amber/Green	Successful delivery appears probable. However, constant attention will be needed to ensure risks do not materialise into major issues threatening delivery.
Amber	Successful delivery appears feasible but significant issues already exist requiring management attention. These appear resolvable at this stage and, if addressed promptly, should not present a cost/schedule overrun.
Amber/Red	Successful delivery of the programme/project is in doubt with major risks or issues apparent in a number of key areas. Urgent action is needed to ensure these are addressed, and establish whether resolution is feasible.
Red	Successful delivery of the programme/project appears to be unachievable. There are major issues which, at this stage, do not appear to be manageable or resolvable. The programme/project may need re-baselining and/or overall viability re-assessed.

2.0 Summary of Previous Review Recommendations and Assessment of Action Plan

Ref. No.	Previous review recommendation	Action Plan and SBUHB assessment	AAP Review Team findings, assessment, and further recommendations
1.	Set out governance and management arrangements below Corporate Board and Gold Command, for the next two quarters, to align any required Covid-19 Major Incident responses with those needed for seasonal demand and the scaling up of routine work - Essential	Field Hospital Operating Framework drafted with review and support by Field Hospital Operational Group. With SRO for sign off then to be sent to Health Board Gold for approval - Complete	<p>Revised arrangements are being introduced on 13/10/2020 for a new Operational Silver Tactical Group (which came from a hot debrief requirement for a systemwide focus within SBUHB). This is required to allow Gold Command to step away from operational issues. Both are to be used for the duration of Q3/Q4 as the main major incident and business continuity governance and management arrangements for SBUHB, replacing pre-existing arrangements. The draft Silver TORs and a draft Covid-19 Escalation Framework (which is still being developed) were provided on the day of the review and we understand TORs for Gold are to be revised. More usually Gold Command structures are used for short lived major incidents and not on an ongoing basis. Hence, it will be important to ensure managers and staff understand the hierarchy and where decisions are made and the speed at which decisions can be taken. The Field Hospital Operating Framework should be developed to explain how the groups interface with the wider governance and management arrangements, including the new Operational Silver Tactical Group.</p> <p>Recommendation 1: Confirm whether a Gold Command structure is still appropriate for managing Covid-19 and other activities through Q3/Q4, and, assuming it is, rapidly implement the revised Gold and Silver command and Covid-19 Escalation Framework</p>
2.	Prepare terms of reference for the field hospital establishment and operational group - Essential	Terms of Reference for Establishment Group and Operational Group prepared and ratified – Complete	The Review Team heard that due to the imminent activation of the Field Hospital the frequency of meeting of the two Field Hospital groups has increased. Consideration is being given to either merging the two groups, or alternatively standing down the Establishment Group, recognising that the Bay Field Hospital will shortly be operational and the Operational Group could potential reporting into the Operational Silver Tactical Group, depending on final ToRs. The work of the Establishment Group looks largely complete and will be needed in a different form for dis-establishment of the Bay Field Hospital in the future.

			Recommendation 2: Streamline governance arrangements for the field hospitals, including considering standing down the Field Hospital Establishment Group
3.	Use a Programme and Project Management approach for field hospitals, including a project manager, to provide improved delivery tools, management, control and reporting - Essential	Covered in Field Hospital Operating Framework – Complete	<p>The key here is about using programme and project management methodology and appropriate tools to aid decision making, governance and management. Tools such as a mobilisation plan on a page, integrated approval and assurance planning, approach to risk management (rather than risk reporting), reflecting how these tools are used differently in the planning and operational phases, and a proportionate approach to contingency planning. A workback plan for opening the Bay Field Hospital is available, and was provided to Review Team on the date of the review, as was the overall plan of how the field hospital could, in theory, be used to maximum capacity.</p> <p>Recommendation 3: Seek guidance and consider input from transformation colleagues and military advisors on those tools and techniques which will help planning, accelerate and streamline operational decision making, managing risks and reporting requirements</p>
4.	The field hospitals leases need to be signed and any impacts of consequential losses fully understood in terms of risk, cost and future planning - Critical	<p>Llandarcy and Bay Collaboration Agreements signed - Complete</p> <p>Bay lease agreement approved and with Welsh Government for approval. Need for Llandarcy lease sign off to be explored given Health Board exit from site – Partially complete</p>	<p>The Llandarcy Collaboration agreement is signed and the Llandarcy formal handback is due on 30/10/2020, with no unexpected issues arising so far. Legal advice has been obtained to confirm the Llandarcy licence does not need to be signed retrospectively.</p> <p>The Bay Collaboration agreement was signed on 05/10/2020. The Bay Field Hospital lease has still to be signed by Welsh Government. Decommissioning costs of Bay Field Hospital is likely to be in 2021/22 (although a formal decision has not yet been made by the Health Board) and should be re-examined in the next Assurance Review.</p> <p>Recommendation 4: Welsh Government to sign the Bay Field Hospital Lease</p>
5.	Continue to provide the evidence base to secure additional funding for field hospitals including operational costs, decommissioning costs and consequential losses, and further investment for the	Update on Field Hospital paper to Board 24/09/2020 includes level of financial detail. Allocation for Covid-19 identified and allocated to Health Board in Operating Framework - Complete	Welsh Government recognises financial information is sufficiently detailed and up-to-date for monitoring and allocation purposes for the Field Hospitals. Q3/Q4 plan requirements includes more standard information to be provided, including on workforce, with an emphasis on the difference between ‘theoretical’ and (real) ‘functional’ capacity. The SBUHB Q3/Q4 plan is to be submitted to Welsh Government by 16/10/2020 and will further inform the financial position. The Action Plan has been completed for this item.

	revised Bay clinical model and capacity - Critical		
6.	Work with Welsh Government and other neighbouring Health Boards on options for regional field hospitals and consider the next phase implications for the Bay Field Hospital - Critical	Discussions with SBHUB and HDdUHB Chairs, COOs and DOPs August 2020 - current position confirmed, both HB use own sites as surge capacity - Complete	<p>SBUHB have liaised with neighbouring Health Boards about potential working together on any requirements for regional field hospitals. CTM UHB are looking towards a SE Wales solution. HDdUHB and SBUHB have had discussions about mutual aid should either become overwhelmed. The primary issue is not physical bed capacity, but severe staffing shortages across Health Boards. There are other issues about commonality of clinical models and staffing models. The Review Team heard different views on what is available at the Bay Hospital for regional working. There are no contingency plans, even at a relatively high level, for regional working and this is not currently included in the SBUHB escalation framework.</p> <p>Recommendation 5: SBUHB to initiate contingency planning for regional 'super surge' arrangements</p> <p>Recommendation 6: Welsh Government to reiterate planning requirements for regional 'super surge' arrangements</p>
7.	Clarify the key messaging and communications, particularly for staff and stakeholders about the identity of the field hospital and the purposes for which it will be used in the next phase - Essential	Future of field hospitals to be considered by the Board - Paper to Health Board 24th September - Complete	<p>Mobilisation of the Bay Field Hospital is currently anticipated in three weeks time. The Review Team heard divergent views about what the Bay Field Hospital provided in its different phases (including the difference between theoretical (beds) and functional (staffed operating model) capacity), the potential timing of these from the first opening date, and the key milestones to delivery.</p> <p>Recommendation 7: Develop and implement a high level project plan (providing clarity around functional capacity about each phase of the hospital) and a milestone plan (with key decision points) to enable a shared understanding of the Bay Field Hospital</p> <p>There are clear dependencies on effective and timely communications to staff, volunteers, the public and other organisations and these need to be in line with the draft Escalation Framework. Elsewhere in the UK some field hospitals are now preparing to open and public demand for information on local equivalents is likely to increase.</p> <p>Recommendation 8: Internal and external communication plans are needed for when and how the Bay Field Hospital will be opened</p>

3.0 Summary of Report Recommendations

The Review Team makes the following recommendations which are prioritised using the definitions below.

Ref No	Recommendation	Urgency (C/E/R)	Target date for completion	Classification
1.	Confirm whether a Gold Command structure is still appropriate for managing Covid-19 and other activities through Q3/Q4, and, assuming it is, rapidly implement the revised Gold and Silver command and Covid-19 Escalation Framework	C- Critical	Do now	Governance Structures and Processes
2.	Streamline governance arrangements for the field hospitals, including considering standing down the Field Hospital Establishment Group	E- Essential	Do by 31/10	Governance Structures and Processes
3.	Seek guidance and consider input from transformation colleagues and military advisors on those tools and techniques which will help accelerate and streamline planning, operational decision making, managing risks and reporting requirements	E- Essential	Do by 31/10	Programme and Project Management methodology and standards
4.	Welsh Government to sign the Bay Field Hospital Lease	R - Recommended	Do now	Governance approvals
5.	SBUHB to initiate contingency planning for regional 'super surge' arrangements	E- Essential	Do by 31/10	Context, aim and scope
6	Welsh Government to reiterate planning requirements for regional 'super surge' arrangements	C- Critical	Do now	Context, aim and scope
7	Develop and implement a high level project plan (providing clarity around functional capacity about each phase of the hospital) and a milestone plan (with key decision points) to enable a shared understanding of the Bay Field Hospital	C- Critical	Do now	Programme and Project Planning
8	Internal and external communication plans are needed for when and how the Bay Field Hospital will be opened	E- Essential	Do by 31/10	Programme and Project Communication s

Critical (Do Now) – To increase the likelihood of a successful outcome it is of the greatest importance that the programme/project should take action immediately

Essential (Do By) – To increase the likelihood of a successful outcome the programme/project/project should take action in the near future.

Recommended – The programme/project should benefit from the uptake of this recommendation.

4.0 Comments from the SRO

The Health Board and Welsh Government acknowledge the findings of the review and will now develop an action plan to ensure that all actions are completed. This will be held and reviewed within the overall governance structure for the field hospitals and will be reported through the Health Board's Audit Committee in the same way as the original report. The Health Board and Welsh Government are grateful to the Review Team for undertaking this work and for the understanding shown given a time of operational pressures across key areas within the Health Board at the time of the review.

5.0 Background, context, aims, objectives and key milestones

In response to the Covid-19 pandemic the CE NHS Wales and DG Health and Social Services Group wrote to Chief Executives of NHS LHBs on 04/04/2020 setting out plans for additional 'field / surge hospital' capacity which will in effect double acute bed capacity levels based on the 40% reasonable worst case (RWC) scenario approach in a 3-4 week timescale.

SBUHB had a four phase approach in responding to this initial request:

- Maximise capacity on hospital sites.
- Create 'surge' capacity within the current estates.
- First phase of 'field hospital' provision at Llandarcy with 343 beds, being able to operationalise the site within 48 hours of handover, which anticipate to be on 23/04/2020.
- Second phase of 'field hospital' provision at Bay Studios with 419 beds and potentially up to 1,001. Handover of the first beds was planned and delivered for 27/04/2020 with a plan to operationalise as quickly as possible.

On 24/06/2020 a further letter followed with revised requirements for second peak eventuality which for SBUHB was a Covid-19 capacity requirement of 46 critical care beds and 621 additional acute beds This letter also indicated that this is to provide contingency cover and indicates a hope that it would mean that control can be maintained over the virus and ensure that there would never be a need to utilise the levels of Covid-19 capacity outlined.

In response to this, two further major actions have been undertaken by SBUHB in respect of field hospitals: Llandarcy Field Hospital has been decommissioned, with the clinical model, including the availability of oxygen in the assessment area, introduced at the Bay Field Hospital.

6.0 Purposes and conduct of the AAP Review

The Assurance of Action Plan (AAP) review re-assesses a Delivery Confidence Assessment in the light of actions taken, following a Programme Assurance Review (PAR), where Delivery Confidence has been assessed as Red or Amber/Red. An AAP is a short review which re-assesses the DCA in the light of the proposed actions drawn up in response to the PAR Review. The overall purpose of an AAP is to ensure Delivery Confidence is raised to an appropriate level that will enable delivery of aims to time, cost and quality.

The previous PAR had specific terms of reference to review the Covid-19 field hospital response of the organisation, looking at delivery and implementation, to consider learning from the planning and delivery, and report on residual risks and approach to mitigation and management going forward. This included reviewing delivery strategy linked to clinical plan, governance and decision making, contract management, financial due diligence and future use.

Annex A lists the people who were interviewed during the review.

7.0 Acknowledgement

The Review Team would like to thank the SRO and the Programme Team for their support and openness, which contributed to the Review Team's understanding of the programme/project and the outcome of this AAP review. Particular thanks to Darren Griffiths and Sonja Anderson for arranging this one day remote review.

8.0 Next Assurance Review

The next assurance review for the Bay Field Hospital should be linked in to future key decision points. At the current time these could include: any potential future use as a regional field hospital, extending the availability and or use into 2021/22, and when to proceed with a decision to decommission the field hospital.

. The previous PAR suggested is expected in [Insert month & year and/or appropriate milestone to be achieved]

ANNEX A

List of Interviewees

The following stakeholders were interviewed during the review.

Name	Organisation and role
Darren Griffiths	Director of Finance (Interim)
Ian Gunney	HSS – Deputy Head, Capital, Estates and Facilities, WG
Andrew Sallows	HSS Delivery Programme Manager, WG
Samia Saeed-Edmonds	Planning Programme Director, WG
Hilary Dover	Service Director, Primary & Community Services
Anjula Mehta	Medical Director, Primary & Community Services
Simon Davies	Assistant Director Strategy, Capital
Sian Harrop-Griffiths	Director of Strategy
Dorothy Edwards	Deputy Director of Transformation