

ExCovid Stocktake and Lessons Learned – November 2020

Summary paper

Background

The Permanent Secretary commissioned the ExCovid Group to undertake a cross Government Stocktake and Lessons Learned exercise to assess the overall response of the civil service during the Covid-19 pandemic.

The aim of the stocktake was to capture what worked well and what we would do differently if in that situation again, to enable us to learn the lessons to inform how the Welsh Government might adjust its arrangements for the future.

Some of the headlines/key issues raised by the exercise

Emergency response

- Generally, emergency response arrangements addressed our immediate response requirements.
- Engagement and communications between Welsh Government and Local Authorities were unprecedented in their urgency, frequency, transparency and with a willingness to work together, towards a common goal.
- However, the experience of COVID has demonstrated the need for longer term emergency planning to ensure our response is sustainable and resourced sufficiently.
- The Welsh Local Government Association (WLGA) has commented, *“It is widely felt that the current civil contingency planning and reporting arrangements are more appropriate for short-term, localised emergencies rather than a long-term, national/global emergency such as the current pandemic.”*
- The H&SSG incident response was complex and developed at pace. This produced challenges in clarifying policy accountability and governance, confirming roles and responsibilities and establishing co-ordination of the Group’s response.

Roles and responsibilities and new ways of working

- There was a strong willingness across the Welsh Government to help out and play a part in helping manage the crisis. Individuals and teams stepped up to take additional responsibility and worked well beyond normal expectations, with mutual support within teams and Directorates.
- Teams and individuals adapted quickly and effectively to remote working and new roles and responsibilities. However, we do need to learn from this experience and make sure there is clarity of responsibility throughout these rapid changes.
- There was generally very strong Cross Government working between operational, communications and policy colleagues. However, throughout the

pandemic there have been significant and sustained pressures on already stretched individuals and teams, and it is felt that resilience and burn-out, and possibility losing the goodwill of staff, is a real risk in some areas.

- The IT equipment successfully enabled the new ways of working and supported teams, new and old, to work together effectively.
- Internal communications could be improved in the future as it was reported that many key decisions, new regulations and written statements were not visible to most staff until they went external.
- It has been suggested that it would be useful to refresh the WG schematic diagram of responsibilities, to include roles, functions and accountabilities. This should include ExCovid, TAC, ECCW, Recovery Team, ExCo and all the other relevant groups.
- There was sometimes a lack of clarity on decision making, and in terms of H&SSG on occasions a lack of clarity on which areas were being led by Welsh Government or Public Health Wales.
- WG staff dealing with the PPE crisis felt that the Corporate Procurement Unit had a blinkered focus on governance at the expense of adding value, which was seen as a barrier to delivering at pace. However, the central support from the Due Diligence Team to the team delivering the Economic Resilience Fund was excellent.

Decision making and financial management

Star Chamber Governance system worked well in terms of a joined up approach to financial allocations.

Covid decision making and risk statement templates rapidly put in place are already proving very helpful as an audit trail for decisions.

Pace of response led to some decisions being made without usual level of advice, e.g. decisions by FM, CG and Legal Services without advice from policy teams. Ministerial intent and decisions/delivery not always marrying up – eg qualifications and public reaction, reactions by other Governments.

In terms of external communications, there were both reactive and long term messages, and some concern expressed over the extent to which the messaging was understood by the public. However, there was good control of narrative and rapid response rapidly to regain control when it was being lost.

Engagement between UK Government and Devolved Administrations

Initially, emerging scientific advice and four nation engagement was very good in informing Welsh decisions. However, there were challenges as time went on due to a retreat to a single nation perspective from England. The emergence of the Wales TAC in influencing decision making was an important new development.

Initially when DHSC were leading for UKG, it was felt the relationship was good and there was regular two way dialogue, but that this fell away when the Cabinet Office took over the lead. There were examples of good partnership working across the UK Health Departments but as the nations' responses diverged, and pressure mounted on key resources, this partnership became fragmented.

The WG were regularly unsighted on UKG plans for communication campaigns and announcements. In some instances it was felt that Devolved Administration engagement very much depended on personalities and a willingness to share. It appeared that there was lack of coordination between Cabinet Office and DHSC.

In terms of PPE, the demand modelling was outsourced by UK Government to Deloitte, and the modelling was only received by WG in the last weeks of June. This meant that demand figures that WG had been working on were incorrect for at least 9 weeks.

Effectively working together within and across Wales

The WLGA commented, *"The Welsh Government and local government have a shared commitment to work in partnership and this has been strengthened during COVID 19. There has been an unprecedented level of political dialogue and engagement, with regular bilateral meetings between Ministers and WLGA spokespersons and regular meetings between all 22 leaders and Ministers."*

This close and regular engagement was made possible by technology which enabled collective discussion, consistency of messaging, and quick action on urgent issues.

There were some excellent examples of joint working, including the setting up of a Vulnerable Families Group; the rapid establishment of a working group to deliver £1.1bn of NDR-related business support; and the rapid deployment of Fire and Rescue Service resources to support the NHS.

However, a view was expressed from local government that while there were examples of co-construction of timetabling and guidance, it proved challenging for local authorities to plan for the operational implementation of announcements during the 21 day review period. However, the WLGA also commented that *"The level of dialogue in particular around the 'firebreak'.... where Ministers engaged with leaders and chief executives through several meetings to help inform and prepare for decisions affecting their areas or services, has been a model of central-local relations."*

WG Education colleagues have commented that the increased level of engagement, whilst helpful, also created an increased expectation of this becoming the norm. It has been difficult to flex down as easily as it was to increase.

In terms of PPE, the close working enabled through the Critical Equipment, Resources and Engineering Team (CERET) now means that all scrubs for NHS Wales are made in Wales (Previously Pakistan and India); all aprons (previously China); and Thumblooper aprons / gowns (previously China).

Health Inspectorate Wales (HIW) and Care Inspectorate Wales (CIW) issued a joint letter to all Health Boards, Trusts and Local Authorities in Wales listing shared reflections from the crisis, ahead of the winter period. This letter commended the improved partnerships between those sectors throughout the pandemic and raised a number of issues to be tackled together to support the vulnerable going into the winter period.

Data and information sharing

It was reported that the inclusion of analytical staff in meetings on cross cutting areas (e.g. Vulnerable People cross government group, Safeguarding and Vulnerable children, and Covid-19 BAME groups) enabled the provision of tailored analytical support, responsive to the context and evolving situation.

The importance of clear, open and timely communication with partners and citizens, such as working with local authorities to ensure support for those shielded, was paramount. There was close working between KAS and CIW to ensure transparency over care homes data.

There were 7 identified groups discussing PPE at local, regional, Wales and UK level which led to some information not being shared, being missed or withheld. This led to confusion across the board.

Next steps

Overall the stocktake suggests the Welsh Government succeeded in managing the pandemic effectively in most areas, although of course there are lessons to be learned and incorporated to help ensure even more effective management and processes in future.

It is also important to capture the views and experiences of our partners and stakeholders. The WLGA has provided input into this exercise, but there would be value in seeking views from other key partners such as Public Health Wales, care providers, ECCW partners, schools etc to understand our findings from their perspectives.

One important point raised is that the pandemic has generally highlighted and exacerbated impacts linked to existing issues, in this case in education e.g. disadvantaged learners; digital poverty; home language being different to the language of education. Such areas where the pandemic has shone the spotlight on inequalities and those who are disadvantaged in society would be worth further exploration by ExCovid.

Each DG group needs to consider its findings and its own recommendations under the lessons learned element of the template, particularly those identified as mitigations needed in the short term. Where this part of the template wasn't completed, it is important that risks and mitigations are considered and recorded. A future meeting of ExCovid could consider updates against each of those risks and recommendations marked 'red', ie mitigation required in 1-3 months so all Groups

can learn from what has been developed to mitigate these risks and implement the recommendations.

It is important that these lessons learned are implemented. It is suggested that each DG area agree a responsible individual or team for ensuring the lessons learned are incorporated into processes now, not awaiting a future crisis.