

Office of the Chief Executive

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Deputy Inna Gardiner
Chair of the Public Accounts Committee
BY EMAIL

11th October 2021

Dear Deputy Gardiner

RE: PAC Review of the Government of Jersey's Response to the COVID-19 Pandemic

Thank you for your letter of 24 September 2021, outlining the PAC's Review into the Government's response to the COVID -19 pandemic and some initial questions for Government to consider.

Enclosed is our response to your preliminary questions regarding the Government's handling of the COVID pandemic outlined in your letter.

Please do not hesitate to contact me if you require more detail or clarification of the responses enclosed.

With kind regards

A handwritten signature in blue ink, appearing to read "Paul Martin".

Paul Martin
Interim Chief Executive and Head of the Public Service

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PAC Launch Government Covid-19 Response Review

1. We know there has been a huge impact of COVID-19 response measures on departmental business as usual activities, including the secondment of Government staff to other departments to aid the response effort. Do you have a 'back-to-normal' recovery plan?

a. In respect of the secondment of Government staff to other departments to aid the response effort, how did you ensure disruptions to certain workstreams were prioritised in an objective and consistent way?

b. What would you do differently next time?

The Government has in place established structures to respond to incidents and emergency events. This includes business continuity planning, emergency planning and community resilience plans. Depending on the nature of the response, a command-structure is established to lead and coordinate across Government and wider States bodies.

In March 2020, the command structure for Strategic (Gold) and Tactical (Silver) response was centrally established. The Gold team comprised of senior officers from the Government (Co-ordinated by Justice and Homes Affairs) and key partners across the Island.

The Silver team was formed as the One Gov Covid-19 Response Team (1GCT). This comprised of a central coordination team, which embedded the Business Continuity Team. The Silver response was led by a Group Director. The purpose of the Silver team was to co-ordinate the response and "management of all cross-government activities to support and protect the Jersey community against the threat of Covid-19". The Silver Team formed operational cells to manage specific activities (such as community response, supplies and supply chain, business continuity and emergency resourcing).

1GCT worked in partnership with the Executive Leadership Team (ELT) and Gold command. Two of the initial requirements were:

- for the departmental Business Continuity leads to fully evaluate the criticality all of the services provided by each of the directorates and non-ministerial departments throughout the government.
- Identify the minimum number of staff to run these Time Critical activities (these had already been identified in business continuity plans)

During March, the Gold Command ran a resilience exercise to test scenarios across Government services and key infrastructure companies to identify possible weaknesses in plans, contingency requirements and scenarios. Scenarios including lack of technical resources for infrastructure, school closures impacting on front line service delivery, supply chain disruptions, increased mortality handling and loss of critical staff.

Departmental Impacts

Chief Operating Office (COO):

In parallel to the work Gold Command, the Business Continuity Team led and co-ordinated the refresh and testing of business continuity planning, time-sensitive activities and cascade systems. Areas such as instant reporting, strategic oversight and communication cascades in a remote environment were identified as requiring changes to the standard plans. These changes were put in place.

Additionally, business continuity plans are weighted toward short-term and medium-term business disruption and outages. The pandemic was a significantly longer-term event and required some changes to the longer-term resilience.

The 1GCT Team coordinated and prioritised the requests and business needs across Government. The success of this piece of work enabled the Government departments to release sufficient colleagues to support other Covid response functions & priority activities across government.

Where resource requirements were conflicted or created specific issues, these were escalated to the Gold Command for a direction on the priority of response.

At the same time as the 1GCT was formed in March 2020, the Emergency Resourcing Cell was established to facilitate the filing of internal business critical roles during the pandemic. This team reported in as one of the operational cells to the Silver Command.

This process required line managers to identify their emergency resource requirements in conjunction with their business continuity leads & submit their requests to the 1GCT for approval.

The 1GCT had oversight of all business-critical resourcing requirements & therefore ensured that there was effective prioritisation & decision making with regard to the emergency resourcing requests.

An Emergency Resourcing Cell was established to second resources from departments and partners. The emergency resourcing team, working with the business continuity team, quickly established a pool of 'non-essential' colleagues who could be released into business-critical roles.

Once 1GCT had approved the emergency resourcing request, the emergency resourcing team matched colleagues from the 'non-essential' pool to the emergency resourcing requests & facilitated 119 internal redeployments during the first Covid wave (20th March – 31st July 2020).

Where it was not possible to match colleagues internally to business-critical roles, the emergency resourcing team secured external resource, including secondments from State Owned Entities & local agencies.

During the pandemic the emergency resourcing team & business continuity leads worked with 1GCT to ensure all critical & essential services continued to operate, they produced daily status updates (which fed back into the Strategic Coordinating Group) on their activities & this continued into 2021 as we went through the reconnection stages. Additionally, daily workforce capacity reports were produced to monitor service levels and risk levels to service provision.

As part of the 'reconnection phase' following the first wave of Covid, the emergency resourcing team established a 'safe exit' strategy which enabled colleagues who had been redeployed into business-critical roles to move back to their substantive role as the Government exited from lockdown. The safe exit strategy ensured that critical &/or essential services were maintained safely & appropriately, whilst ensuring that as business continuity was stepped down during July/August 2020 and colleagues were released when their substantive role required them to return.

During the second & third wave of Covid, the number of secondments were minimal, most roles were filled by colleagues who were employed on a zero-hours or fixed term contracts. This allowed for a stabilising of resources for Contact Tracing, Monitoring & Enforcement & the Vaccination team. This longer-term approach was moved into a single response team, within Justice and Home Affairs to allow the organisation to focus on business recovery and stabilisation.

In considering the recovery of the organisation Team Jersey have supported departments to move forward strategically. In summer 2020 the programme working with People and Corporate services provided individual coaching to frontline managers to ensure they felt supported as individuals but also helping them to consider how they led and then rebuilt their teams.

Since the second wave the programme team have worked directly with department senior teams to help them reflect on the steps they need to take to rebuild and refocus teams. This work continues and the programme provides support to plans in place to enact and track these next steps. This has been combined with the work of People and Corporate Services in response to the Be Heard survey which was undertaken in 2020 and provides information to allow departments to understand what issues need to be addressed to re-engage employees.

Additionally, all departments have driven work independently to consider how they rebuild their teams and services following the survey. Wellbeing has been one of the key areas many have concentrated on and centrally People and Corporate service are looking to support the development of a government strategy in this area to support and supplement activity already happening in departments.

b. What would you do differently next time?

After each incident or major event, the Business Continuity Team will undertake a de-brief (lessons learned). We have, as we progressed through our response, looked at continuous improvement. This has led to improvements in cascades, communications and speed of response.

The pandemic tested both business continuity and community resilience. We will use the reports from the Comptroller and Auditor General and any Scrutiny or committee reports to inform future changes.

Given the longevity of the response, we must do more to anticipate supporting those in the response teams, as considerable pressure and time requirements were placed on them, particularly those in key roles.

We are considering widening the training available for people who can lead emergency responses across the Government to provide greater capacity and resilience.

Strategic Policy, Planning and Performance (SPPP):

At the outset of the emergency response to the pandemic in Jersey, the strategic focus of the whole department was pivoted to focus on the provision of public health advice, legislation and intelligence

in order to protect Islanders. At the peak points of the pandemic, more than half of the department's capacity was fully deployed on COVID-19 work, often with the addition of many valuable secondments from elsewhere in the public service and also supplemented by interim specialist support as needed.

In addition, some mainstream work was identified at the outset as needing to continue throughout the pandemic due to statutory, Assembly or external timelines (examples include the Island Plan, Government Plan, Brexit, Climate Emergency, Redress Scheme and Census) and these projects were kept going by a small number of dedicated colleagues, often working alone, to ensure that these workstreams would still be able to deliver as Jersey emerged from the peaks of the emergency.

This approach was supported by Ministers and explained in the Annual Report and Accounts 2020 (see pages 86-87). The status of each work-stream was published in the SPPP Departmental Annual Report 2020 and the Mid-Year Review 2021, which also illustrate the evolution and how items that were deferred initially have started to come back on track as capacity has been gradually released back onto mainstream activities during 2021.

What would you do differently next time?

There were a number of positive aspects to highlight from this experience, not least the huge commitment of our public servants to protecting their community, and the commendable flexibility and agility demonstrated by the public service. SPPP conducted a professionally facilitated emergency response debrief with all staff, which highlighted not only the sense of achievement amongst all involved, but also many of the challenges of having the civil service on the front line of an emergency response for a sustained period of time, given that previous civil service working practices were not necessarily set-up to support a sustained 24/7 emergency response in the same way as the blue light services. These lessons can be taken forward as part of updating contingency planning arrangements for the department and the development of a strengthened public health protection function for the future.

	<p>Children, Young People, Education and Skills (CYPES):</p> <p>a. Throughout the pandemic (including and up to this point in time) the DG chaired an at least weekly (and, for protracted periods, daily) business continuity meeting attended by the senior leadership team of the department. BC was (and still is) a standing agenda item and allowed for an holistic and dynamic assessment of priorities (departmental and corporate) and, therefore, staff deployment, including secondments. It should be noted that this arrangement was a development of previous good practice in the department wherein BC issues were reviewed on a four weekly basis according to a structured agenda agreed with the DG and guided by the department's BC lead officer (Head of Governance). The departmental-level management of resources, especially human resources, was supported by the rapid development of corporate policies and systems to enable secondments and mutual aid to be considered strategically against localised and cross-government pressures. An example of this is practice was the secondment in the summer of 2020 of the CYPES Head of Informatics to the Public Health team within SPPP. This officer's significant public health expertise was required to enhance analytic capability (in support of the STAC and CAM). CYPES managed this arrangement by the re-positioning of its remaining informatics capability.</p> <p>b. In the light of experience, it may be possible to draft out more detailed secondment / mutual aid options as part of the standing BC plans that departments produce.</p> <p>Community and Local Services (CLS):</p> <p>Whilst initial Covid responses were staffed by BAU seconded resources (both CLS & from across government) ongoing support services like the Covid Helpline are now resourced with additional staff from covid funding. Where BAU individuals are still supporting/leading covid responses secondments are in place to ensure individuals are backfilled & supported appropriately.</p> <p>Infrastructure, Housing and Environment (IHE):</p> <p>The department used its business continuity plans to assess critical services, and to identify which areas could release staff. The changing nature of the economy allowed certain regulatory staff to be released into contact tracing to support the contact tracing function which commenced within Environmental Health. It was clear within weeks that the usual CT approach deployed by this team would need further support and so other regulation staff were quickly released. Construction,</p>
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hospitality, food, parking and transport sectors were all affected and so regulation in these areas was naturally reduced in any case.

In other areas such as waste and water, critical infrastructure needed to be maintained for the safe functioning of the island and so staff were not released from these areas.

What would you do differently next time?

In future, the length of redeployments and the likely timescales for events to be managed would need to be assessed, as work pressures built up in regulatory areas even though these sectors of the economy were anticipated to have slowed down. This would mean in future that less staff would be released for other duties, as backlogs in work are still present in the department.

Health and Community Services (HCS):

As an immediate response to the Covid pandemic HCS Hospital bronze, silver and gold were set-up. Hospital Bronze compromised several operational cells, including wellbeing, workforce, PPE and logistics. Business Continuity Plans were actioned, and hospital services reverted to the management of emergency care patients and those with cancer.

Daily bronze meetings took place and information and request from this meeting were escalated up to hospital silver. Hospital meetings linked with government silver and gold meetings using the JESSIP principles. Information was also fed through from STAC which guided our operational plans.

Areas of the hospital were repurposed for the management of expected acutely unwell patients', this included the setting up of ITU beds within theatre recovery and day surgery. Further ITU step down beds were created within a bay on Bartlett ward. The urgent Treatment Centre was set up within the Outpatient Department. Wards were designated either or hot (covid positive) or cold (covid negative) and staffed accordingly. This gave assurance that care of our acutely unwell patients could be maintained at all times. Colleagues (medical, Nursing and AHP staff) moved across staff departments to provide the appropriate workforce for care delivery.

Face to face outpatients were halted, and where feasible and appropriate clinics were delivered virtually. Only emergency surgery was performed. This has impacted vastly on our inpatient and outpatient waiting lists.

	<p>Daily logs regarding our PPE, essential supplies and oxygen provision and usage were maintained and distributed. Our logistic team worked closely with UK suppliers to obtain necessary medical equipment and supplies.</p> <p>Staff briefings took place daily in the Halliwell Lecture theatre and communication of critical information was provided via Starleaf. Wellbeing for staff, including risk assessments were put in place to further support staff.</p> <p>Following covid, recovery plans for service areas were put in place to support hospital in its return to normal working. Surgical waiting lists, and outpatients lists across all specialities recommenced in a phased approach. Virtual clinics continued where appropriate. Waiting list initiatives have been set up to catch up backlogs.</p> <p>Following Covid debriefs took place involving hospital and community bronze and learning from these events were incorporated into our preparedness plan in expectation of a second surge in Covid. An operational plan was developed including action cards.</p> <p>Bronze meetings to support the management of covid in hospital are instigated as and when covid patients are admitted.</p> <p>What would you do differently next time?</p> <p>Improvements for the future need to focus on:</p> <ol style="list-style-type: none"> 1. The maintenance of effective business continuity plans. 2. Maintaining our pandemic preparedness plan 3. Review workforce and treatment plans to ensure ongoing support of areas most affected by the pandemic, such as dental. 4. Effective emergency planning using JESSIP principles and regular training for staff. 5. Implementation of earlier technological communications to facilitate improve communication and advice for our patients. <p>Performance:</p> <p>The Departmental Service Performance Measures were included in 2020 Departmental Operational Business Plans for the first time and were reported on in the 2020 Annual Report and Accounts. For</p>
<p>2. How have you measured, monitored, and reported on your performance, financial</p>	

management (including value for money and cost benefit analyses) and impact on work programmes during the Covid-19 pandemic?

What 3 things could be improved?

2021 the Service Performance Measures are being reported on quarterly – Q1 and Q2 were published for the first time on 31 August alongside the Mid-Year Review 2021.

In terms of the Tracker to monitor progress in implementing recommendations of the C&AG and PAC, there was no reporting for Q2 of 2020 due to other pressures. Apart from that normal discipline was maintained throughout.

In relation to HCS, HCS Informatics continued to support performance reporting through the pandemic producing the monthly Quality & Performance Report, supporting and advising system changes, producing ad hoc reports, responses to FOIs and Ministerial questions. There was little development of HCS core reporting done in this period due to Informatics resources being used to report on the pandemic itself (daily reports, weekly reports and regular dashboards) as well as HCS resources being focussed on delivery rather than reporting.

Development work was re-started early in 2021 when the HCS Informatics team was moved back to HCS (from SPPP). This move has enabled better embedding of data and analysis within the Department and therefore greater use of data to inform decisions and improve performance. This will grow further as we progress through the implementation of the JCM.

Financial management:

Financial management and monitoring processes remained unchanged throughout the pandemic, with regular reporting to ELT and CoM, and the publication of half-yearly reports and the Annual Report and Accounts. For the vast majority of additional funding requirements for Covid reasons a full business case was prepared and evaluated which considered value for money, costs and benefits.

Business cases were completed for initiatives requiring additional funding during the pandemic. The relevant business cases were required to set out the benefits that would be achieved for the necessary investment thereby allowing for an appreciation of the cost-benefit case for intervention. The business cases also set out the means by which projects will be monitored whilst live and

	<p>establish objectives that allow for an assessment to made as whether the project ultimately delivered what they set out to achieve.</p> <p>Detailed monitoring of projects to ensure are on-track to deliver their intended benefits is usually the responsibility of the relevant Accountable Officer whilst projects are live. Performance is also reported through ELT through financial reporting and the CPMO. Once projects reach completion a project closure report is required that allows for an evaluation of performance against the original business case objectives.</p> <p>Business case practice was evolving at the onset of the pandemic. An Investment Appraisal Team with responsibility for embedding best practice with respect to business cases and cost-benefit analysis was established in Treasury and Exchequer in Q4 2019. While demonstrable progress was made before the pandemic started, the on-going work of this team to strengthen and embed processes and procedures surrounding the development of business cases will allow future business cases to provide a more comprehensive appreciation of the cost-benefit case for intervention and the relative merits of competing delivery options. This will aid in both initial decision making and the on-going monitoring of performance.</p> <p>In relation HCS, throughout the Covid-19 pandemic, robust and transparent financial controls were in place, including:</p> <ul style="list-style-type: none"> • Establishment of Covid-19 Head of Expenditure workstreams, to ensure accurate recording and financial monitoring of Covid-19 response expenditure • All expenditure relating to the Covid-19 response requiring additional financial resources required a business case reviewed by HCS Senior Leadership Team (SLT), prior to submission to Treasury & Exchequer Investment Appraisal team • Funding for approved expenditure allocated on an actuals basis, to ensure adequate and accurate distribution of funding, which enabled a timely response to additional funding requests • Monthly monitoring of Covid-19 expenditure including budget meetings, population of central expenditure tracker to ensure greater financial control and financial planning requirements for HCS
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- Finance representation at Gold, Silver, and Bronze command meetings, to ensure alignment of funding and operational requirements
- Financial reporting to HCS SLT, providing detailed analysis of Covid-19 expenditure incurred and detailed risks
- Financial reporting to HCS Operating, Finance & Performance Committee
- Implementation of monthly financial drawdown process, to improve transparency and financial reporting through a clear, documented, auditable process
- Throughout the pandemic, HCS ensured adherence to Public Finance Manual (PFM) guidance and expenditure approval processes (i.e. Procurement Procedure Policy for tendering and associated exemptions from following guidance).

Work Programmes:

In June 2020, the Corporate Portfolio Management Office (CPMO), which was established at the start of 2020, began reporting to the Executive Leadership Team (ELT) monthly on the status of known 'in-flight' programmes/projects via a portfolio reporting tool. This reporting includes an overarching description of the initiative, key objectives, the Delivery Team, RAG (Red, Amber, Green) rating for each programme/project, an overview of the reasons for such a rating, along with any issues or risks for escalation, activity undertaken during the reporting period and planned activity for the forthcoming period. This reporting was also made available to each Director General, for their respective portfolio.

At the time, many programmes/projects were reporting delays and/or constraints due to redeployed resource to support the response to the COVID-19 pandemic. Some initiatives were placed 'on hold' or 'deferred' whilst resource was utilised elsewhere for the emergency response. This information was confirmed publicly in the Government Plan Six Month Report 2020, which was published at the end of August 2020. Further updates on progress were confirmed in the Annual Report and Accounts 2020, published in March 2021 and the Mid-Year Report 2021.

Over the period there have been considerable improvements in the CPMO reporting both in the quality of the information being received from the projects and programmes and in the level of

	<p>analysis and challenge being provided by the CPMO. Despite resourcing challenges within the CPMO, improvements continue to be made as the function evolves and develops.</p> <p>What 3 things could be improved:</p> <ol style="list-style-type: none"> 1) The internal reporting and publication of Departmental Service Performance measures on a quarterly basis that has now been put in place will support the identification of further improvements to Departmental service delivery. The Departmental Service Performance Measures used are currently being reviewed as part of the process for developing the Departmental Operational Business Plans for 2022. 2) While demonstrable progress was made before the pandemic started, the on-going work of the Investment Appraisal Team to strengthen and embed processes and procedures surrounding the development of business cases will allow future business cases to provide a more comprehensive appreciation of the cost-benefit case for intervention and the relative merits of competing delivery options. This will aid in both initial decision making and the on-going monitoring of performance. 3) At the beginning of Covid-19, the CPMO process of reporting had only just begun and not all programmes/projects were being reported upon or in a consistent manner. This has since been addressed with 95% of the portfolio now reporting monthly as at August 2021. This will support further improvements to the delivery of programmes and projects.
<p>3. What would you do to improve communication of Government measures next time?</p>	<p>During the pandemic, there was an increased demand for short-term, sometimes instantaneous calls to action for Islanders to curb the spread of the virus, alongside the need for more strategic communications to raise awareness of the overall public health strategy and the economic support measures. Throughout the entire period, the Government aimed to inform, engage and motivate multiple audiences, in several languages, to adhere to strict public health measures with officers across the Communications Directorate working together to support Ministers to plan and implement communications for the interventions, schemes, and projects that would prepare and protect Islanders during the pandemic.</p>

Activity ranged from organising press conferences, media briefings and social media engagements where Ministers and medics could explain their health measures and guidance, raising awareness to safeguard children and adults, and advertising economic support packages. Each engagement was tailored to facilitate questions from States Members, journalists, and individual Islanders. This included the use of leaflet drops across the Island, increasing advertising on the radio and in the Jersey Evening Post, and providing information on banners in multiple languages. A concerted effort was made to put Islanders who are not digital natives at the centre of our campaigns. Further, daily data releases were published online, alongside infographics and videos that enhanced Islanders' understanding of the risks from Covid-19, and of the steps they could take to protect themselves.

Notwithstanding the breadth of communication outputs, improvements on how we engage as a government have been actioned or are in progress following a review by the Communications Directorate. Three of the most noteworthy are set out below:

- communicating an ultimately nuanced policy position, that balanced Islanders' freedoms, their wider mental and physical health, and their household economy, against the health effects of Covid-19, was a difficult task. To ensure that, where we continue to learn from the last 18 months and improve the balance of messaging all audiences across the Island, plainer language will be used to convey Ministers' core objectives, together with, where appropriate, the use of direct videos more to convey messaging. A practical example is the use of Twitter to broadcast more frequent, shorter, and less formal videos from senior politicians in charge of the response. This would compliment our Radio Jersey and Channel 103 interview sessions and would, similarly, allow for Islanders to pose questions from the comfort of their own home.
- Officers in the Communications Directorate worked hard to create opportunities for Ministers to communicate with the public. However, in future, to make sure there are increased opportunities for Ministers to proactively engage with Islanders, officers from the directorate will be involved earlier in the scheduling of Minister's diaries.
- Officers in the directorate supported colleagues across CYPES to make sure that communication with children and young people was appropriate, informative, and comforting. Young people were engaged through Radio Youth FM and the Youth Service which enabled the

	<p>opportunity for interviews with Ministers, health professionals and the Children's Commissioner. TikTok and Snapchat accounts were set up with the aim of collaborating with young Islanders to create content that Government could promote and this varied from videos about Covid-19, to supporting mental health, and the creation of new recreational spaces. However, whilst communications outputs were frequent and of high quality, work is ongoing to improve how the views of young people are captured to inform, where appropriate, practical policy deliberations that could result in different Ministerial decisions.</p> <ul style="list-style-type: none"> • The press office deals with around four thousand media enquiries during a standard year. Reflecting on the breadth of enquires, enhanced protocols have been developed to ensure that any press release, media response or other form of communication that directly references or quotes a Minister is signed-off by that referenced Minister, with written confirmation provided by either the Minister in person or their private office.
<p>4. How and when will you evaluate the support to businesses and individuals?</p>	<p>In line with Government of Jersey project management best-practice, once initiatives implemented to support businesses and individuals during that pandemic have drawn to an end, a project closure report will be prepared that aims to evaluate the performance of each intervention against its objectives. In some cases, the full economic and social impact will take time to become fully known. Where this is the case, the project closure report will aim to draw interim conclusions pending a further review when essential performance information has become available.</p>
<p>5. What three key lessons in governance and financial management have been learned and will be applied to future crises?</p>	<p>In relation to central decision-making mechanisms during the health response to the pandemic, the C&AG has already made a number of helpful recommendations which capture many of the lessons emerging from the initial phases. For example, STAC has never before needed to operate for such a sustained period of time as the pandemic emergency has passed through a number of extended phases. The recommendation that we should take this opportunity to create a Code for STAC that will endure into the future and help guide the provision of scientific advice in different sorts of future emergency responses is helpful learning and will certainly be applied.</p>

	<p>The forthcoming review by the C&AG of governance and decision making during the pandemic emergency will doubtless help to identify a number of improvements that can be applied to future situations. These may, for example, include the reprioritisation of work already underway to update the emergencies legislation and the completion of work to introduce a new legislative framework for public health protection.</p> <p>Turning to financial management, there may be a need to consider giving greater prominence to cashflow management, to enhancing financial reporting to show more clearly changes from original approved budgets, and to having a more agile process for amending the Public Finances Manual. The C&AG has reported on financial management in her reports " Overall Management of Public Finances during the Covid-19 Pandemic" and "Procurement and Supply Chain". The PAC's attention is drawn to these reports and the responses to their recommendations.</p>
<p>6. How did you ensure all processes for monitoring performance (such as self-assessments and Key Performance Indicators) continued to operate adequately during the disruption of key workstreams?</p>	<p>Departmental Service Performance Measures for 2020 were collated at the end of the year and published in the Annual Report and Accounts. The new Director of Statistics and Analytics worked with departments to collate the required information. Departments maintained their data collection during the year and the required data was readily available and has continued to be available during 2021.</p> <p>Programme and project performance was monitored through the respective Programme/Project Boards, Departmental Senior Leadership Teams and via the CPMO portfolio monthly reporting to the Executive Leadership Team. Each programme/project will have its own success factors or key performance indicators as set out and approved in the Business Case. The monthly reporting provides an opportunity for Programme/Project Manager to assess performance to these success factors and provide a RAG rating to indicate whether they are on track, at risk or off track. The Programme/Project Sponsor or Senior Responsible Officer, along with the Project Manager, will have developed a 'back to green' plan for any initiatives which were indicating an 'at risk' or 'off track' rating, for respective approval.</p> <p>In terms of the Tracker to monitor progress in implementing recommendations of the C&AG and PAC, there was no reporting for Q2 of 2020 due to other pressures. Apart from that normal discipline was maintained throughout.</p>

	<p>Financial management and monitoring processes remained unchanged throughout the pandemic, with regular reporting to ELT and CoM, and the publication of half-yearly reports and the Annual Report and Accounts.</p>
<p>7. Were there any public funds used in responding to the pandemic which did not comply with the Public Finances (Jersey) Law and Public Finances Manual?</p>	<p>The Public Finances (Jersey) Law and principle-based PFM are supported by the Best Practice Procurement toolkit and guidance. Our exemption process enabled agility with regards to the use of public funds in relation to procurement activities.</p> <p>To the best of our knowledge there was no material use of public funds that did not comply with the Public Finances (Jersey) Law and Public Finances Manual. Approved exemptions form a part of the financial management and governance process within the PFL and PFM. No requirements were relaxed during the pandemic, and the Treasurer issued a letter to Accountable Officers on 25th March 2020 reinforcing requirements.</p> <p>The Committee will be aware that the States Assembly approved P.28/2020 on 24th March 2020. This temporarily extended certain powers for the Minister for Treasury and Resources.</p> <p>The C&AG has reported on financial management in her reports " Overall Management of Public Finances during the Covid-19 Pandemic" and "Procurement and Supply Chain". The PAC's attention is drawn to these reports and the responses to their recommendations. The C&AG highlighted one area where she considered that a procurement breach should be recorded – this has now been done.</p>
<p>Q8. Was any departmental authority changed during the Pandemic, including as a result of crisis management efforts, and if so, were they consistent with existing laws and regulations?</p>	<p>Strategic Policy Planning and Performance (SPPP):</p> <p>There were no changes made to departmental authority during the pandemic, however, additional resilience was introduced. For example, in response to the situation emerging at the start of 2020, a need was identified to ensure that the statutory function of the Medical Officer of Health (MOH) could always be sustained, in order to provide appropriate public health authorisations and statutory advice. As a result, at all times during the pandemic, there have been three appropriately qualified people designated by the Minister as MOHs - starting with Dr Turnbull, Dr Muscat and Dr McInerney,</p>

and now being Professor Bradley, Dr Muscat and Mr Armstrong. This was consistent with the existing legislation, which allows for the designation of alternate MOHs.

Children, Young People, Education and Skills (CYPES):

I don't believe so. However, if this relates to emergency changes made to legislation, then yes and there will be a public record of such decisions taken by the Assembly – a number of which did affect CYPES.

NB The revision of the scheme of delegation between the Minister and AO (which attracted both some Scrutiny and media attention) was not pandemic-driven: it was the product of the new Minister wishing to introduce what he considered good practice in another portfolio he held into CYPES.

An additional delegation was made from the Minister for Treasury and Resources to the Treasurer of the States to approve emergency allocations from the General Reserve. This delegation was not used, and has now been removed. An additional Assistant Minister for T&R was appointed to ensure capacity to take decisions needed. All delegations were made in accordance with existing laws and regulations.

Justice and Home Affairs (JHA):

Due to the requirement to adopt an 'emergency planning' response to the pandemic and the need to provide central, overall coordination of the government's operational response the DG of JHA took on additional responsibilities as an accountable officer of areas not normally associated with the department as well as SRO on other themes. This included early lead on the Nightingale before handing over the IHE, AO for PPE, Testing and Tracing and the Vaccination programme. This also resulted reporting to other Ministerial portfolio's outside of the Minister for Home Affairs. These changes were recognised as necessary and were discussed with colleagues in the Treasury to ensure compliance and good governance.

Community and Local Services (CLS):

The Minister for Social Security made the following changes to delegations and operational requirements due to Covid. These were extended twice and remain in place until the end of 2021.

- Delegations of powers to Assistant Ministers

	<ul style="list-style-type: none"> • Enabling payment of Isolation Benefit • Changes to proofs required for Income Support claims <p>Chief Operating Office (COO): There were no changes in COO.</p> <p>Treasury and Exchequer (T&E): There were no changes in T&E</p> <p>Infrastructure, Housing and Environment (IHE): IHE took a lead role in leading and setting up contact tracing and the Integrated Public Health Record this was transferred managerially into JHA as part of the emergency response during 2020.</p> <p>Health and Community Services (HCS): We established the gold-silver-bronze command structure in addition to the Clinical and Operational Hub. As part of our contingency, elements of our workforce were moved across the organisation into different service areas to give the required support for our acutely ill patients. Training was undertaken with AHP staff to enable them to take on nursing and additional administrative tasks to assist us in providing additional support to nurses in the care of ITU, ward patients and in staffing the Urgent Treatment Centre. Staff from other service areas also received training to enable them to provide basic nursing care to support the staffing of the Nightingale hospital. Union support was sought to support the movement of staff into different work area. All our teams worked collaboratively together to provide the required care there were no authorative issues.</p>
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