

**PWYLLGOR DATBLYGU STRATEGOL A CHYFLENWI GWEITHREDOL
STRATEGIC DEVELOPMENT AND OPERATIONAL DELIVERY COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	21 December 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Targeted Intervention Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lee Davies, Executive Director of Strategy and Planning
SWYDDOG ADRODD: REPORTING OFFICER:	Daniel Warm, Head of Planning Shaun Ayres, Deputy Director of Operational Planning and Commissioning

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

As previously reported to the Strategic Development and Operational Committee (SDODC) and Board, Hywel Dda University Health Board (HDdUHB) has had its escalation status raised by Welsh Government (WG) from Enhanced Monitoring to Targeted Intervention for planning and finance.

This paper provides the SDODC with an update on the key products expected as part of the planning element of this escalation status.

Cefndir / Background

As previously noted to SDODC in December 2022, on 29 September 2022, Welsh Government wrote to the Health Board to advise *the Minister has accepted the recommendation of Welsh Government officials that the escalation status of Hywel Dda University Health Board be raised to 'targeted intervention' for planning and finance but will remain at 'enhanced monitoring' for quality issues related to performance resulting in long waiting times and poor patient experience.*

The reason for increasing the escalation level to targeted intervention for finance and planning is because the health board has been unable to produce an approvable three-year Integrated Medium Term Plan (IMTP), or a finalised annual plan and the growing financial deficit being noted".

Targeted Intervention is a heightened level of escalation within NHS Wales and occurs when the WG and the external review bodies have considered it necessary to take coordinate action in liaison with the NHS body to strengthen its capability and capacity to drive improvement.

WG confirmed that de-escalation would be considered when the HDdUHB:

- has an approvable and credible plan, and improvement in its financial position.
- Is assessed at level 3 of the Maturity Matrix.

- has agreement of and sustainable progress made towards a finance improvement trajectory.
- builds on relationships and fully engages on the transformation and reshaping of services.

The Health Board has formal Targeted Intervention meetings with WG and other colleagues on a quarterly basis with the next meeting-taking place on 10 January 2024 (postponed from December 2023). In addition, the Director of Strategy and Planning and the Planning team meet informally with the Director of Planning in Welsh Government on a monthly basis.

Asesiad / Assessment

Four key focus areas were identified at the outset of targeted intervention, namely:

- Maturity Matrix and Peer Review (diagnosis)
- Peer Review
- Planning Improvement Journey
- Clinical Services Plan (CSP)

Actions for the Maturity Matrix and the Peer Review have been completed and are now being considered as part of the Planning Improvement journey. To support this journey and as described at the August and October 2023 SDODC meetings, work has been ongoing to bring the various elements of our approach to Targeted Intervention together to provide a single consistent set of themes and subsequent actions.

This thematic approach consolidates our response to the Maturity Matrix; Peer Review and the internal planning Master Actions emanating from the original Targeted Intervention expectations (including C which centres on the development of a robust planning cycle and D which is focuses on clear roles and accountabilities to drive key work streams across the organisation). However, it also brings into account wider/previous reports including Audit Wales Structured Assessments, Annual Planning Cycle (NHS Wales Planning framework) and the KPMG report in relation to financial planning.

Themes	Objectives
1: Organisational culture and planning	Embed a positive planning culture within the Health Board where planning activities are valued and integral to the organisation's daily business
2: Planning Cycle	Robust continuous Planning Cycle to develop an IMTP
3: Operational planning and change management	Robust operational plans supported by a structured change management framework
4: Planning and the strategy (bridge between short/medium term plans and the longer-term strategy)	Agreed medium and long-term plans aligned to the strategy
5: Capacity and capability of the Corporate Planning Directorate	Enhanced skills, knowledge and capacity of the corporate planning team
6: Project governance and reporting tools	Develop a consistent organisational approach to supporting key workstreams

In taking these themes, the Planning team has undertaken an initial assessment of where we believe we are against the actions set out. With particular reference to the two recommendations made in the peer review report, namely to:

- Establish its operating model for managing and delivering change;
- Develop effective means for strengthening and supporting planning by operational teams, ensuring that there are clear pathways for turning strategy into implementation plans. A clear route map for delivering the strategy is needed to support this.

We believe the actions in place to support the actions of the Core Delivery Group; the Planning Steering Group and the Integrated Planning Process (as outlined in agenda item 5.1 of this Committee meeting) clearly show the approach the Health Board is taking in addressing these recommendations.

In summary, the approach this year is to unify the planning objectives across all departments, creating a single, coherent operational plan. This integrated strategy embeds savings directly into operational plans, ensuring every decision contributes to both financial recovery and service quality. This is allied to the work currently being undertaken around risk appetite, such that it will help provide clarity around resource utilisation and expectation setting, ensuring that planning is both ambitious and grounded in the reality of HDdUHB's operational and financial capacities.

By doing this once and doing it thoroughly, the Health Board prevents fragmented planning and ensures that resources – time, money, and workforce – are optimally utilised. This unified approach also aids in clear communication, both within teams and with stakeholders. The key points include:

- **Efficiency:** Streamlining planning to avoid duplication and conflicting objectives.
- **Clarity and Consistency:** One comprehensive plan improves understanding and execution across all levels of the Health Board.
- **Strategic Alignment:** Ensuring all objectives support the overarching goals of the Health Board.



It is also important to remember that the Health Board, in assessing the feedback contained within the Peer Review report, have incorporated these within the Action Plan as part of the thematic approach.

Following the Health Board's placement under Targeted Intervention by the Welsh Government for planning and finance, HDdUHB has embarked on a comprehensive programme of

improvements, addressing multiple facets of operations. This section provides an in-depth assessment of the concerted efforts and advancements in response to this intervention.

1. **Progress in Maturity Matrix and Peer Review:** Internal reassessment against the Maturity Matrix has demonstrated advancement, notably making positive progress to achieving Level 3 maturity in key areas (compared to the baseline assessment earlier this year and previously presented to SDODC). This progress is a testament to HDdUHB's enhanced focus on leadership, governance, strategic planning, and implementation. The response to the Peer Review, integral to the Planning Improvement journey, demonstrates the Health Board's commitment to ongoing enhancement in line with established best practices (as set out in the annex).
2. **Robust Operational Planning and Commissioning:** A thorough and dynamic approach to operational planning has been adopted. This involves comprehensive assessments encompassing workforce, financial planning, and service delivery impacts. This balanced approach ensures decisions are financially prudent while upholding the highest standards of patient care.
3. **Integrated Planning Process (IPP) Implementation:** The introduction of the IPP has been pivotal in aligning planning activities across the Health Board. This strategic initiative has streamlined processes, leading to optimal utilisation of resources and enhanced communication both within the organisation and with external stakeholders.
4. **Clinical Services Plan (CSP) Development:** The CSP is instrumental in shaping the strategic direction, particularly in the areas of Planned Care pathways and the management of fragile services. The CSP's approach to these crucial areas is both data-driven and patient-centric, ensuring that services are tailored to meet the evolving needs and challenges across the Health Board.

A key feature of the CSP is its comprehensive analysis of service fragility and planned care pathways. This involves a detailed assessment of current service provisions, identifying areas where services are unsustainable and require immediate attention. By conducting thorough data activity trend analyses, the plan provides a clear picture of service utilisation patterns, patient demand, and potential areas of improvement. This level of detailed analysis is critical in developing informed solutions that are both effective and sustainable.

The CSP's focus extends beyond just addressing immediate needs; it builds resilient and efficient care pathways that align with HDdUHB's long-term goals of delivering high-quality patient care which is predicated on sustainability. By continuously monitoring and evaluating these pathways, and integrating feedback from a variety of stakeholders, the CSP ensures that responses are not only reactive but also strategically forward-looking bridging the gap from the here and now to the medium term and beyond. This comprehensive approach is vital in guiding HDdUHB towards sustainable service improvement and aligns closely with the objectives set out within the Targeted Intervention.

5. **Financial Recovery and Strategic Efficiency:** The revision of the savings process, alongside the recovery of the In-Year 2023/24 Annual Plan, has significantly contributed to supporting the financial position. These initiatives underscore the Health Board's commitment to financial sustainability and operational excellence. However, HDdUHB recognises that it hasn't delivered the level of financial delivery required; that said, it shouldn't detract from the positive and hard work undertaken to date.

6. **Enhanced Documentation Consistency:** The establishment of consistent Project Initiation Documents (PIDs) and Plans on a Page has markedly improved project governance and risk management across the Board. This uniformity in processes ensures clarity and accountability, bolstering operational effectiveness.
7. **Alignment with Recommendations and Thematic Issues:** HDdUHB's actions have been closely aligned with thematic issues and recommendations from various reviews, including those highlighted in the Peer Review report. The Health Board has made substantial progress in improving operational planning, financial management, and stakeholder engagement, ensuring strategies are comprehensive and centred around patient care.
8. **Engagement with Stakeholders:** Regular and meaningful engagement with the Welsh Government, SDODC, and other key stakeholders has been central to the Health Board's approach. These interactions ensure that strategies are in harmony with external expectations and incorporate a broad spectrum of feedback.
9. **Proactive Workforce Management and Service Impact Assessment:** The Health Board's approach to workforce planning has been forward-looking, emphasising the balance between staff well-being and service delivery needs. HDdUHB has also been vigilant about the impact of their decisions on patient services, prioritising the quality of care in all actions.
10. **Focused Risk Management and Mitigation:** The development and implementation of comprehensive mitigation strategies to manage risks associated with workforce and financial planning changes have been a priority. This proactive stance is essential for ensuring continuity of care and minimising adverse impacts on patient services. Furthermore, a clear risk appetite will be required for the forthcoming 2024/25 Plan to ensure there is maximum clarity around the expectations around resource management and delivery in 2024/25.
11. **Strengthened Governance and Assurance:** The Health Board's emphasis on governance and assurance processes has intensified, with clear monitoring mechanisms and accountability structures in place. This ensures comprehensive oversight of strategies and their effective implementation.

The work on the Clinical Services Plan continues, albeit it has been slowed in-line with the review of the Planning Objectives and the how this supports the recovery of the 2023/24 Annual Plan as described in the November 2023 Public Board (the Board paper can be found here: [CSP Board Paper November 2023](#)).

Additionally, the Committee will be receiving a deep-dive into the CSP at this meeting.

All of these elements noted above will be formally presented to WG at the next Targeted Intervention meeting on 10 January 2024.

Argymhelliad / Recommendation

The Strategic, Development and Operational Delivery Committee is requested to:

- **RECEIVE ASSURANCE** from the ongoing response to Targeted Intervention (from a Planning perspective).

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.2 Provide assurance to the Board that the planning cycle is being taken forward and implemented in accordance with University Health Board and Welsh Government requirements, guidance and timescales
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	9. All HDdUHB Well-being Objectives apply

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Not applicable
Rhestr Termiau: Glossary of Terms:	Not applicable
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Datblygu Strategol a Chyflenwi Gweithredol: Parties / Committees consulted prior to Strategic Development and Operational Delivery Committee:	Targeted Intervention Working Group Escalation Steering Group Public Board

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	This is a key component in the delivery of the Targeted Intervention work programme
Ansawdd / Gofal Claf: Quality / Patient Care:	This is a key component in the delivery of the Targeted Intervention work programme

Gweithlu: Workforce:	This is a key component in the delivery of the Targeted Intervention work programme
Risg: Risk:	Risks will be assessed as part of the ongoing process of both the development of the Targeted Intervention work programme and its subsequent monitoring
Cyfreithiol: Legal:	As above
Enw Da: Reputational:	Hywel Dda University Health Board needs to meet the targets set in order to maintain a good reputation with Welsh Government, together with our stakeholders, including our staff
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Consideration of Equality legislation and impact is a fundamental part of the planning of service delivery changes and improvements.

Annex – Maturity Matrix Re-assessment and next steps

- 1. Strategy Development:** HDdUHB's approach to workforce scenarios, service implementation plans, and recovery frameworks indicates a strategic development that responds to national and local priorities. The detailed planning for service accessibility and quality, workforce well-being, and financial efficiency suggests a Level 3 maturity, where there is a clear translation of national policies into local delivery. To progress to Level 4, HDdUHB would need to demonstrate proactive and pre-emptive mechanisms that anticipate future challenges and opportunities.
- 2. Strategy Alignment and IMTP:** The alignment of service plans with strategic queries and the establishment of clear timelines for implementation reflect a Level 3 maturity in strategy alignment. HDdUHB is operationalising strategies into tangible plans, which is indicative of a mature approach to integrated medium-term planning. Advancing to Level 4 would require evidence of a fully integrated mechanism/framework that drives all aspects of planning and delivery.
- 3. Dynamic and Engaged Planning:** The Annual Recovery Plan and the Choices Framework show a dynamic approach to planning, with an emphasis on scenario modelling and impact assessment. This suggests a Level 3-4 maturity, where planning processes are influencing outcomes. Further, when underpinned with Best Practice awards for engagement, HDdUHB demonstrates involvement of all stakeholders. To reach Level 4-5, HDdUHB would need to show that planning is not only dynamic but also consistently leads to improved outcomes and innovation.
- 4. Operational Planning:** The detailed steps for service implementation, run rate analysis, and the management actions required for scenario modelling indicate a robust approach to operational planning, likely at Level 3. The Health Board is linking operational plans with workforce and financial considerations. Progression to Level 4 would be marked by a seamless integration of these plans, demonstrating a track record of delivery and adaptability to changing circumstances.
- 5. Best Practice Approach to Improvement:** The focus on balancing the financial position with the quality of services and the consideration of workforce well-being points to a commitment to best practice, aligning with Level 3 maturity. To achieve Level 4, HDdUHB would need to consistently deliver best practice levels of efficiency and quality, with evidence of benchmarking against top-performing organisations.
- 6. Realistic and Deliverable-** The sensitivity analyses and risk assessments included in the planning documents suggest that HDdUHB is at Level 3, with realistic and deliverable plans. The Health Board is aware of its delivery track record and is conducting thorough risk assessments. Level 4 would require a consistent demonstration of sustainable and affordable delivery, with contingency plans effectively managing risks.
- 7. Systems and Processes for Performance, Accountability, and Improvement:** The Health Board's structured approach to implementation, with clear escalation mechanisms and communications strategies, indicates a Level 3 maturity. There is a culture of ownership and a drive for improvement. To reach Level 4, these systems would need to be rigorously applied organisation-wide, with clear evidence of accountability leading to performance improvements.

8. **Measurable and Improving Performance:** HDdUHB's focus on service quality, patient satisfaction, and financial targets suggests a Level 3 maturity in performance measurement. The Health Board is working towards improved access and quality of care in a cost-effective manner. Advancing to Level 4 would require sustained improvement across all performance metrics, with robust pathway applications demonstrating clear, measurable outcomes
9. **Assurance:** undertaking Equality Impact Assessments (EQIAs) for all areas couple with a clear understanding of the need for monitoring and assurance mechanisms, is indicative of a Level 3 maturity. The Health Board has clarity on its delivery mechanisms.

Levels of the maturity matrix are:

- 0 - No Progress
- 1 - Basic Level Principle accepted and commitment to action
- 2 - Early Progress / Early progress in development
- 3 – Results / Initial achievements
- 4 – Maturity - Results consistently achieved
- 5 – Exemplar - Others learning from our consistent achievements

The aim is to achieve at least level 3 in all domains.

Action Plan to support development of planning function as part of Targeted Intervention

Background to Action Plan

This action plan has been developed as part of the Health Board's response to the planning element of Welsh Government's Targeted Intervention. It responds to the independent Peer Review of Planning, the maturity matrix, other reports over recent years referencing the planning function within the Health Board plus reflections and internal lessons learnt from previous plans.

Master Action C

Theme 1: Organisational culture and planning							
Objective	Actions	Lead	Timescale	Success measures	Status as at September 2023	Status as at December 2023	Evidence of progress
1. Embed a positive planning culture within the Health Board where planning activities are valued and integral to the organisation's daily business	1.1 Establish an Executive planning function as part of a revised Core Delivery Group (CDG) to coordinate the develop of the 2024-25 plan and align across corporate functions	Director of Strategy and Planning	September 23	<ul style="list-style-type: none"> Regular, executive led meetings in place focused on the plan and plan delivery Agreed process and assumptions for 2024-25 plan 	<ul style="list-style-type: none"> Core Delivery Group (CDG) in place Planning Steering Group (PSG) being set up – every fourth meeting of the CDG to be PSG meeting, chaired by Director of Strategy and Planning 	Complete	<ul style="list-style-type: none"> CDG and PSG in place
	1.2 Establish a process to agree and disseminate updated planning objectives for 2024-25 which engages the senior leadership of the organisation	Director of Strategy and Planning	October 23 January 2024	<ul style="list-style-type: none"> Senior leaders involved in the process to agree Planning Objectives (POs) Directorate level plans in support of POs 	<ul style="list-style-type: none"> Board paper on revised Planning Objectives – September 2023 Update on Planning Objectives aligned to the Committees of the Board in place for October 2023 Review of milestones for Planning Objective deliverables underway 	In progress	<ul style="list-style-type: none"> Board seminar on 14 December to review Planning Objectives for 2024/25 Planning Objectives form the basis of the proposed Integrated Planning Process

							<ul style="list-style-type: none"> Process for future Planning Objectives currently being finalised (due January 2024) – see Annex 1 for details of the steps
	1.3 Utilising the Leading Excellence through Awesome People (LEAP) Programme implement regular professional development programmes/seminars to enhance skills, in order to develop staff and enhance the level of planning capability and capacity within the Health Board	Director of Strategy and Planning	March 24	<ul style="list-style-type: none"> Roll-out of planning module within the LEAP programme to the Band 7/8a and Band 8b/8c cohorts 	Initial discussion underway to scope the requirements to ensure that a holistic view of planning to include strategic planning, capital planning, transformation and project management skills are included	In progress	<ul style="list-style-type: none"> Further work required to establish the scope of the work
	1.4 Review Integrated Medium Term Plan (IMTP) and Planning processes from across Wales to understand best practice	Director of Strategy and Planning	October 23 February 2024	<ul style="list-style-type: none"> Report summarising key approaches across other Health Boards Lessons learnt incorporated into 2024-25 planning cycle 	<ul style="list-style-type: none"> Work currently being undertaken by All Wales Assistant Directors of Planning to review: <ul style="list-style-type: none"> Best practice processes (led by Swansea Bay UHB (SBUHB)) Capacity and capability benchmarking (led by Hywel Dda UHB (HDdUHB)) 	In progress	<ul style="list-style-type: none"> Work from ADoPs is continuing but will not support current Planning cycle Proposed HDdUHB Integrated Planning Process has explored wider Planning processes

Theme 2: Planning Cycle

Objective	Action	Lead	Timescale	Success measures	Status as at September 2023	Status as at December 2023	Evidence of progress
2. Robust continuous Planning Cycle to develop an IMTP	2.1 Develop and agree through CDG a revised annual planning cycle for the Health Board	Director of Strategy and Planning	October 23 December 2024	Agreed and documented planning cycle, incorporating best practice (see above)	In development as part of the PSG	In progress	<ul style="list-style-type: none"> Proposed Integrated Planning Process has been developed and socialised at PSG in November 2023, will be formally adopted at PSG in December 2023 The introduction of the Integrated Planning Process (IPP) has been pivotal in aligning planning activities across the Health Board. This strategic initiative has streamlined processes, leading to optimal utilisation of resources and enhanced communication both within the organisation and with external stakeholders.
	2.2 As part of the planning cycle introduce a process to coordinate the work programmes across corporate functions, aligned to Health Board priorities and responsive to changing circumstances	Director of Strategy and Planning	October 23 December 2024	<ul style="list-style-type: none"> Dynamic process in place to assess project resource requirements and align corporate teams to key organisational priorities 	To be developed through the CDG / PSG	In progress	<ul style="list-style-type: none"> As above (2.1) Further as part of CDG a thorough and dynamic approach to operational planning has been adopted. This involves comprehensive assessments encompassing workforce, financial planning, and service delivery impacts. This balanced approach ensures decisions are financially prudent while upholding the highest standards of patient care.

Theme 3: Operational planning and change management

Objective	Action	Lead	Timescale	Success measures	Status as at September 2023	Status as at December 2023	Evidence of progress
3. Robust operational plans supported by a structured change management framework	3.1 Develop a generalised methodology for producing operational plans, which triangulates service, finance and workforce assumptions and incorporates key performance indicators	Director of Strategy and Planning	November 23	<ul style="list-style-type: none"> • Agreed and documented methodology, incorporating best practice • Agreed and Documented Methodology: Finalise and document a comprehensive operational planning methodology. • Integration of Service, Finance, and Workforce Planning: Ensure methodology integrates service, finance, and workforce planning. • Inclusion of Key Performance Indicators: Incorporate relevant Key Performance Indicators into the methodology. • Alignment with Best Practice: Align the 	To be developed through the PSG and is clearly underpinned in the CDG work.	Complete	<p>Focused Risk Management and Mitigation: The development and implementation of comprehensive mitigation strategies to manage risks associated with workforce and financial planning changes have been a priority. This proactive stance is essential for ensuring continuity of care and minimising adverse impacts on patient services. Furthermore, a clear risk appetite will be required for the forthcoming 2024/25 Plan to ensure there is maximum clarity around the expectations around resource management and delivery in 2024/25.</p>

				methodology with established best practices in healthcare planning.			
	3.2 As a first phase develop detailed operational plans for 2024-25 in the following areas: <ul style="list-style-type: none"> • Beds and nursing workforce • Elective surgery • Transforming Urgent and Emergency Care (TUEC) • Cancer 	Director of Operations	January 24	<ul style="list-style-type: none"> • Planning tools developed and in used in key areas • Implement Plans in Key Areas: Effectively implement and deliver operational plans in specified areas (Ministerial Priorities). • Ensure Balanced Decision-Making: Maintain financial sustainability and high standards of patient care. • Use of Planning Tools: Utilise planning tools effectively in key service areas. • Align with 2024-25 Overall Plan: Ensure alignment of 	To be developed as part of the development of the plan for 2024-25.	In-progress	A proactive approach to the development of Plans is underway, and will be used as part of the development of individual plans for the overarching 2024/25 Plan

				operational plans within the 2024-25 Annual Plan.			
	3.3 Establish a change management team to support the delivery of key service changes within the organisation, specifically responsible for working with services to develop a change management plan that includes timelines, roles and responsibilities and communication strategies etc	Director of Strategy and Planning	November 23 January 2024	<ul style="list-style-type: none"> • Change management plans in place for key change areas, as agreed by CDG • Establish Efficient Change Management Team: Form a change management team for key service alterations. • Develop Comprehensive Planning and Communication: Create detailed change plans with clear roles and communication. • Balance Workforce and Service Delivery Needs: Achieve balance between staff well-being and service delivery? • Prioritise Quality of 	To be considered within CDG	In-progress	<ul style="list-style-type: none"> • Discussion to be held at PSG December 2023 • Proactive Workforce Management and Service Impact Assessment: Our approach to workforce planning has been forward-looking, emphasising the balance between staff well-being and service delivery needs. We have also been vigilant about the impact of our decisions on patient services, prioritising the quality of care in all our actions.

				Patient Care: Focus on quality of patient care in planning decisions.			
	3.4 Carry out post implementation reviews of key operational service changes during 2023-24 to help inform future operational plans	Director of Operations	December 23	<p>Responsive Operational Plans to changing circumstances and priorities.</p> <ul style="list-style-type: none"> Conduct Detailed Post-Implementation Reviews: Perform thorough reviews of changes in operational services. Adapt Plans to Changing Needs: Ensure operational plans are adaptable to changing circumstances. Align with Directorate Improvement Strategies: Align reviews with Directorate's Improvement Together and agreed Operational Plans. 	This will be aligned to Directorate Improving Together as set out in the Integrated Planning Process	In progress	<ul style="list-style-type: none"> Work has commenced to look at what questions should be asked around how we carry out post implementation reviews of key operational service changes during 2023-24 to help inform future operational plans? (For example, what do Capital have in-place to evaluate the impact?) The establishment of consistent Project Initiation Documents (PIDs) and Plans on a Page has markedly improved project governance and risk management across the Board. This uniformity in processes ensures clarity and accountability, bolstering our operational effectiveness.

				<ul style="list-style-type: none">• Improve Project Governance: Enhance governance and risk management in projects.			
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Theme 4: Planning and the strategy (bridge between short/medium term plans and the longer-term strategy)							
Objective	Action	Lead	Timescale	Success measures	Status as at September 2023	Status as at December 2023	Evidence of Progress
4. Agreed medium and long-term plans aligned to the strategy	4.1 Develop medium-term plans for key service areas within the Clinical Services Plan (CSP) programme	Director of Strategy and Planning	Phase 1 – Issues paper: March 24	<p>Agreement on issues and plans for clinical services within the CSP programme by March 2024 inclusive of hurdle criteria</p> <p>Development of integrated service options and alignment to the Strategic Objectives.</p> <p>Evidence of alignment of medium-term plans with broader organisational strategic goals</p> <p>Demonstration of stakeholder engagement and feedback incorporation in the medium-term plans, ensuring plans are informed by both internal and external input</p> <ol style="list-style-type: none"> 1. Board Approval of Medium-Term Plans: Achieve Board approval for medium-term clinical services plans. 2. Strategic Alignment with Health Board Goals: Ensure plans align with Health Board's strategic direction. 3. Effective Management of Planned Care Pathways: 	CSPs in development as per the September 2023 Board paper	On track	CSPs in development as per the September 2023 and December 2023 Board papers

				<p>Successfully manage and improve planned care pathways.</p> <ol style="list-style-type: none"> 4. Robust Handling of Fragile Services: Effectively address and manage fragile services. 5. Data-Driven and Patient-Centric Planning: Adopt a data-driven, patient-centric approach in plan development. 			
	<p>4.2 Produce a medium-term plan for inpatient beds, triangulating service, staffing and financial plans and aligning with the TUEC programme, A Healthier Mid and West Wales (AHMWW) programme and the financial roadmap</p>	<p>Director of Strategy and Planning</p>	<p>February 24</p>	<p>Medium-term bed plan agreed by CDG</p> <ol style="list-style-type: none"> 1. Triangulated Inpatient Bed Planning: Develop an integrated plan for inpatient beds, covering service, staffing, and finances. 2. Alignment with TUEC and Financial Roadmap: Align inpatient bed plan with TUEC programme and financial roadmap. 3. Comprehensive Service Fragility Analysis: Conduct thorough analysis to identify and address service fragilities. 4. Detailed Assessment of Planned Care Pathways: Evaluate and refine planned care pathways for efficiency. 	<p>Key pillar of CDG work programme</p>	<p>In-progress</p>	<p>Continues to be a key pillar of the CDG work programme but clarity is still required to ensure that all elements are in-place to be included as part of the 2024/25 Plan</p>

				5. Data-Informed Service Utilisation Patterns: Utilise data analysis for understanding and planning service utilisation.			
	4.3 Develop a medium-term plan for planned care services that sets out the options for achieving demand-capacity balance in all key service areas and delivering backlog reductions to meet national access targets	Director of Operations	February 24	<p>Planned care plans in place</p> <ol style="list-style-type: none"> 1. Completion of Planned Care Service Plans: Develop and finalise medium-term planned care service plans. 2. Strategic Options for Achieving Objectives: Define strategic options for achieving planned care goals. 3. Alignment with 2024-25 Strategic Plan: Ensure alignment of planned care plans with 2024-25 strategic objectives. 4. Operational Planning and Governance Group Involvement: Incorporate insights from the Operational Planning, Governance, and Performance Group. 5. Demand-Capacity Balance in Service Areas: Achieve a balance between demand and capacity in key service areas.” 6. Backlog Reductions to Meet National Access Targets: Implement 	To be developed as part of the development of the plan for 2024-25.	In-progress	<ul style="list-style-type: none"> • As above (4.2) • Operational Planning, Governance and Performance Group now in place

				effective strategies to reduce backlog and meet national access targets.			
4.4 Agree a refreshed 10-year workforce strategy, in conjunction with Health Education and Improvement Wales (HEIW), which is aligned to AHMWW, the financial roadmap and national strategies and initiatives (e.g. national primary care strategy)	Director of Workforce and OD	February 24	<p>Workforce strategy in place</p> <ol style="list-style-type: none"> 1. Completion and Agreement on Workforce Strategy: Finalise and gain consensus on the 10-year workforce strategy. 2. Alignment with Strategic and Financial Plans: Ensure strategy aligns with AHMWW and financial roadmaps. 3. Integration of National Strategies and Initiatives: Incorporate relevant national strategies, including primary care. 4. Effective Collaboration with HEIW: Successfully collaborate with HEIW in strategy formulation. 	To be developed as part of the development of the plan for 2024-25.	In progress	To be developed as part of the development of the plan for 2024-25.	
4.5 Obtain Welsh Government (WG) endorsement of the AHMWW programme business case (PBC) and strategic	Director of Strategy and Planning	February 24	<p>AHMWW PBC and SOC endorsed by WG</p> <ol style="list-style-type: none"> 1. Welsh Government Endorsement of PBC and SOC: Achieve Welsh Government endorsement for AHMWW PBC and SOC. 2. Effective Incorporation of WG Feedback: 	Currently awaiting feedback on the submitted PBC. The final version of the SOC will need to reflect the output from the Clinical Strategy Review and Infrastructure Investment Board (IIB) discussions. When the PBC receives WG	In-progress	Feedback received – currently assessing this	

	<p>outline case (SOC) to provide certainty on the long-term strategic direction for West Wales and commence detailed service / capital planning as part of the outline business case (OBC)</p>			<p>Successfully integrate feedback from WG into PBC and SOC.</p> <ol style="list-style-type: none"> 3. Completion of Supporting Reviews and Discussions: Complete Clinical Strategy Review and Infrastructure Investment Board discussions. 4. Approval and Submission Process: Attain Public Board approval and submit SOC to WG. 	<p>endorsement, the SOC will be presented to Public Board for approval and onward submission to WG. Programme Group has targeted November 2023 for completion of this activity, however this is dependent upon feedback yet to be received from WG.</p>		
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Theme 5: Capacity and capability of the Corporate Planning Directorate							
Objective	Action	Lead	Timescale	Success measures	Status as at September 2023	Status as at December 2023	Evidence of Progress
5. Enhanced skills, knowledge and capacity of the corporate planning team	5.1 Develop a vision and purpose for the Planning Team	Director of Strategy and Planning	November 23 March 2024	Planning Team vision in place	To be commenced – work will be guided by the requirements of the Planning Cycle	In-progress	<ul style="list-style-type: none"> A Directorate Senior Management Team is now in place and will be looking at developing a vision and purpose for the Directorate including the Planning Team Proposed this will include OD development sessions
	5.2 Conduct a skills gap analysis to identify areas of improvement and how we best utilise existing resource from across the organisation to work with Planning	Director of Strategy and Planning	November 23 March 2024	Skills gap analysis in place	To be commenced	In-progress	<ul style="list-style-type: none"> As above – this will need to form a key element of the work However, a one-year follow-up on the planning maturity matrix has commenced (see annex 2 for detail - Maturity Matrix Re-assessment and next steps)
	5.3 Evaluate the current workload and capacity of the team, and review and adjust capacity based on the team's needs and the organisation's priorities	Director of Strategy and Planning	November 23 March 2024	Review of Planning Team capacity in place	To be commenced	In-progress	As above

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Theme 6: Project governance and reporting tools							
Objective	Action	Lead	Timescale	Success measures	Status as at September 2023	Status as at December 2023	Evidence of progress
6. Develop a consistent organisational approach to supporting key workstreams	6.1 Develop a baseline of current processes and templates in use and review (Enquire Phase)	Director of Strategy and Planning	September 23	Development of Enquiry Phase Output Report identifying key learning to be carried forward into Discovery Phase	Complete	Complete	
	6.2 Identify and highlight best practice already in the organisation and areas for improvement (Discovery Phase)	Director of Strategy and Planning	September 23	Implementation of draft documents for iterative. Development of timeline for iterative design and feedback	Draft Workstream document developed and in use for Clinical Services Plan and Annual Recovery Work. On track	Complete	Roll out of standardised PID and Enquiry/ Discovery Phase reporting framework as well as streamlining of project authorisation process aligning Core Delivery Group and Operational Planning, Governance and Performance Group.
	6.3 Develop action plan to meet Discovery Phase actions identified (Design Phase)	Director of Strategy and Planning	October 23 December 2023	Action plan developed with resourcing requirements identified	Not started – On track	Delayed - Slipped to accommodate alignment of Hywel Dda Way and Financial BRAG. Due End of December 23.	Alignment between Hywel Dda Way and Financial BRAG system for shared language to assess project movement and health.
	6.4 Implementation of revised processes and templates (Delivery phase)	Director of Strategy and Planning	March 24	Suite of templates in place with a document control group established to make changes as needed going forward	Not started – On track	Not started – due to commence from Jan 24.	Action plan being developed to incorporate new template designed for Enquiry and Discovery Phase. This will inform actions for Governance and Assurance actions to ensure consistent reporting.

Annex 1: Proposed steps in the development of the Planning Objectives

1. Consolidate Strategic Objectives: Undertake a review to streamline the current SOs to four key objectives, aligning them with the overarching goals of the Health Board.
2. Evaluate Current POs: Assess the existing Planning Objectives to ascertain their current status – whether to continue, complete, delay, or carry forward.
3. Align POs with Revised SOs: Realign all POs to directly support the newly defined SOs, ensuring each PO contributes effectively within the established risk appetite framework.
4. Remove Planning Domains: Omit the Planning Domains from the strategic framework to simplify the planning process and enhance clarity.
5. Conduct Gap Analysis: Perform a thorough gap analysis to identify areas needing additional focus or resources to achieve the strategic goals.
6. Update the Balanced Assurance Framework (BAF): Revise the BAF to reflect the changes in SOs and the removal of Planning Domains, ensuring robust assurance support.
7. Assign Responsibilities and Deadlines to POs: Designate a specific executive lead and establish clear timelines for each PO, integrating this into the executive performance evaluation.
8. Allocate POs to Assurance Committees: Each PO should be assigned to a relevant assurance committee for regular oversight.
9. Develop and Approve Implementation Plans: Begin with socialising PO themes at the December Board Seminar, followed by drafting implementation plans in January with approvals from the Executive Team.
10. Review Draft Plans at a Special Board Seminar in February: Conduct a comprehensive review of draft plans, ensuring alignment with financial and workforce constraints.
11. Finalise and Endorse the Operational Plan: Finalise the operational plan by March for public Board review and aim for endorsement and submission to the Welsh Government by 29th March.
12. Document the Strategic Framework: Formally codify the approach to SOs, POs, and BAF, seeking sign-off from the planning committee for clear governance.
13. Effectively Communicate Changes: Ensure all stakeholders are informed about the changes and the reasoning behind them for a unified understanding.
14. Set Up Regular Monitoring Processes: Establish monitoring mechanisms to track progress and adapt the strategic and operational plans as needed (CDG and DITs)
15. Formalise Documentation and Approval: Document the updated strategic framework seek formal approval from the appropriate committees.

Annex 2 – Maturity Matrix Re-assessment and next steps

1. **Strategy Development:** HDdUHB's approach to workforce scenarios, service implementation plans, and recovery frameworks indicates a strategic development that responds to national and local priorities. The detailed planning for service accessibility and quality, workforce well-being, and financial efficiency suggests a Level 3 maturity, where there is a clear translation of national policies into local delivery. To progress to Level 4, HDdUHB would need to demonstrate proactive and pre-emptive mechanisms that anticipates future challenges and opportunities.
2. **Strategy Alignment and IMTP:** The alignment of service plans with strategic queries and the establishment of clear timelines for implementation reflect a Level 3 maturity in strategy alignment. HDdUHB is operationalising strategies into tangible plans, which is indicative of a mature approach to integrated medium-term planning. Advancing to Level 4 would require evidence of a fully integrated mechanism/framework that drives all aspects of planning and delivery.
3. **Dynamic and Engaged Planning:** The Annual Recovery Plan and the Choices Framework show a dynamic approach to planning, with an emphasis on scenario modelling and impact assessment. This suggests a Level 3-4 maturity, where planning processes are influencing outcomes. Further, when underpinned with Best Practice awards for engagement, HDdUHB demonstrates involvement of all stakeholders. To reach Level 4-5, HDdUHB would need to show that planning is not only dynamic but also consistently leads to improved outcomes and innovation.
4. **Operational Planning:** The detailed steps for service implementation, run rate analysis, and the management actions required for scenario modelling indicate a robust approach to operational planning, likely at Level 3. The Health Board is linking operational plans with workforce and financial considerations. Progression to Level 4 would be marked by a seamless integration of these plans, demonstrating a track record of delivery and adaptability to changing circumstances.
5. **Best Practice Approach to Improvement:** The focus on balancing financial position with the quality of services and the consideration of workforce well-being points to a commitment to best practice, aligning with Level 3 maturity. To achieve Level 4, HDdUHB would need to consistently deliver best practice levels of efficiency and quality, with evidence of benchmarking against top-performing organisations.
6. **Realistic and Deliverable:** The sensitivity analyses and risk assessments included in the planning documents suggest that HDdUHB is at Level 3, with realistic and deliverable plans. The Health Board is aware of its delivery track record and is conducting thorough risk assessments. Level 4 would require a consistent demonstration of sustainable and affordable delivery, with contingency plans effectively managing risks
7. **Systems and Processes for Performance, Accountability, and Improvement:** The Health Board's structured approach to implementation, with clear escalation mechanisms and communications strategies, indicates a Level 3 maturity. There is a culture of ownership and a drive for improvement. To reach Level 4, these systems would need to be rigorously applied organisation-wide, with clear evidence of accountability leading to performance improvements.
8. **Measurable and Improving Performance:** HDdUHB's focus on service quality, patient satisfaction, and financial targets suggests a Level 3 maturity in performance measurement. The Health Board is working towards improved access and quality of care in a cost-effective manner. Advancing to Level 4 would require sustained improvement across all performance metrics, with robust pathway applications demonstrating clear, measurable outcomes
9. **Assurance:** undertaking EQIAs for all areas couple with a clear understanding of the need for monitoring and assurance mechanisms, is indicative of a Level 3 maturity. The Health Board has clarity on its delivery mechanisms.

Levels of the maturity matrix are:

- 0 - No Progress
- 1 - Basic Level Principle accepted and commitment to action
- 2 - Early Progress / Early progress in development
- 3 – Results / Initial achievements
- 4 – Maturity - Results consistently achieved
- 5 – Exemplar - Others learning from our consistent achievements

The aim is to achieve at least level 3 in all domains.