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Stakeholder Reference Group

2 May 2024



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Agenda Item 2.2 - Clinical Services Plan
Presenter(s) Conrad Hancock and Alwena Hughes Moakes



- Background
- Phase 1 - Issues Paper and SBAR Board recommendations
- Phase 2 - Process overview
- Phase 2 - Process methodology



Our long-term plans for service provision remains as set out in our strategy called A Healthier Mid and West Wales - Our Future Generations Living Well.

Until the strategy is fully implemented, including the establishment of the proposed new hospital network, services are having to manage fragilities daily. The pandemic has further exposed these deficiencies, with many services unable to restore pre-COVID-19 activity levels or service models. To respond to this, we have established a Clinical Services Plan programme to review some key services.

Services within the Clinical Services Plan are delivered across Hywel Dda University Health Board (HDdUHB) from hospitals and community sites. Inpatient services are predominantly delivered from Bronglais Hospital in Aberystwyth, Glangwili Hospital in Carmarthen, Prince Philip Hospital in Llanelli, and Withybush Hospital in Haverfordwest. Outpatient services are also delivered from these hospitals as well as community hospitals and clinics.



Aim:

- Develop a series of options for delivery of the Clinical Services Plan programme in response to service fragilities or unsustainability based on the principles of care that is safe, sustainable, accessible, and kind. The development of a Clinical Services Plan is also an action within the Targeted Intervention requirements of Welsh Government.

Objectives:

- Respond to Critical Care service fragility
- Respond to Emergency General Surgery service fragility
- Sustainably improve access and reduce waiting times for patients for Planned Care (Ophthalmology, Dermatology, Urology, and Orthopaedics) and Diagnostics (Endoscopy and Radiology)
- Improve standards and respond to service fragility within the Stroke service

Phase 1 – Issues Paper



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A clinically led assessment of the service areas included within the Clinical Services Plan programme has been completed.

The Issues Paper contains details on the early engagement activities which have taken place, the processes and methodologies used, as well as the data.

Please find a link below to the Clinical Services Plan SBAR submitted to Board for the 28MAR2024:

hduhb.nhs.wales/about-us/your-health-board/board-meetings-2024/board-agenda-and-papers-28-march-2024/board-agenda-and-papers-28-march-2024/item-4-3-clinical-services-plan-update-sbar-pdf/

Please find a link below to the Clinical Service Plan Issues Paper and appendices. (Item 4.3)

- Issues Paper:

hduhb.nhs.wales/about-us/your-health-board/board-meetings-2024/board-agenda-and-papers-28-march-2024/board-agenda-and-papers-28-march-2024/item-4-3-clinical-services-plan-issues-paper-pdf/

- Appendices (Item 4.3 onwards):

[Board agenda and papers 28 March 2024 - Hywel Dda University Health Board \(nhs.wales\)](https://hduhb.nhs.wales/about-us/your-health-board/board-meetings-2024/board-agenda-and-papers-28-march-2024/board-agenda-and-papers-28-march-2024/item-4-3-clinical-services-plan-issues-paper-pdf/)



Argymhelliad / Recommendation

The Board is asked to:

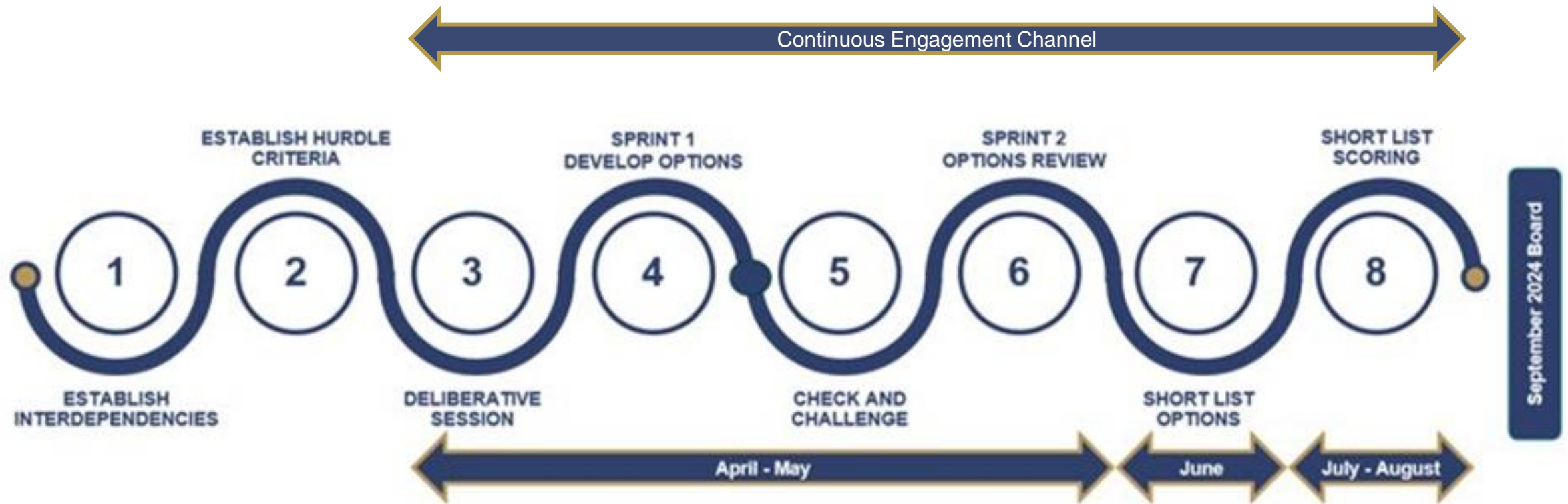
- **NOTE** that the Clinical Services Plan programme is progressing in line with the Board agreed plan
- **AGREE** for all nine services (excluding Primary Care and Community Services) to move to phase 2 of the Clinical Services Plan programme
- **AGREE** that Primary Care at this stage will become a separate piece of work managed through its own governance structure, focussing on the development of a Primary Care and Community Services Strategy
- **TAKE ASSURANCE** on the methodology for phase 2 of the programme
- **NOTE** the risks identified by the programme for phase 2 and phase 3 of the Clinical Services Plan

Phase 2 overview



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Phase 2 methodology (Steps 1 and 2)



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Further detail of the methodology for phase 2 is described below:

- **Step 1** – Establish the interdependencies and key people who need to be involved in Phase 2. This was developed through the Multi Professional Leadership Forum (MPLF) in February 2024, with a follow up discussion at the Clinical Reference Group (CRG) and further tested within the programme Task and Finish groups. In addition, this process has highlighted who will need to be involved in the check and challenge process (as defined in step 5); this will include wider stakeholder representation including service users and groups.
- **Step 2** – Establish Hurdle Criteria, developed by the Clinical Reference Group and sense checked in Step 3. The hurdle criteria will be approved by the Clinical Services Plan Steering Group. These may include criteria in relation to Quality, Workforce, Deliverability, Sustainability and Finance. These will be informed by advice received from the Consultation Institute (tCI). The following steps will be facilitated by tCI (all steps will be delivered in person unless otherwise stated):

How will the project be delivered? Steps 3 to 9



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9 April 2024, Deliberative Session (in person)

- Review the Issues document to identify key points
- Sense check what we think are the minimum criteria that any potential options need to meet (Hurdle Criteria)
- Discuss potential ideas

25 and 26 April 2024, Sprint 1 – Options Development (in person)

- Develop a long list of options for delivery of the Clinical Services Plan
- Development of evaluation criteria and scoring methodology for short listing

17 May 2024 Check and Challenge (online)

- Service teams to present their first options following the work that took place during the first workshop
- Group members to check through these options for anything else that needs to be considered
- Agreement on how the options will be scored

23 and 24 May 2024, Sprint 2 – Options Development (in person)

- Review and consider additional data/information (identified in Sprint 1)
- Review and consider the findings from check and challenge session with wider stakeholders
- Long list score the options utilising the Hurdle Criteria (the minimum criteria we need to meet) to identify a short list of options

13 June 2024, Short list options development (in person)

- Develop Strengths, Weaknesses, Opportunities, and Threats (SWOT) Analysis for shortlist of options

28 June 2024, Short list options development (online)

- Refining SWOT analysis for shortlist of options

9 July 2024, Short List scoring (online)

- Scoring the shortlist of options

Deliberative Session – 19 April 2024



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- 82 people in attendance
 - Two Health Board Executives
 - 59 Clinical/Nursing/Operational staff
 - Seven Service User Representatives
 - 14 tCI/ Transformation Programme Office (TPO)/ Engagement colleagues – facilitation and scribing
- Objectives
 - Review Issues paper for gaps
 - Understand interdependencies with other clinical or support services
 - Scope potential ideas to address the challenges/issues
 - Sense check the draft hurdle criteria
- Presentations of service areas
- Key questions for tabletop discussion to draw out the gaps within the paper and encourage ideas



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SAFE | SUSTAINABLE | ACCESSIBLE | KIND



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