

TABLE OF ACTIONS

Strategic Development and Operational Delivery Committee (SDODC) Meeting held on 10 November 2022

MINUTE REF	ACTION	LEAD	TIME SCALE	PROGRESS
SDODC (22) 37	Cross Hands Health and Wellbeing Centre To share with Members the outcome of work on the family centre ethos, undertaken with the Family Support Service Manager at Carmarthenshire County Council.	LD/RD	August 2022	The evaluation of the existing family centres in Llanelli was shared with members via email on 25 November 2022.
SDODC (22) 42	Continuing NHS Healthcare: The National Framework for Implementation in Wales To present the detail of a national performance tool, to the Committee when available.	JP	July/August 2022	Brought Forward : This is a national reporting tool which Welsh Government are developing. An update will be provided to SDODC when available.
SDODC (22) 57	To follow-up on discussion, in detail, with regard to data for cancer wait times.	AL/KJ	August 2022	Brought Forward : Discussions commenced, detailed follow-up meeting to be scheduled following summer leave.
				A meeting is in the process of being arranged with date to be confirmed
SDODC (22) 75	To follow-up at the meeting with the Senior Operational Business Team (27.8.22) why and how the 75% Waiting Times target risk is scored at 12 (which appears low) and report back to SDODC on the outcome and undertake a deep dive for planned recovery to examine risks, mitigations and actions.	AC	October 2022	Both risks have been reviewed and are on the SDODC agenda. In respect to risk 1350 (Cancer) in recent months, positive progress has been achieved in reducing backlog volumes and it is expected that performance will significantly improve towards target levels as we move into Quarter 4 resulting in the risk level remaining at 12.
				A deep dive on Planned Care took place at the Senior Operational Business meeting on 25 August 2022.
SDODC (22) 76	To arrange a meeting between Mr Sam Dentten, Dr Jo McCarthy and colleagues in the Finance	JMcC	October 2022	Brought Forward : Meeting arranged for 12 December 2022.

	and Workforce teams to understand the metrics used to analyse survey responses and align the CHC and HDdUHB in terms of surveys, methodology and engagement.			
	To prepare a report for the Executive Team (September 2022 meeting) incorporating SDODC discussion points on ambition, trajectories, predicted outcomes, variables, performance, performance management, digital inclusion and capacity and demand metrics and circulate the report and outcome to SDODC members.	НТ	October 2022	 Brought Forward: The report is currently being drafted and will be circulated to SDODC members. Data on performance and trajectories was submitted as part of the Health Board's enhanced monitoring framework to WG on 11 November (Appended to the IPAR, which is included on the SDODC agenda) Our performance management process is in the process of being revised, and is expected to be approved by the Executive Team in December. This will be included for information for the next SDODC meeting. Digital inclusion is within the remit of the Sustainable Resources Committee (SRC). Our approach to digital inclusion will be included on the SRC forward work programme in February.
SDODC (22) 81	To discuss tertiary case issue with the Health Equity Group and feedback outcomes to SDODC members.	JMcC	October 2022	Brought Forward: The issue of access to tertiary care services was raised at the Hywel Dda Health Equity Group on 23 November 2022. There were reported cases of people being unable to take loved ones to appointments due to work commitments and cost of fuel. There was a request to deliver more services locally through the cost of living crisis. There are a number of barriers to this and its unlikely we can move services, however the team committed to reviewing data to show whether the DNA (Did Not Attend) rate

SDODC (22) 82	To follow up on workforce planning around managed practices within Amman Gwendraeth	RB	October 2022	for Hywel Dda residents not attending appointments for services outside Hywel Dda has risen. Once the scale of the problem has been established an action plan to help will be developed. The issue has been raised with Executives. Brought Forward: This is part of the ongoing workforce planning being undertaken with the
(22) 62	to ensure Mental Health practitioners form part of the core team.			managed practices.
SDODC (22) 87/92	To update the Board with regard to risk in relation to the existing/anticipated bed capacity and demand during January/February 2023.	AC	September 2022	Brought Forward: In early November, Welsh Government provided a number of scenarios outlining potential bed demand for the winter taking into account potential emergency care, COVID-19 and respiratory virus (Flu and RSV) impact this winter. The Health Board has put these scenarios through their own models and there remains a risk of 50 to 200 more beds being required if the worst-case scenarios occur, and assuming all those demand streams are additional. Recent experience of COVID-19 has demonstrated that it is more likely to be an incidental diagnosis than a primary one therefore the reasonable worst case bed gap is not expected to be as significant as above. The Health Board will continue to monitor the position weekly and are implementing our plans to improve flow which will aid capacity assumptions, and to implement increased community capacity. The Health Board is also establishing an understand of the impact on domiciliary care and care home fragility which will add to bed demand if packages of care are handed back or availability reduces further.

SDODC (22) 97	To pursue with Executive colleagues the need to update action lists in advance of circulation of Committee papers.	JW	November 2022	Completed.
SDODC (22) 98	To include review of SDODC Self-Assessment for April 2023.	SH	November 2022	This has been forward planned in the Committee workplan.
SDODC (22) 100	To escalate through the SDODC Update Report the following material risks: • Threat of industrial action; • Heating the HDdUHB estate and the risk of energy shortages; • Risk of significant cold spells resulting in increased demand on services.	SH	November 2022	These were included in SDODC update report to Board (24 November 2022 meeting).
SDODC (22) 104	 To update SDODC workplan to include the following deferred matters: Deep Dive: PO 4L: Social Model for Health and Wellbeing PO 4P: Recovery and Rehabilitation Service PO 5U: Community and Non-Clinical Estates Strategy Stroke Strategy Palliative Care Strategy Dementia Strategy CE&IM&T – Isolation Facilities Review Update 	SH	November 2022	This has been forward planned in the Committee workplan.
SDODC (22) 105	To circulate the updated slides for Deep Dive: PO 4Q: Community Care Support to Reduce Non-Elective Acute Bed Capacity.	SH	November 2022	Circulated with SDODC draft minutes 2 December 2022.
SDODC (22) 106	To provide further information to Mr Weir regarding voluntary and third sector partnership	JMcC/ Jo Dainton	November 2022	Response to Mr Weir sent 8 December 2022.

working and engagement on the various projects.		
To finalise the overarching strategy for PO 4S Improvement in Population health for presentation to SDODC in December 2022 ar for onward Board approval in January 2023.	November 2022	Agenda item for SDODC 16 December 2022. Deferred to February 2023 agenda (swapped with PO 4K: Health Inequalities). The Health Improvement Strategy has been moved to February 2023 SDODC and March 2023 Board to allow time to discuss the Health Inequalities paper, and also to facilitate additional time requirements around any planned engagement and consultation period. The planning objective on health inequalities has been brought forward from March 2023 to January 2023 Board.

AC – Andrew Carruthers	RB – Rhian Bond	LD – Lee Davies	MD – Maynard Davies	RD – Rhian Dawson
KJ – Keith Jones	PJ – Mr Philip Jones	AL – Anna Lewis	JMcC – Jo McCarthy	JP – Jill Paterson
AS – Alison Shakeshaft	HT - Huw Thomas	IT – Iwan Thomas	PW -Paul Williams	JW -Joanne Wilson
SH – Sally Hurman				