



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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	25 April 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Strategic Development and Operational Delivery Committee Assurance Annual Report 2023/24
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Maynard Davies, Chair, Strategic Development and Operational Delivery Committee Assurance Annual Report
SWYDDOG ADRODD: REPORTING OFFICER:	Lee Davies, Director of Strategy and Planning

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

The purpose of this report is to present the Strategic Development and Operational Delivery Committee (SDODC) Annual Assurance Report 2023/24 to the Board.

The SDODC Annual Report provides assurance in respect of the work that has been undertaken by the Committee during 2023/24, and that the terms of reference as set by the Board are being appropriately discharged.

Cefndir / Background

Hywel Dda University Health Board's (HDdUHB's) Standing Orders and the Terms of Reference (TOR) for SDODC require the submission of an Annual Report to the Board to summarise the work of the Committee and to identify how it has fulfilled the duties required of it.

The purpose of SDODC as expressed in its Terms of Reference is:

- To receive an assurance on delivery against all relevant Planning Objectives falling in the main under Strategic Objectives 4 (The best health and wellbeing for our individuals, families and our communities) and 5 (Safe, sustainable, accessible and kind care), in accordance with the Board approved timescales, as set out in HDdUHB's Annual Plan.
- 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.
- Provide assurance to the Board that, wherever possible, University Health Board plans are aligned with partnership plans developed with Local Authorities, Universities, Collaboratives, Alliances and other key partners, such as the Transformation Group who form part of A Regional Collaboration for Health (ARCH).

- Provide support to the Board in its role of scrutinising performance and assurance on overall performance and delivery against Health Board plans and objectives, including delivery of key targets, giving early warning on potential performance issues and making recommendations for action to continuously improve the performance of the organisation and, as required, focus in detail on specific issues where performance is showing deterioration or there are issues of concern.
- Provide assurance to the Board that the data on which performance is assessed is reliable and of high quality and that any issues relating to data accuracy are addressed.
- Seek assurance on the management of principal risks within the Board Assurance Framework (BAF) and Corporate Risk Register (CRR) allocated to the Committee and provide assurance to the Board that risks are being managed effectively and report any areas of significant concern e.g. where risk tolerance is exceeded, lack of timely action.
- Recommend acceptance of risks that cannot be brought within the UHBs risk appetite/tolerance to the Board through the Committee Update Report.
- Receive assurance through Sub-Committee Update Reports that risks relating to their areas are being effectively managed across the whole of the Health Board's activities (including for hosted services and through partnerships and Joint Committees as appropriate).

Asesiad / Assessment

The SDODC Annual Report 2023/24 is included at Appendix 1.

Argymhelliad / Recommendation

The Strategic Development and Operational Delivery Committee is requested to:

- **APPROVE** the Strategic Development and Operational Delivery Committee's Annual Report 2023/24 for onward transmission to Board for **ENDORSEMENT** at the meeting scheduled to be held on 30 May 2024.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	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)	Not Applicable
Galluogwyr Ansawdd: Enablers of Quality:	6. All Apply

Quality and Engagement Act (sharepoint.com)	
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:	Agendas, reports and minutes of SDODC meetings 2023/24
Rhestr Termiau: Glossary of Terms:	Included within the body of the report.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Datblygu Strategol a Chyflenwi Gweithredol: Parties / Committees consulted prior to Strategic Development and Operational Delivery Committee:	SDODC Chair, Lead Director and Committee Members

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	A sound system of internal control, as evidenced in the Committee's Annual Report, will assist with ensuring financial control, and the safeguard of public funds
Ansawdd / Gofal Claf: Quality / Patient Care:	SBAR template in use for all relevant papers and reports.
Gweithlu: Workforce:	SBAR template in use for all relevant papers and reports.
Risg: Risk:	SBAR template in use for all relevant papers and reports.
Cyfreithiol: Legal:	A sound system of internal control, as evidenced in the Committee's Annual Report, ensures that any risks to the achievement of the Health Board's objectives are identified, assessed and managed.

	Compliance with the Health Board's Standing Orders, and the Committee's Terms of Reference, requires the submission of an Annual Report to the Board.
Enw Da: Reputational:	Not applicable
Gyfrinachedd: Privacy:	<p>A sound system of internal control, as evidenced in the Committee's Annual Report, ensures that any risks to the achievement of the Health Board's objectives are identified, assessed and managed.</p> <p>Compliance with the Health Board's Standing Orders, and the Committee's Terms of Reference, requires the submission of an Annual Report to the Board.</p>
Cydraddoldeb: Equality:	SBAR template in use for all relevant papers and reports.



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Hywel Dda
University Health Board

Hywel Dda University Health Board

Strategic Development and Operation Delivery Committee Annual Report 2023/24

Introduction

The Strategic Development and Operation Delivery Committee (SDODC) receives an assurance on delivery against all relevant Planning Objectives falling in the main under Strategic Objectives 4 (The best health and wellbeing for our individuals, families and our communities) and 5 (Safe, sustainable, accessible and kind care), in accordance with the Board approved timescales, as set out in Hywel Dda University Health Board's (HDdUHB) Annual Plan; and provides assurance in respect of the work that has been undertaken by the Committee and that the terms of reference as set by the Board are being appropriately discharged.

Six meetings took place during 2023-24, all of which were quorate:

- 27 April 2023
- 26 June 2023
- 31 August 2023
- 26 October 2023
- 21 December 2023
- 29 February 2024

Executive Summary

SDODC areas of scrutiny in 2023-/24 have been wide and varied. During the year we have restructured the agenda of the meeting into three main sections:

- Performance – this section focused on ensuring that the Health Board was delivering services and meeting targets and Ministerial Priorities. This includes the planning aspects of Targeted Intervention and review of the Integrated Performance Assurance Report.
- Planning – this section monitored the delivery of the Annual Plan and the planning objectives. Using deep dives and regular reports the Committee examined how well the Plan was being delivered.
- Planning in Partnership – this section focused on how we planned in conjunction with partners such as the A Regional Collaboration for Health (ARCH) programme and the development of Pentre Arwel.

The paragraphs below summarise the work of the group in 2023/24.

Agenda, papers and minutes are available on the Health Board website: [Strategic Development and Operational Delivery Committee \(SDODC\)](#)

During 2023/24, the following reports were received by the Committee:

Performance

Targeted Intervention Update

The HDdUHB is under Targeted Intervention (TI) status and the Peer Review of Planning Arrangements undertaken in HDdUHB March 2023 and presented to SDODC on 26 June 2023, has been consolidated with wider/previous reports including Audit Wales Structured Assessments; Annual Planning Cycle (NHS Wales Planning Framework); the KPMG report in relation to financial planning; the Maturity Matrix; and the internal planning Master Actions emanating from the original TI

expectations (including C which centres on the development of a robust planning cycle and D which focuses on clear roles and accountabilities to drive key work streams across the organisation). As a result, multiple, overlapping plans have been eliminated, and the resulting set of actions is monitored and overseen by the Chief Executive's Escalation Steering Group, prior to submission to Welsh Government for approval.

The Health Board is working on developing a Clinical Services Plan that aligns with its operational, financial, and workforce plans. It has established groups across seven service areas and a Steering Group to oversee the programmes of work. It has also set up governance reporting arrangements to track the delivery and timescales of the actions.

HDdUHB has shifted its focus from process to outcomes and delivery and has emphasised the importance of building a relationship with the Welsh Government. It has also implemented a traffic light system to track the progress of the actions and to provide visual clarity and consistency.

The Health Board has identified four key focus areas and six thematic issues that it is addressing as part of its planning improvement journey. These include developing a positive planning culture, a robust planning cycle, operational plans and change management, and a clinical services plan.

Integrated Performance Assurance Report (IPAR)

One of the main areas of focus for the Committee was its bi-monthly IPAR. As a standing agenda item, the report was received at every meeting and provided an overview of the Health Board's performance against the National Delivery measures and key local quality and safety measures. The IPAR confirmed success against the Ministerial priorities for Planned Care, especially in reducing the number of patients waiting more than 36 weeks for treatment. A decline in performance for Urgent and Emergency Care in March 2023 was reported, as well as high levels of concern for four- and 12-hour breaches in August and October 2023, and ambulance handover times in January 2024. The main causes were infection control issues, lack of capacity, delayed discharges, and Reinforced Autoclaved Aerated Concrete (RAAC) issues at Wylabush Hospital (WGH).

An improvement in the single cancer pathway performance was reported from 38% in January 2023 to 47% in February 2023, and 56% in October 2023.

The Committee expressed concern over the main areas of Therapies, including Physiotherapy, Occupational Therapy, Podiatry and Dietetics, where patients were waiting more than 14 weeks for a specific therapy. Also highlighted was the decline in Mental Health, particularly in Psychological Therapy and Neurodevelopmental services.

Additionally, an increase in C-difficile (C.diff) and E-coli infections was reported in September and December 2023, and January 2024, which exceeded the monthly targets and showed concerning variation.

The IPAR provided assurance that the Health Board had exceeded its trajectory of having 2,870 nurses in place by the end of Quarter 4, having 2,955 in post, significantly ahead of the April 2024 target.

Pharmaceutical Needs Assessment:

In April 2023 the Committee reviewed the pharmaceutical services in the Hywel Dda area and noted that all 97 Pharmacies were expected to provide Clinical Community Pharmacy Services (CCPS) by 1 April 2023. The Committee acknowledged minor changes in ownership and opening hours, and the closure of the dispensing service at Solva surgery.

Evaluation of Winter Plan 2022/23

In June 2023 the Committee received the Winter Plan Evaluation 2022/23 report advising that HDdUHB is building community care capacity and investigating the development of a Step Closer to Home Unit where ready to leave patients waiting for care availability are accommodated in a designated ward area within acute and/ or community hospital areas. The 2023/24 plan will scale up and continue to grow the conveyance avoidance pathways within the community, with a focus on care home admissions and providing alternative pathways. Further integration with the local authorities to develop a health and care system for older people and frailty assessment units/ frailty streaming pathways at each acute hospital site will target discharge planning and coordination of frail, complex admissions.

Winter Respiratory Vaccination Programme – Delivery Plan

In August 2023 the Committee received Winter Respiratory Vaccination Programme: Delivery Plan 2023/24 outlining the opportunity to build on the integration, where possible, of the COVID-19 vaccination programme with the existing Flu programme. The report summarised the work underway to mitigate the risk to programme delivery of the proposed approach and provided assurance from the control measures in place through recognition of the key enablers.

Discharge Update Report

In August 2023 the Committee received the Discharge Update Report as a response to an action from Board on 25 May 2023. The report confirmed that concerted efforts had reduced patients in the longer length of stay cohort (three weeks and over), although those individuals remaining in the longer length of stay categories were mainly awaiting capacity beyond hospital stays. At that time, longer stay patients occupied approximately 400 of the 1000 beds within HDdUHB, which is 100 more than pre-pandemic. The Committee expressed concern that the Trusted Assessor scheme was close to being rolled out in Carmarthenshire, but that in Pembrokeshire, the model was still under consideration; and indicated that delays should be escalated to the Chief Executive, Chief Officer meetings and/or the Regional Partnership Board (RPB).

Community and Long-Term Care Quarterly Service Report

The Health Board's Long Term Care Performance Report was presented as a requirement of WG to report to Board on a regular basis. The report highlighted the key issues and performance indicators related to the Long-Term Care service, such as appeals, disputes, retrospective claims, care home occupancy, care at home hours, and Court of Protection cases. The report also provided updates on the new and planned care home developments in the region as follows:

- A reduction in the success rate of claims for Continuing Health Care funding, attributing it to improved assessment accuracy and thorough initial assessments.
- Improvement in the Discharge to Assess pathway, which reduced the referral to assessment time significantly.

The report acknowledged the challenges faced by the care home sector, such as financial sustainability, recruitment and retention of staff, and the impact of the cost-of-living crisis.

Review of Clinical Pharmacy Services at NHS Hospitals in Wales

The Review of Clinical Pharmacy Services at NHS Hospitals in Wales provided in December 2023 provided assurance from the Pharmacy and Medicines Management Directorate on the redesign of its service models and practices to meet WG recommendations; also, from the Vision for pharmacy services, supporting wider engagement and integration of pharmacy services within the HDdUHB to realise the benefits that clinical pharmacy can provide. The report highlighted WG Recommendation 11 which states that: new service developments or service redesign of hospitals must consider the clinical and technician pharmacy service from the outset.

Capital Sub-Committee

Capital Sub-Committee submits update reports to every SDODC alongside reports on the Discretionary Capital Programme (DCP) 2023/24. The following were highlighted:

- In April 2023 an amendment to the Capital Sub-Committee Terms of Reference relating to the way risk is reported was proposed and approved. The Committee requested that 'post-project evaluation' was included in the terms of reference in view of the fact that this was a requirement following a governance review earlier in the year.
- In June 2023 the Committee received a copy of the infrastructure enabling plan. The Committee noted the pressure on the current year's contingency allocation, arising from the requirement to underwrite the cost of the WGH Phase 1 Fire Works until July; and that no orders for works associated with the Estates Funding Advisory Board (EFAB) scheme will be placed until the availability of WG capital funding is clear; also that some items were delayed until later in the year or possibly next year. The Committee requested assurance that the Mid and West Wales Fire Service is informed of all developments, in particular any delays/ extensions.
- In August 2023 the Committee received reports confirming that WG funding totalling £6.4m to support the Fire Schemes overspend and £12.8m in support of the RAAC works, both at WGH had been approved. In light of the funding allocation and the subsequent recovery of the contingency, paused/delayed schemes would be reviewed, and the Corporate Risk Register updated accordingly.
- In October 2023 the Committee received details of the project closure and lessons learned exercise related to the Prince Philip Hospital (PPH) Day Surgery Unit; and the submission of a £1.8m bid to Welsh Government for diagnostic equipment replacement. The Committee was also advised of the receipt of funding for the WGH Fire Schemes and associated remedial works, allowing the reinstatement of previously deferred projects.
- In December 2023 the Committee received reports detailing the following:
 - A risk associated with Glangwili Hospital (GGH) Fire precaution works, the latest cost reports indicated this scheme was likely to be in an overspend position in the next financial year; and that the contingency reserve remained under pressure with the balance in the reserve standing at £0.2m;
 - WG had allocated an initial £1.3m to the Health Board, subject to confirmation that items could be delivered by 31 March 2024; Bids submitted for ED schemes across all four sites were approved by WG in the sum of £400k to be used by 31 March 2024, for items such as

purchase of beverage and food trolleys; minor refurbishment of toilet areas; and reinstating of storerooms.

- In February 2024 the Committee received reports advising that:
 - additional allocations from WG amounting to almost £4m had been received, allowing investment in equipment and digital backlog. Any orders in excess of £0.5m would require endorsement by SDODC prior to ratification by Board;
 - Amendments to the list submitted to WG will be necessary due to deliverability issues by 31 March 2024. Additionally, late allocation of capital raised increased risk, potentially requiring some items to be vested or bonded off-site by 31 March 2024.
 - The development and allocation of the DCP for 2024-2025 amounting to £7.421m, considered by Capital Sub-Committee and approved by the Executive team on 21 February 2024.
 - The Chemotherapy Day Unit in Bronglais Hospital (BGH) was over budget and the scope is being revised to reduce costs.
 - The Septic Scheme was delayed until Summer 2026.
 - The initial investment from WG for RAAC is on plan and ongoing costs for inspections are expected. Structural engineers will provide more information which may indicate that future work on RAAC will be necessary.

Business Justification Case for Phase 2 of Fire Enforcement Notices and Letters of Fire Safety Matters (LoFSMs)

The Business Justification Case for Phase 2 of Fire Enforcement Notices and Letters of Fire Safety at Withybush Hospital was received by the Committee in February 2024 and indicated a reduced scope of £23.743m after a joint review with WG, Fire Safety Advisors and Mid and West Wales Fire and Rescue Service (MWWFRS). The report advised the potential delay due to WG Performance Scrutiny Committee's review of alternative delivery methods, the overlap between Phase 2 and RAAC management, and the ongoing collaboration with clinical teams to ensure fire safety and inspection regimes for RAAC.

Planning

Integrated Medium Term Plan (IMTP) 2023/24 - 2024/25

The Committee received updates to the IMTP in December 2023 and February 2024, and considered the steps taken to develop the 2024/25 Plan to enhance document consistency, align the clinical strategy with the IMTP, develop financial and workforce sustainability, and improve engagement and communication with stakeholders. Assurance was provided by the steps taken in the development of the Plan for 2024/25 based on three key pillars: meeting the Ministerial Priorities for reducing long waits and improving access to services; aligning with the planning objectives set by WG; and achieving a balanced financial position.

Planning Objectives Closure Report Q4 2022/23:

In April 2023 the Committee reviewed the progress of the Planning Objectives aligned to SDODC, three had been completed, two were ahead of plan, six were behind plan and 27 were on track. The Committee was advised that 2022/23 POs would continue into 2023/24 and had been reviewed and collated into more concise POs with clear and close alignment to each other and to the Ministerial priorities and the Health Board's strategic plan.

Quarterly Annual Plan Monitoring Returns and Planning Objective Update

The Committee regularly received assurance on the current progress with Planning Objectives which are aligned with one of four Board Committees.

Strategic Outline Case: A Healthier Mid and West Wales (AHMWW) (Land)

In April 2023 the Committee was informed that WG did not receive any bids for the tender for the appointment of a review team, which delayed the Clinical Services Review.

It was subsequently reported in June 2023 that the public consultation had closed, and the process of conscientious consideration was underway. Also, that technical work and commercial discussions in support of the land selection process were ongoing. The Committee received an update report in August 2023 on the Clinical Strategy Review and WG Infrastructure Investment Board (IIB) and the likely Programme Business Case (PBC) endorsement timeline, alongside the progress on the Strategic Outline Case (SOC). The necessity for scrutiny and alignment of governance processes in the Transformation and Digital Programmes alongside the Social Care model was highlighted.

In October 2023 the Committee was awaiting formal feedback on the Clinical Model Review and IIB, which was anticipated would lead to Programme Business Case (PBC) endorsement. The Committee was advised of the progress being made on the Strategic Outline Case (SOC) and the risk to timelines associated with the need to address any additional requirements emerging from the clinical model review and formal IIB feedback.

The Committee discussed a report outlining the status of the current programme of work in relation to the PBC and SOC in December 2023. It was also advised of the following:

- Receipt of correspondence from the Deputy Chief Executive NHS Wales and the work underway to clarify the likely resource and timeline implications for key programme activities.
- Receipt of the draft Nuffield Trust Review of the Health Board's Clinical Model and that clarification has been sought in relation to the finalisation of this report.
- Completion of the Programme Assessment Review (PAR) and the Amber status achieved.
- There may be implications for the Principal Risk 1196, which will be subject to further review.

In February 2024 the Committee received a report outlining the following:

- The approach being adopted to address the next steps required by WG as set out in their correspondence of the 18 December 2023.
- Liaison will be required on communications relating to the Nuffield Trust review on receipt of the final report.
- The work required to present to IIB the actions taken or required in relation to the report's recommendations.

Sexual Assault Referral Centre (SARC)

The Committee received the SARC Project Update report in June 2023, outlining progress on the SARC Business Justification Case (BJC) and supported presentation to Board on 27 July 2023 when the internal scrutiny of the BJC was complete.

Deep Dives:

- **PO3a – Transforming Urgent and Emergency Care Programme (TUEC)**

The Committee received and considered reports in June and October 2023 and February 2024 which highlighted the challenges of managing frail adults with complex needs, the improvement in ambulance handover waiting times, and the progress on Same Day Emergency Care (SDEC) and Pathways of Care. The Committee was advised that assessment delays accounted for approximately 50% of the reasons for Pathways of Care delays each month. Despite efforts to mitigate these challenges, issues with resource allocation, including sickness and lack of social work resources, were noted. It was also reported that 44 bed efficiencies had been delivered on 31 December 2023 against a target of 91 at the end of 2023/24. The Committee regularly discussed the funding challenge and the need to demonstrate programme benefits and integration.

- **PO4a - Planned Care and Cancer Recovery**

The Committee received and considered reports in August and December 2023 highlighting plans and progress of the Planned Care and Cancer Recovery programmes, which aimed to reduce the waiting times and backlogs of patients in the context of the pandemic and the financial constraints. The Committee was advised that HDdUHB follows-up on a lower proportion of its population, circa 16%/17% compared to circa 30% in other Health Boards, which is important in terms of the volume of patients discharged following their outpatient appointments. The success of the SOS (See on Symptom) and PIFU (Patient Initiated Follow-Up) approaches have positively impacted outpatient volumes which are now above pre-pandemic level with follow-up activity being circa 30% lower than pre-pandemic level. The resultant available capacity has been used for new patient activity which is also making good progress and demonstrates the success of the secondary care model. The Committee was informed of progress achieved to reduce the volume of cancer patients in the 62 Day+ backlog and the risks to further recovery progress during the remainder of 2023/24 in the absence of additional supporting resource.

In August 2023 the Committee was advised that HDdUHB's planned care recovery is amongst the best in Wales with the best comparative numbers at milestone stage at 31 December 2022 and success in achieving the Ministerial priorities for 52 weeks, 104 weeks and for the total pathway. The Committee was also advised that regional work is being undertaken with Swansea Bay University Health Board (SBUHB) around Orthopaedics and a Memorandum of Agreement requires formal HDdUHB approval and provision of a governance structure and framework to support a regional orthopaedic model.

- **PO4b – Regional Diagnostics Plan**

In February 2024 the regional Diagnostics Plan provided an overview of the A Regional Collaboration for Health (ARCH) initiative and the ongoing work in regional Pathology, Endoscopy, Radiology, and Neurophysiology services. The Committee considered the challenges and risks of ARCH, such as aligning its programme with individual Health Board diagnostic strategies, clarifying its role in regional planning, engaging smaller departments, and overcoming the hiatus in the programme's progress; and suggested that a more agile and focused regional delivery team may be more appropriate for ARCH, with the associated potential barriers and benefits of having a coordinated regional approach to diagnostics.

- **PO4c – Mental Health Recovery Plan**

The Committee received updates on the Mental Health recovery Plan in October 2023 and February 2024, indicating the progress and challenges of the Mental Health and Learning Disabilities Directorate in delivering its planning objective 4c, which aimed to provide a holistic and integrated mental health service across the life span and the care pathway.

The Committee acknowledged the positive performance of the Health Board in meeting the targets for the Mental Health Measure, and the success of the 111 Option 2 project, which provided a 24/7 helpline for mental health support. However, the Committee expressed concerns about the dementia pathway, the lack of access to geriatricians and mental health assessments for patients, and the delays in developing the autism spectrum disorder service. The Committee considered the need for change in Adult Services, especially in achieving consistency and seven-day working across the Operational Care Pathway.

- **PO6a - Clinical Services Plan**

The Committee received updates on the progress and status of the Clinical Services Plan in August and December 2023 and February 2024, which advised that work was underway, in collaboration with the Consultation Institute, to provide a comprehensive and integrated service for the region. The Committee was advised in February 2024 that ongoing work on refining the methodology for Phase 2 of the Plan was progressing well and remained on track.

- **PO7a – Population Health**

In April 2023 the Committee received an early draft of the Population Health Improvement and Wellbeing Plan, setting out the vision for the next three years with focus on behaviours and lifestyles with an associated action plan connecting all priority areas. Key lifestyle factors were the leading causes of preventable ill health and early death, such as, drugs, alcohol, BMI, smoking and blood pressure and highlighted the rationale behind the strategy to tackle lifestyle approaches. The scope of the project was broad with focus on prevention, recognised the national strategy and acknowledged the wider health and wellbeing agenda with a requirement to demonstrate the impact on the population in terms of the value-based healthcare approach. The Committee discussed engagement, noting the range of actions around targeting those in the most socially economic deprived areas, in low-income professions, from urban communities; there appeared to be general agreement that the targeted approach is more appropriate. Digital engagement would be incorporated into the plan, including the development of a health improvement and wellbeing app which will provide access to healthy lifestyle advice, various health-related services with the ability to make appointments and referrals, supporting resources for self-help and healthy life-style advice and the development of animations around key aspects of the strategy which will help engage with certain target groups.

In February 2024 the Committee received and considered the report on the well-being assessment of Primary Care Networks and the progress made in various strategic areas of population health, such as vaccination, smoking cessation, healthy weights, and emotional well-being. The Committee commended the initiative to distribute Naloxone, a medication that reverses opioid overdoses, to police officers, which has saved nine lives, and noted that Public Health colleagues were expanding their approach to understanding overdoses and near

fatal overdoses. The Committee raised concerns about a series of suicides in the Carmarthen area and the need for a more rigorous needs assessment. The Committee also identified a need to develop a framework that can quantify the prevention of demand and demonstrate the potential cost savings associated with Public Health initiatives, such as Smoking Cessation programmes. The importance of a tailored approach to assessing the impact of Public Health interventions was highlighted, taking into account the specific needs and challenges of the community and the long-term benefits of preventative measures.

- **PO7c - Social Model**

In December 2023 the Committee received the PO 7C: Social Model for Health and Wellbeing (SMfHW) report regarding progress made to deliver Planning Objective 7C and the proposed direction of travel for future work. It noted that HDdUHB has adopted the social model as part of its strategic framework and aims to work with partners and communities to address the wider determinants of health and reduce health inequalities.

Strategies:

- **Stroke**

In June 2023 the Committee considered the Comprehensive Regional Stroke Centre (CRSC) Business Case and the impact on the Carmarthenshire Stroke Pathway; and the requirements for redesign and investment set out in the Assessment of the Stroke Pathway in Carmarthenshire paper,

- **Dementia**

In October 2023 the Committee received and considered the Dementia Strategy report, which provided assurance on the status of the Regional Dementia Strategy and Programme, and the governance and plans in place to assure its delivery in line with the All-Wales Dementia Care Pathway of Standards. The Committee noted the importance of prevention in dementia care.

- **Palliative Care**

In October 2023 the Committee received and considered the progress to date regarding the implementation of the Palliative and End of Life Care Principles (PEOLC) strategy and considered efforts to establish coordination between the three counties teams, and to align the service.

- **Estates Property**

The Committee received and considered the Estates Property Strategy in October 2023, noting the work undertaken by the Health Board in providing regular submissions to Welsh Government to obtain urgent funding to manage key Estate risks; the current status of these submissions to Welsh Government; and the significant Estate risk currently being managed.

- **Primary and Community Services Strategy**

In December 2023 the Committee received and considered the Primary and Community Services Strategy, which outlined progress made to date.

Wellbeing of Future Generations Act Annual Report:

In October 2023 the Committee recommended for publication HDdUHB's Well-being Objectives Annual Report for the period 1 April 2022 – 31 March 2023; and the

existing eight Well-being Objectives as continuing to be relevant to the Health Board for the next five-year period, aligning with the Public Services Boards (PSB) Well-being Plan cycle.

Reinforced Autoclave Aerated Concrete (RAAC) Planks

During the period August to December 2023 the Committee was informed of the actions taken to deal with the presence of RAAC, a material that poses a risk of structural collapse, in some areas of Withybush and Bronglais Hospitals. The Committee was advised of the ongoing surveys, costs involved, and the support funding from Welsh Government. The Committee was also notified that WG had requested a further survey for RAAC planks within the wider portfolio of the Health Board's estate, including community and primary care sites. This work is currently out to tender.

Planning in Partnership

Regional Integration Fund Update

In December 2023 the Committee noted the contents of the Regional Integration Fund Summary report and the challenge of tapering funding, which requires increasing match funding from partners over time. WG had suspended tapering for 2023, but the decision for the next year is pending.

Ophthalmology performance: Getting It Right First Time (GIRFT)

In February 2024 the Committee received assurance from the progress and plans of the Ophthalmology service in implementing the GIRFT recommendations, which include streamlining cataract documentation and pre-assessment; expanding capacity through Amman Valley Hospital theatres; training Speciality and Specialist (SAS) doctors; working collaboratively with Swansea Bay University Health Board (SBUHB) consultants on the Glaucoma pathway; and introducing virtual pathways and enhanced community care. The Committee was advised that Hywel Dda University Health Board (HDdUHB) has established regular Quality and Safety meetings, a weekly GIRFT Task and Finish group, and a new management structure to support the implementation of the recommendations. It was also advised that the WG GIRFT team and the internal mechanisms are involved in monitoring progress and that there is a corporate risk included on the Risk Register regarding Ophthalmology service delivery. The Committee acknowledged the challenges with recruitment, county coverage, and contract reform for the Ophthalmology service, and the plans to address them through the regional programme and Ophthalmology Diagnostic and Treatment Centre (ODTC) pathway development. A further update to the Committee would be provided in four months' time with it noted that the update was only against a number of the recommendations and not the full report.

ARCH Update

The Committee received regular update reports in June October and December 2023 regarding regional discussions and the ARCH portfolio, which is a collaboration between HDdUHB, SBUHB, and Swansea University to improve health and well-being in the region.

Pentre Awel (Llanelli Wellness Centre)

The Committee regular updates in April, August December 2023 on the progress and challenges of the Pentre Awel project, which is a wellbeing centre in Llanelli that involves the Health Board, Carmarthenshire County Council, and Swansea University. The Health Board is in close dialogue with Carmarthenshire County

Council regarding the single floor space the Health Board wishes to utilise; a similar review will be undertaken for clinical space requirements. Liaison work between the Health Board and Swansea University will be pursued in order that the organisations work together to complement each other and ensure alignment.

Public Services Board (PSB) Well-Being Assessments (Well-Being of Future Generations (Wales) Act 2015 (WBFGA))

The Update on Well-being Plans: Carmarthenshire, Pembrokeshire and Ceredigion provided in February 2024 outlined progress on the Well-being Assessments undertaken in 2022 which aimed to address the needs and priorities of the communities in the region. The Committee considered the future of the Regional Partnership Board (RPB), which may face funding challenges while needing to build capacity and address regional impacts; acknowledged the challenges of measuring the practical outcomes of the PSBs; and the need for a regional framework to align the priorities and prevention agendas of the three counties.

Governance

Self-Assessment of Committee Effectiveness: Process

In June 2023 the Committee took assurance from the refreshed approach to the Annual Report and Self-Assessment process for 2023/24, noting that the updated version had been trialled by the Quality, Safety and Experience Committee (QSEC) prior to being adopted by the remaining committees.

Self-Assessment Timelines

In December 2023 the Committee received the Self-Assessment Timelines report which indicated that during the week commencing 5 February 2024 all Committee members and attendees would receive a short digital form for completion within two weeks. Survey responses would be collated, along with feedback captured through the preceding 12 months; and on 18 March 2024, a facilitated workshop had been arranged to discuss the feedback from the above and develop a workplan to be taken forward. The outcome report would then be presented to SDODC on 25 April 2024.

Escalation Areas

The escalation areas were identified as the year progressed through discussions of the Integrated Performance Report, Risk Register and Board Assurance Framework.

April 2023:

- Annual Plan 2023/24: In terms of the clarity required in order that WG can approve.
- Clinical Services Review: In terms of the impact on the timeline, given the unsuccessful tender exercise to appoint a review team.
- RAAC Planks: In terms of the potential additional spend.

June 2023:

- Capital constraints linked to the RAAC position.

August 2023:

- Lack of Ophthalmology capacity and the risk to the service
- Discharge update report and associated concerns, particularly in light of the Health Board's request for Mutual Aid; and the lack of progress with a Trusted Assessor model in Pembrokeshire and the subsequent delayed recruitment

- Necessity for scrutiny and alignment of governance processes in the Transformation and Digital Programmes and also the Social Care model
- Performance challenges due to RAAC works.
- Financial Performance and the risk of withdrawal of WG improvement funding up to £6.6m

October 2023:

- Orthopedic waiting times and implications from regional waiting lists
- Costs of delays awaiting a social worker
- Risk to funding of SDEC from April 2024 and certain Mental Health / Learning Disability services
- Estate risks

December 2023:

- Capital prioritisation.
- The Health Board does not yet have a plan to deliver on the target of 99% of (Referral to Treatment (RTT) pathways under two years.

February 2023:

- Ophthalmology Performance: Getting it Right First Time (GIRFT) report: Whilst the Committee received some assurance on progress, a further update was requested at the 27 June 2024 meeting.
- IPAR: No patients waiting from referral to treatment (RTT) over 3 years in all specialties (apart from Orthopaedics) by March 2024. Industrial action may impact performance and delivery of planned RTT within 104 weeks by end of March.
- Regional Diagnostic Plan: Challenges re lack of clarity on regional priorities and the diversion of resources towards individual Health Board approaches were identified as potential barriers to progress.
- Mental Health Recovery Plan: Delay in implementing a multi-referral panel, which aims to streamline the referral process for Mental Health services. This delay, attributed to challenges in agreeing on the right model with LAs, was highlighted as a critical issue, particularly considering recent suicides among young people in the Carmarthen area.

Written Control Documents

The following written control documents were presented and approved by the Committee in 2023/24:

- Strategic Development and Operational Delivery Committee Terms of Reference (June 2023)
- The Capital Sub Committee Terms of Reference (December 2023)
- Publication of HDdUHB's Well-being Objectives Annual Report for the period 1 April 2022 – 31 March 2023. (October 2023)
- The existing eight Well-being Objectives as continuing to be relevant to the Health Board for the next five-year period, aligning with the Public Services Boards (PSB) Well-being Plan cycle. (October 2023)
- DCP - the placing of orders for the additional WG funding received, should they be over the £0.500m threshold for onward ratification to Board. (February 2024)
- DCP - the Capital programme for 2024/25 for onward ratification to Board. (February 2024)

- Business Justification Case for Phase 2 Of Fire Enforcement Notices And Letters Of Fire Safety Matters At Withybush Hospital - the submission of the BJC for Phase 2 FEN's and LoFSMs at WGH to Board for further approval in advance of submission to WG. (February 2024)

Reports received for noting

The Committee received its SDODC Work Programme 2023/24 at each meeting.

Opinion

The Committee is of the opinion that the draft Committee Report 2023/24 is consistent with its role as set out within the Terms of Reference and that there are no matters that the Committee is aware of at this time that have not been disclosed appropriately.