

## TABLE OF ACTIONS

### Strategic Development and Operational Delivery Committee (SDODC) Meeting held on 27<sup>th</sup> June 2022

MINUTE REF	ACTION	LEAD	TIME SCALE	PROGRESS
<b>SDODC (22) 37</b>	<b>Cross Hands Health and Wellbeing Centre</b> To share with Members the outcome of work on the family centre ethos, undertaken with the Family Support Service Manager at Carmarthenshire County Council.	<b>RD</b>	<b>August 2022</b>	<b>Brought Forward:</b> Evaluation of the existing family centres in Llanelli requested and will be shared with Members when available.  Update to be provided for 25 August 2022 SDODC meeting.
<b>SDODC (22) 42</b>	<b>Continuing NHS Healthcare: The National Framework for Implementation in Wales</b> To present the detail of a national performance tool, to the Committee when available.	<b>JP</b>	<b>July/August 2022</b>	<b>Brought Forward:</b> This is a national reporting tool which Welsh Government are developing. An update will be provided to SDODC when available.  Carry forward.
<b>SDODC (22) 49</b>	To pursue with Jo Wilson the appointment to the role of SDODC Vice-Chair following Councillor Gareth John's resignation.	<b>MD/JW</b>	<b>August 2022</b>	Committee memberships have been revised.
<b>SDODC (22) 53</b>	<b>Annual Review of SDODC Terms of Reference</b> To forward to Sally Hurman appropriate wording for the inclusion of an additional paragraph (1.15) in the SDODC Terms of Reference relating to cross-referencing of matters between boards/committees.	<b>JG</b>	<b>August 2022</b>	Wording received 27.6.22.
	To follow up formally the inclusion of an additional paragraph (3.15) in the SDODC Terms of Reference: "Any matters that impact on workforce, education or training should be referred to People Organisational Development and Culture Committee" and renumber following paragraphs as appropriate.	<b>SH</b>	<b>August 2022</b>	Terms of Reference updated and submitted to Board for approval at July 2022 meeting.  <b>Update:</b> Approved at Board on 28 July 2022.

	To follow-up on discussion regarding data accuracy reporting to SDODC.	<b>MD/HT</b>	<b>August 2022</b>	Data accuracy assurance has been agreed and will be an assurance role within the remit of the Sustainable Resources Committee.
	To raise the matter of data accuracy reporting to SDODC with the Sustainable Resources Committee (SRC) and the Audit and Risk Assurance Committee (ARAC) (which should provide assurance to SDODC) and report back to SDODC.	<b>HT</b>	<b>August 2022</b>	As above.
	To build into the SDODC Workplan "Report on Data Accuracy"	<b>SH</b>	<b>August 2022</b>	Forward Planned on SDODC Workplan for October 2022.
	To follow up formally the inclusion in the Terms of Reference, (4) Membership, (4.2) In Attendance Section a representative of the Department of Public Health.	<b>SH</b>	<b>August 2022</b>	Terms of Reference updated and submitted to Board for approval at July 2022 meeting. <b>Update:</b> Approved at Board on 28 July 2022.
<b>SDODC (22) 54</b>	<b>Self-Assessment of Committee Effectiveness: Process</b> To inform the Committee Chairs' meeting of the feedback from SDODC regarding the questionnaire for Self-Assessment of Committee Effectiveness: Process.	<b>MD</b>	<b>August 2022</b>	Complete. <b>Update:</b> Questionnaire circulated to SDODC members 22.8.22 for completion by 31.8.22.
<b>SDODC (22) 56</b>	<b>Operational Risks Allocated to SDODC</b> To update SDODC at the next meeting regarding the review of commissioning and internal organisation in relation to the programme business case.	<b>LD</b>	<b>August 2022</b>	A verbal update will be given at the SDODC meeting on 25 <sup>th</sup> August 2022.
<b>SDODC (22) 57</b>	<b>Integrated Performance Assurance Report</b> To discuss and follow-up with the IPAR team reporting on the 62 days target to show the actual first day of treatment as well as achievements on target.	<b>HT/KJ</b>	<b>August 2022</b>	A meeting with the Cancer Services Delivery Manager and General Manager has been arranged to discuss the action. Carry forward for update.

	To follow-up on discussion, in detail, with regard to data for cancer wait times.	<b>AL/KJ</b>	<b>August 2022</b>	Discussions commenced, detailed follow-up meeting to be scheduled following summer leave. Carry forward for update.
	To discuss with Mr Gareth Skye possibilities around transport/volunteer driver options in connection with patients' needs for transport to attend appointments and report back to SDODC.	<b>HT</b>	<b>August 2022</b>	Keith Jones/Gareth Skye to discuss upon GS return from leave. Carry forward for update.
	To pursue with Mandy Rayani, Director of Nursing, Quality and Patient Experience, for consideration by QSEC, the waiting times for therapies (with the exception of dietetics and audiology services) which are failing to meet targets in order to better understand the multifactorial drivers of acuity.	<b>HT</b>	<b>August 2022</b>	A meeting is being arranged with Mandy Rayani and the Head of Therapies to discuss. Carry forward for update.
	To pursue with Ms Carroll the report on three indicators from mental health and learning disability which was discussed at Board Seminar on 16 <sup>th</sup> June 2022 and report back to SDODC at the October 2022 meeting.	<b>MD/LC/ SH</b>	<b>August 2022</b>	Forward Planned on SDODC Workplan for October 2022.
	To incorporate into the SDODC Workplan for the October 2022 meeting 'Mental Health and Learning Disability Indicators', the report for which would be provided by Mr L Davies (as above).	<b>SH</b>	<b>August 2022</b>	Included in Workplan for October 2022 meeting within performance.
<b>SDODC (22) 58</b>	<b>Recovery Planning Report (Post-Lightfoot)</b> To share the refreshed model of the requirements of all elements required to achieve the 52 weeks/104 weeks targets and which take into account and show the variations to those requirements and any mitigating factors which show performance against targets.	<b>LD</b>	<b>August 2022</b>	This data is already included within the Integrated Performance Assurance Report.
	To speak with Mr Lance Reed, Clinical Director of Therapies, regarding therapy waiting lists and additional circumstances that have impacted over	<b>AS</b>	<b>August 2022</b>	See below.

	the last six months or so and the action taken to mitigate and achieve pre-COVID-19 wait times and report back to SDODC.			
<b>SDODC (22) 62</b>	To extend SDODC's thanks to Dr Daniel Warm for the quality of his report on Planning Objectives.	<b>LD</b>	<b>July 2022</b>	Complete.
<b>SDODC (22) 63</b>	To extend SDODC's thanks to the Discretionary Capital Programme team for their work on the programme.	<b>PW</b>	<b>July 2022</b>	Complete.
<b>SDODC (22)65</b>	<b>Capital Sub-Committee Update Report</b> To include 'Vesting Arrangements' in future Discretionary Capital Programme reports to SDODC and SRC.	<b>HT</b>	<b>August 2022</b>	This will be included in future reports where vesting arrangements are put in place.
<b>SDODC (22) 67</b>	<b>SDODC Workplan</b> To review the SDODC Workplan to ensure all planning objectives aligned to SDODC are recorded for scrutiny and reporting.	<b>MD/LD/ SH</b>	<b>August 2022</b>	All planning objectives added to Workplan.
<b>SDODC (22) 68</b>	<b>Any Other Business – Next Meeting</b> To make a decision at the next agenda setting meeting (5 July 2022) as to whether the next SDODC meeting (25 August 2022) should be remote or hybrid of remote/in person.	<b>MD</b>	<b>5 July 2022</b>	Confirmed that the next meeting to be held on 25 August 2022 will be remote via Teams.
<b>SDODC (22) 69</b>	<b>Matters for Escalation to Board</b> To escalate relevant matters to the Board at the meeting on 28 July 2022.	<b>MD</b>	<b>28 July 2022</b>	Board updated submitted to Board 28 July 2022 meeting.

<b>SDODC (22) 58</b>	All therapy referrals continue to be triaged and identified as urgent or routine, with prioritisation given to Urgent patients. Referral rates into therapy services have normalised back to pre-pandemic levels, and all services have returned their urgent and routine services to pre-COVID-19 levels of activity. Reported increased complexity of referrals, due to delayed access to routine service provision during COVID-19 pandemic, are resulting in a shift for increased Urgent appointments with a resultant shift in reduced availability of Routine appointments thus increasing waiting times. Significant staffing deficits continue to impact upon capacity within key areas of Paediatric Occupational Therapy, MSK Physiotherapy and Weight Management and Eating Disorders in Dietetics.
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All services are reviewing their demand and capacity plans and adjusting recovery trajectories accordingly in line with staffing availability and recruitment plans. This also includes utilisation of additional hours for existing staff, sourcing agency to provide additional capacity, and over establishment of staffing levels within challenged areas where recruitment is possible. Streamlined Band 5 graduate Therapists are due to commence taking upon posts during August and September , and are factored into D&C plans , although the overall number of new graduates joining is 50% lower than commissioned.

Primary risks to recovery trajectories are:

- Staffing availability, recruitment plans and availability of additional capacity via additional hours and agency, Paediatric Occupational Therapy, MSK Physiotherapy (Pembs) and Weight Management and Eating Disorders in Dietetics.
- Continued increase in urgent referral prioritisation requirements and resultant reduction in routine appointment reducing routine capacity
- Environmental issues relating to loss of clinical accommodation and reduction of clinical capacity.

**Lance Reed**

Clinical Director of Therapy Services

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