



**CYFARFOD BWRDD PRIFYSGOL IECHYD
STRATEGIC DEVELOPMENT AND OPERATIONAL DELIVERY COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	27 February 2025
TEITL YR ADRODDIAD: TITLE OF REPORT:	Update on the 2024/25 Planning Objectives and the Annual Plan for 2025/26
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lee Davies, Executive Director of Strategy and Planning
SWYDDOG ADRODD: REPORTING OFFICER:	Shaun Ayres, Deputy Director of Operational Planning and Commissioning / Programme Director for Targeted Intervention Daniel Warm, Head of Planning

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

This report provides the Committee with an update on the seven Planning Objectives (PO) aligned to SDODC as part of the 2024/25 Annual Plan. The paper also provides an overview of our progress in developing the 2025/26 Annual Plan.

Cefndir / Background

The Annual Plan for 2024/25 was built around 10 Planning Objectives (which in themselves are aligned to Ministerial and Local Priorities) and, within this, the de-escalation of our Targeted Intervention (TI) status (across six critical domains: Finance, Strategy and Planning; Performance and Outcomes; Fragile Services; Governance; Leadership, Capability and Culture; and Quality of Care).

The POs set out the aims of the organisation, *i.e.* the horizon that HDdUHB is driving towards over the long term, as well as a set of specific, measurable actions, which move the organisation towards that horizon over the next year. For 2024/25, seven Planning Objectives were aligned to the Strategic Development and Operational Delivery Committee (SDODC), namely:

- PO3: Transforming urgent and emergency care
- PO4: Planned care, diagnostics and cancer
- PO5: Mental health and CAHMS
- PO6: Clinical services plan
- PO7: Primary and community strategic plan
- PO8: Estates plans
- PO10: Population health

2025/26 Annual Plan

The plan for 2025/26 will continue this approach and structure, aiming to meet the TI requirements across the six domains and respond to the WG expectations within the NHS Wales Planning Framework (as set out in the letters of the 20 December 2024 from the

Cabinet Secretary for Health and Social Care and the NHS Wales Chief Executive). The Framework identifies the ministerial priorities as:

- Timely access to care
- Population health and prevention
- Building community capacity
- Mental health access
- Women's health

HDdUHBs Annual Plan for 2025/26 has been developed through an iterative, collaborative approach, reflecting both immediate operational needs and longer-term service transformation. This planning cycle sits within a three-year strategic context, recognising that many challenges particularly those requiring major workforce or estate reconfigurations cannot be definitively addressed in a single year. The Health Board has recognised that we are not yet at the stage where a financially balanced Integrated Medium Term Plan (IMTP) would be possible, so this approach demonstrates progress as an organisation whilst working towards an IMTP.

1. Alignment with Welsh Government Frameworks

- The Welsh Government's Planning and Performance Framework for 2025–2028 underpins the Board's priorities. The Health Board has mapped each proposed initiative to these national objectives covering timely access, quality improvement, and population health ensuring that near-term actions also support sustainable service transformation. It is important to note, that whilst Targeted Intervention criterion remain the key focus, not all aspects of the latest frameworks are reflected in Targeted intervention.

2. Focus on Short-Term Impact and Long-Term Sustainability

- In response to current pressures (e.g. waiting times, capacity constraints), directorates have formulated proposed interventions designed to deliver tangible benefits in 2025/26. These include process improvements, targeted recruitment, or temporary solutions such as outsourcing or insourcing.
- Longer-term aspirations include the shift towards population health, primary care and community and the Health Board's Clinical Services Plan (CSP) and an upcoming strategic refresh, ensuring that any major transformation is informed by appropriate consultation and engagement.

3. Targeted Intervention (TI) Context

- 2025/26 marks the second year of the Health Board's multi-year journey to meet its Targeted Intervention (TI) requirements. Consequently, the plan emphasises deliverable, high-impact actions that drive performance improvements across key domains, from reducing waiting lists to streamlining emergency care pathways.

4. Governance and Engagement

- Where a proposal might necessitate significant changes to service location or configuration, the Board will undertake an EQIA and the appropriate staff and public engagement.

5. Robust Corporate Oversight

- Throughout the plan's development, corporate teams (Planning, Finance, Workforce) have worked closely with operational leads/teams to collectively validate and work through assumptions, align resource requirements, and ensure each proposal is set against realistic baselines. Key forums such as the IQFPD, Business Executive Team and Directorate Improving Together sessions provide continuous review and challenge, preventing duplication and maintaining strategic coherence.

In essence, the 2025/26 Annual Plan supports a balance between short-term deliverability (to address urgent capacity and performance issues) and a multi-year vision (to enable substantive, sustainable changes in line with the Clinical Services Plan and the strategic refresh).

Asesiad / Assessment

The overarching status of the seven POs aligned to SDODC are as per the table below:

Planning Objective	Executive Lead	Current Status
PO3: Transforming urgent and emergency care	Director of Operations	On-track
PO4: Planned care, diagnostics and cancer	Director of Operations	Behind
PO5: Mental health and CAHMS	Director of Operations	On-track
PO6: Clinical services plan	Director of Strategy and Planning	On-track
PO7: Primary and community strategic plan	Director of Primary Care, Community and Long-Term Care	On-track
PO8: Estates plan	Director of Strategy and Planning	Behind
PO10: Population health	Director of Public Health	On-track

All POs have separate reports on this Committee agenda, with the exception of PO6 and PO10, and these have highlight reports included in annex 1.

As noted in the January 2025 Board Paper, the actions and milestones for 2025/26 will continue to be tracked through POs and regularly reported to the appropriate Committee. Each PO will also support delivery across the Efficiency, Productivity and Value themes - people, place, enablers, quality, value and outcomes, and clinical service models.

Assessment and Alignment of the 25/26 Planning Process and Next Steps

The finalised 2025/26 Annual Plan will demonstrate significant preparation across all service areas, underpinned by both corporate and operational scrutiny. The following key themes illustrate how the plan is positioned to deliver meaningful outcomes in the immediate term while laying foundations for longer-term transformation.

1. Collaborative and Iterative Review

- **Extensive Feedback Cycles:** Directorates have iteratively refined their proposals in response to targeted feedback from corporate teams and through structured governance routes. This has involved clarifying demand and capacity (D&C) assumptions, providing detailed risk assessments, and articulating how each project's baseline activity will be monitored.
- **Check-and-Challenge Sessions:** Regular check-and-challenge forums encompassing planning, finance, and workforce leads have helped to maintain a realistic lens on deliverability. Where workforce pipelines are uncertain or estates work is pending, plans have built in interim measures (e.g. additional insourcing, Estate moves) so that performance can be maintained while longer-term solutions take shape.

2. Strategic Alignment and TI Focus

- **Integration with Welsh Government Metrics** - Every proposed action has been mapped against the Welsh Government's performance framework to ensure efforts around waiting times, unscheduled care, and population health align with national expectations. However, there is a clear recognition that many of the targets are in excess of the TI criterion which in some cases the Health Board has been unable to achieve this year, such as Ambulance Handovers.
- **Targeted Intervention Delivery:** Acknowledging the criticality of making tangible progress in this second TI year, directorates have prioritised high-impact schemes such as enhanced diagnostic capacity and patient-flow optimisations that can evidence early gains in patient access and quality outcomes.

3. Balancing Immediate Solutions with Sustainable Change

- **Short-Term Operational Gains:** A range of proposals rely on bridging strategies (e.g. outsourcing planned care, utilising locums, or insourcing specific diagnostics) to manage acute pressures. These are clearly framed as temporary relief measures, preventing performance deterioration as we transition to more permanent approaches. Furthermore, building on regional plans and priorities is also a key focus in the 25/26 annual plan, especially around Orthopaedics and Ophthalmology.
- **Longer-Term Vision:** Complex service redesigns, multi-year recruitment drives, and potential estate developments are earmarked for continued exploration under the Clinical Services Plan or the forthcoming strategic refresh. This two-track approach; practical fixes now, deeper reconfigurations later ensures we do not overpromise on solutions that require formal consultation or extensive capital investment.

4. Governance Pathways and Accountability

- **IQFPD, Business Executive and Directorate Improving Together:** These forums have consistently provided oversight on financial viability, workforce feasibility, and operational coherence, filtering out proposals that lack a robust evidence base. Each endorsed scheme comes with clear accountability for delivery, including milestone tracking and built-in escalation routes.
- **Monitoring and Adaptation:** Thanks to performance dashboards and watchtower sessions, the interventions the teams are putting forward can promptly identify whether initiatives are meeting their stated objectives e.g., reduction in waiting times, improved ED flow allowing for mid-course adjustments (remedial actions) if certain solutions prove unworkable or if workforce issues emerge.

Overall, the 2025/26 Annual Plan is both ambitious and realistic; it addresses pressing service needs while acknowledging that certain larger-scale changes require further statutory processes and strategic development. By clearly distinguishing what can be achieved imminently from what requires longer-term planning, the Health Board is positioned to make tangible gains in performance, quality, and patient experience during 2025/26, while continuing to lay strong foundations for the sustainable transformation of healthcare services in mid and west Wales.

Next Steps

1. Further Scrutiny at Business Executive and Board Seminar (Next Several Weeks)

- **Final Proposed Trajectories:** Over the coming weeks, the Planning Team and service leads will refine and present the proposed trajectories for each key initiative to the Business Executive and Board Seminar (20 February). This includes validating the expected improvements in waiting times, capacity utilisation, and quality outcomes.

- **Deliverability Review:** These forums will assess whether the various short-term schemes remain achievable within 2025/26 resource constraints, focusing on areas such as workforce availability, capital requirements, and the balance between immediate outsourcing/insourcing solutions and in-house development.

2. Clinical Services Plan (CSP) Alignment

- **Identifying Potential CSP Overlaps:** As part of this scrutiny, the Board will determine which initiatives may fall within the scope of the Clinical Services Plan - particularly those requiring significant reconfiguration, formal engagement, or consultation. Any proposal that appears contradictory to CSP intentions will be escalated for further discussion.
- **Timelines and Possible Accelerations:** Where an initiative requires CSP involvement, the Board will explore whether any urgent changes in advance of the CSP timelines might be warranted. This ensures that urgent, high-impact changes are not unduly delayed, while also respecting the rigorous processes and statutory consultation requirements underpinning major service transformations.

3. Preparation for the Board Seminar (20 February)

- **Key Priorities and Plans:** The Board Seminar in late February will serve as a critical forum for discussing the consolidated list of priorities and trajectory data, offering Board members and stakeholders a chance to challenge assumptions, review deliverability, and verify alignment with TI milestones and the Welsh Government's Performance Framework.
- **Ensuring Coherence:** By this stage, any potential conflicts between short-term schemes and longer-term CSP objectives should be clearly outlined, with a clear rationale for proceeding (or deferring) specific proposals.

4. Final Submission and Board Approval (End of March)

- **Board Paper Deadline:** The Health Board's final plan must be prepared for endorsement by the end of February or early March, enabling it to be included in the public Board papers.
- **Ongoing Monitoring Post-Approval:** Following sign-off, the Health Board will transition to implementation and monitoring, using watchtower sessions, Directorate Improving Together forums, and Business Executive updates to track each scheme's performance. Where short-term solutions (e.g. outsourcing) are used, they will be subject to regular review to ensure they remain value-for-money pending any longer-term CSP developments.

This sequence of actions provides a clear route of approval, balancing the urgency of immediate improvements with the overarching need for strategic alignment and legal compliance. By the time the final plan is submitted for Board approval, the organisation will have a cohesive, realistic roadmap for 2025/26 positioned to achieve tangible gains in service performance while setting the foundations for longer-term strategic change.

Argymhelliad / Recommendation

The Committee is asked to:

- **RECEIVE ASSURANCE** on the current position in regard to the progress of the Planning Objectives aligned to the Strategic Development and Operational Planning Committee, in order to assure the Board that the Planning Objectives are progressing and are on target, and to raise any concerns where a Planning Objectives is identified as behind in its status and/or not achieving against its key deliverables.
- **RECEIVE ASSURANCE** on the steps taken in the development of the Plan for 2025/26

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	2.1 To receive an assurance on delivery against all Planning Objectives aligned to the Committee.
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:	3. Striving to deliver and develop excellent services 4. The best health and wellbeing for our individuals, families and communities 5. Safe sustainable, accessible and kind care
Amcanion Cynllunio Planning Objectives	3 Transforming Urgent and Emergency Care programme 6 Clinical services plan 8 Estates plans 10 Population health
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:	3 Year Plan and Annual Plan Decisions made by the Board since 2017-18 Recent <i>Discover</i> report, published in July 2020 Gold Command requirements for COVID-19 Input from the Executive Team Report presented to Public Board in September 2020
Rhestr Termiau: Glossary of Terms:	Explanation of terms is included within the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Public Board - March 2024 (acceptance of 2024/25 Planning Objectives as part of the 2024/25 Annual Plan) Public Board – January 2025 (overview of the process to develop the 2025/26 Annual Plan)

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Any financial impacts and considerations are identified in the report

Ansawdd / Gofal Claf: Quality / Patient Care:	Any issues are identified in the report
Gweithlu: Workforce:	Any issues are identified in the report
Risg: Risk:	Consideration and focus on risk is inherent within the report. A sound system of internal control helps to ensure any risks are identified, assessed and managed.
Cyfreithiol: Legal:	Any issues are identified in the report
Enw Da: Reputational:	Any issues are identified in the report
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Not applicable



Submitted By: Ben Rogers and Alex Martin, Principal Programme Managers



Date Submitted: 31 January 2025

Planning Objective: 6 – Clinical Services Plan

Executive Lead: Lee Davies/ Mark Henwood

Reporting Period: 19 November 2024 – 31 January 2025

Overall status: On-track

Rationale for overall status: Board approval to proceed to consultation planning in November 2024 and Board endorsement of progress in January 2025.

Progress against planned outcomes / trajectories / milestones:

Since the last update in November 2024 the programme has presented the consultation mandate and project plan to Board on 30 January 2025.

Activities planned for next milestone and reporting period

- Commencement of the detailed consultation planning (pre consultation period)
- Preparation of key consultation documentation
- Reviews of the technical document suite to date within the programme and preparations for submission
- Development of the communications and engagement plan
- Completion of detailed Health Impact Assessments

Any other Comments

Matters for information:

Estate – service configurations to remain deliverable may require recognition and support from site leads as to ensuring space is available in consideration of this Planning objective.

Inter hospital transfer service – this has been identified as a key enabler in several service configurations. A programme of work will need to be considered at a regional level to progress this.

Timeline - A risk has been amended with reference to the timeline with programmes of work running in parallel that may require the same resource to support including Prince Philip (PPH) Minor Injuries Unit (MIU), Primary Care and Community workstreams.

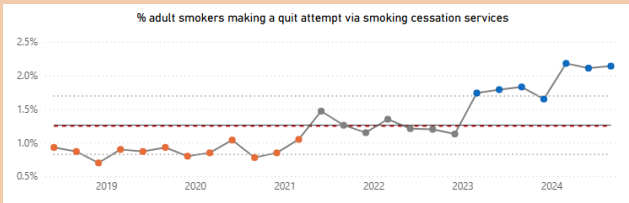
Any other comments: Matters for discussions with consultees will be considered to be contentious in certain service areas. The programme is working with the Communications and Engagement Team to ensure the Consultation is aware of these in order to optimise our communications.

Planning Objective: 10 – Population Health **Executive Lead: Dr Ardiana Gjini, Executive Director of Public Health**

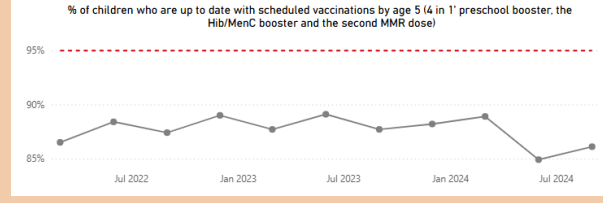
Reporting Period: Quarter 3 – October – December 2024

Overall status: Complete / Ahead / On-track / Behind
Rationale for overall status (please provide a brief summary of current progress indicating any key highlights or potential barriers to delivery)
 Key deliverable actions for reporting period, including those reported in Quarters 1 and 2, are on track. It has been noted these actions are predominantly process driven with clear output which enables the reporting period to indicate as on track. The Directorate is committed to further explore the impact our deliverable actions within the objective are having on population health and actions required to demonstrated further improvement.

Progress against planned outcomes / trajectories / milestones (please provide SPC/data charts and an explanation of any variances):



The latest data is showing improvement. However, improvement actions need to be identified and successfully embedded for the target to be consistently met.
 Expected performance is between 0.8% and 1.7%



Performance for January 2025 was 86.10%

Activities completed in previous reporting period:

- 10.3 Deliver on National Immunisation Framework with a focus on increasing uptake of Measles, Mumps, Rubella (MMR) and seasonal immunisations** – delivery of seasonal influenza (flu) and autumn Covid-19 booster programmes initial offer completed to population eligible groups and healthcare staff, mop up continues. Targeted focus on offer of preschool booster and MMR second dose on low uptake areas mapped against our Welsh Index of Multiple Deprivation (WIMD) areas.
- 10.5 Delivery of Whole Systems Approach to Healthy Weight** - Healthy Weight Oversight Group established. A Mapping Report of the All Wales Weight Management Pathway has been completed identifying gaps and opportunities. Funding Proposals relating to Digital weight management services (L2) and Pwysau Iach Planr Yng Nghymru (PIPYN - Healthy Children Healthy Weight in Wales) PIPYN type intervention programmes drafted for consideration.
- 10.7 Progress the development of the Social Model for Health and Wellbeing** – Working to implement a Creative prescribing programme with grant money received to Arts and Health in conjunction with the Social Innovation Institute
- 10.8 Alcohol and drug use** – tender process formally commenced in October 2024.
- 10.9 Equity in Clinical Service Planning** – frameworks for equity and prevention developed.

Activities planned for next milestone and reporting period:

- 10.3 Deliver on National Immunisation Framework with a focus on increasing uptake of MMR and seasonal immunisations** – delivery of mop up offers for seasonal flu and autumn Covid-19 booster programmes. Target delivery of offer of preschool booster and MMR second dose to low uptake areas within our most deprived communities.
- 10.5 Deliver a Whole System Approach to Healthy Weight** - further develop sub-system areas of focus and agree priority areas for future two years of programme. Explore delivery of weight management digital programmes and Children and Young people (CYP) support programmes.
- 10.7 Progress the development of the Social Model for Health and Wellbeing** – continue development of social innovation with partners.
- 10.8 Alcohol and drug use** – tender process to be finalised.

Any other Comments

Matters for information: Ambition for immunisation improvement identified as 5% improvement of last year’s baseline within a three-year planning cycle– our local ambition therefore would be to achieve 92.6% uptake by 2027 in planned outcome measure for % of children who are up to date with their scheduled immunisations by age 5 years (Annual target for 2025 is 89.7%, target for 2026 is 91.1%).

Risks to delivery: 1884 - Risk of not being able to provide a timely and effective Public Health service due to limited public health Consultant capacity. Risk decreased to 12 due to recent recruitment and