

<b>Enw'r Pwyllgor / Name of Committee</b>	Strategic Development and Operational Delivery Committee (SDODC)
<b>Cadeirydd y Pwyllgor/ Chair of Committee:</b>	Mr Maynard Davies
<b>Cyfnod Adrodd/ Reporting Period:</b>	Meeting held on 26 <sup>th</sup> October 2021
<b>Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:</b>	
<ul style="list-style-type: none"> <li> <p><b>Integrated Performance Assurance Report</b> – The Committee received the Integrated Performance Assurance Report for Hywel Dda University Health Board (HDdUHB) for Month 6 2021/22, noting that from October 2021, the measures within the performance assurance report have been assigned to strategic objectives and reported to the relevant lead committee. Concerns were raised regarding the increasing number of mental health issues amongst young people across HDdUHB with 74.8% of children and young adults waiting over the target of 26 weeks for an assessment. The unplanned care position was also highlighted and in response to queries raised on how the current figures on ambulance response times, handovers and waiting outside hospitals are impacting on patient care, the Committee was assured of the positive work on-going to address these issues, including the Delta Service, the Contact First 111, the new urgent patient care model and the Front Door Turnaround model. Clarity was also requested on how the 62% A&amp;E admission rate across HDdUHB compares with other Health Boards across Wales, and whilst comparative data could be sourced, assurance was provided that the work being undertaken on the Same Day Emergency Care Model with its focus on admission avoidance is showing positive results.</p> </li> <li> <p><b>Planned Care Recovery</b> - The Committee received the Planned Care Recovery report, following a request made at the July 2021 Public Board meeting for a paper to be presented to SDODC outlining modelling data/information relating to Planned Care (including patients waiting &gt;36 weeks for treatments) and the impact of outsourcing certain services. The Committee noted that in terms of waiting lists, 56.2% of patients were waiting less than 26 weeks for treatment, with a total of 31,039 patients waiting more than 36 weeks at September 2021. However, it was emphasised that the waiting list should be considered in its entirety, as WG look at this from a risk stratification basis, and outsourced activity often cannot be used for the more complex patients, particularly complex orthopaedic cases, compromising the Health Board's ability to prioritise care on the basis of clinical need, with longer waits for in-house services. It was suggested that this could potentially be referred to QSEC for further consideration as, from a risk perspective, these patients should be prioritised in-house, however there is very little internal orthopaedic activity that can be undertaken at present given current unscheduled care pressures. The Committee also noted the potential unknown demand and unmet need amongst the HDdUHB population due to the significant reduction in referrals made during the COVID-19 pandemic.</p> </li> <li> <p><b>Report on the Discretionary Capital Programme (DCP) 2021/22</b> – The Committee received the Discretionary Capital Programme (DCP) 2020/2021 &amp; Capital Governance Update report, providing detail relating to the 2021/22 Capital</p> </li> </ul>	

Programme and planned investments, the Capital Schemes Governance update and an update on the funding of COVID-19 costs. The Committee was informed that £4.8m of the total £8.8m WG COVID-19 related funds had been received, of which £600k has been put back into the Discretionary Capital Programme, meaning approximately £1m to reprioritise in year. The Committee was also informed that £12m over 2 years will be received from WG for imaging funding. In terms of capital governance, the Committee noted two projects identified as red status – the Crosshands Health Centre, with work on-going to refresh the Outline Business Case to incorporate updated capital costs which reflect the Decarbonisation Strategy issued by WG, and the Women and Children’s Phase 2 Scheme.

- **A Regional Collaboration for Health (ARCH)** - The Committee received the ARCH Portfolio Update report, highlighting the activities undertaken over the period April to June 2021 and the regional discussions that have taken place between HDdUHB, Swansea University and Swansea Bay University Health Board (SBUHB). The Committee noted the specific pieces of work on-going through the ARCH programme in areas such as dermatology, urology, cardiology and cancer, together with the review and refresh of governance structures to reflect the scale of the work programmes involved and the necessary changes made due to the COVID-19 pandemic, to ensure there is appropriate senior focus on the recovery agenda and to ensure alignment across the two Health Boards to maximise the opportunities available.
- **Planning Objectives Update/Quarterly Annual Plan Monitoring Return (Quarter 2 2021/22)** – The Committee received the Planning Objectives (PO) Update report noting that as part of the Annual Recovery Plan for 2021/22, the Board agreed a refreshed set of Strategic Objectives that set out the aims of the organisation, as well as a set of specific, measurable POs, which move the organisation towards that horizon over the next three years. The report provided an update on the delivery of the twenty seven POs and the six Gold Command instructions aligned to SDODC. The Committee agreed to take the Planning Objective Update and the Quarterly Annual Plan Monitoring Return (Q2) together as there is significant overlap between the papers. The Committee noted that seven actions in the Annual Plan are currently behind schedule for Quarter (Q) 2 (July – September 2021). In terms of PO 1E: *Establish a process to maintain personalised contact with all patients currently waiting for elective care*, the Committee noted significant variations in staffing levels within Patient Experience Teams at each hospital site, resulting in a huge variation in terms of support for patients and requested an update to the next Committee meeting.
- **Developing the IMTP for the Period 2022/23 to 2024/25** – The Committee received the Developing the Integrated Medium Term Plan (IMTP) 2022/2023 and 2024/2025 report, noting that the IMTP is the key planning document for HDdUHB, setting out the milestones and actions being undertaken in the next one to three years in order to progress the HDdUHB strategy. The Committee received assurance that virtually all the draft plans from operational and corporate teams have been received and are being collated for presentation to the Executive Team, with an update to be provided to the Public Board in November 2021. It was noted that the final IMTP is to be submitted to WG by the end of February 2022, for which an extraordinary meeting of the Board may be required for final ratification.

- **Women & Children’s Phase II Project Update** – The Committee received the Women and Children Phase II Project Update report, noting the issues which have led to further delays on the handover of Section 2 and the prolongation of the scheme’s completion. The Committee also received an overview of the continuing risks that need to be managed, including a new risk around the building structure, which could lead to a further delay on timescale due to supply chain issues and may require a small amount of contingency (£0.2m) from next year’s Discretionary Capital Programme which the Committee endorsed.
- **Contact First/Urgent Primary Care Update** – The Committee received the Contact First/Urgent Primary Care Update report, providing an update on HDdUHB’s implementation of Care First and the Urgent Primary Care pathfinder, noting that implementation of Contact First and the Urgent Primary Care pathfinder are key deliverables of Welsh Government (WG) Urgent and Emergency Care Policy Goals. Members were advised of the challenges with staff recruitment and assured of the continued close monitoring of this, together with other mitigating actions and suggested solutions, including the use of the Delta Connect service. Members were also advised of the impact of the roll out of the Same Day Emergency Care model which has been estimated to have avoided 25% of admissions to date.
- **Programme Business Case Position Update** - The Committee received the Programme Business Case (PBC) Position Update – New Urgent and Planned Care Hospital report, noting that work is progressing on the PBC in support of HDdUHB’s Health and Care Strategy “A Healthier Mid and West Wales” in parallel with the work to identify a suitable site for the proposed new Urgent and Planned Care Hospital. The Committee also received an update highlighting the very successful land solution workshop held recently, narrowing down the proposed sites to a shortlist suitable for development taking into consideration access, workforce, logistics and decarbonisation implications.
- **Capital Estates & IM&T Sub-Committee (CE&IM&TSC)** – The Committee received and noted the CE&IM&TSC Update Report for the period August to September 2021.
- **Corporate Risks Allocated to SDODC** – The Committee received the Corporate Risks Assigned to SDODC report, noting the three risks currently aligned to SDODC, with no changes in the risk scores since they were previously reported to the People, Planning and Performance Assurance Committee in June 2021. However, the Executive Team has reviewed Risks 1027 (*Delivery of the Quarter 3/4 Operating Plan - Delivery of integrated community and acute unscheduled care services*) and 1048 (*Risk to the delivery of planned care services set out in the Annual Recovery Plan 2021/22*) and agreed that these would be updated prior to the Board meeting in November 2021. The Committee received assurance that everything possible is being undertaken to direct available resources to urgent cancers, urgent cases and to avoid cancellation or suspension of any cancer work due to the current rise in COVID-19 cases.
- **Operational Risks Allocated to SDODC** - The Committee received the Operational Risk Register report, containing a summary of the two risks, Risk 245 (*Inadequate facilities to store patient records and investment in electronic solution for sustainable solution*) and Risk 1126 (*Women & Children Phase II Project Risk-*

*Directorate, mitigating actions will be done by Capital and Estates Team), which meet the criteria for submission to SDODC. The Committee noted the significant challenges around the storage of physical patient records with solutions both on and off site being sought.*

- **Capital Governance Review** - The Committee received the Capital Governance Review report, produced at the request of the Audit and Risk Assurance Committee, for information given the remit of SDODC relating to capital schemes and governance. It was noted that going forward, the Committee would receive an assurance on the implementation of the recommendations contained within the Action Plan.

**Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd are u cyfer / Matters Requiring Board Level Consideration or Approval:**

None

**Risgiau Allweddol a Materion Pryder /Key Risks and Issues/ Matters of Concern:**

- **Planned Care Recovery** – concerns raised regarding HDdUHB’s inability to outsource more complex work to the independent sector meaning a compromise to the Health Board’s ability to prioritise care on the basis of clinical need, with longer waits for in-house services. Further concerns were raised regarding the unknown demand and unmet need within the HDdUHB population due to the significant reduction in referrals made during the COVID-19 pandemic. Whilst consideration could be given to referring these concerns to the Quality, Safety & Experience Committee, mitigating actions in terms of recent outpatient improvement work, waiting list support and on-going work to support appropriately designed pathways between primary and secondary care facilitated by WG funding were shared with the Committee.
- **Women & Children’s Phase II Project Update** – concerns raised regarding a new risk around the building structure which could lead to further delays on timescale due to supply chain issues and which may require a small amount of contingency (£0.2m) from next year’s Discretionary Capital Programme. This was endorsed by the Committee.
- **Planning Objectives Update/Quarterly Annual Plan Monitoring Return (Quarter 2 2021/22)** - concerns raised regarding PO 1E in terms of the significant variations in staffing levels within Patient Experience Teams at each hospital site, with an update requested to the next Committee meeting from the lead Executive involved.

**Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf / Planned Committee Business for the Next Reporting Period:**

**Adrodd yn y Dyfodol / Future Reporting:**

In addition to the items scheduled to be reviewed as part of the Committee’s work programme, the following items will be reported to the next Committee meeting:

- Developing the IMTP for the Period 2022/23 – 2024/25
- Programme Business Case Position Update
- A Planning in Partnerships section to be introduced on the Committee agenda

**Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:**

15<sup>th</sup> December 2021