



**CYFARFOD BWRDD PRIFYSGOL IECHYD
UNIVERSITY HEALTH BOARD MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	25 May 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Annual Plan 2022/23 - Closure Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lee Davies, Director of Strategy and Planning
SWYDDOG ADRODD: REPORTING OFFICER:	Dr 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**

<p><u>Sefyllfa / Situation</u></p> <p>As part of the Annual Plan for 2022/23, the Board re-affirmed the six Strategic Objectives which set out the aims of the organisation, i.e. the horizon that the Health Board is driving towards over the long term, and agreed a set of specific, measurable Planning Objectives, which move the organisation towards that horizon over the next few years. This report provides an overview regarding progress of the Planning Objectives and acts as a closure report for the Annual Plan 2022/23.</p>
<p><u>Cefndir / Background</u></p> <p>The Planning Objectives were first proposed to Board in September 2020. It was noted that:</p> <p>“The Health Board has made many decisions over the last 3 years – some wide ranging – including a major re-organisation of hospital based services in the south of the Hywel Dda area and a shift towards a “social model of health and wellbeing” and long term community driven prevention focus. Others have related to more specific service issues such as the development of individual services or health care facilities.</p> <p>All of these decisions have moved us towards the future we set out in our main strategy documents published since 2017/18. Until now, however, these accumulated decisions have not been collected together and organised in a way that allows the Board to clearly see whether progress is being made equally on all fronts and identify new opportunities to accelerate us towards those Strategic Objectives.”</p> <p>The Strategic Objectives remain as:</p> <ul style="list-style-type: none"> • SO1 : Putting people at the heart of everything we do • SO2 : Working together to be the best we can be • SO3 : Striving to deliver and develop excellent services • SO4 : The best health and wellbeing for our communities • SO5 : Safe, sustainable, accessible, and kind care • SO6: Sustainable use of resources

The COVID-19 pandemic and our response to it has underlined the need for clarity in setting out what we are trying to achieve, which then allows Executive Directors and their teams to think creatively about how these aims can be achieved. The great sense of empowerment reported by many staff and captured in our Strategic Discovery Report arose from this disciplined approach. The approach set out in this paper has been an attempt to build this way of working into the organisation as a permanent feature of the way we work.

For clarity, the Planning Objectives were arrived at by collating all the organisational objectives and commitments listed in the following sources:

- Three year plan and annual plan
- Decisions made by the Board since 2017-18
- Strategic Discovery Report, published in July 2020
- Gold Command requirements for COVID-19
- Input from Executive Directors

These Strategic Objectives and their aligned Planning Objectives were used to drive the structure and narrative of our 2022/23 Annual Plan, which was submitted to Welsh Government in June 2022.

Each Planning Objective is also aligned to one of the Committees of the Board for assurance, and reports are submitted to each on a regular basis. This reporting is also visible through the Board Assurance Framework.

Asesiad / Assessment

As at the end of March 2023 it was shown that:

- 38 planning objectives had been completed
- 2 were ahead of schedule
- 18 planning objectives remained on track
- 17 were behind schedule, and
- 3 have been deprioritised

The full list of these can be found at Annex 1a.

Based on the learning and progression against the 2022/23 Planning Objectives, a revised set of Planning Objectives for 2023/24 was approved by the Board at its meeting in March 2023 as part of the Annual Plan. Annex 1b provides an overview of the alignment of the 2022/23 Planning Objectives with the 2023/24 Planning Objectives.

To provide context on the progress, each Executive has provided an overview against their own Planning Objectives, which can be found at Annex 2.

Argymhelliad / Recommendation

The Board is asked to take assurance on progress of the 2022/23 Planning Objectives as detailed within the Closure Report.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
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:	Planning Objective update reports to Committees of the Board Board Assurance Framework
Rhestr Termiau: Glossary of Terms:	Not applicable
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Planning Objective update reports to Committees of the Board Board Assurance Framework

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Contained within the report
Ansawdd / Gofal Claf: Quality / Patient Care:	Contained within the report
Gweithlu: Workforce:	Contained within the report

Risg: Risk:	Contained within the report
Cyfreithiol: Legal:	Contained within the report
Enw Da: Reputational:	Contained within the report
Gyfrinachedd: Privacy:	Contained within the report
Cydraddoldeb: Equality:	Contained within the report

Annex 1a: Status of 2022/23 Planning Objectives as reported May 2023

Planning Objective	PO short name	PO full name	Executive Lead
Complete			
1A	NHS Delivery Framework targets	Develop and implement plans to deliver NHS Delivery Framework targets related to workforce within the next 3 years (with 2021/22 being year 1). See specific requirements 1.A.i	Director of Workforce and OD
1E	Personalised care for patients waiting	<p>During 2022/23 roll out the processes developed in 2021/22 to maintain personalised contact with all patients currently waiting for elective care which will:</p> <ol style="list-style-type: none"> 1. Keep them regularly informed of their current expected wait 2. Offer a single point of contact should they need to contact us 3. Provide advice on self-management options whilst waiting 4. Offer advice on what do to if their symptoms deteriorate 5. Establish a systematic approach to measuring harm – bringing together the clinically assessed harm and harm self-assessed by the patient and use this to inform waiting list prioritisation 6. Offer alternative treatment options if appropriate 7. Incorporate review and checking of patient consent <p>By the end of March 2023 to have this process in place for all patients waiting for elective care in the HB</p>	Director of Nursing, Quality and Patient Experience
1G	OD Relationship Manager rollout	By October 2022 develop Directorate level People Culture Plans across the whole organisation coordinated by the OD Relationship Managers. These plans will lead the way to more good days at work for our staff and incorporate personal development pathways.	Director of Workforce and OD
2A	Regional Carers Strategy response	Develop a Health Board specific plan by October 2023 that supports the sustainable delivery of Health Board commissioned services for unpaid Carers and responds to the Regional Carers Strategy, the findings within the population assessment and market stability report and influences the implementation of the Mid and West Wales Health and Care Strategy by supporting individuals in their homes and communities.	Director of Workforce and OD
2B	Strategic Equality Plan and Objectives establishment	By March 2023, implement series of actions to enhance Hywel Dda as a culturally competent organisation. This is able to support and recognise individual needs of employees, patients and carers.	Director of Workforce and OD
2D	Clinical education plan	By September 2022 to develop a multi-disciplinary clinical and non-clinical education plan and begin implementation from October 2022. This plan will incorporate the expansion of the Apprenticeship Academy in terms of its scope, scale and integration with social care	Director of Workforce and OD

Planning Objective	PO short name	PO full name	Executive Lead
2E	Evidencing impact of charitable funds	From April 2022, continue to deliver the objectives of the charity's three-year plan (2020-2023) to further promote awareness of the Health Board's official charity and the opportunities available to raise and use funds to make a positive difference to the health, wellbeing and experience of patients, service users and staff across Hywel Dda University Health Board. As part of this, deliver the charity's marketing and communication plan from 1 st April 2022 and undertake a review of the charity's strategic objectives, structure and resources to ensure effectiveness for Board assurance with the aim of developing the charity's longer-term strategy by February 2023.	Director of Nursing, Quality and Patient Experience
2J	"Future Shot" Leadership Programmes	By March 2023 design a comprehensive range of Leadership Development pathways to create cohorts of leaders needed to address the challenges ahead. This will include the design of a graduate leadership team for health and social care.	Director of Workforce and OD
2K	Organisational listening, learning and cultural humility	By March 2023, demonstrate progression of actions from the first staff discovery report focused on how we can better support staff in work and their wider lives to support Health and wellbeing.	Director of Workforce and OD
2L	Staff engagement strategic plan	By June 2022 develop a plan to ensure the retention of our new and existing staff through the improvement of our engagement with staff and a reduction in turnover. This plan should, as a minimum achieve the Welsh average retention rates across all staff groups in the initial phase and achieve best in Wales as a minimum over its whole duration	Director of Workforce and OD
2M	Arts in Health Programme development	To sustain and develop the Arts in Health Programme by March 2023 to promote and encourage the use of the arts in the healthcare environment to make a positive contribution to the well-being of our patients, service users and our staff.	Director of Nursing, Quality and Patient Experience
3A	Improving Together	Over the next 3 years (with 2022/23 being year 1) implement a quality management system which uses improving together as a delivery vehicle. This will support and drive quality and performance across the organisation aligned to our strategic objectives and Board Assurance Framework outcomes. The system will embed an improvement approach, including quality and performance, and will be clear on expectations and accountability arrangements from Board to all Health Board teams. It will also include the development of a culture of continuous improvement and the systems and tools needed to support such a culture. The aim will be to motivate and support colleagues at all levels to strive for excellence.	Director of Finance
3C	Quality and Engagement Requirements	From April 2022, establish an implementation group to identify the actions required to respond to the emerging requirements of the Quality & Engagement Act. The specific actions that will be put in place to support organisational readiness will be informed by the work undertaken to review the Health & Care Standards during 2021/2022 and the receipt of any formal guidance related to the Act.	Director of Nursing, Quality and Patient Experience

Planning Objective	PO short name	PO full name	Executive Lead
3J	AHM&WW Communications Plan	By June 2022, develop an initial communications plan in relation to our strategy - <i>A Healthier Mid and West Wales</i> - and our 3 year plan to restore, recover and develop local services. This plan will be pro-active and seek to build trust with our staff, partners and local population and a sense of hope and optimism as Mid & West Wales emerges from the pandemic. Implementation of the plan to begin no later July 2022.	Communications and Engagement Director
3L	Review of existing security arrangements	By March 2023 to undertake a review of the existing security arrangements within the Health Board with particular reference to strengthening the following areas: <ul style="list-style-type: none"> • Physical Security • Automated locks • CCTV • Access Control Systems • Intruder Alarms • Communication Systems • Human Factors • Patient and Staff Personal Property • Local Management and staff ownership <p>Once completed, develop a plan to address any issues identified for Board approval and delivery in 2023/24 at the latest.</p>	Director of Nursing, Quality and Patient Experience
4C	Transformation fund schemes	To undertake an evaluation of the impact and benefits of the three WG supported Transformation Funds and ICF supported schemes in order to develop proposals, with LA partners for consideration and approval at the Regional Partnership Board by March 2023 for implementation from April 2024	Director of Primary Care, Community and Long Term Care
4D	Public Health Screening	By March 2023 develop a plan to reduce the local health inequalities arising in relation to screening services with implementation of agreed actions to begin no later than April 2023. The aim is to increase the access and opportunity for screening in our most deprived communities to the levels of our least deprived areas	Director of Public Health
4G	Healthy Weight: Healthy Wales	Following implementation of the local plan to deliver "Healthy Weight: Healthy Wales" measure and report the impact and develop a 3 year plan by March 2023 to promote system leadership and working across areas locally for delivery of Level 2 and Level 1 services.	Director of Public Health
4H	Emergency planning and civil contingencies	Review and refresh the Health Board's emergency planning and civil contingencies / public protection strategies and present to Board by December 2022. This should include learning from the COVID 19 pandemic. The specific requirement set out in 4.H.i will be addressed as part of this	Director of Therapies and Health Science
4I	Armed Forces Covenant	By March 2023 further develop the Health Board plan to drive forward improved outcomes for Veterans and members of the Armed Forces community, in relation to NHS priority treatment guidance and recruitment strategies, and report on progress annually.	Director of Workforce and OD

Planning Objective	PO short name	PO full name	Executive Lead
4J	Regional Well-being Plans	Work in partnership with the Public Service Boards (PSBs) and Regional Partnership Boards to ensure the publication of the statutory Well-being and Population Assessments by June 2022, and the completion of PSB Well-being Plans and an Area Plan by June 2023.	Director of Public Health
4K	Health Inequalities	By March 2023, arrange a facilitated discussion at Board which is aimed at agreeing our approach to reducing Health Inequalities. This must include an analysis of current health inequalities, trends and causes, potential options to address the inequalities (e.g. Allocate disproportionate resource to the most disadvantaged or by "Proportionate Universalism") and identify tools and interventions aimed at addressing the causes. Develop specific planning objectives by September 2023 in preparation for implementation in 2024/5.	Director of Public Health
4L	Social Model for Health and Wellbeing	Design and implement a process that continuously generates new proposals that can be developed into planning objectives aimed at constantly moving us towards a comprehensive "social model for health and wellbeing" and cohesive and resilient communities. The process needs to involve our local population as well as a diverse set of thought and system leaders from across society	Medical Director
4M	Health protection	By March 2023 create a sustainable and robust health protection service, including a sustainable TB service model for Hywel Dda UHB.	Director of Public Health
4P	Recovery and Rehabilitation Service	By December 2022 develop and seek Board approval for a Recovery & Rehabilitation plan that will provide a comprehensive individualised person-centred framework to support the needs of the 4 identified populations included in "Rehabilitation: a framework for continuity and recovery", including those with COVID-19. Subject to IMTP discussions in Q4 2022/23, this plan should be ready for implementation from April 2024	Director of Therapies and Health Science
4U	Community proposals for place-based action	By December 2022, develop a proposal for place-based action in at least 1 community in each county with key local partners and support from the WCVA which includes the identification and development of community leaders, asset mapping and the identification of priority areas of activity that would have the most likely and rapid effect on health and well-being of that community, and would be owned by the local community. As part of this work, identify sources of funding and a funding mechanism that facilitates community ownership and is for at least 3 years.	Medical Director
5A	NHS Wales Delivery Framework Targets	Develop and implement plans to deliver, on a sustainable basis, NHS Delivery Framework targets related to Quality & Safety, Primary care, Secondary care and MH services within the next 3 years (see specific requirements 5.a.i). These plans must be consistent with the Health Board's Strategy - "A Healthier Mid and West Wales"	Director of Nursing, Quality and Patient Experience
5B	Local Performance Targets	Develop and implement plans to deliver, on a sustainable basis, locally prioritised performance targets related to Quality & Safety, Primary care, Secondary care and MH services within the next 3 years (see specific requirements 5.b.i). These plans	Director of Nursing, Quality and Patient Experience

Planning Objective	PO short name	PO full name	Executive Lead
		must be consistent with the Health Board's Strategy - "A Healthier Mid and West Wales"	
5P	Market Stability Statement	Bring the finalised Market Stability Statement and Population Needs Assessment programme to the Health Board by June 2022 and develop an initial set of new Planning Objectives to address the opportunities and issues raised by September 2022 for implementation from Q3 2022/23.	Director of Primary Care, Community and Long Term Care
5Q	Asthma Pathway	To develop and implement a plan to roll out an interface asthma services across the Health Board from April 2021, working across primary and secondary care. The aim of this is to enhance pathway value by reduce asthma related morbidity and mortality whilst improving access to expert opinion and reducing secondary care demand.	Director of Primary Care, Community and Long Term Care
5T	Complex health and care needs	By September 2022 propose new planning objectives for the following year to pilot and test innovate approaches to offering people with complex and/or rising health and care needs (accounting for 15% - 30% of our population) greater control over the choice of care and support they need. The aim of these approaches must be to improve the value (outcome vs cost) from the services we provide and take advantage of the new national Continuing Healthcare Framework and likely introduction of Independent User Trusts	Director of Primary Care, Community and Long Term Care
5V	IMTP and operational planning	By April 2022 develop an IMTP annual planning cycle which supports the Exec Team in the timely development future annual and 3 year plans. This should incorporate the utilisation of quarterly Exec Team residential sessions and a model to deploy operational planning capability out into the organisation.	Director of Strategy and Planning
5W	Liberty Protection Safeguards	Develop and deliver an implementation programme that will ensure effective operational implementation of the Liberty Protection Safeguards legislation across the health board by 1st October 2023.	Director of Operations
5X	Quality Management System	Develop a plan to introduce a comprehensive quality management system to support and drive quality across the organisation. Implementation to begin by April 2022 and completed within 3 years. The system will be supported by the HBs "Improving Together Framework" and EQlIP Programme as delivery vehicles	Director of Nursing, Quality and Patient Experience
6B	Value improvement and income opportunity	By June 2022 develop and roll-out an initial suite of financial sustainability plans for the whole organisation based on the target operation models the HB is seeking to implement through its planning objectives for the next 3 years. These plans should provide the detail underpinning the Health Board's roadmap to financial recovery and be introduced in such a way to allow budget holders to focus on the positive change being sought. In parallel with the above, develop an activity based condition and pathway costing programme for all major health conditions thereby providing a longitudinal analysis of	Director of Finance

Planning Objective	PO short name	PO full name	Executive Lead
		Health Board spend to support the on-going roll out of PROMs and VBHC approaches to budgetary decision making and resource allocation.	
6G	Decarbonisation and green initiatives plan	By first quarter 2022/23 develop and seek Board endorsement for a strategic roadmap to respond to the Welsh Government ambition for NHS Wales to contribute towards a public sector wide net zero target by 2030. The Health Board will set out a work programme and implement this plan to meet the targets established in the NHS Wales Decarbonisation Strategic Delivery Plan in the areas of carbon management, buildings, transport, procurement, estate planning and land use, and its approach to healthcare including promoting clinical sustainability. Where feasible through the opportunities presented via the Health Boards transformation journey it will look to exceed targets and establish best practice models and pilots, as exemplars for the NHS and wider public sector. The overall aim will be to reduce the Health Board's carbon footprint by at least 34% by 2030 to support the wider public sector ambition to address the climate emergency.	Director of Strategy and Planning
6I	Interim Budget 2022/23	By March 2022 establish an interim budget for 2022/23 which supports the planning objectives contained in the Health Board's interim plan for 2022/23. This budget will include identification of the required savings requirements and opportunities to achieve the Health Boards agreed financial plan as well as their application to the relevant budgets for each director.	Director of Finance
6M	Cyber Security Framework	Develop a refreshed Cyber Security Framework by March 2022 and supporting timelines and actions to protecting Health Board information, ensuring confidentiality, integrity of assets and data and availability. Key elements of this framework will be <ul style="list-style-type: none"> • refreshing the information assets register and ensuring that business critical assets are kept secure at all times • identifying the threats and risks (Routine Cyber Security Penetration Testing); • identifying the safeguards that should be put into place to deal with these threats and risks; • monitoring the safeguards and assets to manage security breaches (Cyber Security Framework); • responding to cyber security issues as they occur, and; • updating and adjusting safeguards in response to changes in assets, threats and risks. 	Director of Finance
Ahead			
3G	Research and Innovation	Implement the Research and Innovation Strategic Plan (2021-24) to increase research, development, and innovation activity, and the number of research investigators sufficient to deliver the Health Board, Welsh Government and HCRW expectations and improvement targets (see specific requirement 3.G.i). The plan will be implemented in partnership with universities, life science companies, and public service partners, so as to maximise the development of new research, technologies	Medical Director

Planning Objective	PO short name	PO full name	Executive Lead
		and services that improve patient care and health outcomes. The portfolio will target an expansion of activity into new areas of organisational, clinical and academic strength, including ophthalmology, orthopaedics, women and children's health, sexual and primary care. A function spanning clinical engineering, research and innovation (TriTech) will also target a threefold increase in technology trials	
4S	Improvement in Population Health	By September 2022 develop a comprehensive action plan to address the biggest preventable risk factors for ill health and premature death in the Hywel Dda area. This plan to be presented to Board and, subject to approval, implementation to begin in Q3 2022/23 and included in the next IMTP refresh	Director of Public Health
Behind			
2I	integrated Occupational Health & Staff psychological wellbeing offer	By February 2023 develop an integrated Occupational Health & Staff psychological wellbeing offer with a single point of contact which supports staff to remain in work, offers support when absent and provides alternative opportunities when health impacts on an individual's ability to be in role.	Director of Workforce and OD
3E	Business intelligence and modelling	By March 2023 develop an advanced analytical platform that is highly accessible to operational and corporate teams that will, provide real-time, integrated data to support our clinicians and managers providing the insight, foresight, and oversight to assist with day to day operational delivery as well as organisation wide strategic planning. In parallel, establish mechanisms to ensure continuous innovation of our approach by utilising current technologies, best practices and direction from latest research and publications (such as machine learning, artificial intelligence, time series analysis and cluster analysis). As an initial step, develop and implement a risk stratification model using predictive / cluster analytics to provide evidence for new approaches to the management of chronic conditions to shift the balance of care from the acute sector to primary care and community settings. This should be in place by September 2022 with full inclusion of all health and social care data (as a minimum) by March 2025	Director of Finance
3M	UHB Communications Plan	By March 2023, develop a comprehensive communication plan for the next 3 years to evolve our branding, deepen our links to our staff, build organisational confidence, and communicate honestly, transparently and effectively with our patients and local population. This should include widening the tools and channels at our disposal. Subject to Board approval in March 2023, begin implementation from April 2023.	Communications and Engagement Director
3N	Welsh Language	During 2022/23, undertake a Welsh Language and Culture Discovery process that seeks the views of staff, patients, partners, exemplar organisations and the local population regarding ways to make Hywel Dda a model public sector organisation for embracing and celebrating Welsh Language and Culture (in the way we communicate, offer our services and design our estate and facilities for example). The resulting Discovery Report is to be presented for Board approval in Q4 2022/23 and, in light of	Communications and Engagement Director

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		this, a comprehensive and ambitious Welsh Language and Culture Plan will be presented to Board for approval in March 2023 with implementation starting in April 2023 at the latest. Any elements that can be implemented during 2022/23 should be, subject to appropriate approvals.	
4Q	Community Care Support to reduce non-elective acute bed capacity	By October 2022, through a rapid expansion of all types of community care, put in place the necessary support so that sufficient Hywel Dda residents are able to remain / return home to reduce the number of non-elective patients in acute hospital beds by an average of 120 per day (averaged across the week and compared to the weekly average for the period between January and March 2022)	Director of Operations
4T	Continuous engagement implementation	By March 2023, implement and embed our approach to continuous engagement through: <ul style="list-style-type: none"> • Providing training on continuous engagement and our duties to engage / consult around service changes in keeping with The Consultation Institute's advice • Implementing structures and mechanisms to support continuous engagement, aligned to the regional framework for continuous engagement • Introducing a Continuous Engagement Toolkit, including guidance and templates to support wider teams and to promote good practice 	Communications and Engagement Director (previously Director of Strategy and Planning)
5C	Business Cases for A Healthier Mid and West Wales	By March 2026, produce and agree final business cases in line with the vision and design assumptions set out in 'A Healthier Mid and West Wales' for: <ul style="list-style-type: none"> • the repurposing or new build of GGH and WGH • implementation of a new urgent and planned care hospital (with architectural separation between them) within the zone of Narberth and St Clears <p>Work with partners to develop and address access, travel, transport and the necessary infrastructure to support the service configuration taking into account the learning from the COVID pandemic (See specific requirements 5ci, 5cii)</p> <p>Develop plans for all other infrastructure requirements in support of the health and care strategy.</p> <p>5c i - ensure the new hospital uses digital opportunities to support its aims to minimise the need for travel, maximise the quality and safety of care and deliver the shortest, clinically appropriate lengths of stay.</p> <p>5cii - Implement the requirements of 'My charter' to involve people with a learning disability in our future service design and delivery.</p> <p>5ciii - Incorporate Biophilic Design Principles, learning from the best in the world, into the design of the new hospital and the repurposing of GGH and WGH</p>	Director of Strategy and Planning
5F	Bronglais Strategy	Fully implement the Bronglais Hospital strategy over the coming 3 years as agreed at Board in November 2019 taking into account the learning from the COVID pandemic	Director of Operations

Planning Objective	PO short name	PO full name	Executive Lead
5H	Integrated locality plans	<p>By March 2023, develop and implement Integrated Locality Planning groups, bringing together Clusters, Health, Social and Third Sector partners with a team of aligned Business Partners. Establish an integrated locality plan that sets out a clear and agreed set of shared ambitions and outcomes for the population which is aligned with national and regional priorities across the whole health & care system. The Integrated Locality Planning Groups will agree a collective shared budget to support delivery of the Plans, including commissioning of services, and will demonstrate delivery of the following priorities:</p> <ul style="list-style-type: none"> • Connected kind communities including implementation of the social prescribing model • Proactive and co-ordinated risk stratification, care planning and integrated community team delivery • Single point of contact to co-ordinate and rapidly respond to urgent and intermediate care needs to increase time spent at home • Enhanced use of technology to support self and proactive care • Increased specialist and ambulatory care through community clinics <p>Note - the Integrated Locality Planning groups will operate within a revised framework of governance which will be developed in conjunction with the national Accelerated Cluster Programme</p>	Director of Primary Care, Community and Long Term Care
5J	24/7 emergency care model for Community and Primary Care	Undertake a review of the significant changes made to the 24/7 community and primary care unscheduled care service model in 2021/22 and develop a refreshed plan to embed those changes and complete the task of establishing a comprehensive and sustainable model in this area by September 2022 so that implementation can be completed by December 2022.	Director of Primary Care, Community and Long Term Care
5O	Fragile Services	Develop and implement a plan to address Health Board specific fragile services, which maintains and develops safe services until the new hospital system is established	No single Exec owner
5R	Digital Inclusion	In response to the recently signed Digital Inclusion Charter, by March 2023 develop a digital inclusion programme which will provide a coordinated approach to digital inclusion across the Health Board and its wider partners for the local population. The programme will recognise the continuously changing role digital technology plays in the lives of individuals and society as a whole	Director of Finance
5S	Palliative Care and End of Life Care Strategy	By July 2022 a Health Board wide Palliative Care Triumvirate will be established with a pooled budget to lead on the implementation of the approved Palliative Care and End of Life Care Strategy. This will deliver on five key outcomes; a regional commissioning framework for third sector delivered services, an evidenced workforce model based on capacity and demand plan with equitable training opportunities, a service model based on best practice from the Swan/Cygnnet model, an outcomes and delivery dashboard in line with new national requirements, and implementation of the estates benchmarking	Director of Primary Care, Community and Long Term Care

Planning Objective	PO short name	PO full name	Executive Lead
		review. By March 2023 the Triumvirate, in partnership and collaboration with the service, will clearly identify the priority gaps for next wave of strategy implementation.	
5U	Community and non-clinical estates strategy	By September 2022 develop an initial plan for the Health Board's community and non-clinical estate with a focus on addressing the WG's "Town First" initiative, reducing HB accommodation overheads and improving the working lives of our staff. It should also set out an on-going process to refresh and renew this plan over the coming years in order to keep pace with new working patterns, HB needs and opportunities for co-location with public and voluntary sector partners. Current work on office moves should continue whilst this plan and on-going process is developed.	Director of Strategy and Planning
6N	Intelligent Automation	By March 2023 develop an initial intelligent automation plan which combines robotic process automation technology, AI and natural language processing to streamline data collection and integration. Whilst this plan is in development develop and implement a process to automate the Health Board's starters & leavers processes and design and implement an intelligent frailty identification robot. These two initial programmes will be implemented during 2023/24	Director of Finance
On track			
1B	Hywel Dda Health Hub – Single Point of Contact	"Building on the success of the command centre, develop a longer-term sustainable model to cover the following: - One single telephone and email point of contact - the ""Hywel Dda Hub"". This will incorporate switchboard facilities and existing service based call handling functions into one single call-handling system linking patient appointments, online booking and call handlers - All specialist teams (primary care, patient support, staff support) to have their calls answered and routed through this single point of contact - Further develop the operation of the surveillance cell set up to support Test, Trace and Protect for as long as required - Further develop the incident response and management cell set up to support our COVID-19 response for as long as required - Further develop the Sharepoint function, or look at similar other systems that our Local Authority partners use, to facilitate tracking, auditing and reporting of enquiries, responses and actions - Develop and implement a plan to roll out access for all patients to own records and appointments within 3 years (from 2022/23)"	Director of Nursing, Quality and Patient Experience
1F	HR offer (induction, policies, employee relations, access to training)	Following the development of processes to co-design with our staff every stage and element of our HR offer that embody our values. This will address: 1. the way the Health Board recruits new staff and provides induction;	Director of Workforce and OD

Planning Objective	PO short name	PO full name	Executive Lead
		<p>2. all existing HR policies; 3. the way in which employee relation matters are managed and 4. equitable access to training and the Health Board's staff wellbeing services.</p> <p>The resulting changes to policies, processes and approaches will be recommended to the Board in March 2023 for adoption</p>	
1H	"Making a Difference" Customer Service programme	Following the development and design of the "Making a Difference" Customer Service programme, implement a plan to focus on delivery and measuring outcomes (linked with the Board Assurance Framework), with all members of staff to have completed the programme by September 2024.	Director of Workforce and OD
3I	Primary Care Contract Reform	To implement contract reform in line with national guidance and timescales	Director of Primary Care, Community and Long Term Care
4A	Public Health Delivery Targets	Develop and implement plans to deliver, on a sustainable basis, NHS Delivery Framework targets related to public health within the next 3 years (with 2022/23 being year 1) (see specific requirements 4.A.i)	Director of Public Health
4B	Public Health Local Performance Targets	By March 2024 Develop and implement plans to deliver, on a sustainable basis, locally prioritised performance targets related to public health within the next 3 years	Director of Public Health
4N	Food system	Create and implement a process in partnership with local authorities, PSBs and other stakeholders that engages and involves representatives of every aspect of the food system. This will include growers, producers, distributors, sellers, those involved in preparation and the provision of advice to individuals & organisations and thought leaders in this field. The aim is to identify opportunities to optimise the food system as a key determinant of wellbeing. The opportunities identified will then need to be developed into proposed planning objectives for the Board and local partners for implementation from April 2023 at the latest	Medical Director
4V	One Health	<p>1. By March 2024 develop a set of "One Health" outcome measures and seek approval from Board to include them in the Board Assurance Framework as part of Strategic Objective 4</p> <p>2. By March 2024 develop a clear framework and template to be used across relevant Planning Objectives that will embed "One Health" principles within their delivery (list of relevant planning objectives set out below) and develop a training package accessible for all staff to raise awareness of "One Health" principles and how they can be implemented in the day to day work of the Health Board. As part of this, design and run a Board seminar to raise Board awareness of these principles</p>	Director of Public Health

Planning Objective	PO short name	PO full name	Executive Lead
4W	Whole School Approach to Mental Health and Emotional Wellbeing	Put in place an implementation plan so that, by March 2025 every school in the Hywel Dda area has implemented the Welsh Government Framework for Mental Health & Emotional Wellbeing and establish a formal evaluation framework to monitor and assess the impact of the framework on the mental health and emotional wellbeing of all school children (particularly those experiencing health inequalities). The implementation plan and proposed evaluation framework to be presented for Board approval by May 2023	Director of Public Health
5G	Transforming MH and LD implementation	Implement the remaining elements of the Transforming MH & develop and implement a Transforming LD strategy in line with "Improving Lives, Improving Care" over the next 3 years and also develop and implement a plan for Transforming specialist child and adolescent health services (CAMHS) and autistic spectrum disorder and ADHD.	Director of Operations
5I	Children and young people services improvement	Undertake a comprehensive assessment of all Health Board Children & Young People Services to identify areas for improvement. From this, develop an implementation plan to address the findings by March 2024 at the latest. The assessment process and implementation plan should include the voices of children and young people and have clear links to the wider work being progressed by the RPB	Director of Operations
5K	Clinical effectiveness self assessment process	Establish a process to ensure effective clinical practice is embedded within individual practice and clinical service areas. The process is part of the Health Board's Quality Management System, alongside Clinical Audit and Quality Improvement, and sits within the Quality and Governance structure, by the end of 2022/23. This will be achieved by: <ul style="list-style-type: none"> • Supporting the assessment of practice against local and national clinical effectiveness standards and ensuing that findings are used improve the services provided to our patients; • Supporting services to identify, understand and act upon findings from external reviews that are relevant to effective clinical practice e.g. GIRFT, Royal College Peer Reviews 	Medical Director
5M	Implementation of clinical and all Wales IT systems	By March 2025 implement the existing national requirements in relation to clinical and other all-Wales IT systems within expected national timescales (see the specific requirements 5.M.i). Develop a plan to progress to Level 5 of the 7 Levels of the Healthcare Information and Management Systems Society (HIMSS) maturity matrix (currently the HB is at level 3).	Director of Finance
5N	Implement National Network and Joint Committee Plans	Implement all outstanding plans in relation to, but not limited to National Networks and Joint Committees. This will include commitments agreed with Swansea Bay UHB/A Regional Collaboration for Health (ARCH), Mid Wales Joint Committee, Sexual Assault Referral Centre (SARC), National Collaborative, Welsh Health Specialised Services Committee	No single Exec owner

Planning Objective	PO short name	PO full name	Executive Lead
6D	Value Based Healthcare and Patient Reported Outcome Programme	Implement the three objectives and associated actions contained within the VBHC plan (2021-24), including the routine capture of PROMs within the majority of our service areas, the delivery of an education programme, and a bespoke programme of research and innovation'	Medical Director
6H	Supply chain analysis	<p>By March 2023 develop a consistent measurement framework to assess the impact of Health Board spending in the following 4 domains:</p> <ol style="list-style-type: none"> 1. Social value 2. Economic Value 3. Environmental impact 4. Cultural benefit <p>This framework will provide new measures for the Board Assurance Framework in relation to Strategic Objective 6 and will identify opportunities for new Planning Objectives for delivery from April 2024</p>	Director of Finance
6L	Workforce, clinical service and financial sustainability	<p>Coordinate an ongoing balanced approach to how resources are used and invested and dis-invested in, to achieve workforce, clinical service and financial sustainability.</p> <ul style="list-style-type: none"> • Chair the Use of Resources leadership group to facilitate balanced decision making, providing a summary update into the Sustainable Use of Resources committee as appropriate. • Continually deliver effective executive partnering from the finance function to achieve clarity on resource utilisation, investment and dis-investment appraisals, including the shift of resources across services to achieve our strategic objectives. • Develop and implement a single revenue investment approach pan Health Board, and instil it within pre-existing governance forums and procedures, ensuring summary financial appraisals are consistently and clearly described, including the appropriate finance business partnering sign-off. • Implement a monthly management information suite to drive organisational financial discipline for across all revenue implications, namely, Savings and Opportunities realisation, investment and dis-investment schedules and funding streams. 	Director of Finance
6N	Intelligent Automation	<p>By March 2023 develop an initial intelligent automation plan which combines robotic process automation technology, AI and natural language processing to streamline data collection and integration.</p> <p>Whilst this plan is in development develop and implement a process to automate the Health Board's starters & leavers processes and design and implement an intelligent frailty identification robot. These two initial programmes will be implemented during 2022/24</p>	Director of Finance
De-prioritised			

Planning Objective	PO short name	PO full name	Executive Lead
1I	Family Liaison Service rollout	To embed and sustain a family liaison service in appropriate inpatient and clinical settings from April 2023	Director of Nursing, Quality and Patient Experience
3H	Planning objective delivery learning	By March 2023 establish a process to gather and disseminate learning from the delivery of all Planning Objectives as part of the organisation's formal governance systems with equal importance placed on this as is placed on risk management and assurance. This learning will come from both within the organisation as it implements objectives and from our local population in their experience of the services delivered as a result of the objective being achieved	Director of Corporate Governance (Board Secretary)
4R	Green Health and Sustainability	By March 2023 establish a regional oversight group, in partnership with PSBs and the RPB, to develop and promote a broad range of actions that will promote the social and green solutions for health and well-being and contribute to addressing the climate change emergency through green health and sustainability projects.	Director of Public Health

Annex 1b: Alignment of 2022/23 Planning Objectives with 2023/24 Planning Objectives

Domain

Our People: We have the people we need to achieve our purpose and strategy

Strategic Goal 1:

Grow and Train our Workforce

We have the right people we need, with the right skills and knowledge

Planning Objective 2023/24	Planning Objectives 2022/23
<p style="text-align: center;">1a</p> <p>Develop an attraction and recruitment plan (which enables service sustainability) and deliver a plan which is designed to streamline and modernise processes, recruitment from different talent pools, attract and support candidates</p>	<ul style="list-style-type: none"> • 1F: HR offer (induction, policies, employee relations, access to training)
<p style="text-align: center;">1b</p> <p>Develop career progression opportunities for all that want them, and for those that don't ensure they have appropriate development to be the best they can in their role.</p>	<ul style="list-style-type: none"> • 2D: Clinical Education Plan • 2J: "Future Shot" Leadership Programmes

Strategic Goal 2:
Support and Retain our Workforce
Our people feel motivated and supported

Planning Objective 2023/24	Planning Objectives 2022/23
2a Engage with and listen to our people to ensure we support them to thrive through healthy lifestyles and relationships	<ul style="list-style-type: none"> • 1H: “Making a Difference” Customer Service programme • 2A: Regional Carers Strategy response • 2B: Strategic Equality Plan and Objectives establishment • 2K: organisational listening, learning and cultural humility • 2L: Staff engagement strategic plan • 4I: Armed Forces Covenant
2b Continue to strive to be an employer of choice to ensure our people are happy, engaged and supported in work to further stabilise our services.	<ul style="list-style-type: none"> • 2I: integrated Occupational Health & Staff psychological wellbeing offer
2c Develop and maintain an overarching workforce, OD and partnerships plan	<ul style="list-style-type: none"> • 1G: OD Relationship Manager rollout

Domain

Our Patients: *Our patients receive the highest quality care*

Strategic Goal 3:

Safe and high quality care

Our services are safe and deliver good outcomes

Planning Objective 2023/24	Planning Objectives 2022/23
<p>3a</p> <p>Transforming Urgent and Emergency Care (TUEC) Programme - TUEC / Implement the Six Goals To develop and implement a plan to by March 2024 to deliver Ministerial priorities by 2026.</p>	<ul style="list-style-type: none">• 4P: Recovery and Rehabilitation Service• 4Q: Community Care Support to reduce non-elective acute bed capacity• 5A: NHS Wales Delivery Framework Targets• 5B: Local Performance Targets• 5J: 24/7 emergency care model for Community and Primary Care
<p>3b</p> <p>infection prevention and control action plan A detailed infection prevention and control action plan has been developed to target the management of C difficile infection specifically but which includes actions designed to reduce HCAI more broadly including gram-negative and gram-positive bacteraemia</p>	<ul style="list-style-type: none">• 3C: Quality and Engagement Requirements• 5X: Quality Management System

Strategic Goal 4:
 Accessible and kind care
 Patients have timely access to services and positive experiences

Planning Objective 2023/24	Planning Objectives 2022/23
Planning Objective 4a: Planned Care and Cancer Recovery Implement the planned care recovery programme in compliance with Ministerial priorities.	<ul style="list-style-type: none"> • 1B: Single Point of Contact • 1E: Personalised care for patients waiting • 5A: NHS Wales Delivery Framework Targets • 5B: Local Performance Targets • 5F: Bronglais Strategy • 5N: Implement National Network and Joint Committee Plans • 6K: Design Assumptions
Planning Objective 4b: Develop and deliver a regional diagnostic plan with Swansea Bay University Health Board by Spring 2024.	<ul style="list-style-type: none"> • 5F: Bronglais Strategy
Planning Objective 4c: Mental Health Recovery Plan To develop a recovery plan for Mental Health, neurodevelopmental and CAMHS services to reduce waiting times by March 2024, and maintain a 111 press 2 service on a 24/7 basis for urgent mental health issues.	<ul style="list-style-type: none"> • 5G: Transforming Mental Health and LD implementation

Domain

Our Future: *Building a better health care system for future generations*

Strategic Goal 5:

World class infrastructure

We are building the infrastructure needed to provide high quality care

Planning Objective 2023/24	Planning Objectives 2022/23
<p style="text-align: center;">5a</p> <p>Estates Strategy - Develop and progress a suite of plans for our estate to address the significant risks associated with the current buildings and accommodation. To include:</p> <ul style="list-style-type: none"> • Progressing A Healthier Mid and West Wales to Outline Business Case stage (Q4) following Programme Business Case (PBC) endorsement and Strategic Outline Case (SOC) approval • A 10-year regional capital plan for IRCF and HCF agreed by the Regional Partnership Board and submitted to Welsh Government (Q2) • A Board approved property strategy (Q1) and associated programme of work to introduce agile working within the Health Board 	<ul style="list-style-type: none"> • 5C: Business Cases for A Healthier Mid and West Wales • 5U: Community and non-clinical estates strategy
<p style="text-align: center;">5b</p> <p style="text-align: center;">Research and Innovation</p>	<ul style="list-style-type: none"> • 3G: Research and Innovation
<p style="text-align: center;">5c</p> <p>Digital Agenda - Lead the digital enablement for Hywel Dda University Health Board, supporting the agreed outcomes of the transformational programme. Will ensure further support engagement across the wider region to ensure key stakeholders are appropriately connected, ambitions are aligned, resources allocated, and financial investment and outcomes are agreed. The emerging plan will command the support of Welsh Government and the Board; and will be procured to ensure that transformation activities can commence by October 2023 with an agreed commercial partner.</p>	<ul style="list-style-type: none"> • 3E: Business intelligence and modelling • 5M: Implementation of clinical and all Wales IT systems • 5R: Digital Inclusion • 6M: Cyber Security Framework • 6N: Intelligent Automation

Strategic Goal 6:
Sustainable services
Designing and implementing more sustainable services

Planning Objective 2023/24	Planning Objectives 2022/23
6a Clinical Services Plan - Clinical Services Plan - Establish an overarching programme of work to develop a set of plans for key services affected by the pandemic or facing critical sustainability risks. The plans will span the period up to the new hospital network, support the work on the OBCs as part of A Healthier Mid and West Wales and assist in the delivery of the ministerial priorities. The programme will also align to the ARCH / Mid Wales regional plans and link to the national programmes of work where relevant. The aim is to develop a set of proposals (or options as appropriate) by December 2023 for consideration at the January 2024 Board.	<ul style="list-style-type: none"> • 5F: Bronglais Strategy • 5O: Fragile Services
6b Pathways and VBHC - To implement the pathway interface programme that will transform and streamline clinical care pathways across Hywel Dda University Health Board within the next 3 years. Empowering GPs and patient facing health professionals to support patients effectively and efficiently through a digital pathways interface that improves the balance between hospital-based care and gives emphasis to a social model for health and wellbeing and Value Based Health Care.	<ul style="list-style-type: none"> • 6B: Value improvement and income opportunity • 6D: Value Based Healthcare and Patient Reported Outcome Programme
6c Continuous Engagement -To establish an overarching programme of work for continuous engagement with a set of continuous engagement plans that make it easier for people to have conversations with us. This will: <ol style="list-style-type: none"> 1. Increase public confidence and trust in the reputation of the Health Board 2. Offer greater ability of service users to influence services and to be better informed. 3. Improve decision making that is driven by public feedback. 4. Enhance visibility of the Health Board's values through open and transparent communication 	<ul style="list-style-type: none"> • 3J: AHM&WW Communications Plan • 3M: UHB Communications Plan • 4T: Continuous engagement implementation

Domain

Our Communities: *Our population is healthy and we have a positive impact on the determinants of health*

Strategic Goal 7:

Healthier communities

Our communities support good health

Planning Objective 2023/24	Planning Objectives 2022/23
<p style="text-align: center;">7a</p> <p>Population Health - Develop and Implement public health plans which</p> <ul style="list-style-type: none"> • Empower and enable people to live healthy lives through the implementation of health improvement initiatives that address health and wellbeing through the life course • Provide robust health protection and vaccination services for the community <p>Maximise the population benefits of</p>	<ul style="list-style-type: none"> • 4A: Public Health Delivery Targets • 4B: Public Health Local Performance Targets • 4D: Public Health Screening • 4G: Healthy Weight: Healthy Wales • 4H: emergency planning and civil contingencies • 4J: Regional Well-being Plans • 4K: Health Inequalities • 4M: Health Protection • 4S: Improvement in Population Health • 4V: One Health • 4W: Whole School Approach to Mental Health and Emotional Wellbeing
<p style="text-align: center;">7b:</p> <p>Integrated Localities, Accelerated Cluster Development and Primary Care sustainability</p> <p style="text-align: center;">i. Integrated Localities & ACD ii. Primary care sustainability plan</p>	<ul style="list-style-type: none"> • 3I: Primary Care Contract Reform • 4C: Transformation fund schemes • 5H: Integrated locality plans • 5T: Complex health and care needs
<p style="text-align: center;">7c</p> <p style="text-align: center;">Social Model for Health and Wellbeing</p>	<ul style="list-style-type: none"> • 4L: Social Model for Health and Wellbeing • 4N: Food Systems • 4U: Community proposals for place-based action

Strategic Goal 8:
Positive impact beyond health
As an organisation we have a positive impact beyond health

Planning Objective 2023/24	Planning Objectives 2022/23
8a Decarbonisation and Sustainability - Implement the Board-approved plan for Decarbonisation and support initiatives which promote environmental sustainability and One Health, with the ambition of making Hywel Dda a leading organisation in this area. This work will incorporate both large-scale schemes with a significant benefit to the environment and the development of a 'green' culture which encourages teams and individuals to make changes within their services in support of this ambition	<ul style="list-style-type: none"> • 4R: Green Health and Sustainability • 6G: Decarbonisation and green initiatives plan
8b Local Economic and Social Impact - We will: <ul style="list-style-type: none"> • Direct our expenditure to local benefit • Collaborate with partners to maximise our impact • Ensure that we remain focused on the long term impact we can have • Position ourselves to make the most of tactical opportunities to maximise local funding arrangements for local benefit, for example through the Levelling-up fund. 	<ul style="list-style-type: none"> • 6H: Supply chain analysis
8c To develop a Board and Welsh Government-approved financial roadmap to return the Health Board to a £25m deficit position. This will <ul style="list-style-type: none"> • Provide clear trajectories, including actions and delivery requirements for the organisation • Form the basis of a robust three-year financial plan as part of a broader IMTP • Be based on recurrent solutions derived from a live and ongoing opportunity framework which is regularly updated to ensure that the Health Board's underlying deficit is reduced in a sustainable manner. 	<ul style="list-style-type: none"> • 6I: Interim Budget 2022/23 • 6L: workforce, clinical service and financial sustainability
8d Welsh Language and Culture - Building on the Welsh language and Culture Discovery process, we will deliver a Welsh Language plan that supports our ambitions to enhance our Welsh language and culture across the health board and engages and inspires our staff, patients, and broader communities. We will also seek to achieve the KPIs outlined within the Bilingual Skills policy, Cymraeg 2050, and More than Just Words	<ul style="list-style-type: none"> • 3N: Welsh Language

2022/23 Planning Objectives not incorporated into a 2023/24 Planning Objective

Note that all these Planning Objectives are now considered as complete and/or incorporated into business as usual:

2022/23 Planning Objective
1A: NHS Delivery Framework targets
1I: Family Liaison Service rollout
2E: Evidencing impact of charitable funds
2M: Arts in Health Programme development
3A: Improving Together
3L: Review of existing security arrangements
3H: Planning Objective Delivery Learning
5I: Children and young people services improvement
5K Clinical effectiveness self-assessment process
5P: Market Stability Statement
5Q: Asthma pathway
5S: Palliative Care and End of Life Care Strategy
5V: IMTP and Operational Planning
5W: Liberty Protection Safeguards

Annex 2: Executive Lead Review of Planning Objectives (POs) 2022/23

Director of Corporate Governance/Board Secretary

Planning Objective 3H: Planning Objective Delivery Learning

A number of discussions took place throughout the year and in quarter 3, it was agreed that a Planning Objective (PO) Dashboard would be developed which would enable PO leads to monitor outcome measures and assess whether they are having a positive impact on quality, workforce and financial performance. This would enable the Health Board to modify its objectives to reflect new knowledge and insight and to quickly and efficiently apply it to its planning process, and enable the Health Board to prioritise key POs, understand the interface between POs and modify/stop POs that were not adding value, which would enable the Health Board to focus on those that have the largest impact on quality, workforce and financial performance. It would have also enabled the Health Board to clearly articulate the outputs from POs and, in particular, the impact that could be anticipated for key metrics. It would have also been used to provide assurance in Committee reporting and the 'how are we doing' Board Assurance Framework (BAF) sessions at Executive Team.

However, as work was about to begin, a new project management system (PACE) was being introduced in the Health Board which has the functionality to be developed and utilised for capturing the learning from POs. PACE is currently structured around the planning objectives, and has capacity to log:

- the benefits delivered for each planning objective (financial, performance related or other)
- capture risks
- capture lessons learnt (internal and external)

This work has been deprioritised for 2023/24 and not included within the annual plan, however further work is underway to identify specific outcome measures for each of the POs identified for 2023/24 with planned trajectories which should assist with PO leads, and the Executive Team, in their monthly 'PO Review Sessions' to understand the impacts of work being progressed and assess whether they are having a positive impact on quality, workforce and financial performance, and apply that learning to planning decisions throughout the year. Further work is also being undertaken to review the PO reporting mechanisms to ensure that the Board and Committees receive the assurance that the Health Board is understanding the impact of the POs and applying the learning to their decision-making. This PO is therefore close.

Communications and Engagement Director

Planning Objective 3J: A Healthier Mid and West Wales Communications Plan

A Communications Plan has been drafted. The focus towards the latter part of the year has been on a detailed communications plan for ensuring awareness and continued engagement in the New Hospital Site Consultation.

Planning Objective 3M: University Health Board Communications Plan

We have continued to develop and shape our communications strategy for the health board. This has included reviewing our current communication activities and communications channels; and launching our new intranet pages.

Planning Objective 3N: Welsh Language

- The Welsh Language and Culture Discovery process was launched at the health board's stall at the National Eisteddfod in Tregaron in August 2022.
- The Discovery report was presented to PODCC in February 2023.

Planning Objective 4T: Continuous Engagement Implementation

- A range of continuous engagement training sessions for staff and the CHC have been delivered by the Consultation Institute.
- Review undertaken of current mechanisms. New Continuous Engagement Plan was approved by Board in May 2022.
- Regular attendance by the Engagement Team at the Regional Continuous Engagement Steering Group, which aims to identify engagement taking place across west Wales by the health board and other key organisations.
- We have established a new Experience and Engagement group.
- Terms of reference for the Stakeholder Reference Group have been amended to ensure seldom heard groups and individuals with protected characteristics are represented.

Director of Finance

Planning Objective 3A: Improving Together

- Our **Improving Together Framework** has been developed and signed off by Board in March 2023. It sets out the health board's approach to embedding performance improvement through our governance. The framework is enabled by data at every level to support decision making and to drive service change. Its successful implementation will help us to focus on what is important to the Health Board and enable us to provide efficient and effective services.
- At the most strategic level, the **Board Assurance Framework (BAF)** and **Integrated Performance Assurance Report** provide Board, Committees and the Executive Team with data and evidence to help us understand whether we are achieving and working towards the ministerial and local ambitions. We have worked hard on developing a small set of outcomes aligned to our 6 strategic objectives which are reported through the BAF 3 times a year to Executive Team and Board. They help us to understand whether we are driving towards our Strategic Objectives and goals as an organisation.
- At the directorate level, we have recently established **Directorate Improving Together Sessions**. These have been set up to provide dedicated time for teams to meet with their Executive Director and Corporate Executive Directors to:
 - Outline the priorities / goals for the year
 - Outline current challenges and support required to achieve the goals
 - Flag highlights or lowlights from the "Our Performance", "Our Safety" dashboards and audit and inspection summary reports. These dashboards provide quality, workforce, performance, finance, risk data all in one place. We are working on incorporating and signposting to activity data to help support operational planning.
- The ambition is that the Directorate Improving Together Sessions will ensure that we are aligning support to key priorities within the health board with the ultimate aim of improving outcomes for our patients, staff, visitors and those living within Hywel Dda.

Planning Objective 3E: Business Intelligence and modelling

An advanced analytical platform has been developed and is now accessible and includes applications that perform Time Series Analysis, Forecasting, Statistical Process Control (SPC) Charts and Flow Visualisation; whilst a GIS (Geographic Information System) mapping application has been incorporated into the Data Science Platform.

Planning Objective 5M: Implementation of clinical and all Wales IT systems

Significant developments have been seen in a number of key areas including but not limited to:

- Electronic Health record
- Electronic Prescribing and Medicines Administration (ePMA)
- EyeCare Digitisation
- Radiology electronic test requesting
- Results Notification

Planning Objective 5R: Digital Inclusion

HDdUHB has signed the Digital Inclusion Charter for Wales and were accredited in September 2022 having successfully demonstrated its commitment to implementing the Digital Inclusion Charter principles. The health board will continue to work with communities co-produce digital services with patients, ensuring that all patient, service users, and carer voices help shape the work to ensure it delivers the maximum possible value to the community.

Planning Objective 6B: Finance Business Partnering

- Financial sustainability plans – work here concluded as a first phase and an update for the 2023/24 planning cycle was undertaken. Opportunities that supported the previous route-map to financial sustainability were reviewed and refined with Executive leads. An investigation into the operational drivers of deficit growth over the past two years was undertaken. Areas of waste and inefficiency identified through these two sources generated Executive led Programme of Change projects, which include: Transforming Urgent and Emergency Care, Integrated Locality Planning, Nurse Stabilisation, Alternative Care, FLOs and CHC.
- Costing programme for all major health conditions - work was undertaken in parallel with overall Value Based Health Care programme, requesting early invitation to each new project, to discuss offering and jointly decide whether resource measurement is required. Around this, broader operational requests for resource modelling are evaluated within same framework and approach.

Planning Objective 6H: Social Value

- We have developed several baseline measurements using both B Corporation assessment and CLES metrics, culminating in the creation of our public values framework. This has allowed focus on areas of relative weakness and creation of our strategy to use resource most effectively.
- We have an action plan awaiting sign off by executives and board
- Accreditation opportunities around social value are being explored with external agencies indicating two potential opportunities.

Planning Objective 6I: Interim Budget

- This was completed as part of the planning cycle for 2022/23.
- The budget linked to the re-submitted plan (£62.0m) was not transacted in the financial ledger, due to the plan not being accepted by WG.
- Opportunities have, and continued to be, presented to the organisation and respected Executive Team leads.
- The 2023/24 planning cycle will undertake a further assessment, overseen by WG through the Targeted Intervention dialogue, to review options and whether a revised budget can be agreed and implemented.

Planning Objective 6L: workforce, clinical service and financial sustainability

- Directorate level Use of Resource (UoR) meetings took place monthly in 2022. These were superseded by the combined Improving Together structure from January 2023 onwards, to better correlate the balance of resources with performance and quality and safety.
- Each Improving Together session has an accompanying information pack, which sets out a multitude of pertinent information around the year-to-date position and the forecast outturn. The packs also contain salient information including cost drivers, risks, mitigations and horizon scanning.
- Business Partners, through their business conversations are proactively working to identify opportunities with operational leads to ensure all areas of opportunity are considered and realised wherever possible.
- Recognising this financial year is very challenging, further Annual Plan deep dive meetings were undertaken in January and February 2023 to focus on the financial challenges and opportunities for 2023/24. The purpose of this approach is to horizon scan and implement any changes that support service provision and configuration whilst maximising financial sustainability.

- The Business Partners as part of their business meetings are proactively working with their operational colleagues to consider the extant resources and their utilisation. The next step is to consider whether there is an opportunity to decommission and/or reinvest as required.

Planning Objective 6M: Cyber Security Framework

We now have a Cyber Security programme in place to work towards compliance with the Network and Information System Regulations (NIS-R). To support this there is a Cyber Security Assurance Group which meets monthly and reports into the Information Governance Sub-Committee.

Planning Objective 6N: Intelligent Automation

Our target is by 2025 to release 50,000 hours of time back into the organisation.

Workforce automation. Hywel Dda are working with Northampton Hospital Trust (RPA Centre of Excellence) to document two Workforce process and automate one of these. The first process to be considered is the automating the training records into ESR. The recording of training courses and the attendance at the courses to ensure an accurate record is kept so staff training attendance is captured in a timely manner, this is important when specific courses are a pre-requisite of a staff member being able to work in a certain area of the business.

- Finance automation. This is Percentage of Completion (POC) is the automation of 2 processes within the finance team. Firstly, the request to raise a bill. The process exists because invoices need to be raised to customers. Request to Raise Bill (RRB) Excel forms are (mostly) sent as attachments in an email to a shared inbox.
- During a number of workshops, a further 17 potential processes have been identified, and the digital team working with the suppliers are developing scopes to process maps to assess the return on investment.

Director of Nursing, Quality and Patient Experience

Planning Objective 1B: Hywel Dda Health Hub - Single Point of Contact

- A Single Point of Contact (SPoC) has been established within the communications hub. Evaluation demonstrated service efficiencies, redistribution of staff within the service, and that patients have instant human interaction and one SPoC providing a quality service, rather than leaving an answer phone message that may take several days to respond to.
- Work has also been undertaken with the finance value-based healthcare team to demonstrate the value of investment in terms of outcomes from the communication hub.
- As a result of this, a wide range of services are now available through the SPoC.

Planning Objective 1E: Personalised care for patients waiting

This Planning Objective was merged with Planning Objective 1B, as their aims aligned.

Planning Objective 1I: Family Liaison Service rollout

The role of the Family Liaison Service is an extension of the service delivered during COVID-19. Work is continuing, based on evaluation, what the future service model could look like depending on the funding available for it.

Planning Objective 2E: Evidencing impact of charitable funds

We exceeded the target for the Bronglais Chemotherapy Appeal, funded a commemorative bench for Armed Forces Week and developed a new charity website:

<https://hywelddahealthcharities.nhs.wales/>.

Planning Objective 2M: Arts in Health Programme development

Arts in Health developments are on track with public and staff engagement on the development of a new vision for Arts in Health. Creative activities for staff wellbeing are ongoing with Hywel Dda singing bursaries; the Creative Collective and Cultural Cwtsh wellbeing resource for health and social care workers. For patients, initiatives have included 'Arts Boost' Arts and Mental Health provision for children and young people in partnership with SCAMHS and Live Music across Hywel Dda's ITU service. For communities, Dance on Prescription and Creative Prescribing Discovery Programmes are underway

Planning Objective 3C: Quality and Engagement Requirements

- An implementation group has been established, to ensure that the health board is compliant with its duties under the Health and Social Care Quality and Engagement (Wales) Act 2020. The implementation group have established two working groups, one considering the duty of quality and the other considering the duty of candour.
- The Executive Director of Nursing, Quality and Patient Experience has been identified as our executive director and operational lead with responsibility and oversight for implementation of the duties. An independent member has also been identified to be the strategic lead. Board awareness training sessions have been delivered. Reporting on the duty of candour and duty of quality will be through the quality assurance report to the Quality, Safety and Experience Committee and also through the improving experience report to the Board.
- A review of our Being Open Policy has been undertaken to ensure that it reflects the requirements of the new duty of candour and a suite of standard operational procedures have been developed to support staff with implementation of the duty.
- A Quality and Engagement Act SharePoint page has also been developed with information for staff on the Act, the duty of quality and the duty of candour. The all-Wales training videos and other guidance is available on the SharePoint page. A training needs analysis has been prepared; this will be presented to the Implementation Group. Awareness raising sessions and training sessions have also been held across all sites.
- The Datix Cymru system has been modified to capture decisions and actions related to duty of candour. This will facilitate validation, reporting and appropriate escalation.
- Our planning objectives, quality management system and organisational values have provided a strong platform for implementation of the duty of quality.

Planning Objective 3L: Review of existing security arrangements

- To meet the requirements of this Planning Objective a Security Management Framework Task and Finish Group was established to oversee the work.
- Significant progress has been made around CCTV (investment has been received to improve CCTV provision within A&E departments across the health board) and Access Control management in particular, while a Security Management Policy has been drafted.

Planning Objective 5X: Quality Management System

- The Board approved the Quality Management System (QMS) Strategic Framework in March 2023.
- The strategic framework, which provides a system-wide approach to achieving quality of care in a way that secures continuous improvement, was developed through engagement and consultation with key staff and with members of the Quality, Safety and Experience Committee.
- A SharePoint page has been developed to support and operationalise the QMS.
- Our improving together strategic framework (see Planning Objective 3A: Improving Together) along with "Our Performance" and "Our Safety" dashboards are key enablers to our QMS.

Director of Operations

Planning Objective 4Q: Community Care Support to reduce non-elective acute bed capacity

Our objective has been to grow the total homebased care workforce in the community on a sustainable basis. To develop a consistent and regional set of principles which can be owned and implemented as most appropriate in each county system. The focus of the teams will be to support independence, reablement or enablement and the Home First principles. We seek to do this in partnership recognising the impacts on the experience and outcomes for individuals and the wider population. We seek to share the responsibility and risk in the design, implementation and resourcing and will ensure senior consistent representation in a regional steering group and local Operational Delivery Groups.

Planning Objective 5F: Bronglais Strategy

- The COVID-19 pandemic has adversely affected progress on the delivery of the Bronglais Hospital Strategy with operational teams focussed on delivery of services since 2020.
- A post COVID-19 review of the strategy has commenced
- A revised implementation plan is in the draft stage of completion

Planning Objective 5G: Transforming MH and LD implementation

We continue to make progress across the entire Mental Health and Learning Disabilities portfolio across our wider Transforming Mental Health agenda. We were the first Health Board to 111 Option 2; we continue to work towards meeting our targeted trajectories in respect of Part 1A & 1B and are on track to achieve 80% by March 2023 and to work with partners through the Regional Partnership Board to further strengthen care and support arrangements for children with emotional and mental health needs by becoming early adopters of the national Early Help and Support Framework, which is being implemented as part of the Together for Children and Young People (TCYP) programme.

We have undertaken a procurement exercise to outsource assessment and treatment to address our waiting lists in both Adult and CYP ASD services, which closed at the end of October 2023. Following evaluation and stand still period, contracts have been awarded to two providers up until 31st March 2025. This has the capacity to provide a minimum of 150 individual diagnostic assessments per year per provider, which would mean an additional 300 assessments to be completed across Child and Adult Services per year.

Work is progressing on the Learning Disability Service Improvement programme (LD SIP) for the community and inpatient settings change programme, with a review of the former Ty Bryn service having been completed. An SBAR was presented to Board in January 2023, outlining the future direction of travel and next steps based on recent service assessments, which was shared with the Executive Team in mid-December 2022. The report included a comprehensive Engagement Plan scheduled for February/March 2023, following which a further analysis report will be taken to Board in for final approval on the service changes.

Work continues on developing our Memory Assessment Service (MAS). Good progress has been made on waiting time initiatives with Occupational Therapy, including agreed action planning and patient contact. A Service Specification setting out the new service model is currently being engaged/consulted on. The procurement process for the MH&LD Third Sector Framework for a range of early intervention and prevention services commenced in November 2022. All aspects of the tendering process have been coproduced with service user and carers being involved in the development of new Service Specifications as well as being scoring members of the evaluation process.

Planning Objective 5I: Children and young people services improvement

- Community paediatrics have commenced a Task and Finish (T&F) exercise the focus of which is to reduce the number of CYP waiting for a new or follow up appointment with a community paediatrician. The T&F group will assess the requirement for skill-mix and changes in practice across the Service.

- A sub-group to explore the identified gaps in Positive Behaviour Support has been formed. A paper has been written and is out for consultation.

Planning Objective 5W: Liberty Protection Safeguards

- Hywel Dda are still waiting on the UK Governments response to the consultation on the code of practise and no new date for implementation of Liberty Protection Safeguards has been announced.
- Wider Mental Capacity Act (MCA) training continues as part of the preparations, and we are on track with the implementation plan.

Planning Objective 6K: Design assumptions

- This work is on-going and is described through a number of the Planning Objectives within this report.

Director of Primary Care, Community and Long-Term Care

Planning Objective 3I: Primary Care Contract Reform

All contract changes are taken through the Primary Care Contract Review Group for discussion and consideration, where applicable, prior to implementation:

- Implementation of the negotiated General Medical Services contract changes for 2022/23 have all been undertaken and the necessary and required monitoring and reporting mechanisms are in place. Awaiting further information on the proposed new Unified Contract.
- All contract changes for the Community Pharmacy contract negotiated for 2022/23 have been implemented in line with national timescales. Further work is ongoing to understand further negotiations and the impact on service delivery for 2023/24 onwards.
- Contract Reform has continued to be supported as part of the commissioning of General Dental Services in line with national guidance. Work is ongoing to shape the NHS mandate for future contract negotiations.
- Work is ongoing to develop the clinical pathways and contractual requirements to support implementation of the negotiations that concluded in 2022. Work is ongoing to share the NHS mandate for future contract negotiations.

Planning Objective 4C: Transformation fund schemes

- The Transformation Funds and Integrated Care Fund (ICF) programmes no longer exist.
- All programmes were reviewed and for some programmes funding has been agreed through Regional Integration Funding (RIF) against the new criteria established under RIF and will continue to report through that structure and into our Integrated Executive Group.

Planning Objective 5H: Integrated Locality Plan

- Work has been undertaken to streamline the development of a meeting and governance structure to support the implementation of Accelerated Cluster Development through Pan Cluster Planning Group meetings etc.
- Accelerated Cluster Development checklist updated and submitted in line with national timescales.
- Implementation of the social prescribing model across the health board.
- Single point of contact to co-ordinate and rapidly respond to urgent and intermediate care needs to increase time spent at home.
- Enhanced use of technology to support self and proactive care.
- Reporting mechanisms established for the Ministerial Priorities aligned to Primary Care contractors and Community Services.
- A review of the current work programme has been proposed for early May 2023 to align priorities and refresh the workstreams.

Planning Objective 5J: 24/7 emergency care model for Community and Primary Care

- A model for 24/7 urgent primary care (includes community in this context) has been developed and approved through formal committees. Welsh Government sponsored Urgent and Emergency Care (UEC) funding is supporting core aspects of this model:
 - The development and implementation of a Same Day Urgent Care service in Cardigan Integrated Care Centre. Evaluation has indicated that the service prevented 1,995 A&E attendances across Hywel Dda and 185 '999' calls in the 2022-23 financial year. Ongoing challenges remain associated with some diagnostic provision and access to hot clinics.
 - The commissioning of an additional 3,222 hours per annum, from 37 GP practices across Hywel Dda, to help support and manage Urgent Primary Care needs in the community.
- Priorities for the ongoing development of our UPC model for 2023/24 include the following:
 - Appointment of 8 additional Wellbeing Responders to provide a 24/7 urgent primary care response to urgent need in the community.
 - The roll out of dedicated Care Home support services which are expected to reduce avoidable conveyance and admission to hospital for care home residents.
 - Reviewing and developing our 'Homefirst' approach across Hywel Dda. Homefirst refers to a person-centred approach providing an organisational structure through which to coordinate the day-to-day proactive monitoring and management of a risk stratified population. It will also provide timely response to a medical, functional, or social crisis. This response addresses "what matters most" to the individual/ family unit utilising informed shared decision making.

Planning Objective 5P: Market Stability Statement

Following the completion of the West Wales Partnerships' Market Stability Report the following has been identified

- Consider the business case to develop in-house nursing provision (including taking due regard to registration requirements) to rebalance the market and address market failures.
- Develop in-reach and out-reach models with residential homes at the centre of their communities (also referenced as Hub and Spoke models). This will be mutually beneficial for homes and the wider array of community services and support.
- Work is ongoing with the Health Boards 3 Local Authorities.
- There is a need for more specialist and nursing provision especially for people with dementia, and it is noted that modern purpose-built facilities tend to have the highest occupancy. The pandemic has accelerated this trend, particularly in the self-funder market.
- Monitor occupancy closely as hardship funding tapers to identify providers who may be struggling and try to ensure that any unavoidable exits are planned and supported.
- Seek to incentivise investment in new/expanded dementia and nursing care in the region, for example through contracts which share occupancy risks, providing sites, facilitating planning consents and supporting workforce initiatives.
- Consider whether to acquire homes which are at risk of closure either to sustain provision, repurpose for other uses which support people to remain independent, such as supported living, or release the capital to reinvest in new provision.

Planning Objective 5H: Integrated Locality Plans

- Work has been undertaken to streamline the development of a meeting and governance structure to support the implementation of Accelerated Cluster Development through Pan Cluster Planning Group meetings etc
- ACD checklist updated and submitted in line with national timescales
- Implementation of the social prescribing model across the Health Board
- Single point of contact to co-ordinate and rapidly respond to urgent and intermediate care needs to increase time spent at home
- Enhanced use of technology to support self and proactive care

- Reporting mechanisms established for the Ministerial Priorities aligned to Primary Care contractors and Community Services
- A review of the current work programme has been proposed for early May 2023 to align priorities and refresh the workstreams

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- The commissioning of an additional 3222 hours per annum, from 37 GP practices across Hywel Dda, to help support and manage **Urgent Primary Care** needs in the community

A series of next steps have been defined for 2022/23 and priorities for the ongoing development of our UPC model for 23/24 include the following:

- The appointment of an additional 8 Whole Time Equivalent Community Wellbeing Responders (CWRs) from 'Llesiant Delta Wellbeing' will provide a 24/7 urgent primary care response to urgent need in the community. The CWRs will provide a response to need identified by Out of Hours GPs for residents across Hywel Dda.
- The roll out of dedicated Care Home support services which are expected to reduce avoidable conveyance and admission to hospital for Care home residents. Initially these will be piloted in Carmarthenshire (Immedicare) and Pembrokeshire (Consultant Connect) but will be rolled out Hywel Dda wide if successful.
- Reviewing and developing our 'Homefirst' approach across Hywel Dda. Homefirst refers to a person-centred approach providing an organisational structure through which to coordinate the day-to-day proactive monitoring and management of a risk stratified population. It will also provide timely response to a medical, functional, or social crisis. This response addresses "what matters most" to the individual/ family unit utilising informed shared decision making.

Planning Objective 5Q: Asthma pathway

- A weekly MDT is undertaken providing respiratory advice and stopping secondary care Consultant appointments.
- Virtual Meeting every three months with a Paediatric Consultant to discuss children and young people.
- Difficult Asthma clinics are being run
- Over 20 GP Practices have support, education and training in place and now regular access to the asthma team when needed.

Planning Objective 5S: Palliative Care and End of Life Care Strategy

- Service model and manual developed with service leads.
- Local development of multi-disciplinary team (MDT) approach completed, and new ways of working being rolled out.
- Shared strategy with national leads for Palliative Care and End of Life Care (PEOLC).
- Business case based on service workforce model being developed.
- Following the formal sign off of the Palliative and End of Life Care Strategy (PEOLC) by the health board a Senior Reporting Officer has been appointed to embed and facilitate the findings of the strategy across the Hywel Dda area. Key phases of this work include:
 - Developing a governance and reporting structure to support implementation of the strategy
 - Development of a leadership team / triumvirate
 - Develop structures and pooled budget arrangements
 - Implementation of the strategy incorporating the end-to-end, whole-age, clinical pathway

- Development of a workforce model
- Develop and implement a regional commissioning framework for third sector delivered services

Planning Objective 5T: Complex health and care needs

- This planning objective has been completed and the work is now being progressed as business as usual.
- Recommendations we have tested over the last year has included:
 - Expansion of community micro enterprises.
 - Develop the circle of support.
 - Digital Test the Connected Healthcare Administrative Interface (CHAI) community application.
 - Evaluate and evidence the above models work.
- This planning objective also needs to be linked into planning objective 5H (Integrated Locality Planning) and form a central tenant of it.

Director of Public Health

Planning Objective 4A & 4B: National and Local Public Health Targets

- Progress reports have been submitted as and when required.
- These planning objectives have now been incorporated into appropriate topic based planning objectives as having objectives around hitting targets does not necessary lead to improvement.
- Ensuring targets around screening, immunisation, weight and other public health topics are met as part of improvement plans in these areas is more appropriate.

Planning Objective 4D Public Health Screening

- An update went to SDODC in April 2023 around progress against our screening planning objective. Key initiatives currently being worked on to increase screening uptake and decrease inequities in screening include:
- **The Moondance Cancer (Bowel Cancer) Learning Programme for Schools-** A partnership programme between Moondance Cancer Initiative, Hywel Dda University Health Board and Pembrokeshire Healthy Schools Scheme. The programme, originally developed and piloted in Cwm Taf, is an investment to influence long-term behaviour change within younger generations by educating them about cancer, cancer treatment, and the connection to healthy behaviours through a fully developed curriculum package, with supporting materials for delivery. It also explores intergenerational learning, by raising awareness of bowel screening, signs, and symptoms with the pupils and wider school community, including family learning and awareness raising. Currently two secondary schools in Pembrokeshire, Haverfordwest High and Milford Haven Comprehensive, are signed up and delivering the programme as part of a total of 24 schools who are engaging across Wales. Information received to date from the Moondance Initiative highlights that in Haverfordwest High 169 pupils and 145 households linked to those pupils have participated in a pre-programme survey, such information from Milford Haven Comprehensive is expected soon.
- **Cervical Screening and Ukrainian Refugees** - A multidisciplinary team of key health professionals within Hywel Dda University Health Board, led by GP Cancer Lead, looking at cervical screening uptake within the Ukrainian refugee population in Hywel Dda. Through focus groups with our local Ukrainian population information around current knowledge of the cervical screening programme in Wales and barriers and enablers to uptake of screening will be obtained. Focus groups are currently being planned and will be facilitated through our Community Development Outreach Team with support from Swansea University who will provide support with qualitative findings from the focus groups, this will be done as part of a student's Public Health Masters dissertation. The aim is to facilitate the groups in early summer.
- **Barriers to Screening Uptake in Carers-** Looking at carers uptake of screening programmes locally, their experiences, barriers and enablers. Nationally through Public Health Wales there is work going on around unpaid carers and screening uptake in terms of themselves and for those they care for, the aim being to gain an understanding of their knowledge around screening, attitudes, experiences etc through a combination of surveys and focus groups and to develop a baseline of data.

Planning Objective 4G Healthy Weight Healthy Wales

- This planning objective is on track and will be reporting progress through QSEC in June 2023. The 2022-24 delivery plan had a renewed focus on the following **seven priority areas**:
- Shape the food and drink environment towards sustainable and healthier options.
- Enable active environments and spaces to encourage more movement in daily life.
- Promote and support families to provide the best start in life, from pre-pregnancy to early years.
- Enable our education settings to be places where physical and mental health remains a priority.
- Remove barriers to reduce diet and health inequalities across the population.
- Build on the development of equitable support services for people to become or maintain a healthy weight.
- Enhance the development of the system of prevention which enables leadership at every level

Following a pause due to Covid-19, work to implement the HWHW strategy re-commenced in 2021. This included confirmation of a £374,000 per annum allocation to HDUHB for implementation of the revised pathways and standards. A plan, aimed at addressing gaps identified as part of a baseline assessment against the revised standards was submitted for all Wales peer review and subsequently, to Welsh Government in July 2021.

The gaps identified were:

ADULTS

- Level 3 Weight Management Service – recruitment needed to key roles/posts to meet minimum service standards, including a pathway lead post, psychology, dietetics, occupational therapy, physiotherapy and sessional medical input.
- Level 2 Weight Management Services – increase the range and reach of services for adults, to include the potential of a commercial weight management offer.
- Develop capacity for weight management support within maternity services

CHILDREN

- Address the lack of weight management provisions for Children, Young People and Families (CYPF).

The plan submitted therefore sought to address those gaps but in 2021-22, in line with direction received from Welsh Government, recruitment to posts to meet minimum standards for the L3 Multi-disciplinary Team (MDT) was prioritised. The appointment to a Clinical Pathway lead post was vital, in order to provide leadership and co-ordination for the implementation of the pathway and for planning and development of services at L2, for maternity and for CYPF.

The focus of the second Forward Plan in 2022-23 was on developing costed models of service provision at L2 for adults and within maternity and at L2 and L3 for children, young people and families. Multi-disciplinary task and finish groups were convened by the Pathway Lead to do the work needed across disciplines and organisations to model capacity and demand and to plan and cost the preferred service models. This work is being aligned closely with the work on the All Wales Diabetes Prevention Programme to ensure seamless transition between appropriate services, regardless of funding stream. More recent alignment with the Strategic Programme for Primary Care Programme should facilitate increased capacity and reach at L2 of the pathway through an additional primary care and commercial weight management offer over the medium term.

Funding received via the Early Years and Prevention Fund, predominantly to support smoking cessation during pregnancy has been utilised to recruit three band 3 HCSWs to provide 'healthy pregnancy' support to women during pregnancy. This service will include the delivery of the 'Foodwise in Pregnancy' group programme and one-to-one support.

Swansea Bay and Hywel Dda University Health Boards (UHB's) are taking a regional, the Whole System Approach (WSA) to healthy weight, aligned to the nationally agreed nine step approach outlined by Public Health Wales (PHW). Funding of £111,000 per annum is allocated to each UHB until 2024 to fund posts and activity in line with the WSA grant terms and conditions. A regional lead for the whole systems approach commenced in post on the 1st March with Swansea Bay Public Health Team. Recruitment to the remainder of the regional team - 1.4 WTE Senior Practitioner (Band 7) split across both UHBs and 1.0 WTE Project Support Officer (Band 4) will commence following job matching and/or consistency panel processes in both UHBs. A regional WSA delivery plan for 2023-24, outlining the key deliverables and timescales for action together with an expenditure plan was submitted to PHW in March

Planning Objective 4H Emergency Planning and Civil Contingencies

- This planning objective is complete.
- The refreshed Major Incident plan was approved at the health board meeting in July 2022. The aim of the Major Incident Plan is to save life and mitigate injury in circumstances where routine services may prove inadequate and to provide co-ordination to ensure that limited resources are deployed most effectively.

Planning Objective 4J: Regional Well-being Plans

- This planning objective is complete, with ongoing commitment that the public health directorate will continue to work with public service boards to ensure plans are actioned.

Planning Objective 4K Health Inequalities:

- This planning objective is complete, with the options appraisal coming to board seminar in April 2023. However there is more to be done around tackling inequalities and the initial planning objective was just the first step, so while the objective is complete this agenda will now be built into planning objectives for 2023/24 and the options chosen through the appraisal and recommendations from board actioned.

Planning Objective 4M Health Protection:

This planning objective is around development of a robust sustainable health protection system. An update went to SDODC in April 2023. Assurance was taken regarding the planning objective being on track, however we do not have assurance in funding going forward as 2022/23 funding for health protection from Welsh Government is transition funding. The total funding available for 2023/24 is £1.9m. The Regional Strategic Oversight Group agreed on 23 February 2023 the funding would be assigned as follows:

- £732k for the Health Board community testing based on a much reduced 5 day service in Spring/Summer and 7 day service in Autumn/Winter
- £100k for the cost of Point of Care Testing (POCT) for equipment, maintenance, warranties etc
- £1.068m for the LA teams, split as follows:
 - £534k for Carmarthenshire
 - £36k from the Ceredigion and Pembrokeshire element for the HB to employ a part-time IPC nurse to work within the Ceredigion and Pembrokeshire LA teams
 - £296k for Pembrokeshire
 - £202k for Ceredigion

The TB Operational Group has been re-established. The group was originally set up to respond to the Llwynhendy Outbreak and response and then to the Ukrainian Refugee settlement programme, but will not turn attention to the long term plan for TB services in Hywel Dda UHB. Terms of Reference are being developed and pathways and services being reviewed. The group is also updating the corporate risk register in line with the Llwynhendy Outbreak External Review.

Planning Objective 4R: Green Health and Sustainability

- For 2023/24 this area sits with the Director of Planning, with close links to public health. We have worked across the directorates to ensure ongoing progress.

Planning Objective 4S: Improvement in Population Health:

- The Health Improvement strategy came to SDODC in April 2023. This will now go for public consultation, with SDODC and the public's comments being incorporated before the plans are finalised. The health improvement team will be presenting key elements of the strategy to the executives on May 24th.
- The planning objective is very nearly complete, and actioning the plans are a key part of our 2023/24 priorities.

Planning Objective 4V One Health

- This planning objective is new and is on track, work in this arena will sit between the planning and public health directorates and feed into the sustainability agenda.

Planning Objective 4W Whole school approach to mental and emotional wellbeing:

- This planning objective is new and is on track. Regular updates will be provided through SDODC. Work in this area is also reported through the RPB subgroup around early years and through Welsh Government reporting structures.
- The Whole School Approach Lead and Deputy Director of Public Health have established regular meetings with Heads of Education and Healthy Schools leads to ensure regular check-ins around progress.

Director of Strategy and Planning**Planning Objective 5C: Business Cases for A Healthier Mid and West Wales**

- A Programme Business Case was submitted to WG in February 2022.
- Scrutiny comment from WG received and responded to by end April 2022.
- Presentation to Infrastructure Investment Board 27 May 2022.
- Land selection process being undertaken by 4 appraisal workstreams
 - o Technical
 - o Clinical
 - o Workforce
 - o Financial and Economic
- Report to Board 4 August 2022
- Transport analysis supports the appraisal workstreams and will help form the basis for the development of the transport strategy.
- Board agreed a shortlist of three sites at the meeting on 4 August 2022 and that the health board would go out to public consultation on these three sites. A consultation plan was presented to the Board on 29 September 2022. And a report detailing the next steps associated with the identification of land for the new Urgent and Planned Care Hospital and associated resources was presented to In-Committee Board on 29 September 2022.
- Progress on Community Infrastructure business cases with Cross Hands Outline Business Case approved by Board in May 2022 and submitted to WG 31 May 2022. Scrutiny comments have been received from WG and the UHB's responses returned on 16 September 2022.

Planning Objective 5U: Community and non-clinical estates strategy

- Our A Healthier Mid and West Wales programme provides the overarching strategic plan for the community and non-clinical estate. This is supported by a developed 'Property Asset Strategy'. The Strategy summarises the baseline estate and identifies the links to planned and approved short, medium estate plans, both estate development and rationalisation plans.
- 'The Strategy' will be a 'live document' updated annually to reflect planned and proposed changes to the retained estate but will be continued to be aligned to the health board's strategic and operational plans, with a focus on estate assets.

Planning Objective 5V: IMTP and operational planning

Given the current financial position of the health board, alongside the fact that the organisation is currently in Targeted Intervention for finance and planning, we will not be in a position to submit a financially balanced plan over the three years of the current Integrated Medium Term Plan (IMTP) cycle, and as such an annual plan within a three-year context will be submitted instead.

Planning Objective 6G: Decarbonisation and green initiatives plan

The health board has been awarded the Platinum level of the Corporate Health Standard; initiatives highlighted that are being delivered/enabled through the Decarbonisation Programme which are:

- new buildings and an upgrade of existing buildings.
- hybrid and electric vehicles across the whole fleet by 2025.
- Development of local supply chains and joint working with other public sector bodies towards sustainable procurement and reduction of waste.
- The health board's Decarbonisation Delivery Plan, agreed by Board in September 2022.

Director of Therapies and Health Sciences

Planning Objective 4P: Recovery and Rehabilitation Service

The aim and vision is to establish effective prehabilitation and rehabilitation services across the length and breadth of the system to support delivery of the best possible health and wellbeing outcomes for our communities and progress recovery of our population following the COVID-19 pandemic. To enable this plan, our Therapy Services identified four workstreams that underpin delivery:

- Performance reporting/demand and capacity Planning.
- Digital delivery
- Workforce plan
- Accommodation and equipment.

Each workstream contains actions to review and develop services across the length and breadth of the patient journey and support the development of service delivery models and appropriate level of care. Actions within each workstream run concurrently requiring continuous and agile programme oversight and governance to ensure projects are not in conflict.

Director of Workforce and OD

Planning Objective 1A: NHS Delivery Framework Targets

Planning Objective was delivered ahead of schedule

ACTIONS DELIVERED

- Delivery leads ensured that the data set being presented was the most meaningful to stakeholders to provide assurance on performance (current performance/performance against trend/actions to deliver improvement if applicable);
- The Workforce Information team researched best practice examples of dashboard presentational styles including recent changes to the way the Performance Team report internally.
- Each target was mapped against the eight strategic statements of intent in the 10 year strategy to demonstrate the link between the target and progress in delivery of our strategy;
- Workforce information team produce the dashboard on a bi-monthly basis for presentation at PODCC.
- In addition to reporting performance for the national delivery targets we liaised with members of the W&OD Leadership Team to propose and explore what other metrics/KPIs are relevant to demonstrate progress against the 10 year strategy
- The dashboard was completed ahead of the target date of 31st March 2022, the dashboard was completed and presented at the February 22 PODCC

ACTIONS OUTSTANDING

- No action is outstanding, the dashboard will continue to evolve as further information becomes available and information is updated.

OVERALL OBSERVATION

- A dashboard was presented to PODCC in Feb22 which included this full range of measures with a number of positive comments received from members of the Committee. The dashboard is presented with overarching SBAR highlighting key issues for discussion.
 - “best dashboard I’ve ever seen”
 - “would like to commend you on this SBAR”
 - “made numerous tricky datasets look meaningful”
 - “positive – take lots of assurance from its content”
 - “really appreciate the simplicity of the messaging with a clear focus on current performance, performance against trend and future actions to address any performance improvement required”
 - “the Dashboard in PODCC looks AMAZING!!! Well done and thank you”
 - “This is absolutely brilliant”

Planning Objective 1B: Retention Plan completed

ACTIONS DELIVERED

- A working group focusing on the retention of our nursing staff has worked diligently with our senior nursing body throughout the year to understand more about the turnover drivers as flagged up by our triangulated surveillance and intelligence.
- Deep dives have been undertaken in specific nurse case study areas and the learning has been discussed and good practice shared. This has helped to dispel some organisational myths eg, around flexible working options, turnover being ‘bad’ rather than positively attributed to a development and career focus.
- The whole approach to exit surveys and exit interviews has been revised in year and is being used to feed into the cultural intelligence, particularly where there is perceived to be a retention issue.
- A new flexible working toolkit has been developed and is due for launch in Spring 2023. This challenges our managers to think more radically about how they match service and staff requirements, being sensitive and accommodating where possible to enable flexibility.

- The work around belonging begins prior to employment and specifically at induction. The revisions made in year to corporate induction and local inductions by managers enable a sense of welcome for staff and helps to anchor their commitment. This important step results in better engagement and earlier productivity rewards as well as mitigating any negative impact on retention by staff who leave new jobs after a few months because they feel they don't fit in.
- Much work has been done in year to promote and train more of our staff in PADR purpose and process and results have shown an improvement over 12 months in 21 of our service areas. This increased engagement around performance and development is a major contributor to our staff feeling valued and having a sense of belonging and commitment to the wider purpose of Hywel Dda.
- Developments in our education offer for staff such as the Making a Difference programme and the Higher Awards Framework are positively impacting on why our staff are choosing to stay with us.
- The retention group has placed much emphasis on supporting the wellbeing of staff, both from a physical and psychological perspective. Enabling access to wellbeing resources by a revised intranet page, as well as tools to help staff and webinars on wellbeing.
- Further work to support the financial wellbeing of our staff has been done in year, promoting our staff benefits via the Hapi App; and by the introduction of 'Wagestream' etc.
- Work is continuing to promote healthy working environments through creating more informal ways for staff to raise issues of concern; to resolve differences and to work through conflict.
- Our proactive work by our ODRM team in relation to our People Culture Plans is another foundational block in our approach to improving staff retention.

ACTIONS OUTSTANDING

- The retention work will continue into 2023/24 with the focus expanding to specific issues relating to medical staff and our AHP colleagues. A further Staff Discovery process will be undertaken to enable us to understand even more about how we can better retain our staff.
- Further explorative work into the pension flexibility changes and how this can encourage our staff to stay will be another important element in our retention work as we move forward.

OVERALL OBSERVATION

- Surveillance work to understand why people are Thinking of Leaving and also Exit Surveys and interviews are helping us to team up more about the issues that are important to our staff.
- Dedicated work has been done throughout the year to understand turnover trends and address issues which our nurses say are important to them such as work/life balance, greater flexibility, and career opportunities. Work on the ground to understand particular service challenges has been progressing via the ODRM's. A group has also been established to work on the retention rates of Medical staff. Our overall staff turnover rates at 10% mean we are the best performing Health Board in Wales.

Planning Objective 1C: Customer service - training and development programme - Complete

ACTIONS DELIVERED

- Between April 2022 – March 2023 690 people attended Making a Difference, with all future sessions running at capacity. Sessions are available in English and Welsh although all Welsh courses to date are undersubscribed. The Department will continue to collaborate with strategic partners to improve uptake although there is some anecdotal evidence that some Welsh speaking colleagues lack the confidence to train in the medium in Welsh. The Department has noted under-representation from certain services and are working closely with them to help improve and maintain attendance.
- Consideration has been given to the merits of providing a Managing Customer Service Excellence module as part of the new management development programme, however agreed that this should be embedded in all modules, providing ongoing nudges and reinforcing at every opportunity.

- To date 100% of attendees would recommend the course to colleagues and a more detailed evaluation is underway with work beginning with Patient Experience Team. Recognising the great work provided on Making a Difference, the programme was shortlisted as a finalist in the CIPD annual awards for Learning and Development Initiative of the Year.

ACTIONS OUTSTANDING

- The target of all members of staff completing the course by Sept 2024 has been discussed and agreed as unachievable however the delivery schedule provides sufficient supply to meet the demand. The course itself continues to deliver the core messages but has received minor updates as a result of ongoing feedback and continuous improvement. A more detailed evaluation is planned now that a full year of delivery has been achieved.

OVERALL OBSERVATION

- Fundamentally, the programme of work planned has been completed and is now operational within the People Development Team. Data in relation to planning objective also forms part of the PODCC data update.

Planning Objective 1G: HR offer (induction, policies, employee relations, access to training)

This planning Objective was split into 5 distinct areas – progress against each is as follows:-

Induction – Develop a streamlined on-boarding process and induction programme, co-designed with our staff. This programme should learn from the best organisations in the world and use local assets and expertise where possible. The organisational values should be at the heart of this programme

ACTIONS DELIVERED

- The new Corporate Induction Programme is fully embedded. New employees receive a carefully structured and varied programme of activity over their first six months of employment which starts with mandatory training and then progresses onto added value support and information. Furthermore, all managers are provided access to a short 20-minute overview of Corporate Induction and a 1-hour training session on how to create an engaging local induction.
- The Department now also provides tailored inductions for overseas nurses and staff who join via TUPE arrangements.
- The Department continues to work collaboratively with other services to design resources and interventions as part of continuous improvement and has shared details of the programme with other Welsh Health Boards as a model of excellence.
- A new database has been built to manage Corporate Induction which will improve the Departments ability to manage volume and improve efficiencies.

ACTIONS OUTSTANDING

- The programme of work is complete. Continuous improvement is maintained through standard operational procedures. A more detailed evaluation will be carried out in due course.

OVERALL OBSERVATION

- The induction is now a complete onboarding package, linked with the automated nudges, regular communication and linked to staff experience, providing opportunities to listen to our workforce.

Recruitment - Develop a prioritised implementation plan which will outline how we will co-design with our staff every stage and element of our HR offer that embody our values. This will address: 1. The way the Health Board recruits new staff.

ACTIONS DELIVERED

- Targeted approach to identify permanent employment opportunities for those appointed to Covid-19 fixed term contracts.
- Research best practice in recruitment with a focus on the candidate's journey.
- Undertook:-
 - Surveys to reflect and learn from the lived experience of the candidate.
 - Focus groups to learn from the lived experience of the candidate and appointing managers.
 - Surveys and focus groups with those who felt unable to apply – e.g. those with learning disabilities, hard to reach communities, carers (in particular young carers).
 - Survey of under represented groups (over 50s and under 24s) to understand how we can improve our recruitment/retention
- Several 'quick wins' were identified which did not require wider engagement and were implemented immediately to deliver improvements:-
 - Welsh Language toggles on Trac now completed for all Appointing Managers by recruitment team.;
 - Buddy System process reviewed for M&D overseas arrivals and rolled out with new poster sent out to sites to promote;
 - Equivalent experience being added to JD/PS where possible;
 - All vacancy approval administration and Trac actions repatriated into Medical Recruitment, with just one form for Appointing Managers to submit;
 - Shortlisting criteria from JD/PS placed onto Trac for Managers by recruitment;
 - ID Badges Pronouns now included on ID Badge application form he/him, she/her, they/them;
 - GOLD accreditation for Armed Forces Covenant;
 - Accommodation poster created and shared to support candidates, recruitment teams and Appointing Managers;
 - Dream Team participated in inclusive recruitment virtual training film;
 - Students targeted via new rolling adverts and links with HE/FE institutions;
 - 55,000 households identified with social value project team – to directly mail 'we are recruiting' leaflets;
 - 3 year advertising contract with BMJ to enhance opportunities for online and print advertising in addition to statutory obligations;
 - Diverse attraction strategies including all school holiday advertising pre-booked to ensure we take every opportunity to capture visitors into our three counties via online and offline methods (eg: trains, buses, petrol pumps, paid for advertising, radio, Spotify, posters etc)
- In addition to recruitment training in formal settings etc (Medical Leaders, Consultant Development, STAR Programme), A variety of recruitment training has been developed and is available to book via L&D.
- Job Description and Person Specification reviews underway.
- Streamlined recruitment for RN recruitment across all 4 sites in place.
- Rolling external recruitment campaign for registrants signposting enquiries directly to campaigns team and process developed to onboard as 'direct hires'
- International Nursing Recruitment centrally managed.
- Internal recruitment is managed in the context of vision for Talent Management and Succession Planning and the volume of appointments which are made internally via an Expression Of Interest process for temporary internal appointments routinely utilised and welcomed by managers as pragmatic in the right circumstances;

ACTIONS OUTSTANDING

- Complete the implementation of the revised Job Description and Person Specification template, a revised All Wales template has been designed and is due to be signed off early in 2023/24, a schedule has been developed to implement over the next 24 months.

PARTIALLY COMPLETED

- Completed with the exception of implementing the revised JD, which is included in a new planning objective for 2023/24 work to modernise recruitment is continuous and will be ongoing throughout 2023/24

OVERALL OBSERVATION

- The work undergone by the recruitment team was captured in the Recruitment Modernisation Pathway Discovery Report presented to PODCC in October 22. The following key elements were embedded to ensure delivery of revised practices and policies for a modernised recruitment pathway:
- New attraction methods were revised including the internet, the new working for Us internet recruitment platform went live in February 2023, Social media utilised, accessibility was improved to reach those harder to reach candidates.
- Vacancy approval was reviewed to reduce duplication including the internal recruitment pathway
- Throughout 2022/23 the recruitment pathway for Registered Nurse recruitment has continued to be streamlined with all Registered Nurse recruitment now centralised.
- Recruitment training was updated to give a 'menu' of bilingual recruitment training. Pulse surveys were established to capture customer satisfaction.

Workforce Policies - Develop a programme to co-design with our staff every stage and element of our HR offer that embody our values. This will address: (2) review all existing HR policies.

ACTIONS DELIVERED

- 36 policies identified for review across Workforce and OD
- Bespoke policy review groups established with stakeholders from across W&OD, managers, employees, and trade union colleagues
- Some policies removed as no longer required
- Some policies changed to guidance
- 34 policy reviews were completed in year (4 were reviewed more than once)
- 6 policies had their review dates extended
 - 2 were due to other workstreams that required completion prior to concluding
 - 2 due to work pressures in that area of work
 - 2 due to ongoing consultation on the review
- All 36 policies now have review dates between June 2023 and March 2026

ACTIONS OUTSTANDING

- N/A

OVERALL OBSERVATION

- Policy work was largely paused during the pandemic to enable resources to be re-directed. This led to a situation where we needed to effectively 'play catch up' to refresh our policy framework to ensure they remained fit for purpose whilst simultaneously considering a new approach to their review and format. This resulted in 36 policies being identified for review in 2022/23 by the stakeholder group. Whilst accepting that we were overly optimistic in what we set out to achieve, a

considerable number were completed (30) others are close to fruition. A small number therefore had their review dates extended. We are therefore able to report all policies identified are compliant and have a review date of 2023/24 and the programme for 2023/24 is already well underway.

Employee Relations process - Develop a programme to co-design with our staff every stage and element of our HR offer that embody our values. This will address: (3) the way in which employee relations matters are managed.

ACTIONS DELIVERED

- Initial stakeholder group established, and terms of reference agreed
- Staff stories gathered
- Current practices reviewed and a dynamic ER Action Plan developed
- 11 Bank Investigating Officers appointed
- To date 22 actions have been completed, 10 are work in progress and the remaining 8 are on hold pending progression of other work strands integral to their completion
- BAME action plan also developed in response to work undertaken by the BAME Advisory Group. Of the 15 actions identified, 10 have been completed, 2 are part of ongoing continuous review and improvement, 2 are dependent on sourcing an ER Case management system and the other remains work in progress.

ACTIONS OUTSTANDING

- No action is outstanding as some of these deliverables will feature as part of a cycle of continuous improvement.

OVERALL OBSERVATION

- Significant work has been undertaken to understand the pinch points in ER process relating to timescales, documentation staff support requirements and communications. The ER action plan has been developed to improve all aspects of our offering from how we manage the process through to completion and evaluation of the timescales involved. Staff surveys have been implemented on conclusion of a Respect and Resolution process to enable data to be gathered on the staff experience so that we continue our process of continuous improvement to better enable our offering in ER matters to align to our core values including kinder people processes.

Equitable Access to training - Following the development of processes to co-design the workforce offer for staff relating to (5) Equitable Access and develop implementation plan to deliver revised practices and policies to an agreed roll out schedule to be completed by March 2023

ACTIONS DELIVERED

- Accessibility and style guide produced
- Access to computers provided
- Support from digital learning team to assist with online learning
- Signposting to additional learning support provided
- Signposting to ESOL support provided
- Awareness raising sessions on neurodiversity delivered
- L&D Policy updated using plain English and providing transparency around processes
- L&D Policy includes 100% funding for approved training

- Office 365 training identified to improve access to learning
- Online and in-person training opportunities provided
- Three roadshows a year planned to ensure 'deskless' workforce receive information on development opportunities
- Corporate Induction includes options for face to face and online training
- Face to face training is delivered across three counties wherever possible

ACTIONS OUTSTANDING

- Digital Learning Team working with Digital Services to remove system barriers preventing use of 'Ease of Access' tools on health board devices. Embed Equitable Access Action Plan into business as usual. All other actions highlighted on the Equitable Access to Training Action Plan, which forms part of the operational work of People Development.

OVERALL OBSERVATION

- In order to continue to drive the equitable access to training agenda, a deep dive is needed by working with the Finance Team, which now forms part of the operational action plan and is part of business as usual work in 2023/24.

Planning Objective 1H: OD Relationship Manager rollout

ACTIONS DELIVERED

- People Culture Plan framework has been designed and developed, including a set of guiding principles to inform the work of the team as they engage with partners.
- The culture framework was designed with staff side partners and elements of our culture plans have been tested out with large groups of staff e.g. at our Medical Conference and The Grand Round and also at our Professional Nursing Conference. Feedback has suggested a strong resonance with our staff for the aspects within the plan.
- The framework has been used with key triumvirate and corporate teams to help them to assess their own cultural journey and determine the cultural aspects they wish to prioritise for action locally.
- A robust cultural progression report was endorsed by our People Committee in December 2022.

ACTIONS OUTSTANDING

- The work of the ODRM team in furthering the progression of the people culture plans will continue throughout 2023/24 and a range of toolkits will be launched for each 'jigsaw' piece of the culture plan so that the resources come to life and become more accessible for managers and staff alike.

OVERALL OBSERVATION

- The role of the OD Relationship Manager has become well established with the links helping to address particularly challenging cultural issues in certain service areas. In addition to this, proactive work to raise awareness commitment cultural intent has been undertaken. The team continues to work closely with trade union colleagues to resolve particular cultural challenges as and when they arise, and to promote healthy working relationships wherever possible. The work being progressed by the team is helping to build Hywel Dda's reputation as an employer of choice.

Planning Objective 4I: Staff experience – discovery report

ACTIONS DELIVERED

- Following the Board acceptance of the Staff Discovery report, a robust action plan was developed in order to progress the themes that staff identified as important to them such as wellbeing; appreciation and recognition and improving ways in which they could express themselves and their issues in an appropriate context.
- A staff wellbeing plan was developed and has been implemented, also a whole new system of appreciating and rewarding our staff has been put in place including long service awards; the Chairs Commendation awards and Hywel's Applause, our new Health Board wide annual awards scheme.
- Our staff surveillance has further developed with our Board Outcome Survey, where one twelfth of our workforce are invited to complete a monthly survey, helping to tell us more about how it feels to be working in Hywel Dda.
- Two major surveys have been completed in year relating to wellbeing; one for Nursing and Midwifery Staff and the other for all staff working in the Health Board exploring their perspective about how we can support their health and wellbeing. These results are being worked through so that the next phase of our wellbeing plan is developed for 2023/24/25.
- Our new Work in Confidence platform launched this year enables our staff to raise any issue of concern in a confidential and psychologically safe way. Our relevant subject experts can then respond and work towards resolving any issues as appropriate.
- Significant progress in year has been made into how we are listening and learning from our staff experiences, and this was presented to the Board in January 2023.

ACTIONS OUTSTANDING

- Building on the success of the Staff Discovery process, a further Staff Discovery will take place in 2023/24 specifically exploring why our staff choose to stay with us, and what can be done to ensure our staff retention rates remain amongst the best in Wales.

Overall observation

- An action plan has been delivered to progress outcomes from the Staff Discovery report as well as the NHS Staff Survey, Medical Engagement Scale and the Nurse and Midwifery Wellbeing at Work Survey. Actions have included a wider range of channels to listen and learn from our staff; more intelligent surveillance to triangulate our cultural understanding and a much broader range of ways in which we show our appreciation and recognition of our staff. When this has combined our approach to people culture planning on the ground, we are seeking some very positive staff experience improvement.

Planning Objective 2A: Integrated Occupational Health & Staff psychological wellbeing offer

ACTIONS DELIVERED

- This objective was delayed due to ongoing All Wales discussions regarding a once of Wales approach.

ACTIONS OUTSTANDING

- This will be a new Planning Objective with a due date by Sept 23. The first step will be to engage the key stakeholders and initial meetings have been arranged for April 23. Plans are being developed.

OVERALL OBSERVATION

- This work is intended to enable a more holistic Wellbeing service with a single website portal to ensure easier access to the Wellbeing services.

Planning Objective 2L: Clinical education plan

ACTIONS DELIVERED

Interprofessional Education Plan

- An Interprofessional Education Plan has been developed and introduced which sets out the changes that are required for the delivery of interprofessional education and training over the next three years and sets out how it aims to provide an innovative and equitable learning experience to staff. With a particular emphasis on interprofessional simulation-based learning, key deliverables will support the implementation of the aspirations set out. A new Educational Governance structure has been set up through Strategic People Planning and Education Group and subgroups are now being formalised.

Simulation Based Education (SBE)

- SBE is a key vehicle for the delivery of the Interprofessional Education Plan, and we have made significant progress in developing our approach. Recognising that Hywel Dda already has significant SBE expertise, simulation spaces and simulation equipment; our aim has been to raise awareness of SBE, map existing delivery, sharing good practice and develop consistent and efficient and consistent approach to simulation-based education and training.
- An SBE Training Co-ordinator has been appointed to develop and roll out SBE across the Health Board. Other success include:
 - A successful HEFCW bid in partnership with Swansea University Simulation for £895K to develop a VR platform and seven scenarios form interprofessional simulation learning.
 - We have held two successful SBE workshops which have been well attended and have helped us develop a network of colleagues with an interest in SBE.
 - Two Essentials of Simulation have been delivered, with four more planned for 23-24.
 - Terms of Reference have been drafted for a Hywel Dda Simulation Group.
 - Links with HEIW Simulation leads have ensured that SBE developments align with the national strategy.
- The Apprenticeship Academy actions included to engage, recruit & onboard 100 HCSW apprentices across Hywel Dda Acute sites as part of the plan to grow the number of clinicians across Hywel Dda. In 2022-2023, 76 health care apprentices were recruited in total. A new Engagement Officer role has been developed and 4 new employees are now in post to support apprentices and other Future Workforce participants. The Engagement Officer role will support the growth by supporting retention through early identification of any development needs. By collaboratively working with the Education Liaison Team, the Engagement Officers will be able to support and signpost to reduce attrition to support the continual growth of the Apprenticeship Academy.
- We have Recruited & onboarded 10 joint Health & Social Care Apprentices who will work across Health Board & local Authority areas. The programme is running well, with a Band 5 Joint Apprenticeship Academy Officer in post providing a high level of pastoral support. Joint working with Pembrokeshire County Council has also provided a wider range of learning and development opportunities for apprentices supporting their education and growth.
- A range of work-based learning qualifications were supported via Clinical Education teams including Level 3 OT, Physio, Rehab, Perioperative support, Ophthalmology and SLT. Level 3 Podiatry and Nutrition coming online to be delivered in early 2023. Resource development in progress. Level 3 Primary Care Diploma being brought back in house from October 2023.
- Level 4 Therapy Assistant Practitioner Diploma was developed and delivered in collaboration with UWTSO, commencing last quarter of the first cohort. 22 learners started the programme and there are 15 progressing through this semester. A once for Wales approach is being developed with Hywel Dda being the host organisation.
- A training needs methodology is under development, with two new training needs analysis being undertaken to support HB wide Dementia training and Duty of candour/ quality, it is expected this will continue to develop 23-24 and be supported via the new SPPEG.
- A new Joint community, social care induction programme is being led by Clinical Education, working in partnership with local authorities, this aims to support and improve skills to care outside acute care settings. A new team has been embedded and programme aims to deliver to 140 people over the first year and started in October, initially it has been very well received, two managers awareness sessions have been undertaken and support for workplace mentors. Next steps include roll out for primary care settings.

ACTIONS OUTSTANDING

- The planning and implementation of the Interprofessional Education Plan will aim to create the environment, systems and processes to deliver interprofessional learning and training. A multi-disciplined WFOD working group is to be established to develop and monitor the six key deliverables:
 - Learning Environment and Culture
 - Educational Governance
 - Supporting Learners
 - Supporting Internal Educators
 - Design and Delivery of Curricula
 - Developing a Sustainable Workforce
- These actions cover finalising the organisational TNA, which despite a pilot being carried out, have not been reviewed and finalised.

Overall observation

- The work completed towards this objective is fundamental in setting the foundations for educational and governance, linked to the Strategic People Planning and Education Governance Group.

Planning Objective 2B: Supporting talent, succession planning and leadership development

ACTIONS DELIVERED

- By March 2023 design a comprehensive range of Leadership Development Pathways to create cohorts of leaders needed to address the challenges ahead. This will include the design of a Graduate Leadership Team Programme for Health and Social Care.
- Leadership Programme delivery has continued at pace with:
 - A Board Development Programme
 - Executive Team Development
 - New Consultant Programme
 - Peer Mentor Programme
 - Behavioural Insight Programme with Warwick University
- Further programmes have been delivered in competition with our partners such as:
 - ARCH Leadership Programme with Swansea University and Swansea Bay Health Board
 - Climb Leadership Programme with Cardiff and Vale Health Board
 - HEIW Graduate Leadership Programme
 - Academi Wales Summer School
- Significant work has been undertaken to research and design a new leadership programme for Hywel Dda (LEAP) and the programme was launched in Spring 2023.
- Design and development of a new talent management and succession planning framework has taken place, ready for a Summer 2023 launch.
- The coaching capacity across the organisation is continuing to grow with 5 cohorts either are completed or underway. The number of qualified coaches is increasing as a consequence and supports the development of a coaching culture across Hywel Dda.

ACTIONS OUTSTANDING

- A decision was taken early in 2022 to defer the development of a graduate leadership programme across health and social care in favour of the development of the LEAP programme above. This was viewed as a more expeditious way of growing our leadership capacity at pace.

OVERALL OBSERVATION

- The significant work programme delivery as summarised above is continuing to build our leadership capacity and capability at several tiers within the organisation, as well as across sites and services: and also across our professional groupings.

Planning Objective 2J: Regional Carers Strategy

ACTIONS DELIVERED

- Health Board Action Plan has been developed through the work of the Carers Strategy Group and aligned to the regional Carers Strategy and national priorities.
- A Health Board staff network continues to offer peer support to staff with unpaid caring responsibilities and a range of awareness raising activities took place throughout the year.
- An annual update report was presented to PODCC at its meeting in February 2023.

ACTIONS OUTSTANDING

- None

OVERALL OBSERVATION

- The visibility of the important role of unpaid Carers has been maintained throughout the year, including presentation to Board on Carers Rights Day in November 2022. Despite the continuing financial challenges of short-term and non-recurrent funding, services commissioned by the Health Board have been reviewed and adapted to respond to the changing needs of unpaid Carers.

Planning Objective 2K: Strategic Equality Plan and Objectives

ACTIONS DELIVERED

- SEP Annual Report, including Workforce Annual Equality Report and Pay Gap Reports were presented to Board in January 2023, following consideration at assurance Committees, Staff Partnership Forum and staff networks. As required, all reports have been published on the Health Board website.
- As part of the Public Sector Equality Duty, Equality Impact Assessments have been carried out for service change and policy development and, for key strategic decisions such as the project for the proposed urgent and planned care hospital

ACTIONS OUTSTANDING

- None

OVERALL OBSERVATION

- In 2023/24 a key focus will be on the refreshing of the Strategic Equality Plan objectives, which are a legal requirement for the Health Board. Work has already commenced with other statutory partners to develop joint consultation and engagement activities with the population and our staff.

Planning Objective 4A: Improved outcomes for Homeless and vulnerable groups

ACTIONS DELIVERED

- Homeless and Vulnerable Groups Health Action Plan developed in conjunction with the Homeless & Vulnerable Groups Partnership Forum; end of year report of activities completed.
- Accessible Communication Action Plan developed in conjunction with the Sensory Loss Partnership Forum; end of year report of activities completed.
- The Community Development Outreach Team (CDOT) increased engagement with marginalised and ethnically diverse communities to support access to health services and health information. This included targeted support to Ukrainian refugees.

ACTIONS OUTSTANDING

- None

OVERALL OBSERVATION

Whilst the NHS Delivery Framework requirements were amended in 2022/23, the Health Board has continued to produce an annual report of progress against these former requirements to ensure that progress and momentum against the existing standards are maintained.

Planning Objective 3N: Improved outcomes for Veterans

ACTIONS DELIVERED

- An Armed Forces Covenant Plan has been developed in conjunction with the Armed Forces Steering Group.
- Identification of a Primary Care Armed Forces Champion, Dr Anthony Dew through our work with the Cluster Leads is helping to shape future actions.
- There has been positive engagement with the veteran and Armed Forces Community during the year, as summarised in the “Supporting the Armed Forces Community 2022/23” newsletter. This highlighted a range of actions to promote employment opportunities, access to priority treatment and staff well-being initiatives.
- Members of the Armed Forces Network have actively supported events.
- Commemorative benches were installed across all main hospital sites and have been welcomed by staff as recognition of the contribution veterans and service members make.

ACTIONS OUTSTANDING

- Work is on-going in relation to a review of the Priority Treatment pathway for veterans and this will be further enhanced by a project team who will work together under the EQiP programme commencing in Q3 of 2023/24.

OVERALL OBSERVATION

- The Armed Forces Covenant Duty was enacted in November 2022 and this strengthens the legal requirements of the Health Board to pay due regard to the needs of the Armed Forces Community when making decisions. The Armed Forces Covenant Duty has been incorporated into the Equality Impact Assessment process to ensure that the legal requirements are met. Work will be continuing in 2023/24 to progress existing areas of work and identify new actions. This includes making an application for the Veteran Aware award, which is part of the Veterans Healthcare Alliance, and builds on our existing Gold Award as part of the Defence Employers Recognition Scheme.

Medical Director / Deputy Chief Executive

Planning Objective 3G: - Research and Innovation:

2022/2023 was the third year of implementing the Research and Innovation Strategy published in March 2021. Significant progress has been made against each of the goals contained within the strategy:

- 1) Improving the quality and impact of our activities. Performance in 2022/23 has been strong. On key performance indicators, including recruitment to time and target, the University Health Board has been a top performer in Wales. The research set up and quality assurance arrangements have been further strengthened, with improved performance reflected in the key performance indicators.
- 2) Invest in our staff and facilities. In 2022/23, a leadership programme for all B7s took place and there was continued investment in our research facilities, with the new research facility in GGH becoming operational and plans finalised for a new facility at BGH. The TriTech and Innovation function reached full establishment, increasing the expertise available to the University Health Board to support innovation and evaluation.
- 3) Grow research and innovation activity in areas of strength and opportunity. New clinical research time awards have been secured in orthopaedics and women's health. This dedicated time has translated into tangible research starting in both areas. A substantial research grant was also secured in ophthalmology. A systematic review of our biobank ultimately concluded that we should no longer develop this service, and an exit strategy has been implemented.
- 4) Develop strong and effective partnerships with academic, healthcare, industry and research organisations. The TriTech and Innovation function has matured and resulted in several prestigious grant awards. These include grants to support the University Health Board's involvement in European Union projects and several new commercial partnerships with industry. Our University Partnerships have also matured, with several achievements including applications for research grant funding, continuation of joint posts, and an increasing number of honorary awards.

The next 12 months will conclude this strategic planning period and work will commence around our next strategy.

Planning Objective 5K: Effective Clinical Practice Strategic Framework

- An Effective Clinical Practice Strategic Framework has been developed and approved by the Effective Clinical Practice Advisory Panel, which identifies what effective clinical practice is and how clinical service areas and individual clinical professionals will be supported to ensure that their practice is clinically effective. This contributes to the Health Board's overarching objectives of striving to deliver and develop excellent services; the best health and wellbeing for our communities; Safe, sustainable, accessible and kind care; and sustainable use of resources. A Delivery Plan has also been developed which details how the Effective Clinical Practice Strategic Plan will be delivered, and the practical targets that will be worked towards to support the delivery of the strategic plan. One of the key achievements delivered through this plan during 2022/23 was the introduction of the Audit Management and Tracking (AMaT) System which facilitates compliance reviews against NICE and other national guidance; acts as a central repository for local and national clinical audit, and enables tracking of inspection recommendations and corresponding actions. AMaT is being introduced to increasing numbers of teams and individual clinicians and is well received. A toolkit has been developed and published on the intranet to support the delivery of the Strategic Framework, consisting of step-by-step bitesize animated videos. This will be disseminated across the Health Board during 2023/24, including at a site roadshow which is being planned to commence from June 2023.
- A new Clinical Standards and Guidelines Group has also established, whose purpose is to identify priority areas for the clinical effectiveness team to direct resources; support clinicians and service areas to assess themselves against the clinical effectiveness standards and guidelines, using this information to learn and improve; and oversee the adoption, implementation of and adherence to nationally recognised clinical standards and guidance. Several services have been welcomed to attend this group during the year, receiving advice and support from group members who represent teams including Quality Improvement; Value Based Health Care; Digital Innovation and Transformation; and Risk and Assurance.
- We have engaged proactively with Health Technology Wales on their adoption audit work, which supports the adoption of their non-medicines guidance within Wales, where recommended.
- A key challenge experienced during 2022/23 has been a limit on the speed with which we have been able to introduce the AMaT system due to resource constraints.
- This work will become Business As Usual in 2023/24, during which there will be specific focus on alignment with the Health Pathways programme and Clinical Services Plan.

Planning Objective 6D: Value Based Healthcare and Patient Reported Outcome Programme

2022/23 represented the first year of implementing the Value Based Health Care plan published in January 2022. Significant progress has been, as described below against each of the plan's objectives:

- Enabling staff to routinely use PROMs and resource utilisation data in planning, organising and delivering healthcare. In 2022/23, work has been undertaken with eight service areas: Heart Failure; T&O Hips and Knees; T&O Shoulders and Elbows; Diabetes; Colorectal Cancer; Chronic Pain; Lymphoedema; and Cellulitis. Implementation of action in response to the PROM capture and resource analysis varies by area but notable improvements are being made in some. For example, in Heart Failure the work supported by the VBHC team has contributed to a 50% reduction in acute Heart Failure admissions and a 92% reduction in the time between Heart Failure patients being referred, being diagnosed, and having medication optimised. Alongside the focused work with areas, we have continued to develop PROM capture solutions and worked with informatics to visualise and understand these data.
- Developing the knowledge and skills of our staff to put the theory of VBHC into practice. The focus in 2022/23 has been on an applied practitioner programme, to support teams put the principles into action. Seven teams have gone through the programme and are starting to implement action in areas including Irritable Bowel Disease, Chest Pain, and Same Day Emergency Care; and
- Establishing partnerships to optimise the wider societal benefits of adopting a VBHC approach and accelerate the innovations with demonstrable potential to securing them. Developments in 2022/23 have included the appointment of a Professor of Rural Health Economics at Aberystwyth University and associated team, with a focus on securing the wider impacts of VBHC. The TriTech and Innovation Division have also committed to evaluating innovations and technologies through the lens of value. One particularly relevant project is a partnership with Amgen to better understand risk of cardiovascular disease and target treatment in the community.

Alongside these achievements, 2022/23 has seen the introduction of strengthened governance arrangements through the introduction of a management group to ensure the delivery of the ambitious plan is supported.

Planning Objective 4L: Social Model for Health and Wellbeing (SMfHWB)

Tangible progress has been made towards the agreed goal of designing and implementing a process that moves the Health Board towards adopting the social model for health and wellbeing.

- In partnership with Aberystwyth University a systematic review of the literature on the Social Model for Health and Wellbeing was completed in November 2022. The findings of the report have been accepted and communicated to internal and external partners and have formed a basis for ongoing development of a Triangulation report.
 - Ongoing – the triangulation report and subsequent ideas for development will be presented to Board in June 2023.
 - Ongoing – Finalise the revised report to be submitted for publication in academic journals (TBC).
- The thematic review of the 'conversations with a purpose' (CwaP) undertaken with thought and system leaders in Wales was delivered by PHW colleagues. The findings have been disseminated to internal and external partners and stakeholders including participants in the process.
 - Ongoing – further work to ensure participants in CwaP work are included in the development of the project is required.
- The Social Model for Health and Wellbeing Steering group has been formalised and – to date – reflects the breadth of the scope of interest in the work, due to its system wide relevance.
- Engagement with PSBs and the voluntary sector around the HBs objective to transform the way it works has been particularly strong. Wellbeing plans in all three counties reflect the health boards strategic direction and concrete examples of partnership working can be evidenced through the development of PO4U and its focus on three county-specific community engagement projects.

- Stakeholder and partnership mapping has been an ongoing theme, due to the nature of the work and the growing network of interested parties.
 - Ongoing – the SMfHWB steering group agreed in principle for a multi-layered communication plan that will enable external stakeholders to engage with the work in a timely manner, through the development of a ‘living diary’ platform, as well as a workforce facing information sharing site, to enable key partners within the Health Board to be involved in, and informed by the project’s direction of travel. The outcomes are due to be delivered in 2023-2024

Planning Objective 4N: Food Systems

The food systems project has delivered wholly or in part on its key outcomes of producing a detailed and reliable map of the whole food system in Mid and West Wales, compiling a body of relevant and timely evidence that can provide information and intelligence to HDUHB and its partners about the food system and its impact on health and wellbeing in the region and formalising a well-established stakeholder group from across the food system that identifies planning objectives - both new and current - to enable HDUHB to optimise the food system as a factor in population wellbeing.

- The Food System Feasibility Report was delivered in June 2022, by North Star Transition. The report identified key stakeholders, food system pathways and opportunities, challenges, disconnects and knowledge gaps within the regional food system. The suggested key actions have been evaluated and have formed the basis in part of the current work programme.
- A Food Systems Action Group (FSAG) was formed on the recommendations of the NST feasibility report. It has been structured to reflect the interests of internal stakeholders due to the wide (and widening) number of interested parties within the HB itself, who require a mechanism to network, share good practice, resources and opportunities across the whole food system work plan. Its governance structure has been developed to reflect the various governance structures that exist for national and regional projects and to avoid the group becoming overly bureaucratic in nature.
 - Ongoing - Membership is developing as and when new links are identified. The requirement to look outside of the HB will become more necessary in 23-24.
- FSAG has begun the process of identifying and communicating ongoing national, regional, local and hyper-local food projects that are already in train.
 - Ongoing – complete the task of collating all programme and project goals and outcomes that the HB has agreed to deliver from across the food system and articulate the ask for all stakeholders. This reflects the learning of the group as well as the learning from the feasibility report that there are well defined projects and programmes in place that reflect the wide reach of food in the health and wellbeing agenda, but are yet to be connected in to a cohesive whole.

Planning Objective 4U: Community Engagement

There has been significant progress to date in the work to engage with communities within the HDUHB area around the issues most pertinent to the Social Model for Health and Wellbeing.

- Three projects have been identified in the three counties, each of which were identified by the communities themselves and with insight and direction from PSB, Voluntary Sector and statutory stakeholders. The three projects are:
 - Transforming Tyisha in Carmarthenshire
 - Crymch and Newport Development Group
 - Ceredigion Public Services Board Sub-Group Meeting: Well-being in Lampeter
- In addition to engaging in the community-led projects, the project to date has:
 - linked with other programmes, such as the Rural Futures Programme, to learn how they identified communities and work with them.
 - explored work in other systems on community leader support, e.g. Create Gloucestershire Catalyst Training Programme.
 - explored how community-led, place-based activity can be measured, e.g. NICE Guidelines NG44, Lincus software or national indicators and national milestones for Wales as required by sections 10(8) and 10(3) of the Well-being of Future Generations (Wales) Act 2015.

- set up multi-agency county-level groups, called “Creating change together in...”. The county-level groups comprise representation from County Voluntary Councils (CVCs), Local Authorities and Public Services Boards (PSBs)
- Ongoing communication is taking place, e.g. PO 4U was presented at the Carmarthenshire Carers’ Forum (December 2022) and at a Regional Preventions Board meeting (January 2023).

No single Director responsibility

Planning Objectives 5A: National NHS Performance Targets and 5B: Local Performance Targets

Key elements of the work plan achieved through 2022/23 include:

- Review our performance measures in line with the WG 2022/23 Performance Framework
- Work with our teams to develop trajectories for our WG and key improvement measures
- Provide support and training for directorates so they can easily access their performance measures so that they can identify and action any improvements required
- Ensure that all directorates have a process in place to consider their performance and ensure that they are aware of how to access training and support where required
- We also take into consideration our accountability conditions with respect to performance and where current targets are falling behind.
- Our performance update is available through our Integrated Performance Assurance Report.

Planning Objective 5N: Implement National Network and Joint Committee Plans

HDdUHB is a partner in a number of local, regional and national programmes. For example, through ARCH (A Regional Collaboration for Health) the health board is developing a wide range of regional service initiatives such as:

- Cardiology
- Neurosciences
- Pathology
- Diagnostics
- Cancer
- Dermatology
- Eye care

Planning Objective 5O: Fragile services

This planning objective has focused, in alignment with planning objective 5N, on stroke services. Key developments have included:

- Minimum Clinical Standards for Stroke Services across the region have been drafted.
- Drafted a Comprehensive Regional Stroke Centre (CRSC), formerly known as Hyper Acute Stroke Unit) Business Case has been prepared.
- Next steps include CRSC business case agreement by the Steering Group and completion of baseline activity.