



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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	30 November 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Update on Annual Plan 2023/24
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lee Davies, Executive Director of Strategy and Planning
SWYDDOG ADRODD: REPORTING OFFICER:	Dr Daniel Warm, Head of Planning Shaun Ayres, Deputy Director of Operational Planning and Commissioning

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

The UHB's Annual Plan 2023/24 was agreed at the March 2023 Public Board. It set out the key actions and ambitions for the Health Board for the forthcoming financial year, in order to provide services whilst responding to operational, workforce and financial pressures, and making progress towards our Strategic Objectives. The key elements of our plan include:

- Delivery of the ministerial priorities (progress set out in the Integrated Performance Assurance Report)
- Delivery of our financial plan and mitigating actions (progress set out in the Financial Report) and
- Progression of our Planning Objectives

This report predominantly provides an update on the Planning Objectives for 2023/24, following the Annual Plan report to the September 2023 Public Board. It also describes the high-level approach to developing the 2024/25 Plan, building on the learning from this year's Plan and the work as part of Targeted Intervention including the independent peer review.

Cefndir / Background

The Health Board has been utilising Planning Objectives for the past few years as part of our overall planning approach.

The purpose of our Planning Objectives is to:

1. Set out the key objectives necessary in the near-term to improve services and make progress towards our strategic goals
2. Provide clarity about our organisational priorities
3. Establish the key work programmes for the organisation, including governance and leadership, key deliverables, resources and risks and enablers
4. Enable the Board and Board Committees to assess and measure progress in conjunction with the Board Assurance Framework

For 2024/25, the Health Board agreed 23 Planning Objectives, a significant reduction on previous years, reflecting an intention to be more focussed and to bring more consistency to the approach.

Following previous discussions with the Board, the September 2023 Public Board report identified the potential need to slow or pause certain aspects of Planning Objectives, in order to prioritise in-year delivery. It was noted that the exact implications of this would need to be further assessed by Executives and brought back to Board and Committees.

Throughout 2023/24, the Health Board has also been seeking to evolve its approach to planning, linked to the Welsh Government's escalation of the organisation to 'Targeted Intervention'. Building on the learning from the independent peer review, the planning maturity matrix assessment and other past reviews relating to planning, the Health Board has been developing its planning processes and business practices, with a particular focus on savings delivery and triangulating plans across service, workforce and finance.

Asesiad / Assessment

Financial Position and Core Delivery Group

An update on the financial position and progress with the financial plan is presented in the Financial Report; however, it is worth noting here that, due to our current financial position, an Accountable Officer letter was submitted to Welsh Government in October 2023 identifying a deviation from the original plan. The Health Board remains in an extremely difficult financial position; however, significant work has been undertaken over recent months to enhance the delivery of savings and de-risk the position as much as possible. Central to this is the work of the Core Delivery Group (CDG), which has been established to coordinate, support and oversee the delivery of savings. This new arrangement reflects a concerted effort to evolve the Health Board's approach to planning and delivery and a broader shift in focus to in-year savings.

As part of Targeted Intervention, the Health Board is working towards a minimum of Level 3 maturity across all domains within the planning maturity matrix. Whilst the Health Board's progress has not been formally re-assessed yet, there is evidence of progress within the work of the CDG; however, it is acknowledged that these are steps on a planning journey.

In addition to improving the in-year financial trajectory, the CDG has established a foundation for aligning service, workforce and financial plans, in accordance with the Level 3 maturity expectations.

In order to further refine and embed this methodology, work is underway to formalise the process for developing, delivering and monitoring savings initiatives (based on the 'Hywel Dda Way' principles). This includes clear governance and more robust programme/project management, applying the learning from the Savings Governance Review.

Planning Objectives

As noted, our Planning Objectives (POs) play a significant role in our Annual Plan, and progress with POs is overseen via the Health Board's Committee structure. In light of the ongoing work to support financial recovery planning, and as presented to the Board in September 2023, the Planning Objectives for 2023/24 have been reviewed.

As these decisions may impact upon the aspirations and milestones described in our 2023/24 Annual Plan, a review of the key deliverables for Planning Objectives has been undertaken to

provide clarity for the Board on progress to date and intentions for the remainder of the year. The updated status for the delivery of the Planning Objectives is shown in Appendix 1.

Planning Cycle for 2024/25 Plan

Whilst the focus has remained on delivery of the 2023/24 Plan, work has begun on the Planning Cycle for delivery of the 2024/25 Plan.

At this stage, the Planning Framework produced by Welsh Government (which provides the context and scope of the Plan) has not yet been received; however, it is envisaged that the planning framework will largely be a continuation of the current version.

For 2023/24 the Ministerial Priorities centred on:

- Urgent and Emergency Care
- Delayed Transfers of Care
- Planned Care recovery, Diagnostics and Pathways of Care
- Cancer recovery
- Mental Health and Child and Adolescent Mental Health Services (CAMHS)
- Access to Primary Care (and Community Services)

Given that these priorities continue to be the clear areas for assurance by Welsh Government, the likelihood is that these will remain core to the development of the 2024/25 Plan. This will be underpinned by the development of a set of Ministerial Templates (as set by Welsh Government) and service delivery plans.

The current assumption, on the basis of guidance from officers in Welsh Government, is that plans will need to be submitted by 31 March 2024. Key activities and milestones for Plan development within the Health Board are aligned to this.

Development of the Plan will be through the new Planning Steering Group on behalf of the Executive Team and overseen by the Strategic Development and Operational Delivery Committee. The Group's responsibilities include but are not limited to:

- Ensure that there are clear roles and accountabilities across the organisation to develop and deliver key operational plans including ensuring triangulation with workforce and financial plans
- Establish and oversee appropriate governance arrangements
- Approve the design and oversee the implementation of documentation and reporting templates
- Ensure that risks are identified, with clear plans for mitigation, and escalated appropriately
- Agree the provision of project and programme management support, including finance, planning, workforce, and other corporate team support arrangements as necessary
- Ensure there is clarity on the route to outcomes, focusing on financial impacts such as cash releasing and productivity
- As required, ensure that all plans have the appropriate Quality and Equality Impact Assessments
- Ensure that a comprehensive and coherent planning process is undertaken
- Adopt a systematic process for monitoring the ongoing implementation of plans, utilising performance metrics and milestones to gauge progress
- Conduct a detailed review of all plans every quarter. This quarterly review is designed to evaluate the effectiveness of current delivery, assess alignment with organisational

objectives, and propose necessary adjustments based on evolving circumstances and goals

Argymhelliad / Recommendation

The Board is asked to:

- **NOTE** the continued work of the Core Delivery Group
- **APPROVE** the changes to the milestones and timelines in the delivery of the Planning Objectives
- **NOTE** the approach for the production of the 2024/25 Plan

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. 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:	Not applicable																
Rhestr Termiau: Glossary of Terms:	<table> <tr> <td>AHP</td> <td>Allied Health Professional</td> </tr> <tr> <td>ANTT</td> <td>Aseptic Non Touch Technique</td> </tr> <tr> <td>ARCH</td> <td>A Regional Collaboration for Health</td> </tr> <tr> <td>BAU</td> <td>Business as Usual</td> </tr> <tr> <td>BCORP</td> <td>(Certified) B Corporations</td> </tr> <tr> <td>BGH</td> <td>Bronglais General Hospitals</td> </tr> <tr> <td>CLES</td> <td>Centre for Local Economic Strategies</td> </tr> <tr> <td>D&C</td> <td>Demand and Capacity</td> </tr> </table>	AHP	Allied Health Professional	ANTT	Aseptic Non Touch Technique	ARCH	A Regional Collaboration for Health	BAU	Business as Usual	BCORP	(Certified) B Corporations	BGH	Bronglais General Hospitals	CLES	Centre for Local Economic Strategies	D&C	Demand and Capacity
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DNAs	Did Not Attend
DPoC	Delayed Pathways of Care
DToC	Delayed Transfers of Care
DU	Delivery Unit
ENT	Ear, Nose and Throat
FBC	Full Business Case
FIT	Fecal Immunochemical Test
GA	General Anaesthetic
GGH	Glangwili General Hospital
GI	Gastro-intestinal
GMS	General Medical Services
HB	Health Board
HCSW	Healthcare Support Worker
HEIW	Health Education and Improvement Wales
IPAR	Integrated Performance Assurance Report
IPTS	Integrated Psychological Therapies Service
LINAC	Linear Accelerator
LPMHSS	Local Primary Mental Health Support Services
OPA	Out Patient Appointment
PADR	Performance Appraisal and Development Review
PID	Project Initiation Document
PIFU	Patient Initiated Follow-Up
PIN	Prior Information Notice
PO	Planning Objective
PPH	Prince Philip Hospital
PREM	Patient Reported Experience Measure
PROM	Patient Reported Outcome Measure
PSA	Prostate Specific Antigen
PSB	Public Service Board
PV	Public Value
R&D	Research and Development
RPB	Regional Partnership Board
SAS	Speciality and Specialist (Doctors)
SBUHB	Swansea Bay University Health Board
SCAMHS	Specialised Children and Adolescent Mental Health Services
SIM	Simulator
SMfHWB	Social Model for Health and Wellbeing
SOC	Strategic Outline Case
SoS	Seen on Symptom
UHB	University Health Board
UWTSD	University of Wales Trinity St David's
VBHC	Value Based Health Care
WG	Welsh Government
WGH	Withybush General Hospital
WHC	Welsh Health Circular
WLSS	Waiting List Support Services

Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Executive Team
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Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	This is a key component in the delivery of the Integrated plan for the period 2023/24
Ansawdd / Gofal Claf: Quality / Patient Care:	This is a key component in the delivery of the Integrated plan for the period 2023/24
Gweithlu: Workforce:	This is a key component in the delivery of the Integrated plan for the period 2023/24
Risg: Risk:	Risks will be assessed as part of the ongoing process of both the development of the 2023/24 Plan and its subsequent monitoring
Cyfreithiol: Legal:	As above
Enw Da: Reputational:	Hywel Dda University Health Board needs to meet the targets set in order to maintain a good reputation with Welsh Government, together with our stakeholders, including our staff
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Consideration of Equality legislation and impact is a fundamental part of the planning of service delivery changes and improvements.

Review of Planning Objectives November 2023

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
1a Develop an attraction & Recruitment plan	<ul style="list-style-type: none"> Redesign all job description & person specs with focus on key responsibilities and core requirements breaking down qualifications to allow broader understanding of requirement. Schedule to be developed by 30/06/23 with timescales for completion for key roles. Implement new methods of advertising and appointing to roles including non-electronic methods and move from traditional interviews where appropriate to do so. To commence 01/04/23 Develop programmes for employability support for public, managers and future leaders Develop attraction plan linked with R&D, service development, improvements, innovation, benefits, and educational offer to new recruits Appoint to vacancies via different employment pools, e.g. <ul style="list-style-type: none"> -in 2023/24 appoint 42 clinical apprentices -in 2023/24 appoint 8 nonclinical apprentices -appoint 140 overseas nurses -scope and begin to appoint overseas doctors & AHPs -develop 100 opportunities for students to join the nursing and hotel facilities banks -develop 36 opportunities for HCSWs to join Level 3 development pathway and 30 HCSWs to Level 4 development pathway to become registrants -Explore the possibility for the introduction of medical apprenticeships Enhance the HB offer to improve the lives of local population by implementing initiatives to support social responsibility requirements and supporting areas of deprivation e.g., local volunteering 	1	Slowed – to be aligned with work across Wales. Commence quarter 4 and complete in 2024/25
		1	Complete (now business as usual)
		4	Paused – deferred to 2024/25
		2	Delayed – quarter 3
		4	Complete
		4	As per plan
		4	Paused – appointed 97
		2	Complete – recruitment campaign underway
		2	TBC
		4	Complete
2	As per plan		
	Paused – due to impact of releasing staff		

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
1b Develop career progression opportunities	<ul style="list-style-type: none"> Identify and target development pools to support future registrant roles Scope opportunities to support individuals to develop with career progression or develop skills and gain experience to enhance role, which may include on and off the job training and flexible employment opportunities Reshape Higher Awards process to link with Training Needs Analysis and deliver the workforce with the skills required for the future Develop an inter-professional education plan to commence delivery with full implementation by 1/1/26 	3	Deferred to 2024/25
		2	Delayed to quarter 3
		4	As per plan
		3	As per plan
2a Engage with and listen to our people	<ul style="list-style-type: none"> Implement single point of access for health and wellbeing services with parity of service support for physical and psychological wellbeing Wellbeing charters are fully embraced Deliver kind people processes to support individuals during challenging times to note improvements Undertake second discovery report to listen and understand how best to support staff retention Implement Strategic Equality Plan actions to enhance Hywel Dda as a diverse and culturally inclusive organisation that supports staff, patients, carers and the population we serve Promote, and provide proactive and responsive support to local teams to enable healthy and happy working cultures 	3	Complete
		2	Slowed – quarter 4
		4	As per plan
		3	As per plan
		4	As per plan
		4	As per plan
2b Continue to strive to be an employer of choice	<ul style="list-style-type: none"> Increase the HB education and development offer, supporting enhanced opportunities to develop outside the workplace Through workforce effectiveness stabilisation programme improve staff experience by filling substantive vacancies and thereby reduce reliance on external locums and agencies for medical, AHP and nursing specifically, 3 year trajectory but in year actions to be agreed for all work streams 	4	Paused – due to releasing staff
		4	As per plan

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	<ul style="list-style-type: none"> Widened choices to be developed by 31/3/24 relating to employment contracting opportunities Enable job enrichment by enhancing roles and ways of working where appropriate, methodology and core principles to be developed Plan developed to optimise digital opportunity and facilitate cost effective workforce agility Further develop and spread people recognition informally and formally internally and externally 	4 2 4 4	As per plan As per plan As per plan As per plan
2c Develop and maintain an overarching workforce, OD and partnerships plan	<ul style="list-style-type: none"> Implement succession planning and leadership management pipeline Further develop short and long-term workforce plan for services and professional groups Understand our people by using quantitative and qualitative data Develop a process of listening and learning from staff experiences ensuring regular feedback Promote a culture of innovation and enhance university health board reputation 	4 4 4 4 4	As per plan As per plan As per plan As per plan Paused
3a Transforming Urgent and Emergency Care programme	<p>Implementation of a 24/7 urgent care service, accessible via NHS 111 Wales to support improved access and GMS sustainability</p> <ul style="list-style-type: none"> Development of a Regional fully Integrated 24/7 Clinical Streaming Hub; Development of a Care Home Support for Regional Clinical Streaming Hub; <p>Implementation of Same Day Emergency Care services</p> <ul style="list-style-type: none"> Development and implementation of HDUHB optimal SDEC model following on from lessons learnt from peer review, including modelling of scale of opportunity 	April '25 3 3 3	As per plan Delayed to Q4 Delayed to Q4 Delayed to Q4

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	<ul style="list-style-type: none"> Development of Consistent Approach to Front Door Streaming / Assessment Units <p>Delayed Pathways of Care</p> <ul style="list-style-type: none"> Regular monthly reporting of 'Pathways of Care' (DIOC) to be introduced for 2023 – 24: Implement a Regional approach to reviewing and action planning to reduce delays by 'reason' Reduction in backlog of delayed transfers through early joint discharge planning and coordination: Phased implementation of Optimising Hospital Care tool kit supported by Frontier Discharge Platform 	2 2	Complete Ongoing and trend reducing
3b Healthcare Acquired Infection Delivery Plan	<ul style="list-style-type: none"> Reduce Clostridioides <i>difficile</i> (<i>C.diff</i>) infections Reduce Gram negative bacteraemia (<i>E.coli/Klebsiella/ Psue.auriginosa</i>) Reduction in <i>S.aureus</i> bacteraemia Pilot of Rapid Response cleaning team in Glangwili hospital Compliance with (WHC) 2018-033 airborne isolation room requirements Improve mandatory ANTT compliance with training and competency assessment Improve hand hygiene compliance for both staff and patients 	4 4 4 4 4 4 3	As per plan – improvement achieved to date As per plan – mixed progress to date As per plan Brought forward – pilot commenced, to conclude 3 rd Dec Delayed to 2024/25 – pathway agreed, full compliance will require capital funding As per plan – improving position As per plan – overall some improvement, more work required
4a Planned Care and Cancer Recovery	<p>Planned Care</p> <ul style="list-style-type: none"> Dedicated wards areas for elective inpatients Further improvements in the volume of patients booked / treated from cohort numbers Incremental improvements in outpatient, day case and inpatient activity throughput as determined by workforce development and recruitment plans Clinical leadership and adoption best practice guidance to support improved productivity and efficiency to support outpatient and surgical treatment activity 	1	Complete Complete improving and Ongoing – Q4 Outpatients Complete. Treatments Ongoing Q4 Complete

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	<ul style="list-style-type: none"> • Focused and targeted validation of waiting lists, utilising local resources and external support • Active support to long waiting patients awaiting access to care via our locally developed Waiting Lists Support Service (WLSS) • Close scrutiny and monitoring of delivery plans by specialty to support these ambitions • Refined and improved 2023/24 Demand and Capacity planning tools <p>Continue actions from quarter 1</p> <ul style="list-style-type: none"> • Review of General Surgery clinical pathways to further enhance See on Symptom (SoS) / Patient Initiated Follow-up (PIFU) / Follow-Up clinical practice • Commissioned insource solution for patch testing patients (Dermatology) • Additional internal / external capacity (subject to allocation of WG Recovery funding) • Implementation of Urology self-care pathway based on Patient Knows Best(PKB) platform • Clinical audit of Urology PSA monitored patients to further release OPA capacity • Additional Urology diagnostic capacity (supporting cancer and RTT pathways) • Locum appointments (ENT) • Increased ocular capacity following appointment of additional consultant (Ophthalmology) • Additional weekend pre-assessment capacity (Ophthalmology) • 50% expansion of elective orthopaedic In-Patient operating capacity compared to 2022/23 level 	<p>2</p> <p>3</p>	<p>Complete</p> <p>Complete</p> <p>Ongoing and improving</p> <p>Complete</p> <p>Ongoing – Q3 delivery</p> <p>Ongoing – Q4 delivery</p> <p>Complete</p> <p>Ongoing – Q4 delivery</p> <p>Complete</p> <p>Appointment made. Complete in Q3</p> <p>Complete</p> <p>Ongoing – Part of Regional Planning Discussion Now</p>

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	<p><u>Regional</u> Implementation of regional diagnostic plan actions (subject to WG Recovery funding).</p> <ul style="list-style-type: none"> • Continue actions from quarters 1 and 2 • Implement alternative vasectomy pathway delivered via Sexual Health Service • Additional Vascular theatre capacity following introduction of new vascular scanner • Enhanced Urology core capacity following return of post-retirement consultant • Expanded lithotripsy capacity (Urology) • Expanded Urology theatre capacity at Glangwili • Additional consultant and SAS capacity (Dermatology) • Additional primary care based minor ops capacity (Dermatology) <p><u>Regional</u> Continue to work with Swansea Bay University Health Board (SBUHB) on taking forward regional solutions via the Regional Commissioning Group (RCG) and the A Regional Collaboration for Health (ARCH), particularly in areas such ophthalmology, endoscopy and orthopaedics</p> <ul style="list-style-type: none"> • Continue actions from quarters 1, 2 and 3 • Anticipated impact on reduced OPA demand following implementation of primary care FIT testing from April 2023 • Undertake a review of key gaps to meet future years targets and progress towards 36-week monitoring 	<p>4</p> <p>1</p>	<p>Ongoing – Delivery Q4</p> <p>Ongoing Delivery Planned Q4</p> <p>Planned end Q3</p> <p>Complete</p> <p>Complete Complete Complete Complete</p> <p>Ongoing. Regional Orthopaedic Programme established Q3</p> <p>Complete Ongoing – National focus has changed to reducing long waiters at Stage 4. Complete – FIT implementation</p>

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	<ul style="list-style-type: none"> Urology Improvement Group to be established June 2023 (supported by Improvement Cymru and Wales Cancer Network) Refresh demand and capacity within Urology diagnostics. Improved compliance to first OPA within 7 days, straight to test pathways and 28 day performance improvement. Monitor compliance of implemented improvement plan within lower GI Review outcomes from PREM analysis and work with value based healthcare team to agree recommendations 		<p>In progress to be established in Q4 Complete</p> <p>Complete</p> <p>Complete</p> <p>Ongoing</p> <p>Ongoing</p>
4b Regional Diagnostics Plan	<ul style="list-style-type: none"> Delivery of the operational actions in respect of each diagnostic service as reflected in the Annual Plan for 2023/24 Establish a <u>Regional Diagnostic Board</u> (May) that will report to the ARCH Regional Recovery Group and then to subsequent management boards (or equivalent) in each health board A <u>comprehensive regional demand and capacity analysis</u> will be completed across all disciplines, including establishing and mapping workforce issues, with a view to identifying and understanding gaps in the systems. A <u>Regional Diagnostics Workshop</u> will be held when D&C work complete, to develop a Regional Diagnostics Model, explore all options available and plan a process for monitoring and escalation <u>Develop a Business Case</u> for both Health Boards Executive Boards agreement outlining any potential financial ask and next steps. This will include any requests for funding that could be sought for regionally led and managed programme resource for programme delivery from central funding 	<p>4</p> <p>1</p> <p>2</p> <p>2</p> <p>3</p>	<p>Complete</p> <p>Ongoing – Q4</p> <p>Partially Complete – likely completion Q4</p> <p>Partially Complete – likely completion Q4</p> <p>Ongoing – Q4</p>
4c Mental Health Recovery Plan	Mental Health 111		

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	<p>Q1: Communications and engagement activity to transfer to national team in line with a targeted national advertisement campaign.</p> <p>Q2: Establish monitoring processes to capture national minimum data set and local targets</p> <p>Q3: Review demand and capacity against call volumes/length/presenting issue following national advertisement campaign.</p> <p>Q4: Finalise national and local reporting requirements/timelines – on all age open access line and professional line.</p> <p>Specialist Child & Adolescent Mental Health Service (SCAMHS)</p> <p>Q1: Undertake demand and capacity review against service need. Report monthly through Heads of Service meeting. Continue to review training needs against workforce skill mix.</p> <p>Q2: Work collaboratively with RPB colleagues to seek sustainable funding for Kooth on-line counselling platform. Ensure staff have adequate digital resources to efficiently and effectively manage service demand.</p> <p>Q3: In line with the 'No Wrong Door' approach SCAMHS will work with multi-agency referral panels to agree community interventions to reduce the demand on secondary care services</p>	<p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>1</p> <p>2</p> <p>3</p>	<p>1. Q2 delay to national communications campaign due to another Health Board being unable to provide 111 Option 2 24/7 until Q4. To mitigate additional funding approved to undertake targeted local campaign, commencing in Q3.</p> <p>2. National minimum data set agreed in Q1, monitored through national dashboard. Met all targets in Q1 & Q2.</p> <p>3. Q1 – Q4 demand and capacity is reviewed monthly in line with staff rota requirements. This will be monitored in line with the local and marketing campaign in Q3 and Q4.</p> <p>4. Q1 – Q4 weekly monitoring reports produced and shared Directorate wide and with partner agencies. Qualitative Service User Distress Scores (SUDS) introduced in Q1.</p> <p>1. Q1 & Q2 a range of staff have attended/booked to attend demand and capacity training delivered by the DU. Bench marking on track based on clinical cases and near misses. Service mapping has been completed. A robust training plan has been developed. Successful funding of therapies training for staff via Health Education and Improvement Wales (HEIW) additional funding.</p> <p>2. Q2 The Service has commissioned Kooth until March 2024 via in year underspend from Service Improvement Funding (SIF). Q3 & Q4</p>

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	<p>and mitigate against waiting lists. Clarify how the SCAMHS Primary Mental Health Service structure aligns with the Measure</p> <p>Q4: Continue quarterly meetings with Delivery Unit colleagues. Monthly reporting and monitoring via IPAR. Monthly returns to Welsh Government.</p> <p>Local Primary Mental Health Support Service (LPMHSS)</p> <p>Q1: Introduce text messaging service for appointment reminders to mitigate DNAs and increase attendance.</p> <p>Q2: Implement 'test the concept' approaches to provide additional community support e.g. family support workers</p> <p>Q3: Introduce additional evidence based group interventions as appropriately identified through the review, utilising community venues to increase uptake.</p> <p>Q4: Service reporting on maintained trajectories to move to business as usual.</p>	<p>4</p> <p>1</p> <p>2</p> <p>3</p> <p>4</p>	<p>plans are underway for a business proposal to the PB for consideration for future funding.</p> <p>3. Q3 & Q4 the strategic work on 'No wrong door' is ongoing and being led by the RPB. Scoping of possible models for multiagency referral panels underway. Discussions to take place with partners to explore options for multi-agency panels.</p> <p>4. Q1 – Q4 regular meetings are scheduled with WG and the DU in line with Enhanced Monitoring procedures. IPAR updated monthly.</p> <p>1. Q1 introduced pilot test messaging reminder service in IPTS and LPMHSS (Adult). Q3 undertake review of DNAs versus text reminders sent over Q1 and Q2 to identify correlation and further actions. Q3 discussions are taking place to introduce in group therapies Primary Mental Health (Ceredigion and Carmarthenshire).</p> <p>2. WG has provided sustainable funding to develop a GP Cluster based Well-being Service. Q2 successful recruitment of 5 out of 7 Band 5 Well-being Practitioners and Band 6 Clinical Lead. Q3 the remaining 2 posts being readvertised. Q2 agreed with GP colleagues that 1 Practitioner will be based in each cluster area for ease for referral. The service has developed close links with 111 option 2 to</p>

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
			<p>enable direct referrals for face-to-face interventions.</p> <p>3. Q1 & Q2 pilot group interventions took place from May – July in a community venue in Carmarthenshire. Uptake and retention were improved, with positive feedback received. Q3 finalising scheduling plans for 4 groups which will run simultaneously in the Autumn term in Llanelli, Carmarthenshire, Neyland and Aberystwyth. Working with Third Sectors and community organisations to identify suitable venues that can be utilised for group work.</p> <p>4. The service has continued to demonstrate improved compliance with improving trajectories and is on track to reach full compliance for Part 1 Q4.</p>
5a Estates Strategies	<ul style="list-style-type: none"> • Completion of the WG commissioned Clinical Review • Completion and submission of Board approved SOC • Land consultation for new Urgent and Planned Care Hospital reported to Public Board • Submission of regional 10-year capital plan to WG • Agile Toolkit launched • Board sign-off of Property Strategy • Submission of FBC for Cross Hands 	<p>2</p> <p>2</p> <p>2</p> <p>2</p> <p>2</p> <p>2</p> <p>4</p>	<p>Complete – awaiting WG finalisation</p> <p>Delayed – subject to WG further guidance</p> <p>Complete</p> <p>Complete</p> <p>Complete</p> <p>Complete</p> <p>As per plan</p>
5b Research and Innovation	<ul style="list-style-type: none"> • Put in place arrangements to grow oncology research trials • Adequate funding secured through Health and Care Research Wales to support core research delivery establishment • Complete programme of work to establish ‘fit for purpose’ research facilities at all Hospital sites 	<p>4</p> <p>3</p> <p>4</p>	<p>As per plan</p> <p>As per plan</p> <p>Delayed – WGH building constraints</p>

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	<ul style="list-style-type: none"> • Increase the number of clinicians with dedicated research time incorporated into their job plans/PADRs • Achievement of Site Level Research Delivery Plans • Delivery of year two of the TriTech Business Plan objectives • Explore and secure opportunities to diversify the TriTech and Innovation portfolio in view of national and international interest • Review the size, structure, and capabilities of the TriTech team in view of experience and priorities for the next 12 months 	4 4 4 4 4	As per plan As per plan Complete As per plan As per plan
5c Digital Strategy	<ul style="list-style-type: none"> • Release of the PIN to the market outlining our intention for a strategic partner • Development of a capacity and capabilities assessment • Commercial assessment, and proposed route to market • First draft of outline programme business case • Second draft of programme business case ready for Sustainable Resources Committee • Finalised specification for strategic partner • Finalised, programme business case, identified route(s) to market, supplier assessment, and recommendation to the Board to progress to procurement 	1 1 2 1 2 1 2	Complete Complete Quarter 4 – Finalised business case to Board Complete – report on November Public Board Quarter 4 Complete Quarter 4
6a Clinical services plan	<ul style="list-style-type: none"> • Establish programme governance • Project governance, scope to be agreed for Primary Care • Project governance and scope to be agreed for remaining Clinical Service Plan Pathways and Working Groups. • Undertake public consultation on Urgent and Emergency Paediatrics service model and report to Public Board • Issues paper(s) to be developed and presented to Public Board • Scope of projects to be finalised and agreed by Board following issues paper 	1 Tbc 2 3 4 4 Tbc	Complete Complete Complete Complete – report on November Public Board As per plan – aiming for Board Seminar in February and Public Board in March As per plan – aiming for Public Board in March

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	<ul style="list-style-type: none"> Options paper(s) to be developed and presented to Public Board 		As per plan – to be determined following issues paper and scope agreed
6b Pathways and Value Based Healthcare	<ul style="list-style-type: none"> HDUHB HealthPathways programme platform launch Deliver activity relating to Goal 1 from the second year of the VBHC programme plan (enabling value driven change in service areas) Procurement of a new PROMs capture solution, adhering to local requirements, and national standards/frameworks Deliver activity relating to Goal 2 from the second year of the VBHC programme plan (Education and Upskilling) Deliver activity relating to Goal 3 from the second year of the VBHC programme plan (partnerships and innovation) Implementation of a minimum of three 90-day rapid value cycles, designed to quickly evaluate whether there is case to change a processes/practices/procedures when considered through a VBHC lens. 	<p>3</p> <p>4</p> <p>4</p> <p>4</p> <p>4</p> <p>4</p>	<p>As per plan – launch 13 December 2023</p> <p>As per plan</p> <p>As per plan</p> <p>Focus moved to developing capability to construct Value driven business cases and capture of patient expectations and goals.</p> <p>As per plan</p> <p>As per plan</p>
6c Continuous engagement	<ul style="list-style-type: none"> Produce a series of standards and guidance on continuous engagement to promote good practice across the organisation Develop a series of engagement opportunities that build on the range of ‘Willing to listen’ events that aim to gain an understanding of what would motivate people within the Rising Risk Groups to be more aware of their own health and their own agency in connection with their health. Agree a process for monitoring and evaluating continuous engagement with seldom heard groups and individuals with protected characteristics. Establish a mechanism for measuring the triangulation of feedback from all sources of engagement with public, patients and staff, to ensure that the work of Hywel Dda 	<p>3</p> <p>3</p> <p>3</p> <p>4</p>	<p>Delayed to Q4</p> <p>Some progress made – working with UWTSD on local engagement events.</p> <p>Delayed – Q4</p> <p>Delayed – Q4</p>

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	University Health Board is informed and influenced by the views and perspectives of all our stakeholders		
7a Population Health	<ul style="list-style-type: none"> • Develop and implement, in partnership, a comprehensive and strategic plan to improve population health and wellbeing and tackle the leading causes of preventable ill health and early death. The overarching plan will include specific action plans to address Tobacco control, the statutory Alcohol Harm Reduction and Drug misuse plan, emotional wellbeing, suicide and self-harm, physical activity and nutrition, health and housing and gambling 	Plans 2023 Implementation: 2023/25 Evaluation 2024/26	As per the Plan As per the Plan As per the Plan
7b Integrated Localities	<ul style="list-style-type: none"> • Project initiation. Design and deliver a PID with outline project plan • Sector engagement and issues development focussing on: <ol style="list-style-type: none"> 1. workforce and building system capacity including community services and multi professional working 2. patient empowerment and increased directed self-care 3. Sustainability 4. premises 5. quality and safety 6. finance and investment 7. digital 8. services closer to home • Engagement programme with the Primary Care Sector & HDUHB operational/corporate stakeholders to gain insight and feedback on the issues, and opportunities <ol style="list-style-type: none"> 1. workforce and building system capacity including community services and multi professional working 2. patient empowerment and increased directed self-care 3. Sustainability 4. premises 5. quality and safety 6. finance and investment 	2 2	This has now been subsumed into the primary and community care strategy element of the Clinical Services Plan PO 6a.

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	7. digital 8. services closer to home <ul style="list-style-type: none"> Engage, review and revise a Primary Care and Community Strategy 	3	
7c Social model for Health and Wellbeing	<ul style="list-style-type: none"> Defined projects that focus on formalising steps to operationalise the move to a SMfHW in the three identified groups of <ul style="list-style-type: none"> Our Workforce Our Partnerships Our Communities Embed SMfHW into other major Health Board programmes of work Embed the concept of whole system approach to Food for wellbeing into HB BAU Communication <ul style="list-style-type: none"> E-Document to provide progress updates Communication - Engagement platform SMfHW Online Presence– Internal & External Agree at least one community in each Local Authority for initial place-based activity. Produce a “For information” SBAR for Executive Team summarising decision-making process to identify at least one community in each Local Authority for place-based activity. Carry out or support direct engagement with community members to map assets and determine priority areas of need and appetite for involvement. 	2 2 2 2 4 April '24 1 1 April '24 1 April'24 April'24	In progress, e.g. Employer Supported Volunteer In progress, e.g. Social Innovation In progress, e.g. Creative engagement in Pembs In progress, e.g. aligning with 10,000 conversations Paused due to staff being released Paused due to staff being released Paused due to staff being released Paused due to staff being released Paused due to staff being released Complete Complete- SBAR produced April 2023 In progress- exploring alignment with 10,000 conversations / creative engagement in Pembs Likely to be delayed

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	<ul style="list-style-type: none"> Produce a “For information” SBAR for Executive Team summarising direct engagement activity with community members. Seek / obtain / contribute to a list of “community leaders” in each community identified for place-based activity. Explore the potential and feasibility of supporting the implementation of a Moondance Cancer Initiative (MCI) project in schools in the Health Board area. 		<p>Focus shifted- identified workforce in communities</p> <p>In progress- MCI to be delivered Q4 2023 or Q1 2024 (Tyisha, Llanelli)</p>
8a Decarbonisation & Sustainability	<ul style="list-style-type: none"> Aberystwyth Public sector Low Carbon Heat Project – deliver detailed design; Develop scoping and feasibility to deliver public / private solar farms Continue to deliver PV spend to save scheme Deliver new Energy Performance Contract via RE:FIT 4 Procurement Framework to select partner to deliver multiple phase low decarb. projects Agile Toolkit launched Board sign-off of Property Strategy Deliver roll out of electrical vehicles lease scheme Arrange/complete feasibility studies on car charging infrastructure (for fleet vehicles). Decarbonisation Awareness/Training - e-learning / decarb video / Green Teams. Green/Sustainable Procurement Policy – continue engagement to improve carbon performance with the supply chain. Green Healthcare Strategy – identify best practice projects, delivered and being planned, and support delivery Delivery of the ‘Secondary Care Inhaler Recycling Project’ 	<p>4</p> <p>4</p> <p>2</p> <p>4</p> <p>2</p> <p>2</p> <p>Ongoing</p> <p>2</p> <p>3</p> <p>2</p> <p>4</p> <p>4</p>	<p>On Hold - remains on hold pending funding support</p> <p>As per plan - Continuing to engage with Private developer (PPH) and Pembs LA (WGH)</p> <p>Delayed - complete PV scheme at SPH by Q3</p> <p>As per plan - Capital monies approved to deliver on the objective by Q4</p> <p>Complete</p> <p>Complete - endorsed by Board in July 23</p> <p>As per plan – now 69% up from 10% in 2019</p> <p>Completed – feasibility report produced in Aug 23</p> <p>Complete – Sustainability/carbon literacy videos/training on the Sustainability Hub</p> <p>Complete - Procurement have developed the Sustainable Procurement Policy</p> <p>Delayed – this is being led by the Approach to Healthcare workstream. This initiative requires a longer-term plan</p> <p>On hold – funding was pulled by WG and is no longer available.</p> <p>Complete – on ESR</p>

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	<ul style="list-style-type: none"> Carbon Literacy – Implementation of the ‘Achieving Net Zero in Wales’ E-Learning via ESR 	3	
8b Local Economic and Social Impact	<ul style="list-style-type: none"> Reassess HDUHB utilising the BCORP measurement system. Following the reassessment, develop a target trajectory and improvement plan for HDUHB to take to SRC for agreement to proceed annually Work with stakeholders to develop a network of Social Value + individuals Work with estates to map what assets are available to be used while identifying what is most needed by SVEs locally Update and maintain the Social Value+ sharepoint page to engage and educate staff about social value+ activities Actioning of the Public value action plan and continued work with CLES Work with procurement to enable maximisation of social value to be created with contract tendering and ensure projects are managed post tender to allow transparency around actual vs tendered amount 	3 3 4 April'24 April'24 April'24	Deferred to 2024/25 – elements to be included in 8c
8c Financial Roadmap	<ul style="list-style-type: none"> Establish Executive and Board appetite for the level of change necessary to become more financially sustainable – with individual scenarios modelled and level of reductions in expenditure required Develop both demand side and supply side models of the impact of demographic change on the likely level of demand and capacity available to the health board over the next 5 years. Develop modelling of the likely impacts of national and local initiatives on financial and operational performance. 	1 2 2 2	<p>Scenarios modelled and discussed at Exec Team and Board Seminar July 2023</p> <p>Outline demand model created for ten year time horizon, and initial assumptions tested. Supply model for staff, assets etc in the course of construction</p> <p>Key assumptions in respect of funding, WG policy change etc incorporated. Will be revisited in phase 3, consideration of HB policy options</p>

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	<ul style="list-style-type: none"> Identify and model the impact of changes to operational delivery that seek to reduce the usage of hospital beds and instead provide care in a more appropriate and cost-effective manner. Collaborate with a range of health board directorates and services on developing proposals for inclusion within the strategy relating to demand, supply, configuration and other factors that impact our long term sustainability (see communicate / collaborate section below) Propose changes to medium term strategies that deliver more financially sustainable services and seek approval from Exec / Board before embedding in a financial strategy Finalise strategy and embed in future budget and planning discussions to ensure delivered 	<p>2</p> <p>2</p> <p>4</p>	<p>This is next phase once phase 2 (supply modelling) has been completed. Anticipated that Phase 3 will commence December 2023, likely to take 6 months.</p> <p>Ongoing. Engagement event with a wide group of clinical and managerial leaders planned for January 2024.</p> <p>Included as part of Phase 3. List is currently being compiled of suitable topics, initiatives and potential programmes of work.</p> <p>At conclusion of phase 3, likely to be summer 2024</p>
8d Welsh Language and Culture	<ul style="list-style-type: none"> Following the Discovery process, we will deliver a Welsh Language plan that supports the ambitions of our health board to enhance our Welsh language and culture across the health board and engages and inspires our staff, patients, and broader communities. Strive to comply with all aspects of the Welsh Language Standards: Support staff to ensure that in carrying out their duties they promote the Welsh Language and recognise that patients receive care in their language of need as a key patient experience and quality of care issue. Support managers to recruit Welsh speakers and support staff to learn/improve staff Welsh Language skills in order to achieve our 10 year target (Bilingual Skills Policy) 	<p>1</p> <p>Annually</p> <p>Annually</p> <p>3</p> <p>Tbc</p>	<p>Complete</p> <p>Business as usual</p> <p>Business as usual</p> <p>Business as usual</p> <p>Delayed to quarter 4</p>

Planning Objective	Action	Original Quarter	Revised Quarter / Timeline
	<ul style="list-style-type: none"> • Develop a communications campaign to explain the importance of the Active Offer to staff (as outlined in WG More than Just Words) • Continue to maintain and deliver a robust translation service for the whole Health Board 	Tbc	Business as usual