



CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

DYDDIAD Y CYFARFOD: DATE OF MEETING:	30 November 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Clinical Services Plan Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lee Davies, Executive Director of Strategy and Planning
SWYDDOG ADRODD: REPORTING OFFICER:	Yvette Pellegrotti, Anna Henchie, Conrad Hancock, Ben Rogers, Principal Programme Managers, Transformation Programme Office

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 Health Board has an approved health and care strategy, “A Healthier Mid and West Wales – our future generations living well”, which sets out our vision for health and care services across Hywel Dda, including the future configuration of services. This remains our direction of travel and was reinforced through the Programme Business Case approved by Board in January 2022. The fragility of our services was a key driver for the strategy and remains a risk that has been further exposed through the COVID-19 pandemic.

The purpose of this report is to provide an update on the programme of work to develop a Clinical Services Plan, as agreed by [Board in March 2023](#), in response to these fragilities and based on the principles of care that is safe, sustainable, accessible, and kind. The development of a Clinical Services Plan is also an action within the Targeted Intervention requirements of Welsh Government.

Cefndir / Background

The long-term plans for services remain as per those set out in our strategy; however, there is a need to consider service provision over the medium term. Prior to the pandemic, and in our strategy, it was recognised that many of our services are fragile, predominantly because our clinical teams are spread across multiple sites and therefore there is an over-reliance on a small number of individuals. This remains the case and, in certain areas, for example critical care, that risk has materialised. Similarly, there are services that have not returned to pre-pandemic activity levels, which is limiting access for patients, e.g. for those patients awaiting elective surgery.

At the Board meeting held in March 2023, it was agreed that the following services required focused support and would form a programme of work to deliver a Clinical Services Plan (CSP):

Table 1: Drivers for Pathways within scope of the Clinical Services Plan Programme

Service	Driver	Executive Lead
Critical Care	Response to service fragility, in particular at Prince Philip Hospital (PPH)	Director of Operations
Urgent and Emergency Paediatrics	As per the outcome of the current consultation	Medical Director / Deputy Chief Executive
Planned Care	To support the return to pre-COVID activity levels (as a minimum), as part of improving access and reducing waiting times for patients	Director of Operations
Emergency General Surgery	To respond to service fragility, particularly at Withybush Hospital (WGH), as referenced in the March 2023 operational update	Director of Operations
Stroke	To meet standards and respond to service fragility	Director of Therapies and Health Science
Diagnostics	To support the return to pre-COVID activity levels (as a minimum), as part of improving access and reducing waiting times for patients	Director of Operations
Primary Care	To respond to the service sustainability issues as discussed at the Extraordinary Board Meeting in February 2023	Director of Primary Care, Community and Long-Term Care

The [Board update in May 2023](#) highlighted the development of the governance, scope, and programme approach for the Clinical Services Plan and, within this, that the issues development for a service would be considered at a Health Board level, noting the drivers above may be pathway or site specific. The update also noted that the Clinical Services Plan programme approach may have up to three phases: Phase 1 being the issues development, Phase 2, if required, options development, and Phase 3, if required and approved to do so, further engagement and/or consultation.

The [Board update in July 2023](#) highlighted progress and the establishment of the project groups, subgroups, and task and finish groups as described within the governance structure. This update also gave reference to the programme timeline, resources required to deliver the programme, as well as how services would be managed within the governance structure.

[The Board update in September 2023](#) highlighted positive progress with reference to the delivery of the workstreams within the Clinical Services Plan subgroups. Specifically, the scoping of concerns data, development of surveys, and activity data as to support and issues paper. In addition to this an update on the scope and inclusion of the approach for primary care was highlighted in [The Project Plan to Develop a Primary Care Strategy](#). Reference was also made to the Reinforced Autoclaved Aerated Concrete (RAAC) issue and In Year Recovery Planning work impacting the programme, thus creating additional timeline risks to programme delivery.

Asesiad / Assessment

Programme Update

Within the reporting period, the Clinical Services Plan programme has seen good progress with several key items included in the methodology. These include, but are not limited to:

Patient Experience Subgroup:

- Staff Survey closed on 20 October 2023: 353 responses were received, and independent analysis is underway with Opinion Research Services (ORS)
- **Targeted early engagement survey** with service users closed on 2 November 2023: 6056 responses were received, and independent analysis is underway with Opinion Research Services (ORS)
- A review and documentation of all updates to **Public Board – temporary changes and Risks has been completed**
- **Clinical effectiveness** – NICE Guidance and other national guidance review has been completed
- A review of **Compliments, Complaints and Incident Data** has been defined and will be moved into the Activity Modelling Subgroup for validation with task and finish groups as well as for further analysis and development
- A survey is currently being developed for Primary Care targeting the workforce in the four contractor services, GP out of hours and community dental services

Communications & Engagement Subgroup:

- A high-level Communication and Engagement Plan has been drafted for the programme with additional information to be included from Primary Care following the stakeholder mapping sessions. Activity is being undertaken in line with the plan. The following has been completed within this reporting period:
 - A programme webpage has been established on the Health Board's website for the Clinical Services Plan programme
 - A programme internal staff webpage has been established for the Clinical Services Plan programme
 - Staff early targeted engagement workshop took place, along with additional drop-in sessions supported by targeted communication
 - Communication to support the survey completion with both staff and patients.

Activity, Informatics, and Finance Subgroup:

- The Clinical Services Plan activity dashboard is being finalised and contents are being validated within the task and finish group structure. Template reporting structures have been agreed to support the issues paper
- In addition to this, the Workforce, Incident, Complaints and Claims data is also being processed and assessed using the methodology, thus following the same process as the activity data. This is with reference to validation and production of report templates where relevant, to support the issues paper
- With reference to Primary Care, there will be variations identified under the structure of the methodology due to the nature of available information for contracted services

Programme Timeline

Following the [Board update in September 2023](#) where programme risks were identified with reference to delivering an issues paper for Board in January 2024, these included the availability of operational teams, programme teams, and corporate teams to develop the issues paper. These risks have been realised. Within this, the timeline for the external analysis of the

Early Targeted Engagement has been impacted and, therefore, will not be available in January 2024. The Early Targeted Engagement with both colleagues and patients is a vital component of the issues paper methodology.

For Primary Care, as the scope was defined within the Board update in September 2023, the project is currently finalising the Provider Early Targeted Engagement approach.

As the programme contains ten service domains, it is expected that a summary of information for discussion and consideration will be taken to the Board Seminar in February 2024, with the production of an issues paper for Board in March 2024.

- The Board is requested to approve the change of timeline for the production of the issues paper to Board for March 2024
- Within this, to note that the programme will seek a decision on the scope of the next phases of the programme for each service, including understanding which services require a deliberative conversation and options appraisal phase, reviewing their configuration as to deliver sustainable services for the interim years until the development of the proposed new hospital network.

Clinical Services Plan Service Updates

Please find below an update to specific services within scope of the Clinical Services Plan.

Urgent and Emergency Children and Young People's Services (Paediatrics) Consultation

The Urgent and Emergency Children and Young People's Services (Paediatrics) Consultation is being discussed by the Board as a separate agenda item.

Stroke

The Stroke Task and Finish Group has continued to progress programme actions, although it has been impacted by resource constraints and representation for its weekly meetings. Mitigations are being put in place to ensure the Stroke workstream will deliver in line with programme objectives, including assurance from sites within the Health Board to support the development of an issues paper. This includes, but is not limited to, the Early Targeted Staff and Patient Engagement.

The Stroke national programme is also planning a national engagement approach which is anticipated to be completed in Quarter 4 2023/2024. Included within this, the ARCH regional Stroke Programme is reviewing 'assess and transfer' data as to understand the potential impact of Comprehensive Regional Stroke Centres in both North Wales and South West Wales.

Stroke national guidelines (NICE) were updated in October 2023, and now include details with reference to supporting Telerehabilitation as an alternative to face-to-face appointments where appropriate, and where patients are consenting to support this approach.

Planned Care

Development of the issues paper is ongoing for all Planned Care services:

- Orthopaedics
- Ophthalmology

- Urology
- Dermatology
- Emergency General Surgery
- Critical Care and Medical Emergencies

Project Group and Task and Finish Groups continue to meet regularly, although due to operational pressures, attendance at some meetings has been impacted. Programme governance has been finalised and is detailed within the completed Project Initiation Documents (PIDs). Equality Impact Assessments are underway for each service and will remain live documents throughout the development of the Clinical Services Plan programme.

Updates relating to current operational activity will form part of the Operational Update report if applicable.

Diagnostics

The Diagnostics Project Group includes radiology and endoscopy. Both services are also being considered at a regional level as part of ARCH. Project managers have met with ARCH representatives to ensure alignment with the planned programme of work. In addition, the ARCH regional workshop for Community Diagnostics was attended on 25 October 2023 to understand the future requirements of these services for the Health Board and wider region.

The Task and Finish Group meetings have experienced varied attendance levels due to service issues and pressures. Stakeholder maps have been produced and incorporated into the PIDs. EqlAs for the services are being progressed in line with the other services. Site leads have reviewed the workforce information, the risks that have been reviewed by the Board and the activity information, in preparation for the issues paper.

Primary Care

A scope and high-level plan for the development of a primary care and community services strategy was taken to [Board in September 2023](#). It was noted that the scope for the community services element of the project required additional refinement, but that progress to develop an issues paper for primary care – as part of the wider CSP programme approach as reported to [Board in July 2023](#) – would continue.

The primary care issues paper development is now being supported by all CSP subgroups. The development is adhering to the agreed methodology being used by all CSP pathways. It is apparent that there will be variations in the data that can be collected, due to how primary care is structured. Areas of difference include workforce, activity data and concerns data. Where such variation occurs, the context and rationale of any such matter will be clearly articulated within the issues paper itself.

The issues paper is focussed on the four contractor services which make up primary care, as well as the GP out of hours services and community dental services. The Health Board has collected a wealth of feedback from the population in regards to primary care, most notably the [FINAL Primary Care Feedback Report - Building a healthier future after COVID-19.pdf](#). Following a review of the patient experience data available, and receipt of advice from the Consultation Institute, it was agreed that the information available from a patient experience lens for primary care services is sufficient at this stage to support informing the issues paper from an Early Targeted Engagement approach. It was noted that the voice of the four contractor services is required at this stage to facilitate a whole system viewpoint.

Argymhelliad / Recommendation

The Board is asked to:

- **TAKE ASSURANCE** that the Clinical Services Plan programme is progressing in line with the Board agreed plan.
- **APPROVE** the proposed timeline adjustment for the production of the programme issues paper. Now to be presented to Public Board in March 2024, with a summary view for discussion at Board Seminar in February 2024.
- **NOTE** that, at the Public Board meeting in March 2024, the programme will seek a decision on the scope of the next phases of the programme for each service, including understanding which services require a deliberative conversation and options appraisal phase.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:
Datix Risk Register Reference and Score:

- 1363 - (Critical Care) Inability to safely support Level 3 Critical Care provision across PPH and GGH (current score 20)
- 1082 – (T&O) Lack of Major Trauma Weekend Theatre Sessions GGH (current score 20)
- 1383 (Endoscopy) Nursing Staffing Issues/recruitment (current score 8)
- 1254 - (Endoscopy) Prince Philip Reconfiguration (current score 8)
- 1531 - (General Surgery) Inability to safely support on call rota at WGH and GGH (current score 10)
- 1084 - (General Surgery) Surgical Rota at PPH (current score 9)
- 1235 - (Urology) Urology Urgent Suspected Cancer (USC) and PCNL (PERCUTANEOUS NEPHROLITHOTOMY) Treatment Delays (current score 16)
- 1407 - (Corporate Level Risk) Risk to delivery of Annual Recovery Plan & achievement of WG Ministerial Priorities or the reduction in elective waiting times
- 1488 - (Endoscopy) Decontamination BGH (current score 12)
- 1092 - (OPD) Progress against F/UP OPD Targets (current score 12)
- 1255/56 - (T&O) Lack of Orthogeriatric Consultants and ANP Support (current score 20)
- 747 - (Dermatology) Delivery of sustainable Dermatology Service (current score 8)
- 1428 - (Rheumatology) Unable to meet Service requirements (current score 4)
- 632 - (Ophthalmology) Ability to fully implement WAG Measures (current score 16)
- 1066 – (Ophthalmology) Inability to provide nursing staff to cover required level of activity within Ophthalmology across HB (current score 9)

	➤ 1234 - (OPD) Inadequate ventilation GGH/WGH (current score 12)
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:	6. Sustainable use of resources 3. Striving to deliver and develop excellent services 5. Safe sustainable, accessible and kind care
Amcanion Cynllunio Planning Objectives	6a Clinical services plan 4a Planned Care and Cancer Recovery 4b Regional Diagnostics Plan
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Contained within body of the report
Rhestr Termiau: Glossary of Terms:	Contained within body of the report also: BGH – Bronglais Hospital WGH – Wthybush Hospital GGH – Glangwili Hospital PPH – Prince Philip Hospital CSP – Clinical Services Plan ARCH – A Regional Collaboration for Health GIRFT – Getting it Right First Time QSEC – Quality, Safety and Experience Committee EqIA – Equality Impact Assessment
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Board (March 2023 for approval to deliver the Clinical Services Plan Programme) Board (May 2023 for an update on progress of the Clinical Services Plan) Board (July 2023 for an update on progress of the Clinical Services Plan) Board (September 2023 for an update on progress of the Clinical Services Plan) Board (September 2023 Project Plan to develop a Primary Care and Community Strategy) Executive Team

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	At this early stage of the programme, it is not possible to assess the potential financial implications. An early task is to identify the support required for each of the areas and this may lead to some financial impact.
Ansawdd / Gofal Claf: Quality / Patient Care:	The Clinical Services Plan is intended to improve Quality and Patient care but at this stage this cannot be assessed.
Gweithlu: Workforce:	The programme is in response to workforce challenges. The impact will be assessed as the plans are developed.
Risg: Risk:	As outlined above.
Cyfreithiol: Legal:	N/A
Enw Da: Reputational:	It is anticipated there may be political and media interest in the development of these plans. A communication and engagement plan will be developed as part of the programme.
Gyfrinachedd: Privacy:	N/A
Cydraddoldeb: Equality:	This will be assessed as service plans are developed.