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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	30th January 2020	Agenda Item	3.1
Report Title	Delivering our Clinical Services Plan and Integrated Three Year Plan 2020/21-22/23		
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Report Sponsor	Siân Harrop-Griffiths, Director of Strategy Lynne Hamilton, Director of Finance Hazel Robinson, Director of Workforce and OD		
Presented by	Siân Harrop-Griffiths, Director of Strategy Lynne Hamilton, Director of Finance Hazel Robinson, Director of Workforce and OD		
Freedom of Information	Open		
Purpose of the Report	<p>This paper and accompanying Appendices provide an update of the work undertaken to date in delivering the Clinical Services Plan (CSP) Programme through the aligned process for the development of the Health Board's integrated medium term plan (IMTP) for 2020/21-22/23.</p> <p>The paper also includes the WHSSC Integrated Commissioning Plan (ICP) for approval by the Board as part the national planning processes.</p>		
Key Issues	<p>The key issues addressed in this paper include:</p> <ul style="list-style-type: none"> Continued alignment of CSP and IMTP planning The development process and timescales of the Integrated Three Year Plan 2020/21-22/23 The WHSSC ICP for approval Issue, risks and next steps 		
Specific Action Required (please choose one only)	Information	Discussion	Assurance
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> Note the continued alignment of the CSP and IMTP planning Note the progress in developing the Health Board's IMTP 2020/21-22/23 		

	<ul style="list-style-type: none">• Approve the WHSSC ICP• Endorse and support the next steps.
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DELIVERING OUR CLINICAL SERVICES PLAN AND INTEGRATED THREE YEAR PLAN 2020/21-23

1. INTRODUCTION

This paper describes the progress made in developing our Integrated Three Year Plan in alignment with delivery of the clinical services plan (CSP). Specifically the paper:

- Provides an update on alignment with the CSP;
- Provides an update on the progress made in the development of the integrated three year plan;
- Presents the WHSSC ICP for Board approval; and,
- Sets out the next steps for developing the final integrated three year plan for Welsh Government submission in March.

2. BACKGROUND

Developing confidence in an approvable IMTP is an enabler to support the organisation out of Targeted Intervention. We have been clear that we are not working solely to develop a plan to meet the national deadline; the Plan will be the plan that we need to maintain momentum and build on the significant progress that the organisation has already made. We are continuing to engage with Welsh Government in order that our Plan is developed and submitted through a process which supports our progress, and, following consideration by the Board in December we have formally communicated to Welsh Government that we are submitting our plan at the end of March 2020.

3. CLINICAL SERVICES PLAN

Detail on the progress being made with delivering the Clinical Services Plan is contained within the January 2020 Health Board report on the Transformation Portfolio. The delivery of the CSP through the IMTP is aligned through the Whole System Plans which were previously shared with the Board and which form the framework for the development of the detailed delivery plans as described in section 4.1.

4. INTEGRATED MEDIUM TERM PLAN

4.1 Progress Update

The framework of the Plan development is the Whole System Plans which include the Ministerial and Health Board strategic priorities, Clinical Services Plan ambitions and efficiency and performance improvements. Delivery Units have developed detailed plans to deliver the actions required to deliver these system-wide changes. Two iterations of Delivery Unit plans were developed before Christmas, with the main focus on recent work being on prioritising the plans against the agreed strategic priorities of Unscheduled Care, Planned Care, the Cancer Centre and Healthcare Acquired Infections.

Our planning activities to integrate the service, workforce and finance delivery plans are on track and the prioritisation of the Delivery Unit service plans has now reached a conclusion. A set of choices was presented for the Executive Board on 15th January 2020 to make a decision on the package of schemes to be included in the plan. The

Executive Board agreed that, within the existing financial plan envelope, an allocation would be added to the Performance Funds (previously RTT monies) for the Health Board strategic priorities of Unscheduled Care and the Cancer Centre. It was also agreed that detailed cases should be worked up for the Investment and Benefits Group to consider the release of this funding in 2020/21. The Clinical Redesign Groups established through the CSP will have a central role in reviewing and prioritising investment to support the implementation of CSP.

Following this decision the service plans have been further refined and a full set of Whole System Plans produced including detailed actions, milestones, deliverables and measures which are included in the draft Plan document. These will be used in the detailed work required to finalise the performance trajectories and workforce and finance plans and templates before final submission to the Board. The capital plan will also be finalised for approval at Performance and Finance Committee in February 2020.

Final service delivery plans have also been issued to Delivery Units and these will be used in the development of the performance reports for 2020/21.

It is recognised that the Health Board has a statutory duty to produce a financially balanced three year integrated plan. An assessment and recommendation on whether the Plan is approvable will be taken through the Executive Team and Performance and Finance Committee in February 2020. If a the final Plan is not deemed to be approvable an Accountable Officer letter will be sent to Welsh Government to outline the Health Board's intention to submit a detailed Annual Plan in the context of the three year Plan.

The draft narrative Plan has been shared with the Board in private for comment.

4.3 Financial Plan

A meeting was held with Welsh Government and the Finance Delivery Unit on 17th December 2019 to work through the key assumptions and early draft of the Financial Plan. Following this the early draft Financial Plan and supporting draft IMTP Finance chapter was submitted to Welsh Government by the 3rd January 2020 deadline.

Written feedback has been provided by Welsh Government and the Finance Delivery Unit on the draft Financial Plan and IMTP Chapter. The finance team is now progressing further work in more detailed analysis of the draft financial plans with particular emphasis being given to understanding and verifying the underlying position growth and also specific areas of cost growth. These will face significant scrutiny by the Finance Delivery Unit and Welsh Government and our aim will be to validate and reduce the underlying position as far as possible, while maintaining a realistic assessed position.

There are a number of options to taking the savings work forward, maintaining the blended approach we have developed for the current year. The KPMG pipeline work will be key, alongside our existing financial recovery arrangements including the HVO programme and our own analysis of the Efficiency Framework.

KPMG and the Efficiency Framework

The KPMG support has now ended and a draft assessment of a pipeline of opportunities has been received and is being further analysed. This includes key areas of service and performance efficiency, as well as broader actions involving income generation and contract review. We understand that Welsh Government will expect a Health Board response to the KPMG reports once finalised, including a detailed action plan. Work has already been initiated based on the draft findings in preparation for this.

4.4 Education Commissioning Requirements

The Education Commissioning templates (tabs 18 to 19.9) of the Welsh Government Mandatory Templates is attached at **Appendix 1** for approval. The templates have been completed through engagement with service and professional leads.

4.5 Detailed Timeline and Next Steps

The detailed timeline and next steps are in the table below.

	Week	Date	Event	Action	Output
January	27-31	28.01	P&F Committee	Update on Financial Plan Update on approach and development of performance trajectories	Consideration of progress and scrutiny of challenges and risks
		30.01	Board meeting	Progress update on developing the Plan and consideration of the Draft Narrative Document.	Approval of progress and comments on the Draft Narrative
		30.01	Unit Plans	Unit to resubmit Finance and workforce plans	Finalised Unit Plans
		31.01	HVOs	Complete Phase 1 Planning for HVOs	HvO Phase 1 complete
February		05.02	SLT	Update on Performance Trajectories	Performance trajectories reviewed
	03-07	06.02	Plan Development	Refinement of detailed service delivery milestones, performance trajectories, workforce and finance plans in response to Board feedback	Plans and templates – detailed actions for inclusion in the Plan
		06.02	Narrative Comment	Board to return comment and feedback on narrative document	Narrative updated
	17-21	19.02	FMG	Scrutiny of HVOs, savings plans and financial plan	HvOs reviewed
		19.02	SLT	Performance Trajectories to SLT for agreement Assessment of approvability of Plan	Performance trajectories agreed
	24-27	25.02	P&F Committee	Draft Finance Plan & Performance Trajectories for approval Capital Plan for approval Assessment of Approvability of Plan	Approval of plans and trajectories
March	09-13	11.03	Executive Board Meeting	Present Final Plan and draft templates	Approval of Plan
		13.03	QIA	Quality Impact Assessment of savings plans to be completed	QIA completed
	23-27	24.03	P&F Committee	Update on Final Plan and trajectories	Information sharing
		26.03	Board Meeting	Present Final Plan and Mandatory Templates	Approval of Plan
	30-03	31.03	WG Submission	Submit Plan with Mandatory Templates to Welsh Government	

4.6 WHSSC ICP

SBUHB continues to work closely with The Welsh Health Specialised Services Committee (WHSSC) in the development of its Integrated Commissioning Plan (ICP) and acknowledges the importance of aligning its IMTP with the ICP.

The demand for specialised services continues to increase as advances in medical technology offer treatment where previously none was available. The development of ever more complex and innovative treatment whilst offering benefits to patients is however providing a growing financial challenge.

A core element of the WHSSC work in 2020-21 will be to increase engagement and co-production with patients to strengthen services and patient pathways. In doing so, WHSSC aims to identify opportunities to release value from those pathways or through the re-commissioning of services. A number of new work-streams to support this including referral management and medicines management will be established.

A number of strategic priorities are highlighted within the 2020-23 WHSSC ICP. Strategic priorities are service developments which are either currently mandated by organisations such as the National Institute for Health and Care Excellence (NICE) or have already been agreed as service priorities through previous ICPs or through the Clinical Impact Advisory Group (CIAG) process.

The WHSSC financial plan has been prepared on the assumption that Welsh Government will directly fund pressures relating to MTC and ATMPs. SBUHB's net liability for 2020/21 has been materially reduced following the realignment of risk share contributions based utilisation. The financial consequences have been agreed through the committee and the Health Board's net contribution of £3m has been built into the three year plan for 2020/21-22/23. The net uplift for SBUHB this year equates to 3.71% compared to an all-Wales uplift of 5.24%. SBUHB's contribution has been abated by a reduction in contribution based on the movement in risk share.

The risk share has been calculated on relative usage of services in the previous two years. The movement in usage shares can be quite volatile in specialist services and whilst SBUHB has benefited this year there is no guarantee that this position will be sustained in future years.

It is recognised that funding this level of pressures and developments is a significant challenge for all health Boards and WHSSC will be undertaking further work to mitigate cost pressures and focus on pathway value efficiencies.

The ICP is attached in **Appendix 2** for review and approval by the Board.

4.7 Emergency Ambulances Services Committee (EASC)

The Health Board is fully engaged in the EASC management Group and Committee and has responded to the EASC and Non-Emergency Patient Transport Commissioning Intentions in our Plan. As yet the financial risk is not known and therefore this is not yet included.

5. GOVERNANCE AND RISK ISSUES

Risks to developing an integrated three year plan include:

- **Delivery in 2019/20** – Future plans and performance trajectories are reliant on delivery in 2019/20 in particular in relation to performance and quality targets and financial savings. The final planned care baseline position for 2019/20 will affect the financial plan and delivery profiles for 2020/21. *Mitigation: The performance management arrangements for delivery of the Annual Plan in 2019/20, have been strengthened into a weekly “battle rhythm” and with enhanced reporting to Performance and Finance Committee. Ongoing assessment of the planned care projections is taking place continuously and will be factored in to the trajectories that are being developed for 2020/21. Additional mitigations include the development of an internal multi-disciplinary Delivery Support Team. It also includes the external financial support from KPMG.*
- **Timetable** – Developing an approvable integrated three year plan in 2019/20 will require significant work within a limited timescale. *Mitigation: A weekly action plan is in place to deliver the IMTP plan.*
- **Alignment with CSP** – it is vital that the different strands of work across the Health Board align to ensure alignment of plans and delivery efforts. *Mitigation: The Integrated Planning Group is in place to share progress across all aspects of planning including CSP, IMTP and regional work. Specific joint work has also been undertaken by the CSP and IMTP teams to review plans throughout their stages of development checking for read-across and alignment.*
- **Refining the Financial Plan** – As reported in December 2019, the Health Board developed a clear methodology to support the Financial Plan, building on recommendations from the Deloitte’s Financial Governance Review and Welsh Audit Office (WAO) Structured Assessments. Further recommendations have also been made by KPMG as part of their support work which has now ended. Our financial planning needs further refinement, particularly on our approach to savings identification (and sustainable delivery of the savings) and delivery and on a financial appraisal of the Clinical Services Plan. *Mitigation: As a Health Board we are taking a more structured approach to identifying benchmarking and efficiency opportunities, which together with the KPMG pipeline, is currently being developed into an expended HVO programme. This emerging programme will inform the development of the IMTP and financial plan. This financial model is being developed to move beyond the traditional focus on core income and operating expenditure. This will include a more targeted approach to generating allocative value and the shifting of resources, with an initial focus on the ensuring the sustainability of proposals funded via the Transformation Fund. It will also include, a more comprehensive assessment of opportunities for income generation, as well as the affordability (and required investment) of key projects within the Clinical Services Plan.*

6. FINANCIAL IMPLICATIONS

The core financial objective is to develop an IMTP which delivers a sustainable breakeven position. However, this will continue to prove challenging in the context of persistent difficult and pressurised operations in the current year, where the Health Board is reporting a significant year-end forecast overspend. This is having a particular impact on the organisation’s underlying position and, as described in the paper, work continues to develop the Plan for approval by the Board in March.

The net contribution to the WHSSC ICP is included in the Plan. The financial risk of the EASC Commissioning Intentions are not yet known.

7. RECOMMENDATION

Members are asked to:

- Note the continued alignment of the CSP and IMTP planning
- Note the progress in developing the Health Board's Three Year Plan 2020/21-22/23
- Approve the WHSSC ICP
- Endorse and support the next steps

Endorse and support the next steps Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input checked="" type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input checked="" type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
A Quality Impact Assessment and Equality impact Assessment process will be part of the broader planning arrangements in 2019 to ensure that the IMTP is Quality and Equality impact assessed.		
Financial Implications		
Financial Planning will be fully integrated into the planning process and aligned to key developments and enabling plans.		
Legal Implications (including equality and diversity assessment)		
A Quality Impact Assessment and Equality impact Assessment process will be part of the broader planning arrangements in 2019 to ensure that the IMTP is Quality and Equality impact assessed. An approved medium term three year plan is a statutory duty for the Health Board.		
Staffing Implications		
The planning process for 2019 will include strengthened workforce planning including the involvement of the newly established Workforce and OD Forum.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
<p>The Clinical Services Plan and Annual Plan deliver our Strategic Objectives which were aligned to our Wellbeing Objectives through the development of the Organisational Strategy.</p> <ul style="list-style-type: none"> ○ Long Term – The proposed approach to the IMTP ensures alignment with the long term vision of the Health Board as set out in the Organizational Strategy. ○ Prevention – The development of the IMTP and the Planning Framework ensure risks and challenges and health needs (current and future) are considered enabling actions and plans to be preventative wherever possible. ○ Integration – Key to integrated planning is the link and alignment of actions across wellbeing objectives. 		

<ul style="list-style-type: none"> ○ Collaboration – Central to the approach to developing an IMTP is the integrated approach across services, units and partner organizations. ○ Involvement – The IMTP development approach includes active involvement of partners. 	
Report History	This is a regular bi-monthly report to the Board on progress
Appendices	Appendix 1 – Education Commissioning Templates Appendix 2 – WHSSC ICP