





Meeting Date	29 th July 2021		Agenda item	3.1	
Report Title	Annual Plan 2	021/22 Delivery	of Q1 Actions		
Report Author	Rich Brown (Head of Transformation Portfolio)				
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Freedom of					
Information	Open				
Purpose of the	This paper provides the reported status against the delivery				
Report	of actions in the	e Annual Plan 20)21/22 for Quart	er 1	
Key Issues	 The approach to delivering the Annual Plan is built on accountability, with a refreshed performance management framework to underpin monitoring and measuring of outcomes, and programme management to monitor delivery. The enabling and support delivery infrastructure for the realisation of these priorities is being driven through programmes and programme boards. Progress on delivery has been monitored for Q1, and key priorities planned for Q2. 				
Specific Action	Information	Discussion	Assurance	Approval	
Required			\boxtimes	\boxtimes	
(please choose					
one only)					
Recommendations	Members are a	asked to:			
	NOTE the approach to delivering the Annual Plan				
	via improvement programmes, and the supporting				
	infrastructure,				
	NOTE the progress to date in delivering the				
	priorities for Q1,				
	phonuoc				
		,	identified for Q2	2, and	
	APPRO	VE the priorities VE the key risks		2, and	





ANNUAL PLAN 2021/22 DELIVERY OF Q1 ACTIONS

1. INTRODUCTION

This paper provides the reported status against the delivery of actions in the Annual Plan 2021/22 for Quarter 1 (Q1).

2. BACKGROUND

Swansea Bay University Health Board's Annual Plan 2021/22 sets out the goals, methods and outcomes for delivering the Annual Plan priorities for the next year. It has been developed in line with the Organisational Strategy and Clinical Services Plan, and in the context of needing to both manage the ongoing response to the COVID-19 pandemic, and plan and implement the reset and recovery of services.

The approach to delivering the Annual Plan is focused on accountability, with a refreshed performance management framework to underpin monitoring and measuring of outcomes, and programme management to monitor delivery.

The Health Board's priorities within the Annual Plan are:

- Responding to COVID-19,
- Improving patient quality and safety, and the five Q&S priorities,
- Improving staff experience,
- Improving unscheduled care,
- Improving planned care,
- Increasing digital capability,
- Improving cancer and palliative care,
- Prevention and reducing health inequalities,
- Children, young people, and maternity services,
- Improving our primary, community, and therapy services, and the six priorities,
- Improving our mental health and learning disabilities services, and the seven priorities, and
- Performance and finance.

The enabling and support delivery infrastructure for the realisation of these priorities is being driven through programmes and programme boards.

Approach for delivery

For the 2021/22 Annual Plan, the Health Board developed a model using 'goals, methods, outcomes' (GMOs) focussing on delivery via programme management.

The GMOs and delivery timeline was approved at meeting of Management Board in April, with the draft iteration of the plan to be submitted to Welsh Government on 11th June 2021, ahead of approval by Board and final submission to Welsh Government on 30th June.

The Annual Plan outlines where each of the above programmes is supported by a driver or enabler, across areas of workforce, finance, capital, medicines management,

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communication and engagement, and digital and technology. The enabling work and outcomes for these key functional areas have been mapped into an enabling infrastructure register for the entire portfolio.

Achieving our goals

The outcomes described in the Annual Plan have been mapped into SMART objectives, with key metrics identified. This report maps out the metrics against goals and outcomes. Baselining of the metrics is underway, with a view to start reporting on progress against the baseline and target from Q2.

The Transformation Portfolio Office (TPO) is working closely with colleagues in Digital Intelligence, to understand how these metrics can be measured regularly, with metric owners assigned, and work is planned with the newly appointed Head of Performance to best align this with the performance scorecard.

Priorities for Quarter 2

Programmes have developed100 day plans, reporting progress against work completed from 1st April-10th July, and plans for 11th July-18th October, covering Q1 and Quarter 2 (Q2). These plans make up the detail of the following programme highlight reports. Progress against the work planned for Q2 will be monitored via the TPO and reported to Management Board.

Work is being finalised in respect of a robust monitoring approach for reporting Plan outcomes as part of Health Board governance, providing assurance to Board on the delivery of Plan.

Programme leads will be supported by the TPO with using the PMO Toolkit to monitor progress on delivery, and report accordingly. Once fully in use, the PMO Toolkit will provide a portfolio view of programme plans, risk, issues, exceptions, and decisions. Delegated leads are being identified across the programme areas to coordinate and manage the use of the PMO Toolkit.

3. PROGRESS UPDATE

Tracking of the Annual Plan GMOs is being managed through the improvement programme boards and supported by the TPO using the PMO Toolkit.

A summary of the performance of each programme, rated red, amber, or green (RAG) is as follows:

	Apr	May	Jun
Responding to COVID-19			
Urgent and Emergency Care			
Planned Care Recovery			
Improving Cancer and Palliative Care			
Improving Maternity, Children, and Young People			
Improving Quality and Safety			
Improving Primary, Community, and Therapy Services			
Improving Mental Health and Learning Disabilities Services			

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Improving Population Health Workforce and Leadership Apr May Jun

Detailed feedback for each programme, including milestones, risk, and corrective action, is available in the portfolio highlight report, in the appendices.

Some of the headline achievements include:

RESPONDING TO COVID-19 ✓ The Health Board's vaccination programme has delivered over 500,000 individual doses and has offered every eligible adult a first appointment, six weeks ahead of the Welsh Government milestone. Second doses are due to complete in August, with plans underway for the autumn booster programme to	 URGENT AND EMEGENCY CARE ✓ Approval of detailed business cases to support the Urgent and Emergency Care GMOs including Virtual ward, Home First (previously Hospital to Home) and the Care of the Elderly Service ✓ Detailed critical path and capital plan to enable to move of the Acute Hub into Morriston
 commence from September PLANNED CARE RECOVERY A plan has been developed to implement a structure advice and guidance model across all Outpatients services by end of September 2021, with engagement activities planned for both general practice and secondary care to maximise usage and value. ✓ The strategic outline case for a new build orthopaedic surgical centre at Neath Port Talbot Hospital has been submitted to Welsh Government. Gateway interviews with Welsh Government are planned for the next quarter 	 CANCER AND PALLIATIVE CARE Deep Dive in to four tumour sites to fully understand issues and opportunity and to identify priority actions Detailed improvement plan developed to respond to Deep Dive Business case for specialist palliative care approved to improve timely and quality access to end of life care.

Where programme delivery is off-track, or measured 'red', programme leads are being engaged to develop corrective action, to bring plans back on-track, which will be a priority for Q2. The TPO is providing additional project support, where available, to support programmes with the necessary programme infrastructure to direct and implement corrective action.

4. GOVERNANCE AND RISK ISSUES

Governance and oversight of the delivery of the portfolio of work is via the Management Board, chaired by the Chief Executive. Individual programme and project delivery is managed by the relevant programme boards, chaired by a programme lead, and associated project boards or steering groups.





Best practice project and programme management will be supported by the TPO, with functional assurance provided by Workforce and OD, Finance, Communications, and Digital.

Reporting on progress is managed in the form of highlight reports into Management Board monthly. Respective programme boards will receive highlight reports on improvement projects and manage by exception. Reports will cover priorities for current and next period, delivering on outcomes, key risks and issues, corrective action, and decisions required.

Key risks to delivery are as follows:

Description	Mitigation	Current Score
Methods and enabling actions will not deliver the desired outcomes	 A clear focus on monitoring outcomes through metrics, and identifying metric owners, will be a priority for Q2. Colleagues from Strategy, the Transformation Portfolio Office, Digital Intelligence, and Performance, will develop a mechanism for reporting outcome measures and critical success factors against the methods and actions within the plan, and where necessary employ corrective action. 	20
Timely Welsh government Support for the plan and the business cases and bids within plan	 JET meeting in May 2021 as opportunity to set out ambition and provide assurance on delivery mechanisms Welsh Government visit to sites in June 21 to meet clinical leads to support understanding of approach and levels of clinical engagement Use of CEO and Chair interface with Directorate general and Ministers to promote plan 	12
Clinical Leadership capacity and capability	 Enhanced visibility of Service Medical/Dental and Nurse Directors in context of plan development and delivery Build on effective approaches to clinical engagement and leadership as evidenced in Clinical Reference Group (CRG) approaches Cluster lead now member of Management Board to increase primary care voice Broaden clinical leadership to all professions, not just medical Targeted OD support for clinical leaders Include resource in resource plan to backfill clinical time Use of clinical senate to engage 	12
Culture and mindset shift required	 Agenda and decisions are more consistently framed around alignment with Annual Plan so a consistent narrative emerging Annual Plan focus in Leadership Touchpoint May 2021 Embed quarterly engagement group building on engagement to AP development and AP execution sessions 	12





Description	Mitigation	Current Score
	 Increased capacity and capability to support communications and engagement 	
Plans do not become operationalised	 Accountability & delegation letters to confirm expectations Detailed delivery plans at operational level developed Clarity on model for benefits realisation to support delivery of outcomes and outputs New performance management approach to include escalation framework 	12
Availability of workforce to support service changes and capacity increases	 Maximise use of digital Workforce redesign eg physicians associates and technician roles Insourcing expertise where appropriate Wellbeing and resilience of staff offer to support staff remain in work Strengthening of recruitment campaigns eg COTE posts 	12
Resources to support plan execution	 Resource mapping Planning support has been aligned to priorities Transformation team resource aligned to priorities Senior External support to programmes and projects to be commissioned Development of Savings Delivery Office to support financial plan delivery Commission additional external support eg Productive Partners Engage with WG on additional support required Business analyst support to be provided via business partnering 	8
Timely and appropriate business intelligence and insight	 Additional support to be commissioned from Lightfoot Additional business intelligence resource agreed at Management Board in May 2021 Digital support to be identified for the priority projects and work packages Additional dedicated support to provide finance insight and grit Self-serve dashboard and tools to be developed 	8

5. FINANCIAL IMPLICATIONS

The Health Board's financial plan is integrated into the Annual plan The financial and service implications of investments are being closely monitored to ensure alignment of any slippage on both investments and savings delivery. Delivery against the financial savings element of the plan is covered in the finance report.





6. RECOMMENDATION

Members are asked to:

- **NOTE** the approach to delivering the Annual Plan via improvement programmes, and the supporting infrastructure,
- NOTE the progress to date in delivering the priorities for Q1,
- **APPROVE** the priorities identified for Q2, and
- **APPROVE** the key risks to delivery.



