

Bwrdd Iechyd Prifysgol Bae Abertawe Swansea Bay University Health Board



| | | Agenda Item | 4.1 |
|--|---|---|---|
| Freedom of Information Status | | Open | |
| Reporting Committee | Investment and Benefits Group | | |
| Author | Ian MacDonald | | |
| Chaired by | Lynne Hamilton | | |
| Lead Executive Director (s) Lynne Hamilton and Sian Harrop-Gr | | n Harrop-Griffiths | |
| Date of last meeting30 July 2019 | | | |
| Summary of key matters con | sidered by the committee | and any related dec | isions made. |
| Update 2019/20 b re p u ft re | Changes to discretionary cap y the Capital Monitoring Gro eported in the monitoring re otential risks being assesse nderspends to be released unding from WG – update to eport. | oup were noted . Fund turns £1.774m noted . ed, but hopeful of some from the plan and add b be included in Septer | ing risk as Other e future itional |
| T M o P S | Capital delegations now agreed by IBG co-chairs. The Clinical Appointments process is being developed by the Medical and Workforce Executive Directors, which will sit outside of IBG. Work progressing on other delegations is proceeding alongside the delegations for the Clinical Services Plan and paper going to August Transformation Board. | | |
| Team 2 n fo | Update noted following approval of project at IBG in October 2018. Recruitment delayed due to competing priorities but now in place to commence w/c: 05 August 2019 – this was following an approval from IBG in October 2018. A 3 month start to finish is the current target for all investigations. | | |
| Schemes T II IS SS SS II B E T T h tu N 1 | Case Management System – Employee RelationsThe system cannot yet go live due to issues relating toInformation Governance and data sharing. Whilst the systemis live across England and fully meets the Informationsharing protocols put in place, Wales has adopted a differentstandard which is not commonly been acquired by the verylimited number of software providers in this area. Actionsbeing taken to resolve.E-RosteringThe transfer process begun in 2018 and to date 102 rostershave been created with just over 2000 staff having beentransferred to E-Rostering. The rollout programme inMorriston will be completed by 4th August where a further1300 staff will be migrated. Plan currently being revised tocomplete roll out. | | |

| | <u>Occupation Health Staff Records Scanning</u> Approximately, 50% of records have now been scanned with all Morriston Hospital OH notes being completed. Plan to complete scanning by Oct 19. <u>Staff Wellbeing Service</u> Implemented and has resulted in a significant reduction in waiting times for staff to access support and 21% of staff do not require further intervention after the initial wellbeing consultation. <u>E-Job Planning</u> Successful recruitment of implementation team was completed in April 2019. Delays because of existing job plans not being up to assumed standard to fulfil all criteria required by the electronic system, this would however not affect the final timescales of the project. <u>Locum on Duty</u> The project has experienced a delayed implementation due to complexities of recruitment in to the team. A complete implementation team will be in place in August 2019. Preparatory work for the implementation has begun and engagement sessions for the Delivery Units and rota coordinators have taken place |
|---|---|
| Benefits Realisation | Updated on PFC discussion. Resourcing a key issue and will need to be considered to support the wider implementation of benefits monitoring. Still lack of clarity around accountability and responsibility for individual projects, particularly where benefits are falling out across the system. Need to develop a common set of evaluation criteria, and also strengthen process around reporting, monitoring, action planning and escalation. Query links to Benefits Management Evaluation Group (BMEG), which is being set up under Transformation Programme. |
| Transforming the Type 2 Diabetes Care System | Good progress being made. DES sign up – only 5 of 49 Practices not signed up; NES sign up – 18 of 49 Practices not signed up. Those GP Practices not signing up to the DES and 3 NESs have been identified and work now underway at a cluster level to ensure those patients registered at these GP Practices will receive the appropriate quality and level of care. Education programme progressing well, and as at the end of July 2019: 3 Cohorts will be complete 19 GP Practices covered 53 GPs and Practice Nurses trained |
| Key risks and issues/matte | Agreed to explore funding from the Transformation Fund to provide the 3 NESs for the 7 clusters within 2019/20. ers of concern of which the board needs to be made aware: 2019/20 |

Discretionary capital plan is mostly committed with only £200k contingency and other potential risks to be assessed.

The balanced plan has a funding risk of £1.774m, mostly unchanged from last month. Risk assessment is mostly medium, which includes WCCIS (Welsh Community Clinical Information System) development £524k (funding being pursued through the £25m national digital fund) and Singleton Ward 12 fire remedial works £500k (claim being progressed through the Welsh Risk Pool).

| Risk Assessment | £000 |
|-----------------|-------|
| High | 68 |
| Medium | 1,338 |
| Low | 368 |
| Total | 1,774 |

Benefits Realisation

Identified requirement to strengthen approach to benefits identification, monitoring and management. Clarity on reporting, management and escalation process. Also need to consider accountability arrangements, and provide further advice on responsibilities for benefits owners. Potential duplication of work with proposed BMEG and this needs to be explored. Resourcing issues if this approach to be strengthened and mainstreamed.

Delegated action by the committee:

Main sources of information received:

Business cases for investment and service change for projects that form part of annual plan approved by the Health Board in January 2019. Cases coming to IBG are initially assessed by the IBG Scrutiny Group.

Highlights from sub-groups reporting into this committee:

Capital Monitoring Group, Discretionary Capital Plan 2019/20, as above. Investment and Benefits Scrutiny Group, cases released for agenda as above.

Matters referred to other committees

No matters referred.

Date of next meeting

24 September 2019