



Bwrdd Iechyd Prifysgol Bae Abertawe Swansea Bay University Health Board



Meeting Date	28 <sup>th</sup> July 2020		Agenda Item	2.2			
Report Title	-	Quarter 1 Operational Plan 2020-21 – Delivery of the					
		Actions					
Report Author	Maxine Evans, Head of IMTP Development and						
		Implementation					
		n, Interim Assista		trategy			
Report Sponsor		riffiths, Director o					
Presented by		riffiths, Director c	of Strategy				
Freedom of	Open						
Information							
Purpose of the		vides the reporte	•				
Report	<b>.</b> .	of the SBUHB C					
		the baseline ass	<b>u</b>				
	delivery of our	Essential Service	es and Cancer	Framework.			
		<u></u>					
Key Issues		1) Operational P					
	•	VG) on 18 <sup>th</sup> May	2020 followed I	by Board			
	ratification on 2	28th May 2020.					
			41				
	Within the Q1 Plan, a series of themes underpinned by						
	specific actions were identified with timescales for						
	achievement.						
	The paper provides a high lovel summary of the someleted						
	The paper provides a high level summary of the completed,						
	on-track and off track actions. Detailed feedback is given for						
	the off-track actions including revised milestones.						
	Alongside the Q1 actions, a baseline assessment was						
	undertaken against the status of the health board's						
	essential services. This has since been refreshed to reflect						
	the revised essential services framework issued by Welsh						
	Government and provides an assessment of our position at						
	the end of June 2020.						
	In addition, a self-assessment against the Framework for						
	the Reinstatement of Cancer Services in Wales during						
	COVID has been undertaken which provides assurance on						
	the status of our cancer services detailed within the paper.						
Specific Action	Information	Discussion	Assurance	Approval			
Required			$\boxtimes$				
(please choose							
one only)							

Recommendations	<ul> <li>Members are asked to:</li> <li>Note the themes and actions identified within the Q1 Plan;</li> <li>Note the reported RAG status and supplementary comments against each action that is off-track and the revised milestone;</li> <li>Endorse the mapping of individual actions to the specific Board Committees for monitoring purposes;</li> <li>Note the baseline assessment against the revised Essential Services Framework at the end of June 2020.</li> <li>Note the self-assessment against the Framework for the Reinstatement of Cancer Services in Wales</li> </ul>
	the Reinstatement of Cancer Services in Wales during COVID

## QUARTER 1 OPERATIONAL PLAN 2020-21 -DELIVERY OF THE ACTIONS

### 1. INTRODUCTION

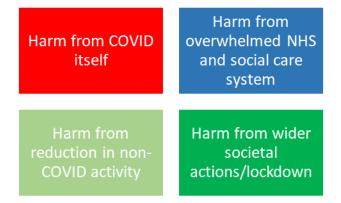
This paper provides the position against the actions agreed as part of the SBUHB Q1 Operational Plan. It provides a high level summary of the completed, on-track and off track actions. Detailed feedback is given within the Tracker for the off-track actions including revised milestones.

In addition, it provides an update on the baseline assessment against the delivery of our Essential Services and a self-assessment against the Framework for the Reinstatement of Cancer Services in Wales during COVID

#### 2. BACKGROUND

On 6<sup>th</sup> May 2020 Welsh Government wrote to all Welsh NHS Organisations outlining the continued need to maintain essential services and start to scale up normal business in an environment that still needs to respond to Covid-19.

A Covid-19 Operating Framework – Quarter 1 was issued which set out a particular focus on maintaining essential services such as Cancer and Mental Health, it also reflected the need to consider 4 types of harm and how we best address them in a balanced way:



The Operating Framework set out the following themes to be addressed:

- New ways of working
- Managing Covid-19
- Essential services
- Critical Care
- Routine Services
- Surge capacity
- Workforce wellbeing
- Primary care
- Social Care Interface
- Communication
- Finance

The Q1 Plan reflected the above themes and was submitted in draft to WG on 18<sup>th</sup> May 2020 followed by Board ratification on 28<sup>th</sup> May 2020.

The Plan identified a series of actions that would be progressed and monitored through, what was, the remainder of the quarter. The Plan was developed and submitted with a very quick turnaround and the monitoring of actions, development of operational planning and mitigation of risks will continue into Quarter 2 and beyond

Alongside the Q1 actions, a baseline assessment was undertaken against the status of essential services. The assessment of our position has since been refreshed to reflect the revised Essential Services Framework issued by Welsh Government. In addition, a self-assessment against the Framework for the Reinstatement of Cancer Services in Wales during COVID has been undertaken.

## 3. PROGRESS UPDATE

#### 3.1 Q1 Action Tracker

A Q1 Action Plan Tracker was developed, with identified leads and agreed timescales for achievement, attached as Appendix 1.

Performance is assessed on a Red/Amber/Green (RAG) system. As defined below. The report is developed on an exception basis with comments requested when delivery is not on track e.g. rated Red.

R	ł	Action not on track by due date
A	١	Action on track by due date
G	ì	Action complete

The overall summary by Theme is set out in the following table:

Theme	No. of	Red	Amber	Green
	Actions			
Governance & Engagement	13	0	1	12
Planned Care	34	3	8	23
Digital	29	3	8	18
Partnership Working and Social Care	19	0	5	14
Regional Working	3	0	1	2
Workforce	21	0	12	9
Finance and Capital	4	1	0	3
Total:	123	7	35	81

The overall position shows that the majority of actions have either been delivered or are on track through the first quarter of 2020-21 with 66% completed, 28% on track to deliver and 6% off-track.

Two of the off-track actions relate to Cancer services as shown in the table below. When the Q1 Plan was submitted, the national Framework for the Reinstatement of Cancer Services in Wales during COVID had not yet been circulated. The actions were therefore agreed in the absence of this and were focussed on coping with the impact of the outbreak on capacity in key oncology services. A self-assessment against the Framework for the recovery of cancer services has now been finalised and can be found in Appendix 2. This will be taken through the Cancer Workstream of the Reset and Recovery Co-ordination Group and will be ratified at the Cancer Improvement Board (CIB) which is being re-established.

Theme	Sub- Category	Action	Comments
Planned Care	Cancer	Chemotherapy to be 90% of pre-Covid levels (Same Action counted twice - for May and June)	Unable to increase Chemotherapy provision due to Covid restrictions that have restricted activity to 70%. Waiting times have increased and a recovery plan is being developed, including looking at increasing utilisation, for the Cancer workstream to consider during Q2.
		Radiotherapy (RT) services, with 75% capacity protected (compared to prior to the pandemic)	Due to Covid and the breakdown of the Linacc machines unable to maintain 75% capacity in Q1. The Linaccs came back on line w/c 13 <sup>th</sup> July and it is now expected to return to 75 % capacity. The RT recovery plan is being developed that includes options around continuing outsourcing and being able to increase capacity on existing machines by working differently. The draft recovery plan will be considered by the Cancer workstream to consider during Q2.
Digital	New Ways of Working	WIFI will be enabled in the remaining Community, Mental Health and Learning Disability sites to support remote working and social distancing	Reliance on suppliers to complete Public Sector Broadband Aggregation (PBSA) network connections, cabling and survey work to community sites - suppliers prioritising COVID-19 work.
	Essential Services	Commencing implementation of electronic nursing documentation, reducing duplication and increasing time to care	Next phase of national programme is delayed until Q3
	Primary Care	Introduced electronic test requesting for	Implementation delayed due to COVID19. Rescheduled to Q2 dependent on access to GPs

An overall summary of the actions off-track (Red) are shown below.

		pathology in Primary Care	
Finance and Capital	Performance & Monitoring	Complete critical review of original financial plan savings plans and investment plans	Not started due to focus on Q2 plan. Will be completed in July.

The Q2 Operational Plan has been developed and submitted to Welsh Government on 3<sup>rd</sup> July 2020. The actions identified within the Q2 Plan will be added to the Q1 actions that are outstanding and off track to ensure they are monitored through to delivery. A more detailed performance framework will need to be developed to align with the tracker and this is being prepared, to align with the 4 harms in Appendix 1 of the Q2 Operational Plan.

To ensure that the actions are monitored for assurance within the appropriate forum, an exercise has been undertaken to map each of the actions to a Board Committee. This will also help to avoid duplicate discussions and maintain clear lines of escalation and accountability. The initial mapping can be found within the tracker for Board members to endorse.

# 3.2 Essential Services Baseline Assessment

The Health Board's response to the essential services agenda has been led through the Reset and Recovery (R&R) Programme, which was established in May 2020 and summarised in the Q1 plan. The approach to the reintroduction of essential services remains clinically led and quality-driven.

A baseline assessment against the revised essential services document has been undertaken and is attached in Appendix 3. This self-assessment demonstrates that there are no "essential services" that are offering no level of service. The main themes from the self-assessment are:

- Ability to create sufficient capacity to deal with demand in system taking account of workforce abstractions, IPC requirements, social distancing requirements and PPE;
- Ability to protect essential services through any future spikes;
- Interdependencies of service and capacity plans

In addition, self-assessments have been undertaken (or are in the process of being carried against Welsh Government issued guidance. These selfout) assessments are reviewed and signed off through the Reset and Recovery Most recently the self-assessments against the Coordination group. neonatal. maternity and access to medicines quidelines have demonstrated strong guidance the provision compliance with the for of essential services. Selfassessments are currently underway against the following guidance:

- Hip fracture
- Stroke
- Maintaining Cardiovascular treatment and cardiac services

These self-assessments will serve to identify any risks and issues with compliance with these more detailed guidelines and if so, the mitigating actions required.

#### 4. Workforce

The action tracker has been updated for quarter 2 to fully reflect the broader suite of activity that remains in train in relation to the COVID response. The focus on staff wellbeing will continue to be a significant area of work together with continued efforts to ensure appropriate workforce supply and deployment across the Health Board and related COVID activity. Workforce supply and availability remains a key area of risk for the Health Board as work continues to increase the delivery of essential services and prepare for any second pandemic peak.

The Workforce and OD Committee has continued to meet informally on a two weekly basis to appraise members on issues and the work plan in relation to COVID.

More recently the Workforce and OD Committee met formally to review and ratify revisions to the Workforce and OD Framework work plan in light of the impact of the COVID pandemic on the original priorities and timescales. The Committee will continue to monitor and assure progress on all boarder organisational workforce priorities as well as the delivery of all quarter 2 actions.

#### 5. Capital

The Board agreed a balanced capital plan in March 2020 as part of the annual plan submission. The plan included a number of funding assumptions, alongside the planned submission to Welsh Government of a number of key business cases as part of the All-Wales Capital Programme (AWCP). All organisations were advised in the quarter 2 planning guidance, that due to the uncertain financial outlook in central government caused by the pandemic, the health board would need to accommodate these requirements from within its discretionary allocation, subject to local risk assessment and decision making until further notice.

The main schemes impacted by this position are:

- Access Road design, Morriston Hospital
- Replacement of the cladding at Singleton Hospital
- Replacement CT-SIM scanner in the cancer centre at Singleton Hospital; and
- Phase 2 anti-ligature work in Mental Health and Learning Disabilities premises.

The initial impact is that the balanced plan now shows a planned deficit of £1.527m as a direct result of planned income for commitments already made now not being available. This position assumes that the remaining £1.991m COVID expenditure is funded by Welsh Government, having already received £3.660m capital to date.

The Executive Board has agreed mitigating actions to enable progress on a number of these schemes, whilst taking account of items on the immediate critical path.

The impact at this stage has been to contain expenditure within the financial resources allocated by Welsh Government to the Health Board through the statutory Capital Resource Limit (CRL). The plan assumes that retrospective funding adjustments by Welsh Government will be made to the 2021/22 capital plan, including retrospective funding received from Welsh Government, will only have a small negative impact of

£0.150m. The ongoing monitoring of risks will continue to be undertaken by the Capital Prioritisation Group.

Advice from Welsh Government is to not stop submitting business cases and there is still potential for those already submitted to be supported this year, at least partially. This is dependent on the national capital position and is outwith the control of the Health Board. Should Welsh Government be able to release funding in advance of 2021/22, it is proposed that subject to no other new major risks being identified, that funding is reinstated to the schemes impacted below. An updated position will be brought to the Executive Board in September 2020, and included in the Q3/4 Operational Plan.

	Budget Available	Expenditure	Net Adjustment	Progress 20-21	Impact on Critical Path (on basis of available funding)	
		£000				
Opening Adjusted Projected Outturn -Deficit / Surplus			-1,527			
Gamma Camera Replacement	2,809	1,100	1,709	Design and Works	2 month delay. Complete equipment installation April 21	
CT-SIM Replacement	0	1,959	-1,959	Completion	9 month accelaration. Complete Oct 20	
Singleton Cladding	0	1,300	-1,300	Design work to allow business case submission and enabling package.	3 month delay. Construction works would commence April 21 subject to approval of the business case by WG and funding provided in 21/22.	
Anti-Ligature Phase 2	0	0	0	Limited priority work supported by WG funding. Values to be confirmed.	Business case £4.9m has been agreed by WG officials. Ministerial approval to be sought once funding is available. WG officials have indicated support for most urgent packages of work.	
Environmental Modernisation BJC 2.2 New Sub Station 6 Morriston	0	250	-250	Design work to allow business case submission Q3	4 month delay. Construction works would commence April 21 subject to approval of the business case by WG and funding provided in 21/22.	
Morriston Access Road Design Fee	1,000	500	500	Ecology surveys completed. Limited design & master planning work - design team will be stood down until April 21.	8 month delay to submission of hybrid planning application.	
Medical Equipment Replacement	1,382	782	600	Focus on essential replacement Extend some replacement progr		
Estates Backlog Replacement	1,560	760	800	Undertake minimum statutory requirements (fire, legionella & asbestos). Limited budget for other repairs & refurbishments.		
AWCP In-Year Reinvestment	1,577	0	1,577			
Internal VAT oppourtunities	100	0	100			
Contingency	0	249	-249	Create contingency		
Closing Adjusted Projected Outturn -Deficit / Surplus			0			

Mitigations to Maintain Balanced Capital Programme

Some of the schemes describe changes to the critical path with construction works being delayed until 2021/22. Commencement of works will be dependent on the provision of capital funding from Welsh Government.

There are a number of new schemes identified in Q1 that are currently unaffordable beyond the initial design works allocated in the above plan. These include the

feasibility study to deliver orthopaedic surgery from Neath Port Talbot Hospital and the planned refurbishment of ITU at Morriston Hospital.

The original plan had included business cases for digital services for £4.5m which Welsh Government would not be able to support and there is a risk that none of these schemes will be able to progress this year, with the two priorities being the Welsh Community Care Information System (WCCIS) and the continued rollout of inpatient e-prescribing into Morriston Hospital.

## 6. GOVERNANCE AND RISK ISSUES

This report is the first to be considered since the beginning of the Covid-19 pandemic. Future reporting on the delivery of the Health Board's Operational Plans will be taken through the nominated Board Committee for scrutiny.

## 7. FINANCIAL IMPLICATIONS

The financial implications in this paper relate to the proposal to alter the approved capital plan.

#### 8. RECOMMENDATION

Members are asked to:

- Note the themes and actions identified within the Q1 Plan;
- Note the reported RAG status and supplementary comments against each action that is off-track and the revised milestone;
- Endorse the mapping of individual actions to the specific Board Committees for monitoring purposes;
- Note the baseline assessment against the revised Essential Services Framework at the end of June 2020.
- Note the self-assessment against the Framework for the Reinstatement of Cancer Services in Wales during COVID

Governance and Assurance					
Link to Enabling	Supporting better health and wellbeing by actively empowering people to live well in resilient communities	promoting and			
Objectives	Partnerships for Improving Health and Wellbeing	$\boxtimes$			
(please choose)	Co-Production and Health Literacy	$\boxtimes$			
u ,	Digitally Enabled Health and Wellbeing	$\boxtimes$			
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people				
	Best Value Outcomes and High Quality Care	$\boxtimes$			
	Partnerships for Care	$\boxtimes$			
	Excellent Staff	$\boxtimes$			
	Digitally Enabled Care	$\boxtimes$			
	Outstanding Research, Innovation, Education and Learning	$\boxtimes$			

Health and Care	e Standards				
(please choose)	Staying Healthy	$\boxtimes$			
	Safe Care	$\boxtimes$			
	Effective Care	$\boxtimes$			
	Dignified Care				
	Timely Care	$\boxtimes$			
	Individual Care				
	Staff and Resources	$\boxtimes$			
Quality, Safety a	and Patient Experience				
The paper reflect	ts the impact of Quality, Safety and Patient Experience	ce through the			
performance aga	ainst the Q1 Plan actions and their delivery				
Financial Implic	ations				
The financial imp	plications in this paper relate to the proposal to alter the	e approved			
capital plan.					
Legal Implication	ons (including equality and diversity assessment)				
	ons detailed within the Tracker are considered on their	r own merit			
through the deve	elopment of the Quarterly Plans.				
Staffing Implica	tions				
Staffing and worl	kforce performance against the actions in the plan is in	cluded in the			
paper and tracke					
Long Term Imp	lications (including the impact of the Well-being of	Future			
Generations (W					
	Planning arrangements will aim to deliver our Strate	aic Objectives			
which were aligned to our Wellbeing Objectives through the development of the					
Organisational S	<b>.</b>	•			
Report History	This is the first report to the Performance & Fina	ance			
	Committee on the performance status of the act				
	identified within the Q1 operational plan				
Appendices	Appendix 1 – Q1 Operational Plan Action Tracl	ker Mapped to			
	Board Committees				
	Appendix 2 – Self-Assessment against	the National			
	Framework for the Reinstatement of Cancer Ser				
	during COVID	VICES III VVAIES			
	Appendix 3 – Baseline Assessment of Essential	I Services			