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Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>23<sup>rd</sup> February 2020</b>	<b>Agenda Item</b>	<b>3.1</b>
<b>Report Title</b>	<b>SBUHB Operational Plan 2020/21 – Delivery of Q3 Actions</b>		
<b>Report Author</b>	Maxine Evans, Head of IMTP Development and Implementation		
<b>Report Sponsor</b>	Siân Harrop-Griffiths, Director of Strategy		
<b>Presented by</b>	Siân Harrop-Griffiths, Director of Strategy		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	This paper provides the reported status against the actions agreed for Quarter 3 as part of the SBUHB Quarter 3&4 Operational Plan		
<b>Key Issues</b>	<p>Within the Q3&amp;4 Plan, which was submitted to Welsh Government on 16<sup>th</sup> October 2020, a series of actions underpinned by milestones were identified with timescales for achievement.</p> <p>This paper provides a high level summary of the performance position against the actions and milestones at the end of Quarter 3, reflecting the breadth of work that has been undertaken across the individual plans. Where actions are off-track, mitigating actions have been highlighted.</p> <p>It has been agreed that delivery of the actions will be monitored and reported to the SLT/Executive Team with a quarterly report to the Performance &amp; Finance (P&amp;F) and Quality and Safety (Q&amp;S) Committees, followed by the Board. The timeline for the reporting arrangements for the remainder of this year are included for information.</p>		
<b>Specific Action Required (please choose one only)</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• Note the actions and milestones identified within the Q3&amp;4 Plan for Quarter 3;</li> <li>• Note the reported RAG status and supplementary comments against each action that is off-track;</li> <li>• Note the areas of achievement;</li> <li>• Note the timelines for the reporting arrangements for the remainder of 2020/21</li> </ul>		

## QUARTER 3&4 OPERATIONAL PLAN 2020-21 - DELIVERY OF THE QUARTER 3 ACTIONS

### 1. INTRODUCTION

This paper provides the reported status against the actions agreed for Quarter 3 as part of the SBUHB Quarter 3&4 Operational Plan.

### 2. BACKGROUND

Within the Q3&4 Plan, which was submitted to Welsh Government on 16th October 2020, a series of actions underpinned by milestones were identified with timescales for achievement.

This paper provides a high level summary of the performance position against the actions and milestones at the end of Quarter 3, reflecting the breadth of work that has been undertaken across the individual plans. Where actions are off-track, mitigating actions have been highlighted.

It has been agreed that delivery of the actions will be monitored and reported to the SLT/Executive Team with a quarterly report to the Performance & Finance (P&F) and Quality and Safety (Q&S) Committees, followed by the Board. The timeline for the reporting arrangements for the remainder of this year are included for information.

Tracker/Month	SLT/Exec Team	P&F	Q&S	Board
Full Q3 Performance	17/02/21	23/02/21	23/02/21	25/03/21*
Full Q4 Performance	05/05/21	25/05/21	25/05/21	27/05/21

\*No Board in February

### 3. PROGRESS UPDATE

The Q3&4 Action Plan Tracker was developed, with identified service/planning leads and agreed timescales for achievement, attached for Quarter 3 as Appendix 1.

Overall the tracker provides assurance that a good level of progress has been achieved against the actions and milestones agreed for Quarter 3 with 64.9% completed, 30.8% on track to deliver and 4.3% off-track.

The four harms remain the context in which the Plan was developed. Each of the actions have been predominantly attributed to one of the four harms and demonstrates that these have been considered and addressed through the actions that are being delivered.

A summary of the performance position and some key areas of achievements are provided, see Appendix 2. Detailed feedback is also given for the nine off-track actions including revised milestones where required as set out below:

Theme	Off-Track Actions
Surgical and Theatres	1. <u>Action:</u> Reinstatement of theatres at NPTH  <u>Status &amp; Mitigation:</u> Gold decision to suspend elective inpatient activity in NPTH due to COVID bed requirements for HB.

	<p>Reviewed in January and agreement to re-start operating from 22<sup>nd</sup> February for SBU and CTM.</p>
<p>Diagnostics &amp; Imaging</p>	<p>2. <u>Action:</u> Neurophysiology – Implement proposals from business cases to increase capacity in the system to maintain pre-COVID performance</p> <p><u>Status &amp; Mitigation:</u> Business case not funded for Q3&amp;4. Waiting list growing. Put forward by service as a priority in Annual Plan 21-22 for consideration</p> <p>3. <u>Action:</u> Echo Cardiology - Extending working hours, weekdays and weekends</p> <p><u>Status &amp; Mitigation:</u> Business case not agreed and therefore recruitment process not progressed. Locum support is in place (volumes are limited due to lack of availability of locums). Two additional machines agreed for 6 months and in place. Put forward by service as a priority in Annual Plan 21-22 for consideration</p>
<p>Cancer &amp; Palliative Care</p>	<p>4. <u>Action:</u> Develop RT case for hypofractionation for Prostate case to be developed jointly with Hywel Dda and SBU Urology Surgical colleagues.</p> <p><u>Status &amp; Mitigation:</u> Case not yet finalised due to issues within team due to covid. Case is in draft version and has been circulated to colleagues for final feedback. On track to finalise by mid/end of February 21.</p> <p>5. <u>Action:</u> To undertake SABR treatment for Lung Cancer patients in SWWCC</p> <p><u>Status &amp; Mitigation:</u> WHSSC are taking the proposal through a service designation process .The Commissioning Assurance Framework for designating new services include a stage 1 report that makes a recommendation on whether a provider is potentially suitable. If the stage 1 decision is yes, then it moves to stage 2 business case submission and assessment. WHSSC has advised of an indicative timeline to complete with a recommendation in July 21.</p> <p>6. <u>Action:</u> Review cancer tracking resources</p> <p><u>Status &amp; Mitigation:</u> Delay in decision being made to allow OCP process to commence. The Cancer Tracking posts have now been agreed and currently out to advert. The OCP process for the relocation of the MDT Co-ordinators to Morriston to support closer working relationships with relevant clinical teams, specialty management teams and tracking colleagues is due to commence from week commencing 22<sup>nd</sup> February 2021.</p> <p>7. <u>Action:</u> Develop a number of recommendations for Improving End of Life Care and engaging with our Current Advanced</p>

	<p>Care Planning Team to take these forward along with the wider HB community including primary care</p> <p><u>Status &amp; Mitigation:</u> Awaiting on decision if able to proceed. Work has now commenced on improving the end of life care recommendations and this will form part of the 21/22 plan.</p>
Children, Young People & Maternity	<p>8. <u>Action:</u> Submit peer review action plan. Complete review of neonatal workforce gaps against BAPM standards</p> <p><u>Status &amp; Mitigation:</u> The peer review action plan was submitted to the Network in August 2020 and a workforce review was carried out. The Unit Finance Business Partner and Corporate Finance are working up a proposal to utilise the additional income being received through the LTA framework to support capacity gaps and may address some quality concerns, however will fall short of the BAPM standards and will therefore continue to be pursued with WHSSC.</p>
Digital Transformation	<p>9. <u>Action:</u> WCCIS – Commence Data Migration</p> <p><u>Status &amp; Mitigation:</u> Workshops with SDGs to establish financial plan commenced and will continue in January. The last of the workshops with the SDUs is being held mid Feb with a view for the SDUs to present financial plans back to the Director of Finance and agree next steps</p>

#### 4. GOVERNANCE AND RISK ISSUES

This report is the fourth to be considered since the beginning of the Covid-19 pandemic. It has been agreed that delivery of the actions will be monitored on a monthly basis and reported to the SLT/Executive Team with a quarterly report to the Performance & Finance and Quality and Safety committees and Board.

#### 5. FINANCIAL IMPLICATIONS

There are no direct financial implications from this paper.

#### 6. RECOMMENDATION

Members are asked to:

- Note the actions and milestones identified within the Q3&4 Plan for Quarter 3;
- Note the reported RAG status and supplementary comments against each action that is off-track;
- Note the areas of achievement;
- Note the timelines for the reporting arrangements for the remainder of 2020/21

<b>Governance and Assurance</b>		
<b>Link to Enabling Objectives</b> <i>(please choose)</i>	<b>Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities</b>	
	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"/>
	<b>Deliver better care through excellent health and care services achieving the outcomes that matter most to people</b>	
	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"/>
<b>Health and Care Standards</b>		
<i>(please choose)</i>	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"/>
<b>Quality, Safety and Patient Experience</b>		
The paper reflects the impact of Quality, Safety and Patient Experience through the performance against the Q3&4 Plan actions and their delivery in Q3		
<b>Financial Implications</b>		
There are no direct financial implications from this paper		
<b>Legal Implications (including equality and diversity assessment)</b>		
Projects and actions detailed within the Tracker are considered on their own merit through the development of the Quarterly Plans.		
<b>Staffing Implications</b>		
Staffing and workforce performance against the actions in the plan is included in the paper and tracker		
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>		
The Operational Planning arrangements will aim to deliver our Strategic Objectives which were aligned to our Wellbeing Objectives through the development of the Organisational Strategy.		
<b>Report History</b>	This is the third report to the Performance & Finance Committee on the performance status of the actions identified within the Q3&4 Operational Plan	
<b>Appendices</b>	Appendix 1 – Q3 Operational Plan Action Tracker Appendix 2- Summary of Progress	