



Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>30 January 2020</b>	<b>Agenda Item</b>	<b>3.6</b>
<b>Report Title</b>	<b>Transformation Board Update</b>		
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<b>Report Sponsor</b>	Hannah Evans, Director of Transformation Siân Harrop-Griffiths, Executive Director of Strategy		
<b>Presented by</b>	Hannah Evans, Director of Transformation Sian Harrop-Griffiths, Executive Director of Strategy		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	To provide an overview of the establishment of a Transformation Board within Swansea Bay University Health Board to deliver the Board's Organisational Strategy <i>Better Health, Better Care, Better Lives</i> and to set out progress and issues in respect of delivery of the Portfolio including the Clinical Services Plan.		
<b>Key Issues</b>	<p>Although the portfolio has not been fully resourced, a realignment of Strategy department, planning and PMO resource has enabled progress to be made in some areas. Clinical engagement in the Clinical Services Plan is growing and the MDT Forums have proved successful in garnering interest and support in driving the plan forward.</p> <p>A recent Clinical Services Plan (CSP) programme business case approach assessment identified the need for a 'stocktake' to be undertaken to risk assess the impact of available capacity and capability on CSP delivery and the increased risk of this on the organisations financial and performance position.</p> <p>The stocktake has been undertaken and was presented to the Transformation Board in January 2020. The stocktake highlights a number of gaps in resources required to deliver <i>Better Health, Better Care, Better Lives</i> at pace, and opportunities for phasing implementation to reflect available resource.</p> <p>This will need to be considered alongside the emerging findings from the recent KPMG work programme that is due to be submitted to Welsh Government in January 2020. The delivery framework for 2020/21 will need to align both</p>		

	<p>the Clinical Services Plan priorities and delivery of the Board's three year plan including the financial and workforce plans and our performance priorities.</p> <p>The outline planning application to secure road access to Morriston requires testing of initial ARCH capacity and demand analysis and planning assumptions (2015/16) against more recent flow efficiency analysis and Hywel Dda flow assumptions.</p> <p>Capacity and capability issues are affecting progress more broadly across the Transformation Portfolio.</p>			
<b>Specific Action Required</b> <i>(please choose one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE</b> the progress, actions and decisions the Transformation Board has made and supported during the reporting period.</li> <li>• <b>NOTE</b> progress, issues and actions to date on the delivery of the Clinical Services Plan.</li> <li>• <b>NOTE</b> the position in terms of a recent stocktake of progress including risks and resource requirements.</li> </ul>			

# **UPDATE ON DELIVERY OF THE TRANSFORMATION PORTFOLIO WITHIN SWANSEA BAY UNIVERSITY HEALTH BOARD**

## **1. INTRODUCTION**

This report provides an overview of the Swansea Bay University Health Board Transformation Portfolio and Clinical Services Plan delivery progress, and key issues arising between November – December 2019.

## **2. BACKGROUND**

The Board agreed the Swansea Bay UHB Organisational Strategy: Better Health, Better Care, Better Lives in November 2018 and the Clinical Services Plan 2019-24 in January 2019.

To deliver the priorities identified within both documents the Health Board agreed to develop a Transformation Portfolio and governance structure, including a Better Health, Better Care, Better Lives Transformation Board and Clinical Services Plan Board to design and govern arrangements for the following;

- Clinical Services Plan
- Enabling Programmes e.g. Digital Modernisation and the SBUHB Operating Model
- Improvement Boards
- Regional Working, including the ARCH Programme.

The Transformation Board (TB) was established formally in May 2019. The Board meets monthly and includes all members of the Executive Board together with a small number of Programme leads. The Board is chaired by the Chief Executive a summary report is received by the Senior Leadership Team regularly to update on broader progress and to ensure links with joint planning arrangements through the Regional Partnership Board (RPB).

The TB requested a detailed resource assessment to enable the portfolio of work to progress at pace, including the delivery of an ambitious programme of change to implement the Clinical Services Plan. The assessment detailed a series of options from 'do nothing' through to full implementation which enabled the Board to assess the risk and benefits of the proposed support package. The assessment is currently unfunded and being reviewed as part of a wider stocktake and consideration of the Board's approach to delivery in 2020/21.

### **3. ASSESSMENT**

#### **3.1 Transformation Portfolio**

##### **3.1.2 Transformation Portfolio Stock take**

Since the previous update, the Transformation Board has progressed with the following actions:

- The Deputy Director of Transformation and the CSP Programme Manager have undertaken a stocktake of business critical posts (resource assessment re-prioritisation) for the short and medium term including resource required to deliver enabling programmes.
- The Director of Transformation has asked members for feedback on their reflections on the Transformation Board since it was established and this will be considered in January 2020. This will include reviewing the whole structure to test what is working well and what needs to be adapted.

##### **3.1.3 Transformation Approach & Development Of The 'Bay Way'**

Following the integration of the Programme Management Office (PMO), Value Based Healthcare (VBHc) and Improvement Team in June 2019, work has focussed on the development of an integrated approach and methodology for transformation within Swansea Bay. This work is progressing to conclusion and a dedicated session at Senior Leadership Team is planned in March 2020. The approach will set out:

- Our approach to improvement – how do we systematically develop the right skills, mindset and tools to embed continuous improvement within the Board and how do we align our specialist resources with the overall goals and priorities of the organisation, including our quality priorities.
- Our approach to Programme and Project Management – we have developed an approach to standardised project management during 2019 and now have circa 50 trained Prince2 managers in the organisation. We will continue to refine and develop this, jointly with partners in West Glamorgan in 2020. A major focus now is on developing our approach to benefits management so that we have a unified approach to assessing, identifying, tracking and realising benefits across financial and non-financial domains.
- Our Value Based Healthcare work has accelerated since June 2019 and the work programme is now fully aligned with the National VBHc strategic direction. In aligning the resources within the Transformation team, our focus now is on developing an integrated approach so that there is synergy between our improvement approach and the work being taken forward around value.

To support the design phase, a local improvement event took place on 21<sup>st</sup> November 2019. 49 Improvement champions across the organisation came together to focus on skills development and shaping the 'Bay Way'. The output from the workshop is being summarised and will be shared with participants shortly. A further Board Development session to share the proposed 'Bay Way' and focus on improvement is being explored.

A summary of the workshop content and output is available to Board members if required.

In November 2019, the Health Board also held its first project management Community of Practice Forum event. The event saw 24 project managers from across the organisation come together to develop a project management support network, continue learning and share good practice.

The first half of the event focussed on the Clinical Services Plan, with an objective to set out current arrangements, roles and responsibilities and thoughts about how to spread and support good planning practice through the CSP. Project Managers who aren't directly working on a CSP project attended to develop their understanding of the CSP and identify any independencies their project may have with the plan. The second half of the event was a workshop activity which asked the group about their thoughts on the current methodology and tools available, what they would like further support with and what they would like from future events. This feedback has provided the Programme Management Office with a work plan of themes and topics to strengthen the knowledge and skills of our project managers. The feedback identified a clear request for learning around benefits management, so therefore the next Community of Practice Forum in March 2020 will focus on this topic.

## **3.2 Clinical Services Plan (CSP)**

### **3.2.1 Clinical Leadership and Engagement**

The bi-monthly CSP Multi-Disciplinary Team events (CSP MDT) are proving hugely successful in bringing SBUHB clinicians together to share and develop ways to deliver the CSP. On 10<sup>th</sup> December 2019, 75 staff attended the CSP MDT *Celebrating Success and Learning from our Exemplars* event which showcased nearly 30 exemplar projects being delivered by SBUHB staff, including many award winning examples. Some of these will be going on a 'roadshow' around our sites to further inspire staff.

The CSP MDT event also;

- Launched the Regional Hospital2Home scheme being led by the CSP Older People's Clinical Redesign Group (CRG) & West Glamorgan Regional Partnership Board (WGRP).
- Announced the formation of a SBUHB Acute Care CRG to lead a large scale redesign of our acute care model and progress made with ideas shared at the acute care CSP MDT held earlier in the year.
- Shared progress made by the Outpatients CRG with ADOPT (Action to Deliver Outpatient Transformation programme) in gastroenterology, paediatrics and orthopaedics.

The evaluation of the event was overwhelmingly positive and some of the ideas generated have informed the February 2020 CSP MDT: 'Digital Delivery of the Clinical Services Plan'.

### 3.2.2 CSP Delivery

Significant areas of progress with CSP delivery to date include:

- Clear strategic direction & alignment with the three year plan
- Clarity of priority work programmes / Regional CSP / West Glamorgan Regional Partnership Board
- Clinical leadership approach; MDT Forum, Clinical Redesign Groups (CRGs)
- Re-alignment of available capacity
- Increased communications / visibility / clarity of message
- Routine highlight reporting
- Initiation of aligning capital, estates, digital infrastructure planning
- Making progress in challenging areas, e.g. acute care, theatres, outpatients
- Generation of enthusiasm and sense of momentum

However, capacity and capability issues are now impacting the pace of progress and as such a 'stocktake' has been initiated to assess what impact available capacity and capability is having on CSP delivery and in relation to the Health Board's three year plan. The output from this will inform a revised Transformation resource assessment.

Three key programmes of delivery were discussed by the Transformation Board; Acute Care, Acute and Emergency Paediatric Services and the South West Wales Cancer Centre.

#### **Acute Care**

This is a critical area of work in relation to managing our unscheduled care performance and has until recently been difficult to gain traction in. However, a concerted period of effort from the CSP clinical and planning leads has seen significant progress being made in advancing this work and the recent formation of an acute care clinical redesign group.

Clinical engagement has, and continues to be, fundamental to the success of this work and the newly formed Acute Care CRG will be a key forum moving forward. The CRG is leading on the formation of the long term vision and model which will include the future of acute medical takes in the Health Board as well as the 'here and now' and medium term service change planning and delivery required to deliver the long term vision.

This work is closely linked to our older peoples programme including their work on hospital2home and acute frailty.

During November – December 2019, the Transformation Portfolio Board supported the CSP acute care development work with:

- Approving the Acute Care CRG proposed acute care clinical model principles.
- Endorsing the emerging Acute Care CRG proposed model and approach for delivering acute care
- Endorsing the submission of an acute care planning manager job description for vacancy panel review as a business critical post

### ***Future Service Model for Acute & Emergency Paediatric Services***

The project team have advised that emergency department and acute paediatric services do not meet national standards for the emergency care of children and as such have developed a future service model which would provide co-located services aiming to reduce unnecessary admissions and enable quicker discharge. Three options for delivery of the new service model are being worked through including workforce and estates options.

The Transformation Board are supportive of the project principles and direction of travel in line with the CSP ambitions, and agreed to the future development of a business case for a preferred option to be received by the Investment and Benefits Group (IBG).

### ***South West Wales Cancer Centre***

The project team have advised that the cancer centre is no longer fit for purpose and as such a programme business case covering the range of provision and equipment improvements required is being developed. A significant amount of investment is required in capital equipment and associated facilities, workforce, and new drugs to deliver high quality and sustainable services. Transformation Board agreed that further work is required to establish and confirm the direction of travel and timeline.

### **3.2.3 Programme Business Case Development**

To inform the creation of a programme business case (PBC) approach to the Clinical Services Plan an external assessment with Joe Flanagan, Strategic Advisor on the Five Case Model, took place in early November 2019.

In addition to a number of positive observations made about our CSP delivery approach, the assessment identified some opportunity observations:

- The CSP is a complex, large scale portfolio of work which will require a suite of PBCs to be developed under a single strategic portfolio outline case
- The CSP priorities should be reviewed in light of available capacity and capability to minimise organisational risk
- The programmes/projects should be mapped against PBC gateways to produce our critical path for the next three-five years
- The Health Board should ensure that those leading these programmes have the skills to develop high quality PBCs

The Transformation Board, in response to the observations, approved a Transformation 'stocktake' to be undertaken explicitly including the above. A CSP 'Stocktake Workshop' took place in December 2019 at which risks to the organisation associated with delivery of the CSP priorities was assessed.

The output from this work will be reviewed by the Transformation Board on January 22<sup>nd</sup> 2020.

### **3.2.4 CSP Infrastructure Group**

Since being established in September 2019, the CSP Infrastructure Group have initiated work on identifying, reviewing and aligning CSP related capital, regional, digital and estate planning.

The group has approved a proposal to undertake an options appraisal of all proposed pre-road developments on the Morriston site to assess the feasibility, risks and benefits of these for the Health Board to inform the prioritisation of one, possibly two preferred options.

The group is also supporting the Morriston Road planning application, ensuring that this is aligned to the clinical services plan and regional clinical services plan. The Morriston Road outline planning application requires testing of initial ARCH capacity, demand analysis and planning assumptions (2015/16) against more recent flow efficiency analysis and Hywel Dda flow assumptions. Capacity and capability issues associated with the Transformation Resource Assessment stocktake are affecting progress.

### **3.3 Enabling Programmes Update**

There are 4 enabling programmes or work packages that report to the Transformation Board as follows:

- Digital (previously informatics) Programme
- Workforce & Organisational Development Forum
- Healthcare Value and Efficiency Programme
- Target Operating Model.

The role of the TB is to ensure that the organisation is aligning its programmes.

The Transformation Portfolio Board received and noted highlight reports from the following enabling programmes during November – December 2019:

#### ***Digital***

Digital Services reported good progress, with all projects delivered to schedule during November including delivery against the ambitious SIGNAL implementation plan. Six clinical areas went live during November in readiness for go live of the Hospital2Home project.

The digital services team also presented the Office 365 system in December 2019 and described the potential roll out and benefits. Office 365 has significant potential to improve business processes within the organisation including team working, collaboration, productivity and clinical processes. The Board agreed that Office 365 could offer significant benefits to the CSP and therefore recommended a digital focus at Future CSP MDT Forum – this is scheduled for February. It was agreed that the Director of Transformation would be the Senior Responsible Owner (SRO) for the O365 project.

The report advised of a decision made by the e-prescribing (HEPMA) project board, to approve a change control to defer go live from November 2019 to February 2020.

### ***Workforce & Organisational Development***

Workforce and Organisational Development reported achievements in its leadership and development programme including two successful leadership summit events which 130 – 150 staff members attended, 9 Bridges programmes delivered which 72 senior managers attended and 46 members of staff completing the coaching with impact course. The report highlighted continued recruitment of Apprentices across the organisation and cohort two of the Graduate management Trainee Programme commencing, both of which creating excellent career pathways.

Workforce and Organisational Development are also focusing on delivering the changes associated with the Transformation Programme and the Clinical Services Strategy.

### ***Healthcare Value & Efficiency***

Value Based Healthcare reported progress supporting CSP priorities within its 18 month rolling programme during the reporting period. In lung cancer, the National Visualisation Tool was tested and PROMS are now being collected for new lung cancer patients attending diagnosis and oncology clinics in Morriston Hospital. A Proof of Concept launches in January to test a model of collecting PROMs across community heart failure clinics. In breast cancer, a PKB PROM collection review was undertaken to understand completion and update rate for pre-surgery tool. The local work programme aligns with the National Value Based Healthcare Strategy for Wales launched in Autumn 2019, and the local team continue to work closely with the national leads and the Finance Delivery Unit.

### ***Target Operating Model***

The Target Operating Model Programme reported progress against its four domains including design, people, systems & partnerships and progress. The report also detailed high level milestones for new structure implementation, phase 1 OCP is progressing in January 2020 with anticipated implementation of phase 1 end of February.

The report advised that to date, an engagement exercise on the 'Strengthening our Structures' document had been completed with over 100 responses received, followed by an outcomes report to Executive Team, SLT and sub group of partnership board. Throughwork on 'Strengthening our Structures', the Board has re-affirmed its commitment to strengthening clinical and system wide leadership across management structures.

### **3.4 Arch Update**

The Transformation Board received and noted a highlight report from the ARCH programme including updates of the service transformation projects. The Board receives separate update reports on ARCH and Joint Regional planning arrangements.

## 4. GOVERNANCE AND RISK ISSUES

### 4.1 Transformation Portfolio Risks & Issues

The Transformation Board currently has seven risks on its risk register. The risk register is a standard business item on the agenda and each risk has a mitigating action.

	November 2019	December 2019
Open Risks	7	7
Risk score less than 5	0	0
Risk score 5 – 8	0	0
Risk score 9 – 15	2	2
Risk score 16 – 25	5	5
Closed	0	0

The risks are grouped into the following categories

Category	Number of risks
Project Delivery	1
Finance	1
Stakeholders	1
Workforce	1
Bridgend boundary change	1
Operational pressures	1
Targeted intervention	1

### 4.2 Clinical Services Plan Risks and Issues

The Transformation Board receives CSP risks and issues as part of the highlight report. The key risks in delivery of the Clinical Services Plan reporting during November – December 2019 are:

- Clinical leadership
- Planning and project management capacity – the stock take will help to understand level of risk.
- Skills – developing Project and Programme Business Cases.
- Funding – clinical engagement requires agreement of a budget to facilitate engagement , skills development in some key areas requires funding e.g. business cases.
- Affordability - understanding how an affordability assessment of the CSP will be undertaken.

## 5. FINANCIAL IMPLICATIONS

The financial implications of this paper will continue to be assessed as part of the development of business cases that underpin the specific programmes of work, which will be tested through the Board's Investment & Benefits Group. There are specific financial implications that emerge from capacity requirements to support the wide range of work programmes. These have been assessed by the Executive Team and will be refreshed as part of the stocktake and presented for further discussion at the Transformation Board in February 2020.

## 6. RECOMMENDATION

Members are asked to:

- **NOTE** the progress, actions and decisions the Transformation Board has made and supported during the reporting period.
- **NOTE** progress, issues and actions to date on the delivery of the Clinical Services Plan.
- **NOTE** the position in terms of a recent stocktake of progress including risks and resource requirements.

<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 type="checkbox"/>
<b>Health and Care Standards</b>		
<i>(please choose)</i>	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input type="checkbox"/>
	Effective Care	<input type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
<b>Quality, Safety and Patient Experience</b>		
<p>There are no direct quality, safety or patient experience issues arising from this report. Transforming care and delivery offers significant opportunities to improve quality, safety and patient experience and throughout the establishment of programmes and projects, we will be using Health Board's Quality Impact Assessments to test the ongoing impact of proposed services changes. As part of our emerging improvement methodology we also need to ensure that patient experience is centre stage in our approach to improvement and redesign.</p>		
<b>Financial Implications</b>		
<p>The report discusses an initial resource assessment that was completed to take forward the priorities identified within the Clinical Services Plan and enabling programmes, as well as resource requirements to develop an integrated transformation and improvement approach. This is currently being reviewed and will be considered at the Transformation Board in January. The implications of developing an ambitious programme of work are likely to require additional capacity and skills within the Board and this will need to be assessed as part of developing our medium term plan and aligned with the approach to delivery following a recent KPMG financial review commissioned by Welsh Government.</p>		
<b>Legal Implications (including equality and diversity assessment)</b>		
<p>There are no legal implications.</p>		
<b>Staffing Implications</b>		
<p>As set out above, the Transformation Portfolio is likely to require additional resources to drive the organisational objectives and this is currently under review.</p>		
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>		

The Organisational Strategy sets out our ambition to be a population health organisation; focussing not just on service delivery but on ensuring that we improve the health of the people that we serve. In that respect, its goal is to rebalance our approach to focus on the long term needs of our population as well as delivering health and care over the short and medium term. The Strategy also sets out how we intent to prevent ill-health, by working collaboratively with our partners in Local Government and other organisations.

Organising our delivery into a series of Programmes and Projects that are brought together under a single Portfolio helps us to balance our focus as an organisation and to ensure that we are driven by our objectives which cover each of the 5 ways of working within The Well being of Future Generations (Wales) Act 2015.

<b>Report History</b>	<ul style="list-style-type: none"> <li>• Transformation Programme Update November 2019.</li> <li>• Delivering our Clinical Services Plan and Developing an Integrated Medium Term Plan (IMTP) 2020/21 - November 2019.</li> </ul>
<b>Appendices</b>	None