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Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board



Meeting Date	29 th November 2018	Agenda Item	2ii
Report Title	Progress Report – Organisational Strategy, Clinical Services Plan and Three Year Integrated Plan 2019-22		
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Report Sponsor	Siân Harrop-Griffiths, Director of Strategy Lynne Hamilton, Director of Finance		
Presented by	Siân Harrop-Griffiths, Director of Strategy Lynne Hamilton, Director of Finance		
Freedom of Information	Open		
Purpose of the Report	This paper provides an update on progress to date in developing the Health Board's Organisational Strategy 2019-29, Clinical Services Plan 2019-24 and Integrated Three Year Plan 2019-22.		
Key Issues	<p>This paper outlines the progress in developing the Organisational Strategy and Clinical Services Plan and the integrated approach to align with the concurrent development of the Health Board's Integrated Three Year Plan 2019-22.</p> <p>The first draft of the Organisational Strategy has been developed and is presented to Board for approval. This includes the organisational Well-being Objectives which are also presented to Board for approval as part of the Organisational Strategy.</p> <p>Significant progress continues in the development of the Clinical Services Plan The Clinical Redesign Group work has been completed, detailed modelling is underway and the five year details of the plan are being refined.</p> <p>The development of the Health Board's IMTP continues to progress. The focus of the process through November and December is the integration of detail across workforce, finance, capital and services with particular reference to delivering Targeted Intervention and the Clinical Services Plan priorities and a balanced financial position.</p>		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
			Approval ✓

Recommendations	<p>Board members are asked to:</p> <ul style="list-style-type: none"> • Approve the draft of the Organisational Strategy; • Approve the Organisational Well-being Objectives included within the Organisational Strategy; • Note the progress to date on the development of the Organisational Strategy, Clinical Services Plan and Three Year Integrated Plan 2019-22; and, • Endorse the next steps.
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PROGRESS REPORT – ORGANISATIONAL STRATEGY, CLINICAL SERVICES PLAN AND THREE YEAR INTEGRATED PLAN 2019-22

1.0 Situation

The Health Board is simultaneously developing its Organisational Strategy, Clinical Services Plan and Integrated Three Year Plan 2019-22. The work to develop each of these is being undertaken through highly aligned processes which will deliver three interconnected products describing; our ten year strategic vision, a five year clinical services ambition and how we will deliver these through our three year Integrated Medium Term Plan (IMTP).

This paper presents the draft Organisational Strategy for approval and outlines our progress in developing the Clinical Services Plan and IMTP.

2.0 Background

The achievement of an approved Integrated Medium Term Plan is a key factor in achieving an improvement in the Health Board's Targeted Intervention monitoring status with Welsh Government. As has been set out by Welsh Government, the foundations of an approvable plan begin with a clear long term Organisational Strategy and a robust Clinical Services Plan. Work has therefore been underway to develop these and produce these for final Board approval and submission to Welsh Government in January 2019.

With the longer term strategy and clinical services plan in place, the development of a three year Integrated Three Year Plan will enable the organisation to determine a clear roadmap for delivery and improvement of these longer term goals. The advice from Welsh Government is to plan on a three year basis, and, at an appropriate time, the Board should determine whether a three year IMTP or annual plan should be submitted. This will largely depend on our confidence in terms of our financial and performance plans and delivery. The Health Board is therefore proceeding with an integrated three year planning process the outcome of which will be tested against the quality, safety, delivery and financial requirements of Welsh Government's IMTP process prior to submission to the Board in January 2019.

3.0 Assessment

3.1 Organisational Strategy Progress Update

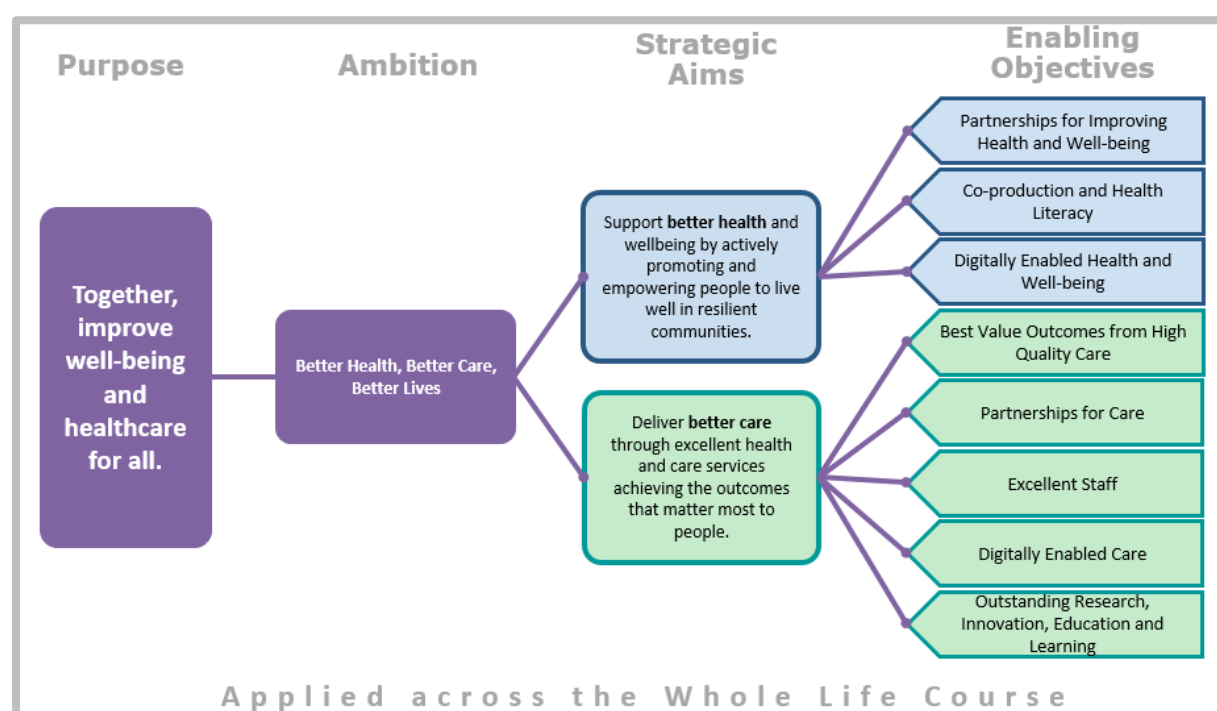
The Health Board's draft Organisational Strategy has been developed, and Board members have been fully involved in this process. The Strategy (attached at **Appendix 1**) sets out the organisation's long term purpose, ambition and strategic

aims, setting out a vision for the services and successes we want to achieve by 2030.

As part of meeting the Health Board's statutory duty under the Wellbeing of Future Generations' Act the Organisational Strategy also includes the Health Board's Well-being objectives which demonstrate how the organisation is contributing to the delivery of the national well-being goals. The Well-being Objectives are:

1. **Connecting communities with services and facilities across partners leading to demonstrable improvements in wellbeing and health**
2. **Working with local communities, individuals and partners to build community resilience**
3. **Give every child the best start in life**

The strategy also sets out the 8 Enabling Objectives of the Health Board which will be crucial to delivering our strategic aims. Our Well-being Objectives have also been mapped to these enabling objectives to enable delivery. The overview and alignment of the strategy is presented below in our 'Strategy on a Page'.



The organisational strategy engagement and development will continue to be closely coordinated with the development of the IMTP and Clinical Services Plan to ensure coherence and full alignment. Engagement on the Organisational Strategy is ongoing, however, all engagement to date suggests that the course set out in the draft is correct. It is vital that the strategy becomes embedded into the organisation in both planning and delivery to ensure a shared purpose and focused approach to achieving better health and better care for the people we serve.

Subject to the Board's approval of the attached draft, finalisation will involve enhancing the document presentation to support communications and engagement.

Executive Director leadership has been confirmed for each of the Enabling Objectives, and the outcome measures to deliver the strategy will be addressed through the Integrated Three Year Plan.

The final Strategy will be submitted to the Board and Welsh Government alongside the IMTP and Clinical Services Plan in January 2019.

3.2 Clinical Services Plan Progress Update

The Clinical Redesign Groups for unscheduled care, surgical services and regional services with staff and partners have concluded and we are continuing to engage with stakeholders on the emerging themes and priorities for the Clinical Services Plan (CSP).

We are now refining our work with staff and partners in relation to the:

- Long list of system reconfiguration options;
- Weighted prioritisation criteria against which to assess our preferred option;
- Portfolio of improvement programmes for delivery;
- Critical path and implementation plan over the five years; and,
- Measures of success.

Engagement with staff continues through our 'Have Your Say' programme and our intranet and FAQ bulletins. This approach includes the Clinical Services Plan clinical leaders meeting with teams and individuals.

At our final Clinical Redesign Group for regional services with colleagues from Hywel Dda University Health Board, staff identified a small number of new priority areas, over and above work already been done by the ARCH programme and existing regional planning processes. These include:

- Regional unscheduled care alignment;
- Regional frailty alignment;
- Regional maternity and children and young people's services;
- Regional digital opportunities; and,
- Regional workforce opportunities.

Subject to the agreement of the Hywel Dda Clinical Services Strategy "A Healthier Mid Wales" and the Health Board's updated Clinical Services Plan, we will review all of the work programmes undertaken through ARCH, Joint Regional Planning and those set out above, to ensure a clear and prioritised regional work programme.

Our next steps include;

- Finalising the long list of options for system reconfiguration for prioritisation;
- Agreeing the prioritisation criteria with the Executive Team in November 2018;
- Sharing the options and criteria with the Board at the Board Development Session in December;
- Prioritisation of the preferred system reconfiguration option by the Clinical Senate in December 2018 for review by the Executive Team and recommendation to Board in January;
- Refining the portfolio of programmes and critical path for delivery;

- Refining the measures of success; and,
- Continued work to align the Clinical Services Plan delivery with the Integrated Medium Term Plan.

The Board will continue to be apprised of progress and will review the draft Clinical Services Plan prior to Christmas 2018.

The emerging priorities and options for system reconfiguration continue to be shared and tested with Delivery Units as part the Integrated Medium Term Planning process. The Integrated Medium Term Plan will deliver the first three years of our Clinical Services Plan commitments, including the underpinning efficiency assumptions.

3.3 Integrated Three Year Plan Progress Update

The Directors of Strategy, Finance, Workforce and Interim Chief Information Officer and members of the Planning, Performance and Finance Teams met with Welsh Government on 2nd November 2018 to discuss progress made to date and specifically the approach being taken around Digital and Workforce plans. Engagement with Welsh Government continues to be positive.

With regard to progress with the planning, the second IMTP workshop was held on 12th November and the event focussed on two key areas; further defining the actions required to deliver the Clinical Series Plan emerging priorities; and enabling detailed discussions with Delivery Units on key enabling elements of their plans focussed on Quality, Performance, Digital, Finance and Workforce. The outputs of the workshop have been used to support the Clinical Services Plan and IMTP development.

Unit and Directorate first draft plans were reviewed and feedback has been provided. Second draft plans were submitted on 16th November and work is underway to assess the plans to ensure strategic fit and feasibility and to undertake proportionate Quality and Equality Impact Assessments. We are also identifying themes in line with the CSP, the most obvious of these being primary care Wellbeing Centres and Cluster development, and the potential to make a step-change in unscheduled care at Morriston (subject to financial considerations). The refinement and profiling of actions across the three year period will be informed by the Clinical Services Plan and with reference to meeting the underpinning efficiency assumptions to support our longer term aims.

The plans will also be subject to further detailed scrutiny and challenge through a series of Executive Director led sessions in early December to ensure performance improvement and financial balance is assured, as well as strategic change.

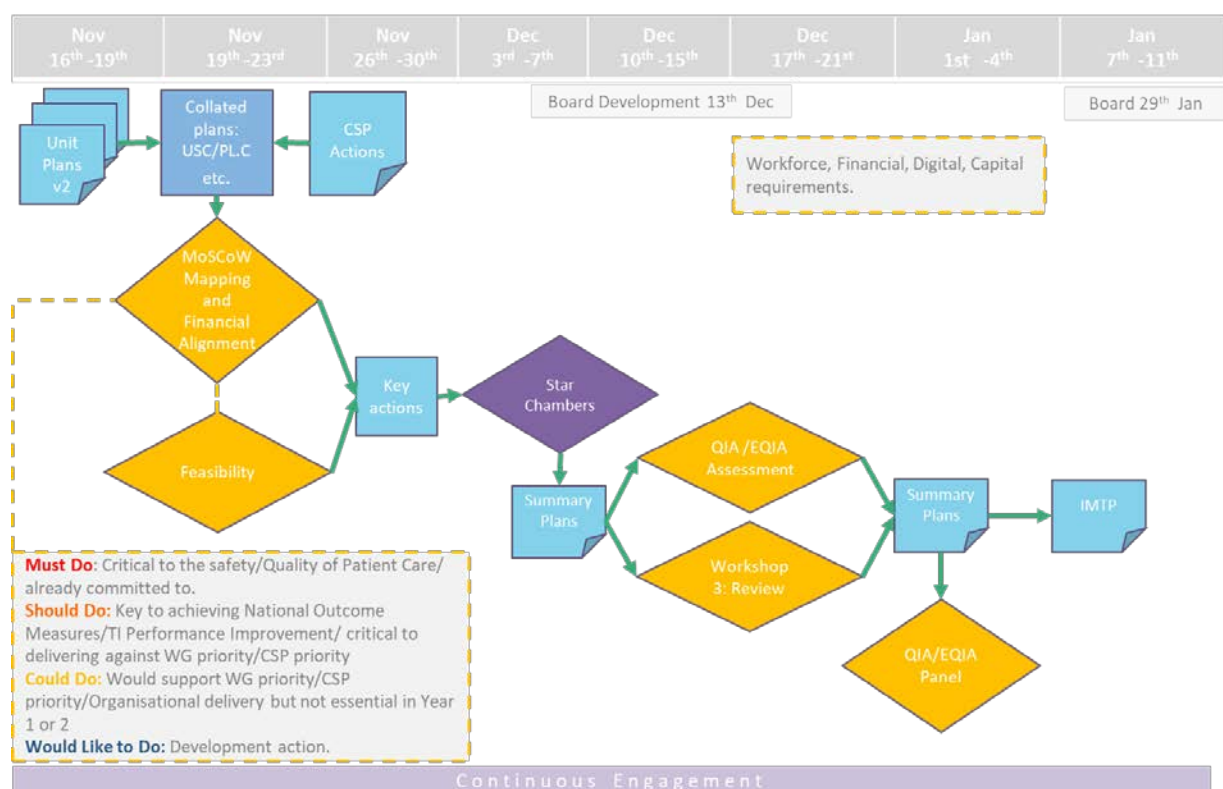
The approach to Regional Planning has been agreed with Hywel Dda and detailed mapping of opportunities (clinical and non-clinical) for partnership working are being refined and further details developed. Coordinated planning also continues with Cwm Taf UHB and Welsh Government in relation to the Bridgend Transfer. Our engagement plan is underway and the approach is to engage on all three Plans at the same time with both external and internal stakeholders and staff, including the Regional Partnership Board and Community Health Council.

The development of the final IMTP is underway and will be clearly aligned to delivery of the Organisational Strategy. The developing plan document will be shared with members informally for comments on structure and approach.

The key next steps of the IMTP development process include:

- Finalising demand and capacity modelling and developing performance trajectories in November;
- Assessing Unit plans for strategic fit, and feasibility and identifying themes in line with the CSP;
- Executive Director led sessions to assure performance improvement and financial delivery;
- The final IMTP workshop to review key service area plans will take place on 10th December 2018;
- Schedule of stakeholder engagement in place including Regional Partnership Board and Community Health Council.

The flight path to finalise the plan by January is described in the diagram below:



3.4 Medium Term Financial Plan

The Medium Term Financial Plan is a key component of the IMTP. In developing a new Financial Planning Framework, this is intended to align, underpin and support the delivery of key priorities identified through the integrated planning process and arising from the Organisational Strategy and Clinical Services Plan. The Financial Plan will demonstrate how and when the Health Board will come back into financial balance, thereby meeting its statutory requirement. However a key aim of the

Financial Plan is to show the shift in focus from financial balance as an end in itself to supporting and enabling the delivery of safe and sustainable services, maximising the value of care, and also targeting resources to meet population healthcare needs.

The first cut financial plans, as part of the Unit and Directorate Plans, were received on 19th October and have now been reviewed. Following feedback, the second cut plans were submitted on 16th November and are now being re-assessed. This analysis is part of an integrated scrutiny process and work plan, which is looking to align with and take account of other key components of the Plans including service, workforce, quality, performance, digital and infrastructure plans (as described in the process diagram in the previous section).

As part of the engagement with Welsh Government, there have also been separate financial discussions with a focus on financial planning assumptions including further clarity on the implications of the Draft Budget which was published on 2 October.

Key next steps include:

- Finalisation of key financial assumptions, including funding, cost pressures and savings;
- Further developing the alignment of the financial plan to the Clinical Services Plan with a particular focus on benchmarking and efficiency data to drive early progress on the improvement programmes and financial analysis of the emerging options around system configuration;
- Refine the financial elements of the Unit and Directorate Plans via the Star Chamber Panels; and,
- To progress work associated with the Bridgend Boundary change, including the disaggregation of funding and budgets..

4.0 Recommendations

Board members are asked to:

- Approve the draft of the Organisational Strategy;
- Approve the Organisational Well-being Objectives included within the Organisational Strategy;
- Note the progress to date on the development of the Organisational Strategy, Clinical Services Plan and Three Year Integrated Plan 2019-22; and,
- Endorse the next steps.

Governance and Assurance							
Link to corporate objectives (please ✓)	Promoting and enabling healthier communities		Delivering excellent patient outcomes, experience and access		Demonstrating value and sustainability		Securing a fully engaged skilled workforce
	✓		✓		✓		✓
Link to Health and Care Standards (please ✓)	Staying Healthy	Safe Care	Effective Care	Dignified Care	Timely Care	Individual Care	Staff and Resources
	✓	✓	✓	✓	✓	✓	✓
Quality, Safety and Patient Experience							
The Three Year Plan will include our Quality and Safety Priorities.							
Financial Implications							
The Three Year Plan will include our Financial Plan for 2019-22.							
Legal Implications (including equality and diversity assessment)							
A risk assessment will be undertaken on the Health Boards ability to meet its statutory duty under the NHS (Wales) Finance Act 2014 as part of the development of the Plan.							
Staffing Implications							
The Three Year Plan will include our integrated workforce plans.							
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)							
The Three Year Plan will respond to the WBFGA and our Corporate Objectives will be aligned to our Wellbeing Objectives through the development of the Organisational Strategy.							
Report History	Paper Discussed at Executive Team 28 th November 2018						
Appendices	Appendix 1 –Draft Organisational Strategy						



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Better Health, Better Care, Better Lives

**Our Organisational Strategy
2019-2030**

Our Opportunities

As we go into 2019/20 “Abertawe Bro Morgannwg UHB” has an opportunity to set out our organisational ambition and direction for the next 10 years.

We are a different organisation – we have a new geography, a predominantly new Board and a renewed sense of ambition and purpose going forward.

We have strong foundations on which to build.

We will use these opportunities to:

- play our full role in the local and regional health economy;
- increase our focus on improving our population’s health and well being;
- integrate services with our partners in communities; and
- ensure we are a sustainable organisation delivering consistently high quality care

Our people are living longer than ever – we need to make sure that they stay well and independent as long as they can.

The quality of our care is good on the whole – we need to make this consistent and better wherever care is received.

We are leaders in Wales in digital technology – we will maximise this advantage and use it as an opportunity to transform how people’s health is improved and how care is delivered.

We have excellent, dedicated staff – we need to ensure that ABMU is an excellent place to work, and that clinicians lead our service change and improvement.

We need to build on the foundations we already have in place to make sure our services deliver the outcomes that matter to people within the resources we have available.

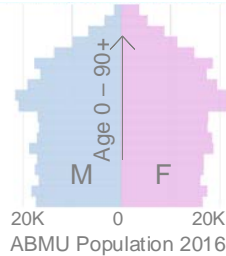
About ABMU

Population of ABMU* is ~386,000



Projected increase in population including +9% in Swansea (the 3rd largest increase in Wales)

The Welsh population structure is projected to change with substantial rise in the older population and a projected fall in working age adults



Life Expectancy Continues to Rise



But the difference in life expectancy between the least deprived and most deprived areas is 9.7 Years

There is a >20 year (M) and 18 year (F) gap in healthy life expectancy

Healthy Behaviours



19%

1 in 5 currently smoke (7% use e-cigarettes)



18%

1 in 5 currently drink over weekly guidelines



53%

1 in 2 active for 150min or more a week



23%

1 in 4 eat 5 or more portions of fruit or veg



60%

3 in 5 are overweight or obese



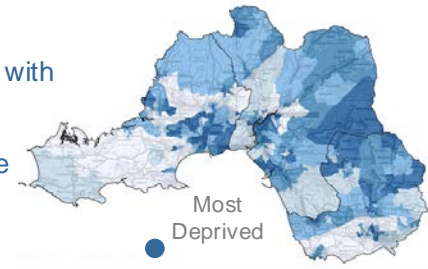
10%

Followed 0 or 1 healthy behaviours

Deprivation

ABMU* has more deprived communities than average for Wales with over a **1/4 of our Communities**

falling into the most deprived categories. Areas of deprivation are particularly in urban parts of Swansea, NPT and upper valley communities.



Burden of Disease

The greatest causes of disease burden in Wales as measured by the Disability Adjusted Life Year (DALY) are:

- **Cancer (19%)**
- **Cardiovascular Disease (18%)**
- **Musculoskeletal Disorders**
- **Mental Health and Substance use**

4 in 10 cancers are preventable

By 2030, 11% of people in ABMU* will have a Diabetes diagnosis

Substance Misuse XXXXXX

Mental Health accounts for 20% of the overall burden of disease. A 1/4 of the population experience mental health problems.

Children and Young People

More than **1 in 5** children and young people aged under 20 live in poverty in Wales. **Swansea West** is one of top 25 electoral wards with highest levels of child poverty in UK

Later Years

In 2020 across ABMU* approximately 45.3% the population of people aged 65+ will be living alone. ~1 in 3 will suffer a fall each year. Only 1 in 3 will return to former levels of independence and 1 in 3 end up moving in to long term care - yet many falls are preventable

Better Health, Better Care, Better Lives



The Health Board has responsibility for: assessing the health needs; commissioning; planning and delivering healthcare for the populations of Neath Port Talbot and Swansea Local Authorities. Through our strong partnership arrangements we also have a joint responsibility for improving the health and wellbeing of our diverse communities. As a healthcare provider, we provide health promotion and prevention, primary care, community services, mental health, learning disabilities and hospital-based care for our resident population, and for some specialist services for people from a wider geographical area.

3 Major Hospitals



14, 004 Members of Staff



XX GP



Practices

XX

Pharmacies

XXXX



Operations

XXXX A&E

Attendances

XX

**Optometry
Practices**

**XX Dental
Practices**

XXXX

**Outpatient
Appointments**

XXXX



Our Values: caring for each other, working together, always improving

Caring for each other in every human contact in all of our communities and each of our hospitals

We will: Be approachable, helpful, attentive to other's needs; be thoughtful and flexible about how to meet the needs of each person; be calm, patient, reassuring and put people at ease; protect others' dignity and privacy and treat others as we wish to be treated.

Working together as patients, families, carers, staff and communities so we always put patients first

We will: Listen closely; consider other's views and include people; appreciate others; be open, honest and clear; give constructive feedback and be open to and act on feedback ourselves; be supportive and say "thank you".

Always improving so that we are at our best for every patient and for each other

We will: Be vigilant about safety and risk; never turn a blind eye; look for opportunities to learn; enthusiastically share ideas and actively seek solutions; be accountable for our behaviour and hold others to account; keep promises; be positive, a role model and inspiration to others.



Better Health, Better Care, Better Lives



Regional Services

The Health Board provides a range of specialised services which are provided on a regional basis, including Burns and Plastic Surgery (for the whole of South Wales and South-West England), Forensic Mental Health Services (for South Wales) and Learning Disability Services (for the ABMUHB, Cwm Taf and Cardiff and the Vale Health Board areas). We also host the South West Wales Cancer Centre, providing radiotherapy and oncology for this area and other regional services such as specialised cardio-thoracic and pancreatic surgery. We do not provide specialist Child and Adolescent Mental Health Services (CAMHS) for our population, these are provided by Cwm Taf University Health Board. The figure below illustrates the geography served by the Health Board:

- **Zone 1** – Primary, community, mental health, learning disability (also provided for Cwm Taf and Cardiff and Vale HB residents) and local DGH services
- **Zone 2** – Regional services for Mid and West Wales
- **Zone 3** – Plastic, bariatric and pancreatic surgery and cleft lip and palate
- **Zone 4** – Burns service catchment area



Regional Working

The Health Board is also a key member of the Western Bay Regional Partnership Board, the Swansea Public Services Board, Neath Port Talbot Public Services Board and the ARCH Programme. Our strong partnership arrangements are essential to the successful delivery of seamless and sustainable services across health and social care and in the promotion and improvement in well-being for the people of the area. The key objectives and actions of these boards inform the planning and delivery of service in the Health Board.

In order to better align the Health Board's approach, the well-being objectives of these plans have been mapped to establish three well-being objectives for the organisation:

Give every child the best start in life

Connect communities with services and facilities

Maintain health, independence and resilience of individuals, communities and families

These objectives have also been mapped to the enabling objectives as set out in our Organisational Strategy and therefore are embedded in the IMTP.

Our Values and Behaviours

The Health Board developed our Values and Behaviours through extensive engagement during 2015. They must underpin all that we do and we have no wish to change them.

Our values	Our behaviours. How we are with patients, families, carers and colleagues.	
	We will	We will not

caring for each other in every human contact in all of our communities and each of our hospitals.

Friendly, helpful, attentive and welcoming

- Be approachable, smiling, offer warm welcomes
- Be helpful, attentive to others' needs; do the little things that make the difference; be prepared to go the extra mile

- Be moody, impatient, rude or abrupt
- Ignore people; be too busy to help or have an "it's not my job" attitude

See people as individuals, do the right thing for every person, treat people with dignity and respect

- Be sensitive, thoughtful and flexible about how to meet the needs of each person
- Protect others' dignity and privacy, and take action when you see these being undermined

- Make assumptions about others' needs, preferences or abilities; ignore individual needs
- Be disrespectful; dismissive, undermining, bullying or intimidating

Kind, compassionate, patient and empathetic

- Put yourself in others' shoes and treat them as you would wish to be treated
- Be calm, patient, reassuring; put people at ease

- Neglect people; allow people to suffer unnecessary discomfort or distress
- Be insensitive; make people feel like a nuisance

working together as patients, families, carers, staff and communities so we always put patients first.

Communicate openly, honestly and explain things clearly

- Listen closely to what is being said
- Be open, honest and clear; speak in a language which people understand
- Let people know what's happening now and next
- Check the person understands what you're saying

- Use jargon or over-complicated language and assume people understand
- Leave others confused or with unanswered questions and concerns

Listen, understand, involve, and value everyone's contribution

- Consider others' views; and include people (patients, carers, colleagues) in decisions about things that affect them
- Appreciate others, be supportive and say 'thank you'

- Ignore other peoples' opinions, concerns, ideas or contributions; exclude or talk over people
- Not take the time to ask questions or find out more
- Let others down; take other people and their efforts for granted

Open to and act on feedback and speak up

- Always speak up when you see poor behaviour or unsafe practice
- Give constructive feedback; and be open to, and act on, feedback yourself

- Walk past unsafe practice or ignore poor behaviour
- Reject or not learn from feedback
- Blame or criticise others and not consider how you could improve

always improving so that we are at our best for every patient and for each other.

Safe, positive, seek out learning and continually develop

- Be vigilant about safety and risk; never turn a blind eye
- Look for opportunities to learn; enthusiastically share ideas and actively seek solutions and ways to improve

- Be negative; cut corners; cover up mistakes; ignore evidence; accept poor standards
- Be obstructive or resistant to change; use negative body language like eye-rolling or sighing

Professional, responsible and hold each other to account

- Be accountable for your own behaviour, and hold others to account; keep promises
- Be positive, a role model and inspirational to others

- Leave notes and documentation incomplete
- Accept second best; pass the buck; avoid responsibility and have to be chased by others
- Complain about work to patients

Efficient and timely

- Actively find ways to reduce delays and waste; join up services for others
- Plan ahead, be prompt, organised and responsive; value others' time

- Ask others to take on too much; set unrealistic expectations and pass on stresses
- Avoid change 'because we've always done it this way'
- Keep people waiting unnecessarily

Caring for each other

friendly; kind; welcoming;
treat people with dignity
and respect

Working together

be open, honest and clear;
listen, understand and
involve

Always improving

seek out learning; share
ideas; actively seek
solutions and ways to
improve

Developing our Organisational Strategy

We are also well placed to be best in class
in a number of areas

At the moment the Health Board has a raft of Strategies and Plans, none of which are set within an overall organisational strategy.

This makes it difficult for us, our staff, our partners and public to understand what we are meant to be doing – and whether we have done what we said we need to do.



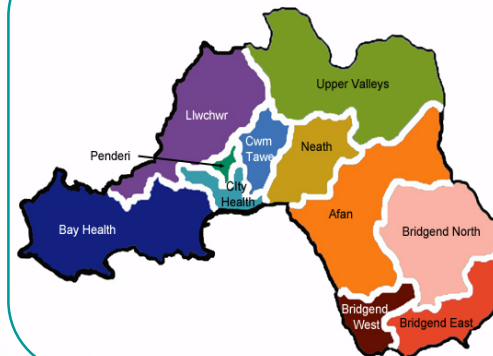
ARCH - not just for innovation in healthcare but in driving regional growth, skilling up future generations; and leading the way for purposeful partnerships.



Value - we must now embrace value based healthcare alongside the models of evidence based medicine and quality improvement - we have the opportunity to be pioneering

Key

- Agreed by Board
- Strategies/Plans in draft/needing updating
- Strategies/Plan needing development



Primary Care - Maturity of, and leadership within, our primary care clusters is highly regarded across Wales – a very strong platform to build from.

The National and Regional Context

Wales has some of the most progressive legislation in the world, providing us with the context to maximise our contribution to improving health and wellbeing.

Well Being of Future Generations

(Wales) Act 2015 to improve the social, economic, environmental and cultural well being of Wales. The Health Board is a statutory partner in the two Public Services Boards, has approved the Well Being Plans, and has agreed **Wellbeing Objectives**. The Well Being goals and 5 ways of working are embedded across our strategy.



Parliamentary Review of Health and Social Care in Wales and **A Healthier Wales: our Plan for health and Social care**- whole system approaches to improving the health and well-being of people through aligned and seamless services, focused on local communities.



Prosperity for All, the Welsh Government's national strategy has four themes: prosperous and secure; healthy and active; ambitious and learning; and united and connected which are reflected through our Strategy.

Social Services and Well Being Act (2014)

which focuses on integrated care to help children and adults maintain their independence locally, which we deliver through the Western Bay Regional Partnership Board.



In addition:

- **Public Health (Wales) Act (2017)** focuses on improving population health through a range of measures; and
- **Environment (Wales) Act (2016)** is aimed at promoting sustainable management of natural resources.

Working in Partnership

Fundamental to delivering the ambition set out in our Strategy is our ability to be a recognised as a “good partner”, and an organisation that others want to work with. We have some great examples to build on, but we know there is lots more to do.



ARCH – is a partnership between ABMU, Hywel Dda Health Boards and Swansea University to improve the health, wealth and wellbeing for the population of South West Wales.



Swansea Public Service Board has five priorities:

- Early years
- Live well, Age well
- Working with Nature
- Strong communities
- Sharing for Swansea



Western Bay Regional Partnership Board has delivered integrated community based services, and is the basis for further transformation through clusters

Bwrdd Gwasanaethau Cyhoeddus
Castell-Nedd Port Talbot



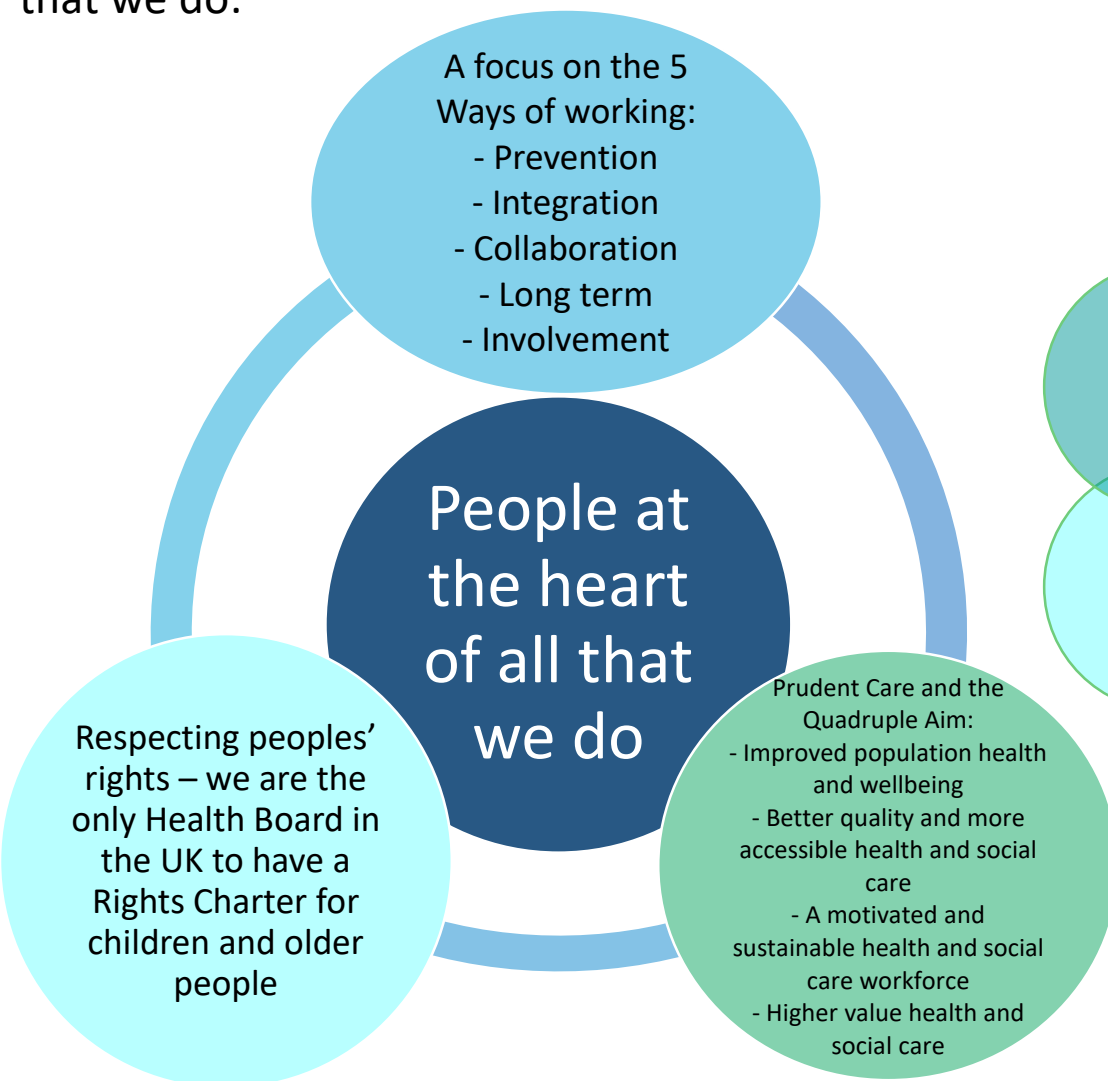
Neath Port Talbot
Public Services Board

Neath Port Talbot Public Service Board has six priorities:

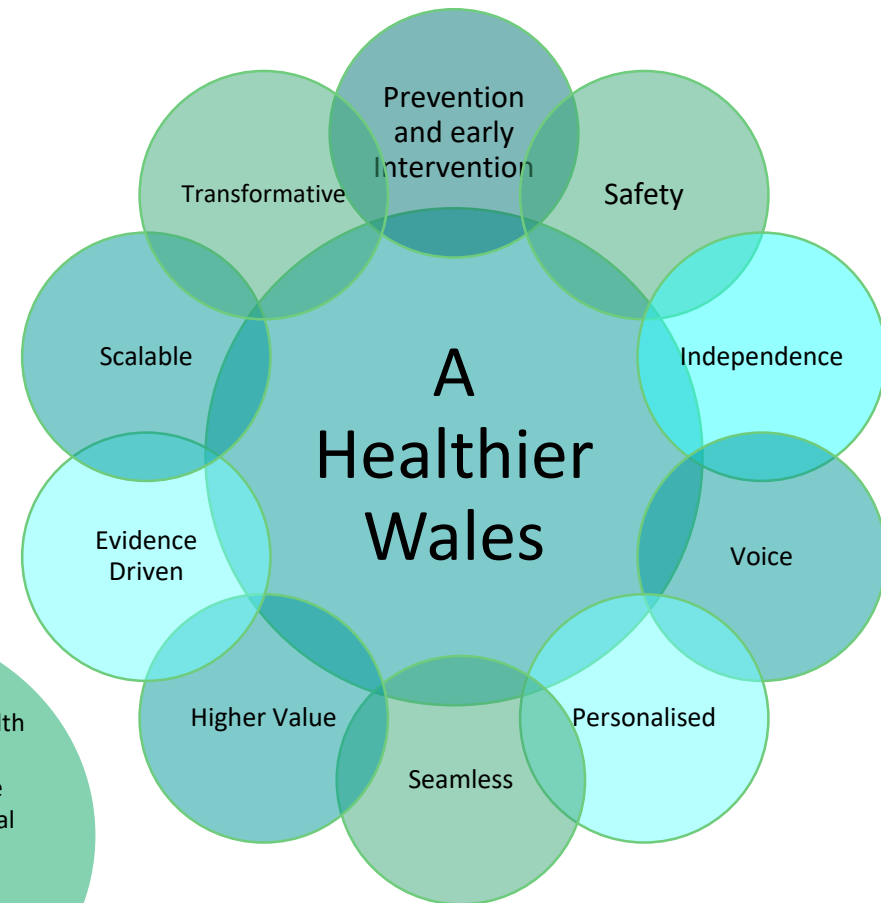
- Children in their early years
- Safe and resilient communities
- Ageing well
- Green infrastructure
- Well-being in the Workplace
- Digital Inclusion

Our Principles and Ways of Working

We have agreed a set of principles to underpin all that we do:



Our Strategy also reflects all the design principles in A Healthier Wales



Our Purpose

As an organisation, we need to be clear about our 'reason for being' - why we exist

The Health Board has two equally important functions to fulfil. We must:

- ***Improve the population's health*** so people can stay well
- ***Deliver high quality care*** when people need it

Therefore, our ***Purpose*** is:

**Together, improve wellbeing and
healthcare for all**

Improving the health
of our population to
help people live
healthier lives

With our staff,
partners,
population

Delivering high
quality care for
people when they
need it

For the people of
ABMU, and others
we provide care for

Our Ambition

We need to be clear about what we want to achieve

Our **Ambition** is:

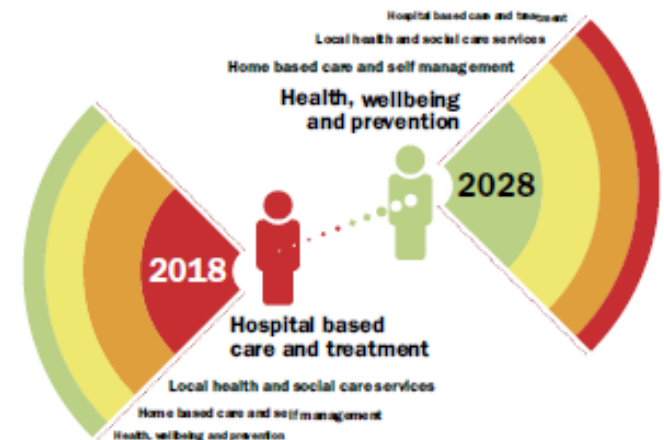
Improving
individuals' and the
populations' health

Delivering
consistently high
quality care when
and where people
need it

**Better Health, Better Care,
Better Lives**

Having Better
Health and better
Care will help
people to have
better lives

Delivering this ambition will help us
to shift the dial to become a much
more population health focused
organisation



Our Strategic Aims

Our **Strategic Aims** set out what we need to do to achieve our ambition

Strategic Aim 1:

Support **better health** and wellbeing by actively promoting and empowering people to live well in resilient communities.

Strategic Aim 2:

Deliver **better care** through excellent health and care services achieving the outcomes that matter most to people.

Our Enabling Objectives

Our **Enabling Objectives** set out how we will deliver our strategic aims

Support **better health** and wellbeing by activating, promoting and empowering people to live well in resilient communities.

Partnerships for
Improving Health and
Well-being

Digitally Enabled Health and Well-being

Co-production and Health Literacy

Deliver **better care** through excellent health and care services
achieving the outcomes that matter most to people.

Best Value Outcomes from High Quality Care

Partnerships for Care

Excellent Staff

Digitally Enabled Care

Outstanding
Research, Innovation,
Education & Learning

What will be different by 2030?

Partnerships for Improving Health and Wellbeing

By 2030 we want to have strong partnership with communities where we are all taking responsibility for improving our own health and wellbeing, and those of others. We will work with our partners in the Public Services Boards to deliver the priorities in our local well being assessments and plans. We will also work with others to improve our environments – both built and green – to maximise opportunities for well being and sustainability.

By 2030, we will have:

- Established more opportunities for new partnership working with communities and across organisations
- * **Connected communities with services and facilities across partners leading to demonstrable improvements in wellbeing and health**
- * **Worked with local communities, individuals and partners to build community resilience**
- Embedded clinically led models of care focusing on prevention and wellbeing, early detection and improving health
- * **Given every child the best start in life**

Co-production and Health Literacy

By 2030 we want people to be actively engaged in designing and supporting their own health and well being. This means that people will understand basic health information and the services they need to make the right health decisions for them

By 2030 we will have :

- Supported people to live and age well within their communities
- Promoted healthy choices messages and opportunities
- Reduced the difference in health inequalities between communities

Digitally Enabled Health and Well-Being

By 2030 we want people to be able to support their own health and wellbeing through maximising the use of digital technology. This means that people will be able to use the latest technology, in partnership with us, to maintain their own health and respond to their health needs.

By 2030 we will have:

- Supported our citizens and patients in improving their digital skills
- Developed digital partnerships within and outside the public sector

Best Value Outcomes from High Quality Care

By 2030 we want to ensure that the services that we deliver are of the highest quality, and respond to the most important things that matter to individual patients and families. This means that we will have services that are simple to understand; are fully integrated across the whole of our health and care system; make the best use of all of our resources and clearly reflect what people tell us works well and not so well.

By 2030, we will have:

- Focused our services on outcomes that matter to people
- Eliminated unwarranted waste, harm and variation, to maximise efficiency and productivity
- A clear accountability framework to enable decision making
- Seamless, integrated pathways for all conditions across the whole health and care system, with more access to care in the local communities
- The highest standards of patient safety and quality of care
- Care provided to people in places that are safe, welcoming and efficient

Partnerships for Care

By 2030 we will have strengthened our partnerships, through the Regional Partnership Boards and more widely with other partners so that most of our services are delivered in partnership. This means that people will receive seamless and integrated services in their local communities and clusters, where appropriate, irrespective of which organisation delivers that care.

By 2030 we will have:

- More people actively participating in their care and helping to shape services
- Developed the regional health system for South West Wales, recognising our specialist expertise

Excellent Staff

By 2030 we will have strengthened our workforce, so that ABMU is clearly seen as a great place to work. This means that we will have a workforce which meets our service needs, leads and supports change and is fully engaged in all that we do.

By 2030 we will have:

- Staff practising at the top of their competence – focusing on outcomes that matter to people and working across boundaries
- Made “ABMU” a great place to work by listening and acting on staff and stakeholder views
- Clinically led service improvements and change
- Built great teams across the whole organisation and with partners

Digitally Enabled Care

By 2030 we expect digital care to be at the forefront of what we do. This means that we will ensure that any service change is enabled by a digital approach with the supporting training and skills to maximise the benefits.

By 2030, we will have:

- Maximised digital opportunities through promoting “Digital First” culture and being a data driven organisation
- Developed staff skills in the use of technology

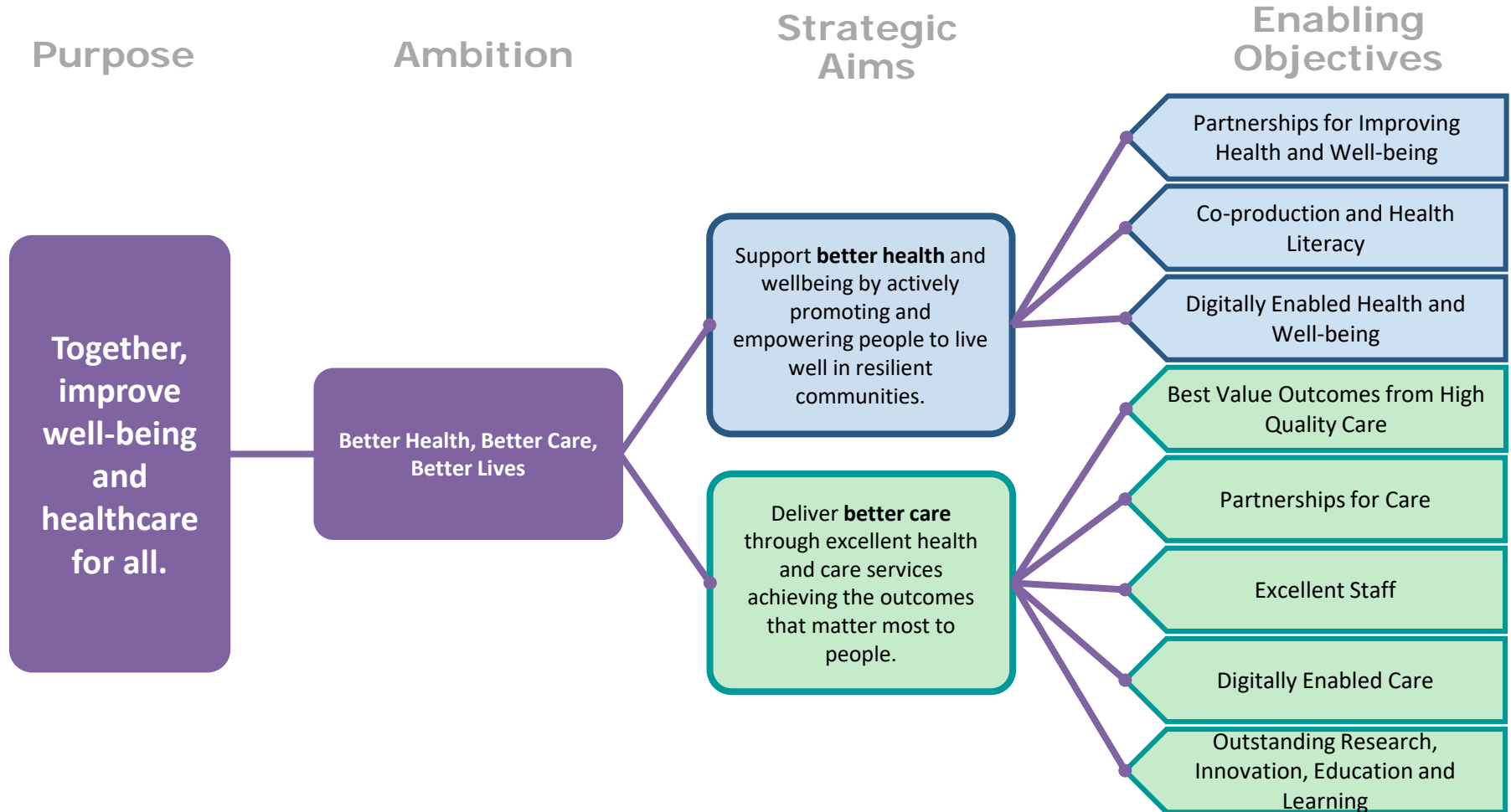
Outstanding Research, Innovation, Education and Learning

By 2030 we will have truly put the “U” at the heart of the Health Board – across all of our services. This means that we will be at the forefront of implementing research, enterprise and innovation and also influencing research to respond to our needs. Staff across all disciplines will be able to benefit from our University relationships

By 2030, we will have:

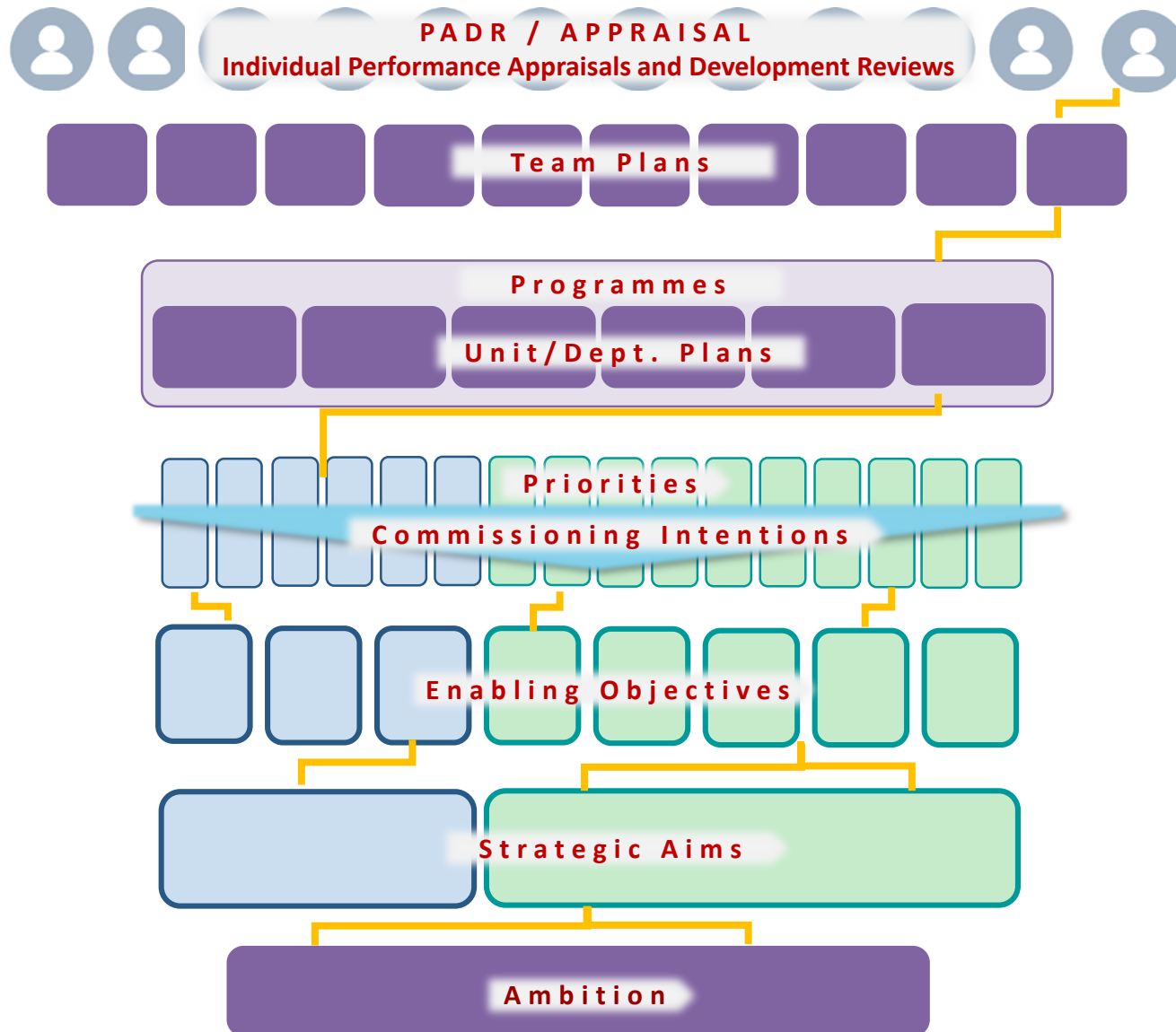
- Made full use of our University Health Board status to drive research, learning and innovation
- Enhanced joint working with Universities to increase staff skills so that everyone contributes to learning and improvement
- Maximised benefits to the regional health economy

Our Organisational Strategy (draft) on a page is:



Applied across the Whole Life Course

The Golden Thread



Aligning our Strategy and Plans

The Health Board is developing an Organisational Strategy, Clinical Services Plan and Three Year Plan which all have different, but aligned roles:

Our **ORGANISATIONAL STRATEGY** is about

- Our contribution to the local and regional health and care economy
- Improving health and wellbeing
- Integration with partners and communities
- Maximising value and quality
- Sustainability

Our **CLINIAL SERVICES PLAN** is about

- Improving our population's well-being, resilience and independence
- Prevention, self-care, care closer to home or at home
- Providing care as a regional and integrated system
- Enabling staff and creating new ways of working

Our **THREE YEAR PLAN** is about

- Developing a place-based approach to improving population health through Cluster development
- Developing seamless community services with social care with an emphasis on care closer to home
- Improving outcomes, quality, patient experience and access in our key pathways
- Improving performance against NHS Wales priorities including our target interventions priorities
- Delivery as a regional health economy
- Improving value and efficiency, research development and innovation
- Maximising opportunities for digital transformation
- Redesigning our workforce to support new service models and a sustainable, healthy and engaged workforce

UNDERPINNED BY DETAILED ANNUAL OPERATIONAL PLANS

Well-Being Objectives

We need an organisational set of well-being objectives

Our Draft Well-being Objectives:

Give Every Child the Best Start in Life

Connected Communities with Services and Facilities across partners leading to demonstrable improvements in wellbeing and health

Work with local communities, individuals and partners to build community resilience

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