





| Meeting Date | 20 August 20 | | Agenda Item | |
|--------------------------|---|---------------------------------------|-----------------|--------------|
| Report Title | Report on the Implementation of the Annual Plan 2019/20- Quarter 1 | | | |
| Report Author | Ffion Ansari, Head of IMTP Development and | | | |
| • | Implementation | on | • | |
| Report Sponsor | Siân Harrop-0 | Griffiths, Director | of Strategy | |
| Presented by | Siân Harrop-0 | Griffiths, Director | of Strategy | |
| Freedom of | Open | | | |
| Information | | | | |
| Purpose of the | | ovides the Perfor | | |
| Report | | ith a report on th | • | n of the |
| | | at the end of qua | | |
| Key Issues | the plans whi | a covering report ch were included | d in the Annual | Plan 2019/20 |
| | | uded at Appen | | |
| | delivery of the Health Board's Enabling Objectives which were laid out in the Plan and the achievement of the actions | | | |
| | for each Objective is shown. | | | |
| | Tor Cach Objective is shown. | | | |
| | The report describes the completed or on-track actions. | | | |
| | Detailed feedback is given on the off-track actions including | | | |
| | improvement actions and revised milestones. The paper | | | |
| | should be read in conjunction with the Health Board's full | | | |
| | performance report. | | | |
| Specific Action | Information | Discussion | Assurance | Approval |
| Required | | | | \boxtimes |
| (please choose one only) | | | | |
| Recommendations | The Committee | ee is asked to: - | | |
| | ENDORSE the Quarter 1 report on the | | | |
| | implementation of the Annual Plan 2019/20 for | | | |
| | approval by the Board; and, | | | |
| | NOTE it will be submitted to Welsh Government for | | | |
| | assurance purposes. | | | |

QUARTER 1 REPORT ON THE IMPLEMENTATION OF THE ANNUAL PLAN 2019/20

1. INTRODUCTION

The purpose of this paper is to provide the Committee with a report on the achievement of the previous Health Board's Enabling Objectives and actions set out within the Annual Plan 2019/20, as at the end of Quarter 1.

This report is not intended to be a full description of the performance delivery of the Annual Plan as this is subject to more detailed in commentary in the main Health Board performance report. However detailed feedback on the off-track actions is included including our improvement actions and revised milestones.

2. BACKGROUND

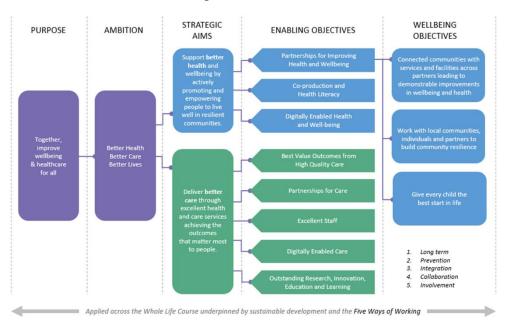
The Annual Plan implementation monitoring report for Quarter 1 is attached at **Appendix 1** for the Committee's consideration. **Appendix 1** is the detailed internal monitoring return and the narrative explanation and summary commentary is included for ease of reference in this covering paper. This report should be considered in tandem with the main Health Board performance report.

2.1 Assessment

This year the assessment has been undertaken set out against the Health Board's Organisational Strategy. The assessment looks at delivery of actions against these objectives with the objective to provide High Quality Outcomes from High Quality Care further assessed by key service areas; Primary and Community Care, Unscheduled Care and Stroke, Planned Care, Cancer, Mental Health and Learning Disabilities, Women and Children and Young People, Older People and, Quality, Safety and Patient Experience.

2.1.1 Overall Assessment of Achievement of our Enabling Objectives and Key Service Areas

The Annual Plan 2019/20 outlined our Enabling Objectives to achieve our overall Strategic Aims to deliver our Organisational Strategy of Better Health, Better Care, Better Lives as described in the diagram below.



The detailed monitoring report is structured to report on the delivery against the Enabling Objectives using colour-coded headings for each Enabling Objective as follows:

| Partnerships for Improving Health and Wellbeing |
|--|
| Co-production and Health Literacy |
| Digitally Enabled Health and Wellbeing |
| Best Value Outcomes from High Quality Care |
| Partnerships for Care |
| Excellent Staff |
| Digitally Enabled Care |
| Outstanding Research, Innovation, Education and Learning |

There is also an additional group of Corporate actions which do not fit neatly within the above Enabling Objectives. These are labelled as below:

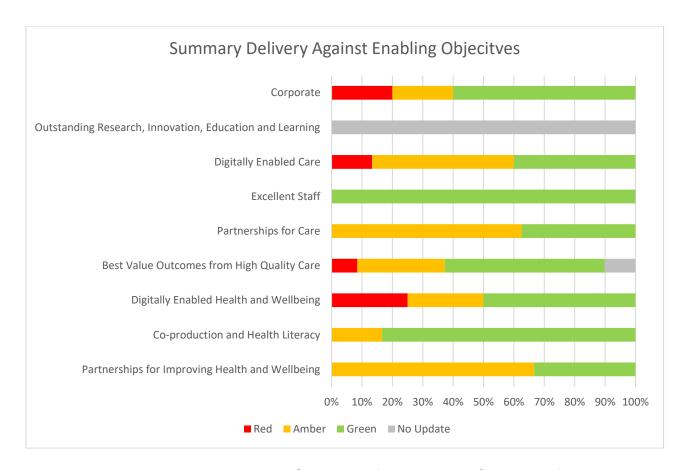
Corporate

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 | Milestone not Complete & will impact on future milestones |
|---|--|
| Α | Milestone not Complete but will be back on track by next Quarter |
| G | Milestone Complete |

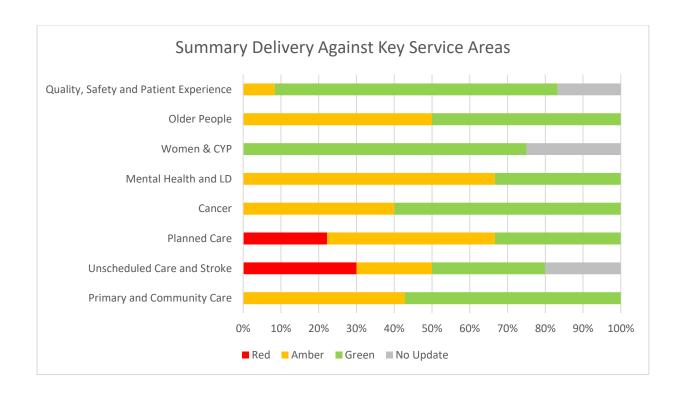
The overall summary of achievement of the key performance indicators against the Enabling Objectives at the end of Quarter 1 is set out in the table and figure below.

| Enabling Objective | Number of Actions | Number of Q1 Milestones | Red | Amber | Green | No Update |
|--|-------------------------|-------------------------------|-----|-------|-------|--------------|
| Partnerships for Improving Health and Wellbeing | 6 | 6 | 0 | 4 | 2 | 0 |
| Co-production and Health Literacy | 8 | 6 | 0 | 1 | 5 | 0 |
| Digitally Enabled Health and Wellbeing | 4 | 4 | 1 | 1 | 2 | 0 |
| Best Value Outcomes from High Quality Care | 63 | 59 | 5 | 17 | 31 | 6 |
| Partnerships for Care | 8 | 8 | 0 | 5 | 3 | 0 |
| Excellent Staff | 4 | 4 | 0 | 0 | 4 | 0 |
| Digitally Enabled Care | 20 | 15 | 2 | 7 | 6 | 0 |
| Outstanding Research, Innovation, Education and Learning | 4 | 2 | 0 | 0 | 0 | 2 |
| Corporate | 5 | 5 | 1 | 1 | 3 | 0 |
| Total | 122 | 109 | 9 | 36 | 56 | 8 |



The 63 actions within the Enabling Objective of Best Value Outcomes from High Quality Care are further broken down into the below key services areas and the summary of achievements against the key service areas at the end of Quarter 1 are as set out in the table and figure below.

| Key Service Area | Number of Actions | Number of Q1 Milestones | Red | Amber | Green | No Update |
|---|-------------------|-------------------------------|-----|-------|-------|--------------|
| Primary and Community Care | 8 | 7 | 0 | 3 | 4 | 0 |
| Unscheduled Care and Stroke | 11 | 10 | 3 | 2 | 3 | 2 |
| Planned Care | 11 | 9 | 2 | 4 | 3 | 0 |
| Cancer | 5 | 5 | 0 | 2 | 3 | 0 |
| Mental Health and LD | 6 | 6 | 0 | 4 | 2 | 0 |
| Women & CYP | 8 | 8 | 0 | 0 | 6 | 2 |
| Older People | 2 | 2 | 0 | 1 | 1 | 0 |
| Quality, Safety and Patient Experience | 12 | 12 | 0 | 1 | 9 | 2 |
| Total | 63 | 59 | 5 | 17 | 31 | 6 |

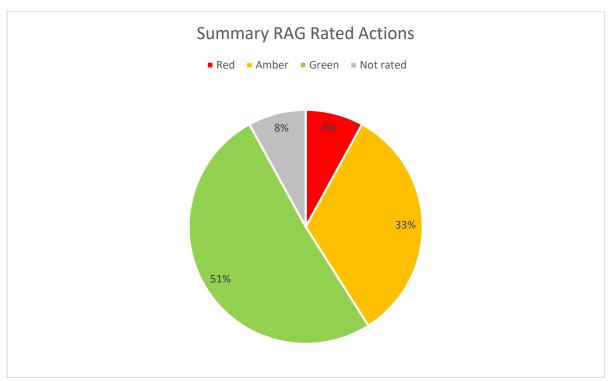


The two charts show that there is good progress with delivering our Annual Plan, with very few off-track (Red) actions. Delivery against the Key Service Areas is also good with very few off-track (Red) Actions. There are only two key service areas with any Red rated actions and these are Unscheduled Care and Stroke and Planned Care. Only four Enabling Objectives have any Off-track actions; Digitally Enabled Health and Wellbeing, Best Outcomes from high Quality Care, Digitally Enabled Care and Corprote. It should be noted that with the exception of Best Value Outcomes from High Quality care only one action is off track within each of the other three Enabling Objectives.

2.1.2 Detailed Assessment of Achievement of Plans

The monitoring shows that at the end of Quarter 1 there were 109 actions with expected milestones to be delivered, 92 (85%) of these were either completed or will be on-track by Q2 and only 9 were off-track (8%). There were 8 actions which were not rated at the end of Quarter 1. This is due to an updated not being available at the time of writing this report, an update not provided or the actions or milestone needing to be clarified. These will be followed up as a matter of urgency.

| RAG Rating | Number of Actions | % |
|------------|-------------------|------|
| Red | 9 | 8% |
| Amber | 36 | 33% |
| Green | 56 | 52% |
| Not rated | 8 | 7% |
| Total | 109 | 100% |



The next sections describe the off-track actions and the commentary on non-delivery, improvement actions and any necessary revised milestones.

2.1.3 Actions Which Are Off-Track

A summary of our actions which off-track are shown below.

| Enabling Objective | Off-track Actions |
|---|---|
| Partnerships for Improving Health and Wellbeing | No Actions Off-track in Quarter 1 |
| Co-production and Health Literacy | No Actions Off-track in Quarter 1 |
| Digitally Enabled Health and Wellbeing | Action: Patient/Citizen Empowerment through implementing Patients Know Best (PKB) The milestone to establish patient forums has not been delivered. The milestone has been amended to Work with NWIS to get WPAS event and WCRS Documents into PKB. This has been delayed due to Data Centre issue with NWIS. Future milestones have been amended to reflect this update. |
| Best Value Outcomes from High Quality Care | Unscheduled Care and Stroke: Action: Reduce Unnecessary Hospital Attendance through admission reduction for the Big 5 in partnership with WAST continuing multi agency approach to manage frequent attenders, and Care and Repair Wales pilot scheme rollout. Including falls response vehicle to reduce un-necessary conveyance to hospital Funding for full time commitment for the Care and Repair pilot scheme ceased after the winter period. It has been included as an option in 19/20 unscheduled care plan however the milestones and sub- |

| Enabling Objective | Off-track Actions |
|---|---|
| | actions to reduce unnecessary hospital attendance will be re profiled and the plan updated in Q2. |
| | Action: Reduce patient risk through reduction in avoidable delays and prolonged hospital stay through Implementing the NHS Wales Delivery Unit complex discharge audit recommendations and Right Care Right Place review recommendations Options are being explored to expand the OPAS service and the bed equivalent impact it can deliver. This is included in the Units Unscheduled Care Plan and the future milestones will be revised to reflect these plans. |
| | Action: Provide Fast, Effective Care through promotion of FAST, continued development of TIA services, exploring the provision of Capture Stroke System to support real time reporting and establishing a Thrombectomy pathway through WHSSC. – A review of the TIA service was not completed as current focus has been on the electronic process for receiving GP referrals into the TIA Service. Services are working with IMT on prioritising this requirement and future milestones will be updated to reflect this reprioritisation. |
| | Planned Care Action: Improve Theatre efficiency and utilisation including ENT/ orthopaedics access to Singleton and Neath Port Talbot theatres The plan to establish all day ENT operating at Singleton Hospital in Q1 has been revise as it is not possible to achieve this by September due to, in the main, anaesthetics pressures. The revised plan is to target an October start and the plan and milestones will be revised to reflect this. |
| | Action: General Surgery access to Singleton theatres to utilise for routine and high activity capacity - The plan to establish one all day General Surgery operating list at Singleton Hospital and one all day list at Morriston has been revised. Morriston are on track to start in September. However it has been agreed not to commission the Singleton list. The plan and future milestones will be revised to reflect this. |
| Partnerships for Care | No Actions Off-track in Quarter 1 |
| Excellent Staff Digitally Enabled Care | No Actions Off-track in Quarter 1 Action: Cyber Security- Ensure Digital Infrastructure and Cyber Security through approving a cyber-security plan and ensuring Windows 10 is rolled out. Delivery of the cyber |
| | security plan has been re-profiled to commence in Q2 and future milestones amended to reflect this change. |

| Enabling Objective | Off-track Actions |
|--|--|
| | Action: Produce a business case exploring the options for delivery of our data centres post boundary change and identify the model and investment required to meet the organisation's needs Business case development has been deferred to align to CTM disagregation BC and national architecture review. |
| Outstanding Research, Innovation, Education and Learning | No Actions Off-track in Quarter 1 |
| Corporate | Action: Delivery of Financial savings through delivery of the underlying deficit, management of cost pressures and delivery of high value opportunities. — Around 99% of the original savings plan has been identified, however there has been slippage of £0.5m in Q1. The need to generate additional savings to assist with this savings slippage, continuing operational pressures and the Bridgend diseconomies have been identified and work is now underway to provide detailed action and implementation plans. The required level of savings does not take account of the determination in relation to the Bridgend Financial Impact Assessment and this will need to be considered once the WG determination is known. The future plan and milestones will be updated and revised as the work to implement the financial plan continues. |

2.1.4 Delivery Unit Plans

Delivery units have in line with the Annual Plan 2019/20, developed Delivery unit Plans to detail the actions they will undertake to deliver the organisation's Annual Plan. Each Unit was tasked to assess their delivery at the end of Quarter one and this assessment was used to inform their Quarter 1 Unit Performance Reviews. Dashboard summaries have been developed — to support this review and these are included as **Appendix 2** to this report for reference.

3.2 Governance and Risk Issues

The report is considered regularly on behalf of the Board by the Performance and Finance Committee, as agreed during the development of the Annual Plan for 2019/20 before consideration by the Board. The Quarter 1 report will be put forward to the Board for consideration at the September 26th 2019 meeting.

Welsh Government requires each Health Board to forward the Board report on the quarterly reporting of progress of Annual Plan/IMTP implementation for assurance purposes and this document will be shared with Welsh Government for this purpose.

3. Financial Implications

There are no direct financial implications from this paper.

4. Recommendation

The Committee is asked to:

- ENDORSE the Quarter 1 report on the implementation of the Annual Plan 2019/20 for approval by the Board; and,
- NOTE it will be submitted to Welsh Government for assurance purposes.

| Governance ar | 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 | | | |
| | Digitally Enabled Health and Wellbeing | \boxtimes | | | |
| | Deliver better care through excellent health and care service | es achieving the | | | |
| | outcomes that matter most to people | | | | |
| | Best Value Outcomes and High Quality Care | \boxtimes | | | |
| | Partnerships for Care | \boxtimes | | | |
| | Excellent Staff | | | | |
| Digitally Enabled Care | | \boxtimes | | | |
| | Outstanding Research, Innovation, Education and Learning | \boxtimes | | | |
| Health and Car | are Standards | | | | |
| (please choose) | Staying Healthy | \boxtimes | | | |
| | Safe Care | \boxtimes | | | |
| | Effective Care | \boxtimes | | | |
| | Dignified Care | \boxtimes | | | |
| | Timely Care | \boxtimes | | | |
| | Individual Care | \boxtimes | | | |
| | Staff and Resources | \boxtimes | | | |

Quality, Safety and Patient Experience

The report details the Quality, Safety and Patient Experience delivery against plan for 2019/20.

Financial Implications

Financial delivery against plan is included in the report and tracker.

Legal Implications (including equality and diversity assessment)

Projects and actions detailed within the Tracker are considered on their own merit through the development of the Annual Plan.

Staffing Implications

Staffing and workforce performance against plan is included in the report and tracker.

Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)

The Annual Plan deliver support the Health Board in its delivery of our Wellbeing Objectives

- Long Term The Annual Plan sits within the broader strategic context of the Health Board's Organisational Strategy
- Prevention The Annual Plan includes actions to address prevention and health improvement.
- o **Integration** The Annual Plan covers the breadth of the Health Board's responsibilities and actions are cross unit.
- Collaboration Actions within the Annual Plan are in many instances reliant on cross organizational delivery.
- Involvement The Annual Plan was developed through engagement with partners.

| Report History | N/A |
|----------------|--|
| Appendices | Appendices |
| | Appendix 1 – detailed Annual Plan Monitoring Tracker |
| | Appendix 2 – Delivery Unit Plan Quarter 1 Dashboards |