

# Integrated Medium Term Plan (IMTP)

Health Board

27<sup>th</sup> March 2025



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Betsi Cadwaladr  
University Health Board

- The organisation has been on a development journey over the last two years.
- The first year in Special Measures saw three outcome driven 90-day cycles, separate from an annual plan, focused on stabilising the Health Board.
- The second year saw Special Measures incorporated into an integrated annual plan set in the context of three years, building the right foundations and starting to standardise.
- This next year the Health Board is presenting a financially balanced three year Integrated Medium Term plan that is focused on delivering the changes that matter most to the population.



- Improved IMTP planning process this year
- Taking learning from previous years and other Health Boards
- Building upon Special Measures Independent Review
- Started earlier, had a good draft prior to Christmas
- More engagement, internally and externally
- Produced a more well-rounded but also focused plan
- Definite progress made, next is more continuous planning

| Previously   | Change   |
|--|--|
| Output focused plans                                     | Outcome focused plans delivering Health Board and National Priorities            |
| Crowd sourced plans                                      | Executive led 'top down' commissioning 'bottom up' programmes of work            |
| Fragmented planning timeline                             | Portal hosted 'live template' real time planning                                 |
| Lack of timely stakeholder engagement                    | Shift to engagement and co-design of future plans (Well-being Planning)          |
| Lack of clarity around purpose and delivery expectations | Setting the right 'exam questions' to ensure plans are focused on the key issues |

The last two years have been about putting in place the foundations for a health service which is more capable of meeting the needs of the people of North Wales, for example:

- Putting in place some of the fundamental requirements of an effective organisation
- Understanding the nature and scale of the problems the organisation faces
- Making significant progress towards achieving financial balance and meeting the financial duty
- Developing and testing a Quality Management System (QMS)
- Starting the process of organisational culture change
- Much better processes for learning from events
- Increasing meaningful engagement with local authority partners, other stakeholders and citizens

Despite the progress made, some large-scale challenges remain:

- The organisational structure, processes, systems, culture and strategy need to be aligned and improved.
- There have been many Independent, Royal College and GIRFT reviews conducted within the organisation that point to the need to do things consistently and productively across the organisation.
- Access to services remains the largest impact on the population, across both Planned and Unscheduled Care and both Primary and Secondary Care settings.
- Collaborate more effectively with partners to better utilise and develop Primary and Community Care services, so that citizens can access a range of physical and mental health and also well-being services closer to home. A focus on integrating prevention and early intervention into service design to support people in staying well.
- Ensure that the services offered are to the highest possible quality and equitable both geographically and across all socio-economic groups.
- Address long-term underinvestment in the estate and digital infrastructure across the organisation, exploring more innovative options in the capital resources space.

- Continuity of strategic objectives from last year
- More focused and targeted priorities under the 5 Strategic Objectives
- Focus weighted towards Strategic Objective 2 and 5, with the others important to grow organisational capability

## Objective 1: Building an effective organisation

- |    |   |
|----|---|
| 1A | Effective systems of governance             |
| 1B | Establishing the Foundations for the Future |
| 1C | Responding to Legislative Requirements      |
| 1D | Implementing the Quality Management System  |

## Objective 2: Developing strategy and long-lasting change

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|----|--|
| 2A | Developing & delivering a Health Board Strategy & Clinical Services Plan |
| 2B | Strengthening Planning and Commissioning                                 |
| 2C | Improving the Environment, Estate and Facilities                         |
| 2D | Enhancing digital, data and technology approaches                        |
| 2E | Developing and delivering value and sustainability                       |
| 2F | Improving workforce planning and development                             |
| 2G | Working with regional partners   |

## Objective 3: Compassionate culture, leadership & engagement

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|----|--|
| 3A | Culture Development                        |
| 3B | Leadership Development                     |
| 3C | Citizen engagement and partnership working |
| 3D | Welsh language and culture                 |

## Objective 4: Improving quality, outcomes and experience

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|----|--|
| 4A | Prevention and Early Intervention            |
| 4B | Primary Care including Clusters              |
| 4C | Community Care                               |
| 4D | Planned Care, Cancer & Diagnostics           |
| 4E | Urgent and Emergency Care                    |
| 4F | Adult Mental Health & Learning Disability    |
| 4G | CAMHS  |
| 4H | Neurodevelopment                             |
| 4I | Dementia                                     |
| 4J | Currently 'Challenged Services'              |
| 4K | Women's services                             |
| 4L | Children & Young People                      |
| 4M | Pharmaceutical services                      |
| 4N | Palliative, End of Life and Bereavement Care |
| 4O | Dental services                              |
| 4P | Diabetes                                     |

## Objective 5: Effective environment for Learning and skills development

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|----|--|
| 5A | University & Further Education Partnership |
| 5B | Research, Development and Innovation       |
| 5C | Academic Careers                           |
| 5D | Intelligence Led                           |
| 5E | Learning Organisation                      |

# NHS Planning Framework 25/26 – Performance Requirements

## Cabinet Secretary for Health & Social Care Strategic Priorities & Enabling Actions To Support Delivery

The [NHS Wales Planning Framework 2025-2028](#) sets out the strategic priorities and areas of focus required by the Cabinet Secretary for Health and Social Care:

### ➤ **Timely Access to Care**

#### Key Delivery expectations (Metrics):

- Ambulance handovers
- Time spent in Emergency Care
- Referral to treatment (104 weeks)
- First definitive cancer treatment
- Diagnostics (8 weeks)

### ➤ **Population Health and Prevention**

#### Key Delivery expectations (Metrics)

- Diabetes (8 NICE processes)
- Vaccinations targets

### ➤ **Building Community Capacity**

#### Key Delivery expectations (Metrics)

- Delayed Pathways of Care
- GMS National Access Standards
- Access to Pharmacist Independent Prescribing
- Access to Dental Care
- Community / Palliative Nursing (Weekend)
- Enhanced Community Care capacity

### ➤ **Mental Health access**

#### Key Delivery expectations (Metrics)

- Assessments (28 days)
- Therapeutic Interventions (28 days)

### ➤ **Women's Health**

Key Delivery Expectation -Women's Health Hub

The Framework also set out 'Enabling Actions' to 'adopt or justify', for Operational Productivity and Efficiency:

- Urgent and Emergency Care
  - 6 Goals Programme Falls, Remote Clinical Assessment, Acute Frailty at Front Door, Ambulance Handovers Guidance, Optimum Hospital Flow Framework
  - 50 Day Challenge consistent delivery at minimal additional resource
- Planned Care National Guidelines/ Thresholds by Clinical Implementation Network inc. Outpatients PIFU, SO, DNA/CNA and overbooking, Follow Up criteria; Cataract direct listing, protection and utilisation of inpatient/daycase/theatre capacity, High Volume Low Capacity and day surgery increases, validation and reporting
- Workforce Variable Pay and Agency Control Framework and Targets; Job Planning Policy; Sickness Absence reduction
- Value for Money Value and Sustainability Board recommendations for Non Pay, Medicines, Continuing Healthcare; Estate utilisation
- Outcomes and Variation Cancer Recovery pathways, Straight to Test, Value & Sustainability Board pathways (Diabetes, Bone Health, Arthroplasty), National digital Priorities (Maternity, NHS Wales App, systems and devices, cyber response); Interventions Not Normally Undertaken Phase 1; referral management and rapid adoption of 282 Health Pathways

**The Strategic Priorities are in addition or help to support other targets within the A Healthier Wales Quadruple Aim framework**

People in Wales have improved health and well-being with better prevention and self-management

People in Wales have better quality and more accessible health and social care services, enabled by digital and supported by engagement

A Healthier Wales Quadruple Aim

The health and social care workforce in Wales is motivated and sustainable

Wales has a higher value health and social care system that has demonstrated rapid improvement and innovation, enabled by data and focused on outcomes

# Cabinet Secretary Delivery Expectations

|  | Priority Area   | Target              | Baseline | Q1 2025/26                           | Q2 2025/26 | Q3 2025/26 | Q4 2025/26 |
|--|---|---------------------|----------|--------------------------------------|------------|------------|------------|
| Timely Access to Care                              | Timely Access - UEC Ambulance 1+ Hour BCU                       | 0                   | 2,301    | <= 2301                              | <=1725     | <=1294     | <=970      |
|  | Timely Access - UEC ED 12+ Hours BCU                            | 0                   | 3,695    | <= 3695                              | <=2771     | <=2602     | <=1558     |
|  | Timely Access - Cancer  | 70%                 | 52%      | 60%                                  | 62%        | 68%        | 80%        |
|  | Timely Access - Diagnostics (over 8 weeks) All                  | 0                   | 10,643   | 9,284                                | 7,925      | 3,950      | 0          |
|  | Timely Access - Planned Care RTT 104W All Stages BCU            | 0                   | 6,800    | 4,950                                | 2,800      | 0          | 0          |
| Population Health & Prevention                     | Priority Area   | Target              | Baseline | Q1 2025/26                           | Q2 2025/26 | Q3 2025/26 | Q4 2025/26 |
|  | Population Health Prevention - Diabetes                         |                     | 37.70%   | Awaiting access to Primary Care data |            |            |            |
|  | Population Health Prevention - Vaccs COVID-19                   | 75%                 | 74%      | 75%                                  | 75%        | 75%        | 75%        |
|  | Population Health Prevention - Vaccs Flu (A)                    | 75%                 | 72%      | 75%                                  | 75%        | 75%        | 75%        |
|  | Population Health Prevention - Vaccs Flu (Ch)                   | 75%                 | 50%      | 50%                                  | 55%        | 60%        | 65%        |
|  | Population Health Prevention - Vaccs Flu (S)                    | 75%                 | 36%      | 36%                                  | 41%        | 46%        | 51%        |
|  | Population Health Prevention - IMMS Flu                         | 75%                 | 43%      | 43%                                  | 48%        | 53%        | 58%        |
|  | Population Health Prevention - IMMS MMR                         | 95%                 | 90%      | 90%                                  | 95%        | 95%        | 95%        |
|  | Population Health Prevention - Vaccs HPV (Y8)                   | 95%                 | 65.10%   | 65%                                  | 70%        | 75%        | 80%        |
|  | Population Health Prevention - Vaccs HPV (Y9)                   | 95%                 | 83.90%   | 84%                                  | 87%        | 90%        | 95%        |
|  | Population Health Prevention - Vaccs MenACWY (Y9)               | 95%                 | 66.00%   | 66%                                  | 71%        | 76%        | 81%        |
|  | Population Health Prevention - Vaccs MenACWY (Y10)              | 95%                 | 77.70%   | 78%                                  | 83%        | 88%        | 95%        |
| Population Health Prevention - Vaccs MenACWY (Y11) | 95%   | 83.80%              | 84%      | 89%                                  | 94%        | 95%        |            |
| Building Community Capacity                        | Priority Area   | Target              | Baseline | Q1 2025/26                           | Q2 2025/26 | Q3 2025/26 | Q4 2025/26 |
|  | Building Community Capacity - Number of P OCD Delays            | Reduction           | 915      | 900                                  | 830        | 765        | 765        |
|  | Building Community Capacity - Number of P OCD Assessment Delays | Reduction           | 462      | 400                                  | 360        | 320        | 320        |
|  | Building Community Capacity - GMS (P1)                          | 100%                | 98.96%   | 100%                                 | 100%       | 100%       | 100%       |
|  | Building Community Capacity - GMS (P2)                          | 100%                | 97.91%   | 100%                                 | 100%       | 100%       | 100%       |
|  | Building Community Capacity - Pharmacy                          | Increase            | 7,600    | 7,900                                | 8,100      | 8,400      | 8,700      |
|  | Building Community Capacity - Dental Adult                      |                     | 32.20%   | 43.00%                               | 43.00%     | 43.00%     | 43.00%     |
|  | Building Community Capacity - Dental Child                      |                     | 56.80%   | 55.00%                               | 55.00%     | 55.00%     | 55.00%     |
| Building Community Capacity - Palliative (EoLC)    |   | No target available |          |                                      |            |            |            |
| Mental Health Access                               | Priority Area   | Target              | Baseline | Q1 2025/26                           | Q2 2025/26 | Q3 2025/26 | Q4 2025/26 |
|  | Adult Mental Health - Part 1a                                   | 80%                 | 80.04%   | 75.00%                               | 80.00%     | 75.00%     | 80.00%     |
|  | Adult Mental Health - Part 1b                                   | 80%                 | 87.44%   | 80.00%                               | 80.00%     | 80.00%     | 80.00%     |
|  | Adult Mental Health - Part 2                                    | 90%                 | 86.61%   | 87.00%                               | 85.00%     | 86.00%     | 87.00%     |
|  | Adult Psychology  | 80%                 | 80.00%   | 80.00%                               | 80.00%     | 80.00%     | 80.00%     |
|  | CAMHS - Part 1a   | 80%                 | 91%      | 80%                                  | 80%        | 80%        | 80%        |
|  | CAMHS - Part 1b   | 80%                 | 27%      | 49%                                  | 60%        | 70%        | 80%        |
| CAMHS - Part 2                                     | 80%   | 90%                 | 90%      | 90%                                  | 90%        | 90%        |            |

# BCUHB – Financial Outline

## FINANCIAL BRIDGE MOVING FROM 2024/25 UNDERLYING DEFICIT TO 2025/26 OUTTURN

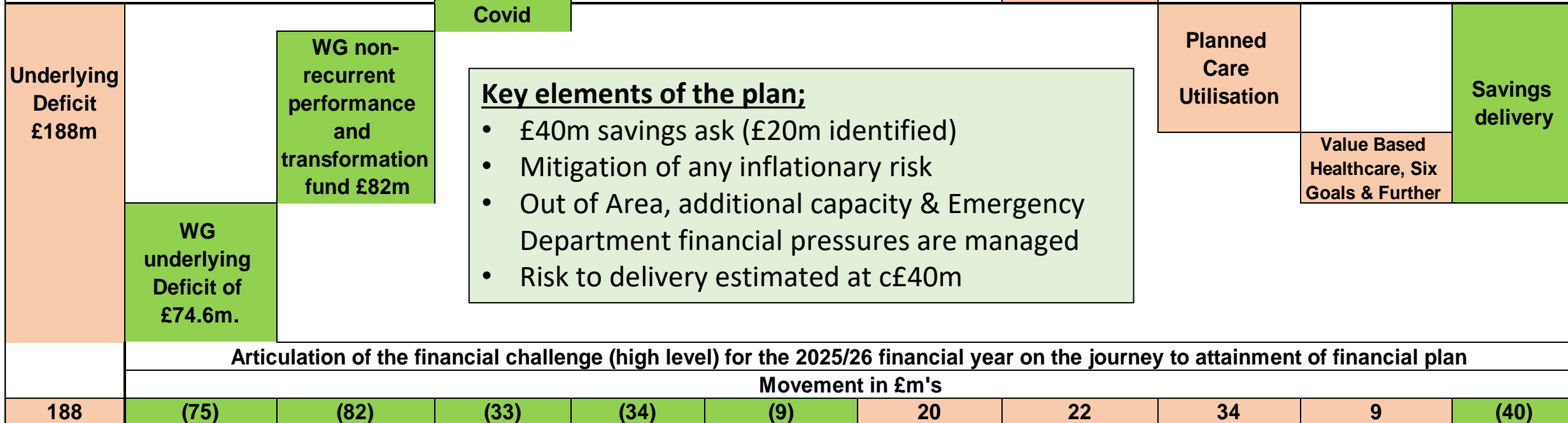
### Outturn 2024/25

- Plan to deliver an £8.6m deficit
- Forecasting attainment of plan
- Savings targeted achieved

**Plan Delivers key first financial duty to break-even**



**BREAK-EVEN LINE**



# IMTP – Future financial years (2025/26, 2026/27 & 2027/28)

| Description                                      | 2025/26<br>£m | 2026/27<br>£m  | 2027/28<br>£m  |
|--|---------------|----------------|----------------|
| <b>Opening underlying deficit</b>                | 188.5         | 188.5          | 188.5          |
| Additional allocation income                     |               | (232.2)        | (233.9)        |
| Additional other income                          |               | (0.5)          | (0.6)          |
| <b>Total additional income</b>                   | (239.0)       | <b>(232.7)</b> | <b>(234.5)</b> |
| Inflation  |               | 20.6           | 21.6           |
| Growth   |               | 12.3           | 12.6           |
| New cost pressures (including Prevention)        |               | 8.2            | 8.7            |
| Expenditure (Planned Care, VBHC, FF & Six Goals) |               | 43.1           | 43.1           |
| <b>Total additional costs</b>                    | 90.5          | <b>84.2</b>    | <b>86.0</b>    |
| <b>Savings target</b>                            | (40.0)        | <b>(40.0)</b>  | <b>(40.0)</b>  |
| <b>Net planned position</b>                      | 0.0           | <b>0.0</b>     | <b>0.0</b>     |

## Key items of note;

- Underlying deficit reflects £74.6m & £82m Non-Recurrent allocations
- Position will improve as these allocations become recurrent
- Underlying deficit within the modelling will total £31.9m
- Inflation and growth are modelled at current levels
- New cost pressures in year
- Expenditure on ring fenced allocations continues
- Savings ask of £40m per annum delivered throughout the life of the IMTP
- **Attains key second duty of break-even**

Subject to agreement from the Board:

- 1 Incorporate key points from today's discussion and any final minor amendments into the plan
- 2 Submit the plan and associated supporting documents to Welsh Government on 31<sup>st</sup> March 2025
- 3 Cascade the priorities in the plan throughout the organisation via annual objective setting