



PWYLLGOR DATBLYGU STRATEGOL A CHYFLENWI GWEITHREDOL STRATEGIC DEVELOPMENT AND OPERATIONAL DELIVERY COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	26 August 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Quarterly Annual Plan Monitoring Return (Q1)
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lee Davies, Director of Strategic Developments and Operational Planning
SWYDDOG ADRODD: REPORTING OFFICER:	Daniel Warm, Head of Planning Angharad Lloyd-Probert, Senior Project Manager

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

Hywel Dda University Health Board (HDdUHB) believes that it is important to monitor the actions noted in its 2021/22 Annual Recovery Plan in order to establish progress, and also to gather learning on what is working with respect to the organisation's Planning Objectives. Performance reporting is dealt with under separate cover (namely the Integrated Performance Assurance Report - IPAR); however, this report provides the Strategic Development and Operational Delivery Committee (SDODC) with updates from the monitoring of all the other actions contained within the 2020/21 Annual Plan, presenting progress using 'Amber' and 'Green' rating for Quarter 1 (Q1) (April – June 2021).

Cefndir / Background

In order to provide assurance on the delivery of its 2021/22 Annual Recovery Plan, HDdUHB monitors progress against its plans retrospectively on a quarterly basis. The actions for 2021/22 are built around HDdUHB's Planning Objectives and its Gold Command instructions, which within the Plan have had quarterly milestones highlighted.

Asesiad / Assessment

For Q1 of 2021/22, Annex 1 to this paper provides details of:

- Planning Objective
- Executive Lead
- Deliverable Green/ Amber - (Achieved / Not yet achieved)
 - If Amber: Mitigating Actions/ Explanation/ Comments are included
 - If Amber: Revised Quarter to be completed by is included

In summary, this shows that the current status in Q1 is that all actions are 'Green' (ie. the action has been achieved), with the exception of two which are 'Amber' (ie. the action has not been achieved yet). Of the two 'Amber' actions, one is due to be completed in Q2 and one has slipped to Q4, with work ongoing.

Annex 2 to this paper provides an overview of the Planning Objectives that are currently being monitored in Q2 (July – September 2021) of 2021/22 and which will be reported back to SDODC after the conclusion of the Quarter.

Argymhelliad / Recommendation

SDODC is asked to take assurance from the overarching 'Amber' or 'Green' rated progress and the mitigations/ actions in place to recover those actions noted as 'Amber' which support Q1 of HDdUHB's 2021/22 Annual Recovery Plan.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1 To receive an assurance on delivery against all relevant Planning Objectives falling in the main under Strategic Objectives 4 (The best health and wellbeing for our individuals, families and our communities) and 5 (Safe, sustainable, accessible and kind care), in accordance with the Board approved timescales, as set out in HDdUHB's Annual Plan.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	All Health & Care Standards Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives:	9. All HDdUHB Well-being Objectives apply

Gwybodaeth Ychwanegol: Further Information:

Ar sail tystiolaeth: Evidence Base:	Included within the report
Rhestr Termiau: Glossary of Terms:	Explanation of terms is included within the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Datblygu Strategol a Chyflenwi Gweithredol: Parties / Committees consulted prior to Strategic Development and Operational Delivery Committee:	Individual returns signed-off by responsible Executive Director

Effaith: (rhaid cwblhau) Impact: (must be completed)

Ariannol / Gwerth am Arian: Financial / Service:	Key component in the delivery of the Annual Plan 2021/22
Ansawdd / Gofal Claf: Quality / Patient Care:	This is a key component in the delivery of the Annual Plan 2021/22
Gweithlu: Workforce:	Key component in the delivery of the Annual Plan 2021/22
Risg: Risk:	Key component in the delivery of the Annual Plan 2021/22
Cyfreithiol: Legal:	As above
Enw Da: Reputational:	HDdUHB needs to meet the targets it has set out in individual plans to maintain its reputation with Welsh Government together with our stakeholders including our staff
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Consideration of equality legislation and impact is a fundamental part of the planning of service delivery changes and improvements.

Annex 1: Monitoring of Quarter 1 Actions within the 2021/22 Annual Recovery Plan

Planning Objective	Executive Lead	Deliverable	Green/ Amber - (Achieved /Not yet Achieved)	If Amber Mitigating Actions /Explanation /Comments	If Amber Revised Quarter to be completed by
<p>1E</p> <p>During 2020/21 establish a process to maintain personalised contact with all patients currently waiting for elective care which will:</p> <ol style="list-style-type: none"> 1. Keep them regularly informed of their current expected wait 2. Offer a single point of contact should they need to contact us 3. Provide advice on self-management options whilst waiting 4. Offer advice on what do to if their symptoms deteriorate 5. Establish a systematic approach to measuring harm – bringing together the clinically assessed harm and harm self-assessed by the patient and use this to inform waiting list prioritisation 6. Offer alternative treatment options if appropriate 7. Incorporate review and checking of patient consent <p>This process needs to roll out through 2021/22</p>	Director of Nursing, Quality and Patient Experience	High level plan for year-1 scale up and roll out	Achieved		
<p>3G</p> <p>Develop and implement a 3 year strategic plan to increase research, development, and innovation activity, and number of research investigators sufficient as a minimum to deliver the Welsh Government and Health and Care Research Wales expectations and improvement targets (see specific requirement 3.G.i). The plan will be developed in partnership with universities, life science companies, and public service</p>	Medical Director	Develop a new clinical engineering, innovation, and research facility in Llanelli, with support for those developing new health and care technologies	Achieved		

Planning Objective	Executive Lead	Deliverable	Green/ Amber - (Achieved /Not yet Achieved)	If Amber Mitigating Actions /Explanation /Comments	If Amber Revised Quarter to be completed by
partners so as to maximise the development of new technologies and services that improve patient care and health outcomes. While making further progress in established areas including respiratory, oncology, and diabetes studies, the portfolio will target and expand into areas of organisational clinical and academic strength, including ophthalmology, orthopaedics, anaesthetics, and mental health. A function spanning clinical engineering, research and innovation will also target a threefold increase in technology trials					
4L Design and implement a process that continuously generates new proposals that can be developed into planning objectives aimed at constantly moving us towards a comprehensive “social model for health” and cohesive and resilient communities. The process needs to involve our local population as well as a diverse set of thought and system leaders from across society	Medical Director	Literature database on the Social Model for Health and Wellbeing continuously updated	Achieved		
5H Develop an initial set of integrated Locality plans by September 2021 (with further development thereafter) based on population health and wellbeing and which are focused on the principles of sustainable and resilient services, timely advice and support to the local community on health and wellbeing, maintaining social connection, and independence and activity. This will require co-production with Local Authority Partners and the Third Sector. The scope of this will include all Community, Primary Care, Third sector, Local Authority	Director of Primary Care, Community and Long Term Care	Develop clear set of definitions for each stage of the triangle and common term glossary	Achieved		

Planning Objective	Executive Lead	Deliverable	Green/ Amber - (Achieved /Not yet Achieved)	If Amber Mitigating Actions /Explanation /Comments	If Amber Revised Quarter to be completed by
<p>and other Public Sector partners.</p> <p>These integrated Locality Plans will require a review of resources that ensure the optimal use of technology and digital solutions, Primary care and Community estate and a multi-professional / skilled workforce that enables new ways of working in order that the following principles are achieved -</p> <ol style="list-style-type: none"> 1. Increased time spent at home 2. Support for self-care 3. Reduction in hospital admission 4. Safe and speedy discharge 5. Support for those at the end of life 					
<p>5L Implement the making nutrition matter – dietetics expansion plan within two years as agreed at Board on 26th September 2019</p>	Director of Therapies and Health Sciences	Implement public facing self-screening: Develop self-screening QR code and associated website to host self-screening, information & dietetic helpline Launch Monitor response & impact Learn from & evolve	Not yet achieved	Work Continues	Q4
<p>5P During 2021 produce a care home Market Position Statement and, based on the insights gained, develop new Planning Objectives for implementation from April 2022 aimed at stabilising, enhancing and reshaping the role of care home provision in the Hywel Dda area.</p>	Director of Primary Care, Community and Long Term Care	Undertake engagement with the sector (survey)	Achieved		
		Analysis of existing data sources	Achieved		

Planning Objective	Executive Lead	Deliverable	Green/ Amber - (Achieved /Not yet Achieved)	If Amber Mitigating Actions /Explanation /Comments	If Amber Revised Quarter to be completed by
5Q To develop and implement a plan to roll out an interface asthma services across the Health Board from April 2021, working across primary and secondary care. The aim of this is to enhance pathway value by reduce asthma related morbidity and mortality whilst improving access to expert opinion and reducing secondary care demand.	Director of Primary Care, Community and Long Term Care	Development and approval of job description	Achieved		
6D Develop the capability for the routine capture of PROMS and implement in all clinical services within 3 years. Establish the required digital technology and clinical leadership and engagement to facilitate pathway redesign based on these insights and put in place impact measurement processes to evaluate changes at a pathway level	Medical Director	Refine and re-develop the Value Based Healthcare (VBHC) Programme Plan, identifying key pathway areas to engage with	Achieved		
6F Implement a VBHC pathway costing programme for all clinical services that is capable of being completed within 3 years, and prioritised based on the likelihood of generating change.	Director of Finance / Medical Director	Development of a work plan for the roll out of TDABC by the Finance Value Team	Achieved		
		Collaboration with VBHC and teams regionally and nationally to ensure that good practice is shared	Achieved		
		Development of individual project plans in conjunction with clinical and operational leads, with clear milestones and objectives.	Achieved		

Planning Objective	Executive Lead	Deliverable	Green/ Amber - (Achieved /Not yet Achieved)	If Amber Mitigating Actions /Explanation /Comments	If Amber Revised Quarter to be completed by
Gold Command Requirement #1 To establish sufficient capacity (including in Field and Community hospital settings) to allow for the simultaneous hospitalisation of up to 250 COVID patients and 695 non-COVID non-elective patients (i.e 945 beds in total). This capacity is to be immediately available or ready for use within a maximum of 3 weeks' notice for the duration of 2021/22.	Chief Operating Officer	Establish a formal Recovery Planning Workstream engaging with secondary, community and primary care teams	Not achieved	Groups to support the workstream to be implemented in September 2021	Q2
		Confirm core (internal) service capacity & delivery plans, along with additional activity / outsourcing service capacity & delivery plans for 2021/22	Achieved		

Annex 2: Quarter 2 actions to be monitored within the 2021/22 Annual Recovery Plan

Planning Objective (in the order they appear in the 2021/22 Annual Recovery Plan)	Executive Lead	Deliverable
1H: By July 2021 conduct a second 'Discovery' phase of the pandemic learning to understand more about staff experience so that approaches to rest, recovery and recuperation can be shaped over the next 2 years including a 'thank you offering' to staff.	Director of Workforce and OD	'Discover' report outlining results of engagement with staff, which will form basis of approach to staff recovery
2E: From April 2021 develop a programme of activities which promote awareness of the Health Board's official charity and the opportunities available to raise and use funds to make a positive difference to the health, wellbeing and experience of patients, service users and staff across Hywel Dda University Health Board. Develop clear processes for evidencing the impact of our charitable expenditure on our patients, service users and staff fundraising activities and expenditure on our staff, the patients and the public with the aim of increasing our income and expenditure levels on an annual basis.	Director of Nursing, Quality and Patient Experience	Review of charitable funds expenditure guidance for staff and fund managers and promotion of guidance.
		Recruitment of Senior Marketing & Communications Officer
1A: Develop and implement plans to deliver, on a sustainable basis, NHS Delivery Framework targets related to workforce within the next 3 years	Director of Workforce and OD	Develop a dashboard in meaningful a format, with a stakeholder list for distribution, frequency of reporting and forum(s) for progress reports to be analysed
1C: Design a training and development programme to build excellent customer service across the Health Board for all staff in public & patient facing roles for implementation from April 2021. This programme should learn from the best organisations in the world and use local assets and expertise where possible. The organisation's values should be at the heart of this programme	Director of Workforce and OD	Design a fully engaging customer service package, incorporating best practice, trends, case studies, values, importance of Welsh language and equality
1F: Develop a programme for implementation by July 2021 to co-design with our staff every stage and element of our HR offer that embody our values. This will address: 1. the way the Health Board recruits new staff and provides induction; 2. all existing HR policies; 3. the way in which employee relation matters are managed and 4. equitable access to training and the Health Board's staff wellbeing services.	Director of Workforce and OD	Induction: recruitment of tutors, design of induction programmes, and design of automated onboarding process for new employees
		Recruitment: identify permanent employment opportunities for staff appointed to COVID-19 fixed term contracts, research best practice, undertake focus groups with new starters and managers

Planning Objective (in the order they appear in the 2021/22 Annual Recovery Plan)	Executive Lead	Deliverable
The resulting changes to policies, processes and approaches will be recommended to the Board in September 2021 for adoption		Equitable access to learning and development: Recruitment of a Inclusion and Widening Access Officer
2G: By October 2021 construct a comprehensive workforce programme to encourage our local population into NHS and care related careers aimed at improving the sustainability of the Health Board's workforce, support delivery of the Health Board's service objectives (both now and in the future) and offer good quality careers for our local population. This should include an ambitious expansion of our apprenticeship scheme	Director of Workforce and OD	Construct a comprehensive workforce programme to encourage our local population into NHS and care related careers,
5H: Develop an initial set of integrated Locality plans by September 2021 (with further development thereafter) based on population health and wellbeing and which are focused on the principles of sustainable and resilient services, timely advice and support to the local community on health and wellbeing, maintaining social connection, and independence and activity. This will require co-production with Local Authority Partners and the Third Sector. The scope of this will include all Community, Primary Care, Third sector, Local Authority and other Public Sector partners. These integrated Locality Plans will require a review of resources that ensure the optimal use of technology and digital solutions, Primary care and Community estate and a multiprofessional / skilled workforce that enables new ways of working in order that the following principles are achieved - 1. Increased time spent at home 2. Support for self care 3. Reduction in hospital admission 4. Safe and speedy discharge 5. Support for those at the end of life	Director of Primary Care, Community and Long Term Care	Joint Review of Integrated Locality Plan Template – aligning to the University Health Board's "triangle" model and enablers and requirements from the GMS contract to support a single shared plan
		Completion of Integrated Locality Plans – first draft
6D: Develop the capability for the routine capture of PROMS and implement in all clinical services within 3 years. Establish the required digital technology and clinical leadership and engagement to facilitate pathway	Medical Director	Development of a Value Based Healthcare Clinical Leadership Group

Planning Objective (in the order they appear in the 2021/22 Annual Recovery Plan)	Executive Lead	Deliverable
redesign based on these insights and put in place impact measurement processes to evaluate changes at a pathway level		
4C: For each of the three WG supported Transformation Fund schemes, develop and implement a plan to enhance, continue, modify or stop. These initiatives must form part of the planning objective to develop locality plans (5i) by March 2022	Director of Primary Care, Community and Long Term Care	Joint Review of Integrated Locality Plan Template – aligning to the HB “triangle” model and enablers and requirements from the GMS contract to support a single shared plan
2A: Develop a Health Board specific plan that responds to the Regional Carers Strategy, and complete implementation by March 2024	Director of Public Health	Map current support for unpaid Carers and develop a Health Board specific plan for Carers that responds to the Regional Carers Strategy and takes account of feedback from Carers, including staff with caring responsibilities.
1D: By September 2021 propose new planning objectives for the following year to pilot and test innovate approaches to offering people with complex and/or rising health and care needs (accounting for 15% - 30% of our population) greater control over the choice of care and support they need. The aim of these approaches must be to improve the value (outcome vs cost) from the services we provide.	Director of Primary Care, Community and Long Term Care	Identification of local leads to drive work forward
5I: Develop an equitable service for Children and Young People (CYP) ensuring CYP receive the care that they need. Bring together services to meet the needs of the children. This is within the context of ‘No Wrong Door’ launched by the Children’s Commissioner in June 2020. This relates to children with ‘complex needs’, acknowledging that there are many definitions attributed to this term. The organisational values should be at the heart of this programme.	Chief Operating Officer	Install QBTech to support diagnosis of ADHD Review current working practices. Consider roles and responsibilities with in Community Paediatrics
5J: Develop and implement a comprehensive and sustainable 24/7 community and primary care unscheduled care service model	Director of Primary Care, Community and Long Term Care	Phase 1: ‘Contact First’ ED/MIU dispositions and scheduling, by the end of July 2021 Phase 2: ‘Contact First’ Hub Dispositions to SDEC/Hot Clinics, by end of September 2021 Phase 3: Fully Operational Streaming Hub, by end of July 2021
5P: During 2021 produce a care home Market Position Statement and,	Director of Primary	Engagement with the sector (interviews)

Planning Objective (in the order they appear in the 2021/22 Annual Recovery Plan)	Executive Lead	Deliverable
based on the insights gained, develop new Planning Objectives for implementation from April 2022 aimed at stabilising, enhancing and reshaping the role of care home provision in the Hywel Dda area.	Care, Community and Long Term Care	Sign off final report, Presentation to the Regional Commissioning Programme Group
5Q: To develop and implement a plan to roll out an interface asthma services across the Health Board from April 2021, working across primary and secondary care. The aim of this is to enhance pathway value by reduce asthma related morbidity and mortality whilst improving access to expert opinion and reducing secondary care demand.	Director of Primary Care, Community and Long Term Care	Commencement of Interface Asthma Specialist Nurses
Gold Command Instruction #5 To develop plans capable of being implemented during 2021/22 to achieve WG targets in relation to RTT, Diagnostics, Therapies, Cancer and Mental Health using measures of likely harm as a way to prioritise initial action in 2021/22. Implementation timescales will be subject to discussion with WG.	Chief Operating Officer	Recovery Planning Workstream to agree work programme to inform further recovery priorities for 2021/22 and 2022/23.
		Progress regional cataract solutions
1E: During 2020/21 establish a process to maintain personalised contact with all patients currently waiting for elective care which will: 1. Keep them regularly informed of their current expected wait 2. Offer a single point of contact should they need to contact us 3. Provide advice on self-management options whilst waiting 4. Offer advice on what do to if their symptoms deteriorate 5. Establish a systematic approach to measuring harm – bringing together the clinically assessed harm and harm self-assessed by the patient and use this to inform waiting list prioritisation 6. Offer alternative treatment options if appropriate 7. Incorporate review and checking of patient consent This process needs to roll out through 2021/22	Director of Nursing, Quality and Patient Experience	Engagement with clinical leads, patients, primary care about year two offer (re referral criteria, alternative pathways, and consideration of including non elective waiting list processes)
		Staffing structure in post
5L: Implement the making nutrition matter – dietetics expansion plan within two years as agreed at Board on 26th September 2019	Director of Therapies and Health Sciences	Incremental roll out of ward based Nutrition & Hydration Champion model underpinned by QI methodology
		Recruitment Phase (Year) 2 dietetic staff (community focus) Total MN recruitment to end Feb 21: 9.6WTE ~£370k based on full year

Planning Objective (in the order they appear in the 2021/22 Annual Recovery Plan)	Executive Lead	Deliverable
Develop a COVID Recovery service to provide a comprehensive individualised person centred to support the symptom based needs of people directly affected by COVID-19.	Director of Therapies and Health Sciences	Review of current COVID 19 Community & Primary Care Recovery & Rehabilitation Pathway to ensure provision of enhanced tiered community based Multi-disciplinary Team approach
		Recruitment of the Multi-disciplinary COVID Recovery & Rehabilitation Team to support delivery of multi-professional clinical services to support individuals across the Health Board region, supporting the development and provision of well planned, delivered and governed clinical services. Establish COVID Recovery & Rehabilitation Service single point of access to ensure Long COVID screening and assessment utilising NICE Post COVID 19 assessment tools and recommendations for management as set out in COVID Recovery Service Model. Identify “Red Flags” to relevant GP, medical or therapeutic specialty for further investigation.
		Establish Specialist MDT Clinic to provide follow up care for patients with more complex ongoing symptoms of COVID 10 requiring specialist MDT management
4N: Create and implement a process in partnership with local authorities, PSBs and other stakeholders that engages and involves representatives of every aspect of the food system. This will include growers, producers, distributors, sellers, those involved in preparation and the provision of advice to individuals & organisations and thought leaders in this field. The aim is to identify opportunities to optimise the food system as a key determinant of wellbeing. The opportunities identified will then need to be developed into proposed planning objectives for the Board and local partners for implementation from April 2023 at the latest	Medical Director	New planning objectives to optimise the food system agreed

Planning Objective (in the order they appear in the 2021/22 Annual Recovery Plan)	Executive Lead	Deliverable
4L: design and implement a process that continuously generates new proposals that can be developed into planning objectives aimed at constantly moving us towards a comprehensive “social model for health and wellbeing” and cohesive and resilient communities. The process needs to involve our local population as well as a diverse set of thought and system leaders from across society	Medical Director	System leaders interviews, key partner and staff focus groups, and public engagement to feed into our understanding of the Social Model
5C: Produce a final business case by March 2024 for the implementation of a new hospital in the south of the Hywel Dda area for the provision of urgent and planned care (with architectural separation between them). This will be on a site between Narberth and St Clears. Using the experience and change brought about by the COVID pandemic, the plan should be focussed on minimising the need for patients and staff to attend and, for those who require overnight care, the shortest clinically appropriate length of stay.	Director of Strategic Developments and Operational Planning	Submission of PBC to Welsh Government
6G: To develop a plan during 2021/22 and begin implementation within the next 3 years to make all Health Board services carbon neutral and, by 2030, achieve the NHS Wales target of a 34% reduction.	Director of Strategic Developments and Operational Planning	Engage with WG Energy Services to identify Decarbonisation opportunities on each asset owned by the Health Board (Buildings & Transport)
Merged planning objective 3A & 2F: To develop and implement a comprehensive approach to performance delivery and quality management that enables staff at all levels to strive for excellence whilst effectively delivering the basics. This approach will incorporate all performance requirements set by the Board, WG, regulators and inspectors and will be fully rolled out to all staff with managerial responsibilities by 31st March 2022	Director of Finance	Development and launch of the Quality management Framework
		Develop the following enablers to the Improving Together approach: <ul style="list-style-type: none"> • Setting Improvement Measures • Data Visualisation (including Lightfoot & dashboards) • Improvement Support • Adopt and Spread
		Introduce concept through an event and co-design implementation plan
5K: Establish a new process that involves all clinical service areas and individual clinical professionals, whereby we assess ourselves against local	Medical Director	Development and approval of an Effective Clinical Practice Strategy

Planning Objective (in the order they appear in the 2021/22 Annual Recovery Plan)	Executive Lead	Deliverable
and national clinical effectiveness standards/NHS Delivery Framework requirements and fully contribute to all agreed national and local audits (including mortality audits). All areas and clinicians will need to be able to demonstrate their findings have been used to learn and improve and the process needs to be embedded within the Health Boards Quality and Governance process		
3G: Develop and implement a 3 year strategic plan to increase research, development, and innovation activity, and number of research investigators sufficient as a minimum to deliver the Welsh Government and Health and Care Research Wales expectations and improvement targets (see specific requirement 3.G.i). The plan will be developed in partnership with universities, life science companies, and public service partners so as to maximise the development of new technologies and services that improve patient care and health outcomes. While making further progress in established areas including respiratory, oncology, and diabetes studies, the portfolio will target and expand into areas of organisational clinical and academic strength, including ophthalmology, orthopaedics, anaesthetics, and mental health. A function spanning clinical engineering, research and innovation will also target a threefold increase in technology trials	Medical Director	Develop an enabling approach to quality assurance, supporting researchers to ensure quality is designed into the study set up as well as during the ongoing management of the research
		In conjunction with Health and Care Research Wales and WG, arrange an external peer review of the R&D department, and use the findings to contribute to the strategic plan
		Undertake a feasibility study to examine the costs and benefits of expanding the biobank, to include access arrangements, governance, staffing, and market assessment. If assessed as feasible, biobank will be further developed, underpinning an increased number of research studies a year
6E: Design and implement a VBHC education programme to be implemented with academic institutions for managers and clinicians that could also be offered to partners	Medical Director	Delivery of second cohort of the 'Bringing Value to Life' Education Programme.
		Review and development of the programme as a commercial offering
		Development of online case materials and access to resources and VBHC expertise
		Engagement with VBHC Clinical Leadership Groups.
6F: Implement a VBHC pathway costing programme for all clinical services that is capable of being completed within 3 years, and prioritised based on the likelihood of generating change.	Director of Finance	First systemic tool – University Health Board income and expenditure analysis at county

Planning Objective (in the order they appear in the 2021/22 Annual Recovery Plan)	Executive Lead	Deliverable
		levels, linking financial and activity data where feasible
3E: Business intelligence and modelling – to establish real-time, integrated (across the patient pathway), easily accessible and comprehensible data to support our clinicians and managers with day to day operational planning as well as support the organisation’s strategic objective to improve value of its services and shift resources into primary and community settings. The initial phase of this, involving as a minimum hospital data, should be in place by September 2021 with full inclusion of all health and social care data (as a minimum) by March 2024	Director of Finance	Phase I: Hardware/software will be purchased and the Advanced Analytical Platform will be created and as part of this data will be migrated to the cloud and tested
2C: Review our capacity and capability for continuous engagement in light of COVID 19 and the ambitions set out in the continuous engagement strategy approved by Board in January 2019, and implement improvements over the next 1 year	Director of Strategic Developments and Operational Planning	Engagement work programme to support the delivery of key Planning Objectives
6H: To be completed by the end of 2021/22 undertake a full analysis of our supply chain in light of the COVID-19 pandemic to assess the following: - Length and degree of fragility - Opportunities for local sourcing in support of the foundational economy - Carbon footprint - Opportunities to eliminate single use plastics and waste The resulting insights will be used to take immediate, in-year action where appropriate and develop proposed Planning Objectives for 2022/23 implementation	Director of Finance	Input into local economic impacts, and impact of individual treatments at patient level, to gain better understanding of overall economic impact of health care expenditure
3F: Develop a Board Assurance Framework to support the delivery of the Health Board strategic objectives over the 3 years from April 2021 supported by a clear, comprehensive and continuously updated Risk Register	Board Secretary	Revised Board Assurance Framework in place to align with our new Committee structure