

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 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>	<p>Director of Nursing, Quality and Patient Experience</p>	<p>High level plan for year-1 scale up and roll out</p>	<p>Achieved</p>		
<p>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</p>	<p>Medical Director</p>	<p>Develop a new clinical engineering, innovation, and research facility in Llanelli, with support for those developing new health and care technologies</p>	<p>Achieved</p>		

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<p>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</p>					
<p>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</p>	Medical Director	Literature database on the Social Model for Health and Wellbeing continuously updated	Achieved		
<p>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.</p> <p>These integrated Locality Plans will require a review of</p>	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		

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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 - 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					
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	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
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.	Director of Primary Care, Community and Long Term Care	Undertake engagement with the sector (survey) Analysis of existing data sources	Achieved Achieved		
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	Director of Primary Care, Community and Long Term Care	Development and approval of job description	Achieved		

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access to expert opinion and reducing secondary care demand.					
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		
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

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		Confirm core (internal) service capacity & delivery plans, along with additional activity / outsourcing service capacity & delivery plans for 2021/22	Achieved		