

Annex 2: Monitoring of Quarter 4 Actions within the 2021/22 Annual Recovery Plan

Planning Objective and Executive Lead	Action	Current Status	If Behind Mitigating Actions / Explanation / Comments	If Behind Revised Quarter to be completed by
<p>Planning Objective 1I: Develop a set of plans for implementation from July 2021 for new or extended health and wellbeing programmes for our staff using charitable funds.</p> <p>Director of Workforce & Organisational Development</p>	<p>Implement each of six programmes to support staff recovery</p>	<p>On track</p>	<p>All projects are underway and on track for delivery. Expenditure set aside for green gyms has been amalgamated with other funds from NHS charities and a new total of £212, 000 is now available to support rest and recovery of staff.</p> <p>A new distributed spending plan to support staff in each of the 3 Counties, and to support the implementation of the Medical Fatigue and Facilities Charter was discussed at the Charities sub committee on 6th June.</p>	
<p>Planning Objective 1A: Develop and implement plans to deliver, on a sustainable basis, NHS Delivery Framework targets related to workforce within the next 3 years</p> <p>Director of Workforce & Organisational Development</p>	<p>Refinement of data sets following stakeholder feedback</p>	<p>Ahead</p>	<p>Above Target</p> <ul style="list-style-type: none"> • Staff Engagement Score 75% in February 2022 staff sample survey (74% 2016 staff survey) • HEIW Submit commissioning template – complete • HCSW Framework – figures submitted substantial funding provided this year to support further workforce development. • Dementia training – compliance at 92.6%, target 85% • Staff appointed with check against child barred list – 100% compliance • Staff appointed with check against adult barred list – 100% compliance • % of staff who feel PADR helps them do their job 65.4% reported they agreed this helps them improve what they do. <p>Below Target</p> <ul style="list-style-type: none"> • Agency spend as % of pay bill 7.08% Feb 2022 compared to 3.36 in April 2020. • Sickness absence has continued to be higher than prior to covid and therefore not on target with WG expectation of 4.79%. However sickness (non 	

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			<p>covid) is currently at 4% 5.56% including covid reasons – lowest of the HBs in Wales.</p> <ul style="list-style-type: none"> • Core skills training compliance – compliance at 83.2% target is 85% • PADR/Medical Appraisal compliance – 64.8% compared to target of 85% Medical appraisal above target • Job Plan in last 12 months – 45% approved within last 12 months but 88% with live job plan – target 90% <p>In addition to the above specific measures particularly pleased with development of:-</p> <ul style="list-style-type: none"> • Revised workforce & OD dashboard for People Committee • Metrics now produced and embedded into each planning objective update report to demonstrate baseline and any impact • Specific dashboard linked to NHS Delivery Framework targets. 	
<p>Planning Objective 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:</p> <ol style="list-style-type: none"> 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. 	<p>Employee relations: Identify stakeholder groups and undertake stakeholder engagement, review current practice</p>	<p>On track</p>	<p>Induction: With the exception of the actions involving digital investment or support, all actions of the plan have been completed, with the new 24 week induction having been designed. Digital actions have been included in the new plan which now focusses on the implementation phase. These were behind due to the ongoing mass onboarding of various workforce needs and the move of the L&D function, however this has now gained momentum. Report will be available for the August PODCC.</p> <p>Equitable Access: Extensive research has now been completed, which had 11% participation from our workforce. A report</p>	

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Director of Workforce & Organisational Development			<p>has been produced that will be submitted for the August PODCC, outlining recommendations. All actions closed or transferred to the new planning objective.</p> <p>These were behind due to the ongoing mass onboarding of various workforce needs and the move of the L&D function, however this has now gained momentum. Report will be available for the August PODCC.</p>	
<p>Planning Objective 1G: Develop and implement a plan to roll out OD Relationship Managers to every directorate in the Health Board from April 2021. Their role will be to support the directorates in their day to day operations, as well as helping them to widen diversity and inclusion, develop their workforce, foster positive relationships and deliver successful and supportive home working arrangements for their teams.</p> <p>Director of Workforce & Organisational Development</p>	OD plans for each service area are scoped and prioritised	Behind	<p>The emergence of the Omicron variant and consequent pressure on services from December to March has delayed the opportunity to engage with services to develop the people culture plans.</p> <p>The whole ODRM Team were redeployed for a month during this period to focus on the collection of live sickness absence data to support service management and staff deployment.</p> <p>The objective timeframes have been revised and incorporated into planning objective for 2022/23.</p>	This work has been incorporated into the revised Planning Objective
<p>Planning Objective 2D: By December 2021 develop a clinical education plan with the central aim to develop from within and attract from elsewhere, the very best clinicians. This plan will set out the educational offer for nurses, therapists, health scientists, pharmacists, dentists, doctors, optometrists, public health specialists and physicians</p>	Recruitment of the Clinical Education Manager to support multi-professional clinical education with the Health Board	Complete	Completed and now embedded into post.	
	Establish an Integrated Education Governance Group (IEGG) to maintain a strategic overview of the Health	Behind	This has been a challenge, although draft terms of reference have now been completed which align workforce planning and education and development, with work underway to agree sub-groups and	

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<p>associates. It will also set out how we will support this with access to the best clinical educators, facilities (training, accommodation and technology) and a clear plan to grow both the number of clinicians benefiting from education and the capacity to support this</p> <p>Director of Workforce & Organisational Development</p>	Boards' workforce, education and development opportunities		membership. All Actions have been transferred to the new planning objective.	
	Develop clinical governance around the development of the new roles, creating a toolkit for managers	Behind	This is now being developed on an All-Wales Basis and therefore have taken longer than anticipated. Band 4 Nursing Toolkit in its final stages of completion.	Q2 2022/23
<p>Planning Objective 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)</p> <p>Medical Director</p>	Routine capture of Patient Recorded Outcome Measures (PROMs) in 17 service areas	On track		
<p>Planning Objective 2A: Develop a Health Board specific plan that responds to the Regional Carers Strategy, and complete implementation by March 2024</p> <p>Director of Public Health</p>	Commission information, advice and outreach services from third sector partners and review data and intelligence from commissioned services to inform changes or updates to the Action Plan	On track	In Q4 we received all contract monitoring data and have had joint meetings with the Local Authorities (who we jointly commission with) and the three providers for adult services, as well as Pembs Young Carer service. As these are ongoing contracts, they won't be 'completed' as such and the same action is also included for 22/23 when, once again, the contracts will be reviewed. The monitoring data was reviewed, which showed that numbers of carers is increasing, and one provider is running on a waiting list. As an action, we have asked them to look at trying to engage with more male carers as the numbers are predominantly female	

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<p>Planning Objective 3I: To implement contract reform in line with national guidance and timescales</p> <p>Director of Primary Care, Community and Long Term Care</p>	<p>Support Primary Care to work through the contract reform process and support four key priorities: quality and safety, workforce, access to services, and cluster working</p>	<p>Behind</p>	<ul style="list-style-type: none"> • General Medical Services (GMS) contract negotiations complete however Quality Assurance and Improvement Framework Quality Improvement templates are still to be issued by WG. • Community Pharmacy contract negotiations concluded and implemented. • Dental contract changes communicated to the profession and implemented • Optometry contract negotiations started May 2022 therefore timescale for implementation is unknown at this stage 	<p>Anticipate Q1 22/23</p> <p>Unknown due to negotiation timescales.</p>
<p>Planning Objective 5G: Implement the remaining elements of the Transforming MH & develop and implement a Transforming LD strategy in line with “Improving Lives, Improving Care” over the next 3 years and also develop and implement a plan for Transforming specialist child and adolescent health services (CAMHS) and autistic spectrum disorder and ADHD.</p> <p>Director of Operations</p>	<p>Adult Mental Health: Develop referral pathways and establish Single Point of Referral teams in each Local authority area.</p>	<p>On track</p>	<p>Have incrementally increased pilot operating hours of MH SPOC to 7 days a week. 111 Option 2 going live in Hywel Dda on 21st June. Phased approach – Stage 1 09.00am – midnight 7 days a week, Sage 2 24/7 from October as remaining staff onboard. Targeted marketing campaign developed which will be rolled out in late June.</p>	
	<p>SCAMHS: Develop new pathways linked to Adult Mental Health services and Expand School In-Reach Programme</p>	<p>On track</p>	<ul style="list-style-type: none"> • We are working with partners through the RPB to further strengthen care and support arrangements for children with emotional and mental health needs by becoming early adopters of the national Early Help and Support Framework which is being implemented as part of the Together for Children and Young People (TCYP) programme. • We are continuing to expand the provision of EIP services in line with the national leads. We are in the process of establishing a Steering Group which will oversee the local implementation of the RCP national standards and ensure self-assessment against the EIP maturity matrix. 	
	<p>SCAMHS: Develop a service specification for Learning Disabilities Services including model, service delivery methods and referral criteria.</p>	<p>On track</p>		
<p>SCAMHS: Finalise clinical pathways, with a focus on simplifying access and becoming</p>	<p>On track</p>			

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	more accessible with improved links to primary care.			
<p>Planning Objective 4P: 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.</p> <p>Director of Therapies and Health Sciences</p>	<p>Review and report service outcomes as set out in COVID 19 Rehabilitation Framework outcomes .Review of the service provision, volumes and outcomes supporting the COVID Recovery and Rehabilitation to identify its current and future role. Identify a sustainable way to incorporate Level 0-2 COVID Recovery and Rehabilitation Service as part of wider rehabilitation and pre-habilitation multi modal service provision.</p>	On track	<ul style="list-style-type: none"> • Draft program Plan developed - completed • Scoping workshops with colleagues from workforce, transformation, quality improvement and service leads have proposed the “Discover, Design & Develop and Deliver “structure that sets out the main actions and enabling work streams for successful delivery. • Identify range and scope of rehabilitation. • Identify the priorities for improvement adopting a scalable approach. • Complete an appraisal exercise of potential options that will optimise future delivery. • Establish enabling workstreams for Digital, Environment & Equipment , Specialist-Targeted-Universal Levels of Rehabilitation, Assurance & Metrics. 	
<p>Planning Objective 4G: Develop a local plan to deliver Healthy Weight: Healthy Wales’ and implement by March 2022</p> <p>Director of Therapies and Health Sciences</p>	<p>Convene a task and finish group to plan and design the model of delivery for children and families in line with the CYP pathway</p>	Behind	<ul style="list-style-type: none"> • Behind due to delay in Weight Management Clinical Pathway Lead coming into post as described in Q3 report. • Task and finish group has now been convened with multi-professional representation and work is underway to design a model of delivery for children, young people and families and to develop a business case to take this model forward. 	Business case to be completed by end Q2 2022/23
<p>Planning Objective 4L: design and implement a process that continuously generates new proposals that can be developed into planning objectives aimed at</p>	<p>Co-production with our partners of a working model of the Social Model for Health and Wellbeing</p>	Complete	<p>This work is ongoing and has developed into the continuing / revised Planning Objective 4L for 2022/23.</p>	

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<p>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</p> <p>Medical Director</p>				
<p>Planning Objective 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.</p> <p>Director of Strategic Developments and Operational Planning</p>	<p>Ensure existing Carbon monitoring processes are sufficient to monitor progress against the University Health Board targets and All Wales Decarbonisation Strategy objectives (16% by 2026 / 34% by 2030 from baseline year 2018/19).</p>	<p>On track</p>		
<p>Planning Objective 5K: Establish a new process that involves all clinical service areas and individual clinical professionals, whereby we assess ourselves against local 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</p>	<p>Clinical Engagement to support strategy delivery</p>	<p>On track</p>	<ul style="list-style-type: none"> • The Clinical Director for Effective Clinical Practice has been in post since March 2022 and a significant number of engagement sessions have taken place with Directorate and County Triumvirate teams. • Additionally, attendance at Quality and Governance Group meetings has been taking place. The purpose is to introduce the clinical effectiveness and identify Directorate/County priority areas, to inform the future work programme. 	

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Medical Director				
<p>Planning Objective 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).</p> <p>Medical Director</p>	Develop 'fit for purpose' facilities serving all our localities, with access to high quality patient consulting environments, laboratory space, and suitable office accommodation	On track	<p>This objective is on track. Please note the following site specific updates for assurance:</p> <ul style="list-style-type: none"> • PPH/Llanelli delivery team – unchanged. • The GGH/Carmarthen delivery team moved into the new CRC facility on the 09/03/2022, the team are now in the process of developing a strategy to deliver their key objective to facilitate commercial trials at this site. • The WBH/Pembrokeshire delivery team have moved into an improved space in the Discharge Lounge, attached to the second floor near the Oncology Ward, with improved desk space and potential capacity to see recruits. • The BGH/Ceredigion delivery team have agreed a space in the old Renal Unit, Ty Aeron. We have a timeline for moving into 3 offices which will facilitate improved desk space, a potential space to see recruits and a secure office for file storage with additional desk space. We are also exploring space within Aberystwyth University for additional hot desks. 	
<p>Planning Objective 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</p> <p>Director of Strategic Developments and Operational Planning</p>	Investment in engagement structures and mechanisms to support our Continuous Engagement Framework, including: continuous engagement training module; development of partnership forums for engagement; triangulation of feedback from wide	Complete		

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	range of sources across the organisation			