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Health Board



<b>Meeting Date</b>	<b>26<sup>th</sup> November 2020</b>		<b>Agenda Item</b>	<b>4.1</b>
<b>Report Title</b>	<b>Quarter 2 Operational Plan 2020-21 – Delivery of the Actions</b>			
<b>Report Author</b>	Maxine Evans, Head of IMTP Development and Implementation			
<b>Report Sponsor</b>	Siân Harrop-Griffiths, Director of Strategy			
<b>Presented by</b>	Siân Harrop-Griffiths, Director of Strategy			
<b>Freedom of Information</b>	Open			
<b>Purpose of the Report</b>	This paper provides the reported status against the actions agreed as part of the SBUHB Quarter 2 Operational Plan			
<b>Key Issues</b>	<p>A Q2 Operational Plan was submitted following Chair's Action to Welsh Government (WG) on 3<sup>rd</sup> July 2020.</p> <p>Within the Q2 Plan, a series of actions underpinned by milestones were identified with timescales for achievement.</p> <p>This paper provides a high level summary of the completed, on-track and off track actions. Detailed feedback is given for the off-track actions including revised milestones.</p> <p>It has been agreed that delivery of the actions will be monitored on a monthly basis and reported to the SLT/Executive Team with a quarterly report to the Performance &amp; Finance (P&amp;F) and Quality and Safety (Q&amp;S) Committees, followed by the Board.</p> <p>The timeline for the reporting arrangements for the remainder of this year are included for information.</p>			
<b>Specific Action Required (please choose one only)</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE</b> the actions and milestones identified within the Q2 Plan;</li> <li>• <b>NOTE</b> the reported RAG status and supplementary comments against each action that is off-track and the revised milestone;</li> <li>• <b>NOTE</b> that a report will be taken to P&amp;F and Q&amp;S Committees on a quarterly basis, followed by Board;</li> <li>• <b>NOTE</b> the timelines for the reporting arrangements for the remainder of 2020/21</li> </ul>			

## QUARTER 2 OPERATIONAL PLAN 2020-21 - DELIVERY OF THE ACTIONS

### 1. INTRODUCTION

This paper provides the position against the actions agreed as part of the SBUHB Q2 Operational Plan. It provides a high level summary of the completed, on-track and off track actions. Detailed feedback is given for the off-track actions including revised milestones.

### 2. BACKGROUND

A Q2 Operational Plan was submitted following Chair's Action to Welsh Government (WG) on 3rd July 2020. Formal feedback on the plan was received and an Engagement meeting took place with WG colleagues on 31st July 2020.

Within the Q2 Plan, a series of actions underpinned by milestones were identified with timescales for achievement.

The paper provides a high level summary of the completed, on-track and off track actions. Detailed feedback is given for the off-track actions including revised milestones.

It has been agreed that delivery of the actions will be monitored on a monthly basis and reported to the Senior Leadership Team (SLT) with a quarterly report to the P&F and Q&S Committees, followed by the Board. The timeline for the remainder of the year is set out below:

Tracker/Month	SLT/Exec Team	P&F	Q&S	Board
Full Q2 Performance	11/11/20	24/11/20	24/11/20	26/11/20
Q3 - Oct 20	02/12/20	-	-	-
Q3 - Nov 20	06/01/21	-	-	-
Full Q3 Performance	03/02/21	23/02/21	23/02/21	25/03/21*
Q4 – Jan 21	03/03/21	-	-	-
Q4 – Feb 21	07/04/21	-	-	-
Full Q4 Performance	05/05/21	25/05/21	25/05/21	27/05/21

\*No Board in February

### 3. PROGRESS UPDATE

The Q2 Action Plan Tracker was developed, with identified leads and agreed timescales for achievement, attached as Appendix 1.

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	Action not on track by due date
A	Action on track by due date
G	Action complete

A summary of the quarter by Theme is set out in the following table:

Theme	No. of Actions	No. of Milestones	Red	Amber	Green
Managing Covid-19	5	21	0	8	13
Testing and TTP	5	20	0	12	8
A Healthier Wales	4	12	0	3	9
Unscheduled Care & Winter Planning	5	15	0	8	7
Surgery & Theatres	3	17	3	10	4
SW Trauma Network	1	7	0	0	7
Critical Care	1	4	0	0	4
Diagnostics	14	40	2	5	33
Cancer Services	6	39	1	12	26
Primary Care and Community Services	4	37	0	5	32
Mental Health & Learning Disabilities	5	14	0	5	9
CAMHS	2	6	2	2	2
Childrens Services	10	26	2	16	8
Outpatient Transformation	5	13	0	8	5
Field Hospitals	5	11	0	3	8
Partnership Working	5	28	0	8	20
Digital Transformation	6	34	3	7	24
Infection Prevention Control	4	14	0	9	5
Value Based Healthcare	3	15	0	4	11
Capital	5	20	0	7	13
Finance	2	3	0	0	3
Workforce	1	13	0	6	7
<b>Total:</b>	<b>101</b>	<b>409</b>	<b>13</b>	<b>138</b>	<b>258</b>

The overall position shows that there was a good level of progress achieved and delivered throughout Quarter 2 against the agreed milestones with 63.1% completed, 33.7% on track to deliver and 3.2% off-track at some point during the full quarter.

A summary of the actions that continued to remain off-track (Red) at the end of the quarter are detailed below.

Theme	Action	Milestone	Comments
CAMHS	Single base for CAMHS Staff	Swansea Team vacate Cefn Coed and move to NPT	Some clinics for CYP living in Swansea will continue until the new premises become available in April 2021 – Trehafod will therefore not be vacant until April 2021. Plans for one single base for CAMHS need to progress in advance of April to enable full integration of the CAMHS teams. The majority of staff have now moved across to the single base in NPT, however despite staff consultation there is still some resilience. This is being escalated with the operational team at CTM via the commissioning

			arrangements, with the aim to move all staff across by January 2020. The milestone has been reviewed and rolled into Q3&4.
Digital Transformation	Integrated Health and Care	WCCIS – sign Deployment Order and commence implementation	Supporting paper needs to be agreed following discussion at the Digital Transformation Group. Business case will go to SLT in January.

#### 4. GOVERNANCE AND RISK ISSUES

This report is the third to be considered since the beginning of the Covid-19 pandemic. It has been agreed that delivery of the actions will be monitored on a monthly basis and reported to the SLT/Executive Team with a quarterly report to the Performance & Finance and Quality and Safety committees and Board.

#### 5. FINANCIAL IMPLICATIONS

There are no direct financial implications from this paper.

#### 6. RECOMMENDATION

Members are asked to:

- **NOTE** the actions and milestones identified within the Q2 Plan;
- **NOTE** the reported RAG status and supplementary comments against each action that is off-track and the revised milestone;
- **NOTE** that a report will be taken to P&F and Q&S Committees on a quarterly basis, followed by Board;
- **NOTE** the timelines for the reporting arrangements for the remainder of 2020/21

Governance and Assurance		
<b>Link to Enabling Objectives</b> (please choose)	<b>Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities</b>	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input checked="" type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input checked="" type="checkbox"/>
	<b>Deliver better care through excellent health and care services achieving the outcomes that matter most to people</b>	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
The paper reflects the impact of Quality, Safety and Patient Experience through the performance against the Q2 Plan actions and their delivery		
Financial Implications		
There are no direct financial implications from this paper		
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 Quarterly Plans.		
Staffing Implications		
Staffing and workforce performance against the actions in the plan is included in the paper and tracker		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
The Operational Planning arrangements will aim to deliver our Strategic Objectives which were aligned to our Wellbeing Objectives through the development of the Organisational Strategy.		
<b>Report History</b>	This is the second report to the Performance & Finance Committee on the performance status of the actions identified within the Q2 Operational Plan	
<b>Appendices</b>	Appendix 1 – Q2 Operational Plan Action Tracker	

**SWANSEA BAY UNIVERSITY HEALTH BOARD - OPERATIONAL PLAN TRACKER 2020/21**

Theme	Action	QUARTER 2											
		Jul-20				Aug-20				Sep-20			
		Milestone	Lead	RAG	Comments on Status	Milestone	Lead	RAG	Comments on Status	Milestone	Lead	RAG	Comments on Status
Managing Covid-19	Social Distancing/Nosocomial Transmission	Conclude risk assessment process in clinical and non-clinical areas & respond accordingly	Dorothy Edwards	Green	Risk assessment in non clinical areas complete; final report being developed by end of August.								
		Implement actions from WG guidance from NTG and assessment implications	Dorothy Edwards	Green		Implement further guidance from NTG	Dorothy Edwards	Amber	Majority of actions have been completed but awaiting final decision on bed spacing.	Implement further guidance from NTG	Dorothy Edwards	Green	All guidance received to date has been implemented
		Local communications campaign	Dorothy Edwards	Amber	Communications plan produced and being implemented; amber as communication will need to continue over the Q3/Q4 period	Continue comms campaign	Dorothy Edwards	Green	This action continues.	Continue comms campaign	Dorothy Edwards	Green	Ongoing
	Covid Response Work programmes	Each cell to review key outstanding actions & produce legacy statements	Dorothy Edwards	Amber	Governance review started in August but not yet complet; delayed due to waiting for Internal Audit report	Consolidate legacy statements	Dorothy Edwards	Amber	A review of governance arrangements has taken place and we are resting programme actions in early October.				
						Refine Gold master plan ahead of Q3	Dorothy Edwards	Amber	In progress - will be completed by mid October.				
						Progress outstanding cell actions	Dorothy Edwards	Amber	In progress - majority of actions were complete but a small number will be carried forward to Q3 a next phase of programme plan.				
	Integrated capacity plan and modelling	Review and refine integrated capacity plan on a weekly basis	Dorothy Edwards	Amber	capacity plan now picked up via modelling cell; will be c/f in terms of requirements for Q3/Q4	Review and refine integrated capacity plan on a weekly basis	Dorothy Edwards	Amber	Capacity plan developed through Operational Planning Group. COVID response plans submitted and will be finalised as part of Q3/Q4 planning.	Review and refine integrated capacity plan on a weekly basis	Dorothy Edwards	Amber	Further work being undertaken on surge capacity planning via Operational Silver
		Work with HD UHB to further refine Essential Service Model	Dorothy Edwards	Green	Address via modelling cell								
	EPRR Response	Board to consider initial 'hot debrief' and lessons learned	Dorothy Edwards	Green	complete and plan in place to consolidate all learning into 'insights' report	Implement key lessons and continue to review and refine response	Dorothy Edwards	Amber	Formal debrief held and lessons learned being taken forward into next phase. Insights report development ongoing and should be completed in October.	Undertake further review at end of Q2	Dorothy Edwards	Green	Planning and response arrangements have been reset in response to a debrief and internal reflections
	Brexit	Develop contingency plans	Karen Jones	Amber	There is an overarching Brexit Preparedness document, together with a Brexit risk register and the Health Board Business Continuity Plan framework which includes a Strategic BC response, each unit has a Tactical BC response and services within the units have BC plans	Develop and implement contingency plans.	Karen Jones	Amber	As noted there is already an overarching preparedness document. There is not a specific BC plan for Brexit. All units and services were asked to review their respective BC Plans during 2019 to take into account Brexit risks. A table top exercise was undertaken to test plans. The previously submitted risks are currently being reviewed by the services in readiness for a follow up EPRR meeting in September. They have been asked to also now consider where additional implications due to COVID may impact differently. Further review of BC plans will be required following this work. In addition national groups will be re-established in September and further information will arise once re-established.	Develop and implement contingency plans	Karen Jones	Amber	Brexit Planning in place via EPRR Strategy Group with HB wide representation. Attendance at national groups include SRO meeting and Health and Social Care meeting, one meeting for each has been convened in September. Assurance proformas provided to all representatives for completion by 30.09.20 providing assurance on risk assessment, impact analysis, business continuity plan updates and assurance where there is respective representation at national planning groups, e.g workforce, medicines management, procurement. Feedback provided at COVID Gold on a weekly basis. Assurance proformas analysed for overarching collation in readiness for EPRR Strategy Group on the 05.11.20 and update to Board via CEO brief. Brexit planning included in winter planning process as well as COVID response process due to the clear synergies. Currently, due to ongoing national talks, it remains unclear if there will be a deal or not. Preparedness in place to include mitigations if no deal.
Testing and TTP	Expand testing and tracing capacity in line with agreed plan	Full testing and tracing capacity able to be brought online – depending on demand & funding	Joanne Abbott-Davies	Green		Testing & tracing requirements flexed as necessary to meet changing demands	Joanne Abbott-Davies	Green	Tracing and Testing expanded in line with funding agreed by WG at 50% of required levels. Still utilising some repurposed staff but most returning to core roles and external recruitment undertaken.	Testing & tracing requirements flexed as necessary to meet changing demands	Joanne Abbott-Davies	Amber	Expansion of staffing to 100% staffing levels to cope with rapidly escalating additional demands. May require further expanding of capacity and / or prioritisation of tracing activity at a national level. MTU deployed and LTS established plus expanded use of UK - Gov portal testing to increase uptake.
	Recruit substantive staff to run TTP for 2020-21	HB/LA repurposed staff providing service.	Joanne Abbott-Davies	Green									
		External recruitment of workforce	Joanne Abbott-Davies	Amber	Underway, staff available from September in line with agreed programme	External recruitment of workforce	Joanne Abbott-Davies	Green	Still utilising some repurposed staff but most returning to core roles and external recruitment undertaken.	Full workforce in place across all organisations, with ability to flex to meet changing demands	Joanne Abbott-Davies	Amber	External recruitment underway for expanded teams but some core skills unavailable, particularly in communicable diseases / environmental health.
	Agree TTP Plans going forward including prioritisation of relative activities	Testing priorities revised and agreed on multiagency basis, synchronised with expansion plans for testing and tracing	Joanne Abbott-Davies	Amber	Antigen capacity increased and priorities agreed on a multiagency basis. Developing Multiagency Swansea Bay Regional Testing Plan by September as required by WG	Implementation of TTP plans, based on priorities set locally and nationally	Joanne Abbott-Davies	Green	TTP plan agreed and signed off by all partner organisations and being implemented.	Implementation of TTP plans, based on priorities set locally and nationally.	Joanne Abbott-Davies	Amber	Resetting of priorities and actions being undertaken on rolling programme to reflect changing patterns of demands.
	Establish and bed in arrangements for TTP across Region	SOPs and Flowcharts developed & regularly reviewed as TTP embeds and lessons are learnt	Joanne Abbott-Davies	Amber	In place for priority areas identified e.g. NHS care settings, schools etc. New SOPs being developed as high risk locations / settings identified on a rolling programme	Processes amended / established to reflect changing priorities	Joanne Abbott-Davies	Amber	As cases and clusters develop, learning applied to development of SOPs and Covid prevention and intervention plan, agreed with Welsh Government.	Processes amended / established to reflect changing priorities	Joanne Abbott-Davies	Amber	Ongoing learning and new situations arising requiring iterative work on processes and support arrangements for TTP.
	Establish serology programme	Complete antibody testing programme for Education Staff	Rhodri Davies	Green									
		Complete antibody testing programme for HB Staff	Rhodri Davies	Green		Roll out serology testing programme in line with WG expectations	Rhodri Davies	Amber	Ongoing due to continued requirments from WG	Roll out serology testing programme in line with WG expectations	Rhodri Davies	Green	
		Develop workforce plan in line with WG expectations around testing rollout	Rhodri Davies	Amber	Workforce plan will be finalised once Local Testing Plan is finalised	Plans amended / established to reflect changing priorities	Rhodri Davies	Amber	Ongoing due to continued requirments from WG	Processes amended / established to reflect changing priorities	Rhodri Davies	Amber	Requested by TTP Gold from October 2020 to staff Testing capacity to 100%. Recruitment campaign initiated in October 2020 to address this request
	Resetting Public Expectations and the Strategic Direction – A Healthier Wales	Secure views from staff, and set out expectations of new ways of working/new models of care	Hannah Evans	Green		Live virtual Meet the Executive Team	Hannah Evans	Green		Live virtual Meet the Executive Team	Hannah Evans	Green	INSIGHTS 2020 Report going to November 2020 Board. Report pulls on all feedback from various sources
		Staff engagement exercise on key learning from Covid response	Hannah Evans	Amber	Survey launched on 27 July to run to 31 August. Mid way report developed to go to RLI Steering Group 25 August.	Staff engagement exercise on key learning from Covid response	Hannah Evans	Green	Capturing Change survey carried out and analysed. Information will feed into INSIGHTS report				





Theme	Action	QUARTER 2											
		Jul-20				Aug-20				Sep-20			
		Milestone	Lead	RAG	Comments on Status	Milestone	Lead	RAG	Comments on Status	Milestone	Lead	RAG	Comments on Status
		Weekly Theatre capacity workstream reviewing demand and capacity in order to increase theatre capacity across all site but particularly Morriston. Reviewed theatres staffing establishment per Covid process to allow release of theatre teams to deliver additional theatre sessions	Tersa Humphreys	Amber	Existing theatre programme maintained consistently with no loss due to annual leave or sickness. Plan being developed for step change in theatre programme from 31st August 2020 with return of non patient facing staff and repatriation of final staff from ITU.	Commence recruitment process for PACU development at Morriston (Phase 1)	Michelle Mason-Gawne	Amber	Job descriptions written and signed off for nursing staff with vacancy control form submitted to panel. Meeting in place week commencing 05/10 to finalise medical staff requirement and vacancy panel forms will be submitted thereafter. Financial scrutiny will be undertaken for all posts in the same panel meet and when/if approved will go to advert	Scope and undertake an option appraisal process for a PACU model at Singleton and NPTH to support enhanced care complexity	Michelle Mason-Gawne	Amber	Job descriptions written and signed off for nursing staff with vacancy control form submitted to panel. Meeting in place week commencing 05/10 to finalise medical staff requirement and vacancy panel forms will be submitted thereafter. Financial scrutiny will be undertaken for all posts in the same panel meet and when/if approved will go to advert
	Regional / Partnership Working	Seek regional agreement in principle around the equitable distribution of patients across the geographical boundaries. Progress with agreed priority areas of urology and gynae oncology and spinal. Testing regional solutions for thyroid and vascular services	Conor Marnane	Amber	Agreement of principle of equitable distribution of patients for any regional working was agreed with Hywel Dda Healthboard. Some regional collaboration has started successfully in gynae oncology and thyroid/endocrine surgery but that has been all to date. Discussions on-going to scope potential use of additional capacity in Werndale and PPH to trial further regional solutions for other specialities (urology and spine)								
						Agree a framework for the utilisation of staff / capacity within the independent sector, including potential for regional solutions	Craig Wilson	Amber	Framework established to utilise staff and capacity from Sancta Maria agreed and utilised but terminated. Discussions ongoing with Hywel Dda UHB regarding the use of Werndale.				
South Wales Trauma Network	Agree Go Live date for MTN and implement	Work with the MTC, TUs and pre-hospital providers to ensure all critical to go live issues are resolved or mitigated against. This includes ensuring benefit from investment agreed by the HB (i.e. IMTP agreements - major trauma practitioners, rehab coordinators, rehab medicine consultant sessions and TARN coordinators)	Rachel Taylor	Green	Go live date set for September 14th. Welsh Government formal announcement was on July 24th. All providers on track ready for go live.	Go live set for September 14th 2020. Network went live as planned	Rachel Taylor	Green		Agree a model for the emergency surgical requirement for the HB to encompass emergency services provided regionally	Rachel Taylor	Green	
						Develop online e-learning platform to support education and training going forward. First training programme filmed	Rachel Taylor	Green					
										Develop and instigate a comprehensive communication plan	Rachel Taylor	Green	
										Develop formal network governance structure including M&M meetings across network. This incorporates ensuring data quality through the TARN database	Rachel Taylor	Green	Cross network governance structures in place and first formal governance meeting taken place.
										Go Live as a Major Trauma Network	Rachel Taylor	Green	SWTN went live on 14th September
Critical Care	Supporting Critical Care capacity through second wave	Finalise the revised 2nd wave surge bed plan in line with new capacity options	Tersa Humphreys	Green									
		Review the critical care workforce plan for 2nd wave, assuming a % of additional staff would not return to support critical care in 2nd wave and continue with development programme for additional support staff (this will be ongoing during August and September)	Tersa Humphreys	Green		Ongoing	Tersa Humphreys	Green	Second wave plan including workforce requirements including additional support staff requirements quantified. Actions on how to reduce call on theatre staffing and increase availability of other staff to support critical care being progressed.	Ongoing	Tersa Humphreys	Green	Health Board call for additional support staff for critical care undertaken. 1:1 discussions held with all additional support staff from the first wave to assess numbers available for second wave. Agency staff booked to support as first line of support to maintain operating capacity and support critical care.
		Map out timeline and risks of capital works in General ITU ahead of potential 2nd Wave	Tersa Humphreys	Green	Completed. No formal approval to proceed with reduced programme of capital works. East Unit remains closed due to ventilation issues								
Diagnostics - CT	Extend the working day across all three acute sites	Morriston 8-7:30 pm Singleton 8-8pm Neath Port Talbot 9-5pm	Brian Owens	Green	Business case submitted outlining financial costs of extended days, use of Hywel Dda Gantry capacity and ILS.	Assess options for weekend working	Brian Owens	Green	Options assessed and additional workforce requirements for extending working day across all sites included in CT business case. Case submitted awaiting HB decision.	Assess options for weekend working	Brian Owens	Green	Case submitted, awaiting HB decision. Case agreed 21st Oct, to be progressed in line with plan
	Continue discussions with ILS for additional capacity 2 days / wk = 32 pts	Develop service specification for screened non Covid 19 cases and establish cost implications	Brian Owens	Green		Implementation if viable solution	Brian Owens	Green	Cost benefit assessment of ILS option undertaken and included in the CT business case. ILS option is a high cost option for the activity that could be delivered.	Implementation if viable solution	Brian Owens	Green	ILS remains a high cost option, other options remain more cost effective for delivery of activity. Discounted option.
	Use mobile CT	Develop business case	Brian Owens	Green	Additional mobile CT secured for south west wales. CT scanner will be located in Hywel Dda University Health Board but access will be provided, with staffing	Implementation if viable solution	Brian Owens	Green	Option included in the CT Business case which has been completed and submitted. HB decision awaited on funding outlined proposals.	Implementation if viable solution	Brian Owens	Green	DoH CT gantry sited in H Dda. Working to develop a service spec to support opportunities for additional activity.
	Implementation if viable solution	Review potential CT gantry capacity using Bay hospital to provide non-Covid pathway	Brian Owens	Red	Decision awaited on submitted business case.	Implementation if viable solution	Brian Owens	Red	CT business case completed and submitted. Health Board decision on proposal awaited.	Implementation if viable solution	Brian Owens	Green	Case submitted, awaiting HB decision. Case agreed 21st Oct, to be progressed in line with plan
Diagnostics - MRI	Utilise mobile MRI van	Complete QIA and business case to establish financial impact and risks associated with increased routine activity	Brian Owens	Green	Approval given to commission 1 month of mobile MRI van whilst case being developed for expansion to baseline capacity	Implementation if viable solution	Brian Owens	Green	MRI Business case completed and submitted. Mobile MRI is a short term option to bridge recruitment for sustainable staffing option. Month on month approval given for mobile van until final Health Board decision made on MRI business case.	Implementation if viable solution	Brian Owens	Green	MRI Business case completed and submitted. Mobile MRI month on month approval given for mobile van until final Health Board decision made on MRI business case. Case agreed 21st Oct, to be progressed in line with plan
	Further develop MRI plan to reduce waiting list	Ongoing assessments to be completed with additional alternative solutions	Brian Owens	Green	Business case submitted outlining financial costs of extended days and ILS.					Implementation if viable solution	Brian Owens	Green	Business case submitted, awaiting HB decision.
	Review rotas to increase capacity	Complete review of rota's & implement additional capacity	Brian Owens	Green	Business case submitted outlining financial costs of extended days and ILS.	Ongoing implementation	Brian Owens	Green	Baseline capacity for MRI included in the MRI business case.	Ongoing implementation	Brian Owens	Green	Baseline capacity for MRI included in the MRI business case. Rota's continue to be revised to add additional activity wherever possible
	Workforce review for MR services	Complete workforce review & develop business case	Brian Owens	Green	Business case submitted outlining financial costs of extended days and ILS.	Implementation if viable solution	Brian Owens	Green	Undertaken and capacity and demand gap for MRI included as part of submitted business case.	Implementation if viable solution	Brian Owens	Green	Undertaken and capacity and demand gap for MRI included as part of submitted business case.



Theme	Action	QUARTER 2											
		Jul-20				Aug-20				Sep-20			
		Milestone	Lead	RAG	Comments on Status	Milestone	Lead	RAG	Comments on Status	Milestone	Lead	RAG	Comments on Status
	Continue discussions with ILS for additional capacity	Develop service specification for screened non Covid 19 cases and establish cost implications	Brian Owens	Green	Business case submitted outlining financial costs of extended days and ILS.	Implementation if viable solution	Brian Owens	Green	Value for money assessment of ILS option undertaken and sustainable HB solution provides better value.	Implementation if viable solution	Brian Owens	Green	Value for money assessment completed previously, sustainable HB solution provides better value. Discounted option.
Diagnostics - Ultrasound	Assess opportunity to utilise vascular lab to increased capacity	Complete assessment – potential 2 days / week – increasing capacity by 20 pts per week	Brian Owens	Green	Assessment undertaken by Radiology. Plans in place to commence clinics in month.	Implementation if viable solution	Brian Owens	Green	Implemented	Implementation if viable solution	Brian Owens	Green	Complete
	Assess radiologist support for scanning	Complete assessment– increasing capacity by 20 pts per week	Brian Owens	Green	Radiologist Rota review undertaken, Covid rota stepped down, lists to recommence late July.	Implementation if viable solution	Brian Owens	Green	Completed	Implementation if viable solution	Brian Owens	Green	Completed
	Deploy Head & Neck locum increasing capacity	Implement – adding 5 further pts per week	Brian Owens	Amber	Review of demand shows no need to increase currently. Service anticipates capacity to be exceeded Late August	Maintain capacity	Brian Owens	Amber	Delayed as the locum in post (neuro with some head and neck training) has been required to support shortages in neuro radiology predominantly.  Resource not yet able to help with ultrasound (not had enough US experience) however, is providing some cross sectional head and neck reporting when required.	Maintain capacity	Brian Owens	Amber	QIA to be submitted to support delivery of additional Head & Neck activity now demand has increased to a level locum required.
	Review opportunities to extend the working day plus 7 day working	Complete review and commence implementation if viable	Brian Owens	Amber	Business case in development to be completed by 20th August 2020	Further implementation if viable	Brian Owens	Green	Business case completed for Non Obstetric US demand and capacity gap requirements and submitted to Health Board for consideration.	Further implementation if viable	Brian Owens	Green	Business case completed for Non Obstetric US submitted to Health Board , awaiting a decision. Case agreed 21st Oct, to be progressed in line with plan
	Further develop Ultrasound plan to reduce waiting list	Ongoing assessments to be completed with additional alternative solutions	Brian Owens	Amber	Business case in development to be completed by 20th August 2020					Further implementation if viable	Brian Owens	Green	Business case completed for Non Obstetric US submitted to Health Board , awaiting a decision.
Cancer Services	Phased and sustainable solution for the required uplift in endoscopy capacity that will be key to supporting both the Urgent Suspected Cancer backlog and future cancer diagnostic demand on Endoscopy Services	Restoration of endoscopy rooms and redeployment of specialist staff to their endoscopy units.	Fiona Hughes	Amber	EBUS Recommended in Morriston. Thoracoscopy capacity available ERCP activity continues.	Restoration of all 5 Endoscopy rooms and redeployment of all staff	Fiona Hughes	Green	Action completed	Action completed	Fiona Hughes	Green	Action completed
		Plan for 25 Endoscopy sessions during July onwards to include Upper/ Lower GI, EBUS, Bronchoscopy and Thoracoscopy sessions.	Fiona Hughes	Amber	Nursing establishment in place to support	Plan for additional 6 Endoscopy sessions from August onwards for Upper and Lower GI sessions	Fiona Hughes	Amber	Difficulty in providing additional sessions due to Endoscopist availability. C+D plan developed to support the USC cohort and this will need funding agreed in Sept 20	Plan for further 4 additional Endoscopy sessions with appointment of new gastroenterologist and approval of C+D Plan	Fiona Hughes	Amber	Business case submitted and approval to be confirmed in October 20.
		Weekly Clinical Leads Recovery planning meetings to provide leadership and assurance in terms or delivery	Fiona Hughes	Green	Weekly meetings in place since beginning of July 20	Weekly Clinical Leads Recovery planning meetings to provide leadership and assurance in terms or delivery	Fiona Hughes	Green	Weekly meetings in place since beginning of July 20 and as required surgical team input	Weekly recovery meetings continue	Fiona Hughes	Green	Action completed
		Clear decision making and tracking of USC deferred and new referrals to continue.	Fiona Hughes	Green	Process in place and working well.	Continued prioritisation of new referrals and review of alternative diagnostics as appropriate	Fiona Hughes	Green	Process in place and working well.	Continued prioritisation of new referrals and review of alternative diagnostics as appropriate	Fiona Hughes	Green	Action completed
		Maintain use of the National Endoscopy Programme (NEP) for deferred patient tracking	Fiona Hughes	Green	Ongoing completion off the spreadsheet confirmed	Ongoing completion off the spreadsheet confirmed	Fiona Hughes	Green	Ongoing completion off the spreadsheet confirmed	Undertake analysis of lessons learnt and new ways of working in line with NEP	Fiona Hughes	Green	Action completed
		Continue planned implementation of FIT in USC groups of deferred patients	Fiona Hughes	Amber	USC COVID 19 deferred cases validation exercise undertaken. Over 50% of the patients have had FIT test, treated/TCl or removed. Membership on the National Fit Subgroup Meeting and reviewing alternative pathways	Advance discussions re: logistics for implementing FIT in low risk groups (as per NICE DG30 guidance)	Fiona Hughes	Amber	Awaiting National Steer	Implement FIT in low risk groups as per Business case triaged within primary care	Fiona Hughes	Amber	Workplan developed with pilot to be commenced in November 2020
		Capacity and Demand costed plan for 2020/21 to be approved and recruitment into eight additional Endoscopy sessions agreed and enacted	Fiona Hughes	Amber	C+D plan drafted.	C+D plan developed but funding to be confirmed	Fiona Hughes	Amber	Recruitment into additional Endoscopy Nurses as outlined in C+D Plan	Business case submitted and approval to be confirmed in October 20.	Fiona Hughes	Amber	Business case submitted and approval to be confirmed in October 20.
						Commence insourcing sessions as outlined in C+D plan	Fiona Hughes	Red	Business case developed in Sept 2020 and will need Executive approval				
						Maintain training lists for additional Endoscopists	Fiona Hughes	Green	Confirmed training lists in situ	Maintain training lists for additional Endoscopists	Fiona Hughes	Green	Confirmed training lists in situ
						Re-start Bowel screening colonoscopy for all new participants waiting following a positive screening FIT test	Fiona Hughes	Green	Bowel screening recommenced	Re-start Bowel screening colonoscopy for all new participants waiting following a positive screening FIT test	Fiona Hughes	Green	Bowel screening recommenced
	To explore the possibility of offering SBAR RT for high risk lung cancer patients in SWWCC	To undertake an assessment within RT Dept and Oncology to scope out the ability to be able to delivery SABR RT for high risk lung patient	Ceri Gimblett	Green	SBAR detailing how we could implement SABR in SWWCC has been drafted	Business case detailing the risks and benefits of delivery SBAR RT for high risk Lung Cancer patients in SWWCC	Ceri Gimblett	Green	completed and request for WHSSC to commissioning SABR for SWWCC was submitted to SLT and agreed				
		Work with VCC and WHSSC around the role out and availability of SABR RT within SWWCC	Ceri Gimblett	Green	Letter formally asking for support from WHSSC. Discussions with VCC have been supportive of SWWCC undertaking SBAR. Awaiting on response from WHSSC to commission this from us.								
	Establishment of mobile unit to carry out PET/CT scans for Swansea and South West Wales patients	First PET/CT scanning day: 2nd July 2020. Commence mobile PET/CT diagnostic service on Thursdays and Fridays; 12 patients per day	Neil Hartmann	Green	Up and running								
	Introduce Covid testing for Oncology and Haematology patients and staff involved in service delivery in line with national guidelines	Continue work stream to roll out testing in order of clinical priority until the total of @250/300 patients is met. Staff would be in addition to this number	Ceri Gimblett	Green	Testing for priority 1 patients been in place since 27.07.20 via liberty	Maintain testing in line with any change in national guidance	Ceri Gimblett	Green	RT Lung patients are now being tested alongside SACT patients as part of priority 2	Maintain testing in line with any change in national guidance	Ceri Gimblett	Green	testing remains on track for our SACT patients
	Continue to expand Surgery capacity to allow complex cancer surgeries to deal with any backlog of patients	Weekly Theatre capacity workstream reviewing demand and capacity in order to increase theatre capacity across all site but particularly Morriston. Reviewed theatres staffing establishment per Covid process to allow release of theatre teams to deliver additional theatre sessions	Tersa Humphreys	Green	Increased programme commencing 31st August 2020 for emergency, cancer and non cancer category 2 patients	Incremental increase of theatre sessions to address priority 2 elective surgery demand	Tersa Humphreys	Green	end of August plan implemented plus additional trauma and cepod operating capacity established.	Incremental increase of theatre sessions to address priority 2 elective surgery demand	Tersa Humphreys	Green	Increase seen in emergency and CEPD operating 4 to 6 theatre per day plus third list on weekend. Elective operating in Morriston 4 elective theatres per day. Singleton Hospital increased from 10 lists per week to 13 lists per week.NPT operating commenced 7th September 2020 2 theatres per day.

Theme	Action	QUARTER 2											
		Jul-20				Aug-20				Sep-20			
		Milestone	Lead	RAG	Comments on Status	Milestone	Lead	RAG	Comments on Status	Milestone	Lead	RAG	Comments on Status
	Convert interim PACU arrangements at Morriston to sustainable solution	WG funding already agreed PACU workstream established to agree actions required to deliver this development. Agree location	Michelle Mason-Gawne	Green	PACU workstream established and options appraisal process completed. Outcome to be discussed and agreed at next workstream meeting and taken to the overarching S&T Cell for sign off	Recruitment of staff, formulation of SOP's, agree date for delivery depending on staff appointments	Michelle Mason-Gawne	Amber	Recruitment of staff as above. SOPs are in the process of being drafted. Delivery date will be agreed when location is signed off, a paper has been drafted in regard to the agreed location and will be discussed in this months meeting	Aim to move to sustainable location late September at latest	Michelle Mason-Gawne	Amber	Recruitment of staff as above. SOPs are in the process of being drafted. Delivery date will be agreed when location is signed off, a paper has been drafted in regard to the agreed location and will be discussed in this months meeting
Primary Care and Community Services	Support reset and restart of primary care contractor services – GMS, Dental, Optometry and Pharmacy in line with National direction. Of note: - dental and optometry services level of escalation will reduce from red to amber as of 1st July 2020	Plan and implement (in line with national guidance) to deliver support to patients to ensure optimum service provision for face to face assessment and safety netting	Andy Griffiths	Green	Complete	Review – reactivation and monitor pressure levels	Andy Griffiths	Green	Weekly GMS reactivation group meetings, informed by key data,i.e. vaccs and imms				
		Optometry Practices to commence opening in line with national guidance to include General Ophthalmic services provided. Eye Health Examination services provided. Low Vision service provided (with careful consideration for this vulnerable group of patients)	Andy Griffiths	Amber	All practices except one has re-opened. The PCT and OA currently working with the practice to support re-opening.								
		Optometry - Acute domiciliary commissioned service to continue. Routine domiciliary service to remain suspended	Andy Griffiths	Green	Continued								
		Optometry - All practices to complete the National Wales Shared Services Partnership self-certification process for opening, including the Covid-19 training available through the WOPEC website	Andy Griffiths	Green	Complete								
		GDS Dental practices to be supported to offer wider range of services	Andy Griffiths	Green	Checklist developed and QA programme established to support practice start of AGPs from 17th August.								
		Dental – establish urgent care dental centre hub and spoke model for delivery of AGP procedures	Andy Griffiths	Green	UDC network established, practices accepting referrals from UDC.								
		Pharmacy - Prioritise Flu Planning in line with national discussions	Andy Griffiths	Green		Pharmacy - Prioritise Flu Planning in line with national discussions	Andy Griffiths	Green	Complete				
		Develop and Issue IPC checklists for contactor services implementation	Andy Griffiths	Green	Complete								
						Pharmacy - Implement national escalation tool and encourage uptake	Andy Griffiths	Green	This has been started with continued work into Q3 & Q4				
						Initiate planning for future implementation of digital platforms, e.g. Attend Anywhere in dental practices	Andy Griffiths	Green	This has been started with continued work into Q3 & Q4				
										Review of independent pharmacy based prescribing programme	Andy Griffiths	Green	Independent Prescribing commenced on 1st October in one pharmacy delivering Acute Conditions services . Early uptake has been excellent with a further 2 IPs to commence by end of November 20. It is anticipated that the remaining 4 will follow later in 2021. IPs are commissioned for 2 sessions with a maximum of 18 consultations per week
										Pharmacy - Review Sore Throat Test and Treat programme for feasibility of re- activation in conjunction with WG	Andy Griffiths	Green	Review has been made on national programme, however STTT services have been suspended during Covid-19 pandemic
	Phased re-activation of GMS additional and Directed, National and Local enhanced services in line with national guidance by 1st October 2020	Phased 3-month programme - working within national programme of restarting Additional and Enhanced services across contractor services – e.g. cervical screening is a priority for restart	Andy Griffiths	Green	Complete	Phased 3-month programme - working within national programme of restarting Enhanced services across contractor services.	Andy Griffiths	Green	Complete all GMS recovery plans received majority of services recommenced 1 July, all restarted by 1st October.	Phased 3-month programme - working within national programme of restarting Enhanced services across contractor services.	Andy Griffiths	Green	Complete
		Initiate planning for flu vaccination programme delivery in winter	Andy Griffiths	Green	Plan developed								
		Implement Revised Care Home Directed Enhanced Service	Andy Griffiths	Green	Complete	Review uptake of revised Care Home DES	Andy Griffiths	Green	Complete.				
		Extended roll out of Ask My GP	Andy Griffiths	Green	This results in 67% coverage of practices								
		Increase usage of Consultant Connect and review uptake Increase access to urgent /out of hours primary care services	Andy Griffiths	Amber	Review of usage in GP OOH to be undertaken								
	Reset and restart of the Cluster Whole System Transformation Programme	Reactivate Cluster meetings on virtual basis	Andy Griffiths	Green	8 Cluster meetings held during July								
		Restart Transformation / Primary Care Forum	Andy Griffiths	Green	Revised governance structure currently being considered								
		Lessons learnt exercise with cluster leads undertaken and reset of cluster to increase integration and as set out in the new primary care model	Andy Griffiths	Green	Revised TOR for Clusters currently being developed								
		Complete stocktake of whole system cluster transformation programme and development of priority re-activation proposals, including promoting digital platforms/ facilitating digital inclusion and review of HB community phlebotomy model	Andy Griffiths	Green	Complete	Implement Whole System Cluster Transformation projects informed by stocktake and development of transformation project proposals	Andy Griffiths	Green	New governance structure agreed at PC Transformation Forum on 08/09/2020. Transformation project team returning to substantive posts. Implementation Group (8 Cluster Wide) to drive forward projects, 1st meeting planned end of Sept. HOPC to undertake review of cluster position with CLs.	Continue to implement Whole System Cluster Transformation projects aligned to refreshed programme of work	Andy Griffiths	Green	Complete

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		Jul-20				Aug-20				Sep-20			
		Milestone	Lead	RAG	Comments on Status	Milestone	Lead	RAG	Comments on Status	Milestone	Lead	RAG	Comments on Status
	Reset and Recovery of Primary Care and Community Services via the Health Board Reset and Recovery Programme	Restart School Nursing Service to supporting the delivery of childhood imms vaccination (including influenza).	Andy Griffiths	Amber	1 School Nurse still supporting at CTU and 1 OTM. All dates set with primary schools for Fluenz programme delivery. Catch up of Teen Booster and Men ACWY for year 9 pupils in schools not completed due to lock down has commenced with dates for those still outstanding set for September [in advance of Fluenz programme commencing].	Restart services in line with Reset and Recovery Group and review service delivery	Andy Griffiths	Amber	Catch up for remaining year 9 pupils of Teen Booster and Men ACWY underway from schools return September 1st. Fluenz vaccine will be available one week earlier that originally advised and 19 primary school vaccination session dates have been brought forward in response.	Restart services in line with Reset and Recovery Group and review service delivery	Andy Griffiths	Green	Catch up for year 9 programmes completed. Fluenz programme underway and will be completed at the end of the school Christmas term Last SN at CTU to return to service Novemeber 1st. OTM remains there in a seconded post to March 2021
		Restart Paediatric audiology and urgent hearing aid reviews – clinics to take place on reduced basis using non-acute sites only	Andy Griffiths	Green	Complete								
		Delivery of Cardiac rehab programme on face to face basis supplemented by virtual programme	Andy Griffiths	Green	Complete								
		Extend provision of community Wound clinics – reinstatement of more venues	Andy Griffiths	Green	Complete								
		MCAS, Podiatry and Orthotics face to face clinics for priority cases	Andy Griffiths	Amber	Face to face clinics for red flag cases ongoing provision. QIA submitted for reactivation of prioritised routine services.								
		Adult SLT services; face to face outpatient clinics and dysphagia service, FEES and services	Andy Griffiths	Green	Adult SLT QIAs have now been approved by the Execs group. There are dates scheduled for videofluoroscopy for September and we are in the process of reviewing the 'held' list of patients requiring face to face and FEES appointments are being booked. Once we are established with running the face to face services for essential cases only, and knowing fully what that demand is, we will need to explore the option of bringing in more routine cases where virtual input is acceptable but not the preferred option from either the patient perspective or clinical.								
		Dental Services - Restorative Dentistry/ Community Dental Service and Dental Training Unit – treatment for urgent / essential dental care in line with national guidance – Amber phase	Andy Griffiths	Green	Re-activation of services has commenced /QIA R&R process started								
Mental Health & Learning Disabilities	Demand & Capacity analysis for Primary Mental Health to meet anticipated growth due to pandemic	Finalise demand analysis. Confirm current telephone triage assessment as standard practice across all areas	Gareth Bartley	Green	Demand analysis has been completed based on a sample from one of the biggest referrals into mental health services from primary care. Projection from the data showed a 25% increase in demand which will impact the mental health services. For ongoing information and accuracy additional data will be collected to monitor the trends in referrals through the collection of monthly data in addition to explore reasons for referral which will inform future resource allocation.	Review Tier 0 provision	Gareth Bartley	Amber	Tier 0 service mapping cuts across all of the Delivering Responsive Community Services projects. A planning meeting is scheduled with Swansea City for Voluntary Service in September to discuss how this can be achieved in a sustainable way which considers all peer led and community initiatives to support mental health wellbeing. Once complete this work will form the basis of the service pathway mapping which will take place under the TMHS programme (e.g. for the SPOA, Psych Therapies and LPMHSS).The various community navigators play a key role in keeping track of local service changes in tier 0 provision to support patients in accessing the most appropriate community service .	Review additional resource requirement	Gareth Bartley	Green	LPMHSS review under way through Transforming MH project. Activity dataset monitored for changes in demand against previous years. A joint pilot has been agreed with Cwmataw and Llŵchwr clusters, and SCVS will be leading the work. This project will now also sit within the Well-being and Prevention project” Additional £0.19m secured from Welsh Government MH Service Improvement Fund for deployment across clusters in Primary MH function. Meetings with cluster leads to fine tune role. Recruitment to commence October 2020
	Address backlog for High Intensity Psychological Therapies	Waiting list review. Trial Group Work with Microsoft Teams.	Gareth Bartley	Amber	A psychological therapies stakeholder group was launched in July 20 to meet weekly to identify and implement actions to reduce the backlog of patients waiting for high intensity psychological therapy. Waiting list and capacity analysis is undertaken to support the aims of the group. An expanded programme of virtual group therapy sessions is now in place across Swansea and Neath localities. Suitable accommodation is being sought to re-introduce face to face services. In addition to the above a wider Psychological Therapies Project Group has also been established, containing dedicated project support, to plan a revised service model based on a stepped care model approach. The first meeting was held on the 4th August	Introduce Low intensity workers	Gareth Bartley	Amber	3.0 WTE low intensity workers commenced in July 20 with a further 3.0 WTE currently undergoing pre-employment checks. Staff in post are scheduled to commence delivery of low intensity therapy in early October 2020 on a cross locality basis. Work continues to progress redesign of psychological therapy services (via the Psychological Therapy Project Group). The Professional and Strategic Psychological Therapy Lead is producing a paper that will form the basis of the stepped care model in psychological therapy services. This document is scheduled for review at October's project meeting.	Completed recruitment to outstanding additional Band 5 & 6 posts	Gareth Bartley	Green	Backlog of high intensity psychological therapy addressed and breaches cleared. Continuing to interrogate HB data to assist with planning and developing psychological based therapies in a stepped model. Low intensity group piloted and outcomes being analysed. 2 band 5 low intensity worker recruited and in place. MHSIF proposal approved by WG for additional psychological therapies resource to be recruited later in the year
	Progress development of interim Mother and Baby unit	Option appraisal of permanent solution for Mother and Bay Unit	Gareth Bartley	Green	The unit will be based on the Tonna Hospital site. The scheme is currently out to tender. Tenders have been returned on the 14th August and revalidated on the 20th August with follow on with regard to budget costings through the preferred contractor. Projected aim with regard to building work targeted for October 2020. The process for advanced recruitment has been commenced for the posts of consultant, service manager and ward manager.	Advanced recruitment commences for Key staff.	Gareth Bartley	Green		Building work commences on Site	Gareth Bartley	Green	Work underway.

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	Implement single point of admission for adult mental health	Medical staffing agreement. Pathway commences	Gareth Bartley	Green	In response to Covid 19 guidelines, a plan was put in place to reduce the number of admission points into mental health services. Unscheduled care previously had 3 admission wards, Fendrod and Clyne in Cefn Coed Hospital and Ward F NPT. All admissions now go to Ward F, NPTH. The model is reviewed currently on a fortnightly basis by all stakeholders.					Review single point of admission	Gareth Bartley	Green	Single point of admission reviewed and remains operational. Ongoing monitoring and adjustments as necessary on advice of IPC.
	Implementing the findings of the CLDT Review	Refresh specialist pathways development plan to set revised implementation dates	Gareth Bartley	Amber	There are groups established looking at behaviour that challenges complex needs, MH, dementia, ASD, transition and forensic pathways. The challenging behaviour has been implemented and is due to be reviewed in September 2020, variance against process is being reviewed for the complex needs pathway and will be implemented September 2020. The ASD and forensic pathways are pending development, pathways workshops to be developed and aligned to the modernisation plans. Existing pathways are under review (transition, epilepsy). Engagement events were held between November 2019 and January 2020 analysis of information has been undertaken and a proposed service model will be presented to the October MH & LD Board, drawing together the feedback from key stakeholders, staff and service users.	Participation in Health Equality Framework project to assess COVID 19 impact for people with LD	Gareth Bartley	Green	Complete, national report received by MHL DU	Development of implementation plan for use of Health Equality Framework within inpatient services.	Gareth Bartley	Amber	Being developed as part of modernisation plans for LD.
CAMHS	Covid response for CAMHS	Monitoring and adjusting of current working practices in line with Covid restrictions / guidance	Michelle Davies	Green	Capacity plans are being developed through the SBHB Children's Centre outpatients group to increase face to face appointments.	Monitoring and adjusting of current working practices in line with Covid restrictions / guidance	Michelle Davies	Amber	The response to COVID is continuously under review. A QJA has been completed to increase face to face appointments in September. Demand in relation to eating disorders is the biggest concern currently due to the need for a physical examination.	Monitoring and adjusting of current working practices in line with Covid restrictions / guidance	Michelle Davies	Amber	There has been a slight increase to demand following the re-start of schools, however compliance against the 80% target continues. There are currently some vacancies and staff sickness that have the potential to have an impact on waiting times. The need to implement WLI will be considered if the position deteriorates further. The Service are currently working on the need to provide virtual and face to face appointments where appropriate, and issues with accommodation have been raised. At the CAMHS Commissioning meeting on 22nd November it was highlighted that referrals for S-CAMHS had significantly increased in the CTM area following the re-opening of schools. The SBUHB situation is being monitored, however it is anticipated that the additional services provided in the SBUHB area including CAMHS nurses in the LA single point of access teams, and a more established Single Point of Access Team will reduce the impact on SBUHB CAMHS.
	Single base for CAMHS Staff	Finalise staff meetings/ consultation	Michelle Davies	Green	Staff move from the Cefn Coed site planned for September.	Finalise staff meetings/ consultation	Michelle Davies	Red	Fairfield is now vacant, and the majority of staff have now moved across to the Neath Port Talbot site. There remain a few members of staff in Trehafod, this is being escalated by CTM senior team.	Swansea Team vacate Cefn Coed and move to NPT	Michelle Davies	Red	Some clinics for CYP living in Swansea will continue until the new premises become available in April 2021 – Trehafod will therefore not be vacant until April 2021. Plans for one single base for CAMHS need to progress in advance of April to enable full integration of the CAMHS teams. The majority of staff have now moved across to the single base in NPT, however despite staff consultation there is still some resilience. This is being escalated with the operational team at CTM via the commissioning arrangements, with the aim to move all staff across by January 2020. The milestone has been reviewed and rolled into Q3&4 to track.
Children's Services	Sustainable workforce plan to maintain CEU in Morriston	Agree sustainable rota model for paediatric wards and OOH	Sam Williams	Red	Locums recruited to improve paediatric medical staffing model - meeting with ED scheduled end of August 2020 to complete medical and nurse staffing proposal	Develop staffing model for CEU with ED and Morriston DU	Sam Williams	Amber	medical staffing model improved via recruitment. nurse staffing model currently being developed. lack of availability of "assessment" area ie old paed ED is an issue	Agree medical and nursing staffing model	Sam Williams	Amber	Nursing model to be agreed with Morriston delivery unit. Meetings scheduled. Availability of short stay assessment area will prevent implementation of full model
	Progress Neonatal 24-hour transport proposal	Meeting to review proposal scheduled 15 July 2020	Sam Williams	Amber	second task and finish meeting taken place August. Business case invited for lead provider	Support task and finish group meetings	Sam Williams	Amber	await decision from task and finish group	Submit business case for lead provider and respond to consultation document	Sam Williams	Amber	Funding agreed with WHSCC and staffing model agreed. Proposed implementation date of interim model 4 January 2021
	Transitional Care unit	Resolve water testing issues and commission unit	Sam Williams	Green	water testing resolved	Water testing resolved	Sam Williams	Green	water testing resolved. Unit to open Thursday 8th October 2020	Commision Unit	Sam Williams	Green	Unit open and operational
	Outpatient recovery	Finalise requirements for Phase 2 and complete risk assessments, including roll out of Attend Anywhere	Sam Williams	Green	Final QJA's submitted for approval 18-8-2020	Phase 2 plan completed	Sam Williams	Green	phase 2 completed			Green	paediatric outpatients maintained across the sites
	Progress paediatric surgical recovery plan	Work to increase number of paediatric theatre sessions available	Sam Williams	Amber	insufficient theatre capacity	Category 2 list updated and monitored	Sam Williams	Red	insufficient theatre availability. Meeting scheduled Monday 5th October to review options	Source additional theatre capacity for paediatrics including private providers	Sam Williams	Amber	three lists per week currently provided to Paediatrics which is slowly reducing Cat 2 backlog
	Named Doctor Safeguarding	Agree alternative options following failure to recruit	Sam Williams	Amber	long term plan required. Review of safeguarding pathway across HB. Seek alternative options to provide third sector training	Meeting with Head of Safeguarding, named doctor duties (essential) shared amongst clinical team	Sam Williams	Amber	department reviewing job description to readvertise in light of interest in post	long term plan required. Review of safeguarding pathway across HB. Seek alternative options to provide third sector training	Sam Williams	Amber	Interested candidate approached the department. To be advertised.
	Neurodevelopmental service	Finalise capacity plan and recruit to vacant posts	Sam Williams	Amber		Capacity plan completed	Sam Williams	Amber	posts approved at vacancy panel in september to go live by the end of the month	Recruit to vacant posts	Sam Williams	Amber	posts advertised on TRAC closing dates 31 October 2020



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		Jul-20				Aug-20				Sep-20			
		Milestone	Lead	RAG	Comments on Status	Milestone	Lead	RAG	Comments on Status	Milestone	Lead	RAG	Comments on Status
	To continue to work in partnership to reactivate essential elements of the Regional Clinical Services Plan with <b>HDUHB</b>	Develop regional position on Field Hospitals	Hilary Dover	Amber	Discussions taking place at National Chief Executive Groups	Agree the position	Hilary Dover	Amber	Discussions taking place between Executive leads	Plan to implement	Hilary Dover	Amber	Regional solution initial discussions with CTM initiated end of Oct 2020. No commitments made - further scoping/ planning discussions to take place in Nov /Dec 2020
		Develop SLA for paediatric ophthalmology	Karen Stapleton	Amber	SLA for Paediatric Ophthalmology has been worked up (Jo Williams to sign off								
						Reactivate regional dermatology plan	Karen Stapleton	Amber	Agreement in place to pick and start work on regional Eye Care services, and Dermatology projects and further priorities to be discussed at ARCH Service transformation meeting on 25th Sept	Plan to implement	Karen Stapleton	Amber	Clinical Lead for Dermatology agreed. A regional Plastics/Dermatology Consultant Post agreed and JD under development. Exploring Regional Plastics (Laser) sessions through a Retire and Return post. Regional Dermatology workforce review underway linking to GP training programme. Review current capacity and demand and compare to pre-Covid status.
	To continue to work in partnership with <b>CTM UHB</b> on the legacy of the Bridgend boundary transfer	Develop a regional position on Field Hospitals	Hilary Dover	Amber	Discussions taking place at National Chief Executive Groups	Agree the position	Hilary Dover	Amber	No specific discussions other than those continuing to take place at National Chief Executive Groups - Ongoing				
		Make recommendations on the opportunities around surgery at NPTH	Neil Miles	Green	Restart plans for orthopaedic elective 'green' surgery to take place from 7/9/2020 including associated ward, theatre staff. 'Go Live' protocols developed for sign off through weekly NPTH Orthopaedic steering group meeting. Discussions on going with Cwm Taf re theatre access and speicity mix from October onwards. Space allocated for Cwm Taf orthopaedics from 7/9 alongside Swansea Bay surgery	Agree the position, operationally planning for theatre restart in September	Neil Miles	Green	Operational planning, staffing, ward allocation and staffing, theatre refamiliarisation, patient booking and isoalting all actioneed as planned	Plan to implement	Neil Miles	Green	Theatre restarted as planned on reduced S Bay and Cwm Taf timetable utilising Ward B2 pre and post optaively on the 7th September 2020
	To continue to work in partnership with <b>C&amp;V UHB</b>												
		Update the baseline regional risk assessment	Ian Langfield	Green	1.Regional OG cancer MDT to be piloted in September 2020 2. OG cancer service model workshop progressing work to identify preferred service model 3.Spinal Surgery launch workshop arranged for October 2020	Launch supraregional MDT for OGC Cancer Surgery	Ian Langfield			Develop service specification for spinal surgery	Ian Langfield	Green	Project launched to clarify regional and supraregional models for spinal surgery. Working groups established to advise on regional models, with wide stakeholder membership
Digital Transformation	Patient and Citizen Empowerment	Patient Portal – go live in diabetes	Deirdre Roberts	Green	Live in both Type 1 and type 2 patients. 214 patients have since registered	Patient Portal – implement in burns and plastics	Deirdre Roberts	Green	Burns and Plastics are refocusing approach to target patients who are SOS and who are PIFU. Lists being reviewed in readiness for end September go live. <b>Update - now live in burns and plastics</b>	Patient Portal – commence testing of outpatient events	Deirdre Roberts	Amber	Testing complete. Number of issues identified that require changes to WPAS. Resolution to issues to be made available in release 20.1 - scheduled for November
						Text reminders/ PROMs – procurement specification completed	Deirdre Roberts	Green	Specification drafted. Funding to proceed being worked through with Outpatients transformation board.				
	Hospital Patient Safety and Flow	Develop end of life decision tool	Matthew Knott	Green	Software developed. Awaiting UAT								
		Recommence planning for Welsh Emergency Department system (WEDS)	Deirdre Roberts	Green	Planning process has commenced. Correction plan redraft commenced					Sign off WEDs deployment order	Deirdre Roberts	Amber	Recommended contractual discussions with EMIS, NWIS and the HB. National hardware refresh arrangements ongoing.
		ePrescribing (HEPMA) – continue role out in NPTH	Deirdre Roberts	Green	All open wards live in NPTH before end of July								
						Significant upgrade to WPAS	Matthew Knott	Amber	Implementation date pushed back to November due to delays in completing integration work. Testing is on going and development of training materials including instruction videos are being produced.				
						Complete development of acute pain tool	Matthew Knott	Green	Development is complete, currently going through testing				
						Digital outpatients – pilot paperlite	Sian Richards	Amber	Delay due to unavailability of consultants. Pilot clinicians identified. Scoping work for pilot and new ways of working have been established with pilot commencement planned for Oct 2020. <b>Update: Pilot has commenced</b>				
										Agree development of SIGNAL v3	Matthew Knott	Green	Development plan agreed and development on schedule to commence
										Commence implantation of Electronic Test Requesting Phlebotomy module, e-prescribing site 2, Nursing e-Documentation and Digital Outpatients	Deirdre Roberts	Amber	ETR in progress. Phlebotomy module still in development with NWIS. E-prescribing site 2 deferred given the all wales pharmacy implementation at PoW.
	Integrated Health and Care	Pilot electronic letters in community	Matthew Knott	Red	Delayed DMS migration holding up further development. Rescheduling for September					Pilot electronic letters in community	Matthew Knott	Green	Pilot is now live
		WCCIS – submit FBC to Executive team	Gareth Westlake	Red	WCCIS business case approved by Programme Board and submitted to IBG scrutiny panel in July					WCCIS – sign Deployment Order and commence implementation	Gareth Westlake/ Deirdre Roberts	Red	Business case awaiting consideration by SLT.
		GP Test Requesting – complete Evaluation	Deirdre Roberts	Green	Pilot complete, rollout commences early August.								
		Continue to maximise the benefits of Attend Anywhere and Ask My GP in Primary Care	Deirdre Roberts	Green	Just over 5800 consultations held in secondary Care by end of July. 701 Attend Anywhere consultations have been conducted in primary care. Ask My GP deployment was accelerated in 2020 and was implemented in 27 Practices from March to July, with a further 4 planned in August								
	Information and Business Intelligence	Develop Essential Services Dashboard	Lee Morgan	Green	Dashboard launched. Further enhancements to be developed in second iteration to inform Q3/Q4								
		Develop a Testing Dashboard: TTP, CTU and community testing	Lee Morgan	Green	Majority of testing reporting requirements have been included in COVID dashboard version 2.								
						Cancer dashboard – incorporate information from Chemocare	Lee Morgan	Green	Complete				



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		Jul-20				Aug-20				Sep-20			
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	Streamlined Comms, Business Processes									Develop Outpatients transformation Dashboard	Lee Morgan	Green	Development commenced and progressing well - Ongoing
										Develop Theatres Dashboard using Power BI	Lee Morgan	Amber	Part of the redevelopment of TOMs. Temporary enhancements to reporting provided in the meantime
		O365 – go live with Forms in 3 service areas; commence roll out of Pro Plus; proof of concept for booking app; move Occupational Health intranet to SharePoint online	Carl Mustad/Matthew Knott	Green	Booking app live in Phlebotomy (Morrison and Bay Studios) PoC complete August New build laptops imaged with Office Pro Plus. Veterans services now all-digital using Forms and SharePoint online				Booking app live in Phlebotomy (Morrison and Bay Studios) PoC complete August New build laptops imaged with Office Pro Plus. Veterans services now all-digital using Forms and SharePoint online	O365 – realignment of licences complete	Carl Mustad	Green	Work well progressed and due to finish end of October.
		Develop stent registry	Matthew Knott	Green	Development complete, in UAT								
	Digital Enabling Programmes	Commence rollout of Community and Learning Disability Services WIFI	Carl Mustad	Green	22/68 sites complete Final completion estimated December 2020								
		O365 – start pilot of MS Intune	Carl Mustad	Green	Initial work for pre reqs in progress Due to pilot in September	O365 - re-provision Skype conference equipment to teams	Carl Mustad	Green	Complete	Pilot Intune	Carl Mustad	Amber	Licence realignment underway, full pilot of intune planned for Q3 in line with National Program
										Migration of data to new BI server complete	Carl Mustad	Green	Migration completed
										Commence infrastructure requirements in readiness for national critical care system WICIS	Carl Mustad	Green	Working alongside capital planning
Infection Prevention Control	Implement social distancing for staff and patients in communal and clinical areas	Communications to publicise on social media, internal screens, posters and floor markings	Lisa Hinton	Amber	Social distancing in place. Audit tool developed. Audits to be commenced in Q2 to monitor compliance.	Monitor compliance with social distancing in a variety of areas	Lisa Hinton	Green	Sample audit undertaken. To be integrated into IPC routine audits.	Continue to monitor compliance, review signage	Lisa Hinton	Green	Ongoing
		Set up social distancing cell	Dorothy Edwards	Green	Cell in place since June 2020								
	Health promotion/ education: Raise awareness of general principles of IPC for staff, patients and visitors	Continue to work with procurement around supplies of hand wash and gel	Mark Parsons	Green	There are no known issues with the supply and distribution of hand wash or gels. These are removed from the restricted line items covered under PPE in June 2020. As for the education element IPC lead on training and education.								
		Ensure communications are in place in relation to hand hygiene, symptoms, catch it, bin it, use of masks and how to apply etc	Lisa Hinton	Amber		Seek feedback on the comms related activity for effectiveness	Lisa Hinton	Amber	Plans in place to undertake a survey.	Review and amend comms strategy as required	Lisa Hinton	Amber	Patient and staff survey being developed in conjunction with patient experience team. To be undertaken in Q3
	Ensure the most up to date guidance is implemented and disseminated in a timely manner	Review all IPC related guidance as it is published and ensure it is implemented, developing local SOPs or relevant information as appropriate	Lisa Hinton	Amber	Ongoing. SOPs updated and reviewed in line with National developments	Ongoing review and refresh of SOPs	Lisa Hinton	Green	Reviewed and updated on a continuous basis.	Ongoing review and refresh of SOPs	Lisa Hinton	Amber	Continuously reviewed and updated according to National and local changes/requirements
	Environmental decontamination	Ensure environmental cleaning and decontamination practices are in line with National guidance for COVID or other organisms as appropriate	Lisa Hinton	Amber	3 month HPV in place with a managed service and UVC technology utilised within each of the acute sites. Electronic system for monitoring being explored by support services.	Develop systems for recording when enhanced cleaning or decontamination are required and completed	Lisa Hinton	Amber	Systems being explored to capture this. This information is captured on a paper basis but will be more effective electronically. This action is monitored by the environmental decontamination task and finish group a sub group to the infection control committee.	Ensure systems for recording enhanced technologies are in place	Lisa Hinton	Amber	Electronic solution being explored. Paper based process in place. Cleaning products in use as per National guidance.
Value Based Healthcare	Supporting Essential Services	Develop & roll out Triage and Prioritisation tool in areas/specialties with greatest need aligning with the Essential Services Guidance	Navjot Kalra	Amber	working with OP team to promote use of QQ tool	Embed approach and methodology	Navjot Kalra	Green		Review	Navjot Kalra	Green	QQ been sent out for Paediatrics, Rheumatology & Audiology. Currently working with respiratory. Also developing process to use a generic triage QQ, and engaging with more specialities.
	PROMS	Continue collecting PROM's in Heart Failure and Ophthalmology	Navjot Kalra	Green	currently collecting PROMs in HF Hub, need to start collecting in community clinics when back up and running. Also currently collecting PROMs in Cataracts - baseline only.	Implement	Navjot Kalra	Green		Implement	Navjot Kalra	Green	Phase 2: Scoping meeting arranged on 2nd Nov - to collect PROMs along new HF pathway. Meeting arranged with coders to establish a way to automate sending of cataract PROM post surgery. Currently only collecting pre surgery
		Review PROM collection processes in existing services in Rehabilitation particularly ELP and MCAS	Navjot Kalra	Green	Reviewed process for ELP, this will be collected in DrDoctor, anticipated go-live Dec 2020 (project delayed due to Covid-19)	Implement any changes as a result of review	Navjot Kalra	Green		Monitor	Navjot Kalra	Green	ELP are looking to collect PROMs in PROMAPP. the supplier is currently gaining Cyber Security with Digital services. In readiness for service commencing in Feb 2021.
						Implement digital integrations to be able to automate processes and use the full functionality of the PROM's solution (WPAS and DrDoctor)	Navjot Kalra	Amber	Waiting for WPAS integration documentation from Hdd Value team, which should be w/c 5/10/20, once received WPAS extract into DrDoctor should be quite straightforward, as all server integrations have already been set up for the first extract with PIMs.	Monitor	Navjot Kalra	Amber	WPAS integration booked with DrDoctor & Digital on 23rd Nov 2020.
										Commence collection of PROMs & Triage tool in Lymphedema	Navjot Kalra	Green	on target to go live collecting proms to use to triage and for direct patient care on w/c 9th Nov 2020.
	Outpatients	Reduce Outpatients routine appointments in alignment with the OP Modernisation programme in T&O, MCAS, Ophthalmology, Cardiothoracic Surgery, Gastro, Cardiology, Dermatology, Nephrology and Rheumatology in line with detailed plan	Navjot Kalra	Amber	orthopedics, cardiology and ophthalmology (PROMs) already included in the work programme. Further discussions required about choosing between IBD and Rheumatology as the 3rd speciality on DrDoctor. Quick question tool has been offered to all specialities within the OP modernisation programme.	Reduce Outpatients routine appointments in alignment with the OP Modernisation programme in T&O, MCAS, Ophthalmology, Cardiothoracic Surgery, Gastro, Cardiology, Dermatology, Nephrology and Rheumatology in line with detailed plan	Navjot Kalra	Green		Reduce Outpatients routine appointments in alignment with the OP Modernisation programme in T&O, MCAS, Ophthalmology, Cardiothoracic Surgery, Gastro, Cardiology, Dermatology, Nephrology and Rheumatology in line with detailed plan	Navjot Kalra	Green	Aligned with OP programme with implementation of quick question and PROMs in Rheumatology, IBS, Heart Failure and Lymphadema.
Capital	Field Hospitals	Agree final accounts for Field Hospitals.	Simon Davies	Green	Work ongoing	Agree final accounts for Field Hospitals	Simon Davies	Green	Work ongoing				



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		Scope & design potential oxygen adaptations for the Bay Field Hospital	Simon Davies	Amber	Design for installation of bottled oxygen into the triage / treatment room area of the bay studios and explore opportunity for a linked building ( portacabin style) adjacent to the Field Hospital. Revise management plan and identify any works required to enable bottled oxygen use in these areas. .	Scope & design potential oxygen adaptations for the Bay Field Hospital	Simon Davies	Green	Agreed to install mobile portable oxygen cyclinders within triage & treatment room area's. Will also have oxygen concentrators - x8 which will deliver 5L oxygen and x2 which will deliver 10L oxygen. Safe storage of cylinders outside will also be provided. Discssion around level of acuity of patients has occurred and agreed that medical model would be revised to reflect lower level.	Undertake works for possible oxygen adaptions at Bay Field Hospital	Simon Davies	Amber	Swansea Council continuing to undertake maintenance on the roof as it continues to leak. Final accounts original works finalised - not as yet completed for additional works and reinstatement.
		Agree reinstatement costs for Llandarcy Field Hospital	Simon Davies	Amber	Estimated at £350k to reinstate but this has yet to be agreed with NPT Council and Scott's the builders.	Agree reinstatement costs for Llandarcy Field Hospital	Simon Davies	Amber	Estimated at £400k to reinstate but this has yet to be agreed with NPT Council and Scott's the builders.	All current works identified has been agreed with NPT Council. Two outstanding items: Replacement of 3G pitch & flooring in main hall. Final accounts for reinstatement works as yet to be agreed.			
	Updated capital plan	Agree revised capital plan with local risk assessment, with no funding available from the AWCP for schemes in development	Ian MacDonald	Green	Revised plan approved by Board and WG.								
	Replacement of CT-SIM, West Wales Cancer Centre	Place orders for CT-SIM equipment.	Simon Davies	Green	Works on-going and Equipment / specification agreed.								
		Enter construction contract	Simon Davies	Green	Contract due to be signed in September with works being complete by March 21.	Commence construction works.	Simon Davies	Green	Contract due to be signed in September with works being complete by March 21.	Continue construction works	Simon Davies	Green	On Track
	Replacement of Cladding, Singleton Hospital	Design of technical options for replacement of cladding.	Simon Davies	Green	Work ongoing	Design of technical options for replacement of cladding.	Simon Davies	Green	Work Ongoing	Completion of technical business case for cladding replacement	Simon Davies	Green	FCB informally submitted to WG 30.10.20 Awaiting formal HB sign off 26.11.20
		Design of enabling package for contractor car park.	Simon Davies	Green	Design work ongoing	Submission of enabling package for contractor car park.	Simon Davies	Green	Design work ongoing				
	Anti-Ligature Phase 2	Review of risk associated with a reduced level of initial works	Simon Davies	Amber	Awaiting approval to proceed from the WG.	Review of risk associated with a reduced level of initial works	Simon Davies	Amber	Awaiting approval to proceed from the WG. Works has been fully tendered.	Commencement of initial reduced level of capital works	Simon Davies	Amber	Still awaiting confirmation of funding from WG. Areas identified to undertake work in LD bungalows & agreed by Dai Roberts.
	Finance	Financial Plan	Darren Griffiths	Green	Savings requirements were discussed at the end of July finance review meetings. A refreshed version of the KPMG pipeline has been shared with unit triumvirates and plans have been requested for return for discussion and agreement at the end of August Financial Review meetings to be undertaken in September					Through finance review meetings increase assurance of robust capture of COVID 19 costs to support cost recovery from Welsh Government as funding becomes available	Darren Griffiths	Green	The Health Board has been notified of the available funding to support the pandemic response and the delivery of the Health Board forecast financial position. This will continue to be monitored and driven through the financial review meetings
		Capital Plan	Darren Griffiths	Green	This was completed by the end of July and a revised balanced plan was approved								
Workforce	Expansion of Occupational Health to support Covid-19	To recruit additional OH Nursing and admin staff to support ongoing OH Covid Work	Hazel Robinson/ Kathryn Jones	Green	Secondments agreed with staff deployed to OH who were already trained up.	To continue to Work with PHW to implement Health Care Worker surveillance programme	Kathryn Jones	Amber	Work with PHW continues - staff have been randomly selected to take part in the programme and the surveillance has commenced with the offer of monthly blood tests.	To implement Health Care worker Covid-19 surveillance programme in partnership with PHW.	Kathryn Jones	Amber	Email sent out to identified staff and consent forms returned by participants. Meeting at Bay hospital who have agreed to undertake the phlebotomy. Awaiting link to booking system in Bay Hospital to commence offering appointments.
		To implement streamlined pre-employment process to reduce recruitment waits.	Hazel Robinson/ Kathryn Jones	Green	Streamline Pre-Employment process implemented. Waits for clearance significantly decreased.	Continue 7 day delivery of OH service as demand dictates Induct and train new OH Nurses and admin staff To support the pause in staff shielding and to undertake assessments on staff return to work	Kathryn Jones	Green	The service continues operating 7 days and recently expanded weekend hours (8-4pm) due to the increase in workload as a result of recent increases in positive Covid infections. 2 Band 5 Nurses OH Nurses appointed 12 months fixed term. Completed immunisation training, supporting some COVID Calls and undertaking immunisations. 2 x B6 Nurses from pre assessment seconded to OH until 31/03/2021- trained to undertake management referrals, general advice, Referrals to CTU and processing results 2 X B5 Nurses from Cardiac ITU seconded to OH until 31/03/2021- trained to undertake referrals to CTU and process results. Fixed term until 31/3/20 Band 5-6 and Band 6-7 secondments completed to increase resilience within the team. 438 management referrals related to Covid-19 issues, including support for staff who are shielding, received since June 2020. Continued phone and e-mail support to line mangers to help manage staff to return to work from Shielding.	To implement health surveillance programme for skin related issues.	Kathryn Jones	Amber	Programme agreed at Health and safety Meeting. All resources complete. Implementation schedule agreed at OH, H&S and IC joint meeting. 8 Training Sessions Booked. Invite sent initially to Morriston and NPTH. Additional training Sessions planned. Band 6 OH Nurses currently receiving training to undertake skins management referrals.
	Expansion of wellbeing service to support Covid-19	Additional fixed-term staff counsellors recruited to support significant increase in mental health referrals to the service		Green	Counsellors recruited and in post.	Procurement document developed to help identify provider to deliver TRIM training.	Kathryn Jones	Amber	Procurement exercise currently being undertaken to identify provider	To identify TRIM provider to deliver full 2 day training to critical care staff	Kathryn Jones	Amber	Procurement tender exercise complete and identifying supplier to deliver 2 day training. Interim training (ReactMH) delivered to 240+ staff to support managing effects of trauma in the workplace.
		Promotion of 'Silver Cloud' (on-line CCBT) to HB staff		Green	Silver Cloud promoted to HB Staff via email and on intranet pages.	Initial meeting with wider partners to promote early intervention for mental health Promotion of SilverCloud resulted in SBU having highest number of staff participants across Wales.	Kathryn Jones	Green	Continuing to work with partners (e.g. Time to Change Wales, HEIW, Able Futures) to increase mental health resources & support for staff and to enable signposting via the Wellbeing service. Continue to promote across the organisation. Uptake by SBU staff continues to be highest across Health Boards in Wales	To arrange Ministerial Visit to support the ESF funded 'In Work Support' service	Kathryn Jones	Amber	Due to the pressures of existing diary commitments the Ministerial visit has been postponed until February 2021. It is hoped that the visit will be face-to face (if possible) with attendees also able to participate virtually. Due to the nature of the support provided by the IWS Service, the WG lead has suggested that it may be preferable to invite Elinor Morgan (Minister for Mental health and Wellbeing), instead of Vaughan Gething.

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						Promoting ESF funded 'In Work Support Service' via local media including radio campaign on 'The Wave' radio station.	Kathryn Jones	Green	Continue to promote the service locally; Wales on Line piece published 23/9/20 and the Wave radio campaign continues resulting increased referrals. Invitation by Jeremy Miles MS for Neath to 'Mental Health support in Neath' meeting on 9/10/20 to promote the service. Most local businesses have been sent information as to how the service can support staff during Covid-19. Webpage updated with timetable of wellbeing webinars and Covid-19 related information.				