Integrated Medium Term Plan
2018/19 – 2020/21
How have we developed our IMTP?

• Front line led approach through Local Delivery Plan process
• Reviewed our priorities
• Board engagement
• Use of Commissioning Intentions & CQDF to drive and shape
• Improved alignment with IMTPs of LHBs
• Fortnightly meetings with the CASC to test and assure
• Tripartite meeting with Welsh Government / CASC / WAST to assure progress – good feedback
• Ensured alignment across service, finance and workforce elements
• Quality as theme throughout – the Quality Strategy as a driver
• This is year three of our first (16/17) IMTP, thus emphasis been on review and update
  o Retaining a consistent narrative
  o Demonstrating delivery
  o ....and consequently keeping a similar style and format to our plan

• Not lost the ambition though and IMTP includes next phase of progress:
  • Post CAD implementation and our plans for realising benefits of the new system
  • Implementation of Band 6 Paramedic role
  • Our offer to primary care and the community paramedic schemes
  • Our workforce career frameworks
  • Clarity on our joint priorities with LHBs
  • Improvement and innovation models
  • Driving the value agenda
  • Supporting and working with NHS Wales on the complex strategic change agenda
  • Embedding and maturing the NEPTS CDQF
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We have made good progress in improving key elements of our performance during 2017/18, in particular:

- red performance – reduced variation
- improved and sustained hear & treat rate
- performance against concerns responses.

All underpinned by improved management processes across all directorates, including a strengthening performance management approach:

- Successful implementation of a new Computer Aided Dispatch (CAD) system
- Successful development of a new Non-Emergency Patient Transport Delivery Framework
- Agreement of the band 6 paramedic role
- Mental Health Improvement Plan – 6 priorities and funding support
- Gold Corporate Health Standard
- 2017/18 plan detailed 48 actions;
**National Context**
- Prosperity for All
- Parliamentary Review – 10 recommendations
- NHS Wales Strategy development...

**Commissioning Intentions**
- EMS commissioning intentions received in November 2017.
- For NEPTS using business case as basis
- New requirement this year that a suite of technical appendices are submitted to EASC demonstrating how the commissioning intentions are being addressed.
- Requires a joint WAST/Health Board submission.
- Successful collaboration with HBs has taken place

**Strategic Service Change**
- Plan now reflects the priorities of the regional planning committees which have emerged in the last 12 months
- Service changes identified as ‘going live’ in the next 12 months specifically identified as requiring commissioning allocations agreed.
- Requirement to develop a once for Wales approach to quantifying service change identified in the plan
- Non NHS changes

**Long Term Strategy**
- Progress of the long term strategy
- ‘Quick wins’ across the four strategic themes identified and drawn out in the plan
OUR REVISED STRATEGY MAP

OUR PURPOSE - What we do

Quality care and patient experience at the heart of everything we do

TO BE A CARING AND RESPONSIVE AMBULANCE SERVICE FOR THE PEOPLE OF WALES

Our Ambulance Service offers a breadth of services – clinical assessment (telephone and face-to-face), treatment and, where necessary, conveyance.

Timely and appropriate services where the right skills and resources are directed according to need

OUR VISION - The future

A LEADING AMBULANCE SERVICE PROVIDING THE BEST POSSIBLE CARE THROUGH A SKILLED, PROFESSIONAL AND HEALTHY WORKFORCE

OUR BEHAVIOURS

1. I WILL BE KIND, CARING AND COMPASSIONATE
2. I WILL ACK. AND LISTEN
3. I WILL BE HONEST AND OPEN WITH MYSELF AND OTHERS
4. I WILL BE MY BEST, TOGETHER WE WILL BE BETTER
5. I WILL OWN MY DECISIONS

OUR STRATEGIC AIMS

- QUALITY AT THE HEART OF EVERYTHING WE DO
- VALUE, INNOVATION AND EFFICIENCY
- STRONG PARTNERSHIPS
- DELIVERY OF EXCELLENT PATIENT CARE
- FANTASTIC PEOPLE
- VIVANT LEADERSHIP

OUR PRIORITIES FOR 2018-2021

We will progress our quality improvement journey-implementing all strands of our quality improvement strategy.

We will sustain our red performance whilst delivering further improvements and efficiencies in our clinical contact centres and our amber performance.

We will continue the transformation of our NEPTS service, placing a significant focus on the successful transfer of work from health boards and the implementation of the Quality and Delivery Assurance Framework.

We will deliver patient and system benefits through effective partnerships with Health Boards, our blue light partners, the third sector and the people in Wales. There will be a specific focus on estate, first, joint training opportunities and the continued rollout of the 111 service.

We will continue to develop, re-shape and engage with our workforce. We will place a specific emphasis on implementing and embedding the band 6 paramedic role.
STRATEGIC OVERVIEW – Our Long term Strategy

Progress over the last 12 months:

✓ Established an Executive and Non Executive steering group
✓ Agreed four strategic themes of the strategy (widening our clinical offer, Partnerships, workforce and leadership, embracing technology)
✓ Produced an engagement and discussion document
✓ Run an engagement exercise with our staff, stakeholders and public

Our plan then describes and commits to further work;

✓ Produce an interim framework by March 2018 to undertake further targeted engagement and testing merging views.

Some emerging ‘headline’ strategic ambitions which we want to further test;

*The Parliamentary Review important context*

- 10 recommendations
- Opportunity to influence the NHS Strategy (Team Wales 2 February)
Challenges

- Demand and Capacity review
  - System pressures
  - Relief gap
  - Demand increases
  - Opportunities too!

- Amber performance
  - Impact of system pressures on responsiveness and patient experience
  - Resources to respond

- Clinical risk assurance review
  - 24 Recommendations
Opportunities

- CAD and other new technologies
  - Realising benefits of CAD
  - ePCR – working with national programmes

- Working with primary care
  - Community paramedic schemes
  - HCP Calls
  - 111

- Workforce modernisation
  - Band 6 benefits
  - Advanced practice
  - Career pathways
  - Rotational models

- Collaboration
  - Well Being and Future Generations
  - Joint priorities with LHBs
  - Blue light partners
Our plan continues to commit to building a **clinically-led and quality-driven** organisation to deliver safe and effective care, achieve excellent patient, carer and staff experiences, building robust structures and processes as our foundation to achieve the best outcomes for our patients and staff.

In pursuit of this the plan commits to;

- Commence the implementation of our **Mental Health** improvement plan
- Continue to evolve and implement our **falls** improvement plan
- Continue with the implementation of our **Infection Prevention and Control (IPC)** improvement plan
- Lead the improvements identified following the **Clinical Risk Assurance** review
- Develop our electronic information systems to support our organisational **risk maturity**.
We will continue to strengthen our Quality Governance Structure:

- Implement the revised Risk Management Strategy and Health & Safety improvement plan
- Review our Quality Strategy
- Implement our Dementia Plan
- Develop our Public Health offer – choose well/making every contact count
- Implement the Safeguarding training plan (VAWDASV)
- Embed the model for Improvement (IQT and quality coaches)
We will continue to strengthen our quality assurance & improvement processes:

- Implement recommendations from Clinical Risk Assurance Review
- Implement and evaluate an electronic safeguarding referral solution
- Develop e risk assessments and electronic risk registers
- Align Quality and Performance reporting to inform assurance, learning & improvement embracing the design of an electronic audit tool, Dashboard informing our quality improvement plan and develop our continuous improvement hub
- Focus on learning and improvement from triangulation of quality data/information
- Drive forward the Paramedic and Nursing Career frameworks working in partnership with Health Boards and HEIW, develop our non medical prescribing framework
We will maintain our focus on improving patient experience and outcomes:

- Publish our Annual Quality Statement 2017/18 by

- Continue to develop our work with Children and Young people - embracing the National Participation Standards implementing our Promises

- Embrace the Ageing Well in Wales programme and evaluate our Promises for Older People

- Align our Patient Experience & Community Involvement annual plan to this IMTP, applying the All Wales Framework for User Assurance – across 5 steps and top conditions
EMS and NHS Direct Wales/111

**Step 1:** Develop a Public Health plan / Frequent Callers/111 (in line with Strategic Plan)

**Step 2:** Establish a CAD phase 2 project to realise significant benefits & Hear and Treat

**Step 3:** Develop case for a new patient record solution, Primary Care programme of work (including community Paramedicine schemes)

**Step 4:** Develop a framework to deliver a monitor the clinical effectiveness of the clinical care we provide – telemetry, clinical indicator improvement plan

**Step 5:** Strategic focus on EoL and MH Pathways and timely handover at ED departments

Other key actions relevant to EMS:

- joint priorities agreed with the LHBs across the steps (annex 6)
- Phase 2 CRM - missed opportunities
- Falls improvement
OUR SIGNIFICANT SERVICE CHANGES

NEPTS

Step 1: Work with HBs to increase awareness of other forms of transport

Step 2: Extend online and telephone booking

Step 3: Greater use of technology to co-ordinate and plan journeys

Step 4: Develop a continuous improvement methodology to identify, plan, test and check initiatives which address inefficiencies.

Step 5: Develop innovative ways of gathering patient feedback on their journey to further develop the service

In addition we will:

- progress transfer of NEPTs work from LHB to WAST (in line with business case)
- fully implement the Quality and Delivery Assurance Framework for NEPTS
Our plan continues to recognise that we have more work to do on improving our performance in regards to the amber cohort of calls which we receive.

Within our plan we continue to describe an approach which focuses on the following:

| **Reduce demand**                          | Frequent caller work programme – Link with 1000 lives work  
|                                            | Target HCP calls                                           |
| **Maximise efficiency of all resources**  | Hear and treat rates                                       
| (capacity)                                 | Reduce sickness absence                                    
|                                            | Reduce multiple vehicle allocation                          
|                                            | Reduce post production lost hours including MRDs, meal     
|                                            | break policy, Standby points                               
|                                            | Reduce hand over delays                                    
|                                            | Convert variable pay to FTEs                               
|                                            | Link more effectively with LHB resources (alternative      
|                                            | services to be dispatched (missed opportunities work)      
|                                            | pathways for direct admission                               
|                                            | Realise benefits from CAD                                   |
| **Match capacity to demand**              | Roster reviews                                             
|                                            | Resource function improvement                               
|                                            | Deploy dynamic modelling                                    
|                                            | Pathways for direct admission or admission to non hospital 
|                                            | services                                                   
|                                            | Falls Improvement Plan                                     |
Our Enablers

Our People
Identifying the Workforce required to deliver safe and high quality, effective services with profiled levels of turnover for each role, taking action to close the (modelled) relief capacity gap

Robust forward workforce planning and education commissioning of future paramedics and advanced practitioners

Actions required to deliver our Tier 1 workforce targets (i.e. sickness, PADR, Statutory and Mandatory Training, CPD and Staff Engagement index)

A continued focus on Equality, Diversity and Treating People Fairly (i.e. ensuring actions to improve diversity and inclusion)

Continued action to ensure timely and effective recruitment plans are in place and processes are efficient to ensure the right calibre of staff, with the appropriate qualifications, skills, experience, competencies and personal qualities to meet current and future requirements

Improving Employee Experience and Wellbeing, with a focus on Mental Health and reducing Musculo Skeletal Disorders
Let's remind ourselves of what we have achieved so far ....

- Our current vacancy rates run at less than 4% for the EMS workforce. Increase in the number of staff and production hours available to our Health Board operational teams and a consequent reduction in the need for overtime as a result of better workforce planning and timely recruitment.

- Successfully negotiated and implemented a Band 6 role for paramedics living and working in Wales.

- Introduced a pilot for Advanced / Community Paramedics in Cwm Taf and Betsi Cadwalader, with interest from other Health Board areas, as part of the career pathway development; introduced EMT 3 role.

- We have developed and begun to engage on a vision for the future of NATC, and trialled a Local Learning Cell in Aneurin Bevan as part of this development.

- Strengthened positive, collaborative working with Swansea University colleagues.

- Continued our development work on Apprenticeships, with the introduction of Fleet apprenticeships and creation of a new NEPTS Control Apprenticeship.

- Delivery of *Treating People Fairly* which was enhanced by Trust Board approval of our WRES action plan. We were also the first Welsh NHS organisation to be accepted onto the NHS Employers Diversity & Inclusion Partners Programme 2017/18.

- Board and EMT Development Plans, Directorate Senior Teams, and specific groups/teams - including the QPSE Directorate, CCC teams and the NEPTs Senior Team; Delivered the first 6 cohorts of the Team Leader Programme.

- Staff Awards programme delivered a highly successful Learning and Celebration Day in June 2017 and Awards Evening in October 2017. The programme attracted significant sponsorship.

- Increased the quality and amount of the wellbeing support specifically mental wellbeing; this has included roll out of TRIM, launch of Wellbeing Advocates Network, creation of Strategic HWB Steering group.

- Achievement of the Corporate Health Standard Gold in December 2017.
Effective Workforce Planning – Key Assumptions / Considerations

**Ambulance Response**
- Prioritise action required to close the ‘Relief Gap’
- Skill mix implications of the EMT3 role, and maximisation of Band 6 benefits framework
- Advanced Practitioner / Community Paramedic Scale-Up
- Ensure timely recruitment to UCS and EMT courses to ensure adequate supply

**Clinical Contact Centres**
- Investment into Hear & Treat and Clinical Desk in 2017/18 accounted for
- Expansion of 111/ NHSDW with roll-out

**NEPTS**
- No increase assumed for NETPS staff however subject to CTA and vol sector having sufficient capacity and no additional demand is exposed as part of the transfer of work process.

**Corporate Services**
- Impact of Medical Directorate and Operations Directorate structures in 2017/18
- Investment in Mental Health Improvement Plan; spend to save investment in OH/wellbeing
- Review of administrative resource; future configuration of corporate services operating model
Effective Workforce Planning – Education Commissioning Decisions

**Paramedic**
- Projected turnover and mapped existing student cohorts and EMT 2 Para Conversions into profile
- Projected vacancy requirement averages approximately 50 WTE year on year
- Current skill mix balance of EMT:Paramedic (includes impact to date of creation of EMT3) is 40:60 – which is ‘on target’ (need to test the data against reality - how does it feel)
- At present no account of impact of developments such as roll out of AP (which could see paramedics with AP qualifications appointed) or closure of relief gap (mostly EMT)
- Proposal to continue to commission Diploma students at current levels – **up to 50 places**
- Opportunity to increase supply via additional internal EMT2 to Para conversion
- Continue local discussions with SU re future commissioning of degree paramedics

**Advanced Practitioners**
- Existing establishment of Advanced Practitioners has changed – investment into clinical leadership structure
- Decision to prioritise core EMS workforce and close relief gap – any additional investment in rolling out AP / Community Paramedic role subject to HB funding
- Funded training places for Advanced Practitioner average approx. 7 WTE next 3 years
- Unknown number of existing staff also AP qualified
- Positive evaluation of BCU model and high levels of interest from HBs – we need to be ready to respond
- Proposal to increase commissioned places – **up to 15 places** to start Sept 2018 – complete 2021
Create a Hub and Spoke model centred around the development of three equitable Ambulance Academies, supported by Local Learning Cells, with agreement for training facilities to be included in all future operational estates developments.

- North Wales – Potential at Unit 7
- Central & West – opportunities with Swansea Uni, Llanelli Delta Lakes Dev’t, Dyfed Powys Policy
- South East – to be determined
Our ambition to further improve staff experience and achieve 60%+ in the planned 2018 Staff Survey

- Improve opportunity for clinical reflection and practice development and real time, quality feedback systems
- Maintaining continued visible, vibrant and compassionate leadership at Executive and Senior Management
- Design of a leadership development programme for middle and senior managers proposal
- Continued development and implementation of the Staff Awards and Recognition programme
- Continue to enhance relationships with TU partners

- Delivering *Treating People Fairly* through the reinvigoration of our LGBT and BAME networks; collaborative research with Swansea University on barriers to BAME students and why they often don’t think/choose Paramedicine as a career.
- A continued focus on maintaining good mental health and wellbeing, through increased support for self care, improved resilience and roll out of TRiM
- A focus on maintaining good physical health, reducing the incidence of violence and aggression faced by our staff, and action to reduce the incidence of manual handling injuries, creating safer work places
- Implementation of a robust Flu Programme
- Overall planning for achievement of the Corporate Health Standard Platinum by 2020/21
Our Strategic Actions

- We will agree with our Commissioners a clear and measurable benefits realisation plan for the Band 6 paramedic role and investment, linked to the Ambulance Care Pathway and AQIs.
- We will benchmark and review our corporate and support services structure and operating model for the future.
- We will develop a Volunteering Strategy that will ensure we understand, value and maximise the important contribution that volunteers can and will make to our services in future.
- We will develop an overarching Education Strategy by the end of 2018/19, that will enable us to ensure all staff receive the highest quality education and training to deliver their roles effectively; expanding our apprenticeship opportunities will be key.
- We will continue to develop and engage on our vision for 3 equitable Ambulance Academies and develop a clear business plan in early 2018 for consultation and implementation, subject to identified funding.
- To deliver the commitments within our WRES Action Plan, specifically designed to address reported inequalities within the Ambulance sector, and to improve the experience of underrepresented black, Asian and minority ethnic (BAME) staff.
- We will enhance and strengthen our Occupational Health & Wellbeing Services; with a focus on further improving access to mental health and musculo-skeletal services for staff.
Our Enablers

Finance
Key changes from 2017-18 plan

**Income**

Changes in income :-

- Inflation uplift @ 2% = £3.4m
- Band 6 funding £3.6m
- Clinical Desk & ESMCP £1.2m
- Increase in 111 funding £2.8m
- Increased Depreciation funding £2.2
- Reduction in ARRP income £1.7m

Total increase in income **£11.5m**

**Expenditure**

Changes in costs:-

- Pay inflation £2.4m
- Non-pay inflation & statutory costs £1.4m
- Reverse non-recurring savings £0.2m
- Underlying cost pressures £1.9m
- Band 6 costs £3.6m
- Clinical desk & ESMCP £1.2m
- Increase in 111 funding £2.8m
- Increase in Depreciation £2.2m

Total increase in expenditure **£15.7m**
Net change:-

Additional Income £11.5m
Less
Additional costs £15.7m

= Financial Gap / savings requirement of £4.2m (2.5%)

Current plan assumes savings of :

• Additional local schemes / benefits £200k
• Utilities & Estates £300k
• Further reduction of overtime / private providers £100k
• Contain non-pay inflation £500k
• Ops Skill mix (20 wte x difference in costs) £200k
• Contain inflation & Statutory costs £400k
• Further reduction of sickness £80k
• Management of non-operational vacancies £300k
• Fleet efficiencies £200k

Total £2.4m

Remaining Gap = £1.8m
Cumulative savings delivery
2015-16 to 2018-19

Cumulative savings 2015-16 to 2018-19

- Recurring 2017-18
- Recurring 2016-17
- Non recurring
- Recurring 2015-16

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Cumulative savings delivery against target @ 31st December 2017
Savings delivery by theme
1st April - 31st December 2017

- Variable pay and external providers
- NEPTS
- Management of non-operational vacancies
- Estates and utilities
- Maximise income generation
- Fleet efficiencies
- Reduce travel costs
- Efficiencies within ICT
- Concumables / Drugs / medical gases
- Local schemes

Savings delivered
Underachievement
Target £m
Assumptions within the plan

• That NHS pay awards remain capped at 1%.

• That current pay terms and conditions, particularly in relation to the payment of enhancements on Sick Pay, remain in place beyond 31st March 2018.

• That the impact of changes in the NHS employers pension discount rate due to be introduced in 2019/20 will be fully funded (£1.4m for WAST).

• That depreciation funding to support future capital investment will be made available as required.

• That the impact of significant service change (across NHS Wales) will be fully funded (e.g. PON)

• That additional investment will be required to support developments such as Community Paramedics.
Other critical enablers – An Overview

**Estate**
- Progress the move away from HM Stanley to Unit 7, St Asaph Business Park
- Rationalise the Swansea administrative accommodation
- Deliver an OBC for the Cardiff ARC (subject to suitable site identification)

**Fleet**
- Implement the recommendations outlined in the fleet strategic outline programme.

**ICT**
- Work with NWIS and other partner organisations on the development of clinical information sharing arrangements

**Informatics**
- Expand our robust information framework with the appropriate governance, to allow our stakeholders to get the information they require, in a timely manner and to make the most effective decisions

**R&D, Innovation**
- We will develop and implement over the life of this plan an Innovation & Continuous Improvement Framework.

**Engagement**
- Continue to pursue the agile working model through the use of staff mobile devices.
We made three major commitments in last year’s plan;

- Review and update the Trust’s National Estate Strategy 2013
- Commence the process of establishing the organisation’s next Ambulance Resource Centre (ARC) in Cardiff.
- Relocate the organisation’s northern administrative centre from its current site at HM Stanley, St Asaph.

✅ We have successfully produced a SOP which has been endorsed by Welsh Government.
✅ We have significantly progressed our move from HM Stanley to another site on the St Asaph Business Park.

For 2018/19 we will;

**Progress the move away from HM Stanley to Unit 7, St Asaph Business Park**

- Work continues at pace through 2017/18 with anticipated acquisition by the end of the financial year with planned development in 2018/19.

**Relocate the organisation’s regional Central and West administrative and training centre at Cefn Coed Hospital, Swansea.**

- A land and property search has been undertaken working being progressed to evaluate options within the Swansea area, including an option to co-locate at the ABMU HQ facility.

**Development of an Ambulance Resource Centre in Cardiff.**

- Bring to Trust Board an OBC by the spring of 2018
2018/19 focus for Health Informatics

- Introduction of Qlik reporting solution that provides enhanced intelligence to our decision makers.
- Continue to rollout a suite of mobile applications to support the Trust’s requirements as part of local delivery plans;
- Further support the information requirements of the National 111 rollout.
- Continue to provide and develop the requirements arising from the Emergency Ambulance Services Commissioner and develop the Non-Emergency Patient Transport Commissioning suite of information.
- Compliance to the General Data Protection Regulation (GDPR), as we transition from the UK Data Protection Act (DPA)
- Develop a Records Management programme that ensures clinical and corporate records are retained, archived and disposed of in accordance with guidance given by the Department of Health.
- Supporting the development of the Trust’s long term digital innovation and transformation programme
- Supporting the development and introduction of Phase 2 of the CAD (Computer Aided Dispatch) programme.
Information for you
✓ We will continue to work with the National programmes around electronic patient access.
✓ We will continue to work with our colleagues in non-emergency patient facing departments such as NEPTS and NHSDW to implement opportunities for patients to access services electronically and in doing so reduce demand on staff.

Improvement & Innovation
✓ Within health we will work with NWIS and national programmes to provide two way exchange of information.
✓ We will also look at opportunities to transfer information across Emergency Services to improve incident response.

Supporting Professionals
✓ We will work with corporate departments and programmes within the Trust to improve or replace operational information systems Seven key priority areas will be:
  o continue with the phase 2 implementation of the new CAD,
  o continued preparation and mobilisation for the replacement of Airwave services through the national ESMCP and ARP programmes.
  o continued operation and support for the national 111 pathfinder
  o support the working group to define the trust requirement for ePCR capability.
  o review the benefits of mobile device pilot for staff, and continue to build capability with access to more Trust systems. Build a robust case to secure required funding (capital and revenue) to extend the solution to all operational staff.
  o continue to work with NWIS to provide access to clinical staff to National information resources.
  o support NEPTS with systems requirements and improvements

Planned
✓ We will continue with a programme to improve and enhance the ICT infrastructure to provide a basis to support the implementation of new systems and solutions including the greater use of mobile and remote working technologies.
✓ Ensure ICT staff are given the appropriate skills to ensure they are equipped to play their part in supporting future developments.
- 2018/19 plan contains 44 strategic actions.
- Combination of actions that have rolled over / redefined / new actions
- Existing delivery arrangements will continue with the IMTP Delivery and Assurance Group (IDAG) meeting monthly to scrutinise and challenge progress.
- This delivery mechanism was audited in November 2017 and it was noted as having a high level of assurance.
- A new strategic action developed for this year includes the development of a Project and Programme Management Framework to recognise the large and complex amount for project work which is going to be required over the life of this plan and beyond.
Reviewed our performance ambitions against:

- Performance against the 2017/18 ambitions;
- Performance issues identified as a result of the overview of performance (and supporting detail);
- Quality, Safety and Patient Experience information
- The EMS commissioning intentions;
- The NEPTS business case;
- 17/18 strategic actions carried forward to 18/19;
- The IMTP C1 Delivery Template;
- The Welsh Government NHS Planning Domain indicators; and
- The WAST JET Scorecard

Hard copies available

We will look to further refine these and map explicitly to Strategic Actions
NEXT STEPS

- FRC presentation 25 Jan
- WASPT 29 Jan
- EASC 29 Jan
- Board 30 Jan
- Welsh Government submission 30 Jan
- Welsh Government Feedback early February
- Response to feedback Feb – March
- Final plan submission end of March