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Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

Integrated Medium Term Plan 2022/25

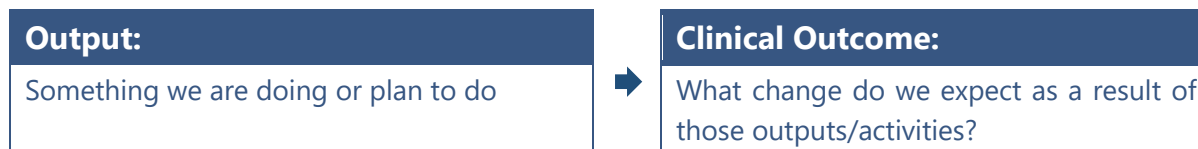
Appendix 6 Logic models



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Appendix 6: Logic models

The use of Logic models is important to connect the **outputs** of this IMTP to the clinical **outcomes** that we expect to see as a result.



The IMTP refers, broadly, to pieces of work that create activity output. The reason for this is because it is much easier, within healthcare settings, to quickly evaluate progress against outputs of work. We can chart out timescales for when pieces of work will be complete, programme manage the process and then report progress very easily.

The problem with that approach is that doing things doesn't necessarily improve clinical outcomes, and the goal we value the most is to be able to improve those clinical outcomes. The reason that we don't just focus upon reporting these clinical outcomes is because some outcomes are difficult to count, and because it can take quite a long time to see improvement in some clinical outcomes after something has been improved or changed.

Therefore, if we are to monitor our progress against the activities contained within our IMTP plan, they must clearly link to improvements in clinical outcomes that we are confident will follow. This is the role of logic diagrams.

As an example of the difficulty we would face if we did not monitor outputs, and only monitored clinical outcomes, is in the field of smoking cessation. The clinical evidence linking smoking with a range of serious illnesses is clear and undisputed. Reducing the amount of smoking in our communities will reduce the prevalence of those serious illnesses in our communities but for some of those clinical outcomes it can take several years before we can spot a statistically significant difference (for example death from lung cancer). Instead we can monitor, how many people use NHS accredited smoking cessation services, and who report they have still quit after 12 weeks as we know this is linked to long-term non-smoking which is then linked to a reduction in smoking related disease.

In this example, we would monitor the success of implementing or expanding a smoking cessation service by counting the capacity of appointments we have, the number of staff trained to deliver the most successful interventions for long-term quitting, and the number of successful contacts/quit rates, because we can see improvements quickly and intervene when they are not as good as we had planned, and knowing that in the coming years the improvement in clinical outcome would be seen.

Outputs:	Number of smoking cessation appointments available Number of smoking cessation professionals fully trained with the latest techniques Number of smoking cessation service users who report they have still quit at 12 weeks
Outcomes:	Reduction in deaths from lung cancer Reduction in life limiting heart disease,

a.2022.1 - Care Home support

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Finalised a Quality Assurance Framework meeting the needs of BCU and our 6 LA partners (already commenced in partnership).</p>	<p>Improved care, assured against an evidence based quality framework, in those care homes in which the QAF has been deployed to.</p>	<p>Improved care, assured against an evidence based quality framework, in all north Wales care homes.</p> <p>Reduction in BCU care home interventions as a result of concerns or complaints.</p> <p>Reduction in inappropriate hospital conveyances.</p>	<p>Reduction in care home failures/closures as a result of quality.</p> <p>Reduction in CHC costs, as a result of efficient delivery of person-centred packages of care.</p>

a.2022.2 - Conwy Integrated Health & Social Care facility

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Multi-year partnership between Conwy County Borough Council (CCBC), Betsi Cadwaladr University Board (BCUHB) and Grwp Llandrillo Menai (GLLM) to create</p> <ul style="list-style-type: none"> • Extra Care Housing Apartments • Multi Agency Office/Clinic Space • Training and development suite • Intermediate care facility 	<p>Bespoke local provision to meet the needs of a range of adults in alternative settings to long-term care home placements.</p> <p>Improved learning experiences for community care workers.</p>	<p>An integrated Health & Social care facility in Conwy.</p> <p>Greater opportunity for staff from all partner organisations to learn from each other through integrated working, leading to more flexible and responsive care to local service users.</p>	<p>Increased quality of life and independence, resulting from high quality reablement provided at the time of need.</p> <p>Reduction in avoidable long-term care packages.</p>

a.2022.3 - Continuing Healthcare infrastructure

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Implement year 3 of the care homes fee rebasing programme.</p> <p>At least 75% of care homes having signed pre-placement agreement, and with open book accounting in place.</p> <p>Full implementation of the CHC framework.</p>	<p>Improved stability of local care homes.</p>	<p>Ability to intervene more flexibly in support of care homes that are struggling financially.</p> <p>Increased placement flexibilities.</p> <p>More timely placements.</p>	<p>Reduction in care home failures as a result of financial instability.</p> <p>Increased delivery of the CHC framework, reported against nationally agreed KPIs.</p>

a.2022.4 - Covid vaccination and Test, Trace and Protect (TTP)

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Continued delivery of third and booster vaccination programme and offer of vaccination to those who have not previously taken up the offer.</p> <p>Development of a sustainable model of Covid-19 vaccination delivery.</p> <p>Staff and locations are secured for delivery of the ongoing vaccination programme.</p>	<p>People know where to get vaccinated and can access the vaccination offer.</p> <p>Target take-up rates for vaccination for the cohort groups are achieved.</p>	<p>Immunity levels are sustained within the population.</p> <p>More individuals are protected from severe harm and hospitalisation and deaths.</p> <p>Reduced staff unavailability in health and social care.</p>	<p>Resilience to Covid-19 within the community and reduction in the wider harms caused by Covid-19.</p>

a.2022.5 - Digitisation of Welsh Nursing Care Record

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>A digital nursing system that replaces paper nursing documentation within adult secondary care settings and community hospitals.</p> <p>Implementation of mobile devices using the WNCR in East.</p> <p>Implementation of mobile devices using the WNCR in Centre.</p>	<p>In East and Centre:</p> <p>Increased accessibility of records.</p> <p>More timely navigation of records due to standardisation and legibility.</p> <p>System learning from East to Centre, and from East/Centre to West when rollout there progresses.</p>	<p>Improve patient safety during admission.</p> <p>Contributes to a single cohesive view of a patient's digital health record, allowing efficiency and reduction in duplication across the system.</p> <p>Releasing time to care.</p>	<p>Reduction in delays or errors due to missing, illegible, or mis-filed records.</p> <p>Reduction in delays due to notes being available in more than one place simultaneously.</p> <p>Improvements in decarbonisation.</p>

a.2022.6 - Eye Care

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Implement National Intravitreal Treatment (IVT)/Age Related Macular Degeneration (AMD) Pathway.</p> <p>Implement rolling delivery of Open Eyes All Wales Digital system.</p> <p>Local planning group in place to support Integrated Eye Pathways arising from National Optometric Contractual reform.</p>	<p>People receive appropriate access to on-going care and management of their eye condition.</p>	<p>People are seen within the primary and community setting, where it is clinically appropriate.</p> <p>Local eye care, hospital eye care and support services are all joined up.</p> <p>More optometry practices providing the full range of extended eye care services in the community.</p>	<p>People are satisfied with the care they receive at their local optometry practice.</p> <p>People are satisfied with the care they receive when they visit the hospital eye service.</p> <p>Reduced inequalities in access to optometry services.</p>

a.2022.7 - Further development of The Academy

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Expand offer to 12 training / student placements in Academy Training Hubs.</p> <p>Appoint 8 x supernumerary trainee posts in General Practice.</p> <p>Increase the uptake of apprenticeships in primary care with up to 6 apprentices.</p> <p>Provide opportunities for reflective practice for at least 16 new Advanced Clinical Practitioners in primary care & community settings.</p> <p>Build upon the exposure the Academy is receiving nationally, and the positive impact this will have upon recruitment, by ensuring at least 4 Academic posters are accepted in national conferences.</p>	<p>Greater generic knowledge in workforce wherever student ultimately ends, to benefit of patients being consulted.</p> <p>More interest from professionals to train and stay working in Primary Care settings.</p> <p>Wider range of professionals able to support patients with complex primary care presentations.</p> <p>Greater awareness outside of north Wales of rich training, academic and employment opportunities in Primary Care in BCU, resulting in an increase in applicants from forward thinking healthcare practitioners.</p>	<p>Greater working knowledge of the whole system.</p> <p>Greater number of patients being well cared for in primary care settings, reducing patient inconvenience, reducing pressure upon secondary settings, and reducing medical-related harm.</p> <p>Increased recruitment from outside of north Wales.</p> <p>Increased reputation and confidence in BCU for delivering high quality, innovative, care.</p>	<p>Less over-medicalisation of care.</p> <p>Greater skill set and focus upon 'social medicine', supporting a left shift of care in line with 'A Healthier Wales'.</p> <p>Reduction in chronic disease burden and increase in disability free life.</p> <p>Strong academic focus in the development of healthcare practice, with outcomes in north Wales being amongst the very best.</p>

a.2022.8 - Health & Safety Statutory Compliance

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Trial of e-learning training package for IOSH managing safely competed.</p> <p>70% of staff at Band 8d and above to be trained.</p> <p>Develop the Fit Testing Programme to achieve Fit2Fit accredited status.</p>	<p>Staff awareness of health and safety in the workforce is improved.</p> <p>Staff can easily apply health and safety training in their daily working practice.</p> <p>Systems are implemented across the Health Board to ensure staff are safe at work.</p>	<p>Improved levels of compliance against statutory Health and Safety requirements.</p> <p>A pro-security culture is adopted across the Health Board.</p> <p>Improved organisational management of risks relating to water safety, medical gas pipeline systems, and electrical safety.</p>	<p>Reduced BCUHB exposure to potential prosecution/ litigation by external regulators.</p> <p>BCUHB staff feel safer at work.</p> <p>Assurance Audits report positive improvement in health and safety statutory compliance in operational estates.</p>

a.2022.9 - Home First Bureaus

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Development of consistent and standardised model for Home First Bureaus in place, available 8am – 8pm seven days a week.</p>	<p>Increase in the number of people returning to their own home following a hospital admission.</p> <p>Increased number of assessments outside of a hospital setting, leading to a more accurate assessment of need and ability, as well as leading to shorter lengths of stay.</p>	<p>Increased numbers of people who receive care closer to home.</p> <p>Reduction in hospital re-admission rate.</p> <p>Improved outcomes for people, because of spending less time in an acute hospital bed.</p> <p>Assessments undertaken in people’s own home/ homely environment will reduce the numbers of people entering long-term care.</p> <p>Sustainable model across north Wales in place to maintain the ‘Home First’ principles.</p>	<p>Reduction in over-prescription of statutory services “to be on the safe side”.</p> <p>Stronger inter-professional and partnership working through health, social care, housing, community, third and independent sectors.</p> <p>People are enabled to live independently within their own homes and communities for longer.</p>

a.2022.10 - Implementation of Audiology pathway

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Access to advanced practice audiology as first point of contact in primary care - increased to 50% of BCU area.</p> <p>Access to advanced practice audiology as first point of contact in primary care - increased to 75% of BCU area.</p>	<p>Greater and quicker access to audiology led care for hearing loss, resulting in</p> <ul style="list-style-type: none"> • increase in positive interventions to manage hearing loss • quicker intervention to manage hearing loss • less unwarranted use of antibiotics <p>Greater and quicker access to audiology led care for ear wax management, resulting in</p> <ul style="list-style-type: none"> • quicker management of avoidable hearing loss • less ear perforation, scarring 	<p>Reduction in unnecessary hospital clinic referrals.</p> <p>Less untreated hearing loss in the community, and the associated social isolation that results.</p> <p>Greater confidence in consulting non-medical advanced practitioners more generally, allowing greater breadth and speed of consultation opportunity.</p>	<p>Reduction in falls arising from ear-related balance issues/hearing loss.</p>

a.2022.11 - Improving minimal access surgery in gynaecology and north Wales specialist endometriosis care

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Align service with the proposal for the development of Regional Treatment Centres.</p> <p>Designate local clinical leads for Endometriosis.</p> <p>Endometriosis leads and additional designated Gynaecologists to commence ATSM training in Endometriosis.</p>	<p>Ability to provide more advanced gynaecology treatment – including for endometriosis – in north Wales, and to a high standard. This means less patients will have to travel for specialist treatment.</p>	<p>Ability to provide greater levels of minimal access surgery in north Wales, resulting in less patients enduring the complications and morbidity of open abdominal/pelvic surgery.</p>	<p>More sustainable gynaecology service in north Wales due to being more attractive to potential recruits, with the opportunity to provide high-throughput specialist interventions in 'centre of excellence' environments. This will support sustainable access to gynaecology care in north Wales.</p>

a.2022.12 - Long Covid

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Successful roll out delivery of interim service model to Central Area (completed in West and East during 2021/22).</p> <p>Agreement of a 'multi-morbidity model' for the service, built upon learning from the interim model and with the support of the Lived Experience Reference Group.</p> <p>Phased introduction of multi-morbidity model commenced.</p>	<p>Treatment for Long Covid available more locally, reducing the number of patients having to travel.</p> <p>Greater access to tailored support to meet individual needs.</p>	<p>Breadth of professional skill mix required to meet the highest standards achievable.</p> <p>Improved satisfaction arising from the greater use of 'patient experience'.</p>	<p>Fewer long-term complications of long-covid.</p> <p>More equitable access to support.</p> <p>Greater confidence in BCU as a listening organisation.</p>

a.2022.13 – Lymphoedema

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>A rolling programme of 'on the ground' education (OGEP) using the Agored model to enable the effective and prompt management of chronic oedema, leaking 'wet legs and superficial wounds.</p> <p>Permanently recruit to seconded posts.</p> <p>90% of relevant staff in an identified community area will complete training programme.</p> <p>90% of those with chronic oedema/lower leg ulceration/wet legs will be assessed using OGEP.</p>	<p>Improved, transferrable knowledge amongst professionals completing OGEP.</p> <p>Improved well-being support for individuals, their families, and carers.</p> <p>Patients receive high quality healthcare from a skilled and confident community nursing workforce.</p>		<p>Improved treatment delivery resulting in improved mobility and quality of life.</p> <p>Improved patient experience of service delivery.</p> <p>Reduced waste, harm, and variation in prescribed treatments, including but not limited to, inappropriate antibiotic use.</p> <p>All community and practice nurses can competently and effectively manage people with chronic oedema and 'wet legs'.</p>

a.2022.14 - Mental Health Improvement scheme - AISB Joint Commissioning

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Joint approach to commissioning health and wellbeing services for local population via community localities.</p> <p>Driven through the respective AISBs with a focus on addressing the physical health and mental health of the local population, clearly looking to address prevention and crisis management, and to support care homes.</p> <p>Continuation of support in I-CAN Hubs and expansion into rural outreach I-CAN work to ensure sufficient coverage in vulnerable areas.</p>	<p>Effective joint planning for the provision of services & joint approach to commissioning health and wellbeing services for local population via community localities and will also align to closer working with Community Mental Health Teams.</p> <p>Short-term intensive support available to help individuals experiencing mental health.</p> <p>Delivery of prevention activities related to mental health and wellbeing and early intervention.</p>	<p>Increased opportunities for community-based information provision, sign posting and public awareness raising.</p> <p>People have access to the right staff in the right place, at the right time.</p>	<p>People are supported by a sustainable health and social care partnership.</p>

a.2022.15 - Mental Health Improvement scheme - CAMHS Training and Recruitment

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Recruitment of Nurse Prescriber posts.</p> <p>Induction and local training for Nurse Prescriber posts and production of job plans aligned with service need.</p> <p>Recruitment of two Higher Specialist trainee posts.</p>	<p>Increased Psychiatry and prescribing provision will improve waiting times for children, young people and their families and ensure that they have access to appropriate clinicians as required and necessary medication.</p> <p>Provision of timely medication will support children and young people not to escalate into crisis thus required increased input form CAMHS services.</p>	<p>Increased consistency in the early intervention and prevention offer.</p> <p>Staff in health, education, social care and third sector across North Wales are supported to develop specific skills and competencies in delivering consultation and training.</p>	<p>Children, young people, and their families have access to early help and emotional support when they need it the most, in ways that are appropriate to their need, to build and create resilience and self-reliance.</p> <p>Children and young people have effective and timely transitions into adult services.</p>

a.2022.16 - Mental Health Improvement scheme - CAMHS Transition and Joint working

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Appointment of transition/joint working youth worker and HCSW for each area.</p> <p>Implementation of pathway for young people in out of area beds requiring transition to AMH inpatient care.</p> <p>Ongoing use of the transition pathway and audit tool.</p>	<p>Consistent equity of access to services across North Wales and provide opportunity for peer support and the sharing of best practice.</p>	<p>Children, young people, and their families have access to early help and emotional support when they need it the most, in ways that are appropriate to their need, to build and create resilience and self-reliance.</p>	<p>The mental health and wellbeing of the whole population is improved.</p> <p>Children and young people have effective and timely transitions into adult services.</p>

a.2022.17 - Mental Health Improvement scheme - Early Intervention in Psychosis

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Provide an early intervention service for people with a first episode of psychosis, supporting education, employment, and life choices.</p> <p>The service will be set up in two phases to manage the scale of the task to be undertaken safely and measurably. Phase 1 recruitment will be the service wide roles and the East team, Phase 2 will recruit the central and West team and align to the service design.</p>	<p>Enhancing Multi-Disciplinary Team means experienced staff will be more available to support families experiencing first episodes of psychosis.</p>	<p>People have access to services that are focussed on recovery and an asset-based approach.</p> <p>People experience less stigma and can talk more openly about mental health.</p>	<p>People have access to high quality early intervention and prevention treatment to recover from Mental Health illnesses.</p>

a.2022.18 - Mental Health Improvement scheme - Eating Disorders Service development

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>New eating disorder teams to facilitate medical and psychiatric admissions for eating disorder patients, ensuring all cases presenting are reviewed within set timescales by the specialised team.</p>	<p>Improved access to early intervention and treatment for patients with eating disorders.</p>	<p>People have access to services that are focussed on recovery and an asset-based approach.</p> <p>People experience less stigma and can talk more openly about mental health.</p>	<p>People have access to high quality early intervention and prevention treatment in order to recover from Mental Health illnesses.</p> <p>Evidence of improved outcomes for people with Eating Disorders.</p>

a.2022.19 - Mental Health Improvement scheme - ICAN Primary Care

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Roll out of cluster based ICAN Practitioners providing real alternatives to avoidable medicalisation.</p> <p>Develop alternative pathways for people experiencing a mental health crisis, with quicker access to support from specially trained staff.</p>	<p>More flexible service available for individuals in crisis, based on individual and cluster need, working with community resources.</p> <p>More interventions focused upon prevention.</p> <p>A safe, out of hours alternative to A&E offering a welcoming, non-judgmental, and non-clinical environment, without the need for a referral, through a 'Sanctuary' or 'Safe Haven' type model of support.</p>	<p>People have accessible help at the right time in crisis (24/7).</p> <p>People in crisis have access to a timely response for assessment and onward treatment.</p>	<p>People have access to high quality early intervention and prevention treatment in order to recover from Mental Health illnesses.</p> <p>The impact of mental health problems and/or mental illness on individuals of all ages, their families and carers, communities, and the economy more widely, is better recognised and reduced.</p>

a.2022. 20 - Mental Health Improvement scheme - Medicines Management support

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>To provide dedicated medicines management across the division including inpatient units and CMHTs.</p> <p>Develop medicines management pathways and pharmacy requirements including role re-design.</p> <p>Provide Area mental health pharmacy teams to support patients and staff in the community.</p>	<p>Access to timely medication advice and medication prescribing with a fully trained pharmacy technician.</p> <p>Increase in medicines concordance.</p>	<p>Individuals understand their medications and can make informed choices.</p>	<p>The values, attitudes and skills of staff treating or supporting individuals of all ages with mental health problems or mental illness is improved.</p>

a.2022.21 - Mental Health Improvement scheme - Neurodevelopment recovery

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Identifying/scoping workforce requirements, developing business cases and plan recruitment.</p> <p>To develop a new tender for interventions.</p>	<p>A consistent approach with early intervention and post diagnostic interventions will support families and other settings in managing young people with neuro-diverse presentations.</p> <p>With the introduction of the Additional Learning Needs (ALN Act) there is a requirement on services to ensure there is full support for children and young people within educational settings.</p>	<p>Children and their families have access to early help and emotional support when they need it the most, in ways that are appropriate to their need, to build and create resilience and self-reliance.</p>	<p>Children and infants have access to high quality early intervention and prevention treatment in order to recover from Mental Health illnesses.</p>

a.2022.23 - Mental Health Improvement scheme - Older Persons Crisis Care

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Development of Crisis care support for older adults (over 70) with an acute mental illness, people of any age living with dementia and to provide on-going specialist occupational therapy support to community care settings.</p> <p>Implement revised OPMH / Dementia proposed model of care through project team, including development and communication of clear admission criteria to system partners that responds effectively to episodes of acute mental health needs and crisis (24/7).</p>	<p>Alternative pathways for people experiencing a mental health crisis that can work into the community and care home setting to proactively prevent hospital admissions.</p> <p>A more integrated, innovative care system and culture which prevents, but where necessary, responds effectively to episodes of acute mental health need and crisis.</p>	<p>People in crisis have access to a timely response for assessment and onward treatment.</p> <p>People have accessible help at the right time in crisis (24/7).</p> <p>Improve overall impact on avoidable hospital admissions due to crisis against 2019/20 baseline.</p>	<p>People have access to high quality early intervention and prevention treatment to recover from Mental Health illnesses.</p> <p>The impact of mental health problems and/or mental illness on individuals of all ages, their families and carers, communities, and the economy more widely, is better recognised and reduced.</p>

a.2022.24 - Mental Health Improvement scheme - Perinatal Mental Health Services

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Complete recruitment of specialist roles to the team.</p> <p>Complete necessary training for all disciplines including Cognitive behavioural treatment and Compassion focus therapy training.</p> <p>Fully Operational Perinatal Mental Health Team and Service Delivery, meeting the Royal College of Psychiatrists CCQI Perinatal standards.</p>	<p>Broader experience, and focus upon Perinatal Mental Health Services will improve overall understanding, and more timely intervention.</p>	<p>Interventions will be delivered using the most effective, skilled interventions, resulting in the best quality outcomes for mothers and babies.</p>	<p>Good perinatal mental health service support will give families the best start, which in turn supports infants and children to receive improved 'early year' experiences.</p>

a.2022.25 - Mental Health Improvement scheme - Psychiatric Liaison Services

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Appropriate and consistent psychiatric liaison response across North Wales. Further development of pathways & workforce and improve patient experience.</p> <p>Additional liaison workforce to target recurrent admissions (to provide the right interventions at the right time).</p> <p>Implement revised pathway of care to assertively target recurrent Mental Health admissions within A&E.</p>	<p>Stabilised current team providing consistent psychiatric liaison response across A&E departments in North Wales.</p> <p>Improved interventions and improved outcomes of the service that sees a reduction in Liaison Psychiatry Emergency Department Assessment breaches over 4 hours and reduction in avoidable hospital admissions through A&E.</p>	<p>People have access to services that are focussed on recovery and an asset-based approach.</p> <p>People experience less stigma and can talk more openly about mental health.</p>	<p>People have access to high quality early intervention and prevention treatment in order to recover from Mental Health illnesses.</p>

a.2022.27 - North Wales Medical & Health Sciences School

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Board support of a co-designed ambitious proposal for a school which is fully aligned to our other strategies and plans.</p> <p>Successful admissions to increased student numbers.</p> <p>Stage 2 of GMC Accreditation.</p>	<p>Greater number of students studying medicine in north Wales, contributing to a rich learning environment across the healthcare system.</p>	<p>Increased numbers of students remaining in north Wales as young medical graduates.</p>	<p>Increased numbers of doctors remaining, or returning, to north Wales to settle into senior (permanent) positions.</p> <p>Increased number of doctors able to speak Welsh.</p>

a.2022.29 - People & OD Strategy – Stronger Together

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Individual projects to develop detailed benefits realisation measures.</p> <p>Migrate information oversight and assurance mechanism to central PMO function.</p> <p>External specialist resource – complete tendering exercise.</p>	<p>Delivery of the 5 programmes of work following Discovery to improve our way of working, strategic deployment, how we organise ourselves, the best of abilities and how we improve and transform.</p>	<p>Shared organisational purpose.</p> <p>Improved skills to deliver distributed leadership.</p> <p>Motivated and fully mobilised teams.</p>	<p>Transformed outcomes, behaviours, capabilities, and competencies supporting our stronger together goals.</p> <p>Contribution from across the organisation to continuous improvement activity.</p>

a.2022.30 - Radiology sustainable plan

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Each modality will have a documented service delivery model (including training and equipment needs) for the current year to reach a 6 week target.</p> <p>Implement insourcing to address ultrasound capacity gap, as part of the saving babies lives programme.</p> <p>Implement agreed opportunities for insourcing across all imaging modalities where necessary to progress towards a 6 week waiting list, whilst recruitment and training is progressed.</p> <p>Implement revised staffing model/skill mix and training, supplemented where necessary by recruitment, to progress towards delivery of a sustainable 6 week waiting list.</p>	<p>Waits for routine examinations to reduce.</p> <p>Equitable access to radiology services across north Wales.</p> <p>Greater access to perinatal ultrasound.</p> <p>Improved access to urgent imaging for unscheduled care.</p>	<p>Compliance with NICE guidance for referring specialties, achieved.</p> <p>6-week waiting time for examinations to be performed is sustained.</p> <p>Reduction in infant mortality rate.</p> <p>Sustainable radiology workforce.</p>	<p>More sustainable radiology service in north Wales, with opportunities to provide high-quality and timely interventions. This will lead to overall improvements and a reduction in awaiting times/ improved flow across the whole system.</p>

a.2022.31 - Regional Treatment Centres

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Award contact to supplier to design, fund, build, equip and maintain RTCs and Final design of facilities.</p> <p>Signed off pathways (using BCUPathways methodology) for priority pathways relating to RTCs.</p> <p>Initial RTC commissioned (facilities, equip, workforce) end Q3.</p>	<p>Delivery of facilities from which a fit-for-purpose RTC model of care can be delivered.</p>	<p>Delivery of lean, planned care pathways, focused upon an efficient and effective patient experience.</p> <p>Improvements in timely access to planned care.</p>	<p>Improved patient experience.</p> <p>Reduced hospital admissions.</p> <p>Increased resilience and sustainability of planned care services.</p>

a.2022.32 - Speak Out Safely

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Expand network of Speak Out Safely Champions across the Health Board.</p> <p>Undertake a review of the Speak out Safely Guardian role to confirm next steps, including increasing the time available the Guardian role.</p> <p>Complete a benefits realisation/evaluation of Speak Out Safely.</p>	<p>All staff supported to 'Speak out Safely'.</p>	<p>Consistent environment of strong staff engagement and psychological safety, where staff feel able to raise concerns, have these acknowledged and acted upon without fear of recrimination.</p>	<p>Organisational culture of openness and transparency where all staff feel assured, they will be listened to when raising concerns.</p> <p>An inclusive learning organisational culture with concerns raised by staff providing a rich source of feedback as the Health Board continuously improves patient and staff safety.</p>

a.2022.33 - Staff Support and Wellbeing

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Recruit substantively to the short term 12 month posts created in 2021/22 to ensure service continuity.</p> <p>Recruit to new posts to enable next phase of SWSS development.</p> <p>Complete a benefits realisation/evaluation of SWSS.</p>	<p>Consistent availability of a service to staff looking for support.</p>	<p>Reduced levels of staff sickness, as a result of improved psychological well-being.</p>	<p>BCU known as an employer of choice where compassionate and fair organisational culture, psychological safety and wellbeing of staff is paramount.</p>

a.2022.34 - Strengthening emergency department (ED) & SDEC workforce to improve patient flow

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Phased implementation of new ED and SDEC model across all 3 sites.</p> <p>New ED and SDEC model sustained across all 3 sites with following metrics expected.</p> <p>Implementation of Gateway review to ensure system effectiveness.</p>	<p>Increasing USC intake managed with a '0' day LOS.</p> <p>Reducing admissions in people going through SDEC.</p> <p>Improvements in Ambulance handover delays.</p>	<p>Reduction in locum and agency spend due to reduced reliance on agency doctors and nurses.</p> <p>Increase in consultant-led care and enhanced clinical decision-making.</p> <p>Improved outcomes for citizens because of a reduction in the number avoidable hospital admissions.</p>	<p>Increased public confidence in the efficacy of the Health Board's approach to emergency/unscheduled care.</p> <p>Sustainable and effective management of unscheduled care in north Wales.</p>

a.2022.35 - Stroke services

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Successful recruitment of 3 Stroke Specialist Nurses and SSNAP Clerks.</p> <p>Provision of an inpatient environment for active rehabilitation working with Early Supported Discharge team.</p> <p>Successful recruitment of Consultant Therapists, Therapy and support team, and seven psychology posts.</p> <p>Submission of a developed case for investment in a Hyper-acute Stroke Service (Phase 2 of the BCU Stroke Programme).</p> <p>Gateway review of the implementation of Phase 1 of the BCU Stroke Programme.</p>	<p>Improvements in the pathway and performance in acute settings, improving patient experience and outcome.</p> <p>Increase in delivery of early supportive discharge and rehabilitation services in community settings.</p> <p>Reduced hospital LOS.</p>	<p>Improved recognition, prevention and treatment of atrial fibrillation.</p> <p>Dedicated neuropsychology team integrated with rehabilitation and early supported discharge, proving more holistic patient experience.</p>	<p>Improved SSNAP scores, national Quality Improvement Measures, and compliance with NICE Stroke Guidelines.</p> <p>Improved pathway and performance at each of the three DGH sites.</p> <p>Rapid access to evidence-based interventions and treatments.</p> <p>Patients, their families, and carers receive the right amount of therapy, from the right therapists, in the right environment – acute hospital, community hospital or home.</p>

a.2022.36 - Suspected cancer pathway improvement

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Provide four rapid access breast clinic streams per week, in each of the East, Centre and West health communities.</p> <p>Provide at least one 'one stop' neck lump clinic per week in north Wales.</p> <p>Provide at least one 'one stop' clinic per week for vague but concerning symptoms, in each of the East, Centre and West health communities.</p> <p>Provide all cancer patients with an identified keyworker to support them from the point of diagnosis onwards.</p>	<p>Improved efficiency through the patient journey leading to improved patient experience.</p> <p>Improved cancer waiting times.</p> <p>Cancer pathways revised and aligned to achieve the national standard.</p>	<p>Standardised working across the 3 hospital sites – applying a whole pathway approach.</p> <p>Fewer patients diagnosed with cancer via a non-USC pathway or following an emergency admission.</p> <p>An increase in the number of cancers diagnosed at earlier stages (I & II), and reduction in the number diagnosed at later stages (III & IV)</p> <p>An increased number of late-stage patients (III & IV) receiving active treatment, rather than best supportive or palliative care All patients, from the point at which cancer is first suspected, will receive diagnostic tests and start their first definitive treatment within 62 days.</p>	<p>Improved patient outcomes.</p> <p>Improved cancer survival rates.</p> <p>Reduced mortality ensuring rapid assessment of patients with suspected cancer.</p>

a.2022.37 - Urgent Primary Care Centres

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Deliver a sustainable urgent primary care model for north Wales with supporting business case.</p> <p>Demonstrate an increase in referrals to UPC centres from EDs and GP practices.</p> <p>Evaluate the UPC service, including a cost benefit analysis as members of the all Wales UPC implementation board.</p>	<p>Increase in referrals to UPC centres from EDs and GP practices.</p> <p>More timely care for patients with urgent (non- life threatening) conditions.</p>	<p>Reduction in unnecessary attendances at the Emergency Department increasing patient experience of those using UPCC and those within ED.</p>	<p>Supporting primary care sustainability and capacity by releasing capacity within GP practices and ED to provide more care for other complex urgent needs.</p>

a.2022.38 - Urology - Robot Assisted Surgery

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Commence robot-assisted urology surgery in Ysbyty Gwynedd.</p> <p>Reporting mechanism in place detailing performance against agreed activity baseline and outcome related KPIs.</p> <p>Reduce/cease RAS outsourcing for urology and replace with activity delivered at YG as per levels specified in the Implementation Plan.</p> <p>Agreed implementation plan in place for expansion of RAS to other surgical specialties.</p>	<p>More patients will be able to receive care in North Wales.</p>	<p>Improved recruitment and retention of specialist clinicians.</p> <p>Reduced length of stay.</p> <p>Reduce likelihood of complications to enable quicker recovery.</p> <p>Better patient experience.</p>	<p>Opportunity to develop the service to include other specialities, for example, colorectal surgery and gynaecology.</p> <p>Development of a specialist Pelvic Cancer Surgery Centre in North Wales to provide a comprehensive local service, which makes best use of skilled staff and promotes research and innovation.</p>

a.2022.39 – Vascular

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
Action plan to address the Royal College of Surgeons (RCS) recommendations and drive the required improvement.	Effective Network arrangements in place to oversee implementation of improvement plan.	<p>Safe, effective delivery of vascular care across BCU.</p> <p>Improved recruitment and retention of specialist clinical staff.</p> <p>A positive patient experience for individuals accessing BCUHB Vascular services.</p>	A safe and sustainable vascular surgery service for North Wales with patient outcomes comparable to the best in the UK.

a.2022.40 - Video consultations

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Training of BCUPathway coordinators in the optimal role of video consultations, advantages and disadvantages, when redesigning pathways.</p> <p>System in place to monitor the number of patients consulted using video technology.</p> <p>Patient experience questionnaire (PREM) where available sent to at least 500 patients who have been consulted by video during Q3 and Q4, with analysis of responses completed.</p>	<p>Reduction in patient time spent travelling, when video consultation provides an acceptable alternative to a face to face consultation.</p>	<p>Increased number of pathways that have video consultation appropriately included, resulting in less inappropriate episodes.</p>	<p>Sustained use of video consultation where-ever possible, maximised through learning, triangulated and reinforced by patient experience feedback mechanisms.</p>

a.2022.41 - Welsh Community Care Information System (WCCIS)

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>To implement WCCIS via a phased approach over the next 3 years for community services (including children's), mental health and therapies.</p> <p>Resource Teams (CRT) in Ynys Mon and a Team within Gwynedd.</p>	<p>Better-integrated working across health and social care over the next 3 years.</p> <p>More effective care delivery through the safe sharing of key information between health and social care in the community.</p>	<p>Improved multidisciplinary knowledge as staff work more in multi-disciplinary environments, facilitated by WCCIS.</p> <p>Reduction in unnecessary hospital admissions.</p> <p>Reduction in do-not attends at appointments.</p>	<p>Patients experience more efficient, quality, and seamless care.</p> <p>BCU is positively recognised as a collaborative organisation.</p>

a.2022.42 - Welsh Language

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Welsh Language Team capacity strengthened to enable BCUHB to deliver its obligations under the Welsh Language (Wales) Measure 2021.</p>	<p>Increased capacity to sustain an organisation-wide timely information translation service.</p> <p>Increased simultaneous translation capacity enabling language preference in clinical and corporate settings.</p> <p>Ability to respond to the increase in demand and senior level commitment in relation to training and organisational development.</p> <p>Staff are supported to develop their Welsh language skills.</p> <p>The development of initiatives that support the function of enabling an 'active offer' approach to service delivery.</p>	<p>A visible commitment at leadership level to provide and develop Welsh language services according to choice and need.</p> <p>Effective and efficient support provided for services in line with the 'More than just words' strategic framework.</p> <p>Organisational development in place in accordance with the Bilingual Skills Strategy and the wider Welsh language agenda.</p>	<p>Improved patient experience.</p> <p>BCUHB is fully compliant with the Welsh Language Standards under the Welsh Language (Wales) Measure 2011.</p>

a.2022.43 - Welsh Patient Administration System

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>To complete the complex, multi-year phased implementation of the Welsh Patient Administration System across the Health Board.</p> <p>Completion of the rollout of Welsh Patient Administration System in West Region and to as to complete the merger of individual Welsh Patient Administration System instances in the remaining regions into a single BCUHB wide Welsh Patient Administration System in 2023. (Phase 4 – Single instance).</p>	<p>Increased speed and relevance of diagnosis, care, treatment plan and onward referral.</p> <p>Improved workflow.</p> <p>Greater mobility for patients to choose preferred site of care.</p>	<p>Single cohesive view of a patient’s digital health record.</p>	<p>Improve quality of patient experience.</p> <p>Improved patient safety.</p>

a.2022.44 - Widening of Primary Care workforce

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Recruit to ANP and AHP roles, thereby enabling individuals to be directed to the most appropriate support for their particular needs.</p> <p>Delivery of Practice Nurse Education programme to support sustainability within primary care. Staff to have undertaken long-term conditions training.</p> <p>Care Home ANP role fully integrated into CRTs.</p>	<p>Improved use of GP capacity and time to focus on people with complex health needs.</p> <p>Timely and accessible support to people living in long-term residential care.</p> <p>Individuals are referred to the most appropriate health professional to meet their needs.</p> <p>Root causes of multiple and regular consultations with GPs are identified.</p> <p>Enhanced skills and knowledge of junior primary care staff.</p> <p>Holistic co-ordinated packages of care are delivered to the most vulnerable.</p> <p>Increasing number of people supported at home rather than hospital.</p>	<p>Reduction in demand on GPs.</p> <p>Increase in numbers of people receiving end of life care in their place of choice.</p> <p>Reduction in waiting times for people with complex needs.</p> <p>Reduction in the number of repeat/regular consultations with GPs for the same condition.</p> <p>Skills and knowledge held by staff currently reaching retirement age is retained within Clusters.</p> <p>Care is delivered closer to home.</p> <p>Reduction in unplanned admissions to secondary care.</p> <p>Fewer Delayed Discharges.</p>	<p>Primary care is more sustainable.</p> <p>Increased de-medicalisation.</p> <p>Improved outcomes for citizens.</p> <p>Shift in locus of care from hospital to community.</p>

a.2022.45 - Workforce Operating Model

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>To build on the learning from the pandemic and the feedback from discovery in ensuring the organisation has a highly effective & efficient People & OD service delivered in a way that is aligned with the operating model of the organisation.</p> <p>Establishment of dedicated HR Business partners capability to drive strategic workforce planning UHB wide.</p>	<p>Full alignment of the People service to the revised Operating Model.</p> <p>Resources placed closer to the bedside.</p> <p>Improvement in ease of contacting people service – for employees and managers.</p>	<p>Significant improvement in people service delivery across all metrics.</p> <p>Significant improvement in case management including reduction in claims expenditure and legal costs combined with a more compassionate employee experience.</p>	<p>Sustainable workforce aligned to new service models which optimally meet population needs.</p>

b.2022.1 - 3rd sector strategy

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Position statement to reaffirm our commitment to the vital role of the third sector.</p> <p>Engagement with the sector on relationships and proposed commissioning approach.</p> <p>Draft commissioning arrangements. Including overall strategic fit with BCU commissioning.</p>	<p>Third sector networks are engaged in the co-design of an outcomes focused approach to collaborative working.</p> <p>A commissioning framework for the procurement, monitoring and evaluation of 3rd sector contracts and that supports the delivery of shared priorities.</p>	<p>Collaboration with the sector to build on community assets and develop resilient support networks.</p> <p>Greater connection with local community networks.</p> <p>Improved trust and confidence in mutual relationships between the sector and the Health Board.</p> <p>Smarter, more joined-up commissioning with local authority partners.</p>	<p>A more robust and sustainable 3rd sector.</p> <p>Improved delivery of outcomes for people, focusing on what matters most.</p> <p>Increased community resilience.</p>

b.2022.2 - Accelerated Cluster Development

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Establish six county level pan cluster planning groups (PCPGs).</p> <p>Sustainable system agreed and in place for generating and analysing Local Needs Assessment date.</p> <p>PCPGs hardwired into revised BCU Planning processes.</p> <p>Governance framework for PCPGs agreed with partners.</p> <p>Additional funding provided to release capacity of independent primary care contractors to enable them to actively engage in the work.</p>	<p>Pan Cluster Planning groups are hardwired into the Health Board's revised Planning Process.</p> <p>Greater alignment of vision and purpose across primary care, the Health Board, and local authorities.</p> <p>Commissioning decisions are better informed by population need and community assets, as well as what matters to local people and communities.</p> <p>Roles and responsibilities of clusters in the planning and delivery of integrated services is strengthened.</p> <p>Cluster priorities drive Health Board strategic planning.</p>	<p>Improved inter-agency relationships, partnership working and decision-making at 'place'.</p> <p>Integrated planning between clusters, Health Boards and Regional Partnership Board.</p> <p>Improved access to primary care multi-disciplinary, multi-agency services.</p> <p>Clusters empowered with increased autonomy to make speedy decisions.</p> <p>Range of local services delivered in primary and community care to meet cluster population priorities and need.</p> <p>Range of local services delivered closer to home.</p> <p>Improved population health and well-being.</p>	<p>Health and social care commissioning and planning integrated 'at place'.</p> <p>Health and social care delivery integrated 'at place' and delivering what matters to local people and communities.</p> <p>A more sustainable future for health and social care.</p> <p>Citizens of north Wales are confident in their local health and social care 'system'.</p> <p>Reduction in use of statutory services, including acute hospitals, domiciliary care, and residential care.</p> <p>Greater accountability to people and communities.</p>

b.2022.3 - Atlas of Variation

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Review of successful AoV approaches elsewhere, culminating in a recommended approach for BCU.</p> <p>Implementation of agreed AoV function.</p> <p>Identification of initial priority areas for focus under the AoV approach.</p>	<p>Access to data and intelligence to support the development of the AoV approach.</p> <p>Methodology is agreed to support the review and improvement of service areas identified.</p>	<p>Data and intelligence inform the redesign and delivery of care, support, and clinical services.</p> <p>Evidence based interventions are implemented to address variation in performance and outcome.</p>	<p>Greater consistency of delivery and performance across the BCU region.</p> <p>Improved outcomes for individuals and specific groups.</p> <p>Staff are informed and empowered to deliver the right care at the right time.</p>

b.2022.4 - BCU Pathways, incorporating oncology and delayed planned care pathways

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Identification at least 20 priority pathways, cognisant of regional treatment development.</p> <p>Consistent, continuous publication of BCUPathways in place, on webportal accessible by professionals and public, and supported by public and professional feedback tools.</p> <p>Collaborative review undertaken of version 1 of the BCUPathways methodology, to refine based upon initial pathways completed, in line with 'PDSA' improvement principles.</p> <p>Rolling programme of pathways for creation/review in place, using BCUPathway methodology (as revised in previous measure).</p>	<p>Address adverse variation in practice.</p> <p>Make best use of available resources.</p>	<p>Developing a rolling programme of pathway review, redesign, and evaluation.</p> <p>Integrated pathways that include promotion of health and prevention of illness as well as the treatment of disease, resulting in a 'left shift' of care.</p> <p>A greater use of digital technology to support the delivery of healthcare.</p>	<p>A change in culture, removing silo working and introducing a whole-system approach to service delivery.</p> <p>A reduction in services delivered in hospital setting with a corresponding increase in primary and community services.</p>

b.2022.5 - Building a Healthier Wales (BAHW)

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Approved work-plan for each BAHNW scheme to have commenced, and partner network informed.</p> <p>Interdependencies framework is developed which supports organisational planning via Health Improvement & Reducing Inequalities Group (ToR Reviewed).</p> <p>Evidence-based benefits (quantitative and qualitative) identified for the whole programme, in order to support organisational planning.</p>	<p>Increase in immunisation/ vaccine uptake across clusters.</p> <p>People can access a range of quality and nutritious food, at affordable prices.</p> <p>People are provided with the skills and knowledge to cook notorious low-cost meals.</p> <p>People can access a greater range of support and activities within their own communities.</p> <p>Increased awareness amongst health and social care professionals of Childhood ACES, how to identify them and how to deal with their impact.</p> <p>Health Board's approach to population health is strengthened.</p>	<p>Fewer people become ill or die because of contracting a communicable disease.</p> <p>Improved population health and well-being.</p> <p>Reduction in rates of alcohol and substance misuse.</p> <p>Increase in the numbers of people eating 5 or more fruit and vegetables a day.</p> <p>Reduction in levels of loneliness and social isolation.</p> <p>Improved population health and well-being, especially for those citizens who are traditionally hard to reach.</p> <p>Reduction in the numbers of children experiencing an Adverse Childhood Experience (ACEs).</p>	<p>Reduction in health inequalities.</p> <p>Communities are stronger and more resilient.</p> <p>Reduction in use of statutory services, including acute hospitals, domiciliary care, and residential care.</p> <p>Reduction in the number of children on the Child Protection Register.</p> <p>Reduction in the number of people who are unintentionally homeless.</p> <p>Reduction in the numbers of homeless people in north Wales.</p>

b.2022.6 - Commissioning unit

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Scope and structure of commissioning unit agreed by Executive Team.</p> <p>Appointment to commissioning unit senior team.</p> <p>Written plan for timescale of full transfer of functions, and programme of work for year one and anticipated work in year two agreed with Executive team.</p>	<p>Alignment of commissioning arrangements including collaborative and specialist commissioning.</p> <p>Mechanisms are in place to enable clusters to build commissioning plans to meet local needs.</p>	<p>Commissioning processes are focused on population needs, the delivery of pathways and outcome measures.</p>	<p>Commissioning supports the transformation of care, support and clinical services.</p> <p>Improved outcomes for individuals and demonstrable impact on health and well-being of specific groups, contributing to population health.</p>

b.2022.7 - Community Pharmacy Enhanced Services - Alcohol and Blood Borne Viruses

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Completed design of media and resources required to support the service.</p> <p>At least one Community Pharmacy site offering ES in each of East, Centre, West health communities.</p> <p>Evaluation completed of test sites (identified in measure 2).</p>	<p>To help the public recognise the risks associated with their personal alcohol consumption behaviours and de-normalise risky alcohol consumption and the inevitable burden on primary care workload, hospital admissions and subsequent expenditure.</p>	<p>Reduce risks associated with alcohol consumption through screening, education, brief advice, and referral to specialist services.</p> <p>Increased awareness of support available within target groups.</p> <p>Increased knowledge and awareness of new treatments for Hepatitis C (and which may provide a cure).</p>	<p>Reduce the personal and public health risk of infection.</p> <p>This model demonstrates the Board’s commitment to achieving WHO targets as outlined by Welsh Health Circular (WHC/2017/048) and as committed to by Welsh Government, which sets out to eliminate HBV and HCV as significant public health threats by 2030.</p>

b.2022.8 - Diabetic Foot pathway

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Increased podiatric capacity in place to support relaunched primary care component of diabetic foot pathway.</p> <p>Review emergency admission data for diabetic foot presentations, which should be expected to fall as whole system pathway embeds.</p> <p>Review inter-hospital transfer data for diabetic foot presentations, with transfers to YGC expected to fall as whole system pathway embeds.</p>	<p>A better understanding of patients who access Health Board diabetic foot services - identification and promotion of good practice as well as areas for improvement.</p>	<p>Reduced hospital admissions and length of stay.</p> <p>An integrated approach to care resulting in a better patient experience.</p>	<p>Individuals remain well and out of hospital and are given the appropriate support to manage their condition.</p>

b.2022.9 - Foundational Economy Strategy/Policy

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
Implementation of a BCU strategy to maximise our contribution to the Foundational Economy.	<p>Increased job opportunity in north Wales.</p> <p>Improved 'green' footprint.</p>	<p>Reduction in inequality by maximising the opportunity for local investment.</p> <p>Greater co-design of local NHS services with local communities and organisations.</p> <p>Improved provision of bilingual services.</p>	<p>Sustainability of service, recruitment.</p> <p>Pipeline of ambition for specialist posts, supporting clinical sustainability.</p>

b.2022.10 - Golden Value Metrics

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
Creation of a streamlined set of high value metrics that provide an overall barometer of performance.	<p>Increased recognition of the importance of patient experience and outcomes in our improvement journey.</p> <p>Increase in person-centred "experience" conversations.</p>	<p>Redesign of services built upon robust experience data.</p> <p>Less complaints, higher satisfaction.</p> <p>Better clinical outcome data.</p>	<p>Improved patient journeys across the breadth of the organisation.</p> <p>More efficient targeting of improvement resource.</p>

b.2022.11 - Implementing the Quality Act

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Consider the full requirements of the Act, to ensure full compliance when it comes into force in 2023.</p> <p>Amendment/development of internal systems, if so required, to ensure compliance.</p>	<p>BCUHB nominees included in the various work streams and the Acting Director of Quality sits on the National Steering Group.</p>	<p>The existing duty of quality on NHS bodies to be strengthened</p> <p>An organisational duty of candour on providers of NHS services to be established requiring an open and honest approach with patients and service users when things go wrong</p> <p>The voice of citizens to be strengthened by replacing Community Health Councils with a new all-Wales Citizen Voice Body that will represent the interests of people across health and social care</p>	<p>A health and social care system in Wales that is fit for the future and that ensure the voices of citizens are engaged, listened to, and clearly heard</p>

b.2022.12 - Inverse Care Law work

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Establishment of Community of Practice for addressing health inequalities in partnership with primary care</p> <p>Rapid Actionable Insight Packs to identify health inequalities at cluster / locality level</p> <p>Health Inequalities Intervention & Innovation Plan identifying 6 innovator clusters and setting out interventions to drive down health inequalities</p>	<p>Cluster teams are skilled and informed to identify health inequality challenges, in particular those associated with the wider determinants of health</p> <p>Clinical and health behaviour risk factors are identified early</p> <p>Asset-based interventions are developed to reduce risk factors</p>	<p>People at greatest risk living in socio-economic deprived areas of North Wales receive timely and effective support to reduce their risk of developing non-communicable disease</p> <p>Local communities are more engaged and empowered to exercise personal choice to control risk factors and adopt healthy behaviours</p>	<p>Reduction in risk factors leading to health inequalities reduces the risk of non-communicable disease</p> <p>Increased chance of reducing the gap in healthy life expectancy</p>

b.2022.13 – Lean & VBC Healthcare system

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Rollout of a constant evidence based improvement methodology built upon Lean and VBC principles.</p>	<p>Reduction in low value steps within pathways of care, leading to better patient experience and resource utilisation.</p> <p>Greater ease of access to support for continuous improvement activity.</p>	<p>Less unwarranted variation in clinical service delivery.</p> <p>Greater engagement in continuous improvement activity.</p>	<p>Stronger partnerships with high-functioning organisations.</p> <p>High quality systems that make best use of our limited resources, allowing us to provide more (appropriate) episodes of care.</p>

b.2022.14 - Recovery of Primary Care chronic disease monitoring

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Recruitment of additional staff / increase in hours available to undertake chronic disease management reviews, and thereby reduce backlog.</p> <p>Provide a collaborative Cluster-based long-term Conditions Hub: leading to a reduction in referrals to secondary care Q3.</p> <p>Backlog of chronic disease reviews reduced.</p> <p>Individuals provided with education to support with self-management of their chronic condition.</p>	<p>Backlog of chronic disease reviews because of Covid is reduced</p> <p>Long-term conditions hub established in the North Denbighshire Cluster</p> <p>Chronic Conditions nurses support individuals and provide them with information to enable improved self-management of their chronic condition</p> <p>People with a chronic condition are signposted to a range of support and training</p>	<p>Recovery of Primary Care</p> <p>Improved chronic disease monitoring in the community</p> <p>Reduction in presentations to secondary care from people experiencing an exacerbation in their chronic condition</p> <p>Individuals feel more confident in managing their chronic condition themselves</p>	<p>Improved community services for people with a chronic condition</p> <p>Improved rates of self-care for people with a chronic condition</p>

b.2022.15 - Results management

Activity Inputs & outputs	Initial outcomes	Medium-term outcomes	Long-term outcomes
<p>Improve the assurance for the management of results across BCUHB by fully delivering a fit for purpose solution that will improve patient safety.</p> <p>Deliver a fit for purpose solution that will improve patient safety and stop printed results</p>	<p>Providing the availability and good management of results is critical to inform the care a patient receives, constituting a fundamental part of the overall patient’s care record that will have a direct impact on patient outcomes.</p> <p>Project – Welsh Clinical Portal (WCP) Results Notification & Assurance Dashboard - focusses on resolving the gaps in notification and action recording that retains the need for paper results. This will provide the assurance to enable us to safely (i) rely on notifications, and (ii) record the action digitally.</p>	<p>Increased patient safety.</p> <p>Environmental benefits of the reduction of the use of paper.</p> <p>Improved audit trail of how results are being managed.</p> <p>Improved patient experience as trends in results can be identified.</p>	<p>Prevents patient harm.</p> <p>Improve quality of patient experience.</p>