

Wiltshire Health and Care Delivery Plan 2021-2024















trance

MORCLAYS
WHEELERS BUS
£568


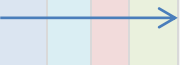


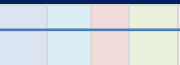


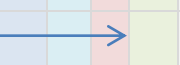



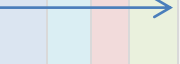


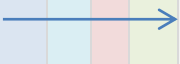


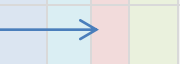

Delivery Plan
2021-2024

Wiltshire Health and Care 'Delivery Plan' Refresh: 2021-2024


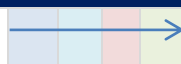

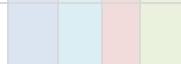

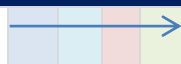

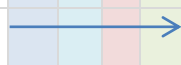

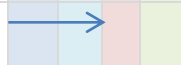

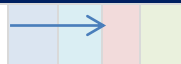

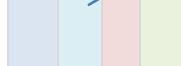

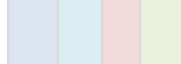

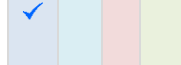





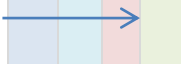
Key:		Objective KPI achieved.
		Objective KPI on track to be completed by target quarter.
		Objective KPI off-track to be completed by target quarter, but actions in place to achieve milestone by target year.
		Delivery milestone off-track to be completed by target quarter and milestone unlikely to be achieved by end of target year.
		Delivery milestone not due to be commenced until 22/23 or later.
		Delivery milestone no longer applicable because of national decision making/ commissioner decision making/ other.

Type of objective key:		An objective from 2020/21 that will continue into 2021/22 (and potentially beyond).
		A new objective to be delivered as part of pre-existing services/business activities.
		A new objective to support delivery of the BSW programme of work/ national requirements.
		An objective to test or scope a new idea. It would require additional funding to deliver.

Implementing a new model of care

#	Objectives	Lead	Type	2021-2022				2022-2023		23-24	RAG:	Objective KPI	Narrative on current position (quarterly updates)
				Q1	Q2	Q3	Q4	H1	H2				
RESET AND RECOVERY													
1.	<ul style="list-style-type: none"> As part of reset and recovery, we will: <ul style="list-style-type: none"> A. Manage the safe return to workplaces including developing new policies. B. Maintain activity levels and waiting times back to pre-Covid-19 baselines. C. Maintain our control and incident centre. D. Work to bring back radiology within Minor Injury Units. 	Chief Operating Officer (Lisa Hodgson)										Waiting times/ activity levels. New policies in place. Work with RUH ¹ to bring radiology access back to pre-Covid-19 levels. Identify how we will work post pandemic to ensure staff have a work life balance and are ensuring the safe and effective delivery of services.	
SERVICE DEVELOPMENTS													
2 HOUR CRISIS RESPONSE													
2.	<ul style="list-style-type: none"> Urgent Response in the Community <ul style="list-style-type: none"> Delivery of the national specification for 2 hour response (<i>by March 2022</i>) Expand in line with national expectations (<i>beyond March 2022</i>) 	Chief Operating Officer (Lisa Hodgson)										Implementation of national specification.	
3.	<ul style="list-style-type: none"> Expand Community Teams to deliver 24/7 nursing <ul style="list-style-type: none"> Scope, design and deliver (<i>by winter 2021</i>) 	Chief Operating Officer (Lisa Hodgson)										Implemented 24/7 nursing	
OPTIMISING FLOW AND RESILIENCE													
4.	<ul style="list-style-type: none"> We will further optimise the efficiency of the Home First pathway to support hospital discharge. Further work required: <ul style="list-style-type: none"> Define requirements Mobilise new capacity 	Head of Operations – Community Teams (Heather Kahler)	 									Patients wait no more than 48 hours into a home first pathway.	
5.	<ul style="list-style-type: none"> We will model the requirements for bed-based discharge within the system and help design a change in the use. 	Chief Operating Officer (Lisa Hodgson)										System bed base reviewed (this will include the following types of bed: Discharge to Assess, Intermediate care Rehabilitation beds, and community hospital beds).	
6.	<ul style="list-style-type: none"> Improve Emergency Preparedness Resilience and Response ("EPRR") coordination 	Chief Operating Officer (Lisa Hodgson)										Reorganised approach in place by Q2.	








¹ RUH stands for "Royal United Hospitals Bath NHS Foundation Trust".

NEIGHBOURHOOD TEAMS							
7.	<ul style="list-style-type: none"> We will lead integration in neighbourhoods, tested through a focused neighbourhood test project, which includes: <ul style="list-style-type: none"> Close joint working with primary care teams Reduced duplication of services and joint case management rather than individual care. Use of population data to map need and workforce requirements. 	Managing Director (Douglas Blair)					Delivery of test project as part of Wiltshire Alliance ² .
8.	<ul style="list-style-type: none"> We will develop a model for adoption and spread of Personalised Care and Support Plans. <p><i>We will progress this in 22/23 once Graphnet available.</i></p>	Service Transformation Manager (Ann Marie Nuth)					Individual management plans are captured in a manner that meets national requirements.
ENHANCED HEALTH IN CARE HOMES/ ANTICIPATORY CARE							
9.	<ul style="list-style-type: none"> Expand our virtual ward to more care homes and beyond into primary care. 	Chief Operating Officer (Lisa Hodgson)					Virtual ward expanded to include all care homes and Primary Care Networks (PCNs) ³ within the localities.
10.	<ul style="list-style-type: none"> We will develop a frailty pathway for our local system 	Chief Operating Officer (Lisa Hodgson)					Clear frailty pathway agreed across BSW.
11.	<ul style="list-style-type: none"> In 21/22, we will develop a common model for the provision of specialist advice and support for people with long term conditions. This will include identifying how community service specialists optimally wrap around the provision within Primary Care Networks. 	Head of Operations – Long Term Conditions (Carol Langley Johnson)					Long term model defined.
OTHER							
12.	<ul style="list-style-type: none"> We will ensure that our operational structure appropriately supports our inpatient staff and the services that we need to deliver. This will include clinical development. 	Lisa Hodgson (Chief Operating Officer)					New operational structure in place by Q2.
13.	<ul style="list-style-type: none"> We will work with our local system colleagues across BSW to improve and establish community-based heart failure services. 	Head of Operations – Long Term Conditions (Carol Langley Johnson)					KPI(s) dependent on commissioners.
14.	<ul style="list-style-type: none"> We will support the expansion of the delivery of pulmonary rehabilitation and oxygen assessment services to patients in South Wiltshire. 	Head of Operations – Long Term Conditions (Carol Langley Johnson)					Expanded pulmonary rehabilitation services in place.
15.	<ul style="list-style-type: none"> We will work with our commissioner to develop personalised wheelchair budget systems. 	Head of Operations – Long Term Conditions (Carol Langley Johnson)					A clear process is in place for personalised health budgets.
16.	<ul style="list-style-type: none"> We will work with our local system colleagues across BSW to define a system-wide solution for orthotics. 	Chief Operating Officer (Lisa Hodgson)					System wide procurement solution agreed.
17.	<ul style="list-style-type: none"> We will confirm our longer-term model for physiotherapists in our urgent care facilities 	Head of Operations – Long Term Conditions (Carol Langley Johnson) AND Head of Operations – Inpatients (Rachel Green)					Longer term model confirmed.
18.	<ul style="list-style-type: none"> We will agree proposals for the expansion of early supported discharge for stroke 	Head of Operations – Long Term Conditions (Carol Langley Johnson)					Agree proposal by Q2. Implement proposal by Q3.


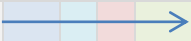

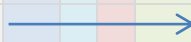

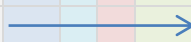

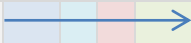
² The Wiltshire Alliance is a partnership of health and care organisations in Wiltshire, focused on delivering health and care change and improvement for the population of Wiltshire. It is part of the Integrated Care System which covers Bath and North East Somerset, Swindon and Wiltshire (collectively these regions are referred to as “BSW”).

³ A Primary Care Networks or “PCN” consists of a group of general practices working together, and in partnership with community, mental health, social care, pharmacy, hospital and voluntary services in their local area, to offer more personalised, coordinated health and social care to the people living in their area.


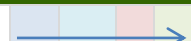

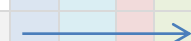

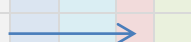

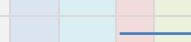

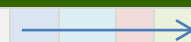

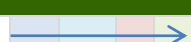


Developing our People and strengthening our workforce

#	Objectives	Lead	Type	2021-2022				2022-2023		23-24	RAG:	Objective KPI/ Aim	Narrative on current position (quarterly updates)
				Q1	Q2	Q3	Q4	H1	H2				
PEOPLE RECOVERY													
19.	<ul style="list-style-type: none"> We will undertake an assessment of WHC's Education and Training materials to assess how these could be adapted to meet the needs of a virtual audience. We will review all face to face training content, and the regularity of review requirements in line with any best practice guidance. 	Learning And Development Via Head of People (Hanna Mansell)		✓								Practices reviewed and updated to reflect our new ways of working.	
20.	<ul style="list-style-type: none"> We will continue the rollout Allocate Health Roster, and, in priority order: <ul style="list-style-type: none"> Revise the project plan splitting out areas for attendance and absence or full rostering. Manage implementation and training of areas for attendance and absence only. Rollout full rostering in community teams. 	Workforce Systems Via Head of People (Hanna Mansell)									Staff members are managed effectively, have regular rest breaks and annual leave.		
21.	<ul style="list-style-type: none"> We will review the experience of joining our organisation. We will subsequently implement agreed actions and measure success. 	HR Operations Via Head of People (Hanna Mansell)									All staff have the best experience when joining the organisation.		
22.	<ul style="list-style-type: none"> We will continue to increase the number of our volunteers and improve the experience of our work experience placements. 	HR Operations Via Head of People (Hanna Mansell)									<p>Voluntary workforce increased by 10-15% using our embedded approach.</p> <p>Work experience strategy devised to encourage uptake by young people with an interest in health care.</p>		
DEVELOPING OUR PEOPLE													
23.	<ul style="list-style-type: none"> We will work as part of the BSW Academy⁴ partnership to: <ul style="list-style-type: none"> Review talent management practices and processes within WHC to embed the basic principles utilising existing practices and development platforms. Review the succession planning practices and processes within WHC and implement any changes. Review the current and future needs of our clinical workforce, and link plans to the available educational opportunities to meet this demand. As part of this, we will: <ol style="list-style-type: none"> Review clinical workforce risks through reviewing the recent workforce demographics. Look at both local and national drivers and strategies to address any of these risks. Provide an analysis of these workforce risks over the next 2-3 years, including the current development pipelines and how they will meet future skill mix. Provide a risk-based Training Needs Analysis of the findings to support the organisation in decision making around current and future investment. 	Learning And Development Via Head of People (Hanna Mansell)									<p>We have the skills within its current workforce to deliver safe and effective services.</p> <p>We have systems in place to enable us to forecast future workforce demands and align current practice to meet this demand.</p>		
24.	<ul style="list-style-type: none"> We will review development pathways for non-clinical roles, linking to the organisational priorities and workforce data. 	Learning And Development Via Head of People (Hanna Mansell)									We have the skills within its current workforce to deliver effective non-clinical services		
25.	<ul style="list-style-type: none"> We will review current systems and processes for monitoring and providing assurance around the provision of Continued Professional Development (CPD). 	Learning And Development Via Head of People (Hanna Mansell)		✓							Expanded development opportunities for both clinical and corporate staff.		

⁴ The 'BSW Academy' is an initiative championed by the local BSW health and care system. It has been established to help ensure the local system has a workforce fit to deliver the health and care needs of the future. This will cover both the capacity and the capability that is needed.

VALUING OUR PEOPLE									
26.	<ul style="list-style-type: none"> We will review our practice against national guidance for a "just culture"⁵ and implement changes required. 	HR Operations Via Head of People (Hanna Mansell)							Staff are living and demonstrating WHC's values and behaviours.
27.	<ul style="list-style-type: none"> We will undertake a review of the mechanisms for recognition within WHC and implement the recommendations of this review. 	HR Operations Via Head of People (Hanna Mansell)							We will recognise and celebrate hard work and success.
28.	<ul style="list-style-type: none"> We will develop the staff-led WHC "Wellbeing Promise", and support delivery through WHC's Health and Wellbeing Forum. 	HR Operations Via Head of People (Hanna Mansell)							<p>The wellbeing of our workforce is at the centre of everything we do.</p> <p>Appointment of a non-executive board member as a Wellbeing Guardian⁶.</p>
29.	<ul style="list-style-type: none"> We will promote a culture of equality, diversity, and inclusion. <p>As part of this</p> <ul style="list-style-type: none"> Develop and agree a Wiltshire Health and Care Equality, Diversity, and Inclusion Statement Review the WHC EDI Policy, update and ratify Understand our workforce demographics Undertake a review of EDI training and provide benchmarking for best practice Commission Executive and senior manager level training Increase diversity across the organisation 	Head of People (Hanna Mansell)							<p>Agree and ratify WHC's Equality, Diversity, and Inclusion priorities for 21/22</p> <p>Implement the agreed priorities through the Equality Diversity and Inclusion forum.</p>

Supporting staff and patients with good Information Technology & Information Governance (IT and IG)

#	Objectives	Lead (Person to obtain quarterly update from)	Type	2021-2022				2022-2023		23-24	R A G	Objective KPI	Narrative on current position (quarterly updates)
				Q1	Q2	Q3	Q4	H1	H2				
PROJECTS													
IT AND TELEPHONY SERVICES													
30.	<ul style="list-style-type: none"> We will carry out a review and upgrade of WHC's telephone system. 	Head of IT (Kelsa Smith)									New telephone system in place across WHC.		
31.	<ul style="list-style-type: none"> We will carry out a significant network hardware refresh for every WHC site. This is critical to safe delivery of services and required to achieve Cyber Essentials Plus certification. 	Head of IT (Kelsa Smith)									All WHC sites have network hardware that is vendor-supported.		
32.	<ul style="list-style-type: none"> We will complete migration to Office 365. 	Head of IT (Kelsa Smith)									Completion of migration to Office 365.		
33.	<ul style="list-style-type: none"> We will work with BSW colleagues to develop usage of office 365 collaboratively and WHC will engage and implement the agreed solution. 	Head of IT (Kelsa Smith)									WHC uses Office 365 in a collaborative way with BSW colleagues.		
VIDEO CONSULTATION SOFTWARE													
34.	<ul style="list-style-type: none"> We will confirm our user requirements and work with system partners to re-procure video consultation software so that clinicians across our services continue to have a way to conduct electronic consultations with patients. <p>If necessary, we will implement new systems.</p>	Clinical Information Officer (Christian Bailey)									<p>Confirm our requirements.</p> <p>Support procurement of a platform.</p> <p>Implement any changes.</p>		
HEALTH RECORDS DIGITISATION/ SHARED CARE RECORD													
35.	<ul style="list-style-type: none"> We will review and reform records management. 	Data Protection Officer (Steve Lobb)									<p>Full records inventory will be developed.</p> <p>Standardised processes and guidance will be implemented.</p> <p>An appraisal schedule shall be generated.</p> <p>Off-site storage will be managed through the Corporate Services Team.</p>		
36.	<ul style="list-style-type: none"> We will participate in system wide efforts to implement a shared care record (Graphnet). 	Head of IT (Kelsa Smith)									The necessary work to integrate with Graphnet is completed.		

⁵ NHS guidance on a "just culture" can be accessed here: <https://www.england.nhs.uk/patient-safety/a-just-culture-guide/>






⁶ NHS guidance on what a "Wellbeing Guardian" is can be accessed here: <https://people.nhs.uk/executivesuite/support-in-difficult-times/wellbeing-guardians/>

SERVICE DEVELOPMENTS										
37.	• We will establish Wi-Fi for patients at community sites from which inpatient services are provided.	Head of IT (Kelsa Smith)		✓						Patients at all inpatient sites have access to Wi-Fi.
38.	• We will improve hardware to support multi-disciplinary remote consultation from our wards.	Head of IT (Kelsa Smith)		✓						Improved hardware to support multi-disciplinary remote consultation from our wards
39.	• Improved IT hardware for our inpatient wards.	Head of IT (Kelsa Smith)		✓						Wards have ready access to IT hardware.
40.	• We will scope what is needed to achieve a fully digitalised system on our wards (patient records, medications management, pathology requests, etc.)	Project resource - TBC		✓						Clarity on preferred way forward for a complete Electronic Patient Record (EPR) for the ward.
41.	• We will work as part of BSW's business intelligence programme to: <ul style="list-style-type: none"> ○ Migrate to new data visualisation tools; and ○ Review data warehousing options 	Managing Director (Douglas Blair)								WHC can maintain continuity of reporting.
42.	• We will roll out pathology requesting for community teams.	Project resource - TBC		✓						Pathology requesting for community teams rolled out.
ONGOING PRIORITIES										
43.	• We will implement a multifunction device replacement (scanning, printing, etc.).	IT Project Manager (Dave Thompson)								New multi-function devices in place.
44.	• We will deliver a rolling refresh replacement programme for desktop and laptop machines.	IT Project Manager (Dave Thompson)								Rolling replacement programme in place



Supporting patients and staff with physical infrastructure that better meets need

#	Objectives	Lead	Type	2021-2022				2022-2023		23-24	RAG:	Objective KPI	Narrative on current position (quarterly updates)
				Q1	Q2	Q3	Q4	H1	H2				
PROJECTS													
45.	• We will contribute to BSW's Estates Strategy, including 11 'PCN plans' and 3 'place plans'.	Director of Infrastructure (Victoria Hamilton)										BSW estates strategy includes strategies for North and South Wilts - including plans for all Primary Care Networks.	
46.	• We will work with partners to develop a plan to move to Devizes Health Centre and initiate the move to this new site	Director of Infrastructure (Victoria Hamilton)										Ready for move in July 2022.	
47.	• Devizes Community Team move to Green Lane Hospital	Director of Infrastructure (Victoria Hamilton)										Community team co-located with partners.	
48.	• We will work with partners to develop a plan to move to West Wiltshire Health and Care Centre and initiate the move to this new site	Director of Infrastructure (Victoria Hamilton)										Ready for move in 2023.	
49.	• We will work with NHSPS on a programme of improvements to the environment at Warminster Community Hospital.	Director of Infrastructure (Victoria Hamilton)										Improved facilities for our staff and patients.	
50.	• We will implement improvements to estates in South Wiltshire	Director of Infrastructure (Victoria Hamilton)										Occupation of Five Rivers by end of June 2021. Better utilisation of other South Wiltshire facilities achieved by the end of Q2.	
SERVICE DEVELOPMENTS													
51.	• We will work with our facilities management team to eliminate use of single-use plastics in WHC.	Victoria Hamilton (Director of Infrastructure)										Elimination of use of single-use plastic in services provided to WHC.	

Quality Focus – consistently improving the quality of services


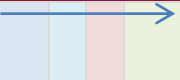

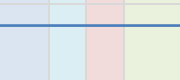

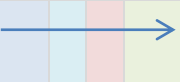

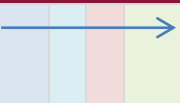

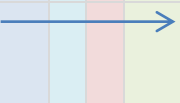

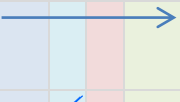

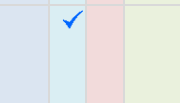

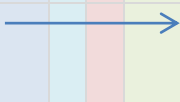

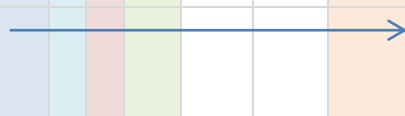
#	Objectives	Lead	Type	2021-2022				2022-2023		23-24	RAG:	Objective KPI	Narrative on current position (quarterly updates)
				Q1	Q2	Q3	Q4	H1	H2				
QUALITY PRIORITIES													
52.	<ul style="list-style-type: none"> We will further develop our quality systems: <ul style="list-style-type: none"> stabilisation of Datix (electronic quality system) expansion of the solid foundation of “shared learning” in WHC. embed the Care Quality Commission’s (CQC) new approach to oversight into WHC as business as usual. <p>(Quality Priority 1)</p>	Director of QPW (Sara Quarrie)									<ul style="list-style-type: none"> Our Electronic quality system is refined Re-introduction of Data champions and development of a working group Vision for expanding shared learning processes established. Key elements of the shared learning process are automated through electronic systems. CQC’s new approach is embedded 		
53.	<ul style="list-style-type: none"> We will refine our clinical strategy with a focus on the deteriorating patient (Quality Priority 2) 	Director of QPW (Sara Quarrie)									<ul style="list-style-type: none"> Audit in-patient transfers to acute providers and evidence appropriate escalation of patient needs Published organogram of professional lines of accountability throughout WHC 		
54.	<ul style="list-style-type: none"> We will promote a culture of Equality, Diversity and Inclusion across our staff and patients (Quality Priority 3) 	Director of QPW (Sara Quarrie)									<ul style="list-style-type: none"> See ‘Patient Experience’ objectives below. 		
55.	<ul style="list-style-type: none"> We will aim for a 50% reduction in severe avoidable medicine related incidents by 2024 (Quality Priority 4) 	Director of QPW (Sara Quarrie)									<ul style="list-style-type: none"> Reduce incidence of missed medication incidents and utilisation of pharmacy skill set on in-patient units Implement a BSW-wide End of Life community prescription chart Complete CQC Controlled Drugs self-assessment 		
56.	<ul style="list-style-type: none"> We will deliver COVID-19 recovery (Quality Priority 5) 	Director of QPW (Sara Quarrie)									<ul style="list-style-type: none"> Reduction in pressure ulcers across WHC Monitoring and management of long-COVID patient needs IPC delivery at WHC is in line with standard and regulatory requirements, with consistent and timely advice. Improve Anti-microbial Stewardship across WHC 		

Patient experience

#	Objectives	Lead	Type	2021-2022				2022-2023		23-24	RAG:	Objective KPI	Narrative on current position (quarterly updates)
				Q1	Q2	Q3	Q4	H1	H2				
ONGOING PRIORITIES													
57.	<ul style="list-style-type: none"> We will establish a Patient and Public Involvement Group involving staff, patients, and the public, and which has with close links to other engagement groups in the system (Q1). We will use our Patient and Public Involvement Group to involve patients and the public in developing our services (throughout the year) 	Public and Patient Involvement Officer (Lina Middleton)									<ul style="list-style-type: none"> We can evidence that the development of our services has been informed by the views of our patients and the public. 		
58.	<ul style="list-style-type: none"> We will continue to build a shared understanding of what good patient and public involvement looks like with staff and stakeholders, involving a broad representation of community members. 	Public and Patient Involvement Officer (Lina Middleton)									<ul style="list-style-type: none"> Friends and Family feedback. 		

59.	<ul style="list-style-type: none"> We will continue to have a patient centred approach to ensure that patients are empowered to live healthy and independent lives. 	Head of Patient Safety and Quality (Caroline Wylie)							<ul style="list-style-type: none"> Patient satisfaction survey. Post incident reviews and learning. CQC reviews. Patient stories are routinely used at board meetings. 	
60.	<ul style="list-style-type: none"> We will understand our patient demographic to ensure that our services are inclusive and accessible to all. This will include ensuring: <ul style="list-style-type: none"> - accessibility and readability of patient information. - that we understand the health inequality within our patient community - a plan to identify and reduce health inequalities 	Head of Patient Safety and Quality (Caroline Wylie)							<ul style="list-style-type: none"> Intranet/ internet/ hard copy leaflets accessible. Our workforce is trained to support all patients who access services and that we are able to meet their needs. Publication of plan. 	

Financial sustainability and productivity/ environmental sustainability

#	Objectives	Lead	Type	2021-2022				2022-2023		23-24	RAG	Objective KPI	Narrative on current position (quarterly updates)
				Q1	Q2	Q3	Q4	Q1-2	Q3-4				
SERVICE DEVELOPMENTS													
61.	<ul style="list-style-type: none"> We will embed strengthened procurement support. 	Director of Finance (Annika Carroll)									<ul style="list-style-type: none"> We have consistent access to procurement support when needed. 		
62.	<ul style="list-style-type: none"> We will improve our analysis of the cost of delivering services. 	Director of Finance (Annika Carroll)									<ul style="list-style-type: none"> We have an enhanced view on the costs of delivering components of our support services. 		
ONGOING PRIORITIES													
63.	<ul style="list-style-type: none"> 2.5% of our resources will be released from planned expenditure for reinvestment to support services. 	Annika Carroll (Director of Finance)									<ul style="list-style-type: none"> Cost improvement plans in place and delivered. 		
SUSTAINABILITY ("GREEN PLAN")													
64.	<ul style="list-style-type: none"> We will seek to minimise travel through continued utilisation of digital platforms to contact and engage with patients and colleagues, and to undertake training. 	Managing Director (Douglas Blair)									<ul style="list-style-type: none"> Staff mileage is reduced in 21/22 compared to 19/20 (pre-Covid-19) levels. 		
65.	<ul style="list-style-type: none"> We will continue to secure arrangements so that staff can access lease cars that are low or ultra-low emissions. 	Sarah Greenland (Contracts Manager)									<ul style="list-style-type: none"> Maintain arrangements so that WHC can lease cars that are low or ultra-low emissions. 		
66.	<ul style="list-style-type: none"> We will appoint a Board-level lead with "net zero" in their portfolio (by April 2022) 	Managing Director (Douglas Blair)									<ul style="list-style-type: none"> WHC has a Board level lead with net zero in their portfolio. 		
67.	<ul style="list-style-type: none"> We will implement increased promotion of our cycle to work scheme. 	Managing Director (Douglas Blair)									<ul style="list-style-type: none"> Cycle to work scheme is actively promoted and staff know where to go to obtain information on how to join the scheme. 		
68.	<ul style="list-style-type: none"> We will review the facilities for encouraging staff to cycle to work at WHC sites. 	Director of Infrastructure (Victoria Hamilton)									<ul style="list-style-type: none"> All sites reviewed. 		
69.	<ul style="list-style-type: none"> We will work with NHS Property Services to review the electric charging infrastructure required to support net zero travel at WHC sites. 	Director of Infrastructure (Victoria Hamilton)									<ul style="list-style-type: none"> Plan in place and progress being made by 2023. 		



Wiltshire
HEALTH AND CARE