



# Velindre University NHS Trust Integrated Medium Term Plan 2025-2028



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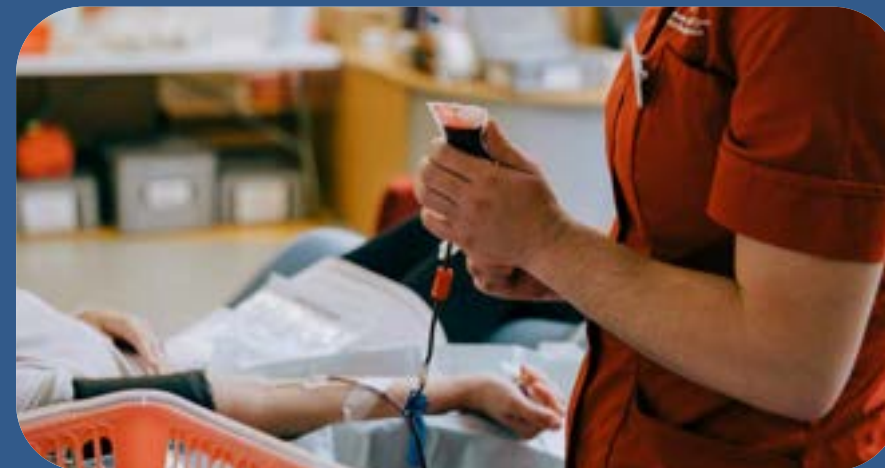
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# Section 1 Context

## Five Key Messages

We set the focus of this Integrated Medium Term Plan, the “Plan”, in autumn 2024, which has then driven its development:

1

Our Plan brings to life our vision - **“Excellent Care; Inspirational Learning; Healthier People”** grounded in our values of being **“Caring; Respectful; Accountable.”**

2

We are committed to **delivering all core services consistently, reliably and in line with the highest standards** – meeting the expectations of our commissioners and all patient and donor facing standards, including national best practice.

3

Shaped by our current and forecast demand, experience, safety and quality outcome data, our plan is built on **the most accurate and timely intelligence available.**

4

We are driving **value in health through efficiency, a skilled and multi professional workforce** and bold **digitally enabled** transformation.

5

We are investing in our future through **major infrastructure investment** – from a new Cancer Centre, upgraded Radiotherapy equipment, and new modern facilities for our Blood Service.

# Foreword from our Chair and Chief Executive Officer

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We are proud to present the Velindre University NHS Trust Integrated Medium Term Plan for 2025/6-2027/8. Our Plan is an output of the excellent work undertaken by our teams from across the Trust and our continued engagement with our many stakeholders. We have set ourselves a set of ambitious priorities, all centred in improving the outcomes for our patients, donors and communities. In addition to our key messages above on what this plan will do, we would like to make three further specific commitments to you:

- We will continue to deliver and further develop this Plan in a way that **listens** to our patients, donors, communities and wider stakeholders.
- We will tirelessly focus on achieving the impact and **outcomes** set out in this Plan and will regularly report on our progress to achieving them.
- This Plan can only be delivered in collaboration and working **together** across all our partnerships.

We hope you enjoy reviewing our Plan and we, and our teams, look forward to discussing it with you at our various engagement opportunities over the course of the year.

Thank you.



Professor Donna Mead OBE  
Chair, Velindre



David Donegan  
Chief Executive, Velindre

# Who we are

## Velindre University NHS Trust "the Trust"

Velindre Cancer Service:

- We are a specialist treatment, teaching, research and development centre for non-surgical tertiary oncology services to patients from across South-East Wales and wider.

Welsh Blood Service:

- We provide a range of essential and specialised services including the collection and production of blood and blood components to treat patients; and supporting the transplant programmes through the Welsh Transplantation and Immunogenetics Laboratory services.

## Hosted Services

We are responsible for hosting the following organisations:

NHS Wales Shared Services Partnership (NWSSP)

- Provide a range of professional, technical and administrative services to NHS Wales.

Health Technology Wales (HTW)

- Assesses non medicine technologies and produces national guidance on their use in Wales.

## Our workforce

- We employ 7, 834 staff across the Trust
- We also have 51 volunteers who deliver 'added value' roles at the Velindre Cancer Service.



# Who we are

## Velindre Cancer Service

- We serve the Welsh population of 1.7 million.
- During 2024 we:
- Delivered Radiotherapy treatments to 4321 patients.
- Delivered Systemic Anti-Cancer Treatment (SACT) treatments to 5282 patients.
- Delivered 16,650 Outpatient consultations.

## Welsh Blood Service

- We are a national service which covers a population of 3.1 million.
- During 2024 we:
- Collected over 100,000 units of blood.
- We have more than 70,000 volunteer on our bone marrow registry.

## Velindre Charity

- The charity entity of our Trust which in 2023-4 raised £11.8m from events, fundraising, grants and donations and £2.4m from legacies. This supports vital research, staff development and important services to enrich the lives and experience of our patients.



# Context in which this Plan is set



## Well-being of Future Generations Act

The purpose of the Well-being of Future Generations (Wales) Act is to improve the social, economic, environmental and cultural well-being of the Welsh population. The Act requires public bodies to consider the long-term, work better with people, communities, and each other, look to prevent problems and take a more joined-up approach.

## Trust Approach

We welcomed a review by Audit Wales in 2024 that recommended that there should be greater integration of the Well-being objectives into the Trust's strategic objectives and in this way, more clearly drive activity across the organisation. In addition, the Social Partnership and Public Procurement (Wales) Act now requires NHS bodies to consider the new social partnership requirements in our Well-being objectives.

### Milestone

Review Strategic Objectives to further embed the Well-Being Future Generation Act.

This Plan demonstrates action to make meaningful progress towards our existing objectives:

- Reduce health inequalities, make it easier to access the best possible healthcare when it is needed and help prevent ill health by collaborating with the people of Wales in novel ways.
- Improve the health and well-being of our staff and people across Wales, by striving to care for the needs of the whole person.
- Create new highly skilled jobs in Wales and attract investment by increasing our focus on research, innovation and new models of delivery.
- Deliver bold solutions to the environment challenges posed by our activities.
- Demonstrate respect for the diverse cultural heritage of modern Wales.
- Bring communities and generations, together through involvement in the planning and delivery of our services.
- Strengthen the international reputation of the trust as a centre of excellence, teaching research and technical innovation was also making a lasting contribution to global well-being.

# Health and Social Care Context

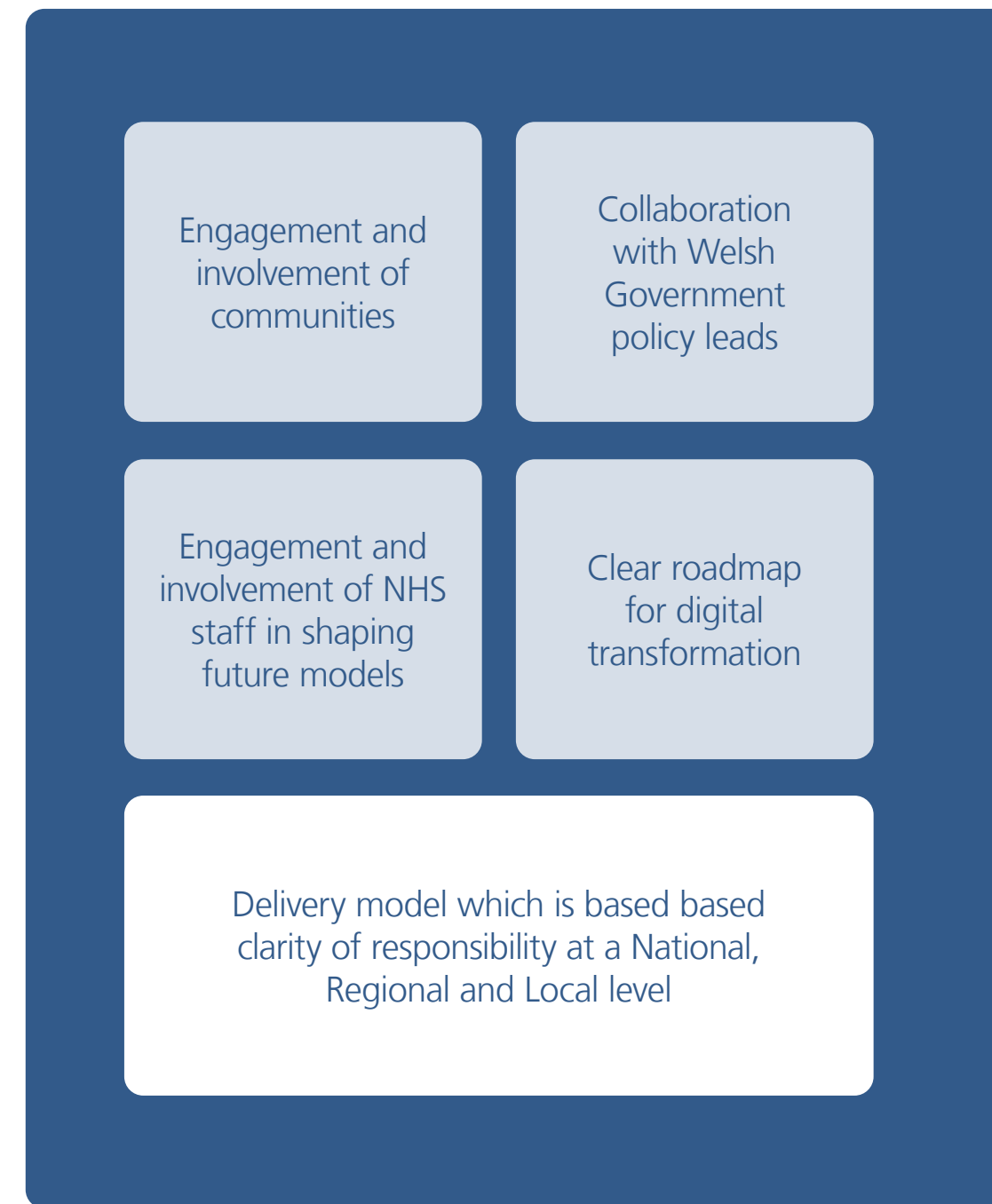
We are aligned to the vision of the Health and Social Care system in Wales, which is set out in “A Healthier Wales”. It sets out the long-term future vision of a whole system approach to health and social care and focuses on health and wellbeing and preventing illness.

Following a nation-wide listening exercise in summer 2024, the Welsh Government published refreshed set of actions to support the delivery of A Healthier Wales. Through this Integrated Medium-Term Plan (IMTP), we will deliver on many of these objectives directly and is ambitious on the role we can play across the whole agenda.

The Cabinet Secretary for Health and Social Care has asked that all NHS Wales organisations also deliver on the expectations across the following priorities:

- Timely access to care
- Population health and prevention
- Building community capacity
- Mental health access
- Women’s health

In addition, this Plan sets out how the Trust will deliver on a series of “enabling actions”, where each has an evidence base to demonstrate improved efficiency and/ or outcomes without driving additional cost. These actions will then be supplemented during 2025 with the findings of the Ministerial Advisory Group and the Trust will work collaboratively with all NHS Wales organisations to respond and implement these further recommendations.



# Our Clinical and Scientific Strategy Frames our Plan

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Our Clinical and Scientific Strategy was approved in 2024 and sets the clinical and scientific direction for all our services over the next five years. The strategy was written by, and for, our clinical and scientific workforce. We adopted a multi-faceted approach to engage with our clinical and scientific communities, partners, and stakeholders, calling on their wealth of knowledge, expertise, and forward-thinking ideas to inform our shared vision, ambitious strategic aims, and objectives.

Our vision is to “be at the forefront of clinical science delivering excellent, high-quality, person-centered care.”

Our strategic aims and objectives are set out below and frame our service development and transformation agenda:

## 1. Leadership & Collaboration

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**Strategic aim:** Strengthen clinical and scientific leadership and collaboration to drive the and scientific agenda.

### Strategic Objectives:

- **Enhance our role** as a specialist provider at a local, regional, national, and international level
- Optimise opportunities for **collaborative working** to deliver person focused, sustainable, efficient, and effective services

### Goals and Deliverables:

- Strengthen working relationships with Health Technology Wales, partnerships and maximise opportunities to collaborate with health boards, academia, third sector and supportive services supported by having a presence on the Wales Cancer Industry Forum.
- Collaborate with partners across the life science sector and undertake horizon scanning to keep abreast of technological, clinical, and scientific advances, ensuring preparedness for implementation.

- Optimise the effectiveness of the Blood Health National Oversight Group to deliver the NHS Wales Blood Health Plan and the recommendations from the Infected Blood Inquiry that fall within its remit.

## 2. Quality

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**Strategic aim:** Deliver high quality evidence-based, person-centred care to improve experience & outcomes.

### Strategic Objectives:

- Through **service transformation** deliver high quality, equitable and sustainable services to meet the needs of our patients and donors
- Optimise patient outcomes, experience by embedding the principles of **value-based healthcare** within all services
- Deliver data driven, **evidence-based clinically led care** that is outcome focused and underpinned by research, expert clinical and scientific knowledge.

# Our Clinical and Scientific Strategy Frames our Plan

## Goals and Deliverables:

- Build capacity and capability through development of the clinical infrastructure in preparation for delivering new treatments, with advanced therapies operational and strategic groups.
- Improve the safety and traceability throughout the supply chain for blood and transplantation products. Implementing a Platelet Strategy, Transplantation Laboratory modernisation, and establishing a Quality Assurance modernisation programme. Develop a clinically and digitally enabled workforce, optimising the use of digital solutions, including artificial intelligence to improve outcomes. Aligning with the Public Health Wales use of AI in Health and Social Care.

## 3. Research, Development and Innovation

**Strategic aim:** Drive clinical & scientific advancements through innovation, research, & development.

### Strategic Objectives:

- Empower the clinical and scientific workforce to drive **transformation and quality improvement** initiatives by engaging in research, development, and innovation.

- Keep abreast of the pace of change in science and technology, ensuring **preparedness for new developments**.

## Goals and Deliverables:

- Maximise opportunities for collaborative research and clinical trials, providing a translational pipeline between the laboratory and clinical areas. Establishing a development forum of Velindre Cancer Service, Welsh Blood Service, Value Based Health Care and Health Technology Wales.

## 4. Workforce

**Strategic aim:** Adapt, develop, and empower a sustainable, diverse, multi-professional clinical and scientific workforce.

### Strategic Objectives:

- Build capacity and capability to deliver a multi-professional, **clinically led model** to ensure that the right professional has the right knowledge and skills to deliver the right care in the right time and place.
- **Equip the clinical and scientific workforce** with the knowledge and skills to respond to changes in care and treatment and harness the use of new equipment, systems, and technology.

- Create a professionally **equitable, fully engaged, empowered** workforce that can meet the delivery challenges working within supportive and **psychologically safe culture**

## Goals and Deliverables:

- Adopt a multi-professional clinically led workforce model that focuses on maximising the use of specialist skills.
- Embed a psychologically safe and support culture of compassionate, inclusive, and collective model of clinical and scientific leadership. Implementing models such as Clinical Supervision and Schwartz Rounds.
- Adopt a multi-faceted approach to improve recruitment, retention, and succession planning across all clinical and scientific professions through developing a Strategic Workforce Transformation Plan.

# The Quality Standards Underpin our Planning

Duty of Quality and delivery across the 12 health and Care Quality Standards drives and underpins the Trust's decisions and planning of services. The Duty aims to:

- Improve the quality of health services
- Help people in Wales have more years in good health
- Listen more to people and patients and act on what is shared



# The Quality Standards Underpin our Planning

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## Priority 1 - Improve patient and donor communications

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### What will we do to achieve this:

1. Ensure 100% of letters following appointments are sent out to patients (unless the patient has opted out).
2. Ensure 100% of letters on the document management system (DMS) are approved and sent within 30 working days.
3. To improve patient communications regarding disease management and treatment.
4. To improve patient and donor appointment communications.

## Priority 2 - Strengthen quality and safety infrastructure

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### What will we do to achieve this:

1. Ensure all levels of patient / donor safety investigations are robust and undertaken by trained investigators at the appropriate levels.
2. Ensure feedback and support is provided to all staff involved in the incident.

3. Develop a Trust wide accreditation plan – with clear trajectory to having nationally / internally recognised accreditation across all core services.

4. Strengthen the quality and safety infrastructure at a service level, including the development of core quality standards and metrics and clinical risk management.

5. Continue to strengthen the quality and safety culture across the organisation, including psychological safety.

## Priority 3 - Improve patient and donor safety

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### What will we do to achieve this:

1. Reduce the harm from sepsis through early identification and treatment.
2. Reduce harm related to urgent clinical information being circulated via email.
3. Fully implement 'Call for Concern' in Velindre Cancer Service.
4. Ensure that 100% of bloods taken within Velindre Cancer Service are reviewed within 48 hours.
5. We will introduce Haemoglobin S testing to detect the presence of sickle-cell trait in specific whole blood donations.

6. Welsh Blood Service to review specialist red cell immunohaematology (RCI) services.

## Priority 4 - Improve opportunities to gather and learn from peoples feedback

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### What will we do to achieve this:

1. Focus on people with additional needs to improve patient and donor experience.
2. Improvements to the mechanisms for staff to support people to speak up safely and with confidence.
3. Increase opportunities to gather patient and donor feedback through utilising SMS messaging.

# There are a number of other priorities across the Trust which make up our Plan

## Women's Health

Women's Health Plan for Wales was launched in December 2024 and illustrates a 10-year vision to improve healthcare services for women. Research shows that while women live longer than men, they live fewer years free from disability, wait longer for pain relief and many women report having their symptoms dismissed.

### Key matters for our services:

#### Blood Services

- The Blood Health National Oversight Group (BHNOG) is responsible for ensuring delivery of the NHS Wales Blood Health Plan, a key workstream of which is anaemia management that has identified as significant opportunity in supporting the Women's Health Plan. The anaemia rates for patients undergoing major elective surgery of which the incidence rate of anaemia is twice as high in women than men (39% vs 19%).

- The anaemia workstream aligns with five of the eight priority areas, menstrual health, endometriosis and adenomyosis, preconception health, menopause and ageing well.

#### Cancer Services

- The Women's Health Plan highlights that as part of National Cancer Recovery Programme, as part of Planned Care on the five cancer types with the poorest cancer waiting-time performance. Two of the five chosen cancer types primarily affect women, (gynecology and breast), as well as inequalities of outcomes also in the three other pathways, (skin, lower gastrointestinal (GI) and urology cancer). One-year survival outcomes for women with bladder cancer, for instance, is significantly lower than men (75% v 59%).
- It also highlights the impact of intersectionality and vulnerability, on outcomes in cancer care and survival. There is published research that shows that increased intersectionality leads to worse patient outcomes with respect to cancer.



# There are a number of other priorities across the Trust which make up our Plan

## Key aspects of our service provision under Women's Health:

### Contraception and Fertility

- Benefits and risks of medical treatment are discussed with the patient prior to treatment start. This is typically undertaken by the patient's consultant and the patient will be supplied with resources such as appropriate MacMillan Cancer Support booklets and Cancer Research UK material.

### Menopause

- All patients treated with pelvic radiotherapy and/or brachytherapy are seen in post-treatment, nurse-led follow-up clinic 6-weeks post-treatment. Hormone profile testing is undertaken to identify premature, radiotherapy induced menopause. Where appropriate, use of Hormone Replacement Therapy (HRT) is discussed with patient. Alternative treatments are also considered (particularly in the case of endometrial cancer patients who, typically, cannot receive HRT following radiotherapy induced menopause). Alternatives include anti-depressants, acupuncture and herbal supplements.

### Pelvic health & Incontinence

- Patients are provided with access to specialist knowledge and expertise at post-treatment follow-up clinic. Tolerance of treatment is actively assessed and awareness of potential toxicities highlighted. Patients are sign-posted to other Velindre cancer services, for instance, late effects gynaecological clinic, clinical psychology, dietetics support, Maggie's.

### Violence against women, Domestic Abuse, Sexual Violence (VAWDASV)

- The Trust delivers VAWDASV training across the trust and has identified VAWDASV champions. The Trust is committed to support the development of an NHS sexual safety process.

### Women's Hubs

- Each Health Board is establishing a Women's Hub by March 2026.
- We will work with our Health Board partners as part of the scoping exercises in Q1; business case development in Q2; approval and communication in Q3; and delivery in Q4 2025/6.

### Milestones

- For both blood and cancer services, adopt a multi-disciplinary approach, including Trust national leadership, to scope the way in which the Trust can add most value to improving outcomes for women and feed this into the development of Women's Hubs ●



# Population Health and Prevention

We commissioned the Life Sciences Hub for a report on Future demand for cancer care in Wales which was received in February 2025 and will provide one of the important foundations for our long-term demand planning.

We recognise that we have a collective responsibility to maintain good health for individuals, communities and the health and social care system with a focus on preventing the onset of poor health and disease and on identifying and intervening early where disease occurs.

For our blood services we want to ensure we are maximising the value of every contact and for our cancer service, we want approach the meaningful moments with have with patients for engagement and education in a consistent and value adding way for Wales cancer outcomes.

Across all our services, we also recognise that the Trust has an important role to strengthen the health protection system to prevent, prepare and respond to existing and future health protection threats, including pandemics, on an 'all hazards' basis.

## Milestones

- Continuing with the multi-disciplinary approach established for the Women's Health plan in Quarter 1, agree our Population Health and Prevention implementation plan in Quarter 2 ●



# Benchmarking and Excellence

We have been reflecting on how to strengthen our organisational approach to benchmarking and excellence, which will further strengthen our culture to be a reflective and learning organisation.

## Milestones

- We have identified a number of work packages, including for instance, our approach to peer benchmarking and international centres of excellence accreditations. This work will be led by a Trust-wide community of practice, building on the maturity in various parts of the organisation already, and will be established in Quarter 1 ●.

## Regional Cancer Programme

The South East Wales Regional Cancer Programme was fully established in autumn 2024. With our system partners, the NHS organisations reviewed the current regional performance against nationally optimised pathways, existing cancer plans as well as the Quality Statement and Improvement Plan for Cancer. We collectively agreed on an initial programme of work:

- Shared Regional Cancer Patient Tracking List (PTL)
- Regional Multi-Disciplinary Team governance and support
- Regional workforce modelling
- Sustainable haemato-oncology model
- Regional model for prehabilitation and rehabilitation.

## Milestones

- The full delivery plans are being worked up by each appointed lead and will be incorporated into the Trust's key milestones going forwards ●

## Cardiff Health Partners

The purpose of Cardiff Health Partners is to drive collaborative innovation, research and education that enhances patient outcomes and reduces health inequalities. By strategically aligning the expertise and resources of Cardiff University, Cardiff & Vale University Health Board and Velindre University NHS Trust (VUNHST), Cardiff Health Partners aims to deliver transformative care, reduce health inequalities and create lasting improvements in healthcare for future generations. The purpose and structure has been agreed by partners in March

2025 and this will also be aligned to:

- Development of an Advanced Therapies Innovation Hub, with linkages with Advanced Therapies Wales and/or Precision Medicine Programme(s)
- Cardiff Cancer Research Hub
- Child Health Services Transformation

## Milestones

- The full delivery plans will be developed under this Programme and incorporated into the Trust's key milestones going forwards ●

# Our Strategic Direction and Intent

Our Purpose:  
**To improve lives.**

Our Vision:  
**Excellent Care. Inspirational Learning. Healthier People.**

Our Values:  
**Caring. Respectful. Accountable.**

## Destination 2033

sets out our **strategic goals** to achieve this:

1. Outstanding for quality, safety and experience.
2. An internationally renowned provider of exceptional clinical services that always meet, and routinely exceed, expectations.
3. A beacon for research, development and innovation in our stated areas of priority.
4. An established University Trust, which provides highly valued knowledge and experience for all.
5. A sustainable organisation that plays its part in creating a better future for people across the globe.



# Our Strategic Direction and Intent

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## Trust Values

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Our Trust values underpin how we plan all service developments across the Trust.

### Caring

We are always kind, supportive, approachable and show compassion to all.



### Respectful

We seek to understand other people's perspectives. We are always open and transparent.



### Accountable

We always take personal responsibility for what we do and how we do it.



## Trust Strategic Objectives

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Our Trust strategy identifies a number of objectives which will support us in achieving our strategic goals.

# Our Strategic Direction and Intent

## Strategic Goal 1: Outstanding for quality, safety and experience

### Our objectives are to:

- Provide harm free care, the best outcomes and a great patient and donor experience
- Listen to, and learn from, patients and donors experiences of our care to drive continuous improvement
- Be an organisation which consistently demonstrates Compassionate Leadership in everything we do
- Be recognised as 'outstanding' by Health Inspectorate Wales, the Medicines and Healthcare Products Regulatory Authority and by UK and international peers for the services we provide

### We will achieve these by:

- Implementing the requirements within the Health and Social Care Quality and Engagement Act
- Implementing a quality and safety management framework which will drive every action we take and decision we make
- Delivering the national programme for Compassionate Leadership across the organisation.
- Continuing the development of a quality led culture which drives the highest standards of care and safety and ensures all staff live the ethos that 'the standard you walk past is the standard we set'.
- Getting the basics right by improving access and transport to our services; reducing the need for journeys for care and improving car parking and public transport if you have to visit us
- Continuing to develop an open, transparent, just and learning culture which allows excellence to flourish
- Developing a value based healthcare programme which supports us in reducing unwarranted clinical variation and inefficiencies, using best practice as our benchmark
- Providing staff with education, training and support to develop improvement skills and knowledge which drive quality and safety standards
- Developing our performance management framework to report our performance on quality, safety and experience in an uncomplicated way to ensure everyone can easily see how we are doing
- Benchmarking the quality, safety and experience of our services nationally and internationally to identify learning and improvement

# Our Strategic Direction and Intent

## Strategic Goal 2: A leading provider of clinical services that always meet, and routinely exceed, expectations

### Our objectives are to:

- Achieve national and internationally recognised standards of care which keep pace with emerging evidence
- Be a trusted and influential partner across Wales to deliver great local health services which meet need
- Become a 'centre for excellence' and leading provider across the UK for the highly specialist services we deliver
- Become a system leader in our areas of expertise nationally and internationally
- Identify a range of new services that the Trust could deliver to improve quality, experience and outcomes across Wales

### We will achieve these by:

- Delivering services which comply with all statutory and professional standards
- Implementing the National Clinical Framework to continuously improve the quality, experience and outcomes of the services we provide
- Implementing our patient/donor/citizen engagement strategy to continuously hear what people need and value from our services
- Co-designing models of care in partnership with people from all parts of the communities with the aim improving access to our services and providing care at home or close to home wherever appropriate and desired
- Working with the community and our partners to reduce inequalities in healthcare
- Rapidly adopting evidence-based research outcomes which improve patient and donors quality, safety and experience of care
- Developing and implementing our clinical and scientific strategies which will set out what services we will deliver over the next ten years; focusing our offer on delivering services that we believe we can truly become leading experts in
- Agreeing with our Local Health Board partners and the Welsh Government the system leadership roles we will undertake to maximise the value we can add for our patients, donors and partners
- Working with the Welsh Government and other partners to plan, fund and deliver world class buildings, facilities and technology for patients, donors and staff
- Benchmarking our performance nationally and internationally to see how we perform against our peers and to identify learning and improvement

# Our Strategic Direction and Intent

## Strategic Goal 3: A beacon for research, development and innovation in our stated areas of priority

### Our objectives are to:

- Deliver world class research, development and innovation to improve tomorrow's care
- Accelerate the implementation of research and new discoveries to improve our patient's and donors experience and outcomes
- Prioritise research, development and innovation that is clinically relevant and patient and donor centred
- Build a sustainable culture of multi-professional research, development and innovation involving the whole organisation
- Publish and promote research of the highest quality which achieves UK and international recognition

### We will achieve these by:

- Implementing the our research, development and innovation strategy across which sets out a prioritised programme of work in cancer, blood and transplant services
- Giving every donor, patient and carer access to the latest research
- Advancing new treatments, interventions and care by increasing new studies locally, widening access to early phase/solid tumour advanced therapies and integrating novel research into clinical studies
- Building a culture of curiosity where research, development and innovation is an 'Always Event' involving all 1500 employees in the Trust, staff challenge the status quo and make it better
- Increasing the number of lead investigators and clinical academics within the Trust
- Recruiting honorary entrepreneurs and academics whilst also developing entrepreneurs, with a flow of staff between our partner organisations on exchanges to attract and retain world class talent
- Creating a cadre of blended professionals, to promote knowledge exchange with impact on improvements of patient outcomes
- Establishing exciting work programmes with our local health and academic partners at Cardiff University, Cardiff Metropolitan University, Swansea University, University of South Wales and Trinity St. David's University.
- Increasing our research, development and innovation infrastructure to keeps pace with our ambition. This will include:
  - Establishing the research hub with Cardiff and Vale University Health Board and Cardiff University
  - Providing world class facilities via the Welsh Blood Service Infrastructure Programme; the new Velindre Cancer Centre; Velindre@ research hubs at University Health Board partners; and the Collaborative Centre for Learning and Innovation
  - Developing the Library Service into a sustainable Trust wide Evidence Centre
- Generating reinvestment income through partnerships with industry for commercial research, development and innovation

# Our Strategic Direction and Intent

## Strategic Goal 4: An established 'University' Trust which provides highly valued knowledge and learning for all

### Our objectives are to:

- To deliver inspirational teaching which is enhanced and informed by world-class research and professional practice
- Create a supportive and enriching learning environment for all of our learners
- Provide a learning experience that learners rate as excellent
- Be rated as a high quality provider of education and learning nationally and internationally in a number of priority areas
- Raise the profile of the University Trust on a UK and international stage

### We will achieve these by:

- Developing a highly quality education and training programme which is aligned to the needs of our local, national and international partners
  - Appointing visiting professors and Professors of Practice to the Trust and aligning their work with priority areas of industry and business partners
  - Attracting academics with national/international reputations and foster partnerships with leading organisations from around the world in our stated areas of priority
  - Equipping all learners to make the best use of physical and digital learning resources and utilise Cardiff as a living classroom
  - Increasing our investment in a range of funded strategic initiatives to ensure staff have the time and environment to undertake learning. We will invest additional funds in:
    - Supporting our workforce to undertake MSCs and PhDs
    - Supporting our workforce to take up Fellowships
    - Supporting our workforce to obtain professional, technical and role specific qualifications and accreditations
- Providing research and learning opportunities for students from our university partners, industry and other sectors
  - Developing unique learning opportunities in specialist areas including the Velindre School of Oncology and Welsh Blood Service Modernising Scientific careers programme
  - Developing a marketing and communications strategy which attracts learners to our programmes and raises the profile of the Trust
  - Identifying a range of partners and collaborators to enhance our offer and brand across the globe

# Our Strategic Direction and Intent

## Strategic Goal 5: A sustainable organisation which contributes to a better world for future generations across the globe

### Our objectives are to:

- Be recognised as a leading NHS Trust for sustainability nationally
- Be a carbon 'Net Zero' NHS organisation by 2030
- Become an anchor organisation in the communities we serve which enhances their economic, social, environmental and cultural well-being
- Support the transformation from ill-health to well-being across Wales

### We will achieve these by:

- Developing clinical service models which support sustainability e.g. more care at home
- Implementing our sustainability strategy
- Applying the principles of the circular economy into our business processes through design, procurement, re-use and lifecycle
- Providing a comprehensive education and learning programme which provides staff, patients, donors and partners with learning opportunities to embed the 5 ways of working of the Well-Being of Future Generations Act and supports them to make positive behavioural changes ('a little step every day')
- Implementation of our carbon reduction plan which will see us achieve Net Zero and transition to renewable energy for our services and facilities.
- Investing in a range of refurbishments and new buildings which will support our carbon reduction and healthier buildings and healthier people approach. These include:
  - Major refurbishment of the Welsh Blood Service
  - Construction of a Radiotherapy Satellite Centre at Nevill Hall
- Construction of a new Velindre Cancer Centre
- Implementing an attractive approach to agile working for our staff which reduces avoidable travel, improves well-being and offers the potential to support money going into local communities
- Improving our offer for staff, donors and patients in travelling to and from our facilities on foot, bike and public transport
- Using our procurement activities and NHS Wales Shared Services capability to drive a sustainable approach and achieve wider ethical and social value in areas including local employment and prosperity; carbon reduction; anti-slavery and unethical practices
- Working with partners and the local community to identify ways in which we can deliver wider benefits and value to society through employment and apprenticeships, the use of our buildings and facilities as community assets (e.g. local schools and charity group using them; arts programmes); becoming an anchor institution in place making; and procurement to maximise the reach of the Trust within the Government's Foundational economy

# Our Strategic Direction and Intent

## Delivering our strategy will support us in

- Delivering excellence in our core clinical services
- Placing quality and safety at the centre of everything we do
- Developing our clinical, scientific and healthcare professional leadership
- Becoming world leaders in specific areas of research, development and innovation
- Expanding our culture of learning across staff, students and the communities we work with
- Delivering carbon net zero operations and wider benefits and social value for our communities
- Moving towards a future which will see us becoming a valued partner in the prevention, public health and wider social policy areas; helping to find solutions to deep-seated problems in Wales such as poverty and deprivation

To support the delivery of our strategic goals also have Trust Board approved strategies for both the Welsh Blood Service Strategy the Velindre Cancer Service.

These are supported by a range of other services (see part 6 for of our plan for additional information) who have also developed 5 year strategies:

- Research Development and Innovation
- Digital
- Workforce and Organisational Development
- Estates and Sustainability

Our strategic plans provides the Trust with a clear line of sight and the 'golden thread' between our Purpose, Vision, Strategic Goals and the priorities contained within our Integrated Medium Term Plan. This has enabled us to effectively prioritise our activities and resources over the coming years as summarised below.

Our service and enabling plans outlined within this IMTP outline the specific actions we will take to deliver these organisational priorities.



# Working with our Health Partners

The Trust works with a wide range of partners including health, local authorities, emergency services and the voluntary/charity sector. Our primary health partners are set out below:

Organisation	Relationship
Aneurin Bevan University Health Board	Commissioner
Betsi Cadwaladr University Health Board	Commissioner
Cardiff and Vale University Health Board	Commissioner
Cwm Taf Morgannwg University Health Board	Commissioner
Hywel Dda University Health Board	Commissioner
Powys University Health Board	Commissioner
Swansea Bay University Health Board	Commissioner
Welsh Ambulance Service NHS Trust	Provider
Public Health Wales NHS Trust	Provider
Health Education and Improvement Wales	Provider
NHS Wales Shared Services Partnership	Provider of services
Digital Healthcare Wales (DHCW)	Provider of services
Welsh Health Specialist Services Committee	Specialist Commissioner

Effective planning and commissioning of services is fundamental to achieving the best outcomes for the people we serve across Wales and the cultural shift required to reduce health inequalities, improve population health and well-being and achieving excellence across Wales.

The Trust has worked in close partnership with our Local Health Board partners to ensure that our key strategies are aligned, that there are a clear set of shared priorities and to ensure that we can provide sufficient capacity and capability to deliver commissioned services of the highest quality.

# Our Agreed Programmes of Work

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We are committed to working with patients, donors and our health and public service partners to understand, design and deliver services which are truly person focused and deliver the experience and outcomes that people value most.

Our focus during this period will be on:

## Delivering the Fundamental Cornerstones of Healthcare Provision:

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These include:

- Implementing the requirements of the Health and Social Care (Quality and Engagement) (Wales) Act 2021, the National Quality and Safety Framework and the National Clinical Framework to provide services of the highest possible quality
- Delivering services that meet the national clinical quality and safety standards and provide an excellent experience
- Treating patients as quickly as possible
- Providing blood and blood products to our partner Health Boards to support the provision of treatment and care to people across Wales

- Developing agile and flexible capacity plans which allow us to respond quickly to changes in demand for our services
- Supporting the health and well-being of our staff who have been working in extremely challenging circumstances for the past three years
- Workforce redesign – optimising multi-professional patient / donor centered care predicated on co-production and top of licence working

## Improving Population Outcomes and Reducing Inequalities:

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We will continue to work with our Local Health Board and wider partners to identify opportunities where we can support the improvement of public health and population outcomes through primary and secondary prevention. This will focus on a number of areas:

- Improving access to our services to increase uptake and reduce inequalities and ill-health
- Strengthening our decision-making to consciously address poor outcomes and inequalities in the communities we serve
- Working with our health partners where it is clear and compelling that we can add value and make a difference

## Regional Working, Partnerships and Collaboration to Improve Outcomes:

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We will:

- Work with Local Health Board partners to strengthen our support the delivery lead of improved cancer outcomes for patients in South East Wales
- Develop the Velindre@ research hub philosophy across all LHB partners in South East Wales
- Further develop the Blood Health Oversight Group work programme to improve the prudent use of blood and blood products across Wales

# Delivery of Transformation Programmes

## Velindre Cancer Services

We will progress a number of key areas of work:

- Implementing the final phase of the Acute Oncology Service regional model
- Continue to improve pathways for unscheduled care patients
- Delivery of the Cardiff Cancer Research Hub

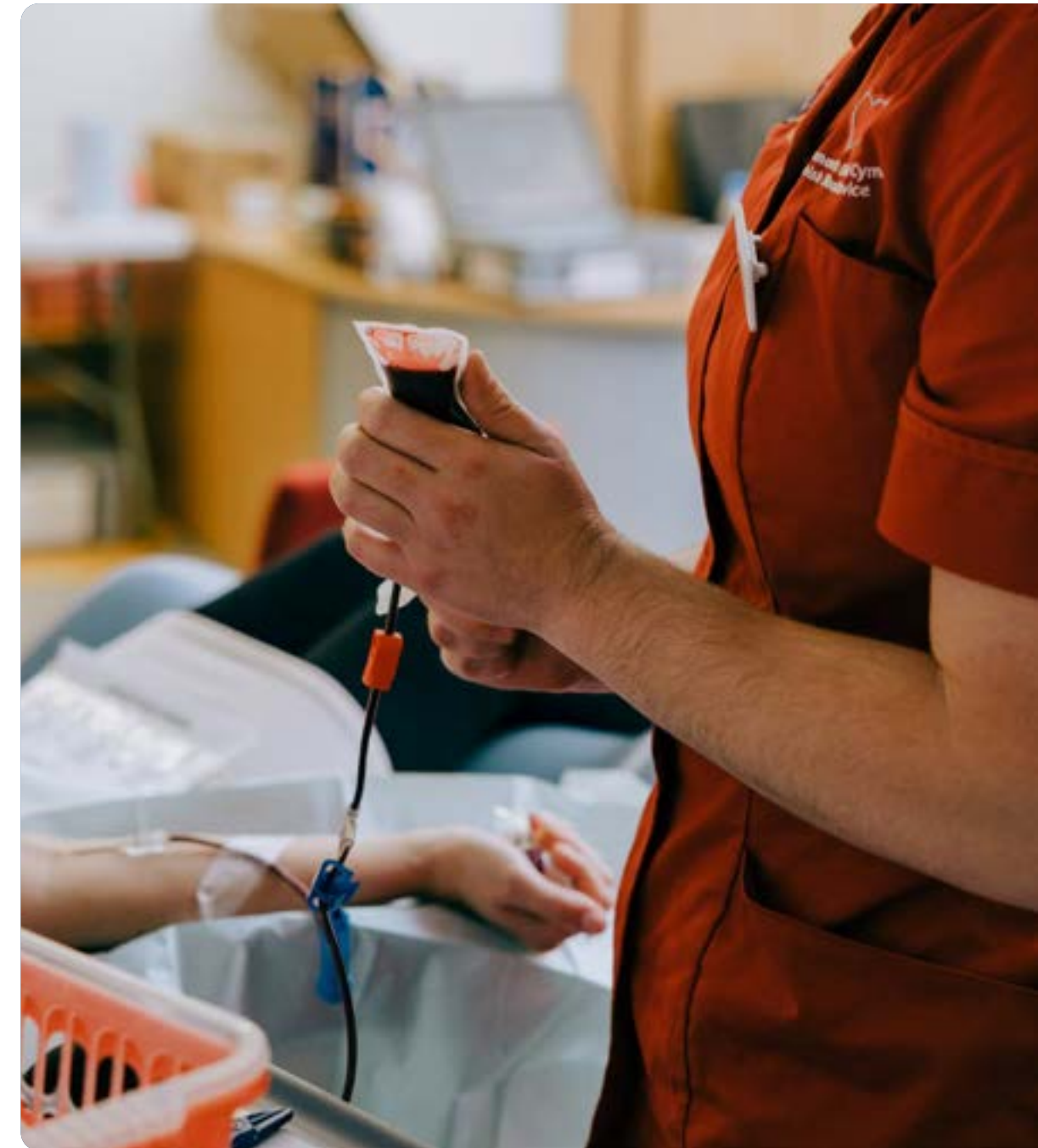
Development of the infrastructure to support regional cancer services including:

- Implementation of the Integrated Radiotherapy Solution in 2025
- Construction and delivery of the new Velindre Cancer Centre in Whitchurch, Cardiff in 2027
- Construction and opening of the Radiotherapy Satellite Centre, at Nevill Hall Hospital in Abergavenny, in 2025

## Blood Services

We will progress a number of key areas of work within blood and transplant services including:

- Laboratory Modernisation programme:
  - Refurbishment of the Talbot Green facility by 2027
- Plasma for Fractionation: developing the case for change and delivery of the Programme



# Our Approach to Planning

Our Integrated Medium Term Plan starts with the actions to develop our core services across Blood and Cancer. It includes a mixture of transformation and on-going service development activities.

In our 2024-2027 Integrated Medium Term Plan, there were 12 actions due to be completed in full in 2024/5 and these were delivered.

We are developing our reporting for this year's Plan in two key ways:

- We will include reporting against outcomes;
- We will report against our specific milestones to allow progress to be tracked clearly against longer-term activities.

## Engagement

As outlined above, this Plan continues for the most part, strategic transformation activities that that have been effectively engaged during design and decision-making. Where this Plan highlights further service design and development activity, we commit that our staff, patients, donors and communities will have a strong voice in creating effective, joined up services. In 2025, we will also strengthen our partnership with our Health Board partners in embedding a 'Community Delivery by Design' approach that aims to redesign existing services to deliver greatest value and improve patient experience.

In recent years, we have made important developments in our patient engagement approach, which was co-produced with Cwmpas, and also in our community engagement approach via Velindre Voices.



## Section 2 Delivering our Services

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# Welsh Blood Service

The Welsh Blood Service (WBS) is an operating division of Velindre University NHS Trust collecting voluntary, non-remunerated whole blood and blood component donations from the public and providing advice and guidance regarding appropriate blood component use in Health Boards throughout Wales.

Donations are processed and tested at the laboratories based in WBS headquarters in Talbot Green, Llantrisant, before distribution to 17 customer hospitals throughout Wales. We have a Stock Holding Unit (SHU) and staff base in Wrexham, north Wales and also have staff based in Bangor, north Wales and Dafen, west Wales. The WBS laboratory services also include antenatal patient testing and a reference centre for complex immuno-haematology investigations.

We support the solid organ and stem cell transplant programmes that run out of Cardiff and Vale University Health Board and manage the Welsh Bone Marrow Donor Registry, which provides stem cell products nationally and internationally. We also provide the UK National External Quality Assurance Scheme for Histocompatibility and Immuno-genetics (NEQAS) an international quality assessment service.

In addition, we hold a wholesaling dealers licence to supply medicinal blood products to our customer hospitals. The service models are supported by strong Research, Development and Innovation derived from within WBS and working closely with other Blood Services across the home nations and globally. Investing our time in supporting and facilitating Research, Development and Innovation is fundamental in ensuring we remain a leading service within the fields of blood component, transplant, and transfusion services.

We are committed to ensuring the services we provide meet the high expectations required by patients, donors, staff and partner organisations across health, academia and industry. Our services must be high quality, clinically safe, effective and underpinned by a strong evidence-base.

Strong clinical and scientific leadership and governance helps to ensure that the quality of our service remains at the forefront of our decision-making. This assurance is maintained through our commitment to ensuring the services we provide meet the high standards of our regulators and auditors, such as the Medicines and Healthcare Regulatory Agency (MHRA), Human Tissue Authority (HTA), UK Accreditation Services (UKAS) and the Health and Safety Executive (HSE).



# Welsh Blood Service

The delivery of our blood, transfusion and transplantation services requires us to work in partnership and collaboration with colleagues within our corporate and support functions:

- The modernisation of our digital services is fundamental to the provision of modern services that minimise unnecessary work, maximise efficiency and support clinical safety.
- Data from our Data & Insight Service is used to support planning of our service delivery and development and provides a means of monitoring performance and measuring our success.
- Strong corporate governance and project structures, provided by our Innovation and Improvement Hub and business support team, are important in ensuring successful delivery and continuous improvement are embedded throughout the service.
- Maintaining a safe, sustainable and efficient estates infrastructure from which to run our services and look after our staff, is an essential requirement of WBS and is managed in partnership between our corporate estates team and local facilities team.
- Working with our People and Organisational Development team helps ensure that the well-being of our staff remains an important part of service.
- Strong financial and procurement support helps to ensure services are delivered within our agreed financial envelope and we meet our Standing Financial Instructions (SFIs) obligations.



# Context

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## Infected Blood Inquiry

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The Infected Blood Inquiry published its final report with recommendations in May 2024. The Infected Blood Inquiry was an independent public statutory inquiry established to examine the circumstances in which men, women and children treated by national health services in the UK were given infected blood and infected blood products, in the 1970s, 80s and very early 90s.

Learning the lessons and making change as blood services in the interest of public and patient safety will continue to be core to the planning of blood service provision. The experiences of the infected and affected will not be forgotten and will continue to underpin our approach to patient safety.

The Trust is part of a national Infected Blood Inquiry Next Steps Oversight Group to bring together organisations who are responsible for implementing the Inquiry's recommendations. Important aspects of this for the Trust include working with Digital Health and Care Wales on the digital solutions to ensure the traceability of blood and maintaining a strong safety culture in line with the Duties of Quality and Candour.

## Plasma for Medicines

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The opportunities for Plasma for Medicines could have a significant impact on the blood product collection and supply chain for Wales.

Plasma makes up 55% of our blood and contains antibodies which strengthen or stabilise the immune system. It is used to save lives during childbirth and trauma and is used to treat patients with life-limiting illnesses such as immune deficiencies.

The UK was unable to produce medicines from human-derived plasma between 1998 and 2021 as a legacy of Variant Creutzfeldt–Jakob disease, which meant the NHS relied on imported medicines. The lifting of the ban in 2021 followed a review by the Commission on Human Medicine and the Medicines and Healthcare products Regulatory Agency after a thorough review concluded it was safe to use UK-sourced plasma for manufacturing treatments. In 2021, UK Blood Services began collecting convalescent plasma for two major UK-wide coronavirus treatment trials.

The Trust already collects plasma through whole blood donation and is used for manufacturing fresh frozen plasma and cryoprecipitate, which typically helps treat patients with heavy blood loss. The

Welsh Blood Service supplies fresh frozen plasma and cryoprecipitate to hospitals across Wales. Due to the increasing global clinical demands for Plasma-Derived Medical Products, we are working with Welsh Government to introduce a plasma for medicines approach in Wales to meet the future demand for these lifesaving products and reduce our reliance on international importation. This could build a more resilient and domestic medical supply chain, boost economic growth and make an important contribution to the development of Life Sciences in NHS Wales.

# Context

## Continuous Improvement

A long-term, integrated whole-system approach is being implemented to ensure sustained improvements across the WBS. This incorporates leadership and governance and the improvement culture, behaviours and skills at every level.

The action plan incorporates a tailored approach to coach and support the organisation to embed a culture of service improvement (SI) across WBS. It aims to maximise the resource we have available to us and focus effort where it's needed most.

The whole system approach focusses on three themes:

**Culture** – create a culture that generates interest and involvement to drive SI.

**Knowledge** – develop the relevant skills to underpin SI activity and culture.

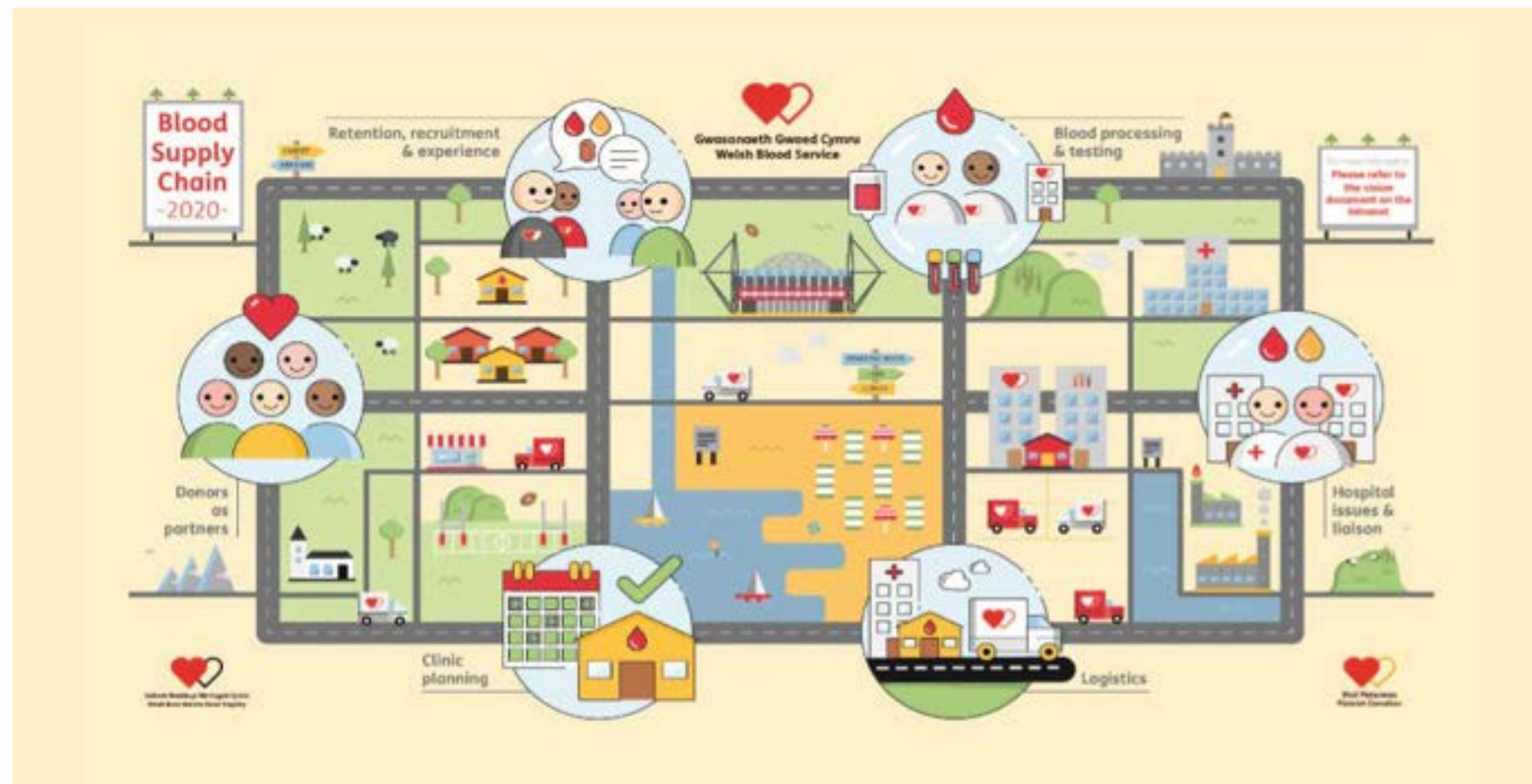
**Activity** – identify areas for improvement and empower staff to make changes.

Service Improvement is at the core of each of the seven strategic themes of the 5 year strategy. It exists to build upon our existing services and capabilities to improve what we do currently.



# Context

## Our Blood Supply Chain Model



Welsh Blood Service Vision: To be recognised by the people of Wales and our peers as a leader in transplant and transfusion services.

Strategic Themes in our Welsh Blood Service Five Year Plan:

1. Build a sustainable donor base that meets clinical need and represents the diverse communities we serve.
2. To provide a world class donor experience.
3. Drive the prudent use of blood across Wales.
4. Quality, safety and value: doing it right, first time.
5. Achieving excellence in research, development and innovation to improve outcomes for our donors and patients.
6. Sustainable services that deliver the greatest value to our communities.
7. Develop great people and a great place to work.

# Transfusion Services Modernisation

To review and develop service processes, practices and workforce requirements to support a transformational service model across all transfusion service areas.

## Milestones

- Manufacturing and Distribution** – There are two core aims for this Plan. Firstly, to develop a processing model that allows the Welsh Blood Service to supply plasma for fractionation. Secondly to review and optimisation of testing processes and the use of technology including automation across all transfusion laboratories.
  - Development of a platelet strategy to optimise provision of routine and specialist platelet components ●
  - Develop process for plasma ▲
  - Implement stock management system for wholesale products ▲
  - Review strategy Automated Blood Processing system ▲
  - Review strategy X Ray technologies ▲

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
Increase in the retention of staff. Increased opportunity for staff development aligned to workforce and succession planning	Operational efficiencies in the management and processing of blood and transfusion services.  Platelet production efficiencies and reduction in wastage.  Operating efficiencies in the testing process in transfusion services	Improved supply chain security for plasma derived medicines.  Improved clinical outcomes for patients by utilising enhanced diagnostics and testing to support optimal treatment

- Donor Testing** - The introduction of new tests and services in line with advances in clinical and scientific practices.
  - Implement Nucleic Acid Testing ●
  - Introduction of Haemoglobin S Testing ●
  - Review strategy Microbiology testing ▲
- Red Cell Immunoheamatology** - Review of the operating model of Red Cell Immunohematology services, to include skill mix and service provision
  - Review current contractual arrangements for laboratory staff ●
  - Review requirements for Laboratory Automation ●
  - Review current Phenotyping programme ▲
  - Provision of alternative liquid nitrogen storag ●
  - Implementation of Genotyping Service ▲

# Transplantation Services Modernisation

To review and develop service processes, practices and workforce requirements to support a transformational service model across all transplantation service areas including the Welsh Bone Marrow Donor Registry.

## Milestones

- **Welsh Bone Marrow Donor Registry** – To facilitate the growth of the Welsh Bone Marrow Donor Registry to achieve and explore the opportunities to expand stem cell collection.
  - Develop a 5-year strategy for the registry ●
  - Implement a new digital system ■
  - Expand Stem Cell collection services and explore opportunities for collection services for aligned registry services, Welsh transplant centres, other UK/International registries, and Advanced Therapy Medicinal Products (ATMP's) ▲
- **External Quality Assessment (EQA) Service**
  - Provide a new digital solution for the specialist external quality assessment (EQA) service for laboratories around the world supporting organ transplantation ●

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
For External Quality Assessment (EQA) Service: Increased productivity; Flexibility to develop service; Capacity to expand customer base	A digital solution to support the increasing volume of data and users as the registry grows, ensuring that performance and functionality are maintained without degradation  Enhance efficiency and accuracy and decreased turnaround times in Transplant Laboratories	A clear strategic direction for the Welsh Bone Marrow Donor Registry  Resilience in the stem cell supply chain at Welsh and UK level.

- **Transplant Laboratory modernisation**  
Provide transplantation laboratories modernisation opportunities to develop a service that is integrated, efficient, maximises the use of innovative technology and minimises duplication and waste.
  - Review and begin implementation antibody testing strategy ■

# Collection Services Modernisation

To review and develop service processes, practices and workforce requirements to provide a transformational collection service. We will achieve this through excellent donor engagement, a clinically led collection team model and revising the blood collection clinic planning and logistics.

## Milestones

- 1. Donor Engagement** – Implement improved donor and advocate interaction functionality.
  - Develop and implement new Donor and Advocate Strategy ●
  - Introduce a donor experience hub ●
  - Implement omni-channel software to provide a single platform for managing donor interactions ●
- 2. Operations** – Implement a clinically led collection team model, enable live connectivity to donation clinics and introduce enhancements to donor safety and experience.
  - Undertake a workforce review of collection teams and introduce a new nurse-led model ●

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
Increased donor retention for the blood groups in demand. Increased opportunities for donors and supporters to engage and support as needed	Greater choice of donation locations and times for donors. Improved collection efficiency: <ul style="list-style-type: none"> <li>- Reduction in manual data entry and paper usage</li> <li>- Reduction in vehicle maintenance costs and carbon footprint</li> <li>- Reduced volume of manual data entry and steps within the rostering process</li> </ul>	Improved clarity of roles and responsibilities, providing a clear scope of practice

- Implement a new process for haemoglobin testing utilising HemoCue devices in place of copper sulphate ●
- Enable live connectivity between blood collection clinics and the Blood Establishment Computer System (BECS) ■
- 3. Resource, Planning & Logistics** – Revise the blood collection clinic portfolio, develop a fleet strategy that meets the future needs of

- the service and provide robust and effective rostering processes.
- Introduce blood clinics involving overnight stays (tours) for North Wales collections teams ●
  - Develop a fleet strategy that meets the current and future demands of the service ▲
  - Introduce enhanced rostering systems for Collections and Transport & Logistics staff ■

# Talbot Green Infrastructure

Strategic infrastructure improvements to create a fit-for-purpose, resilient building with robust mechanical and electrical infrastructure, supporting modern transfusion and transplant laboratories that are future proofed and efficient.

## Milestones

- Develop integrated Outline/ Full Business Case to recommend construction to commence in 2026/7 ●

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
A reduction in carbon emissions and energy consumption.	<ul style="list-style-type: none"> <li>• Ability to sustain and grow service delivery in line with NHS requirements.</li> </ul>	Operational efficiencies in the management and processing of blood and transfusion and transplantation services.

# Digital Modernisation

To modernise the existing software systems within the Welsh Blood Service to include the Blood Establishment Computer System (BECS), the current Welsh Histocompatibility and Immunogenetics Service IT (WHAIS IT) system and Welsh Laboratory Information Management System (WLIMS) 2.0.

## Milestones

1. **Blood Establishment Computer System (BECS)** – Procure, implement, validate and transition to a new Blood Establishment Computer System for use by the Welsh Blood Service to replace the current solution. A new Blood Establishment Computer System will provide the blood service with unrivalled functionalities using the latest technology to provide a service that meets the needs of the population of Wales.
  - Implement Blood Establishment Computer System ■
2. **Welsh Histocompatibility and Immunogenetics Service (WHAIS)** – Replace the Welsh Histocompatibility and

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
BECS - Improving Patient outcomes by ensuring a sustainable service, driving the use of blood and building our donor base	<p>WHAIS Reducing reliance on transcription, manual data entry, and on paper records, while improving sample management, traceability and turnaround times. Also making the service more adaptable to service user needs, and future changes.</p> <p>WLIMS - Reducing reliance on transcription, manual data entry, and on paper records, while improving sample management, traceability and turnaround times. Also making the service more adaptable to service user needs, and future changes. Compliance with transfusion and digital guidelines.</p>	

- Immunogenetics Service digital system which has been in operational use for approximately 30 years and is no longer fit for purpose. The new system will allow for future service development
- Implement Welsh Histocompatibility and Immunogenetics Service digital service ●

3. **Welsh Laboratory Information Management System (WLIMS 2.0)** – To work with the National WLIMS 2.0 programme to make sure the needs of the Welsh Blood Service are delivered through the National system.
  - Implement Welsh Laboratory Information Management System ●

# Velindre Cancer Service

A key focus for us from 2025/26 – 2027/28 will be the implementation of our enhanced regional clinical model and the successful delivery of our new infrastructure programmes. We want to ensure that, in all areas, we are consistently working in ways which result in the best possible outcomes for our patients. We will do this by continuing to empower our teams to design the best possible processes and pathways and to lead change. The input of our patients, their families and our partners across south-east Wales will be key to this process.

The ambitious programme of change we are taking forward includes major undertakings such as work to support the new Velindre Cancer Centre (nVCC) development and the delivery of the Integrated Radiotherapy Solution (IRS) programme. We are committed to delivering initiatives which will improve the support provided to our patients across the entirety of their care pathways. This will include significant proactive change in service provision in outpatients, SACT, and radiotherapy as well as plans to further develop our active engagement

and support to primary care, palliative care and therapies. This list is not exhaustive.

All of this will happen against a background of growing demand for cancer services and in an environment characterised by ever increasing complexity. New systemic therapies are presenting new treatment options and changing the way in which patient experience cancer treatment. Such advances are undeniably positive but, they do present the healthcare system with certain challenges. We need to optimise our horizon scanning and to cooperate with partners in a proactive way to ensure that we are able to anticipate, to manage and to maximise the impact of these exciting developments. In responding to demand, we have always sought to innovate. Changes such as the introduction of virtual consultation methods, the extension of SACT delivery with additional service through the mobile unit with Tenovus, and the expansion of the SACT homecare service are all adaptations which will need to be maintained and optimised in the medium term. The expansion of outreach services to service the requirements of patients across south-east Wales, ahead of our transition to a new Velindre Cancer Centre, is an important part of our service plan and will help us manage the impacts of growing demand.

The leadership and co-ordination of this work through the Velindre Cancer Service Futures programme will continue. The delivery of the Velindre Cancer Service contribution to key regional programmes e.g. the Acute Oncology Service, the continued delivery of the Nuffield Recommendations and the implementation of outreach service improvements are all activities which will form part of the Velindre Cancer Service Futures agenda. These arrangements will promote a truly coherent approach and ensure that all the initiatives we are progressing are properly linked to wider service modernisation and transformation projects.

We have also entered the implementation phase of the Integrated Radiotherapy Solution (IRS). This constitutes a further key work programme which underpins the ongoing delivery of sustainable radiotherapy services as well as enabling the new Velindre@ Nevill Hall Radiotherapy Unit.

Together these changes constitute an agenda of unprecedented change for Velindre Cancer Services. This agenda will be progressed alongside plans to repatriate services back to local health boards, where appropriate, following a period when centralised delivery at the Velindre Cancer Centre in response to the COVID-19 pandemic was operationally necessary.

# Velindre Cancer Service

The delivery of our plan for 2025/26 – 2027/28 will depend on effective partnership working with our local health board partners.

Our strategic priorities for 2020-2025 are:

**Priority 1:** Equitable and consistent care, no matter where; meeting increasing demand.

**Priority 2:** Access to state-of-the-art, world-class, evidence-based treatments

**Priority 3:** Improving care and support for patients to live well through and beyond cancer

**Priority 4:** To be an international leader in research, development, innovation and education

**Priority 5:** To work in partnership with stakeholders to improve prevention and early detection of cancer.

Alongside the range of major service transformation initiatives we plan to deliver, the sustainable delivery of patient services and the provision of sufficient capacity continues to be our primary focus. Our capacity challenge will not only be in the delivery of treatment by SACT and radiotherapy but, also in the case of other services which support patient care including radiology, therapies, pharmacy and palliative care.

Responding to these challenges will require the delivery of outpatient and SACT services at local hospital sites in collaboration with health boards as well as expanding capacity across our full range of services at the cancer centre. This will allow us to plan to meet expected levels of demand and ensure equitable access to our services for patients living right across south-east Wales.

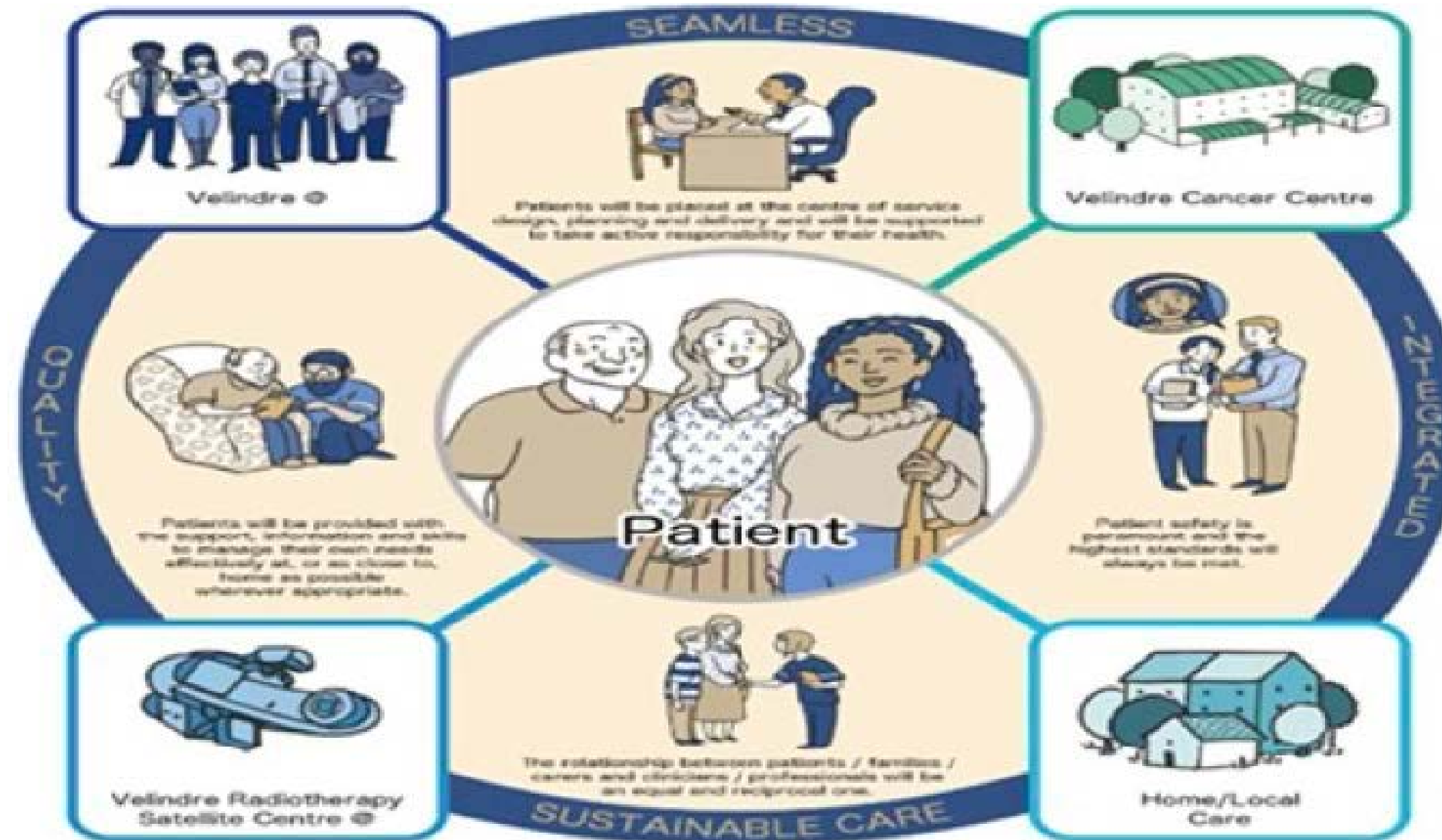
Velindre Cancer Service Futures is the vehicle which will deliver the changes we need to realise in order to successfully meet our ambitions including the VCS element of the regional work and the implementation phases of the TCS programme. Established in 2020, Velindre Cancer Service Futures is a clinically led initiative that directs the development of the clinical model and future service configuration, working in partnership and collaboration with staff, patients and carers and the public. It will ensure that the Cancer Centre systems and processes remain fit for purpose and patient centred, now and in the future. It will also enable the VCS aspects of regional collaborative working.

Core to service change is ensuring that the voice of the patient, their carers, families and the public are involved in shaping what we do. To enable this, a new framework for engaging with patients and the public will be developed to draw on best practice and set our expectations and ideas.



# Velindre Cancer Service

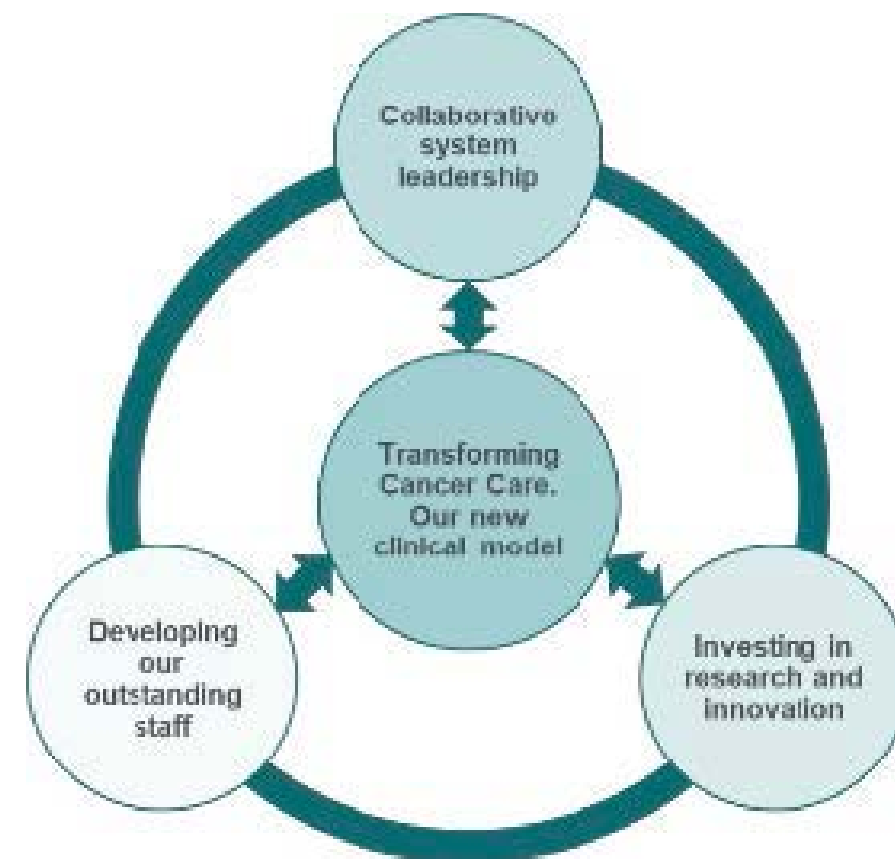
## Our Clinical Model



# Velindre Cancer Service

## Our Approach

The four areas of focus within our Velindre Cancer Service Futures programme will allow us to realise our vision. These are deliverable within an overall environment of maintaining our excellent quality, operational and financial performance, which also encourages us to be enterprising.



### Responding to more people living longer with cancer: an improved model of care:

- An improved model of care: at home or local where possible, centralised where necessary, and based around delivering equitable access to high quality care and research.
- A new state-of-the-art cancer centre in Cardiff networked across South Wales delivering acute oncology services and research centres of excellence.
- Velindre@ Nevill Hall Radiotherapy Unit and chemotherapy in a variety of outreach locations across south-east Wales.
- Delivery of outreach services in V@ facilities in Local Health Boards.
- Complete digital transformation through our 'connecting for the future' programme.

### Collaborative System Leadership:

- Play a lead role in the development of a system wide approach to cancer services in the region.
- Continue to lead and contribute to key areas of care and research, including through embedding our new clinical model, both nationally and internationally.
- Support the development of the diagnostic network and single cancer pathway as key enablers of service transformation.
- Support the development of integrated health and social care and research models across south Wales/Wales.

### Investing in research and innovation:

- Increase participation in clinical trials, Velindre sponsored studies, and become renowned for qualitative research.
- Developing a research network across south-east Wales with our LHB and University partners.
- Lead the research and innovation agenda through taking an active leadership role in partnership with universities, commercial partners and the Research Network.
- Increase our opportunities to be at the forefront of innovation.
- Support the development of integrated health and social care and research models across south Wales/Wales.
- Developing our outstanding staff:

### Developing our clinical, scientific, nursing and allied health professional leadership capability

- A consistent approach to quality improvement through the Quality and Safety Framework.
- Developing a comprehensive approach to Education and Training.
- A focus on engaging and empowering staff.
- New workforce skills and leadership development to meet our workforce challenges.

# Velindre Cancer Service: How we will Meet Our Challenges

The Challenge...	We will meet this by..
Cancer Incidence is increasing	<ul style="list-style-type: none"> <li>✓ Expanding our role in the early diagnosis of cancer</li> <li>✓ Promoting effective public health messages— making every contact count</li> </ul>
There Continues to be Variation in Outcomes Throughout Wales	<ul style="list-style-type: none"> <li>✓ Delivering more services of consistent quality in outreach settings closer to patients' homes</li> <li>✓ Delivering a Radiotherapy satellite centre, in collaboration with Aneurin Bevan University Health Board</li> <li>✓ Leading on the standardisation of Acute Oncology Services across and the development of a Cancer of the Unknown Primary service across SE Wales</li> </ul>
There is a Gap Between Forecast Demand and Supply Which We Need to Close	<ul style="list-style-type: none"> <li>✓ Continuing to implement techniques which are resource neutral or that deliver efficiencies elsewhere in the process</li> <li>✓ Developing a robust, flexible, highly skilled and responsive workforce</li> <li>✓ Rationalising treatment pathways and identifying efficiencies</li> </ul>
Treatments are Becoming More Complex and New Advances are Continuously Emerging	<ul style="list-style-type: none"> <li>✓ Ensuring, in collaboration with health board partners, that sufficient linear accelerator capacity is available to accommodate new techniques</li> <li>✓ Effective horizon scanning</li> </ul>
More People are Living With and Beyond Cancer	<ul style="list-style-type: none"> <li>✓ Ensuring timely access to robust, high quality Clinical Psychology and Therapies services</li> </ul>

# Context

## National Cancer Context

Our Plan for cancer services is underpinned by the Quality Statement for Cancer. Quality statements are part of A Healthier Wales and form the National Clinical Framework as the national planning framework for specific clinical services.

The National Clinical Network, part of the NHS Executive, published the Cancer Improvement Plan 2023-2026. This sets out the ambition for Wales to improve cancer patient outcomes and reduce health inequalities. It highlights the importance of planning for the future delivery of innovative new service models, treatments and technologies to secure recovery, sustainability and improvement in line with the 22 Quality Attributes set out in the Quality Statement for Cancer. There has been recent review of the Welsh system by Audit Wales in early 2025 also which will also support and inform our next steps as a cancer system.

This and further development of the national strategic direction in 2025, will provide the foundations for the next version of the Velindre Cancer Services Strategy.

## Milestone ●

Development of the next version of the Velindre Cancer Services Strategy.

## New Velindre Cancer Centre

In Spring 2024, we finalised the arrangements with the Acorn consortium, "Project Co", to design, build and maintain the new Velindre Cancer Centre, scheduled to open in Spring 2027. The new cancer centre will deliver a vital facility within which we can deliver care and treatment for patients today and for future generations. This is a significant investment for NHS Wales and will be a regional facility to deliver our collective Cancer Services Strategy. This Plan demonstrated the journey to deliver the new hospital, the commissioning of and the transition to the new facility and the service transformation that will optimise the opportunities of the new facility.



# Radiation Services

There has been significant investment in radiation services in South East Wales. There will be an additional location for Velindre Cancer Service Radiotherapy provision with the Velindre@Nevill Hall Radiotherapy Unit, in Abergavenny, opening in Year 1 of this Plan. We are also in the process of replacing our existing fleet of Linear Accelerators as part of the Integrated Radiotherapy Solution programme. We continue to advance our service in line with latest clinical and technological developments.

## Milestones

### 1. Velindre@ Nevill Hall Radiotherapy Unit

- New unit set to open
- Implementation of clinical service at Velindre@ Nevill Hall Radiotherapy Unit ●

### 2. Integrated Radiotherapy Solution

- Investment in state-of-the-art radiotherapy equipment, with eight of the machines replaced at the centre in Whitchurch, Cardiff and two

more housed in the Velindre@ Nevill Hall Radiotherapy Unit.

- Deployment of Integrated Radiotherapy Solution Programme. Phase 2 to conclude ● Phase 3 conclude ■
- Deploy Linear Accelerator replacement capacity plan. In progress, concludes ■
- Develop and deploy brachytherapy transition plan to support transition to new Velindre Cancer Centre. To start ● Transition plan development will follow.

**3. Radiology Informatics System** - Supports the improvement and future development of our PACS and RIS systems to align data, further improving the accuracy of treatment and supporting cross Health Board boundary working and streamlining patient care.

- Implement Radiology Informatics System (RISP) ●

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
Radiotherapy treatments commenced in optimal timescales	<ul style="list-style-type: none"> <li>• Sustainable and effective multi-professional workforce model</li> </ul>	Transformation milestones delivered on time, on budget and to quality standards

- Fully implement new all-Wales RIS and PACS solution for radiology and nuclear medicine ■

### 4. Implementation of new Molecular Radiotherapy Services

- Radioactive medication which is administered orally or intravenously.

- Peptide Receptor Radionuclide Therapy - Finalise new treatment pathway and commence treatment of patients. Milestone? ●
- Scope implementation of Lutetium-177 Prostate Specific Membrane Antigen (PSMA) therapy treatment and develop business case for prospective new service. Milestone? ~Milestones awaiting NICE guidance.

### 5. Other Service Developments

- Review current model, undertake benchmarking, develop and implement a sustainable model for Palliative Radiotherapy. ●

# Acute Care and Palliative Medicine

There will be significant development over the course of this Plan in our evolving model for acute care and acute oncology. A key focus will be on strengthening the clinical model and our ability to support our patients with toxicities from treatment, within the regional Health Board unscheduled care system. This includes our contribution to the national delivery of effective emergency care and development of our strategy for systemic therapies to enable delivery and the management of the next generation of immunotherapies. We will continue to work with our system partners to deliver our commitments to our patients and their families and carers under the Quality Statement for Palliative and End of Life Care.

Palliative Care is an SST with multiprofessional input which works within Velindre Cancer Hospital and across several sites. Services are divided into local (Velindre Cancer Hospital site specific) and regional, with Velindre-employed clinical staff working in City Hospice, Marie Curie Hospice inpatient and community settings, and the University Health Board.

The Specialist Palliative Care team at Velindre Cancer Centre comprise palliative medicine consultants, specialist resident doctors, specialty and fellowship doctors and clinical nurse specialists/ANPs. Inpatients, outpatients, and those coming to the assessment unit can be referred to the palliative care team for bespoke, specialist advice and clinical input. Staff work together with the oncology doctors and other clinicians to provide the best care to meet patient need, and also liaise with community palliative care teams and hospice/hospital palliative care providers. The team also provides formal and informal education for students, clinical and ancillary staff. This includes medical, nursing, paramedic and psychology students, and post-graduate clinicians at all stages. This ensures broader communication and palliative care delivery for everyone involved with patients and their next-of-kin. The Palliative Medicine department also helps in the delivery of the MSc/Postgraduate Diploma in Palliative Medicine/Care through Cardiff University and the GP Short Course. Furthermore, the palliative care team at Velindre have been central at developing Wales-wide advance and future care planning and DNACPR resources and the national policy.

## Chronic Pain Service

There is a chronic pain service and an interventional pain MDT, which is attended by anaesthetists who can deliver neural blocks, for instance. The palliative care service links in with the supportive care service, which includes dedicated level 1-4 psychological services and sits within the Palliative Care SST.

# Acute Care and Palliative Medicine

## Milestones:

- **Acute Oncology Services (AOS)**
  - This includes people who receive an emergency cancer diagnosis at the front door of the hospital, as well as those people living with cancer who suddenly become seriously ill, either because of their illness itself or because of complications with their treatment, including from immunotherapies, as per below.
  - Develop plan for next stage for our Acute Oncology Services with our Health Board partners ●
  - Re-develop the cancer telephone helpline service – considering options for regional helpline provision ●
- **Same Day Emergency Care (SDEC), implementing the Six Goals Programme**
  - National programme of ‘6 Goals for Urgent and Emergency Care’ which sets out expectations for health, social care and third sector partners for the delivery of the right care, in the right place, first time for physical and mental health.
  - Same Day Emergency Care pathways, including re-modelling of the Assessment and ambulatory care Units, including moving to 7 day working ●

- Optimal hospital care and discharge practice (from the point of admission) ●
- GoHome first approach and reduce the risk of readmission ●

- **Introduction of Next Generation Immunotherapies** – Immunotherapy utilises the body’s immune system to find and destroy cancer cells. The innovation, complexity and breadth of options of these treatments will continue to accelerate.

There are several major developments in cancer therapeutics that are set to move from experimental to routine therapy. The advances are in cancer immunotherapy and comprise tumour infiltrating lymphocytes (TILs), chimeric

antigen receptor T cells (CAR-T cells) and BITES (bispecific T cell engagers).

These therapies are complex, need specific dates of treatment, require longer chair time and some may require an admission as opposed to day case treatment, they have a high level of expected and unexpected toxicity and will be new to the large majority of the involved oncology clinical team.

- Develop pathways, identify and introduce support structures to facilitate administration of bispecific T-Cell engagers (BiTEs) and other complex and advanced therapies when approved for clinical use. This will be led by newly established Acute Clinical Model Strategic Group ●

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
<ul style="list-style-type: none"> <li>• Deliver a 12-month reduction trend in the number of people who are delayed in hospital as measured by the Delayed Pathways of Care dashboard.</li> </ul>	<ul style="list-style-type: none"> <li>• Delivery against the Palliative and End of Life Care Quality Statement</li> </ul>	Effective strategic development and implementation of acute clinical model

# Systemic Therapies

The Velindre Cancer Service clinical model is based on a networked delivery of services across Southeast Wales. Currently, our Systemic Anti-Cancer Therapies (SACT) service is delivered in a number of settings: in the Prince Charles Hospital in Merthyr Tydfil and Neville Hall in Abergavenny; within a mobile unit; and at patients' homes. This Plan requires the next stage of this model to be in place by 2027. In addition, there will be important technological and model change in the way in which pharmacy services are delivered over this period.

Milestones:

## 1. Systemic Anti-Cancer Therapies (SACT)

**Outreach Services** - The principle of the clinical model is to move more care being delivered closer to patients' home so that by 2027 care is delivered 10% at home, 45% in the new Velindre Cancer Centre and 45% in outreach settings.

- Agree the number of hubs, location and staffing to deliver per Site Specific Site and overall facilities, in context of Velindre@ Model ●
- Implement ▲.
- **Transforming Access to Medicines** - Programme to set up a shared pharmacy technical service for Wales, for the sterile preparation of medicines also known as aseptic services.
  - Approach agreed to Transforming Access to Medicines (TrAMS) Model to Velindre Cancer Services ●
- **Electronic Prescribing and Medicines Administration** – To deliver a fully digitised prescribing system across Velindre Cancer Service that will improve safety, efficiency, audit and better access to information.
  - Implement Electronic Prescribing and Medicines Administration (ePMA) system for use in Velindre Cancer Services ▲

- **Virtually Assessed Patient (VAP) Clinics**
  - Virtual Nurse Prescriber led pre-assessment clinic for patients on routine well-tolerated SACT regimens, creating capacity in outpatients for more complex patients. There is opportunity to considerably expand the VAP service to cover all suitable patient groups across all common tumour sites.
  - Expansion of the model of a virtual nurse prescriber led pre-assessment clinic for patients on SACT ●

# Systemic Therapies

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
<p>On 90% of days planned care capacity should be protected from unscheduled care pressures and outlying of patients by the end of Q1.</p> <p>Ensure effective utilisation of theatre capacity through: reducing late starts to less than 20%; reducing early finishes to less than 10%; and increasing session utilisation to the GiRFT standard of 85% by March 2026.</p>	<p>Sustainable and effective multi-professional workforce model</p>	<p>Effective strategic development and implementation of SACT and pharmacy models for South East Wales.</p> <p>Medicines Management - ensure full implementation of the high value medicines Value &amp; Sustainability Board programme, which includes delivering opportunities against each of the four programme areas (maximise use of biosimilars, switch to generics, preferential use of medicines in primary care, restrict low value prescriptions)</p>



# Across Velindre Cancer Service

This Plan also includes a comprehensive transformation review in 2025 to inform our next Velindre Cancer Services Strategy, which will ensure readiness for transition to the new Velindre Cancer Centre. This will also enable the Velindre Cancer Service to optimise the value it can provide to cancer outcomes for the people of Wales.

There are also specific milestones across our planned care to improve timely access to care, shift to virtual consultations and remote assessments and reduce unwarranted variation in clinical productivity.



# Mental Health

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## Clinical Nurse Specialists (CNS )

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Site Specific CNSs are an internationally accepted as a critical part of the multi-disciplinary cancer delivery workforce. CNSs have a key worker role in line with national cancer standards; they carry a patient workload, provide hands on treatment, and have a critical psychological and communication supportive role. They also manage the health concerns of patients and work to promote health and wellbeing of patients. They use their skills and expertise in cancer care to provide physical and emotional support, co-ordinate care services and to inform and

advise patients on clinical as well as practical issues, leading to positive patient outcomes.

One of the key functions of our CNSs are to use advanced communication and psychological assessment skills to assess and alleviate the psychological distress of cancer patients and their families, including the referral to other agencies and disciplines as appropriate.

## Patient and carer information

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Patient and carer information provides information and support services for VCS which has a positive and significant impact on the production, updating and dissemination of high-quality patient and carer information. Important patient services including “Headstrong” Wig services, dementia support, learning disabilities, translation services, sensory loss/impairment are coordinated and centralised through the information manager. The Information Manager is a key member of the MDT facilitating carer’s assessments, befriending services, hospital discharge, meals on wheels, emergency safe key, personal alarms, volunteer transport and much more essential services for patients. The Manager also refers to other services, throughout the organisation, for example, psychology, therapies team and Welfare Rights Team (p.38)

## Dementia Support

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There is a person-centred dementia trainer for 15 hours a week who provides inhouse dementia training and support to VCS. In addition they:

- Maintain regular contact with quality and patient safety leads and the vulnerable groups forum reporting the progress and results of reports and analysis.
- Provide a holistic approach to healthcare, through undertaking comprehensive assessments of care needs, including assessment of the oncology patients, with a diagnosis of dementia and/or assessment of oncology patients with signs and symptoms consistent with dementia.

# Mental Health

## Patient Clinical Psychology and Counselling Service

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This service delivers a range of psychological therapies to support patients with psychological difficulties related to their cancer. It aims to reduce distress and promote well-being. For example, the team treats issues such as coping with diagnosis and treatment, cancer-related anxiety and depression, the impact of cancer on relationships, and psychosexual issues related to cancer treatment. Both in-patients and out-patients are supported by this service. Patients are seen as soon as possible after a referral for a full assessment of their need, and then signposted, scheduled for therapy, or placed on our waiting list as appropriate.

## Clinical Psychology for Staff and Team's Service

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The staff and teams psychology service supports people with difficulties in the workplace, or when things outside of work are challenging and impacting on our ability to do your role. The service is also able to meet with teams who are not functioning as they would like and require support and help with interpersonal or work-related challenges. The service provides one to

one psychological therapy, trainings, and facilitates reflective practice. Staff can request this services themselves or discuss concerns with a manager or senior staff member. Staff do not require permission from a manager to be able to self-refer.

## Complementary Therapy Service

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The complementary therapy service is here to support patients and staff with a range of interventions to maintain health and wellbeing. The team provide a variety of complementary therapies including aromatherapy, massage, reflexology, reiki and sound therapy. These take place in our therapy room or whilst patients stay with us on the ward, during SACT and radiotherapy treatments, and we have online resources on our webpage. We aim to encourage and empower patients to look after themselves and experience some rest and relief from unwanted side effects and symptoms of conditions and treatment. The team also understands the unique challenges that staff may experience and we provide support via drop-in sessions to give 15 mins of therapies, self-care and patient care training and access to individual treatments. People can even experience support whilst at home, as the service provides online Attend Anywhere appointments.



# Community Services

The basic premise of the VCS clinical model is based on a networked delivery of services with a hub and spoke design. Currently care is mainly delivered at Velindre Cancer Centre, with some care being delivered closer to home where possible. The principle is to move more care being delivered closer to patients' home (by 2027) aiming for a 10% at home, 45% VCC and 45% Outreach split. (from Exec Summary)

## Medicine at Home

The Medicine at home (MaH) Services manages and oversees a 'dispense and deliver' for oral SACT service. There are currently approximately 1500 patients registered with the oral service with 500 patients receiving treatment delivered direct to their homes/ place of choice per month.

The MaH team also manage the Nantgraw Support Unit (NSU) (mobile unit) where up to 20 patients, 4 days per week receive suitable immunotherapy and other "simple" SACT regimens. There are approximately 370 patients currently registered with this service. The NSU is delivered by a commercial

third party who provides nurses and pharmacy dispensing services and partners with Tenovus Cancer Care for use of the mobile unit.

The MaH service is a key enabler to improve patient experience (reduced hospital waits), facilitate care closer to home, manage growth in staff and accommodation resource demand across pharmacy and nursing services and is financially beneficially to both VCS and it's Health Board commissioner partners.

The SACT service is delivered in a number of settings within VCC, in two outreach settings (Prince Charles Hospital and Nevill Hall), within a mobile unit and patient's home as part of the Medicines at home service.

Outpatient transformation aspirations support greater delivery of services in wider geographical footprint:

- Protocol led non-medical clinics (pre SACT and follow up)
- Clinic hubs for large multidisciplinary clinics in each HB (as part of a defined outreach model)
- Research and clinical trial capability in outreach clinics.



# Community Services

## Milestones

### 1. **Velindre Cancer Service Transformation**

- The current Velindre Cancer Service Five Year Plan concludes in 2025 and therefore a refreshed transformation strategy is required from 2026 onwards ●

## Planned Care

### 2. **Outpatients** - Ensure monitoring of DNA/CNA rates is in place for every Outpatient clinic. When DNA/CNA as a combined rate is greater than 5%, overbooking additional patients should be implemented and monitored ●

- Agree target and plan for virtual / remote assessment / consultation ●

### 3. **Clinical Implementation Network** - Implement national guidelines with thresholds by Clinical Implementation Network (CIN) and procedure. Individual CINs will establish See on Symptom

(SOS) and Patient Initiated Follow-up (PIFU) targets by specialty & sub-specialty on an ongoing basis by March 2025. We will assess implementation timeline once received for cancer services ●

### 4. **Therapies Services Review** - Rehabilitation following a diagnosis of cancer is recommended to help people retain their functional independence before, during and after oncology treatment ●

- Recent peer review of Therapies service will inform development of appropriate workforce model.
- Develop plan to ensure the on-going viability of the neuro-oncology service.
- Develop plan for prehabilitation services.
- Develop plan for robust rehabilitation service.
- Develop plan to ensure therapy provision aligns with enhanced ambulatory and assessment functioning

### 5. **Clinical Psychology** - The team treats issues such as coping with diagnosis and treatment, cancer-related anxiety and depression, the impact of cancer on relationships.

- Review of clinical psychology service, including funding strategy for palliative psychology service and staff psychology working with our Velindre Charity ●

### 6. **Patient Communications**

- Communication delivery models to improve patient experience: electronic referral, booking process, telephony system, work with communications team to review and update patient information across Velindre Cancer Services ●
- Commission replacement video consultation system ●

# Community Services

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
<p>12-month improvement trend in the percentage of patients starting first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route), building toward a national target of 80% by 31 March 2026.</p>	<p>Consistent clerical and clinical validation should be in place on an ongoing basis and reported quarterly for impact.</p>	<p>Effective strategic development for Velindre Cancer Service.</p>



# New Velindre Cancer Centre

The current Velindre Cancer Centre is more than 68 years old and in spring 2024, the build of the new Velindre Cancer Centre began, due to complete for opening in spring 2027. The new Velindre Cancer Centre will provide a range of cancer service facilities for the South East Wales region in partnership with Aneurin Bevan, Cardiff and Vale, Cwm Taf Morgannwg University Health Board Partners and Powys Teaching Health Board.

The award-winning design of the new cancer centre is both patient and staff-centred and one of the most sustainable hospitals in the UK. It will combine a state-of-the-art facility for treatment and research alongside an outdoor space that is calming, encourages improved biodiversity, and gives back to the environment and community.

The new Velindre Cancer Centre is funded through a Mutual Investment Model (MIM) with the support of the Welsh Government. The Mutual Investment Model is a Welsh Government designed model to finance major capital projects, for example social and economic infrastructure projects, to improve public services in Wales.

The Acorn consortium have designed and are building the new cancer centre. They will also be responsible for the maintaining of the hospital for 25 years after completion. As part of the readiness planning, the model for the management of the relationship and the interaction between the hard, provided by Acorn, and soft, provided by the Trust, facilities management will be in place.

The structure of the project work for the Trust until opening in 2027 is:

- **Design and Construction**

- Completion of the final detailed design (through the Reviewable Design Data process).
- An effective programme of monitoring and quality control of construction and commissioning of the new cancer centre by Acorn to the design, time and cost agreed.
- Completion of the Enabling Works, which includes access and utilities to the site.
- Implementation and monitoring of European Protected Species Licence.

- **Equipment, Commissioning and Migration**

Ensuring all the required equipment for the functioning of the cancer centre is in place and operational when the centre opens, through

the specification, procurement, installation and commissioning.

Delivering a cancer centre that is commissioned (in respect of site commissioning, operational commissioning, equipment commissioning) and is operational for the delivery of services.

Coordinating a physical move from the current hospital to the new cancer centre that is safe, efficient and to the planned timescales.

- **Digital**

Design, build or procure, install, test and support the hardware, networks and software for the new cancer centre.

- **Engagement**

- Programme of community engagement (“Hefyd”) alongside the construction works that includes the MIM community benefits and our response to the Well-being of Future Generations (Wales) Act 2015 and Environment (Wales) Act 2016.
- Development and implementation of communications and engagement strategies that ensured all stakeholders, including our patients, staff and communities are informed, engaged and heard.

# Workforce and Culture

The Workforce and Culture plan outlines how we plan to attract, retain and develop our workforce by focusing on the two priorities of workforce and culture.

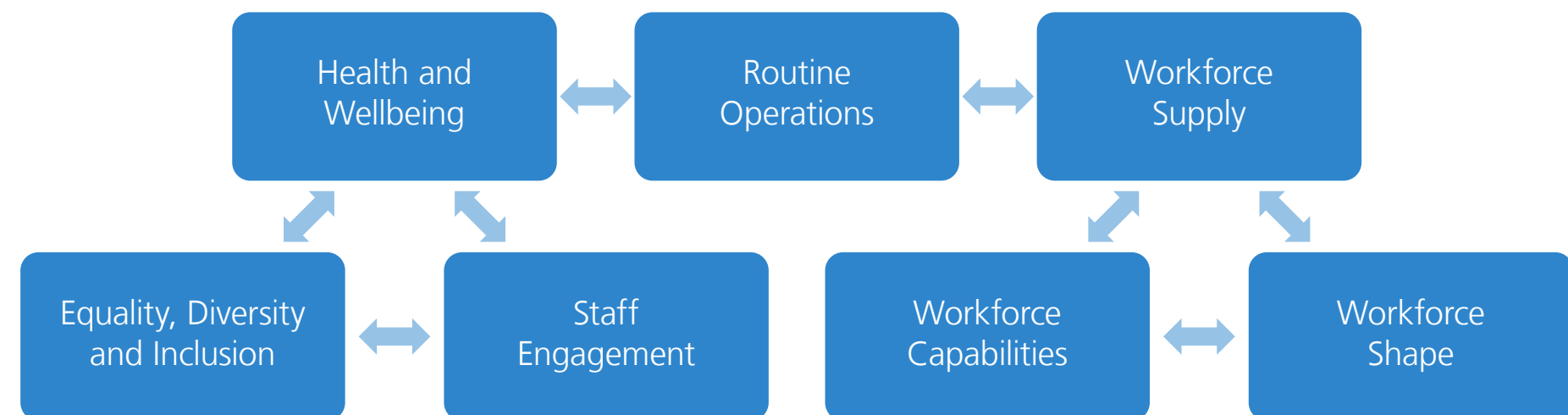
Our vision is to have an engaged, motivated and high-performing organisation that is underpinned by our values and behaviours and resourced with people delivering exceptional services. Our People Strategy sets out the long-term ambition to be the employer of choice for those working in or considering a career in specialist blood and cancer services and this iteration of the Integrated Medium Term Plan demonstrates how we are proactively working towards this ambition. We are ensuring the Trust is resourced to maintain and continue to deliver exceptional work class services to our patients and donors.

## Organisational Culture

Velindre University NHS Trust will develop comprehensive systems and processes to support our values, ensuring people working within the Trust feel they have a role to play in service delivery and are able to do so in a positive working environment.

## Building the Workforce

Velindre University NHS Trust will develop comprehensive plans, processes and support the implementation of change to ensure the Trust has an optimised workforce that meets our strategic and operational objectives both now and in the future.



# Workforce and Culture

## A Focus on Organisational Culture

*The set of values, beliefs, attitudes, systems and rules that outline and influence employee behaviour within the Trust.*

### Staff Engagement

- Staff Survey
- Speaking up Safely
- Employee Voice Strategy

### Health and Wellbeing

- Staff Psychology & Resilience
- Well-being Interventions
- Organisational and Team Development

### Equality, Diversity and Inclusion

- Welsh Government Action Plans
- Staff Networks / Forums
- Become a Level 3 Disability Confident Employer

## A Focus on Building our Workforce

*The process that utilises industry and data intelligence to build the optimised workforce capable of sustainable high-performing and quality services.*

### Supply

- Labour Market Analysis
- Attraction and Resourcing
- Access to Work
- Employee Retention

### Shape

- Workforce Planning
- Talent Management & Succession Planning

### Capabilities

- People Development
- Performance Management
- Compassionate Leadership



# Workforce and Culture

Our People Strategy sets out the long-term ambition to be the employer of choice for those working in or considering a career in specialist blood and cancer services and this iteration of the IMTP demonstrates how we are proactively working towards this ambition. We are ensuring the Trust is resourced to maintain and continue to deliver exceptional work class services to our patients and donors.

Our priorities reflect a strong alignment to the objectives set out in the Well-Being of Future Generations Act, 2015 and are underpinned by a detailed action plan for delivery. Success within these priorities will be measured by a number of quantitative and qualitative metrics that will demonstrate the Trust has well-led teams, staffed with the right people, maximising skills and learning and where individuals' wellbeing and identity is nurtured.

## Our Workforce Vision: To Become an Employer of Choice

**Skilled and Developed People:** an employer of choice for staff already employed by us, starting their career in the NHS or looking for a role that will fulfil their professional ambitions and meet their personal aspirations.

**Planned and Sustained People:** having the right people with the right values, behaviours, knowledge, skills and confidence to deliver evidence based care and support patient and donor wellbeing.

**Healthy and Engaged People:** within a culture of true inclusivity, fairness and equity across the workforce. A workforce that is reflective of the Welsh population's diversity, Welsh language and cultural identity.

# Our Plan for 2025 and Beyond

## Skilled and Developed Workforce

- Roll out new PADR process with aim of 85% participation by 31.3.26.
- Working with medical colleagues to ensure a robust and effective process for job planning that is built into our workforce plans
- Undertake career pathway reviews and engage with relevant professional groups and multi-disciplinary teams

## Healthy and Engaged Workforce

- Staff Survey action plans in place for Trust and Divisions – monitor Quarterly through our Health and Wellbeing Steering Group and report findings through the Wellbeing Evaluation Framework that was put in place in 2024-25
  - The Trust achieved a response rate of 34%, which is the same as 2023. This gives a stable base for comparison between the years since the same proportion of people responded. In total, 24,833 people contributed across Wales which means we have a substantial data set describing the experience of working in the NHS in 2024.

- The Employee Engagement Index is the single score that can be compared between organisations. It is a composite measure of seven questions and is a reliable indicator of feelings of autonomy, belonging and contribution. The Trust score for this increased from 76% to 77% from 2023 to 2024. The NHS Wales average was 72%.
- A Staff Survey Group has been set up to disseminate these results and to support the development of actions and changes for staff. The Executive Director of OD and Workforce is the Executive Sponsor to the Group and will ensure the understanding of the results and the improvements achieved will support the cultural direction set by the Board.
- From the results, the three topics are the focus of work at Trust and local level for 2025-26. This will achieve a commonality of effort leading to greater impact overall. The suggested topics for EMB discussion are:
  1. PADR, so that the Trust achieves 85% compliance by March 2026.
  2. Creating time and support for Team discussions, so that staff are working in supportive environments where they can plan, review and discuss their work openly.

3. Countering bullying, harassment and discrimination through focusing on the Trust Values, so that staff feel increased psychological safety at work.

These topics align with Accountability, Caring and Respect.

- Implement our Wellbeing Programme, to support staff via a range of wellbeing interventions and to support services areas with certain areas of sickness (see section below on mental health and wellbeing interventions)
- Review impact of Values and Behaviours framework and our Speaking Up Safely arrangements. We are developing proposals for strengthening employee voice within our Health and Wellbeing Plan
- Continue to embed the anti-racist Wales action plan and use insight provided by the Workforce Race Equality Standard through a programme of Board Development, leadership awareness and development and working with staff networks to ensure they are engaged with Trust strategic decision making. The Trust will also Launch Anti-racist e-learning programme with 85% target by 31.3.26
- Launch Sexual Safety e-learning programme with 85% target by 31.3.26

# Our Plan for 2025 and Beyond

## Planned and Sustained Workforce

- Embed ED&I initiatives into the recruitment plans and strategies
- Engagement with schools and colleges regarding apprenticeship programmes and alternative routes into employment
- Analysis of recruitment programmes and opportunities (i.e. Int. Recruitment)
- Via our internal Steering group continue to monitor agency spend and its reduction

## Our Key Workforce Changes

- Clinical agreed short and long-term MDT workforce plans
- Improved alignment of our education and training functions to the needs of our services
- Services delivered at a location and time which best suits our patients and donors
- All staff to be proud to, and able to, promote our core values and principles
- Improved health and well-being of our workforce.



# Workforce and Culture

Velindre NHS Trust supports a strong cultural and Governmental aim to provide opportunity for current Welsh speakers but to also increase the number of Welsh speakers through the aims of the 2050 strategy.

Providing the Active offer to patients and donors is central to the Trust's plans. Initiatives for 2025/26 include:

- Provide specific training sessions, embedding the Active Offer into their training staff training programmes across Wales.
- Continue our partnership with Menter Rhondda Cynon Taf to provide Welsh language team-specific training, working with the reception teams to raise their confidence and understanding of the language.
- Continuing and developing with our conversational group set up, 'Coffi a Chlonc' (coffee and a Chat), also delivered by a professional tutor, opening the training to all members of staff to practise their skills and raise their confidence at work.
- The Plan for 25/26 will focus on the first point of

contact and consider the options for providing a more streamlined process on the telephony systems at the Velindre Cancer Centre. We will also embed our Welsh language patient pathway plan, supporting in-patients at the Centre and their access to information and communication. Welsh Language Awareness training compliance is at 90%, we will continue to work with service areas to continue to improve.

- Our induction programme 'Croeso' continues to provide opportunity for new staff to understand the needs of bilingual services. Providing opportunity to discuss the Welsh Language Standards and the embedding of Welsh language and culture across the Trust. This is continue to be embedded in 25/26

Knowing our workforce skills enables us to plan accordingly for vacant posts. The Trust, along with all other Health Boards, use the Electronic Staff Record to record their Welsh language skills. This year we have embedded the need to record these skills and are currently over 95% compliant. This will assist us with identifying areas for recruitment and language needs across the Trust moving into 25/26. We will continue to work closely with the divisions to embed a deeper understanding of language

requirements, and we will continue to strengthen this understanding and process, providing guidance and support for recruitment managers and learning from our partners across the NHS.



# Workforce Mental Health and Wellbeing

Wellbeing of staff is central to the vision for the Trust. The People Strategy has a part of its vision: Healthy and Engaged People: of true inclusivity, fairness and equity across the workforce. A workforce that is reflective of the Welsh population's diversity, Welsh language and cultural identity. This is followed by Wellbeing and Engagement being spelled out as the first of six priorities for action.

Specific goals for 2025/26 will be:

- Continue to see a reduction in sickness levels with the achievement of the Trust specific target of 4.7%. This to be achieved through the use of SMART actions at divisional level.
- Develop a response to the Harassment, Bullying and Discrimination review and build in 2024 data to complete the picture. Agree changes with staff to minimise these behaviours at work.
- Develop the Employee Voice process for Speaking Up Safely and Working Together engagement sessions.

- Introduce support for Sexual Safety at Work in partnership with NHS Wales colleagues.
- Develop a Staying Well at Work Package with the aim of preventing sickness absence and improving perceived organisational wellness.
- Develop a unified data capture system specific for health and wellbeing with a dashboard to communicate engagement and outcomes back to staff.
- Explore funding opportunities to create an embedded Health and Wellbeing Service with space and staff for each site.
- Establish a procedure and guidance for departmental interventions that have high mental health, stress and other related sickness.
- Develop proactive strategies to sickness deep dives such as the recent findings that mental health related absence is most prevalent in those aged 26 to 40.
- Establish support for managers to confidently and safely steer positive changes. Change is constant and can be rewarding and bring about opportunities for career development and quality in service provision. However, if it is handled

badly, it can have a negative impact on staff health and wellbeing.

- Develop and improve procedures for reactive peer support-based resources. Following a potentially upsetting, traumatic or simply unusual incident at work, it is important to provide support through a robust process.

The goals will form part of the Trust Health and Wellbeing Plan and will be monitored via the Healthy and Engaged Steering Group.

# Workforce Mental Health and Wellbeing

## Milestones:

1. We will conduct a comprehensive review of all **Workforce Polices** ensuring documents are up to date with current legislation and best practice. This will involve engaging with key stakeholders, benchmarking and ensuring documents are easily accessible to all staff ●
2. We will design and implement a **structured learning and development framework** by that enhances the skills and capabilities of the workforce as well as ensuring there are adequate leadership and management capabilities ▲
3. The People and Organisational Development Team will develop a **well-being and engagement framework** to support staff and ensure they feel valued and supported within the culture of the organisation ●
4. The People and Organisational Development Team will support the Trust to develop a **workplace culture** for our people that is truly inclusive by developing compassionate frameworks aligned to statutory requirements for improving equality and diversity within Wales ▲
5. We will support the Trust to develop **workforce plans, both strategic and operational** based

on the changing needs of the labour market and service delivery. Divisional plans will ensure detailed analysis of key workforce data ensuring any actions implemented will bridge gaps and challenges within the workforce. The final plans will be delivered by March 2026 with the next phase being implementation and change management from April 2026 to March 2028 ■

6. We will develop and implement a comprehensive talent attraction and retention by. This will include design and roll out of employer branding and attraction campaigns, development of career pathways and supportive access to work initiatives that improve workforce diversity as well as dedicated retention plans where needed within hard to fill roles ▲

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
Ensure a reduction in sickness absence in 2025/26 in comparison to 2024/25, through maximising adherence to the requirements of agreed attendance at work policies and adhering to the all-Wales Occupational Health minimum service levels.	Fully implement the actions outlined in the Variable Pay & Agency Control Framework Welsh Health Circular.  Ensure effective implementation of job planning policy, to include ensuring that > 90% of all Consultants have an agreed job plan in place at all times by 30 September 2025.	Deliver a further continued and sustained reduction in agency expenditure, with a target 30% reduction in 2025/26 from 2024/25 outturn, and ensuring no off-contract expenditure.  Ensure a reduction in agency spend on Healthcare Support Worker, Admin & Clerical, and Estates & Ancillary staff to zero by 30th September 2025.

# Trust's Strategic Equality Plan, including Tackling Health Inequalities

As part of our specific duties under the Equality Act 2010 and Regulations in Wales, the Trust is required to develop and publish a Strategic Equality Plan and its strategic equality objectives every four years and our current plan is set for 2024-8. This year's refresh incorporates the Anti-racist Wales actions.

## 1. Fairness and Respect

Increase workforce diversity and inclusion and eliminate Pay Gaps We would like the workforce to better reflect the diverse nature of the communities that we serve and also to ensure that there is no systemic pay disparity between people of different genders, races or disability.

### Key Milestones:

- Develop a positive organisational culture, across all training and communication mechanisms ●
- Implement the Trust's Widening Access Plan ●
- Implement the second phase of the Wales Anti-racist Action Plan ●
- Implement the LGBTQ+ Action Plan ●

## 2. Engagement

Engage with the community In order to ensure that we are providing services that our patients and donors want and need, it is important that we understand them and ask them about what things they want from us and how we might be able to do to that in better ways.

## Key Milestones:

- Increase the number of donors across specified target groups in line with the Welsh Blood Service 5 Year Strategy ●
- Use Equality Impact Assessment process to prepare cancer services for the move into new Velindre Cancer Centre ●

## 3. Accessibility

Communicate with people in ways that meet their requirements. We have a variety of ways that we stay in contact with the people of Wales; letters, phone calls, social media; it is important that we are doing this in way that people can easily understand and in their first, or preferred, language.

### Milestones:

- Any legislative changes in British Sign Language are translated into service plans ●
- Implement the Welsh language clinical consultation plans ●
- Any regulatory changes regarding accessibility are translated into service plans ●

# Trust’s Strategic Equality Plan, including Tackling Health Inequalities

## 4. Data

Ensure service delivery reflects individual requirements. We provide specialist cancer services to the population of south-east Wales at a time when people are particularly vulnerable. We are also indebted to our donors who volunteer to give blood or tissue for the benefit of others. We want all these individuals to be able to access what they require as simply as possible.

### Milestones:

- Review outcomes from Equality Impact Assessment activity in 2024-5 ●
- Build treatments around individual need with the move to the new Velindre@ Nevill Hall Radiotherapy Unit in 2025 and preparing for the new Velindre Cancer Centre ●
- Data is used to improve staff experience in relation to Equality, Diversity and Inclusion ●

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
<p>The diversity of donors will increase, particularly in relation to ethnic origin and sexual orientation. This will lead to better blood and transplant products being available to people across Wales so that differential health outcomes relating to ethnic background can be minimised.</p> <p>DATA</p> <p>Patients will receive increasingly personalised care tailored to their clinical need</p>	<p>Staff will feel safe, supported and respected which will enable them to thrive at work. Improved psychological safety will be reflected in staff survey results in 2025. A positive organisational culture will lead to better services and lower costs (reduced turnover and sickness)</p>	<p>Equality Impact Assessments are essential to understanding variation in delivery in terms of who can access, and how people access health and care services is key to ensuring equitable delivery.</p>

# Digital

Over several years, the Trust has undertaken a number of significant developments in Digital Services which have made a positive difference to the quality, safety and experience for our service users.

Alongside this the Digital team has been developing its digital and data capabilities to support the future plans for the Trust. This has been articulated in the Trust’s Digital Strategy, “Digital Excellence: Our Strategy 2023-2033”. Our Digital plan supports the strategy and enables the service plans for the Velindre Cancer Service, the Welsh Blood Service, and the new Velindre Cancer Centre. The plans are well aligned with national policy including the “Digital and Data Strategy” and “A Healthier Wales” and reviewed periodically at Board level.

Our Digital Strategy describes our response to the Trust purpose to ‘Improve Lives’”, and its vision to deliver ‘Excellent Care, Inspirational Learning, Healthier People’ and aligns well with the Welsh Government Health and Care Digital Strategy.



Figure 1 Digital Strategy Themes

# Digital

## Our Digital Vision

Our Digital Vision: To Ensure Patient, Donor and Staff Experience of Digital Services is the same as our Care... Outstanding.

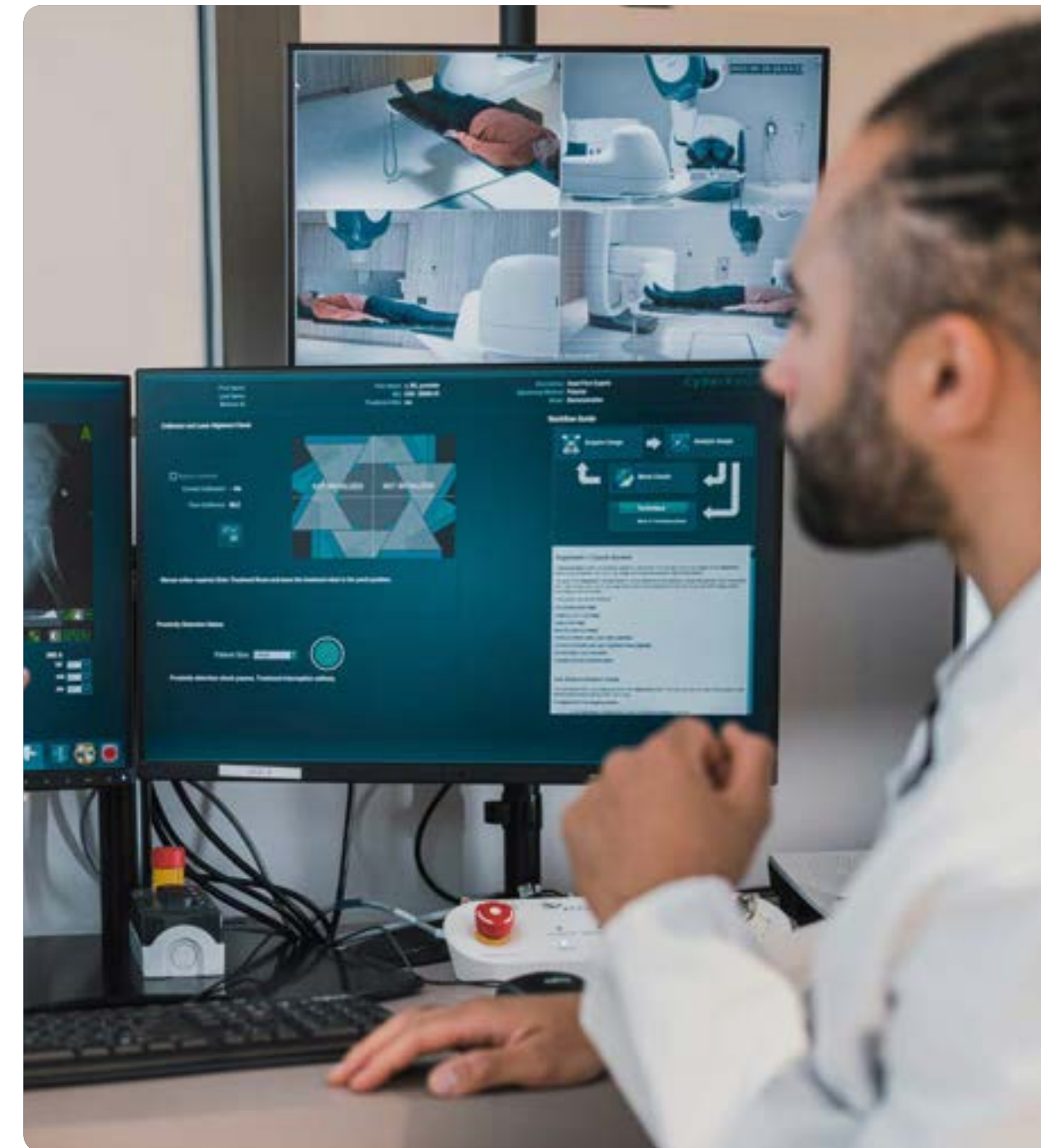
## Priorities for this Plan

Further to the enablement of the programmes the blood, cancer and new Velindre Cancer Centre digital programmes, other digital priorities include:

- Collaboration with the Electronic Health Record Club and National Business case to shape the future direction for Electronic Health Records in Wales. This will need to recognise the specialist nature of cancer services alongside an Electronic Health Records core all-Wales solution.
- Embedding digital leadership through the organisation through our Digital Inclusion plan and strengthen clinical safety representation in digital initiatives.
- Moving our Data and Insights plan forward and migration onto the National Data Repository and setting out the Trust position and governance with regards to Artificial Intelligence.

- Infrastructure and core services work on telephony/omnichannel solutions, the cyber action plan, continuing to remove legacy infrastructure and the continued migration of sites onto our new modernised network
- Implement actions plans from the Cyber Assessment Framework continued assessments to achieve the baseline profile and testing of Cyber capabilities.
- Strengthen our local Enterprise Architecture governance to contribute to and ensure compliance with the National Architecture and standards implementation.
- Upgrading digital systems in line with the recommendations from the Infected Blood Inquiry.

In order to affect a safe transition of digital services to new Velindre Cancer Centre we will be working through the transition plan to new Velindre Cancer Centre with a view to introducing a digital change freeze in 2026 which will need to be considered against future service plans.



# Digital

## Milestones

### 1. Ensuring our Foundations

#### Trust

- Implementation of Call Centre telephony underpinning service plans ●

#### Blood service

- Implementation of National LIMS 2.0 system ●
- Migrate Prometheus donor matching from Digital Healthcare Wales ●
- Live Connectivity (Connections) ●

#### Cancer service

- Implementation of National Radiology Informatics System (RISP) ●
- Deployment of Integrated Radiotherapy Solution Programme ■
- New SACT e-Prescribing contract and move to one national instance in contract ●
- Phase 2 of key requirements for WPAS/WCP National systems ■
- Implementation of new Blood Establishment Computer System ■

### 2. Digital Inclusion

#### Trust

- Year 2 implementation of Trust Digital Inclusion Plan ●
- Microsoft 365 colleague upskilling and adoption ●

#### Cancer service

- New arrangements for Video Consultation platform ●

### 3. Insight Driven

- Digitally enable Value Based Healthcare initiatives including implement new digital system for Patient Reported Outcome Measures (PROMS) for Value Based Healthcare ●
- Quality measures Reporting ●
- Forecasting methodology: Demand / Capacity ●
- Review and rationalize Data and Insight Product Estate for improved user experience and insight ●
- Data and Insight: explore the use of Artificial Intelligence to improve clinical coding ●

### 4. Safe and Secure Systems

- Continue rollout of new Trust-Wide network for the new Velindre Cancer Centre, Talbot Green Infrastructure and trust Headquarters ▲
- Continue to implement strategic cyber security plan ●
- Continue to remove legacy infrastructure and refresh backup and storage arrangements ●
- Complete migration from Windows 10 to Windows 11 and create a common user/device experience ●
- Pilot and scale Single Sign-On ●

# Digital

## 5. A Digital Organisation

### Trust

- Scale Robotic Process Automation (RPA) and automation ●
- Scale the Digital Training Platform (Learn365) and continue to develop digital skills programmes ●
- implement Velindre Fundraising Donor Relationship Management and plan for WBS Donor Contact Centre ■

### Blood service

- Go-live for new digital system for WHAIS ● and commence next phase ●
- implementation of new digital system for the Welsh Bone Marrow Donor Registry ■

### Cancer service

- Implementation of electronic Prescribing General Medicines (eEPMA) ▲
- Scoping/Discovery for digitalisation of Medical Records ●

## 6. Working in Partnership

### Blood service

- Implementation of new digital system for NEQAS external quality assessment service ●

### Cancer service

- Digital services go-live Velindre@ Nevill Hall Radiotherapy Unit ●
- Progress new Velindre Cancer Centre Digital workstream

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
Collaborative national working.	Robust governance and clinical safety for cyber and digital including Artificial Intelligence	An organisational wide digital and data strategy that is underpinned by a sustainable financial plan.

# Estates, Health & Safety and Sustainability

Our strategic priorities for Estates for this Plan are:

- A safe and high quality estate which provides a great experience
- Healthy buildings and healthier people
- Minimising our impact
- Use our estate to deliver the maximum benefit and social value to the community

In addition, our areas of focus for sustainability:

- Creating wider value: our organisational approach
- Sustainable care models
- Eliminating carbon
- Sustainable infrastructure
- Transition to a future of renewables
- Sustainable use of resources
- Connecting with nature
- Greening our travel and transport
- Adapting to climate change
- Our people as agents of change

The Estates, Health & Safety and Sustainability function are central to all the infrastructure development across the Trust that have been outlined in this Plan.

## Additional **Milestones:**

- Establish effective sustainability governance structure and model for funding streams and management of savings, building on Site Improvement Plan approach ●
- Integration of Well-being Objectives to long term goals ●
- Development of Climate Adaption risks and comprehensive plan, including embedding the climate emergency clearly and effectively into decision-making ●
- Implementation of effective, and based on best practice, Health and Safety Management System ("P" – Principle):

Year 1

- P1 - Leadership and Accountability
- P2 - Competent People
- P3 Compliance Assurance

Year 2

- P4 Risk and Opportunities
- P5 Learning from Events
- P6 Occupational Health
- P7 Asset Management

Year 3

- P8 Contractor and Supplier management
- P9 Communication
- P10 Emergency Preparedness
- P11 Measuring Performance

- Effective implementation of Computer Aided Facilities Management Software ●
- Strategic agreement and implementation of plans for the Whitchurch Hospital site ●
- Transition of Estates staffing model to meet the changing landscape of the Trust Estate. Focus on management of the Mutual Investment Model (MIM), implementation of an workforce model to meet the approach required in readiness for the new Velindre Cancer Centre ▲
- Strengthen partnerships and collaboration across public and private sectors, including with Specialist Estates Services ●

# Estates, Health & Safety and Sustainability

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
<p>The NHS in Wales is responsible for ~2.6% of the total carbon emissions of Wales and fallen behind other sectors when it comes to reducing its environmental impact. The Trust will play an important role in reversing this trend.</p>	<p>Effectively supporting the ambitions of Stronger, Fairer, Greener Wales as part of a Foundational economy</p>	<p>Effective Health and Safety Management system in place which is in line with industry best practice.</p>



Estimated completion

● Year 1 Q1  
 ● Year 1 Q2  
 ● Year 1 Q3  
 ● Year 1 Q4  
 ▲ Year 2  
 ■ Year 3

# Research and Development

## Cancer

We are committed to its strategic vision of being “A beacon for research, development, and innovation.” The Trust’s Research and Development function plays a pivotal role in advancing healthcare through clinical trials, translational research, and multidisciplinary collaborations. As part of this Plan, the Trust aims to further strengthen its research capacity, aligning with the Welsh Government’s priorities for evidence-based healthcare improvements and innovation-driven service delivery. The overarching objective is to enhance patient outcomes, embed research within clinical practice, and ensure that every eligible patient has the opportunity to participate in a clinical trial.

### Strategic Priorities in Research and Development

The Trust’s cancer research priorities are structured around four key strategic themes:

#### 1. Driving Forward the Cancer Research and Development Ambitions.

The Overarching Cancer Research and Development Ambitions 2021-2031 strategy outlines the Trust’s commitment to leading and

participating in high-impact cancer research. This includes:

- **Expanding Early and Late Phase Clinical Trials:** Developing the VUNHST research portfolio expanding to the Cardiff Cancer Research Hub (CCRH) to facilitate early and late phase complex trial delivery, and translational research in partnership with Cardiff & Vale University Health Board and Cardiff University.
- **Integrating Translational Research:** Bridging laboratory discoveries with clinical applications, ensuring that new treatments move swiftly from research to patient care.
- **Enhancing Radiotherapy Research:** Capitalising on the development of the new Velindre Cancer Centre (nVCC) to expand radiotherapy research capacity and capability, and embrace the opportunity offered by the radiotherapy research bunker at nVCC to deliver cutting edge radiotherapy research for cancer patients in Wales.
- **Increasing Patient Participation in Research:** Ensuring that an increasing proportion of Velindre cancer patients are offered opportunities to engage in research including clinical trials.

- **Establishing Clinical Academic Posts:** Strengthening collaborations with academia to create research-focused clinical and translational posts that support sustainable research growth.

#### 2. Strengthening Clinical Trials and Research Infrastructure.

VUNHST is dedicated to maintaining and expanding its role as a leading research sponsor and trial site. The focus areas include:

- **Sponsorship:** Increasing the Trust’s portfolio of sponsored studies by building on strong experience and well established reputation as a leading sponsor of clinical research, demonstrated in a proven track record in successfully sponsoring multi centre UK investigator led studies and co sponsoring international research, with a commitment to excellence.
- **Clinical Research Treatment Unit (CRTU):** Increasing capacity to conduct Phase I-III clinical trials at VCC in collaboration with Cardiff’s Experimental Cancer Medicine Centre (ECMC).

# Research and Development

- **Expanding Research Workforce:** Recruiting additional research delivery staff, governance staff, and specialist support service staff to enhance trial delivery.
- **Developing Satellite Research Units:** Establishing research in the Velindre@ Nevill Hall Radiotherapy Unit, to ensure equitable access to radiotherapy trials for patients from across South East Wales.
- **Enhancing Data Capabilities:** Leveraging artificial intelligence, digital trial management systems, and remote monitoring technologies to optimise research delivery.

### 3. Maximizing National and International Research Collaborations

Collaboration is central to the Trust's R&D strategy. The Trust's research service key initiatives include:

- **Participation in Wales and UK Research Networks:** Engaging with organisations such as Health and Care Research Wales (HCRW), Wales Cancer Research Centre (WCRC), and Experimental Cancer Medicine Centres (ECMC).

- **Commercial Research Partnerships:** Expanding commercial clinical trials through utilisation of VPAG funds and via collaborations with pharmaceutical companies, ensuring sustainability through reinvestment of commercial income.
- **Advancing Genomic and Precision Medicine Research:** In partnership with the All-Wales Medical Genomics Service, VUNHST aims to establish the UK's first routine 500-gene panel for metastatic cancer patients.

### 4. Embedding a Research Culture within the Organisation

To ensure sustainable research development, the Trust will:

- **Integrate Research into Clinical Pathways:** Ensure that research is an "Always Event," making trial participation a routine option for eligible patients.
- **Develop the Velindre Oncology Academy:** A research and education initiative to support the next generation of cancer researchers and clinical academics.

- **Strengthen Patient and Public Involvement (PPI):** Engage patients and communities in research design and priority-setting to ensure alignment with patient needs.
- **Enhance Research Training and Career Development:** Offer research-focused fellowships, mentorship programs, and CPD opportunities to build capacity across the Trust's workforce.

# Research and Development

## Milestones:

- Increase patient access by 30% from FY2024/25 by FY2027/28 ■
- Increase of 10 new trials per year ▲
- Increase of 3 new trials delivered via the Cardiff Cancer Research Hub per year ▲
- Increase of five trials involving radiotherapy per year ▲
- Increase in research active posts across the Trust by 10% from FY2024/25 by FY2027/28, including five new clinical academic posts ■
- Increase commercial income by 50% by 2028 ■
- Increase in five collaborations per year ▲

## Transfusion and Transplantation Research

Welsh Blood Service Research, Development and Innovation strategy was approved in November 2024 and commits to seven missions and actions. Each mission area aims to sustain a number of ongoing innovative research project throughout the three years 2025 to 2028.

- **Mission One:** Centred on improving patient and donor care.
- **Mission Two:** Advancing Blood Components

- **Mission Three:** Advancing Transplant Research in Wales.
- **Mission Four:** We will use Innovation and Value-Based Healthcare to improve our services and performance.
- **Mission Five:** Using Collaboration to Sustain our RD&I
- **Mission Six:** Serve the people of Wales by supporting international initiatives.
- **Mission Seven:** Enhance the impact of RD&I and celebrate success.

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
Ensuring that research improves patient experience and enhances quality of life.	Promoting collaborative research that considers diverse patient perspectives and community needs.	Maintaining transparency in research funding, governance, and impact assessment.

# Innovation

- **Our Vision:** To be an International Beacon for innovation in Cancer and Blood Services.
- **Our mission:** To drive continuous improvement and breakthrough innovations in cancer and blood services by fostering a culture of innovation, creativity, collaboration, and excellence.

## Strategic Objectives for innovation

1. Enhance Patient Outcomes and Improve patient and donor Experience: Develop and implement innovative treatments and care pathways that improve patient survival rates, quality of life, and overall experience for patients and donors.
2. Improve Operational Efficiency: Utilise innovation to streamline processes, reduce costs, and improve the efficiency of service delivery.
3. Strengthen Collaboration: Build strategic partnerships with academic institutions, industry, third sector, government /governmental support organisations and other healthcare organisations to accelerate innovation.

4. Cultivate an Innovation Culture: Encourage a culture of innovation among staff through continuous learning, incentives, and support for creative initiatives.

Our implementation themes provide us with the framework for our activities to support the delivery of our objectives.

1. A collaborative innovation ecosystem: Our vision includes building a collaborative innovation ecosystem where staff, healthcare providers, researchers, academia, industry, patients, donors and community partners work seamlessly together to drive innovation, address healthcare disparities, and create healthier communities. We are building an ecosystem that supports and strengthens the capability and capacity for the Trust to innovate. We will implement the ISO 56001 (International standard for Innovation to provide a framework for our innovation ecosystem to thrive. We want to improve whole system cancer care through collaboratively accelerating cancer research, innovation education and involvement. Providing a virtual and physical space to encourage creativity, collaboration, and knowledge exchange with

practical and positive impact on cancer care for all those involved. The Collaborative Centre will strengthen the innovation infrastructure and ecosystem for the Trust.

2. A culture of innovation: We are dedicated to fostering a culture where every member of our organisation is empowered, informed, and supported to innovate, experiment, and embrace change, making innovation a way of life rather than an isolated event.
3. Clear communications and recognition: We are committed to delivering clear communications to support the capability and capacity building for Innovation within the Trust. Recognising the efforts of our staff, patients, donors, community, funders partners and stakeholders; and reinforcing our Trust culture of innovation. This includes
4. Patient and Donor Centred Excellence: aspiring to redefine patient and donor centred care, placing patients and donors at the heart of every decision, ensuring their voices are heard, and tailoring healthcare experiences to their unique needs and preference.
5. Leadership and role modelling: As a University Designated Organisation – Senior Leadership are committed to sponsoring key initiatives and novel projects and ensuring that Innovation,

# Innovation

Research, Development, Learning and Education opportunities are enabled and reflected in job roles and responsibilities and provide the support and resources needed to drive innovation.

- 6. Advancing Technology Integration: Our approach is to harness the power of cutting-edge technologies, including artificial intelligence, telemedicine, wearable devices and data analytics, to optimise treatment, experiences, inform diagnostics and preventative care, with the aim of making services more accessible and efficient.
- 7. Data Driven Insights: Leveraging data as a strategic asset, using it to inform our innovation activities and efforts.
- 8. Health equity and Inclusion: Our commitment extends to achieving health equity and inclusion for all with a focus on disparities in healthcare access and outcomes. Our innovations will strive to remove barriers to care and promote health equity.
- 9. Empowerment and Autonomy: Empowering employees by giving them autonomy to propose and implement innovative ideas within their areas of expertise.

10. Training and Development: Innovation training is key to building the capability and capacity of the innovation infrastructure for the Trust. It will equip staff with the knowledge, skills and mindset necessary to drive innovation, improve patient and donor care, and adapt our delivery approaches to the changing innovation landscape. It helps create a culture where innovation is not just encouraged but also effectively implemented for the benefit of our patients and donors.

## Milestones:

- Establish Innovation Infrastructure ●
- Launch Idea platform ●
- Strengthen Infrastructure for Cultural enablement and Communication via training and Innovation champions ●
- Effective project secretariat, reporting structures and benchmarking approach ●
- Apply/Achieve for ISO 56001 certification; receive international award ■

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
Ensuring that innovation activities improve patient experience and enhances quality of life.	Promoting collaborative innovation that considers diverse patient /donor perspectives and community needs.	Strong leadership demonstrated, maintaining transparency in governance and reporting approaches for innovative ways of working and partnerships.

# Value Based Healthcare

Our vision is to enable clinical and operational teams to deliver exceptional services, using linked datasets to identify and deliver continuous improvements that maximise the value, quality, safety, and efficiency of the service our donors and care our patients receive.

In 2023 the Trust received an allocation from the Welsh Government VBHC (Value Based Health and Care) fund to implement 2 programmes, Pre-op Anaemia and the Value Intelligence Centre. In addition to these, the Trust has ratified a Food Mission which is included within the programme.

## Pre-op anaemia programme

This is a national initiative to address the inconsistencies in the diagnosis and management of anaemia for patients undergoing high risk surgery. It has been developed in conjunction with the Wales Blood Health National Oversight Group (BHNOG). The evidenced benefits are:

- Prudent use of donated blood and reduced demand for blood
- Improved clinical outcomes post operatively, especially after major surgery
- Reduced length of stay post-surgery
- Ensuring equity of care and outcomes across Wales in pre-operative anaemia management
- Providing evidence for further roll out of the All-Wales Anaemia Pathway to benefit others.

Recurrent funding has been allocated to each Health Board to recruit clinical staff to support Blood Health Management, and for the programme team within Welsh Blood Service.

- **Milestone:** In 2025 the programme will launch the Preoperative Anaemia Screening Major Surgery Dashboard, and continue to work to develop a data flow for transfusion and use of IV iron. This work aligns with the Infected Blood Inquiry ●



# Value Based Healthcare

## Value Intelligence Centre

The Value Intelligence Centre works across the organisation to enable the optimisation of care through the application of Value Based Healthcare principles.

The team comprises of project management, data, finance and business analysts.

We will achieve our vision through the following enabling workstreams:

- Training, Engagement and Communication
- Technical Development:
- Data Maturity:
- Data Driven Sense Making and Action Planning
- Digital PROMs Platform
- Patient Outcomes

The additional information that patient reported outcomes brings to clinical practice represents a seismic shift in our ability to support shared decision making and patient centred care. The Value Intelligence Centre will work to ensure that the enabling structures are in place to support services with this transition.

- **Milestone** - Over the next 3 years, clinical and operational teams will see a step change improvement in capability to evaluate patient reported outcomes alongside cost of treatment and be supported to change and refine practice as a result ■

### Food Mission:

The Trust’s Food Mission sets a long-term ambition to provide our people with access to affordable, healthy food with an objective to source 70% of our food from Welsh, environmentally friendly or globally responsible providers by 2035. This will improve the wellbeing of patients, donors, staff, and their families.

Outcomes – delivered in line with our Values:

Caring	Respectful	Accountable
Raise awareness of Value Based Healthcare including education, motivation and incentivisation for staff to undertake Value Based Health Care projects	Evidence of integration of early and secondary prevention in line with other priority areas highlighted in this guidance.	Implementation of Value & Sustainability Board recommendations, which includes local implementation of clinically endorsed and mandated product choice to maximise market share and deliver best value.

Further, it will support the delivery of our wider Value Based Healthcare, workforce and sustainability strategies, the Trust’s Wellbeing Objectives, and our ambition to reach Net Zero by 2030.

Milestone: Actions to support this ambition include a menu redesign, swapping catering and hospitality items for enabling access to healthy food, developing knowledge and skills of staff on this subject, working with Procurement to achieve both value and values for money through shorter supply chains and helping to deliver the Social Partnerships and Public Procurement (Wales) Act 2023 ▲

# Velindre University NHS Trust Charity

Velindre University NHS Trust Charity has been a beacon of hope and support for cancer patients in South and Mid Wales for over 28 years. Its mission has been to provide comprehensive care, support, and research funding to improve the lives of those affected by cancer. With a proven track record of success and a strong regional presence, we must now determine a route for expansion to not only advocate for cancer at a regional level, but potentially at a national level, while ensuring the Welsh Blood Service has a comparable route for representation in the charity sector.

**Our vision:** “Invest in promoting quality, care and excellence in services provided by Velindre University NHS Trust.

**Our mission:** “To support the Trust’s provision of world class research-led treatment, care and support for patients and families affected by cancer as well as other patients supported by the Trust and those who are involved in the donation of blood or stem cells.”

Our funds are used in two key ways in the delivery of this Plan. Most are used to support innovative research and clinical trials. These trials can aid the development of advanced treatments that enhance patient and donor care, and improve the quality and safety of blood components and products. Secondly, there is significant expenditure on patients and staff welfare by funding support services, therapies and equipment. These resources help to improve the quality of patient care and contribute to staff well-being.



# Velindre University NHS Trust Charity

## Milestones:

### 1. Enhance Digital Fundraising Efforts

#### Objectives:

- Launch a new, user-friendly online donation platform ●
- Develop and execute a digital marketing campaign to promote online giving ●
- Achieve £10,000 per month income against online donations by the end of ▲

### 2. Launch a Major Charity Expansion Plan to Incorporate Velindre Cancer Services and the Welsh Blood Service

#### Objectives:

- Within the first six months of agreement, develop a strategic plan to integrate Velindre Cancer Services and the Welsh Blood Service creating a Trust wide charity ●
- Foster collaborative relationships with Velindre Cancer Services to enhance patient support and fundraising initiatives ●
- Work with the Welsh Blood Service to promote blood donation drives and increase donor participation by the end of ▲

- Achieve a noticeable increase in donations through joint initiatives with Velindre Cancer Services and the Welsh Blood Service ■

### 3. Expand Donor Base

#### Objectives:

- Implement a donor acquisition plan targeting individuals, corporations, and foundations within year 1
- Increase the number of active donors by 10% ▲
- Establish a donor retention program to maintain and grow donor relationships, aiming for a 15% increase in repeat donations ■

### 4. Organise High-Impact Fundraising Events

#### Objectives:

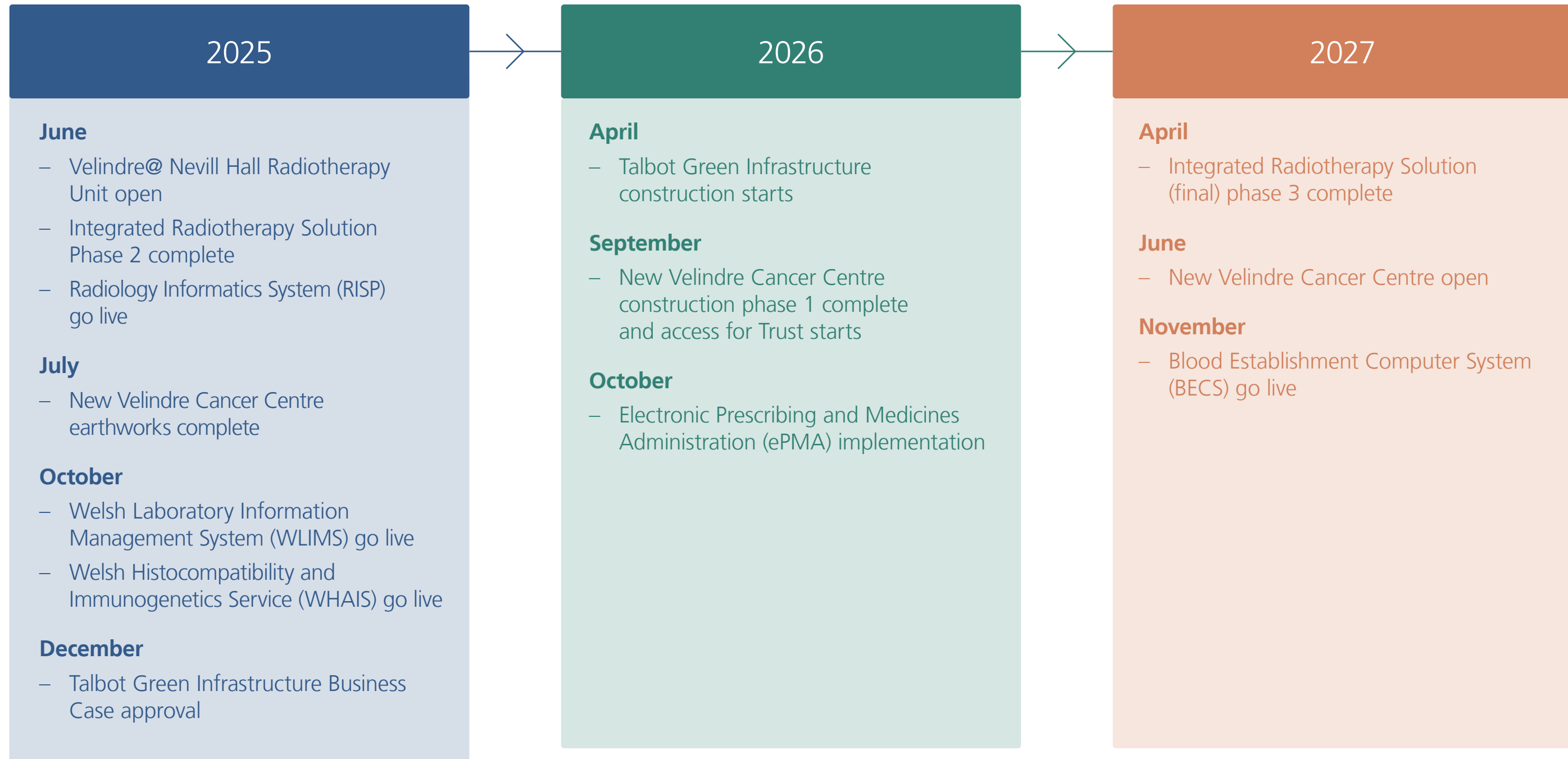
- Plan and execute at least four major fundraising events annually ●
- Collaborate with local businesses and celebrities to boost event visibility and participation ▲
- Raise a cumulative total of £1million from events ■

### 5. Strengthen Corporate Partnerships

#### Objectives:

- Identify and approach potential corporate partners ●
- Secure at least five major corporate sponsorships ▲
- Develop long-term partnership agreements to ensure sustained support, aiming for a 25% increase in corporate donations ■

# Transformation Roadmap



# Overview of our Financial Plan – 2025/26 – 2027/28

This section sets out our Medium Term Financial Plan from 1st April 2025 to 31st March 2028. During this period, the Financial Strategy aims to enable the Trust to meet the anticipated growing demand for services whilst dealing with significant financial challenges due to a number of major strategic developments as part of the Trust's transformation programme. In addition, there are other significant cost and service pressures as well as the cost of implementing additional capacity to deal with rising demand, which will need to be funded by the Trust, Commissioners and Welsh Government in 2025/26.

As outlined in the Health Board Allocations 2025-26 document issued by Welsh Government, the Trust understands that a 1.77% uplift to Recurrent Discretionary Allocations will be provided in 2025-26. In line with Welsh Government policy, and further guidelines received from the NHS Executive Financial Planning and Delivery directorate, we recognise that the funding settlement is intended to support sustainability, unavoidable demand and core cost inflationary pressures. Further, the Trust

recognises Welsh Government's expectation that an equivalent 1.77% allocation will be passed through to Provider organisations by Commissioners.

The Trust financial plan assumes that its Commissioners pass the 1.77% uplift to the Trust via its Long-Term Agreements (LTAs) which is clearly articulated in the allocation letter, which together with a 2.8% savings target, is a fundamental assumption in enabling the Trust to develop a balanced financial plan in 2025/26. However, the ability to deliver a balanced budget during 2025-26 is currently subject to the Trust receiving the Same Day Emergency Care (SDEC) funding on a recurrent basis.

The Trust is expecting to deliver a balanced financial position over the three year period, however there are challenges and risks in achieving this.

The financial plan for 2025/26 consists of three distinct parts:

## Core Plan: Balanced - (At Risk)

### **Balanced Brought Forward Position:**

- The Trust brought forward a balanced position into 2024/25, and despite challenges has managed to maintain this position bringing a balanced position into 2025/26.

- The Trust received significant challenge during 2024/25 from some of its commissioners in relation to the pass through of discretionary income from Welsh Government which resulted in the Trust receiving £0.737m less LTA income than anticipated during the period with £0.254m being on a recurrent basis. This was managed by the Trust through a combination of increased savings target and reducing or mitigating cost pressures and reducing investment decisions.
- The Trust Finance Team have been in regular dialogue with our Commissioners regarding the Trust income assumptions and have agreed LTA funding principles with all Commissioners. However, in order to reach agreement with Hywel Dda on LTA principles and financial value the Trust has had to agree a compromise position with a non-recurrent reduction in NICE / HCS income of c£0.483m as agreed in 2024-25 to reflect resources consumed rather than historic shares. The Trust continues to face a significant recurrent income risk with Hywel Dda beyond 2025-26 of c£0.843m who have given notice that the NICE/HCD £0.483m and historic shares activity baseline funding of c£360k will be removed recurrently in 2026-27.

# Overview of our Financial Plan – 2025/26 – 2027/28

- During 2024-25 LTA activity performance is expected to underachieve the income growth target set by c£0.300m which will result in marginal income not matching the level of service investment that was made to support capacity within VCS. Whilst LTA activity performance has improved in recent months it will remain a financial risk during 2025-26.
- Welsh Government provided recurrent funding towards the increase in energy costs during 2024-25 which eliminated the underlying cost pressure.
- The Trust has received notification that the SDEC funding will cease at the end of 2024-25 which could lead to the Trust reporting a financially unbalanced position for 2025-26 which will need to be recovered on a recurrent basis from the discretionary uplift funding during 2026-27. The Trust is however in dialogue with Welsh Government Officials regarding continued funding of £0.867m to cover the cost of the SDEC IO Toxicity Clinics and Ambulatory care services which has always been considered recurrent funding by the trust in its Financial Plan, given that the costs are recurrent and the service which has been running for a number of years clearly required substantive staffing when first established. The Trust has provided

Welsh Government Officials with a cost – benefit analysis as requested which demonstrates the impact these services have had on reducing Accident and Emergency admissions and inpatient length of stay in Health Board hospitals.

### Growth Pressures:

- The 1.77% core discretionary uplift (sustainability) funding will be required to fund the significant underlying cost pressures, investment in capacity beyond marginal cost, the revenue investment decisions in relation to the Trust’s major infrastructure and equipment projects.
- Divisional cost pressures above those recognised in the Financial Plan at this stage will either need to be mitigated, funded from existing budgets in service divisions or require additional savings above the £2.3m (2.8%) target already identified.

### Savings Plans:

- The following table summarises the level of savings the Trust is planning to deliver during 2025-26 which will be required to support the level of investment decisions and cost pressures within the system.

Savings Plan	2025-26 £000
CIP Planned Savings	1,560
Income Generation	720
<b>Total Savings / Income Generation</b>	<b>2,280</b>
<b>CIP % (of Core LTA values)</b>	<b>2.8%</b>

# Overview of our Financial Plan – 2025/26 – 2027/28

## Financial Plan

- The plan aims to provide services with sufficient capacity to meet demand, whilst targeting improved levels of efficiency and productivity alongside sustained delivery against national targets and / or professional performance standards. In terms of efficiency the Trust has set a 2.8% savings target of £2.3m in 2025-26.
- In addition to this internal savings target and the associated savings schemes the Trust is leading on a number of all Wales service developments that are currently leading to, or will lead to, capacity release, cost avoidance and cost reduction in Health Boards.
- Whilst the Trust is submitting a three year balanced financial plan there is significant financial risk and challenges to deliver this plan particularly in the first year due to the uncertainties around the income it will receive to cover the committed capacity investment in Velindre Cancer Services, and whether or not the Trust will receive recurrent funding to support SDEC services.
- The proposed financial plan has been developed using the latest assumptions regarding the Trust's expected income from Commissioners and Welsh Government, the likely cost pressures facing the Trust, both pay and non-pay inflation, and realistic, but challenging view of the cost saving potential of our services.
- These assumptions have been discussed and agreed with Commissioners and Trust Board through the engagement process.
- The formal agreement of the Trust income planning assumptions will be summarised within respective Commissioner Long Term Agreements for 2025-26 with planning principles agreed on the 28th February 2025 with a view to formally sign all agreements by June 2025. A summary financial plan reflecting the marginal revenue and cost impact for period 2025-26 to 2027-28 is presented in the following table:



# Overview of our Financial Plan – 2025/26 – 2027/28

Summary of Financial Plan 2025-28	2025-26		2026/27		2027/28	
	In Year Effect £000	FYE of Recurring £000	In Year Effect £000	FYE of Recurring £000	In Year Effect £000	FYE of Recurring £000
Underlying Core Position b/f	0	0	(0)	(0)	0	0
Unallocated reserves b/f	0	0	0	0	0	0
<b>b/fwd. underlying deficit</b>	<b>0</b>	<b>0</b>	<b>(0)</b>	<b>(0)</b>	<b>0</b>	<b>0</b>
<b>Revenue</b>						
<u>Anticipated Commissioner Income:</u>						
LTA Core Uplift (1.77% 25/26 assumed 1.5% for 26/27 & 27/28)	1,065	1,548	1,340	1,340	1,361	1,361
VCS & WBS LTA Income Growth for NICE / Blood Products	11,996	11,996	12,628	12,628	13,355	13,355
VCS LTA Service Growth Investment	1,392	1,392	50	50	6,907	4,377
VCS LTA Marginal Income for Service Capacity Investment	1,307	1,307	1,200	1,200	1,200	1,200
<u>Anticipated WG Income:</u>						
New VCS MIM ASP Payments and Infrastructure Support					34,691	34,691
WG AME & Non Cash (Includes Accelerated Depreciation, Impairment Charge and IFRS 16)	17,142	0	13,421	0	16,986	0
<b>Total Revenue</b>	<b>32,902</b>	<b>16,243</b>	<b>28,639</b>	<b>15,218</b>	<b>74,499</b>	<b>54,983</b>

# Overview of our Financial Plan – 2025/26 – 2027/28

	2025-26		2026/27		2027/28	
<b>In year Changes to Operational Cost Base</b>						
VCS LTA Service Growth Investment for IRS, AO, RSU, nVCC	(1,392)	(1,392)	(50)	(50)	(42,476)	(39,666)
VCS NICE Drug Growth	(7,785)	(7,785)	(7,785)	(7,785)	(7,785)	(7,785)
WBS Blood Derived Products Growth	(4,212)	(4,212)	(4,843)	(4,843)	(5,570)	(5,570)
VCS LTA Marginal Income for Service Capacity Investment	(1,307)	(1,307)	(1,200)	(1,200)	(1,200)	(1,200)
National / General Cost Pressures	(188)	(188)	(171)	(171)	(171)	(171)
Divisional Cost & Service Pressures	(3,157)	(2,545)	(3,169)	(2,469)	(2,312)	(1,891)
WG AME & Non Cash (Includes Accelerated Depreciation, Impairment Charge and IFRS 16)	(17,142)	0	(13,421)		(16,986)	
<b>Total In Year Changes to Cost Base</b>	<b>(35,1820)</b>	<b>(17,428)</b>	<b>(30,639)</b>	<b>(16,518)</b>	<b>(76,499)</b>	<b>(56,283)</b>
<b>Net Opening Balance before Savings</b>	<b>(3,085)</b>	<b>(2,052)</b>	<b>(2,000)</b>	<b>(1,300)</b>	<b>(2,000)</b>	<b>(1,299)</b>
Savings Plan 2.8% (2025/26)	2,280	1,185	2,000	1,300	2,000	1,300
<b>Net Opening Balance</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

# Overview of our Financial Plan – 2025/26 – 2027/28

## Income Assumptions

### Income Assumptions and Extent of Alignment with Commissioner and Welsh Government Plans

The following are the income growth assumptions the Trust has made to meet the unavoidable inflationary, demand and growth pressures forecast during 2025-26:

- Commissioners will uplift LTA values by 1.77% which amounts to £1.548m core uplift in 2025-26 less £0.483m loss in income non-recurrently from Hywel Dda. For planning purpose. The Trust is assuming a 1.5% uplift to LTA values for 2026-27 and 2027/28. The Trust expectation is the uplift is 1.77% and will be passed on by the commissioners as clearly set out in the Health Board Allocation Letter.
- Commissioners will pass through as additional income to the LTA the 2024-25 Agenda for Change Medical and Senior Manager (VSM) staff costs as per the Welsh Government Pay award matrix.
- The 2025-26 Pay Inflation is not currently agreed but is expected to be funded directly by Welsh Government over the three years of this Plan

based on actual staff in post (any shortfall such as staff increments and use of bank staff will need be met by discretionary uplift, additional savings or absorbed by Divisions).

- **In line with Welsh Government guidance any planning assumption for the 2025-26 pay award is excluded from the financial plan, but the assumption is Welsh Government will continue to fund in addition to the 1.77% uplift.**
- Funding for the Real Living Wage (the impact of the policy on Social Care) will be dealt with as a non-recurrent allocation, addressed in year.
- The cost increase in employer's pension contributions from 14.3% to 20.6% will continue to be paid by Welsh Government. **(Per Welsh Government guidance excluded from the plan)**
- Allocations for accelerated depreciation, AME depreciation for donated assets, relevant IFRS 16, and DEL and AME impairments will be issued as direct funding from Welsh Government. This will also apply to any increases in depreciation related to approved schemes with confirmed strategic support.

- Activity demand modelling forecasts £1.300m additional LTA marginal cost income above the 2024-25 projected outturn.
- The Trust will receive pass through income from commissioners to cover the cost of NICE / High-Cost drugs the Velindre Cancer Service uses in delivering cancer care. The forecast annual cost growth has been estimated using historic trends and the latest horizon scanning, this amounts to a £7.800m increase in 2025-26.
- The Trust will receive pass through income from Health Boards through their Service Level Agreements (SLAs) to cover the cost of wholesale blood derived products the Welsh Blood Service supplies to them. The forecast annual cost growth for 2025-26 has been calculated based on an estimated 15% volume growth and general price inflation totalling £4.200m.
- In 2022-23 the Trust secured funding from Welsh Government from the Value Based Healthcare fund. Funding will continue be held by Welsh Government and invoiced based on actual costs.
- Welsh Government and / or Joint Commissioning Committee will fund the WBS Plasma for Medicines (Fractionation) business case.

# Overview of our Financial Plan – 2025/26 – 2027/28

- Welsh Government and / or Joint Commissioning Committee will fund the BECS blood management system business case.
- WBS has been managing a number of financial risks within the service that support supply chain sufficiency, demand and patient safety. In addition, since the publication of the Infected Blood Inquiry in May 2024, the service will be required to improve patient safety for transfusion wherever possible.
- The Trust submitted five Welsh Blood Service business cases relating to key service areas for consideration that help either maintain or improve the safety of the supply chain for the transfused patients in Wales. These cases include:
  1. £0.196m for additional capacity 24/7 for the Red Cell Immunohaematology laboratory
  2. £0.070m for implementation of Haemoglobin S (HbS) testing to comply with national guidance
  3. £0.675m for investment in component development research laboratory capacity to ensure validation and development work required to meet regulations e.g. requirement to replace blood packs which currently contain plasticizer Di (2 ethylhexyl) phthalate (DEHP) due to safety concerns
  4. £0.194m for introduction of new Buccal swab testing and testing pathway for recruitment of stem cell donors to expand Welsh Bone Marrow Donor Registry panel
  5. £0.323 for additional blood collection capacity to ensure the sufficiency of supply of blood products in Wales can be delivered
- Joint Commissioning Committee has not approved additional funding for any of the business cases for WBS. This places a significant increased financial risk on the Trust as these cases are necessary to maintain and improve quality and safety, so the Trust will inevitably be forced to make some investment at financial risk.
- Welsh Government will support the significant investment required in the Welsh Blood Service and wider NHS Wales to deliver the actions required to meet the recommendations from the Infected Blood Inquiry Report, ensuring quality and safety within the Welsh Blood System. The investment required in the Welsh Blood Service to respond to recommendation 8 are set out in the Business Cases that have been submitted to Joint Commissioning Committee and shared with Welsh Government seeking funding consideration.
- The Trust has received notification that the SDEC service development funding of £0.867m available during 2024-25 will cease at the end of the financial year. On application the Trust was led to believe that his funding was recurrent. Unless funding is secured recurrently this becomes a significant issue for the Trust during 2025-26 and beyond in terms of achieving financial balance. It is assumed that the Trust will receive additional income from commissioners to cover any new service developments or additional capacity they agree to commission. Should funding not be agreed, developments and infrastructure will not be implemented, and any costs already committed to will need to be mitigated or removed. Funding for the key service infrastructure, quality improvement, activity growth and cost pressures included in the table below have previously been shared and agreed with Commissioners:

# Overview of our Financial Plan – 2025/26 – 2027/28

VCS Service Growth Investment	2025-26				Incremental Income		
	LHB (£000)	WHSCC (£000)	WG (£000)	TOTAL (£000)	IMTP Total 2025/26 £000	IMTP Total 2026/27 £000	IMTP Total 2027/28 £000
Acute Oncology Services	0			0	0	0	0
Integrated Radiotherapy Solution	621			621	621	(50)	18
Velindre@ Nevill Hall Radiotherapy Unit	671					0	0
nVCC Revenue Budget Recurrent				0	0	0	50,445
nVCC Revenue Budget Non-Recurrent				0			2,412
SACT (MIFs)	100			100	100	100	100
<b>Total Approved Service Improvement &amp; Growth</b>	<b>1,392</b>	<b>0</b>	<b>0</b>	<b>1,392</b>	<b>1,392</b>	<b>50</b>	<b>52,975</b>

- The current financial plan assumes no additional internal investments in major programmes and projects beyond resources agreed within approved business cases. Any additional funding requirements will either need to be met through a reallocation of existing resources, additional savings above the £2.0m target or additional commissioner funding following consideration of a business case.

#### Pay Related Cost Assumptions:

- Expectation that Pay Inflation funding received will cover the cost growth based on actual staff in post. (Any shortfall such as the cost of increments and the use of bank staff will need to be met by discretionary uplift, additional savings or absorbed by service Divisions).

- The Trust financial plan assumes a £1.2m vacancy factor target through natural staff turnover, which will need to be achieved on an ongoing basis in order to balance the overall financial position.
- In line with the guidance the 2025-26 pay inflation and employer's pension contributions from 14.3% to 20.6% have been excluded from the financial plan.

# Overview of our Financial Plan – 2025/26 – 2027/28

## Non-Pay Related Cost Assumptions:

- The national / general cost pressures have currently been estimated at £0.222m for 2025-26. General Non-Pay inflation is forecast to be 2.6% (£0.120m).
- Non-pay Inflationary uplifts on Welsh NHS SLAs of 1.77% (£0.061m) have been assumed for 2025-26 on the basis of a 1.77% core funding uplift to LTA values is passed through to the Trust.

## National / General Cost Pressures:

National / General Cost Pressures	Recurrent/ Non-Recurrent	2025/26 £K	2026/27 £K	2027/28 £K
NHS SLA Increase 1.77% 25/26, (1.5% 26/27 & 27/28)	Rec	61	51	51
Non-Pay Inflation (2.6% 24/25 - 2.5% 25/26 & 26/27)	Rec	120	120	120
Digital (DHCW SLA)	Rec	7	TBC	TBC
<b>Total National Cost Pressures</b>		188	171	171



# Overview of our Financial Plan – 2025/26 – 2027/28

## Local Core Service Growth and Cost Pressures

- The Trust has undertaken a review of its local core service growth and cost pressures, which has resulted in a number being mitigated, removed or costs reduced.
- The cost pressures in the table below are included in the financial plan as needed to meet demand, quality & safety statutory requirements and essential Trust wide infrastructure so unavoidable for 2025-26.

Local Cost Pressures	Recurrent/ Non-Recurrent	2025/26 £K
<b>VCS</b>		
VCS Service Investment to maintain capacity above marginal income	Rec	675
EPMA - National Development	Rec	260
C&V Pathology SLA	Rec	70
Increased Radiology Reporting Fees	Rec	147
Growth in Radiation Services (advice, activity, consumables)	Rec	120
HCSW Regrades	Rec	35
MRI Safety Expect (Medical Physics)	Rec	36
Radiopharmaceutical Nuclear Medicine	Rec	170



# Overview of our Financial Plan – 2025/26 – 2027/28

Local Cost Pressures	Recurrent/ Non-Recurrent	2025/26 £K
<b>WBS</b>		
WBS Service investment to support Deliver Model	Rec	160
WBMDR	Rec / Non Rec	662
WBS Licenses (Vertigo, Esign and Qpulse)	Rec	46
<b>Corporate / Trust</b>		
W&OD Attraction and Resourcing lead	Rec	50
External Contracts (Audit Fees, Trust wide Systems)	Rec	73
Scan for Safety	Rec	28
VCS Estate running costs	Non Rec	300
Inflationary External Contracts	Rec	22
MCA Practice Educator	Rec	23
Trust Pay Increments (Unfunded 2024-25 Pay Award)	Rec	280
<b>Total Local Cost Pressures</b>		<b>3,157</b>



# Overview of our Financial Plan – 2025/26 – 2027/28

- The current financial plan assumes that cost & growth pressures that have been identified as unavoidable for 2025-26 will be funded in part by the 1.77% LTA core uplift (sustainability & capacity) and in part from savings delivery.
- Other local pressures of c£0.900m are expected to be mitigated or managed at Divisional level.
- The national cost pressures are funded in part by the 1.77% LTA core uplift (sustainability & capacity) funding and in part from savings delivery:

## Other Assumptions

- Prioritised service developments will be submitted to commissioners as business cases for funding consideration.
- Plan assumes no additional investment in major programme / project resources beyond those agreed in capital business cases.
- The plan assumes Divisions will mitigate or manage other local cost pressures not recognised in the financial plan.
- Expectation is other new cost pressures that may materialise over the period are either avoided/ mitigated as far as possible. Where costs are unavoidable additional savings will be required to fund them.

- Investment in organisational staff capacity and capability to deliver major change Programmes is required to progress regional work to deliver improved cancer services, establish clinical leadership and to meet statutory duties around quality & safety and duty of candor.
- Without funding support for major change capacity and capability the Trust is considering what decisions are required with regards to reallocation of existing resources or delivery of additional savings and efficiencies, but this is proving difficult given competing priorities and will only enable a small element of the staff capacity and capability to be implemented with consequential impact on delivery of major change.



# Overview of our Financial Plan – 2025/26 – 2027/28

## Planned Savings

The following table summarises the level of savings the Trust is planning to deliver in 2025-26.

Savings Plan	2025-26 £000
CIP Planned Savings	1,560
Income Generation	720
<b>Total Savings / Income Generation</b>	<b>2,280</b>
<b>CIP % (of Core LTA values)</b>	<b>2.8%</b>

The Trust has currently Identified schemes against full savings target of £2.000m, (£1.680m RAG Green, £0.600m RAG Amber & 0.000m RAG Red).

	Recurrent	Non Recurrent	Total
Saving RAG Rating	£k	£k	£k
Green RAG Rated Schemes	675	1,005	1,680
Amber RAG Rated Schemes	510	90	600
Red RAG Rated Schemes	0	0	0
<b>Total</b>	<b>1185</b>	<b>1095</b>	<b>2,280</b>



# Overview of our Financial Plan – 2025/26 – 2027/28

Savings Plan by Division	Target £k	Identified (Green) £k	Savings Target Gap £k
Welsh Blood Service	705	555	(150)
Velindre Cancer Centre	1,043	593	(450)
Corporate Services	302	302	0
RD&I	230	230	0
<b>Total</b>	<b>2,280</b>	<b>1,680</b>	<b>(600)</b>

- Work is ongoing within the Divisions to urgently finalise the savings plans and address those schemes that are RAG rated amber. Each Senior Management member has been assigned a target to achieve, ensuring ownership and clear routes for escalation.

## Contracting Model & National Funds Flow Framework

- LTA Contract Rebasing for Velindre Cancer Services:
- The Trust was unable to complete the proposed LTA Contract Rebasing exercise during 2024/25.
- Hywel Dda HB did not agree to the Collective

Commissioner proposed re-base (from 2004/05 activity & cost) of the Velindre Cancer service LTAs using 2023/24 activity and cost with an allocation adjustment between commissioners to neutralise the cost impact in the year of implementation. Hywel Dda wrote to Velindre at the beginning of 2024/25 IMTP process stating they intended to only pay its LTA on actual usage, but with no agreement to this change in payment basis agreed with other Commissioners.

- Currently there is no agreed way forward for the rebasing to progress as Health Boards cannot reach agreement on the principles and there does not appear to be any realistic prospect of agreement.

- During 2024-25 the Health Boards agreed the transfer of commissioning for non-Specialised Cancer Services from the Joint Commissioning Committee to Health Boards with an associated adjustment of baseline activity and cost.

## Financial Risks and Opportunities

- There are several financial risks that could impact on the successful delivery of the plan. The Trust recognises these and is taking appropriate actions as set out below, to ensure risks are appropriately managed and mitigated against. All areas of delivery are risk assessed and any identified risks are included within the Trust Assurance Framework and Trust wide Risk Register.

# Overview of our Financial Plan – 2025/26 – 2027/28

Key Financial Risks	Worst Case £'000	Best Case £'000	Description / Risk Mitigation
Non Recurrent Funding supplementing core services	(1,200)	0	The Trust has been reliant on non-recurrent contributions from charitable funds and wider external parties/ partners to supplement core services. There is not a sustainable model and remains a risk to the core revenue position going forward
Commissioners not supporting Service Investment / Growth in VCS	TBC	TBC	Several service growth investments have been presented to the Trust commissioners, with early indication that only the SACT Treatment Capacity Expansion will be considered for funding support. 2025/26 marginal income growth held to support service investment.
JCC Not supporting Service investment / Growth in WBS	(1,456)	0	The Trust has received confirmation from JCC that they will not fund any of the WBS Business cases which were submitted to JCC as part of the IMTP process. Funding now sought via Welsh Government following recommendations from the IBI report.
Marginal Income Risk	(500)	0	A new financial risk emerged during 2024-25 whereby LTA marginal income from cancer activity growth is not expected to match the level of investment into services.
Non-delivery of amber / red saving schemes	(600)	0	Divisions to review and finalise savings plans for 2024-25
Management of operational Pressures	(500)	0	Operational cost pressures to be mitigated at divisional level
<b>Total Risks</b>	<b>(4,256)</b>	<b>0</b>	

# Overview of our Financial Plan – 2025/26 – 2027/28

Key Financial Risks	Worst Case £'000	Best Case £'000	Opportunity application and action
Further vacancy turnover savings above the vacancy factor held in divisions	0	400	The Trust has been reliant on non-recurrent contributions from charitable funds and wider external parties/ partners to supplement core services. There is not a sustainable model and remains a risk to the core revenue position going forward
Emergency Reserve	0	500	Several service growth investments have been presented to the Trust commissioners, with early indication that only the SACT Treatment Capacity Expansion will be considered for funding support. 2025/26 marginal income growth held to support service investment.
Bank interest	0	500	The Trust has received confirmation from JCC that they will not fund any of the WBS Business cases which were submitted to JCC as part of the IMTP process. Funding now sought via Welsh Government following recommendations from the IBI report.
<b>Total Opportunities</b>	<b>0</b>	<b>1,400</b>	
<b>Net Financial Risk</b>	<b>(4,256)</b>	<b>1,400</b>	<b>Divisions to review and finalise savings plans for 2024-25</b>

# Overview of our Financial Plan – 2025/26 – 2027/28

## Value & Sustainability

- The Trust is committed to delivering the minimum 2% savings in the next financial year. Further, we will continue to integrate the opportunities identified at national level through the Value and Sustainability Board into the Trust's opportunities pipeline.
- The Trust will continue with the Finance and Investment Enhanced Monitoring arrangements as enhanced measures.
- The purpose of the Finance and Investment Enhanced Monitoring agenda item is to strengthen the control environment by ensuring accountability at an Executive level in relation to:
  1. Savings delivery
  2. Cost control
  3. Choices and Options which could contribute towards wider system financial pressures
- 4. Impacts of spending decisions considering quality, safety, experience and value
 

This process will also help to address the strategic risk theme of Financial Sustainability and Long-Term Value for the Trust.

It will provide an additional level of assurance before reporting to external monitoring bodies including:

  - Monthly Value and Sustainability Board
  - Welsh Government / NHS Exec Quarterly Reviews
- The Trust is reviewing its productivity & efficiency using measures to compare to its peer organisations in England – The Clatterbridge Cancer Centre, The Christie, Royal Marsden, and Leeds Cancer Care to identify areas of improvement.
- The Trust is committed to reducing its reliance on the use of agency staff and the premium costs associated. A significant reduction was seen over the course of 2024-25 with an aim to eradicate all use of agency by the end of quarter 2 2025-26, subject to market conditions enabling recruitment of substantive staff.
- Divisions will continue to review non-value adding clinical practice or processes and changing ways of working through Value-Based Healthcare approach.
- For 2025/26 onwards the Trust will continue to explore ways to deliver value through the organisation and relieve financial pressures across the Welsh NHS system.

# Overview of our Financial Plan – 2025/26 – 2027/28

## Capital Plans for the Trust

The focus of the Capital Investment Programme is to maintain a high-quality environment in which to collect, transport, process and supply blood, treat cancer patients and provide modern treatment equipment.

The Trust has a process through which to prioritise competing capital cases, both in terms of submissions to Welsh Government for All Wales funding and the allocation of Trust discretionary Programme funding.

The capital investment required over the period of the IMTP are schemes that have or will be submitted to Welsh Government as cases for consideration against the All-Wales Capital Fund. These include:

All Wales Approved and Unapproved Capital Schemes	2025-26 £m	2026-27 £m	2027-28 £m	Further Years £m	Total All Wales Schemes £m
<b>All Wales Approved Schemes</b>					
TCS nVCC	22.835	39.954	6.056	0.000	68.845
Integrated Radiotherapy Solution (IRS)	1.020	16.820	0.943	0.000	18.783
Velindre@ Nevill Hall Radiotherapy Unit	1.200	0.000	0.000	0.000	1.200
RISP (DPIF)	0.471	0.000	0.000	0.000	0.471
<b>Total Approved Capital Schemes</b>	<b>25.526</b>	<b>56.774</b>	<b>6.999</b>	<b>0.000</b>	<b>89.299</b>
<b>All Wales Unapproved Schemes</b>					
Whitchurch Hospital Site	1.134	0.945	1.741	0.000	3.820
WBS TGI Infrastructure	2.457	5.762	17.292	41.600	67.111
WBS BECS Blood Management System	TBC	TBC	TBC	TBC	0.000
WBS Plasma for Fractionation	0.910	0.002	0.001	0.000	0.913
WBS Fleet Replacement	0.364	0.738	1851	0.000	2.953
WBS Asset Replacement	0.532	0.215	0.000	TBC	0.747

# Overview of our Financial Plan – 2025/26 – 2027/28

All Wales Approved and Unapproved Capital Schemes	2025-26 £m	2026-27 £m	2027-28 £m	Further Years £m	Total All Wales Schemes £m
<b>All Wales Unapproved Schemes</b>					
Digital WHAIS	0.092	0.000	0.000	0.000	0.092
LIMS 2.0	TBC	TBC	TBC	TBC	0.000
EPMA (DPIF)	0.086	0.025	0.000	0.000	0.111
Digital CRM Multi Case Functions (WBMDR, AOS etc	0.500	0.000	0.000	0.000	0.500
Digital IT Infrastructure	0.500	0.500	0.500	0.500	2.000
Other Digital Service Developments	TBC	TBC	TBC	TBC	0.000
Other Service Developments (New)	TBC	TBC	TBC	TBC	TBC
<b>Total Unapproved Capital Schemes</b>	<b>6.575</b>	<b>8.187</b>	<b>21.385</b>	<b>42.100</b>	<b>78.247</b>
<b>Total All Wales Capital Plans</b>	<b>32.101</b>	<b>32.101</b>	<b>28.384</b>	<b>42.100</b>	<b>167.546</b>

# Overview of our Financial Plan – 2025/26 – 2027/28

## Trust Discretionary Capital Funding

The Trust discretionary allocation of £2.000m for 2025-26 is an increase of £0.089m from the £1.911 allocated during 2024-25

## Depreciation & Impairment Funding:

The Trust will require additional Welsh Government funding to support the accelerated depreciation in relation to the existing cancer centre building and equipment.

The total cost for the accelerated depreciation is expected to be £34.464m with £10.593m having been funded during 2024-25. This will leave a required funding balance of £23.871m over the three years of the IMTP 2025-26 to 2027-28. These costs are set out in the table below and were approved as part of the nVCC FBC:

VCC Accelerated Depreciation	2024-25 £m	2025-26 £m	2026-27 £m	2027-28 £m	Total
Buildings and Equipment	10.593	10.533	10.468	2.870	34.464
<b>Total</b>	<b>10.593</b>	<b>10.533</b>	<b>10.468</b>	<b>2.870</b>	<b>34.464</b>

The Trust will require further Welsh Government impairment funding in 2025-26 of c£3.3m in relation to the capital costs incurred on the highway improvement works which is in addition to the ASDA Enabling Works access road for the new Velindre Cancer Centre which was impaired during 2024-25. This is currently an asset under

construction and will be reflected as such in the Trust Balance Sheet in 2024-25. However, once construction is completed in 2025-26 the asset value will need to be fully impaired as the Trust does not have legal ownership of the asset, but a right to use the asset by way of a license.

# Appendix

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# Appendix 1

## Trust Assurance Framework (Board Assurance Framework) Strategic Risks

This Plan from 2025-8 will take us to the mid-point of achieving our ambitions in Destination 2033. There are strategic risks related to this which form our Trust Assurance Framework (Board Assurance Framework – BAF) and will be actively managed alongside the management of the delivery of activities and outcomes of the Plan. The actions to address these risks are those actions in the Integrated Medium Term Plan. The specific mapping of the actions to mitigate these strategic risks is taking place to report to the Trust Board in July 2025.

Strategic Goal	Strategic Risk
Outstanding for <b>quality, safety and experience</b> .	There is a strategic risk of failure to deliver timely, safe, effective and efficient services for the local population leading to deterioration in service quality, performance or financial control as a result insufficient capacity and resources.
An internationally renowned provider of <b>exceptional clinical services</b> that always meet, and routinely exceed, expectations.	There is a strategic risk that Velindre Cancer Service patient outcomes / experience may be adversely affected due increasing service demands, the need for significant service delivery transformation to meet the rapidly changing and complex treatment regimes, optimised workforce supply and shape, and lack of consistent quality, outcome and mortality metrics.
A beacon for <b>research, development and innovation</b> in our stated areas of priority.	There is a strategic risk of: 1. Not effectively delivering against the Velindre Cancer Service 10 year Cancer Research Ambition and the Welsh Blood Service Research Strategy and 2. The ability to fully embed innovation activities in line with the national Innovation Framework.
An established <b>University Trust</b> which provides highly valued knowledge and experience for all.	There is a strategic risk of failing to optimise the full potential of a University designation.
A <b>sustainable</b> organisation that plays its part in creating a better future for people across the globe	There is a strategic risk of not effectively embedding our role as a sustainable organisation, outside of main infrastructure and specific centrally led activity.

# Appendix 1

Core strategic Enabler	Strategic Risk
Culture	There is a risk of failure to meet or exceed service expectations without the prevalence of a positive working environment, which is characterised by effective values and behaviours, systems and processes
Digital	There is a strategic risk that the Trust fails to sufficiently consider, optimise the opportunities and effectively manage the risks of new and existing technologies, including considerations of Artificial Intelligence and Information Security
Governance	There is a strategic risk that the organisational and clinical governance arrangements do not provide appropriate mechanisms and culture to achieve our medium to long term objectives.
Financial Sustainability	There is a strategic risk that the Trust becomes financially unsustainable if it does not secure sufficient funding for the provision of services and does not maximise its use of resources. Unwarranted variation could impact the value and effectiveness of the care our patients and donors receive.
Transformation Delivery	There is a strategic risk that given this planning window represents such a significant transformation agenda that this change will not be delivered in a way that meets our strategic objectives.

# Appendix 2

## Cabinet Secretary Key Delivery Expectations and Enabling Actions

### Key Delivery Expectations

#### Timely Access to Care

Ministerial Expectations for 2025-6	Cross-reference to Plan
Reduce the number of ambulance patient handovers over 1 hour – national target - zero	Not in scope
Reduce the number of patients who spend 12 hours or more in all major and minor emergency care facilities from arrival until admission, transfer or discharge compared to the same month the previous year, building towards the national target of zero	Not in scope
No patients waiting more than 104 weeks for referral to treatment	Not in scope
12-month improvement trend in the percentage of patients starting first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route), building toward a national target of 80% by 31 March 2026.	Outcome measure in “across Velindre Cancer Service” section of cancer services plan - Q4 ~Year 1
Number of patients waiting more than 8 weeks for a specified diagnostic – target zero	Not in scope

#### Population Health and Prevention

Ministerial Expectations for 2025-6	Cross-reference to Plan
Increase in % of patients (aged 12 years and over) with diabetes who received all eight NICE recommended care processes	Not in scope, although our Trust contribution to this agenda included
Achievement of vaccinations targets in the performance framework	Not in scope, although our Trust contribution to this agenda included

# Appendix 2

## Building Community Capacity

Ministerial Expectations for 2025-6	Cross-reference to Plan
Deliver a 12-month reduction trend in the number of people who are delayed in hospital as measured by the Delayed Pathways of Care dashboard	Outcome measure in Acute Care section of cancer services plan - Q4 ~Year 1
100% of GP practices achieving all National Access Standards for In-hours GMS	Not in scope
Increase in number of people accessing Pharmacist Independent Prescribing Service for acute minor conditions and routine contraception services where the patient reports they would have otherwise visited their GP	Not in scope
Increase in % of adult/child population accessing NHS Dental care over a 24 (adult) /12 (child) month period	Not in scope
Increase in capacity at the weekend of community nursing and specialist palliative care nursing to at least the required levels previously set for 2024/25 and greater where possible	Not in scope
Increase in capacity of Enhanced Community Care to at least the required levels previously set for 2024/25 and greater where possible	Not in scope

# Appendix 2

## Mental Health Access

Ministerial Expectations for 2025-6	Cross-reference to Plan
80% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral	Not in scope
80% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS	Not in scope

## Women's Health

Ministerial Expectations for 2025-6	Cross-reference to Plan
Establishment of one Women's Health Hub in each health board area by March 2026 (aligned to the Women's Health Plan)	Not in scope, although our Trust contribution to this agenda included



# Appendix 2

## Enabling Actions

### 1. Operational Productivity and Efficiency – Urgent and Emergency Care

<b>Objective: Improve timely access to care, reducing the length of wait in key areas of the urgent and emergency care stream through addressing variation</b>	<b>Cross-reference to Plan</b>
Implementation of the Community Based Falls Response - 6 Goals Programme	Not in scope
Implementation of the remote clinical assessment services framework - 6 Goals Programme	Milestone for Acute care section of cancer service plan: Re-develop the cancer telephone helpline service – considering options for regional helpline provision – Q4 ~Year 1
Implementation of acute frailty model at the Front Door - 6 Goals Programme	Implementation of relevant parts of 6 Goals Programme Included as outcome measures for cancer services
Implementation of the Welsh Health Circular - Ambulance Handover Guidance - 6 Goals Programme	Not in scope
Implement the Optimum Hospital Flow Framework - 6 Goals Programme	Implementation of relevant parts of 6 Goals Programme Included as outcome measures for cancer services
Maintaining the actions within the 50 Day challenge that can be delivered consistently with minimal additional resource, within organisations and as a priority within regional partnership arrangements. Ensure consistent delivery of effective integrated discharge planning, utilising the National Discharge Guidance issued by the 6 Goals Programme.	Implementation of relevant parts of 6 Goals Programme Included as outcome measures for cancer services

# Appendix 2

## Operational Productivity and Efficiency – Planned Care

<b>Objective: Improving timely access to care, reducing unwarranted variation in clinical productivity</b>	<b>Cross-reference to Plan</b>
Implement national guidelines with thresholds by Clinical Implementation Network (CIN) and procedure. This includes delivery of effective outpatients through See on Symptom (SOS) and Patient Initiated Follow-up (PIFU) by default. Individual CINs will establish PIFU / SOS targets by specialty & sub-specialty on an ongoing basis by March 2025	Milestone in Planned care section in cancer services plan – Q1 ~Year 1
All new Cataract referrals should be direct listed to treatment stage of the pathway following an admin triage by the end of Q2	Not in scope
Ensure monitoring of DNA/CNA rates is in place for every Outpatient clinic. When DNA/CNA as a combined rate is greater than 5%, overbooking additional patients should be implemented and monitored.	Milestone in Planned care section in cancer services plan – Q3 ~Year 1
Implementation of CIN follow up criteria both prospectively and retrospectively to established Follow-up waiting lists.	Not in scope
On 90% of days planned care inpatient/daycase/theatre recovery capacity should be protected from unscheduled care pressures and outlying of patients by the end of Q1.	Outcome measure in Planned care section in cancer services plan – Q1 ~Year 1
Ensure effective utilisation of theatre capacity through: reducing late starts to less than 20%; reducing early finishes to less than 10%; and increasing session utilisation to the GiRFT standard of 85% by March 2026.	Outcome measure in Planned care section in cancer services plan – Q4 ~Year 1
Improvement in the implementation and delivery of High Volume Low Complexity Theatre lists, with an initial focus on: Anthroplasty 90% compliance with GiRFT standard of 4 primary joints/day, 2 by end of quarter 2; cataract 90% of lists to have 7 Cataracts per list by end of Q2; 90% of the time achieve at least 6 HVLC general surgery procedures on an all day list made up of hernia or gallbladders by end of Q2.	Not in scope

# Appendix 2

## Workforce Productivity

<b>Objective: Maximise workforce productivity and efficiency, strengthening value and effective deployment of the workforce.</b>	<b>Cross-reference to Plan</b>
Fully implement the actions outlined in the Variable Pay & Agency Control Framework Welsh Health Circular	Outcome measure in workforce section – Q4 ~Year 1
Deliver a further continued and sustained reduction in agency expenditure, with a target 30% reduction in 2025/26 from 2024/25 outturn, and ensuring no off-contract expenditure.	Outcome measure in workforce section – Q4 ~Year 1
Ensure a reduction in agency spend on Healthcare Support Worker, Admin & Clerical, and Estates & Ancillary staff to zero by 30th September 2025.	Outcome measure in workforce section – Q2 ~Year 1
Ensure effective implementation of job planning policy, to include ensuring that > 90% of all Consultants have an agreed job plan in place at all times by 30 September 2025.	Outcome measure in workforce section – Q2 ~Year 1
Ensure a reduction in sickness absence in 2025/26 in comparison to 2024/25, through maximising adherence to the requirements of agreed attendance at work policies and adhering to the all-Wales Occupational Health minimum service levels.	Outcome measure in workforce section – Q4 ~Year 1
Ensure effective utilisation of theatre capacity through: reducing late starts to less than 20%; reducing early finishes to less than 10%; and increasing session utilisation to the GiRFT standard of 85% by March 2026.	Outcome measure in Planned care section in cancer services plan – Q4 ~Year 1
Improvement in the implementation and delivery of High Volume Low Complexity Theatre lists, with an initial focus on: Anthroplasty 90% compliance with GiRFT standard of 4 primary joints/day, 2 by end of quarter 2; cataract 90% of lists to have 7 Cataracts per list by end of Q2; 90% of the time achieve at least 6 HVLC general surgery procedures on an all day list made up of hernia or gallbladders by end of Q2.	Not in scope

# Appendix 2

## Maximise Value for Money

<b>Objective: Continue to optimise value for money and contribution to overall efficiency through key non-pay areas, optimising both efficiency and effectiveness</b>	<b>Cross-reference to Plan</b>
Medicines Management - ensure full implementation of the high value medicines Value & Sustainability Board programme, which includes delivering opportunities against each of the four programme areas (maximise use of biosimilars, switch to generics, preferential use of medicines in primary care, restrict low value prescriptions)	Outcome measure for cancer services – Q4 ~Year 1
CHC - ensure implementation of Value & Sustainability Board recommendations which include continued actions to improve clinical and financial effectiveness associated with packages of care. This includes implemented a standard digital solution to support effective intelligence capture on a national basis	Not in scope
Estate - ensure ongoing actions to strengthen estate utilisation including the appropriate repurposing and disposal of under-utilised estate	Estates section – Q4 ~Year 1
Non-Pay - ensure implementation of Value & Sustainability Board recommendations, which includes local implementation of clinically endorsed and mandated product choice to maximise market share and deliver best value.	Value Based Healthcare section – Q4 ~Year 1

# Appendix 2

Improving Value, Optimising Outcomes and Minimising Variation

<b>Objective: Support improvements in outcomes, effectiveness, and value, through optimising how resources are utilised, and focus on improving outcomes</b>	<b>Cross-reference to Plan</b>
Ensuring full implementation of the nationally optimised pathways in the cancer recovery programme	Outcome measure for cancer services – Q4 ~Year 1
Ensuring full compliance with straight to test guidance	Not in scope
Ensure progress with the implementation of Value & Sustainability Board High Value High Impact pathway - Diabetes	Not in scope
Ensure progress with the implementation of Value & Sustainability Board High Value High Impact pathway - Bone Health	Not in scope
Ensure progress with the implementation of Value & Sustainability Board High Value High Impact pathway - Arthroplasty (Hip & Knee)	Not in scope
Ensure implementation of national digital priorities, specifically the implementation of the digital maternity system, and NHS Wales app.	Milestone in Digital plan – Q4 ~Year 1
Support the implementation and roll-out of the NHS Wales app for maximum impact and benefit to include the uptake of its use for repeat prescriptions.	Milestone in Digital plan – Q4 ~Year 1
Eradicate unsupported systems and devices, and ensure a clear cyber response plan for the organisation.	Milestone in Digital plan – Q4 ~Year 1
Progress implementation of the national approach to Interventions not normally undertaken (INNU) - Deliver the 8 priority procedures determined for implementation as part of Phase 1.	Not in scope

# Appendix 3

## Performance Indicators

In addition to tracking delivery of the milestones and outcome measures in this Plan, we will also track the impact of our actions in delivering the following outputs:

	Key Performance Indicator (KPI)	Target	Reported	Baseline March 25	Target 25/26
<b>Safety</b>	% compliance for staff who have completed the Core Skills and Training Framework Level 1 competencies	National	Monthly Average	86%	85%
	Number of VCC Inpatient (avoidable) falls	National	Monthly Average	2	0
	Number of Cancer Centre acquired (avoidable) patient pressure ulcers	National	Monthly Average	<1	0
	Number of Potentially (avoidable) Hospital Acquired Thromboses (HAT)	National	Annual Total	0	0
	Number of Velindre Acquired Infections (VAIs) MRSA bacteraemia (WHC 2024 (38) target)	National	Annual Total	0	<1 24/25
	Number of Velindre Acquired Infections (VAIs) MSSA bacteraemia (WHC 2024 (38) target)	National	Annual Total	1	<1 24/25
	Number of Velindre Acquired Infections (VAIs) P. aeruginosa bact. (WHC 2024 (38) target)	National	Annual Total	0	0 24/25
	Number Velindre Acquired Infections (VAIs) Klebsiella spp bact. (WHC 2024 (38) target)	National	Annual Total	1	4 24/25
	Number of Velindre Acquired Infections (VAIs) C Difficile. (WHC 2024 (38) target)	National	Annual Total	3	<3 24/25
	Number of Velindre Acquired Infections (VAIs) E Coli bacteraemia (WHC 2024 (38) target)	National	Annual Total	1	3 24/25

# Appendix 3

	Key Performance Indicator (KPI)	Target	Reported	Baseline March 25	Target 25/26
Safety	Number of Velindre Acquired Infections (VAIs) Gram negative bacteraemia	National	Annual Total	2	<13 24/25
	% Compliance with World Health Organization 5 moments of Hand Hygiene standard	National	Annual Total	98%	100%
	Number of National VCS Reportable Incidents recorded with Welsh Government	National	Monthly Average	2	0
	Number of WBS Incidents reported to Regulator / Licensing Authority	Local	Annual Total	12	0
	Number of Health and safety incidents recorded	Local	Annual Total	14	0
	Carbon Emissions – carbon parts per million by volume	National	Annual Total	1600 kgCO2	-16% 18/19 kgCO2
	Radiotherapy (RT) 30 Day Mortality Benchmark	Curative	Monthly Average	N/A	2.00%
	Palliative	Monthly Average	N/A	2.00%	
Effectiveness	SACT 30 Day Mortality Benchmark	Curative	Monthly Average	0.14%	2.00%
		Palliative	Monthly Average	1.25%	2.00%
	% Demand for Red Blood Cells Met	Best practice	Monthly Average	105%	100%
	% Time Expired Red Blood Cells (adult)	Local	Monthly Average	0.06%	Max 1%
	% Demand for Platelet Supply Met	Best practice	Monthly Average	125%	100%
	% Time Expired Platelets (adult)	Local	Monthly Average	12%	Max 10%
	Number of Stem Cell Collections annual total	Local	Annual Total	41	80
	% Rolling average Staff sickness levels	National	Rolling Average	5.20%	3.54% 4.70%
	% Personal Appraisal Development Reviews (PADR) compliance staff appraisal carried out by managers	Prof. Std.	Monthly Average	78%	85%

# Appendix 3

	Key Performance Indicator (KPI)	Target	Reported	Baseline March 25	Target 25/26
<b>Patient/Donor/ Staff Experience</b>	% of Patients Who Rate Experience at VCC as very good or excellent	Prof. Std.	Monthly Average	97%	85%
	% Donor Satisfaction	Local	Monthly Average	97%	95%
	% of 'formal' VCC concerns responded within 30 working days	Local	Monthly Average	75%	85%
	% Responses to Formal WBS Concerns within 30 Working Days	Local	Monthly Average	100%	100%
<b>Timeliness</b>	Scheduled Radiotherapy Patients Treated 80% within 14 Days and 100% within 21 Days	National	Monthly Average	82%	80% 100%
	Urgent Symptom Control Radiotherapy Patients Treated 80% within 2 Days and 100% within 7 days	National	Monthly Average	83%	80% 100%
	Emergency Radiotherapy Patients Treated 80% within 1 Day and 100% within 2 days	National	Monthly Average	100%	80% 100%
	Elective delay Radiotherapy Patients Treated 80% within 7 Days and 100% within 14 Days	National	Monthly Average	94%	80% 100%
	% Patients Beginning Non-Emergency SACT within 21 days	National	Monthly Average	97%	98%
	% Patients Beginning Emergency SACT within 5 days	National	Monthly Average	100%	98%
	% Antenatal Turnaround Times (within 3 working days)	Best practice	Monthly	94%	90%
	% Turnaround Times (Antenatal -D & -c quantitation) within 5 working days	Best practice	Quarterly	89%	90%

# Appendix 3

	Key Performance Indicator (KPI)	Target	Reported	Baseline March 25	Target 25/26
<b>Efficient</b>	Financial Balance – achievement of Trust forecast (£k) in line with revenue expenditure profile	National	Monthly	£0.042m	0
	Financial Capital spend (£m) position against forecast expenditure profile	National	Monthly	£35.072m	£35.076m
	Trust expenditure (£k) on Bank and Agency staff against target budget profile	National	Monthly	£0.596m	£0.179m
	Cost Improvement Programme £1.3M achievement of savings (£k) in line with profile	National	Monthly	£2.875m	£2.875m
	Public Sector Payment Performance (% invoices paid within 30 days)	National	Monthly	98%	95%
<b>Equitable</b>	Mean Gender Pay Gap – Annual	Local	Annually	TBA	5%
	Diversity of Workforce – % Black, Asian and Minority Ethnic people	Local	Quarterly	6.74%	6%
	Diversity of Workforce – % People with a Disability within workforce	Local	Quarterly	6.85%	22%
	% of Workforce who have declared Welsh Language Listening/Speaking capability	National	Quarterly	95.61%	0%



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