	Name of Meeting
	Board
	Date of Meeting
	30 April 2020
	Agenda item:
	4.1.300420

COVID-19

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	Huw George - Deputy Chief Executive and Executive Director of Finance and Operations
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Approval/Scrutiny route:	N/A

Purpose
The purpose of this report is to provide the Board with an update about the Public Health Wales response to the COVID-19 pandemic.

Recommendation:				
APPROVE ☐	CONSIDER ☒	RECOMMEND ☐	ADOPT ☐	ASSURANCE ☐
The Board is asked to: • **Receive** the update report in respect of COVID-19.				

Link to Public Health Wales [Strategic Plan](#)

Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities.

This report contributes to all of the Strategic Priorities

Summary impact analysis	
Equality and Health Impact Assessment	No decision is required
Risk and Assurance	Please see section contained within the paper. The Board is also referred to the agenda items in relation to the Strategic Risk Framework and Corporate Risk Register.
Health and Care Standard	This report supports and/or takes into account the [Health and Care Standards for NHS Wales](#) Quality Themes Governance, Leadership and Accountability
Financial implications	See separate paper in relation to COVID-19 finance and integrated performance report
People implications	No workforce section of this paper.

1. Purpose / situation

Novel Coronavirus, COVID-19 was declared a pandemic by the World Health Organisation on the 13 March 2020.

This paper sets out an update to the Board in a number of key areas. The Board is asked to note the pace of change with regards the pandemic and therefore anything written in this paper will have almost certainly developed or changed at the date and time of the Board meeting.
A verbal update at the meeting will supplement this paper.

2. The Global, UK and Wales context

We continue to publish data on a daily basis, the link to which is available [here](#).

3. Emergency Response level

We continue to treat the COVID-19 pandemic at enhanced level – this is reviewed on a weekly basis. The emergency response plan matrix previously shared with the Board (and attached as **appendix one**) continues to be the guiding resource during weekly reviews.

4. Updates on specific work-streams

Whilst recognising there is a number of work-streams involved in the pandemic response, two specific work-stream updates are contained within this paper.

Testing - Public Health Wales has been working with colleagues in NHS Wales, Welsh Government, NWIS, Life Sciences hub and the UK Department of Health and Social Care (DHSC) regarding testing in Wales. A detailed update is available in **appendix two** of this paper.

Closed settings - Public Health Wales established a closed settings cell in mid-March, in response to increasing concerns regarding the potential spread of COVID-19, in these settings. The cell has been dealing with a wide range of settings, including homeless shelters, domestic abuse refuges and children's homes. The vast majority of settings that the cell has been dealing with are care homes. The closed settings cell is co-ordinating the management of cases and clusters in these settings including provision of infection prevention and control advice at the earliest opportunity. The cell has also been making referrals for staff and resident testing as part of this response.

The team involved in supporting the closed settings work has also been working with local environmental health teams to engage their support in proactively contacting care homes that have not been in contact with Public Health Wales, in order to support them to prevent COVID 19 incidents in these homes. Local environmental health teams will also be offering enhanced support to care homes with active incidents, in order to prevent further spread.

The team have worked alongside health protection colleagues and with Welsh Government to inform policy changes and have produced a national guidance document has been published, called *Admission and Care of Residents during COVID-19 Incident in a Residential Care Setting in Wales.* An update to this guidance is currently underway.

5. Health Protection Response Plan

The Board has met twice during the week of the 27 April to consider the draft *Public Health Protection Response Plan* response to Welsh Government. The Board will receive the final draft during its private Board session on the 30 April. The paper will not be published on the basis it is classified official sensitive.

6. Public Health Wales Organisational Recovery Plan

In early April work began to develop the way forward for organisational recovery and on 16 April 2020, Gold agreed a new strategic objective: '*Public Health Wales is able to effectively respond to future public health challenges, reactivate our services in a planned way and provide the necessary support to our staff*'.

An update on this work is available as **appendix three** to this document.

7. Public Health Wales Workforce

Protecting and supporting our workforce during the pandemic is an important part of our COVID response, the scope of which includes:

- supporting staff well-being through a range of resources
- temporary amendment of some workforce-related policies
- effective redeployment and mutual aid arrangements
- practical support and advice, e.g. home working

A substantial update about the work underway and the support available to our workforce is provided to the Board in a separate paper within the COVID-19 agenda item. The paper is entitled *Workforce Update COVID-19*.

8. Innovation and Collaboration

We are working in collaboration with a number of partner organisations including Health Boards, Welsh Government, UK Government, the Life Sciences Hub and NWIS to support the response to the pandemic. As part of those collaborations work with industry partners has increased significantly to provide solutions needed. These include:

- Work with Perkin Elmer to provide test equipment
- Work with NWIS to develop an electronic test request for the lab, replacing manual entry of information within the lab
- Work with Rocialle to create swab kits
- Development of a web front end to support booking for testing
- Development of a home delivery service for testing
-

Exploratory conversations are also taking place around:
- Contact tracing and outbreak management applications
- The use of machine learning in supporting outbreak management

9. Worldwide learning and review

The fast-evolving nature of the COVID-19 pandemic and the significant unknowns, coming with a new virus and the disease it causes, have led to unprecedented challenges for health systems, as well as to dramatic wellbeing, social and economic impacts. To understand, mitigate and address these, a joined-up, collaborative, timely, and evidence-informed public health action is essential across all governance levels, sectors and stakeholders, as well as internationally. Continuous and timely learning from the experience of other countries and the emerging evidence and guidance, provided by key international organisations, is critical to inform such action and approach forward.

Public Health Wales has already established strong international links and partnerships, allowing active learning, sharing and access to intelligence on COVID-19. Public health thinking and response have been continuously informed by international experience, evidence and key international guidance, starting from the early stages of the epidemic and moving towards mitigation and management of wider public health, societal and economic impacts in the transition and recovery stages.

As a member of the IANPHI (International Association of National Public Health Institutes), Public Health Wales hosted a webinar in early March, attended by 11 European national public health institutes including Germany, Italy and France, focusing on public communication. We have also taken part in webinars with the South Korean and China Centres for Disease Control and Prevention. Public Health Wales has also had a bilateral discussion with the Robert Koch Institute in Berlin, the National Health Protection Centre for Germany.

Our World Health Organization (WHO) Collaborating Centre on Investment for Health and Well-being is working closely with the WHO Regional Office for Europe, including the Venice Office and the Regions for Health Network. We have gained first hand access to the latest global and European guidance, evidence and learning, related to the wider COVID-19 impacts on people's health and wellbeing, equity, community and system resilience, society and the economy.

Our International Health Coordination Centre (IHCC) has been helping to disseminate and utilise international learning and experience from a range of European and global networks and organisations, and in collaboration with the five nations (including Ireland). A weekly e-bulleting with most recent information and resources is circulated to our Wales' networks.
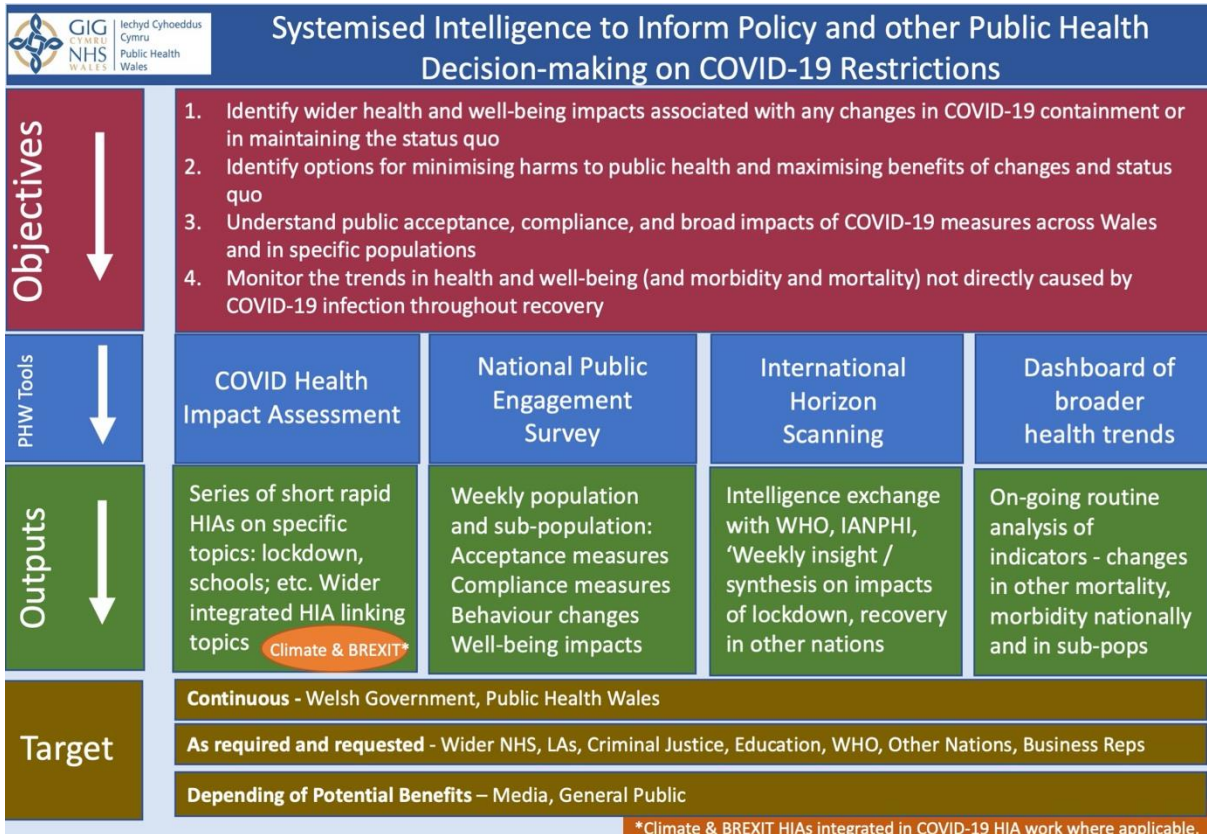
More recently, in response to the evolving COVID-19 measures, informing Wales' public health response and recovery plans, Public Health Wales has focused on developing an *International Horizon Scanning* work stream (as agreed with Welsh Government). This focuses on international COVID-19 response, wider impact mitigation, transition and recovery approaches, including:

- Proactive gathering and monitoring of international COVID-19 public health experience, data and emerging evidence/learning (from key organisations and selected countries);
- Collating, summarising and synthesising relevant information and intelligence; and
- Providing a regular (weekly) briefing/report to inform public health and wider action.

This work is currently being aligned with and feeding into the Welsh Government Office for Science as well as into Public Health Wales decision making processes.

10. Understanding and responding to the wider societal impacts of Coronavirus and measures taken to control its transmission

Public Health Wales also recognises that responses to control the virus and related restrictions placed on the public can also have negative impacts on aspects of population health and well-being. Consequently, it is critical that these are understood, monitored and, through decision-making processes, negative impacts are avoided or minimised wherever possible. Control measures developed, implemented, maintained or relaxed with due consideration to both their potential short- and long-term benefits and harms are those most likely to best protect the broader well-being of all individuals and communities across Wales. Consequently, Public Health Wales is taking forward a series of measures (see diagram below) to ensure that impacts of Covid-19 measures on broader population health are better understood, considered in plans to control Covid-19 and that public acceptability and compliance can also be factored into planning.

Systemised Intelligence to Inform Policy and other Public Health Decision-making on COVID-19 Restrictions

Objectives	
	1. Identify wider health and well-being impacts associated with any changes in COVID-19 containment or in maintaining the status quo
	2. Identify options for minimising harms to public health and maximising benefits of changes and status quo
	3. Understand public acceptance, compliance, and broad impacts of COVID-19 measures across Wales and in specific populations
	4. Monitor the trends in health and well-being (and morbidity and mortality) not directly caused by COVID-19 infection throughout recovery

PHW Tools	COVID Health Impact Assessment	National Public Engagement Survey	International Horizon Scanning	Dashboard of broader health trends
Outputs	Series of short rapid HIAs on specific topics: lockdown, schools; etc. Wider integrated HIA linking topics **Climate & BREXIT***	Weekly population and sub-population: Acceptance measures Compliance measures Behaviour changes Well-being impacts	Intelligence exchange with WHO, IANPHI, 'Weekly insight / synthesis on impacts of lockdown, recovery in other nations	On-going routine analysis of indicators - changes in other mortality, morbidity nationally and in sub-pops

Target	
	Continuous - Welsh Government, Public Health Wales
	As required and requested - Wider NHS, LAs, Criminal Justice, Education, WHO, Other Nations, Business Reps
	Depending of Potential Benefits – Media, General Public

*Climate & BREXIT HIAs integrated in COVID-19 HIA work where applicable.

11. Risk

Risk in a pandemic is very multi-faceted. The development of the strategic risk framework in relation to COVID-19 has been considered by the Gold group and is being further developed for Board consideration.

A PESTLE analysis has been conducted as part of our policy advice to Welsh Government and is available to Board members in the closed meeting papers.

It is also recognised that there are significant risks which are already likely to be impacting on the public's health and wellbeing. Public Health Wales is undertaking a population survey which will provide further evidence to inform decisions which will need to be made in this area. This is in addition to the ongoing population surveillance work we undertake within the organisation.

With regards to financial risk, this has been considered in the board paper relating to financial delegations contained on the 30 April agenda.

With regards to organisational workforce related risks, this has been considered within the Board paper relating to COVID-19 and workforce again contained on the 30 April agenda.

At operational level, the corporate risk register has been updated in response to the COVID-19 pandemic and is available to the Board within the corporate risk register agenda item and paper for the 30 April meeting.

It is recognised that there are significant risks to the public's health and wellbeing that can result from measures taken to control the spread of COVID-19.   Public Health Wales is undertaking a population survey, Health Impact Assessments and examining learning from the international public health community in order to understand such risks and inform an evidence population health approach to tackling COVID-19 across Wales.

12.   Operational Management Arrangements and Governance

A *Board Governance* paper was considered by the Board on the 26 March 2020 when the Board:

- **Approved** the proposed temporary variations to the identified standing orders;
- **Approved** the revised approach to Board Level decision making;
- **Approved** the approach to public communication from the Board given that the Board will not meet in public for the foreseeable future (assuming the approval of the variations to standing orders).

An additional paper has been provided within the agenda for the 30 April 2020 Board entitled '*Governance Arrangements*' which provides an overview of the operational management arrangements the Chief Executive has put in place in response to the management of the COVID-19 pandemic. The purpose of the paper is to provide assurance to the Board.
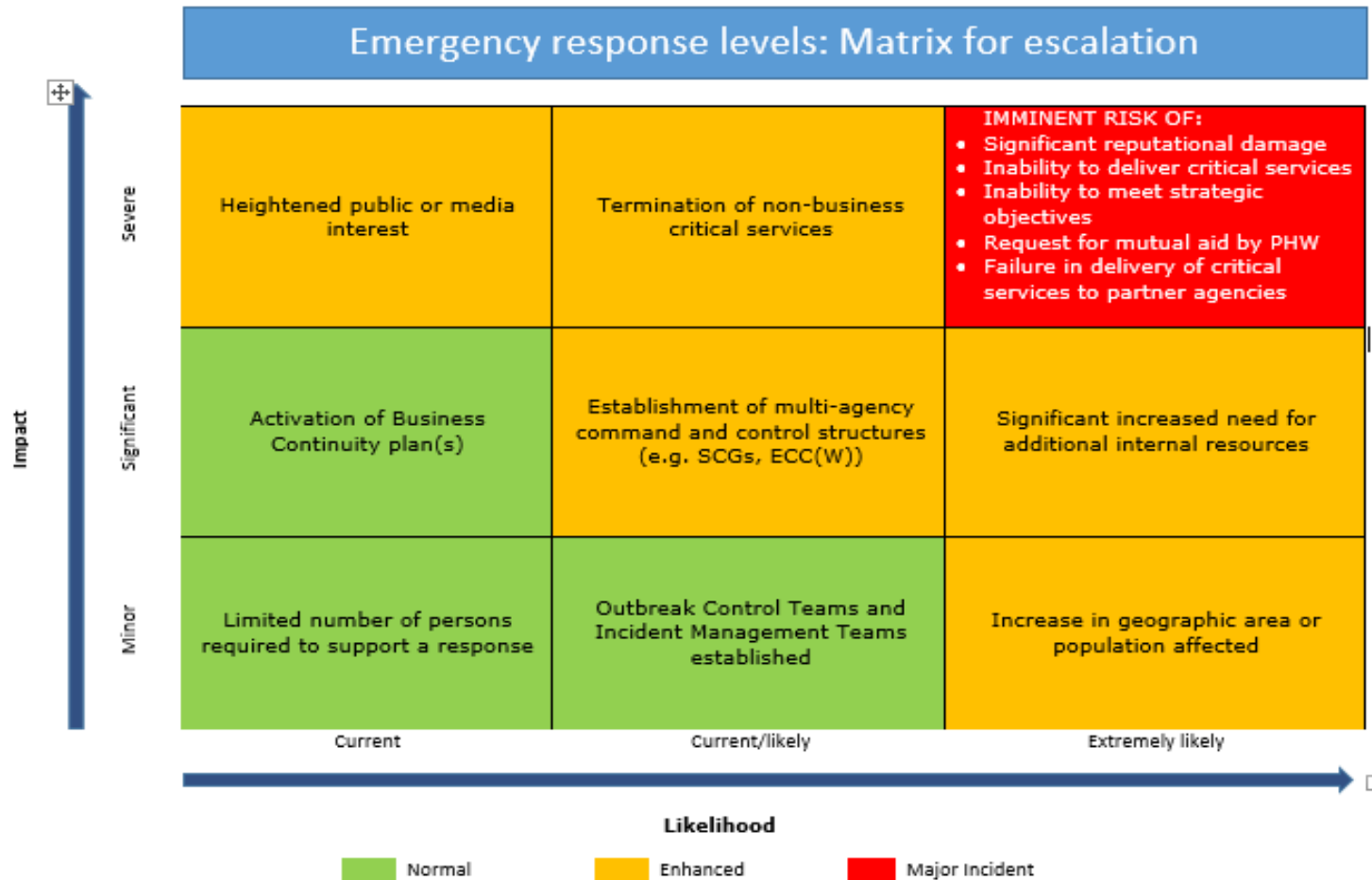
Within the same *Governance Arrangements* paper for the 30 April 2020, the Board is asked to consider a range of matters in relation to Board retained decisions, the organisations role in providing advice to Welsh Government, the focus of Board agendas and the working principles for the Board.

13.   Recommendation

The Board is asked to:

- **Receive** the update report in respect of COVID-19.

Appendix one – Emergency Response levels, Matrix for escalation

Emergency response levels: Matrix for escalation

Impact	Current	Current/likely	Extremely likely
Severe	Heightened public or media interest	Termination of non-business critical services	**IMMINENT RISK OF:** • Significant reputational damage • Inability to deliver critical services • Inability to meet strategic objectives • Request for mutual aid by PHW • Failure in delivery of critical services to partner agencies
Significant	Activation of Business Continuity plan(s)	Establishment of multi-agency command and control structures (e.g. SCGs, ECC(W))	Significant increased need for additional internal resources
Minor	Limited number of persons required to support a response	Outbreak Control Teams and Incident Management Teams established	Increase in geographic area or population affected

Likelihood

Legend:
- Normal (green)
- Enhanced (orange/amber)
- Major Incident (red)

Appendix two – Testing Update

Public Health Wales has been working with colleagues in NHS Wales, NWIS, Life Sciences hub and the UK Department of Health and Social Care (DHSC) regarding testing in Wales.

Over the last several weeks the UK had developed a digital booking solution, drive through centres and more recently home delivery of testing kits to individuals as part of their response. Wales has been concurrently developing its own solution as the UK solution presented significant challenges if used within Wales:

- Wales uses a single dry throat swab rather than the two wet swabs used in the DHSC model. It was felt not appropriate to have two different swabbing processes taking place in Wales
- PHW preferred for all swabs to pass through, and be tested, in PHW labs rather than labs across the UK.
- Swabs that would have been analysed in UK labs (Glasgow, Milton Keynes and Imperial College) would have had their results stored in England. At the time of discussions there was no opportunity to report the data back in Wales and be stored within the Welsh Clinical Portal.
- There was a need to develop a more digital solution to support mass testing within Wales as a number of the processes within the laboratories involved manual input of data. This has resulted in the development of electronic test requesting.

To that end, PHW has worked with partners to develop a digital end to end process that could begin to be mobilised week commencing 27th April. However, this is contingent on business cases being agreed with industry partners. The elements of the process are laid out below:

1. Referral

To date the process of referral for key worker testing has been handled manually using spreadsheets detailing individuals requiring a test. This has presented a number of challenges for employing organisations and for PHW in coordinating testing. A digital solution has, therefore, been preferred whereby key workers can book a test online. Whilst this solution is currently in development further clarity is required regarding key workers and their families, and referral processes. Discussions are on-going with Welsh Government

PHW, NWIS and the Life Sciences Hub have been working with AWS (a subsidiary of Amazon) to develop a system. AWS have provided this support free of charge to develop a proof of concept:

- When a key worker identifies as needing a test their employer will provide them with a link to a website.

- The website will check the individual's details against a database of key workers. If they are within the database, and pass through a symptom checker to ensure they have symptoms consistent with COVID infection they will be offered a test.
- Initially this will to book into a drive through testing centre. But ultimately it will provide the ability to book either at a drive through facility or receive a home delivered test, and generate the test request for the labs. This is a significant and positive difference from the UK solution.

Proof of concept pilot took place 25th and 26th April with South Wales Police. There were no issues, and feedback was positive.

Discussions have been taking place with The Server Labs, a company that could host the website, and provide the necessary development beyond proof of concept. The business case for this was sent to Welsh Government 26th April. This was signed off by Welsh Government and approved at board on 28th April. The website could go live (barring any issues) 30th April for booking of tests into Cardiff City, with other sites and key worker groups being added to the site. PHW and NWIS are working on the implementation plan on 28th April.

The Server Labs will also work with NWIS to develop the full functionality of the site to enable home delivery kits to be booked, and ultimately antibody testing as well. This development will also start as soon as the business case is signed off.

2. Sampling

Sampling is taking place across Wales from Coronavirus testing units, set up by the Health Boards. In support of these, additional sampling capacity is being set up through the use of drive through facilities (Population Sampling Centres) and mobile testing units. A map detailing current testing units and drive through facilities is outlined below.
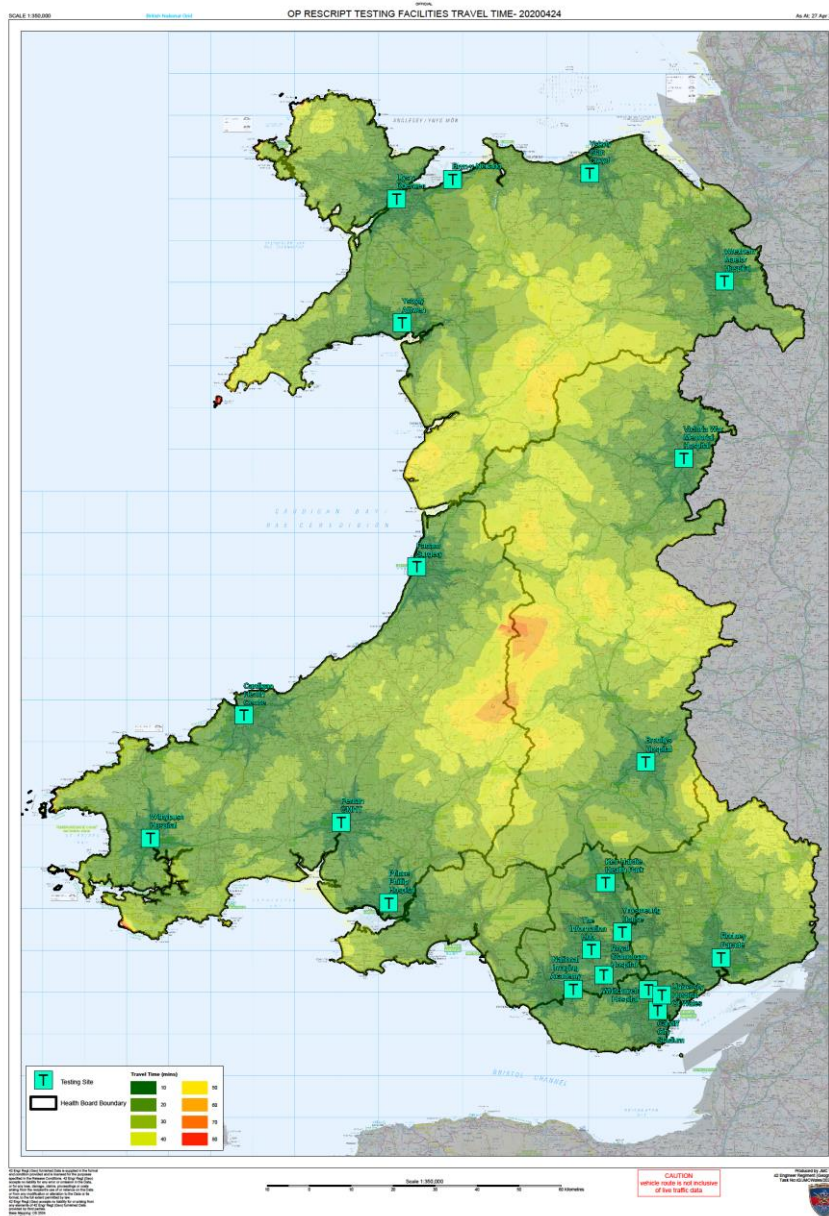
The significant increase in swabs presenting to labs has required a redesign of the test request process. As part of this work, PHW have worked closely with NWIS to develop and electronic test request process. This is now available for all sites to use, and at this point, most are. Further developments with The Server Labs and NWIS will mean that this test could be generated for the key worker when they log in to the website, identifying themselves as requiring a test.

Population Sampling Centres
In addition, PHW has been working with DHSC and Deloittes to set up drive through facilities. DHSC has committed to providing the funding for four such facilities in Wales.

The first facility was at Cardiff City Stadium and opened in early April. There were challenges initially as little communication had taken place between UK and Wales regarding the site. This has now been resolved, and there is

a good working relationship with DHSC and Deloittes and partners. PHW currently runs the site and it continues to receive ~100 referrals a day. There is capacity on site to increase this volume significantly.

Sites are also being developed in West Wales, North Wales and one other site. These sites will be run by Health Boards:
- Carmarthen show ground – led by HDUHB. PHW is supporting. Contractors commenced on site on 25/4. The target opening date is 30/4/20, but envisaged there will be small scale testing 29/4 to ensure processes are robust
- Llandudno – led by BCUHB. PHW is supporting. Contractors commenced on site 26/4. The target opening date is 30/4, but it is envisaged there will be small scale testing 29/4 to ensure that processes are robust.
- Conversations have been had with CTMUHB regarding a site that has been identified by Deloittes in Merthyr Tydfil. This is now progressing with contractors on site. The aim is to go live 1/5.

There is currently no further support from DHSC to support additional sites at this time. DHSC are currently considering the option to support additional testing sites and will update in the coming days.

Discussions are taking place as to how to support Powys. Conversations are planned to discuss how to support SBUHB. However, any additional drive through sites will need to identify additional funding streams

Mobile testing units
Recently Wales, with support from the military have received 8 mobile testing units. Each unit consist of 12 soldiers and 3 vans. Two of these units were delivered 27/4, and teams are being trained in their use. A further 2 units will be delivered before 1/5.

They will be ready to deploy this week, with one staying in Llandudno and one being deployed to West Wales. A further 4 teams will be available 4/5 for deployment. It is envisaged that these will develop a hub and spoke model with the Population Sampling Centres.
Discussions are taking place as to how they can support. Additionally discussions are taking place as to how they can support testing within care homes. No firm agreement has yet taken place. Conversations have also taken place with Powys and CVUHB to support. The military are also looking to procure 4 additional teams, giving 8 in total.

Home delivery of test kits
The ideal solution is still in development. Conversations are taking place with industry partners to develop this for Wales. At the time of writing no contract or business case has yet been finalised, although it is intended to

be developed and signed by 1/5/20. If this is agreed and signed off, piloting of home delivery of kits could commence during the week of 4th May.

Using the web front end that has been developed, the key worker will be able to request a kit to be delivered home. This will either be picked up by a courier, or the key worker will drop off at specified locations across Wales.

The home delivery solution is essential to provide the necessary sampling capacity to support the recovery phase

3. Testing

It is intended that, at the present time, all samples taken in Wales are processed through PHW labs. Courier services will collect samples from drive through locations, CTUs, drop off locations (and potentially from key worker homes) and convey to the labs. Initially this will be Cardiff and Magden Park, but will also be to other locations as necessary equipment is installed in Wales. The testing capacity is outlined in the PowerPoint slides below.

It is essential that sampling capacity at drive troughs, CTUs and home delivery is closely aligned to the testing capacity of the labs.

4. Results

Provision of results has been at times a challenge as it has been largely manually administered to employing organisations. On the 20th April a mobile phone text based process was piloted at Rodney Parade and Cardiff City stadium, whereby the result was texted to the key worker who had been tested. The pilot was a success and this process is being continued. However at the moment this process is being used for non-NHS key workers. There are information governance issues to work through this week. However, it is envisaged that all key workers could utilise this process going forward.

Additionally, all results are stored within Welsh Clinical portal, providing a permanent record of the result.

Key milestones for current work, contingent on business case approval:
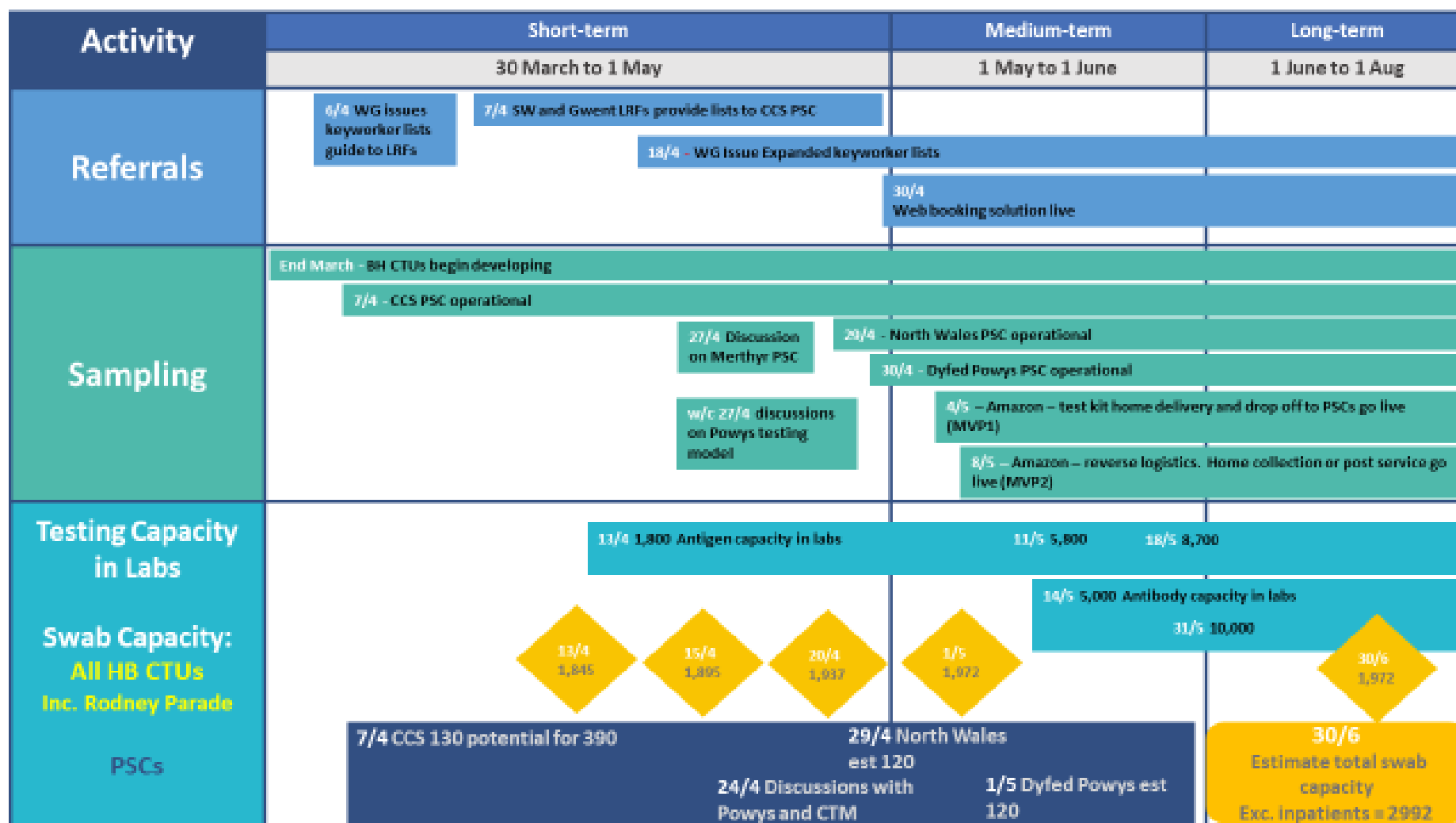
Welsh Government approval to proceed to sign Contract with The Server Labs
Transfer of Web-site to The Server Labs from AWS
Test of website for one organisation to request test and complete booking via PHW to fixed mass testing unit
Link with an industry logistics company (dependent on UK contract agreements)

Completion of user request for test to home delivery (dependent on Logistics contract as above)
Welsh Government approval to proceed with Reverse Logistics (home-collection/ courier/postal – additional costs to be determined w/c 27 April)
Roll-out of request to test home delivery to all critical worker organisations (dependent on Logistics and Reverse logistics contracts as outlined above)
Development of additional modules (to be costed and prioritised)

Sustainability of testing process and supply chain to support

There are a number of considerations/ decisions that will need to be undertaken to ensure the sustainability of the testing process for Wales:

- Resilience of the supply chain and associated costs. There is fragility around procurement of swabs, kits, reagent, etc. this would require a nationally co-ordinated solution
- Decision making support around location of units and deployment of mobile facilities.
- The ability of the web based booking platform to support LRF partners so that necessary key workers are able to access testing.

Activity	Short-term	Medium-term	Long-term
	30 March to 1 May	1 May to 1 June	1 June to 1 Aug
Referrals	6/4 WG issues keyworker lists guide to LRFs — 7/4 SW and Gwent LRFs provide lists to CCS PSC — 18/4 - WG issue Expanded keyworker lists — 30/4 Web booking solution live		
Sampling	End March - 8H CTUs begin developing — 7/4 - CCS PSC operational — 27/4 Discussion on Merthyr PSC — w/c 27/4 discussions on Powys testing model — 29/4 - North Wales PSC operational — 30/4 - Dyfed Powys PSC operational — 4/5 – Amazon – test kit home delivery and drop off to PSCs go live (MVP1) — 8/5 – Amazon – reverse logistics. Home collection or post service go live (MVP2)		
Testing Capacity in Labs	13/4 1,800 Antigen capacity in labs	11/5 5,800 18/5 8,700 — 14/5 5,000 Antibody capacity in labs — 31/5 10,000	
Swab Capacity: All HB CTUs Inc. Rodney Parade	13/4 1,845 — 15/4 1,895 — 20/4 1,937	1/5 1,972	30/6 1,972
PSCs	7/4 CCS 130 potential for 390 — 24/4 Discussions with Powys and CTM	29/4 North Wales est 120 — 1/5 Dyfed Powys est 120	30/6 Estimate total swab capacity Exc. inpatients = 2992

Activity	Short-term		Medium-term	Long-term
	30 March to 1 May		1 May to 1 June	1 June to 1 Aug
Results	End of March HB CTUs varied approaches to informing NHS employees for test results			
	3/4 Testing of electronic test request. 7/4 ETR used at CCS and rolled out across Wales			
	10/4 CCS results phoned to employers by PHW Covid-19 call centre		20/4 CCS results texting pilot to keyworkers at CCS and RP. Employers phoned results by PHW. Rolled out to LRF partners	
			27/4 PHW and military exploring web based services end to end test-result process	

Notes / Dependencies – <u>all timelines</u> are subject to change depending on externalities

- Web solution – contract with Server Lab to be agreed (WG/PHW)
- Web solution – requires successful pilot with SWP
- Need agreement with CTMHB on PSC and location
- Need agreement on Powys PSC model
- Swansea Bay only has 1 CTU with 100 swab capacity per day. Need to consider PSC model
- Need to agree coordination of effort and governance for testing via a formal coordination group

- CCS has 3 lanes currently but can rise to 6 to achieve the increase required
- PHW and HBs to agree whether the results texting process can be used in other LRF PSCs
- WG commissioned military to review end to end process and offered capacity where necessary. Full cooperation from PHW. Process and decision required
- Military working on a mobile testing model. Pilot with BCUHB as part of a hybrid approach to testing
- Information governance issues around end to end process for all Wales testing approach.

<u>Appendix three</u> - Update in relation to PHW Organisational Recovery Plan

Introduction

In early April work began on developing the way forward for organisational recovery and on 16 April 2020, Gold agreed a new strategic objective: '*Public Health Wales is able to effectively respond to future public health challenges, reactivate our services in a planned way and provide the necessary support to our staff'*.

Using a programme approach with dedicated resources, it will need to be aligned and integrated with our response going forward. Initial scoping of the programme has started and a more detailed plan will be considered at Gold on 30 April. There will be five key areas (set out below) and these will be underpinned by a 'Recovery Dashboard'.

PHW Service Mobilisation

In the coming weeks and months, we need to ensure that our public health services/functions are reactivated. A service mobilisation Decision-Making Framework and Implementation Plan will support evidence-based decision-making, informed by public health intelligence, ethical consideration and resources.

Readiness for Future Threats

The work will have specific links with the ongoing Covid-19 response, As a result, it will ensure that it helps to enable the effective delivery of our response by:

- supporting an effective and timely lessons learned process and embedding learning going forward
- developing an approach to staff roles/future training
- revising/refreshing our Emergency Response/Business Continuity Plans in light of lessons learned

Workforce

To ensure that we are able to continue to effectively respond to Covid-19 as an organisation, and provide the necessary support to our staff, we will need to implement a range of measures focused around ensuring:

- our people policies and procedures are fit for purpose
- effective repatriation of staff who provided mutual aid
- we have tailored wellbeing packages in place to support staff

- we have a clear recruitment plan for critical posts

Infrastructure

We need to ensure that our organisational infrastructure, is designed and operating effectively to support our ongoing Covid-19 response, and be able to move towards a 'new normal' as an organisation.

This will be informed by the lessons that we have learned in our initial Covid-19 response, particularly in relation to the design and operating of our estate and IT, and the ways of working that will be needed in the future.

Transformation

As part of the implementation of our long-term strategy, we have identified three key areas that we need to focus on during 2020: digital, new ways of working and knowledge/information. Our response to Covid-19 has underscored the importance of these dimensions and we will develop strategic proposals for each of these areas.

Recovery Dashboard

Our initial Covid-19 response over recent weeks has shown the value of high-quality, robust data presented in user-friendly, accessible ways. It is proposed that the Corporate Analytics Team will develop a Recovery Dashboard, utilising business intelligence tools, and this will underpin the recovery programme going forward.

PHW Recovery Next Steps

On 30 April, a high-level plan for the PHW recovery work will be presented to Gold. This will set out the key deliverables, including resource requirements and timescales. Following Gold approval of the high-level plan, the PHW Recovery Coordination Group (RCG) will also be established to take forward the delivery of the work.