



University Health Board Report

CHIEF EXECUTIVE'S REPORT

Executive Lead: Chief Executive

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Purpose of the University Health Board Report

The purpose of this report is to keep the Board up to date with key issues affecting the organisation, some of which feature routinely within the Board's business, whereas others have previously been presented to the Board and/or its Executive Board.

Governance

Link to Health Board Strategic Objective(s)

The Board's overarching role is to ensure its strategic objectives, and the related organisational objectives outlined within the 3 Year Integrated Medium Term Plan 2018-2021, are being progressed. Aligned with the 'Quadruple Aim' described within 'A Healthier Wales' (Welsh Government, June 2018) these objectives are:

- To **improve** quality, safety and patient experience
- To **protect** and **improve** population health
- To **ensure** that the services provided are accessible and sustainable into the future
- To **provide** strong governance and assurance
- To **ensure** good value based care and treatment for our patients in line with the resources made available to the Health Board.

This report focuses on all the above objectives, but specifically on **providing** strong governance and assurance.

Supporting evidence

The development of this report has, where appropriate, been informed by updates provided by members of the Executive team.

A number of the issues highlighted within the report are covered in more detail within the main agenda of the Board meeting.

Engagement – Who has been involved in this work?							
The Executive Team has contributed to the development of information contained within this report. It is also important to recognise, where appropriate, that a number of the related items are also scrutinised by Independent Member led Committees of the Board.							
University Health Board Resolution to:							
APPROVE		ENDORSE		DISCUSS	✓	NOTE	✓
Recommendation	The University Health Board is asked to: <ul style="list-style-type: none"> • DISCUSS and NOTE the report. 						
Summarise the Impact of the University Health Board Report							
Equality and diversity	There are no equality and diversity implications of this report – related issues will be or have been considered within individual service change / redesign updates referenced within this report.						
Legal implications	There are no legal implications contained within this report. However, specific impact, where relevant, will have been considered within individual reports referenced within this update.						
Population Health	No direct implications of this report. However, specific impact, where relevant, will have been considered within individual reports referenced within this update.						
Quality, Safety & Patient Experience	Ensuring that the Board and its Committee(s) make fully informed decisions is dependent on the quality and accuracy of the information presented and considered by those making decisions. Informed decisions are more likely to impact favourably on the quality, safety and experience of patients and staff.						
Resources	No specific implications.						
Risks and Assurance	Ensuring the Board is fully sighted on key areas of its business is essential to positive assurance processes and related risk management.						
Health & Care Standards	The 22 Health & Care Standards for NHS Wales are mapped into the 7 Quality Themes but within a Governance Framework. This report focuses mainly on Governance & Accountability but also spans many of the 7 quality themes.						
Workforce	There are no direct implications on workforce in this report. However, specific impact, where relevant, will have been considered within individual reports referenced within this update.						
Freedom of information status	Open						

CHIEF EXECUTIVE'S REPORT

1. **SITUATION / PURPOSE OF REPORT**

The purpose of this report is to keep the Board up to date with key issues affecting the organisation. A number of issues raised within this report feature more prominently within reports of Executive Directors as part of the Board's business.

2. **BACKGROUND / INTRODUCTION**

This overarching report highlights for Board Members the key areas of Board related activity, some of which is further referenced in the detailed reports that follow and also highlights topical areas of interest to the Board, where related work is in progress.

3. **ASSESSMENT / GOVERNANCE AND RISK ISSUES**

3.1 **Maternity Services**

On 30 April 2019, the Board convened an extraordinary meeting to receive the reports of the Joint Royal Colleges (Royal College of Obstetricians & Gynaecologists (RCOG) and Royal College of Midwives (RCM) and Patient Experience Report) Review of Maternity Services, along with the publication of the internal review report, undertaken by the Secondee Consultant Midwife. On the latter, the Chair of the Health Board has commissioned an external review of the handling of this internal review report, as it was not handled in line with recognised and usual Health Board governance processes.

A full report on maternity services is on the agenda (under agenda item 4.1) for the Board.

3.2 **Paediatric Services**

The Board will be aware, from discussions held at its meeting on 30 April 2019, that the Executive were undertaking a review of the readiness for transfer, of inpatient paediatric services to Prince Charles Hospital, and the establishment of a Paediatric Assessment Unit on the Royal Glamorgan Hospital site.

Our priority is, patient care & safety and we use a risk based approach to ensure that the move is undertaken smoothly whilst maintaining safe, efficient and effective care. As a consequence the planned implementation date of 1 June 2019 has been postponed and the Health Board is working to a revised timeline to ensure the move takes place safely during the summer 2019 and no later than September 2019.

Members will be aware of the ongoing delivery of the Paediatrics, Obstetrics and Neonates (PON) Project.

A Project Board, chaired by the Chief Operating Officer, oversees the internal work associated with the implementation of this programme. Seven implementation groups have been established over the last three years covering the following areas:

- Paediatrics and Neonatal services;
- Obstetrics and Gynaecology services;
- Ambulance / transport;
- Capital and Accommodation;
- Communication and engagement;
- A&E / Medicine;
- Logistical / commissioning plans.

These groups have worked to finalise the service and workforce models in their areas, and have developed action plans to deliver the required service and workforce changes.

Update reports have been discussed at the Strategic Planning Group (SPG) on a regular basis, covering:

- Capital Schemes;
- Communication and engagement with the public;
- Communication and engagement with staff;
- Service, workforce and financial modelling;
- Regional activity flows; and
- Detailed logistical implementation.

Final decisions to proceed at each stage of the plan have been considered at Executive Board and then reported to full Board on an ongoing basis.

Readiness assessments

Stage 1 – Paediatrics, Obstetrics and Neonates

Following the Royal College of Obstetrics and Gynaecology visit in January 2019 and in anticipation of the final report in April 2019, the Chief Executive commissioned a readiness assessment of the key elements of the PON project to absolutely ensure that delivery of the project was operationally feasible and clinically safe.

The readiness assessment comprised three elements: a comprehensive risk assessment prepared by the directorates; a detailed logistical plan prepared by the project and directorate leads; and a multi-disciplinary team peer assessment with Welsh Government and Delivery Unit leads involved to support scrutiny of the plan.

The result of this rigorous process was a recommendation to the Strategic Planning Group and Executive Board that the Obstetric and Neonatal elements of the project should proceed to implementation and that the Paediatrics element should be deferred until 1 June 2019. As laid out elsewhere on the agenda, the implementation took place successfully on the 9 March 2019 following detailed operational implementation processes running daily during the two week run in to the go live date.

Stage 2 readiness assessment - Paediatrics

Following the implementation of the Obstetrics and Neonates moves on the 9 March 2019 and receipt of the final Royal College of Obstetrics and Gynaecology & Royal College of Midwives Report in April 2019, the Chief Executive commissioned a further readiness assessment of the Paediatrics consolidation of services from Royal Glamorgan Hospital (RGH) to Prince Charles Hospital (PCH) on Friday 12 April 2019.

Comprehensive consideration was given to all elements of the project in terms of:

- Policy for management of 16-18 year olds;
- Regional service specification and neighbouring Health Board support;
- Finalisation of Standard Operating Procedures and final agreement of Clinical Pathways;
- Service capacity;
- Medical and nursing workforce; and
- Transport;
- Capital and estates; and
- Communications.

The initial assessment indicated that there were a number of red risks in the readiness assessment. Immediate mitigations were undertaken including agreement of additional middle grade medical staff rota support to strengthen medical staffing (a very significant additional investment); advice from Welsh Health Legal Services on 16-18 year old service policy; sign off of all Standard Operating Procedures and Clinical Pathways through clinical governance; finalisation of Emergency Department/Paediatric treatment protocols with WAST; and further communications with staff and community. In almost all cases, a wide range of mitigations have now either been implemented or are close to implementation following the readiness assessment and subsequent project board meetings.

As agreed in the Board meeting on 30 April, the complexity of the service move and the necessary alignment with other services progress has been discussed further with key senior clinical staff resulting in the decision being made to postpone the service move. This decision was balanced against the fact that the current Paediatrics service has its own ongoing sustainability challenges (which provided the rationale for the original South Wales Plan decision).

Therefore a final decision has been reached that Paediatrics consolidation will now take place in the summer (by the latest September 2019). The Paediatrics team has undertaken an intensive period of additional rota planning and has been able to secure strong cover arrangements for May and June 2019 and is currently working on a plan and making good progress against it, to provide similar cover for July and August. The detailed logistics plan for implementing the Paediatrics consolidation in PCH and the full implementation of the Paediatrics Assessment Unit on the RGH site will be part of a fuller update to the July Board meeting in public.

Communications

Staff briefings are continuing and details will be announced shortly. Staff can post questions anonymously on the dedicated Paediatrics, Obstetrics, Neonates (PON) page for the Grapevine. A dedicated PON information page has also been set up on SharePoint, the Health Board's staff intranet site.

3.3 Health Board enhanced 'Escalation Status'

Members will be aware, that on 30 April 2019 and as a consequence of the recent publications of reports and their related serious findings, the Minister for Health & Social Services announced, that for Maternity Services, the Health Board has been escalated to 'Special Measures', the highest level of escalation. In addition the Health Board's escalation level of 'enhanced monitoring', has been increased to 'targeted intervention'.

David Jenkins, former Chair of Aneurin Bevan UHB has already commenced his support work in the Health Board, to provide advice and support to the Chair of the Board and to review the Board's scrutiny and related governance processes.

The Maternity Services update report makes reference to related progress regarding 'special measures' escalation status and discussions with Mick Giannasi Chair of the Oversight Improvement Panel appointed by the Minister for Health & Social Care.

A meeting will take place with Welsh Government on 3 June 2019, to discuss the Targeted Intervention arrangements. The Board will be updated on related progress and intended actions at its Board meeting in public in July 2019.

3.4 Human Tissue Authority (HTA)

Members will be aware of the ongoing work to address the adverse findings of the Human Tissue Authority (HTA) Inspection in March 2018 and the positive update received in January 2019 from HTA. The programme of work to mitigate and close the thirty two Corrective and Preventative Action (CAPA) plans, has to date resulted in twenty six being signed off and agreed by them.

There are currently six remaining CAPAs, which are related to the outstanding retrospective audit work that needs to be done and further work to improve our traceability systems. The final feedback on these remaining CAPAs is expected during the next few weeks. The remaining audit work including all resulting actions is anticipated to be fully complete by the end of August 2019.

Members will be aware that the Health Board had a follow up inspection by the HTA on 8 and 9 May 2019, that tested our levels of compliance. The official feedback not be received until it has been cleared through the HTA's Regulatory Decision Making meeting which is anticipated within the next few weeks.

Verbal feedback was, however, received at the end of the visit which acknowledged positive progress in a number of areas. This included:

- Recognition that the level of progress made was good and more advanced than had been expected;
- There had been a "180 degree improvement" in culture;
- They were reassured by the installation and implementation of the Nutwell additional units, Closed Circuit Television (CCTV), mortuary infrastructure improvements, the new mortuary vehicle and the training that had been put in place to make these operational through both Facilities and Estates;
- They commented positively on the improvements in maternity compliance on consent taking and management of Pregnancy Loss Remains;
- They referred to the arrangements for the Persons Designated as being "very good" and gave positive feedback on the interactions between members of the team;
- They indicated growing confidence that the Health Board is on track for 'sign off' on all CAPA and Human Tissue Act Reportable Incidents (HTARIs) by the end of our audit cycle (August at the latest).

At least one further CAPA would be closed imminently (confirmation of closure of T2a received on 16 May 2019).

Areas for further improvement were also raised on the visit and these will be addressed through the project board. The issues include:

- Further work to be done on traceability of Pregnancy Loss Remains (PLR) including reprinting of PLR books and consistency of use throughout the Health Board (so that all processes are documented and not reliant on the good practice that is clearly inherent in individuals);
- Further work to complete and document all training;
- Further work to complete the audit cycle against an agreed timescale which could be negotiated (it was noted that the audit work completed up to this stage was of high quality and therefore timescales would account for delivering that level of quality for each audit year);
- Further assurance on the traceability of bodies and tissues that are sent to other establishments (and recognition that our license stays with all material even when it crosses Health Board boundaries); and

- Further work on systems within the mortuary (including one minor issue in relation to drain pan cleanliness in PCH).

A full update on related progress with the HTA Action Plan is due for consideration at the next meeting of the Quality, Safety & Risk Committee.

3.5 Healthcare Inspectorate Wales (HIW) Inspection of Ionising Radiation (Medical Exposure) Regulations 2017 Prince Charles Hospital 11 & 12 December 2018

Members will recall the work to respond to the Healthcare Inspectorate Wales (HIW) inspection with the Ionising Radiation (Medical Exposure) Regulations 2017 that took place in Prince Charles Hospital (PCH) Radiology department on the 11 and 12 December 2018. The immediate action plan was signed off in January and reported to the Board. There followed a second action plan with the publishing of the final report in February.

Members will be aware of the ongoing work to address the adverse findings of the HIW IRMER (radiation dosing) inspection from last October 2018 through the positive updates on both action plans received in January and February 2019 on both the initial non-compliance action plan and the following full report action plan. All actions have now been validated through internal governance set up as part of the HIW review and the full action plan with completed audit cycle has been submitted to HIW. If the evidence submitted is accepted, this should enable immediate restoration of IR(Me)R compliance.

3.6 Annual Accounts 2018/19

Mr Steve Webster Director of Finance & Procurement will present the Annual Accounts 2018/19. Prior to the Board meeting the Audit Committee met (with the Chair of the Board and the Chief Executive present) to review the Annual Accounts and Financial Statements for 2018/19, prior to the Board's consideration of their recommendation and approval.

I am pleased to report that at the time of writing this report and subject to audit, the Board has achieved a break even position (as forecast) with a small surplus and also remained within its Capital Resource Limit (CRL) again with a small surplus (subject to audit and approval of the 2018/19 Annual Accounts).

I am also pleased to report that the Health Board has achieved the Public Sector Prompt Payment performance target for 2018/19. The Director of Finance & Procurement will provide a more detailed update on year end financial performance and Month 1 reported position, linked with its implications for delivering the 2019-22 Integrated Medium Term Plan (IMTP).

I am grateful to the staff of the Health Board for their support in us delivering against our statutory duty and also to the Finance and Corporate Services teams, overseen by the Audit Committee, for their work on compiling the Accounts and related statements for year end.

3.7 Finance, Performance and Workforce Reports (Month 1)

The lead Directors (or their representative) will present the suite of performance related reports in relation to Month 11, which Members will **NOTE** have been considered and scrutinised by the Finance, Performance & Workforce Committee on 22 May 2019.

Key areas of focus within the 3 reports are:

- Unscheduled Care
- Referral to Treatment Times (RTT)
- Diagnostic waiting times
- Stroke Care
- Cancer Performance
- Mental Health Measure
- Workforce and
- Finance.

Specific issues to be brought to the Board's attention will be raised by lead officers and Mel Jehu, Independent Member (Committee Chair) will reflect in summary, the key assurance issues raised at the meeting.

3.8 Bridgend Boundary Change

Members will note the report provided under Agenda Item 4.9 which includes links to the Legacy Statement and the Memorandum of Understanding, developed jointly with colleagues in Swansea Bay University Health Board. I have also received a letter from Dr Andrew Goodall regarding the work undertaken to date on this matter (**Appendix 1**).

There remains an ongoing matter relating to agreeing the related financial settlement and Welsh Government have commissioned a due diligence assessment of the work undertaken to date by both parties and the Board, via the Finance, Performance & Workforce Committee, will be kept updated on related progress.

3.9 Adult Thoracic Surgery for South Wales: Update

The Welsh Health Specialised Services Committee (WHSSC) met on 14 May 2019 and discussed related detail associated with the development of Adult Thoracic Surgery for South Wales. Attached as **Appendix 2**, is a copy of the recent letter received by Health Boards from the Chair of the Committee.

3.10 Brexit Preparedness

Members should note that the Executive Board is provided with monthly updates on the work being undertaken to assess the potential risks that the Health Board may face as a consequence of the British exit from the European Union (EU) – which was scheduled to take place on Friday 29 March 2019, the exact timing is now the subject of discussion in Parliament.

The Health Board is required to report to the Welsh Government about any matters of concern or issues in relation to Brexit.

3.11 Executive Appointments

I am delighted to formally welcome Greg Dix, recently appointed Director of Nursing, Midwifery and Patient Care, who commenced employment with the Health Board on 1 April 2019.

I also wish to welcome Anne Phillimore, 'Interim' Director of Workforce & Organisational Development, who recently joined the UHB on a fixed term basis, following the recent retirement of Joanna Davies. In the coming months, the Health Board will progress the process to secure a substantive Director of Workforce & OD.

The Health Board is in the process of appointing a Director of Therapies & Health Sciences, as a consequence of Chris White's decision to remain working within Swansea Bay UHB.

The recruitment process has also commenced to appoint a substantive Medical Director to replace Kamal Asaad who has confirmed his intention to retire later this year.

4. **RECOMMENDATION**

The University Health Board is asked to:

- **DISCUSS** and **NOTE** the report.

Freedom of information status	Open
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