

# THREE YEAR INTEGRATED MEDIUM TERM PLAN 2019 - 2022

## SUMMARY



GIG  
CYMRU  
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WALES

Bwrdd Iechyd Prifysgol  
Cwm Taf Morgannwg  
University Health Board



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## INTRODUCTION

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Welcome to this summary version of our three-year Integrated Medium Term Plan (the 'Plan') for 2019-2022.

Whilst this will be our sixth consecutive approved Plan, it will be the first that serves a larger geographical area of Merthyr Tydfil, Rhondda Cynon Taf (RCT) and Bridgend following a boundary change on 1 April 2019. It will also be the first Plan published under our new name of Cwm Taf Morgannwg University Health Board.

We want to contribute to improving the lives of the people who live in our local communities. We will do this by:

- Working with you to prevent ill health; helping you to improve yours and your family's health and helping you to stay healthy.
- Providing you and your family with good and safe health care from the right staff whenever you need it and as near to home as possible.
- Using our resources wisely to provide the best treatment and care to you and your family. We will discuss and agree with you and your family what treatment is best for you.
- Working together with your local councils, voluntary organisations and others to join up health and other services where this would benefit you and your family.
- Working with you and the communities where you live to build upon strong local relationships to improve health and ensure you are treated fairly.
- Involving you in any plans to change services. Your views are important to us as we want all service changes to benefit you, your family and local community.



### *Our Vision*

*"To be recognised as a population well-being organisation that continually makes a positive contribution to improving the lives of all residents".*



*The Board takes its accountability for clinical and corporate governance; clinical risk and risk management and serious incident reporting very seriously.*



In April 2019, Welsh Government raised the escalation status of the Health Board from 'routine arrangements' to 'special measures' for the former Cwm Taf UHB maternity service and 'targeted intervention' for Cwm Taf Morgannwg UHB. Whilst we have already made progress in tackling many of the issues raised, we recognise that there is much to do in terms of changing systems and cultures to provide better services and greater assurance going forward. With quality and safety underpinning our system of integrated planning, this Plan sets out the

further steps we will take to address the concerns raised as part of the escalation process and return to 'routine arrangements' as quickly as possible.

Over the next three years we will face many challenges , however, we feel our Plan puts us in a strong position to overcome them so that we can continue to provide services that are safe, meet your needs and are well organised to deliver the best possible care for you and your family when you need them.

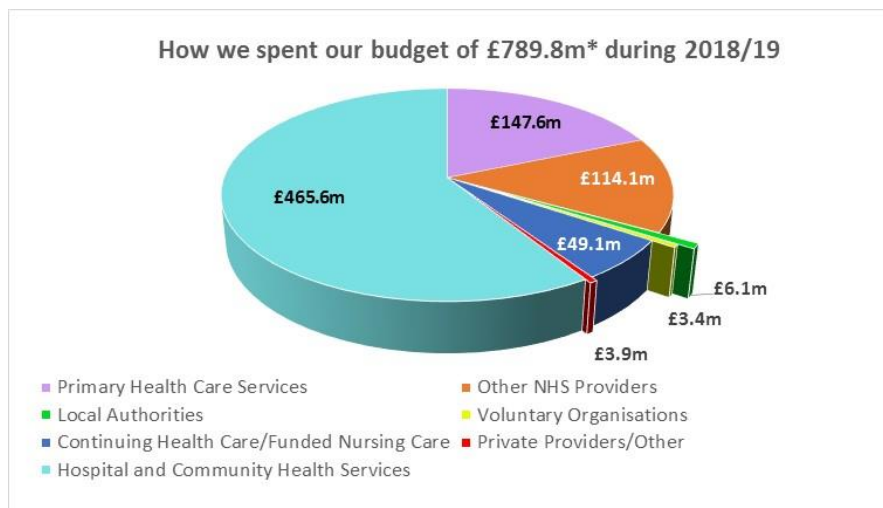
## OUR PROFILE

Cwm Taf Morgannwg University Health Board ('the Health Board') is responsible for providing healthcare services to over 440,000 people living in Merthyr Tydfil, RCT and Bridgend. We also provide some NHS services to people living in the neighbouring areas of the Upper Rhymney Valley, South Powys, North Cardiff, Neath Port Talbot and the Vale of Glamorgan.

• • •  
*Some of our hospitals are now amongst the most modern in Wales.*  
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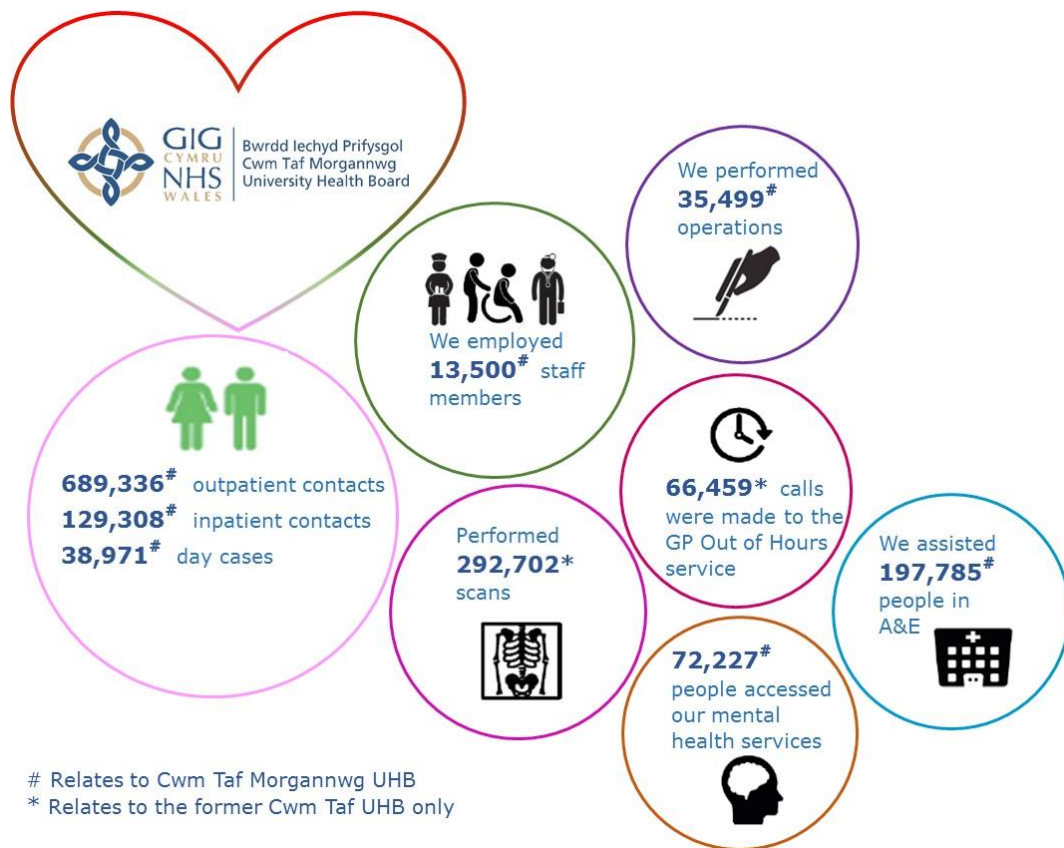
The Health Board is the second largest employer in the area, employing 13,500 people; many of whom live in the local area. We manage three district general hospitals and 46 other sites made up of community hospitals, health centres/clinics and support facilities. Several of our hospitals are now amongst the most modern in Wales.

In primary care - which is usually your first point of contact – we have 110 community pharmacies, 53 dental practices, 55 general medical practices and 48 optometry practices. During 2018/19, we had an annual budget of £789.8m, which was used to provide the best services possible to meet yours and your family's needs. This graph shows you where we spent our budget.



\* Subject to Audit. The Audited Accounts figures will not be available until 31 May 2019

## OUR ACTIVITY DURING 2018-2019



## OUR SERVICES

When you feel unwell, it is important you see the right health care worker. Depending on the symptoms, most people will, in the first instance, go to see a pharmacist, optometrist, dentist or GP for help. In most cases, the pharmacist, optometrist, dentist, GP, or someone who works with them, are able to help you get better, either through advice, medication or both. However, at other times you may need to be seen by a specialist in a community clinic, minor injuries unit, local hospital or a hospital in a neighbouring Health Board area and arrangements are made for you to be looked after by the right person in those settings. On other occasions, where there is a risk to life or limb, you would be taken direct to an emergency department specialising in the care you need, e.g. A&E departments based in either Royal Glamorgan Hospital, Prince Charles Hospital, Princess of Wales, University Hospital of Wales or Morrison Hospital.

• • •  
*Our services are designed to cater for every health care need*  
• • •

Our services are designed to cater for every health care need - from advising you on ways to look after yourself ('self-care') to providing treatment options for minor illnesses or treatment for more serious

conditions over a longer period of time. Such services, which generally fall into the categories in **Figure 1** below, are provided by health care staff with the right expertise to help you.

**Figure 1**



More detailed information on the services we provide can be found on our website (<https://cwmtafmorgannwg.wales/visiting/miu/>).

## OUR QUALITY ASSURANCE

The safety of our patients and the quality of the care we provide are more important than anything else for this Health Board. But modern healthcare is complex and naturally risky. Every day, thousands of our highly qualified and professional staff care for vulnerable people and carry out complex and intimate care. We need therefore to be organised and focused on safety and quality all the time.

• • •  
*We want to deliver the best quality services we can*

• • •  
The Health Board has developed a Governance Framework which brings together all that we do to ensure that we avoid unintended or unexpected harm, and that the care we provide is safe, effective, timely, efficient, equitable and people-centred.

The Board is fully committed to ensuring that quality and safety are not only paramount at the highest level, but are everyone's business.

## OUR VALUES AND CORE PRINCIPLES

We put patients and the communities we serve first and want to deliver the best quality services we can. This is our promise to you. This promise encourages all our staff to be aware of their part in this and aim to improve the way they treat and care for you and your family. We also try to ensure staff feel valued so that they can continue to provide the best services possible.

• • •  
*The safety of our patients and the quality of the care we provide are more important than anything else for this Health Board*

## IMPROVING HEALTH AND WELL-BEING

Five harmful behaviours essentially cause the four diseases that account for 64% of early deaths.



for 64% of early deaths. Currently, we have the highest rates of smoking in Wales, although they

are decreasing steadily. Overweight and obesity rates are the highest and still rising. Also, we do not exercise often or eat the recommended five fruit and vegetables a day and many people drink above the recommended limit<sup>1</sup> for alcohol.

We know from evidence like the Caerphilly Study<sup>2</sup> (Figure 2) that if people have four or five regular healthy behaviours, they will live longer and they will delay the onset of diseases that come with age.

Part of our promise to you is to try and reduce some of the differences in people's health, but we cannot do this alone. We know that people have many life events that affect their health, but there are ways of keeping healthy and preventing ill health.

**FOR PARTICIPANTS OF THE CAERPHILLY STUDY WHO CONSISTENTLY FOLLOWED 4-5 HEALTHY BEHAVIOURS**

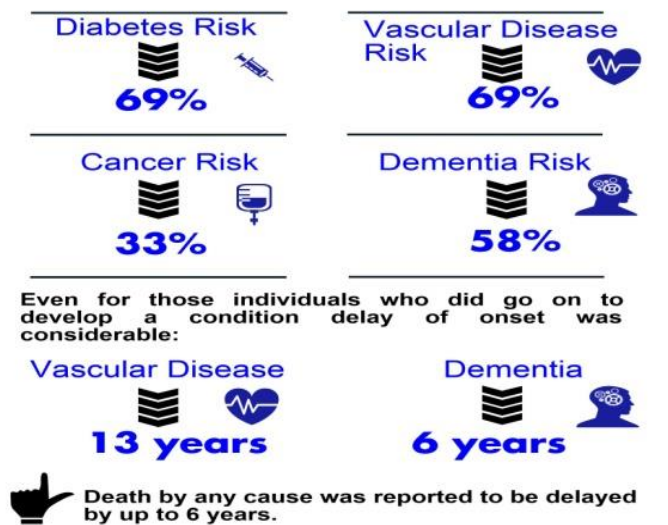


Figure 2

## OUR PERFORMANCE AND ACHIEVEMENTS IN 2018/19

We have made good progress in achieving what we set out to do in our last three year plan. Here are some examples of our major highlights (to see all of our achievements, go to <https://cwmtafmorgannwg.wales/how-we-work/plans-and-reports/integrated-medium-term-plans/?drawer=Integrated> and look at the full version of our Plan).

### WELL-BEING – Self-Care and Supported Self-Care



- A significant number of community pharmacies have established a smoking cessation service for their local population.
- The number of residents who made an attempt to quit smoking exceeded all other Health Boards in Wales.
- The 'Drink Wise, Age Well' programme continues to make good progress in helping people over 50 reduce harmful drinking levels.
- The Cwm Taf Health, Well Being and Creative Arts Strategy was launched December 2018. Its vision is to develop a purposeful, creative and lively arts programme which supports, nurtures and works with our patients, staff and the wider community in a variety of meaningful, life enhancing ways.
- Over 97% of our children have had the 'five in one' vaccination.



## **INTEGRATED COMMUNITY CARE AND CARE CLOSER TO HOME**

- To stop unnecessary admissions into hospital, we have set up a new service called the 'Stay Well @Home'. The team assesses older patients in A&E to ensure support is in place for their safe and timely discharge home.
- The Community Pharmacy Common Ailments scheme, "Choose Pharmacy" has been taken up by most community pharmacies, which is the best coverage in Wales.
- We have developed the Hospice @Home services to enable people with palliative and end of life care needs to be cared for and die at home, if that is their expressed wish. This service is being provided in conjunction with Marie Curie.
- In October 2018, the topping out ceremony took place at the state the art new Y Bwthyn Macmillan Specialist Palliative Care Unit on the Royal Glamorgan site. The new Unit will be completed in 2019/20.
- GP Practices have maintained good performance on patient access to GP appointments.
- Piloted an End of Life Care Rapid Transport Ambulance scheme, which has now been rolled out to other areas. This enables the timely transfer of palliative care patients back home, or to a hospital or hospice, when required.
- In May 2018, a new purpose designed Health & Well-being Centre (Dementia) was opened at Ysbyty George Thomas offering early assessment, diagnosis and support for people living with dementia and their families.

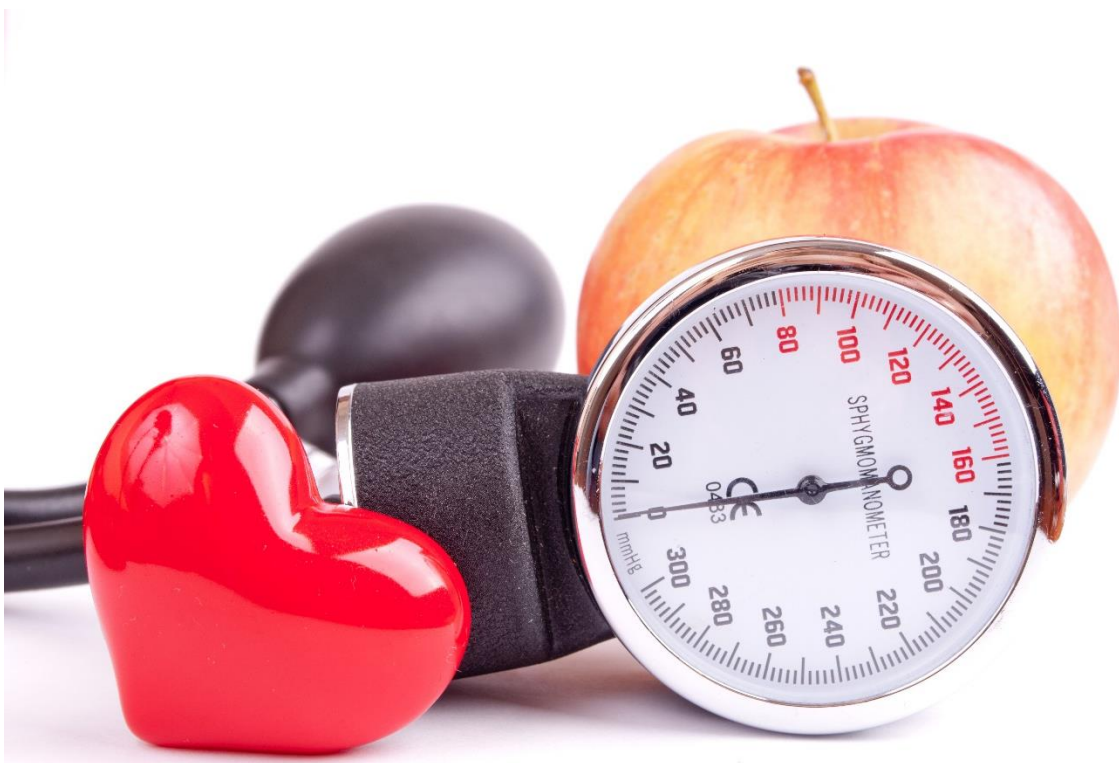


## **ACUTE CARE AND TERTIARY SERVICES**

- Continued implementation of the Early Diagnostic Treatment programme in RCT, Merthyr Tydfil and Bridgend, with improvements being made to the urgent suspected cancer pathway.
- 98% of patients referred as 'non-urgent' suspected cancer were seen within target, i.e. 31 days.
- For RCT, Merthyr Tydfil and Bridgend, represented the Health Board in the regional formal consultation process for Major Trauma services and a regional engagement /formal consultation processes on Thoracic Surgery services. Local implementation of all processes secured support from Community Health Council colleagues and ensured a broad range of staff, stakeholders and members of the public were offered the opportunity to respond.
- In March 2019 the freestanding Midwifery-led unit was established in RGH. In addition, the new maternity unit was up and running in PCH, providing doctor-led maternity care in labour and local neonatal unit.
- In RGH, PCH and Princess of Wales (POW), no patient was waiting more than eight weeks for diagnostics.


## **OTHER FACTORS THAT CONTRIBUTE TOWARDS OUR ACHIEVEMENTS**



- For the fourth year, the Executive Directors and Assistant Directors went 'Back to the Frontline' to find out how they could further improve healthcare services through direct engagement with staff and patients.
- Our award-winning national recruitment campaign #joincwmtaf resulted in an increase in applications for our nursing, medical and allied health professional adverts. We are making progress despite the demographic profiles of our nursing population and the voluntary movement of ward based nurses into other roles across the Health Board.
- The Health Board secured £36.2m from Welsh Government for Prince Charles Hospital ground and first floor works, which will tackle areas associated with the fire enforcement notice and provide a new restaurant, Barista café, kitchens and new pharmacy department.





## OUR PRIORITIES FOR 2019-2022

The Board recognises the significance of developing its culture, both in response to the increased level of escalation and as a consequence of the Bridgend Boundary change. This is a top priority of the Health Board in 2019/20. In addition, as we plan and commission services over the course of the next three years, we will also focus on the following in order to improve population health:

Theme	Priorities	Examples of what we want to achieve
	<p>1 Reduce ill health across our communities and improve well-being by encouraging our patients and staff to adopt 'one more healthy behaviour' and in partnership with our partners, support the well-being of our communities.</p>	<ul style="list-style-type: none"> <li>• Bring together the two Public Services Board (PSB) to represent the new geographical area of the Health Board.</li> <li>• Progress the priorities set out in the Well-being Plans, developing Community Zones, reducing isolation and loneliness and increasing volunteering.</li> <li>• Continue actions to address lifestyle risk factors including Inverse Care Law scheme, implementation of the Tier three obesity service and a focus on Adverse Childhood Experiences (ACEs).</li> <li>• The Health Board is to date the only pathfinder for Wales taking forward the Co -construction programme of work. For the PSB and Health Board this provides an opportunity to work differently and pilot a new approach with families assessed for additional services according to need.</li> <li>• Help people live healthier for longer with one small change by encouraging them to take exercise, eat a healthy balanced diet, stop smoking and reduce drinking below the recommended limits. This can add a potential 14 healthy years to life, which is imperative for our population.</li> </ul>

Theme	Priorities	Examples of what we want to achieve
	<p>2 Improve the joining up of services across health and social care, particularly in the way in which services are provided to our more vulnerable client groups i.e. older people with complex needs, people with learning disabilities, children with complex needs and carers (all ages), with increased joint commissioning arrangements, pooled budgets and making better use of our estate in partnership.</p>	<ul style="list-style-type: none"> <li>• Delivery of the priorities set out in the Cwm Taf Morgannwg Social Services and Well-being Regional Area Plan, including the delivery of transformation programmes for Cwm Taf: Stay Well in Your Community and Bridgend: Accelerating the Pace of Change of Integrated Services.</li> <li>• Delivery of a new integrated substance misuse service model, which draws together Third Sector and statutory service provision. Initially in Merthyr Tydfil and RCT areas only, we aim to integrate with substance misuse services in Bridgend during 2019-2022.</li> </ul>
	<p>3 Continue to improve our mental health service, including the redesign of our older adult mental health service and new approaches to dementia care.</p> <p>4 Implement our primary and community care plans. This includes improving the sustainability of primary care; further developing of our Clusters and Cluster Plans, improving demand management and evidencing the shift of service from secondary to primary care.</p> <p>5 Develop local and regional hospital service planning and delivery in areas such as diagnostics, ophthalmology and orthopaedics, as well as vascular and Ear Nose and Throat (ENT) service redesign.</p>	<ul style="list-style-type: none"> <li>• Continued implementation of our Valleys LIFE project, including securing agreement with Merthyr Tydfil CBC on the model and funding of Health and Wellbeing Centre for Keir Hardie Health Park and progressing plans for the closure of further older persons mental health patient wards and transfer of services to the community.</li> <li>• Across the new geographical footprint, harmonise and ensure most efficient use of resources supporting the shift of service delivery out of hospital and into the community.</li> <li>• Commission the new 'Y Bwthyn' palliative care unit on the Royal Glamorgan Hospital site.</li> <li>• Build on the growing maturity of Primary Care Clusters to finalise a model of sustainable and exemplary General Medical and Primary Care Services</li> </ul>

Theme	Priorities	Examples of what we want to achieve
	<p>6 Continue to improve scheduled and unscheduled patient care, patient flow and urgent care processes including:</p> <ul style="list-style-type: none"> <li>• Maintaining and improving upon the target of no patients waiting for treatment over 36 weeks;</li> <li>• Maintaining and improving upon the target of no patients waiting over eight weeks for diagnostics;</li> <li>• Continuing to work on the 95% four hour target (maintaining wherever possible at least 90% performance) and having no patients waiting over 12 hours.</li> </ul> <p>7 Continue working to meet the 31 day and 62 day cancer targets, maintaining at least a 90% position.</p>	<ul style="list-style-type: none"> <li>• Continue the pilots of Cancer Rapid Diagnostic Service, implementation of transformed urgent suspected cancer pathways and delivery of the Single Cancer Pathway.</li> <li>• With a focus on Getting It Right First Time (GIRFT) best practice implementation in orthopaedics: <ul style="list-style-type: none"> <li>○ Improve patient experience with timely trauma surgery and reduced cancellations of elective surgery due to trauma.</li> <li>○ Reduce pressure on emergency departments by expedited trauma pathways to the dedicated ward base and onwards to theatre.</li> <li>○ Increased efficiency in review, treatment and discharge of patients from the trauma site with the protected ward/theatre resources thereby reducing length of stay for both elective and emergency patients.</li> <li>○ Enhance educational experience for trainee doctors and nursing staff.</li> </ul> </li> <li>• Deliver a new Ear, Nose &amp; Throat service model</li> </ul>
	<p>8 Working with partners, continue our strong involvement and approach to the commissioning of specialist services.</p>	<ul style="list-style-type: none"> <li>• Work with the Welsh Health Specialised Services Committee and others as they develop work under the theme of 'Recommissioning across Primary, Secondary and Specialised Services'.</li> </ul>

To view all the planned outcomes contained in our Plan go to <https://cwmtafmorgannwg.wales/how-we-work/plans-and-reports/integrated-medium-term-plans/?drawer=Integrated>

We will also:

- Ensure clinical and corporate governance arrangements and decision making are clear and transparent.
- Continue to improve patient experience throughout the University Health Board.
- Further develop our Clinical Service Strategy.
- Further develop and deliver the Digital Strategy.
- Address recruitment and retention challenges with a priority on workforce planning and redesign and development of new roles.
- Further developing leadership and delivery capacity across the organisation.
- Engage with an increasing number of members of the public, particularly representatives from the protected groups under the Equality Act 2010, and staff through a variety of accessible platforms to involve people in the design and development of new clinically led and patient focused services, both in and out of hospital.
- Improve data quality, including reporting and transparency.
- Ensure compliance with legislation.
- Achieve financial balance

## NEXT STEPS

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We hope that you have found this summary useful. Whilst brief, we hope it provides you with an understanding of what we do, what our priorities are and how everyone within Cwm Taf Morgannwg has a part to play in protecting and improving the health of our population and ensuring our services respond to local needs.

We are particularly keen to promote the key messages outlined throughout this summary and would encourage you to share this document within your own communities and networks. Anyone wishing to learn more about our Plan can access the full version on our Website <https://cwmtafmorgannwg.wales/>

If you would like to be involved in developing future health care services, contact Clare Williams at [clare.williams11@wales.nhs.uk](mailto:clare.williams11@wales.nhs.uk). Or follow us on these social media channels.



We would love to hear from you – your views are important to us – so please get in touch.

## GLOSSARY OF TERMS

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**Adverse Childhood Experiences (ACEs):** ACEs are stressful or traumatic events, including abuse and neglect. They may also include household dysfunction such as witnessing domestic violence or growing up with family members who have substance use disorders. ACEs are strongly related to the development and prevalence of a wide range of health problems throughout a person's lifespan, including those associated with substance misuse

**Allied Health Professionals:** The term that captures a broad range of staff such as: Art therapists, Drama therapists, Music therapists, Chiropodists/Podiatrists, Dietitians, Occupational therapists, Operating Department Practitioners, Orthoptists, Osteopaths, Paramedics, Physiotherapists, Prosthetists and Orthotists, Radiographers and Speech and Language therapists.

**Community Zones:** A Community Zone focuses support to improve outcomes for residents with the greatest challenges, including Adverse Childhood Experiences

**Diagnostics:** Tests that help determine the nature of a disorder or illness, for example x-rays.

**Escalation and Intervention Arrangements (Welsh Government):** Under the Joint Escalation and Intervention Arrangements, the Welsh Government meets with the Wales Audit Office and Healthcare Inspectorate Wales twice a year to discuss the overall position of each health board and NHS trust in respect of quality, service performance and financial management. A wide range of information and intelligence is considered to identify any issues and inform the assessment. The framework has four escalation levels, i.e. 1) Routine arrangements; 2) Enhanced monitoring; 3) Targeted intervention and 4) Special measures.

**Integrated Plan:** A plan which balances quality with workforce requirement and finances.

**Integrated Services:** Co-ordinated care for patients across health, social care and the Third Sector.

**Inverse Care Law scheme:** Tackles early deaths from cardiovascular disease by implementing evidence based interventions.

**Neonatal Services:** Services for babies who are under one month old.

**Older People:** People aged 50 and over.

**Paediatric Services:** Services for children and young people.

**Planned Care:** Care (usually an operation or a procedure) which planned ahead and for which the patient will be given a date to be admitted to hospital.

**Primary Care:** GP Practices, Dentists, Optometrists and Community Pharmacists.

**Primary Care Cluster:** Groups of GP Practices and other primary care teams working together to deliver services.

**Public Services Board (PSB):** The PSB is a statutory board made up of representatives from the UHB, Local Authority, fire and rescue authority and Natural Resources agencies, all of whom are collectively responsible for fulfilling the board's statutory duties.

**Secondary Care:** Health care provided in a hospital setting.

**Tertiary Services:** Specialised consultative care, usually on referral from primary or secondary care professionals, provided in a setting that has personnel and facilities for advanced medical investigation and treatment.

**Third Sector:** Voluntary and charitable organisations.

**University Health Board:** A formal partnership between the Health Board and local Universities to support areas of business such as research and development.

**Unscheduled Care:** Emergency care.

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<sup>1</sup> *The current UK guidelines advise limiting alcohol intake to 14 units a week for women and men. This is equivalent to drinking no more than 6 pints of average-strength beer (4% ABV) or 7 medium-sized glasses of wine (175ml, 12% ABV) a week. Source: <https://www.nhs.uk/news/lifestyle-and-exercise/people-who-drink-above-uk-alcohol-guidelines-lose-one-two-years-life/>*

<sup>2</sup> *Caerphilly Study: In September 1979, this research project followed 2,500 men from Caerphilly with the aim of reviewing the impact on their health if they adopted lifestyle behaviours such as not smoking; a low body mass; a healthy diet; regular physical activity and low alcohol consumption. The results indicate that those men who adopted a healthy lifestyle had a lower risk of certain chronic illnesses and premature mortality, compared with those men who followed none or just one of the behaviours. Source: <https://gov.wales/written-statement-caerphilly-cohort-study>*