



AGENDA ITEM

3.1.8

CTM BOARD

QUARTER 2 ANNUAL PLAN 2021-22 UPDATE

Date of meeting	25/11/2021
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Claire Nelson, Assistant Director of Transformation
Presented by	Linda Prosser, Director of Strategy and Transformation
Approving Executive Sponsor	Executive Director of Strategy and Transformation
Report purpose	FOR APPROVAL

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome
Executive Team	15/11/2021	ENDORSED FOR APPROVAL
Strategic Leadership Group	17/11/2021	ENDORSED FOR APPROVAL

ACRONYMS

CTM	Cwm Taf Morgannwg University Health Board
IMTP	Integrated Medium Term Plan
PPF	Planning, Performance and Finance
TTP	Test, Trace and Protect



WG	Welsh Government
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1. SITUATION/BACKGROUND

- 1.1 For 2021-22 Welsh Government (WG) requested submission of an annual plan rather than a three year Integrated Medium Term Plan (IMTP) in order to reduce the requirements on NHS organisations during the Covid pandemic.
- 1.2 A draft plan was submitted by Cwm Taf Morgannwg University Health Board (CTM) at the end of March 2021 followed by the final submission at the end of June 2021.
- 1.3 Feedback on the achievement of the deliverables included within the Annual Plan for Quarter 1 and into Quarter 2 along with ongoing deliverables were reported to the Planning, Performance and Finance Committee on 24th August 2021. Where applicable, the other Committees where progress had also been reported were outlined.
- 1.4 The reported deliverables for Q1 included:

Deliverable	Action/Evidence
Health and Care Strategy engaging external support to support its development and engagement	Progress reported at July Board
Neonatal Services supporting the deep dive review	Progress reported at July Board
Test, Trace and Protect (TTP) provision review of ongoing requirements	Undertaken and provision continues
Mental Health increasing capacity for psychological therapy and memory assessment within Adult Mental Health services	Progress reported at July Board
Ysbyty Seren closing as a field hospital in Q1	Undertaken
Underspend on planned care and cancer consumables and drugs	Reported in month 2 position

- 1.5 Ongoing deliverables reported on included:

- progressing all actions in response to the Healthcare Inspectorate Wales/Audit Wales recommendations (progress reported at July Board)
- monitoring the Covid position and update plans accordingly (Covid response costs reported at July Board)
- progressing the actions identified in response to the recommendations to the independent Maternity Services review (progress reported at July Board)
- progressing the implementation of the Value Based Healthcare (VBHC) approach in Heart Failure and Diabetes

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1 Welsh Government Parameter letter

Since the last quarterly update was presented, a parameter letter has been received from WG (30th September) in response to CTM's final Annual Plan for 2021/22 submitted in June. It set out the following areas that they have advised CTM to note as part of the monitoring of the current plan. The feedback will also be considered in the development of the 2022-25 IMTP.

2.1.1 Delivery

- Ensure the Integrated Locality Groups (ILGs) do not operate as separate systems which could impact on the effectiveness of the plan and delivery model
- Cancer/Cardiac and Endoscopy – ensure there is a trajectory for recovery
- Recognition of continuing issues within maternity and neonatal services which need to be addressed to strengthen quality and safety and to regain patient trust and confidence
- Alignment of plans with the development of our Clinical Strategy

2.1.2 Workforce

Seek to reduce the significant risk around workforce and the over-reliance on overseas recruitment to fulfil planned delivery

2.1.3 Finance

- Continue to optimise opportunities and delivery with the organisation's recurrent efficiency programme to maintain a sustainable financial position going forward
- Continue to review options on capital funding to seek to reduce the capital risk
- Seek to ensure ongoing clarity on the organisation's revenue forecast linked to service and workforce plans.

2.1.4 Recovery

Plans must optimise delivery and ensure that innovative and transformational approaches are being implemented to achieve this.

2.2 Deliverables set for Quarter 2

The following deliverables were set out specifically for Q2 of the Annual Plan. Whether these have been achieved are and where updates have been reported if applicable are shown below:

Table 1: Update on Quarter 2 Deliverables

Chapter of Plan	Deliverable	Evidence
1: Strategic Context	Develop and Engage on our Integrated Health and Care Strategy.	The first set of Strategy workshops have taken place, with the second set scheduled in Dec. Progress reported at Sept Board meeting.
3: Transparent Quality, Patient Safety & Improvement	Completion of the Neonatal services external case review and further deep dive review	Update provided at Sept Board meeting.
8: Finance	Dental contract payments assumed to continue at 90% for Q1 and Q2	Update provided at Sept Board meeting.
	Residual underspends on planned care/cancer consumables and drugs for Q1 and Q2	Update provided at Sept Board meeting.
	Ysbyty'r Seren is closed as a Field Hospital in Q1, with work to move other functions in Q2/3.	Ysbyty'r Seren has moved from being a Field Hospital to the decant ward for Maesteg Hospital, with options for further functions being worked through.

2.3 Undated Deliverables

Deliverables within the Annual Plan that were not specifically aligned for achievement in a particular quarter but we are delivering against are outlined in Table 2:

Table 2: Achievement of Annual Plan undated deliverables

Chapter of Plan	Deliverable	Evidence
3: Transparent Quality, Patient Safety & Improvement	Embed 'Improvement CTM' within the organization	Director of Improvement in post
4: Covid 19 Public Health Protection	Continue to monitor the COVID position and	Reported at September Board meeting



	ensure that our plans are updated accordingly	
	Continually monitor the COVID position, assessing the requirement for the reestablishment of an emergency Health Board command structure and additional capacity	HB Command structure was re-established in July 2021
5: Strengthening the CTM Health and Care System	Continue to deliver the services funded through the Transformation fund, undertaking an evaluation and seeking to sustain into 2022	Reported at September Board meeting
	Undertake the pilot of the Family Health Visiting service in the RCT area	Pilot underway, reported at Community Wellbeing and Resilience Services Committee. External report undertaken by Miller Research.
6: Healthcare Reset & Recovery	Ongoing implementation of Carers' Strategy	Update provided at dedicated session on Carers at the October Stakeholder Reference Group
	Focus within Adult MH services on increasing capacity for psychological therapy and memory assessment by working with the third sector to increase group interventions	Reported at September Board meeting through Patient Story from Pinewood House on maintaining contact through creative writing during Covid
	Progressing security improvements for CAMHS in Ty Llidiard	Funding approved for the works via the Executive Capital Management Group
	Further develop regional solutions in conjunction with other partners in areas such as Endoscopy	Procurement of mobile unit in progress, with contract due to be awarded in Q3
	Continue the clinical harm review process for patients with cancer pathways over 104 days	Ongoing – update provided at the October Cancer Programme Board.



	Continue to progress regional work-streams in relation to Vascular	Update reported at September Board meeting.
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3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 There are a number of deliverables that have not been progressed to date as planned. These include:
- Further development of the Contact First model as this has been put on hold by WG following benchmarking of the Health Board proposed models. Meetings are in place with WG to progress this.
 - The Planned Care Recovery Programme being implemented at the pace described in the Annual Plan. Reasons for this and mitigating actions being taken are described in the monthly Performance reports to Board.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	There are no specific quality and safety implications related to the activity outlined in this report.
Related Health and Care standard(s)	Governance, Leadership and Accountability If more than one Healthcare Standard applies please list below: All Healthcare Standards relate to the IMTP.
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below) If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below. If no, please provide reasons why an EIA was not considered to be required in the box below. The IMTP is a strategic document and does not specifically make changes to any policies and services.
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.



Link to Strategic Goals	Sustaining Our Future
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5. RECOMMENDATION

- 5.1 The Health Board is asked to **APPROVE** the Annual Plan 2021-22 Quarter 2 Update.