



**AGENDA ITEM**

5.1

**CTM BOARD**

**CHIEF EXECUTIVE'S REPORT**

<b>Date of meeting</b>	26 <sup>th</sup> January 2023
<b>FOI Status</b>	Open/Public
<b>If closed please indicate reason</b>	Not Applicable - Public Report
<b>Prepared by</b>	Matthew Butt, Chief of Staff
<b>Presented by</b>	Paul Mears, Chief Executive Officer
<b>Approving Executive Sponsor</b>	Chief Executive
<b>Report purpose</b>	FOR NOTING

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

<b>Committee/Group/Individuals</b>	<b>Date</b>	<b>Outcome</b>
(Insert Name)	(DD/MM/YYYY)	Choose an item.

**1. SITUATION/BACKGROUND**

- 1.1** 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 key reports on the main Board agenda.
- 1.2** This overarching report highlights for Board Members the key areas of activity of the Chief Executive, some of which is further referenced in the detailed reports, and also highlights topical areas of interest to the Board.

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

### **2.1 Winter Pressures**

The Health Board has experienced an extremely challenging operational period in December and into the Christmas/New Year period. High levels of respiratory illness, continued Covid activity and general high levels of demand have made the operational environment very difficult for our staff and patients. I would like to thank all of our staff for their continued efforts to deliver patient care despite these challenges which exist not just in our hospitals but in community teams, mental health services, primary care and across the Health Board.

A key focus during these challenging weeks has been ensuring patients who are fit to leave hospital have been able to do so. This has required close working with colleagues in the local authorities as many patients are still in hospital waiting for care packages in the community or placement in a nursing or residential home. Council colleagues have been supporting our efforts to discharge patients with additional capacity being purchased in care homes, and providing additional social work capacity for assessing patients in hospital, amongst other things.

Welsh Government have taken a specific interest in the joint working between health and social care in Bridgend where there have been some particular challenges in the social care market locally, and the Princess of Wales hospital has had the highest number of patients waiting for social care to enable their discharge. Judith Paget, Chief Executive of NHS Wales, Sue Tranka, Chief Nursing Officer at Welsh Government and the Minister for Health and Social Services have all visited Princess of Wales hospital in the past two weeks to understand these pressures and to see what health and social care are doing to improve the flow of patients across the system.

### **2.2 Industrial Action**

The Health Board stood up an Executive led Gold Command structure to operationally manage strike action taken by the Royal College of Nursing (RCN) (nursing staff) and GMB (ambulance staff) unions across a number of days in December and January. This structure of clinical and operational managers has been maintained to be available to stand up at any time to co-ordinate the Health Board's management of such events.

In accordance with agreed derogations, service provision across unscheduled care and cancer services was maintained throughout RCN strike periods. There was unavoidable disruption caused to other services such as outpatient clinics and some elective surgical procedures being deferred. Work to reschedule affected patient appointments has already been completed.

CTM are confident that throughout strike action taken to date, we have met our strategic aims of protecting patients, adhering to legal requirements and protecting staff.

Most recent RCN strikes planned for 18<sup>th</sup> and 19<sup>th</sup> January will not apply to Wales, however, a second set of Ambulance strikes are underway, comprising of three dates across January by both GMB and Unite members.

The British Medical Association (BMA) Junior Doctor Committee met on the 11<sup>th</sup> January to discuss the possibility of balloting Junior Doctors in Wales, to take industrial action. The BMA has not yet communicated their position regarding this matter to NHS employers in Wales. CTM will track potential future action via the Gold Command meetings.

It is highly anticipated that unions representing other specialties and therapies (such as the Chartered Society of Physiotherapy) will also undertake strike action over coming months. This is also being managed via the organisational risk management and business continuity process.

## 2.3 Escalation Status

CTM met with Welsh Government officials on the 22<sup>nd</sup> December to discuss the process for managing the Health Board's escalation and intervention arrangements. The current escalation status of Cwm Taf Morgannwg University Health Board is as follows:

- **Targeted Intervention for:**
  - **Maternity and Neonatal Service** – The group acknowledged the progress made and acknowledged the implementation of many of the recommendations of the Independent Maternity Services Oversight Panel (IMSOP). However, there is still further work to do, especially in neonatal services.
  - **Quality Governance, Leadership and Culture, Trust and Confidence** – The group noted the considerable progress made in this area but was aware that the Health Board is in the process of implementing its new operating model and would like to see how that is embedded across the Health Board and the impact.
  - **Quality issues relating to performance associated with long waiting times** – Performance areas in both planned care and urgent and emergency care remains challenging with lengthy waiting lists.
- **Enhanced Monitoring for Planning and Finance** – The Health Board has been unable to produce an approvable and balanced three-year financial plan.

The Health Board will feedback on the Terms of Reference and proposed TI/EM framework to WG and will bring a plan to the next Public Board Meeting in March 2023. In the meantime, the Executive Team and associated leads will continue to keep the Board appraised on the work plans and progress through the appropriate forums. The focus continues

to be around 'conditions for sustainability' and the Health Board remains committed to improvement and service development in all areas.

## 2.4 Ty Llidiard Escalation – WHSSC

Ty Llidiard is a Tier 4 highly specialist inpatient Child and Adolescent Mental Health Service (CAMHS) commissioned by the Welsh Health Specialised Services Committee (WHSSC). The service has been in level 4 escalation since June 2021. Significant improvement work has been undertaken within the service, resulting in sustained quality improvements for our young people, their families, and our workforce.

Colleagues from WHSSC and the Quality Assurance and Improvement Service (QAIS) visited Ty Llidiard in November to review the improvements that have been made. We can confirm that this visit demonstrated significant and sustained progress and that Ty Llidiard has now been de-escalated to level 3 monitoring. A road map of further de-escalation through to routine monitoring has been agreed with WHSSC. The Ty Llidiard Improvement Board will continue to meet monthly, with Lauren Edwards, Executive Director of Therapies and Health Science, as Chair, and will continue to drive the improvement work forward. Further updates will be received at Quality & Safety Committee and through the appropriate forums.

## 2.5 Executive Leadership Team Update

- **Executive Director of Public Health (vacant)** – The recruitment process to fill this post is underway, with shortlisting of candidates already completed. Four candidates have been shortlisted to progress onto a two-stage interview process. It is anticipated that appointment will be effective early May.
- **Director of Corporate Governance (vacant)** – The Health Board advertised this role in November 2022, however, an appointment was not made. A further process has begun mid-January and I will update the Board with progress in the regular Board briefing sessions.

The Health Board has made interim arrangements with Cally Hamblyn, Assistant Director of Governance and Risk, to cover the key requirements of the Board Secretary role until an appointment is made.

## 2.6 Development of Maesteg Community Hospital

I am pleased to report positive progress has been made in the Health Board's engagement with the residents and community groups of the Llynfi Valley on the planned development of Maesteg Community Hospital.

Four public engagement and involvement events have taken place in January. These brought together Maesteg residents, local elected representatives and community groups, including the League of Friends, together with staff, local GPs and wider primary care teams, plus many other stakeholders, to discuss their personal experiences of using local

health and care services and ideas on how we could help people in the Valley to live a healthier and happier life. This included discussion that focused on the future development of Maesteg Community Hospital to make it an even more useful and accessible health and care facility for all.

There was clear recognition of the social and health inequalities and challenges within the area and the potential of basing other services, such as those provided by the local council and third sector, alongside health services at Maesteg Community Hospital to improve access to those services that support people in their daily lives.

Further discussions with all stakeholders, including staff across CTM UHB, local groups and elected representatives, Bridgend County Borough Council, Community Health Council and other third party organisations, will continue over the next couple of months whilst we develop the vision for Maesteg Community Hospital.

## 2.7 CTM Operating Model Update

The implementation of the Care Group model is being progressed in two phases. Phase one has now completed, with the leadership teams appointed across each of the six Care Groups.

We will shortly be launching Phase two of the operating model, an organisational change process which will focus on the design and implementation of the Clinical Service Group layer of the Health Board. Work is already underway to outline the structures required to deliver the full spectrum of services and support the Care Group leadership teams.

## 3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1** The Board should note the changing context and environment for commissioning and delivering healthcare and wellbeing services in the context of the post-COVID-19 environment. Risks associated with winter pressures and industrial action are actively being monitored by the Health Board and will be reviewed together with the full detail of the organisational risk register this month.

## 4 IMPACT ASSESSMENT

<b>Quality/Safety/Patient Experience implications</b>	Yes (Please see detail below)
<b>Related Health and Care standard(s)</b>	Governance, Leadership and Accountability It is anticipated that all elements of quality, safety and patient safety will be impacted positively by the implementation of the "Continuous Improvement in response to TI Programme".
<b>Equality Impact Assessment (EIA) completed - Please note</b>	No (Include further detail below)



<b>EIAs are required for <u>all</u> new, changed or withdrawn policies and services.</b>	If no, please provide reasons why an EIA was not considered to be required in the box below.
	Not required in terms of this update.
<b>Legal implications / impact</b>	There are no specific legal implications related to the activity outlined in this report.
<b>Resource (Capital/Revenue £/Workforce) implications / Impact</b>	There is no direct impact on resources as a result of the activity outlined in this report.
<b>Link to Strategic Goals</b>	Improving Care

## 5 RECOMMENDATION

The Cwm Taf Morgannwg University Health Board is asked to **NOTE** the report.