

AGENDA ITEM

3.2.2

CTM BOARD

CHIEF EXECUTIVE'S REPORT

Date of meeting	27 January 2022
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Richard Morgan-Evans, Chief of Staff
Presented by	Paul Mears, Chief Executive Officer
Approving Executive Sponsor	Chief Executive
Report purpose	FOR NOTING

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)		
Committee/Group/Individuals	Date	Outcome
(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 reports of the Executive Directors as part of the Board's business.
- **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 that follow, and also highlights topical areas of interest to the Board.



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

2.1 Welcome to Stuart Morris – Director of Digital

It gives me great pleasure to welcome Stuart Morris to CTM as our Director of Digital in order to lead our IT and digital ambition over the coming years. Stuart has many years of experience within NHS Wales and joins us from Velindre University NHS Trust.

I know Stuart has already been very busy meeting members of the Health Board and is keen to understand how digital can support delivering healthcare for the benefit of our patients and staff. I believe that investment and focus on digital solutions is the key to supporting our clinical services strategy and I know that Stuart is clear on the need to ensure both firm infrastructure foundations as well as ensuring we are pushing new boundaries on what digital can enable for CTM.

2.2 Chief Executive winter priorities

I recently explained at our monthly leadership forum for clinical and non-clinical managers what I consider to be the immediate winter priorities in these times of tremendous pressures. It is important that the Health Board flexing and focusses on what the real needs are so we can best meet the pressures and expectations of our patients. The immediate priorities are:

- **Covid vaccination rollout** The vaccination remains our best line of defence against Covid-19 at this time. The rapid expansion of capacity must therefore be a priority. This will be resource intensive and all staff that can 'jab' should be considered and encouraged to do so, especially if working in non-clinical roles.
- Emergency / Urgent pressures incl. covid Ensuring risk is balanced at our acute sites as well as within the community. Ensuring flow, reducing delayed transfers of care, enabling more efficient working with Welsh Ambulance including reducing handover delays. Supporting Primary Care to keep services going and keeping care closer to the home.
- **Cancer performance** Our current single cancer pathway performance has deteriorated due to covid pressures. There needs to be detailed management of this recovery and an increased effort to target the blockage areas e.g. first outpatient appointments.



- **Elective recovery** There has been good work to centralise the approach to elective recovery over the last few weeks. We must try and maintain activity as much as possible despite the regular threats to doing this.
- **Financial recovery** The forecast financial positon next financial year is not balanced. There needs to be a mind-set of recovery and where we can make savings and do things differently. This is applicable to both delivery groups and corporate teams.

2.3 Strategic goals cascade to our staff

To support our clinical services strategy we now have our defined Health Board goals. These are outlined in more detail by the Director of Strategy and Transformation in a separate item for January's Board. These goals include: Creating Health, Improving Care, Inspiring People and Sustaining our Future.

Now we have the branding completed for these goals and the wider strategy work, I have set the task to ensure every team within the Health Board can show how they are contributing to deliver these goals. To achieve this, this will take the form of a large laminated poster able to be written on that will allow teams to work together to provide team goals. This will support the team PDR process and will be a uniform objective across the organisation. I look forward to seeing these team goals posters when I visit different sites and offices over the coming weeks.

2.4 Thank you to Clare Williams

I wanted to take the opportunity to thank Clare Williams who leaves us as the Deputy Director of Strategy and Partnerships to take on a national role as the Director of Planning for the vaccination programme in Wales. This opportunity is testament to her hard work in delivering our local CTM vaccination programme which has been a tremendous success involving so many staff. I know she will add a great deal of value for the whole of Wales and I was recently joined by the Local Authority leaders in CTM in congratulating Clare on all she has achieved in the Health Board within Planning and as the vaccination Senior Responsible Owner.

2.5 Positive engagement with Local Authorities

Over the past few months we have been invited to present to the councils at RCT as well as Bridgend. It is always great to have the opportunity to engage with our local council colleagues to discuss our plans and progress. Our meetings with RCT and Bridgend were no



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exception to this and the Health Board received very positive feedback on progress and especially how we have worked closely and collaboratively with the Local Authorities in recent months. This way of working is important to ensure we have the trust and confidence of key stakeholders and the way we will continue to work.

2.6 Congratulations to Ceri Jones BEM

A huge congratulations to Ceri Jones who was awarded a British Empire Medal in the recent New Year Honours. Ceri is the Health Board's lead community diabetes specialist nurse and volunteers in local diabetes groups. She has previously established a primary care diabetes service that has received fantastic feedback from patients. I know Ceri is very surprised by receiving the award and I am glad we are able to recognise staff who go the extra mile in their work.

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 balancing the need to continue to respond to the COVID-19 pandemic, as well minimising harm from non-COVID-19 activity, and providing essential and routine services to our communities. This balance will bring a new set of issues to manage and risks to consider.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)	
Related Health and Care standard(s)	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".	
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.
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	Improving Care

5. RECOMMENDATION

- **5.1** The CTM Board is asked to:
 - **Note** the report.