

## AGENDA ITEM

2.4

## **CTM BOARD**

## CHIEF EXECUTIVE'S REPORT

Date of meeting	28/05/2020
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Chris Darling, Head of Executive Business
Presented by	Sharon Hopkins, Chief Executive Officer
Approving Executive Sponsor	Chief Executive
Report purpose	FOR DISCUSSION / REVIEW

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)		
Committee/Group/Individuals	Date	Outcome
	(DD/MM/YYYY)	Choose an item.

ACRO	ACRONYMS	
	A&E – Accident and Emergency	
	CPAP – Continuous Positive Airway Pressure	
	COVID-19 - Coronavirus	
	DGH – District General Hospital	
	DU – Delivery Unit	
	HIW – Health Inspectorate Wales	
	ILG – Integrated Locality Group	
	IMTP – Integrated Medium Term Plan	



IMSOP – Independent Maternity Services Oversight Panel OD – Organisational Development PCH – Prince Charles Hospital PoW – Princess of Wales Hospital RCOG – Royal College of Obstetricians and Gynaecologists RGH – Royal Glamorgan Hospital SWP – South Wales Programme TI – Targeted Intervention

# 1. SITUATION/BACKGROUND

- 1.1 The purpose of this report, seen as Appendix A, 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, where related work is in progress.

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

- 2.1 The content of the report has been framed around five main headings: Learning, Headlines, Diary highlights, Looking outwards, Looking ahead.
- 2.2 It is hoped the new format trailed can be used to help communicate and engage staff, as well as updating the Board. Feedback on the style and content of the report is welcomed.
- 2.3 This report focuses in large part on Cwm Taf Morgannwg University Health Board's response to the COVID-19 pandemic. In the Chief Executive Officers (CEO) report provided for the Board meeting on the 26 March 2020 I highlighted that the COVID-19 situation was rapidly changing. The COVID-19 pandemic has dominated proceedings over the past two months as we have prepared and responded to the initial peak of the pandemic. We have had to significantly adjust our priorities, corporate plans and activity during this time, and plans will continue to evolve. This update focuses on the work to respond to COVID-19, and now re-setting to new normal (enabling non-COVID-19 NHS services to resume) in the coming months.



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- 2.4 During the past 8 weeks work has continued on maternity services improvement in response to the RCOG report and the Board will note the publication of the third IMSOP report. Where possible we have tried to work on other TI areas aligned to our improvement plan, and kept a keen focus on our previously discussed fragile service issues. Throughout the past two months quality and quality impact has remained at the front of all of our discussions and decision making, as the Board would expect.
- 2.5 We have focused on increasing support to the health and wellbeing services for our staff, both in terms of resources, communication and engagement, and we will continue to take much learning from this approach.
- 2.6 I would like to express my thanks to all CTM staff who have worked so very hard, with dedication and professionalism during a very challenging time. Thank you for all you are doing to serve our communities.

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

3.1 The Board should note the rapidly changing context and environment for commissioning and delivering healthcare, and wellbeing services, in response to the COVID-19 pandemic, as well as the emerging new normal (as we transition to a post COVID-19 new normal), which 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) 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
Related Health and Care	Programme". Governance, Leadership and Accountability
standard(s)	Staff and resources



Equality impact assessment completed	Not required
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 Main Strategic Objective	To provide strong governance and assurance
Link to Main WBFG Act Objective	Provide high quality care as locally as possible wherever it is safe and sustainable

### **5. RECOMMENDATION**

- 5.1 The University Health Board is asked to:
  - **DISCUSS** and **NOTE** the report.