Cwm Taf Morgannwg Trust and Confidence Maturity Matrix

Progress Levels → / Key Elements ↓	BASIC LEVEL — Principle accepted and commitment to action	EARLY PROGRESS — Early progress in development	RESULTS — Initial achievements achieved	MATURITY — Results consistently achieved	EXEMPLAR — Others learning from our consistent achievements
Patient and Public Engagement and Involvement	Patient and public involvement is limited. Limited opportunity for two way communication and feedback with patients and citizens. Public consultation takes place for significant service change, where required.	There is some understanding of the benefit patient and public involvement brings. Collaborative (information giving, listening, involving, engaging) behaviour isn't yet commonplace. Use of some tools to engage patients and the public (e.g. social media and digital). Ongoing engagement takes place for significant service change, leading to public consultation where required.	The benefit of patient and public involvement is well understood across the organisation. Collaborative behaviour commonly takes place. A number of tools regularly used to engage patients and the public. Ongoing patient and public engagement takes place for all significant service changes. Public and patient involvement activity is becoming common place for most areas.	The benefit of patient and public involvement is well understood and embedded across the organisation. Collaborative behaviour is embedded within the organisation. A range of tools commonly used to engage and involve patients and the public. Ongoing patient and public engagement takes place for all significant service changes (and many non-significant service changes), co-producing outcomes. Patient and public involvement is ongoing and embedded into how the health board operates.	The benefit of patient and public engagement is well understood and embedded across the organisation. Collaborative behaviour is embedded within the organisation. A wide range of tools are an embedded way to engage and involve patients and the public. All service changes (significant and non-significant) are co-produced with patients and members of the public, with ongoing involvement and engagement embedded throughout the organisation. Ongoing patient and public involvement is tacitly built into how the health board operates.
Staff Engagement and Involvement	Involvement with staff on organisational improvement is limited. Limited mechanisms in place for formal and informal feedback for staff.	There is some understanding of the value staff involvement brings. Mechanisms in place for formal and informal feedback for staff. Involvement, engagement and listening behaviour with staff isn't yet commonplace. Messages from the CEO and the Health Board leadership team takes place.	A number of staff involvement mechanisms are in place – both formal and informal. Mechanisms in place for formal and informal feedback for staff. Many decisions are made with staff input. Shared outcomes are starting to be developed. Messages from the CEO and the Health Board leadership team takes place and influences the organisational culture and behaviour.	A number of staff involvement mechanisms are in place – both formal and informal. Mechanisms in place for formal and informal feedback for staff, with trends and themes captured and acted upon. Many decisions are made with staff input. Shared outcomes are starting to be developed. Regular messaging from the CEO and the Health Board leadership team takes place; influencing and shaping	A number of staff involvement mechanisms are in place – both formal and informal. Mechanisms in place for formal and informal feedback for staff. All decisions are made with staff input. Shared outcomes are in place. The organisation compro-mises for the greater good balancing staff and other stakeholder views. Regular and consistent messaging from the CEO and

				organisational culture and behaviour. Staff feel empowered and able to influence organisational decision making.	the Health Board leadership team takes place; influencing and shaping organisational culture and behaviour. Staff are empowered and influence organisational decision making.
Partnership Engagement and Involvement	Collaboration with partners and stakeholders across boundaries is limited.	There is some understanding of stakeholders. Collaborative behaviour isn't yet commonplace. There is an understanding that partners should influence Health Board decision making.	There is an understanding of stakeholders and their views. Collaborative behaviour is becoming established. Many decisions are made across boundaries. Shared outcomes are starting to be developed.	There is an understanding of stakeholders and their views. Collaborative behaviour is commonplace. All relevant decisions are made across boundaries. Shared outcomes are commonplace. Roles, responsibilities and incentives reflect the need to collaborate, leading to new ways of working.	The organisation compromises for the greater good and leads the way in transformation communities. Collaborative behaviour is commonplace. Partners and stakeholders are involved in health board business and decision making. All relevant decisions are made across boundaries. Shared outcomes are embedded. Roles, responsibilities and incentives reflect the need to collaborate, leading to new ways of working.
Promoting the Work of the Organisation	A limited number of balanced view news stories are proactively promoted. Limited proactive management of relationships with key stakeholders and influencers. Health Board leaders and clinical leads have limited media training. There is limited use of social media to promote the work of service areas and of the leadership team.	The need to promote balanced view news stories is recognised. A steady number of balanced view news stories are proactively promoted. The need for proactive management of relationships with key stakeholders is recognised and starting to be implemented. Health Board leaders and clinical leads have had variable media training. There is some use of social media to promote the work of service areas and of the leadership team.	Balanced view news stories are proactively managed. Balanced view news stories are promoted frequently. The need for proactive management of relationships with key stakeholders is established within the Health Board. Health Board leaders and clinical leads have had media training to a consistent and high level. There is a clear social media plan, to ensure use of social media to promote the work of service areas and of the leadership team.	Balanced view news stories are proactively managed. Balanced view news stories are promoted frequently and via numerous channels. The need for proactive management of relationships with key stakeholders is embedded within the Health Board. Health Board leaders and clinical leads have had media training to a consistent and high level, and are confident to work with the media to promote the work of the Health Board.	Balanced view news stories are proactively managed. Balanced view news stories are an embedded part of Health Board working, using numerous channels of communication. The need for proactive management of relationships with key stakeholders is embedded within the Health Board, with formal and informal information sharing. Health Board leaders and clinical leads have had media training to a consistent and high level, and are confident to work with the media to

| | | | | The use of social media to promote the work of service areas and of the leadership teams is embedded within the organisation. | promote the work of the Health Board.

Leaders and clinical leads will proactively use the media in their day to day work, where and when appropriate.

The use of social media to promote the work of service areas and of the leadership teams is embedded within the organisation and supports over communication mechanisms. |
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