



AGENDA ITEM

4.9

CTM BOARD

PROGRESS IN DELIVERING INTEGRATED MEDIUM TERM PLAN 2019-20 QUARTER 3 UPDATE

Date of meeting	30/01/2020
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
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Presented by	Ruth Treharne, Director of Planning & Performance Steve Webster, Director of Finance & Procurement Anne Phillimore, Director of Workforce & Organisational Development Greg Dix, Director of Nursing, Midwifery and Patient Care
Approving Executive Sponsor	Executive Director of Planning & Performance Executive Director of Finance & Procurement Executive Director of Workforce & Organisational Development Executive Director of Nursing, Midwifery and Patient Care



Report purpose	FOR DISCUSSION / REVIEW
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Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)		
Committee/Group/Individuals	Date	Outcome
Health Board Executive Team	20/01/2020	SUPPORTED

ACRONYMS	
IMTP	Integrated Medium Term Plan
UHB	University Health Board

1. SITUATION/BACKGROUND

- 1.1 The 2019/20 Integrated Medium Term Plan (IMTP) planning cycle produced a Health Board and Welsh Government approved IMTP. Whilst the Health Board Accountability Letter highlights key areas which need regular monitoring and reporting, it also states “the plan included good evidence of partnership working, prevention and primary care, supported by examples such as your approach to population health management and the recent implementation of regional commissioning”.
- 1.2 As required by Welsh Government and in direct relation to the accountability conditions set out in the Health Board’s 2019/20 Welsh Government Accountability letter, this report updates the Board on the progress made in implementing Cwm Taf Morgannwg University Health Board’s IMTP 2019-22 in the third quarter of 2019/20 (October 2019 – December 2019).
- 1.3 Articulated in the Health Board Accountability letter, 3 June 2019, are the following Cwm Taf Morgannwg University Health Board (UHB) specific accountability requirements:
 - The Board must accelerate and strengthen governance and quality throughout the organisation. This must include having a robust improvement plan in place with clear milestones and outcomes to ensure rapid progress is made against key areas (including developing the organisational capacity and capability for improvement and an associated Quality Improvement (QI) hub, maternity services (including achievement of the milestones set by the Independent Oversight Panel), serious incident and concerns management, Board leadership, organisational development and



governance) and providing evidence of this through monthly reporting arrangements.

- Ongoing assurance in relation to the transitional arrangements for the Bridgend boundary change, including organisational development arrangements required and financial implications.
- Ongoing assurance and sustained improvement in the Health Board's role as a provider of specialist Child and Adolescent Mental Health Services (CAMHS) to your population and for those services you provide on behalf of other Health Boards.
- Increased clarity on actions, deliverables and milestones for all aspects of the plan must be in place and scrutinised by the Board.
- Regional planning commitments and milestones must be transparent and accelerated.

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

- 2.1 In order to monitor progress against the Health Board IMTP 2019-22, Welsh Government require a standard reporting proforma, updated on a quarterly basis, to be submitted shortly after the end of the relevant quarter. Guidance on this new process has indicated that a bullet point response is required, with follow up questions or detail asked for as required.
- 2.2 Following receipt of the Quarter 1 and 2 proforma, Welsh Government confirmed that no further detail was required from the Health Board.
- 2.3 The Quarter 3 proforma, (**Appendix 1**), has been completed and agreed with the Interim Chief Executive Officer (CEO) to be submitted to Welsh Government. Receipt has been acknowledged and no further detail has yet been requested.

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

- 3.1 The key matters for escalation to the Board are contained within the Quarter 3 proforma, and should be read in conjunction with the Patient Experience and Patient Safety Report, the Integrated Performance Dashboard, the Workforce and Organisational Development Metrics Report and the Finance Report (Month 9).



4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	Quality, Safety and Patient Experience is a major theme running throughout the IMTP and is based on the Health Board's Quality and Patient Safety Governance Framework.
Related Health and Care standard(s)	All
	If more than one Healthcare Standard applies please list below: The IMTP will respond to all Health Care Standards
Equality impact assessment completed	Yes
Legal implications / impact	Yes (Include further detail below)
	A number of indicators monitor progress in relation to legislation, such as the compliance to national targets and measures and compliance to statutory duties.
Resource (Capital/Revenue £/Workforce) implications / Impact	Yes (Include further detail below)
	There are a range of resource implications for the delivery of the Plan which will be re-visited and revised as required, as part of the ongoing planning and risk management processes.
Link to Main Strategic Objective	All
Link to Main WBFG Act Objective	All



5. RECOMMENDATION

- 5.1 **NOTE, DISCUSS** and **REVIEW** the progress made against the IMTP in Quarter 3 of 2019/20 and the Quarter 3 IMTP report which has been submitted in compliance with Welsh Government deadlines, Appendix 1.