



**AGENDA ITEM**

7.8

**CTM BOARD**

**CONTINUOUS IMPROVEMENT SELF ASSESSMENT PROCESS IN  
RESPONSE TO TARGETED INTERVENTION**

**Date of meeting**

30/09/2021

**FOI Status**

Open/Public

**If closed please indicate  
reason**

Not Applicable - Public Report

**Prepared by**

Richard Morgan-Evans, Chief of Staff

**Presented by**

Richard Morgan-Evans, Chief of Staff

**Approving Executive Sponsor**

Chief Executive

**Report purpose**

FOR APPROVAL

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

**Committee/Group/Individuals**

**Date**

**Outcome**

CTMUHB TI Self-Assessment  
Board session

16/08/21

ENDORSED FOR  
APPROVAL

**1. SITUATION/BACKGROUND**

- 1.1 This paper seeks to formally update the Board as to the progress within the Targeted Intervention Improvement Programme and specifically update on the maturity matrix position across the key improvement domains.
- 1.2 On the 16<sup>th</sup> August, a TI self-assessment board session was held involving all Directors and Independent Members as well as involved members of staff including representatives from Integrated Locality Groups.

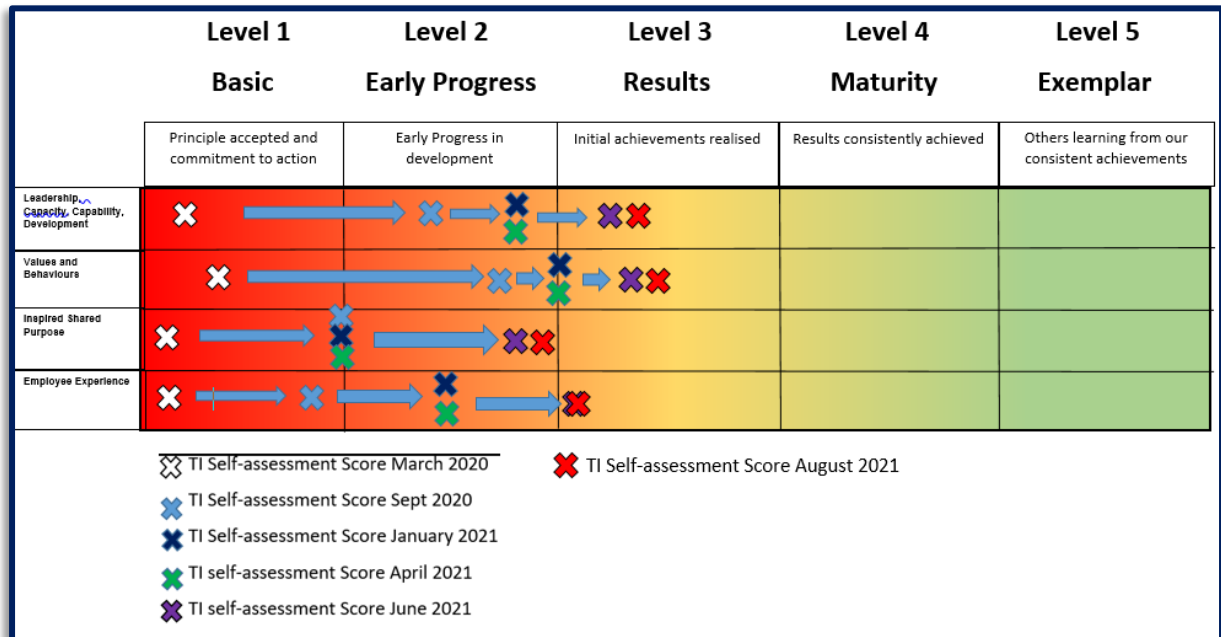
- 1.3 The self-assessment boards take place every other month, with monthly TI 'Working Groups' supporting the onward monitoring and control of the TI Improvement Programme on a more granular level.
- 1.4 The purpose is to allow holistic updates to be delivered by the TI improvement domain Senior Responsible Officers (SROs) before inviting input, scrutiny and discussion from wider Health Board staff. By utilising this format it allows for a collaborative discussion and ensures all views are taken into account.
- 1.5 There were four key areas discussed, in line with the agreed improvement scope:
  - Leadership & Culture
  - Trust & Confidence
  - Quality & Governance
  - Special Measures update regarding Maternity & Neonatology

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

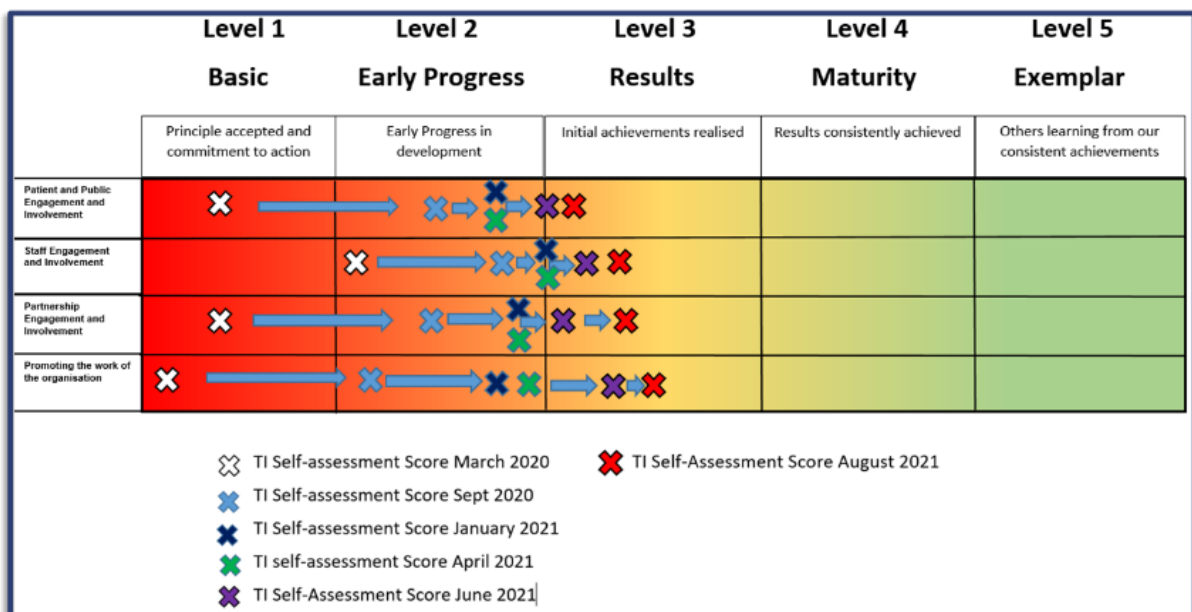
- 2.1 The meeting allowed once again for a useful holistic discussion referring to a wider range of improvement programmes and initiatives.
- 2.2 The Health Board is now in 'Level 3 – Results' stage for all but one of the TI domains. This represents a tremendous amount of progress despite ongoing operational and covid pressures.
- 2.3 Improvements have been seen across the domains and there was a great deal of evidence discussed including positive wider staff feedback.
- 2.4 The TI maturity matrices outlined below show this progress and the improvement journey over the subsequent months



## Leadership & Culture

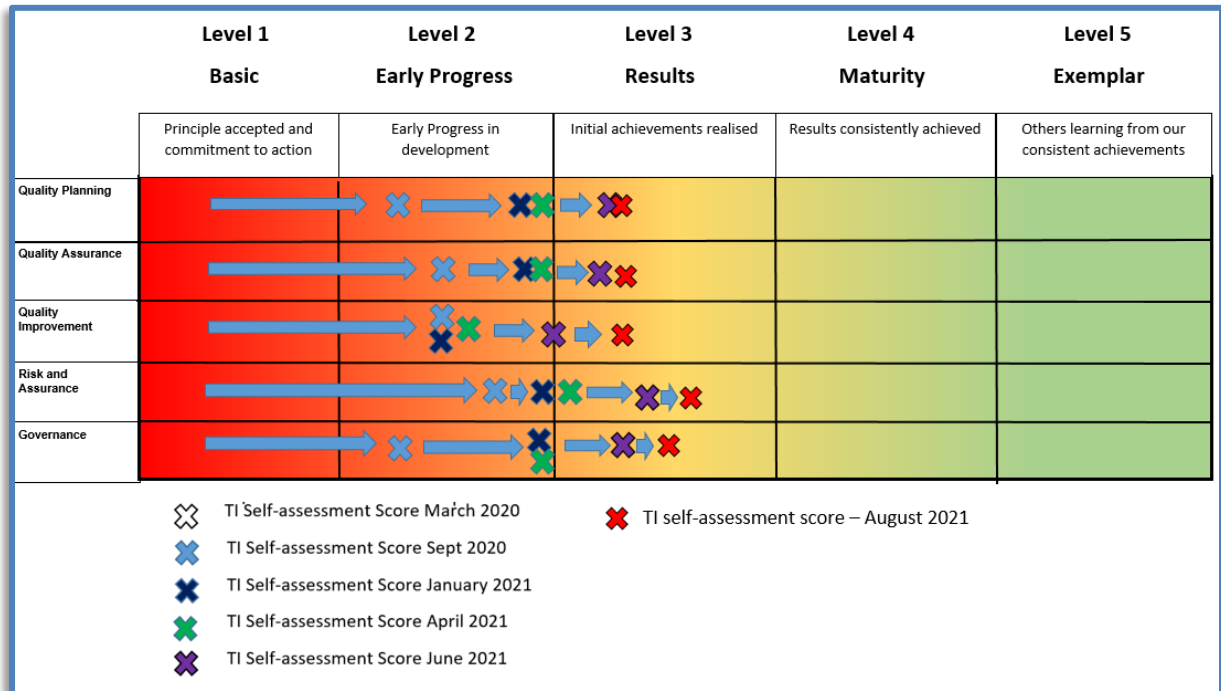


## Re-building Trust & Confidence





## Quality & Governance



## Special Measures update

- 2.5 The Special Measures Improvement Programme outlined recent activities and improvements taking place within Maternity and Neonatology. These updates will be outlined in a separate dedicated Board report.

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

- 3.1 At the August Self-Assessment Board it was discussed that now there has been improvements seen delivered at pace it would be more suitable to self-score every four months, rather than every 2 months currently. The rationale for this is it will allow a longer time period to see changes be embedded and benefits realised. This will provide Board members with more on which to take an objective view to be able to scrutinise appropriately.
- 3.2 This proposal was accepted at the Self-Assessment Board in August and communicated to Welsh Government at a recent joint escalation session.
- 3.3 Therefore with the Board's permission the next TI Board update session will be in October, however the next self-assessment exercise will be in December to allow for a January Board approval.



- 3.4 In addition to this, at the December Self-Assessment Board the Special Measures Maternity and Neonatal Improvement Programme also intends to conduct a self-assessment. This will aid in the Board judging on overall Maternity and Neonatal service improvement and this will draw from a variety of evidence sources.

#### 4. IMPACT ASSESSMENT

<b>Quality/Safety/Patient Experience implications</b>	There are no specific quality and safety implications related to the activity outlined in this report.
<b>Related Health and Care standard(s)</b>	Governance, Leadership and Accountability If more than one Healthcare Standard applies please list below:
<b>Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.</b>	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.
<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 Well-being Objectives</b>	Co-create with staff and partners a learning and growing culture

#### 5. RECOMMENDATION

- 5.1 The Board is asked to **APPROVE** the level of TI progression as outlined and endorsed at the TI Self-Assessment Board on the 16<sup>th</sup> August.
- 5.2 The Board is asked to **SUPPORT** the frequency change to self-assessment taking place every 4 months. There will still be a dedicated TI session every 2 months to provide focussed updates.