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#### **CTM BOARD**

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

Date of meeting	26 <sup>th</sup> May 2022		
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	28 <sup>th</sup> April 2022	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 28<sup>th</sup> April, 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 As a reminder to the Board, the self-assessment Boards take place every four months with 'showcase' Boards taking place in between.
- 1.4 The purpose of the TI & Special Measures Self-assessment Board is to allow holistic updates to be delivered by the TI improvement domain 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 are four key areas discussed, in line with the agreed improvement scope:
  - Leadership & Culture
  - Trust & Confidence
  - Quality & Governance
  - Special Measures incl. Maternity, Neonatology and joint working

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

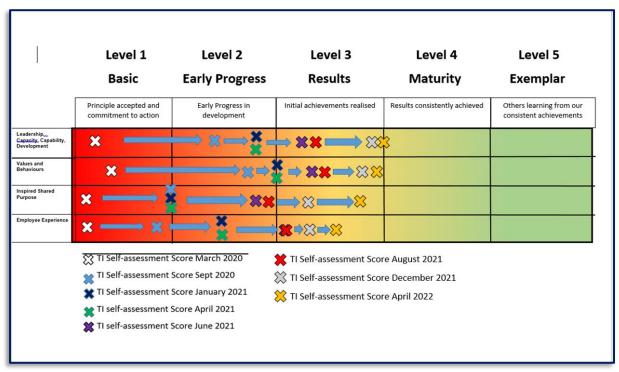
- 2.1 The meeting allowed once again for a useful holistic discussion referring to a wider range of improvement programmes and initiatives. This improvement met a great deal of praise by those present.
- 2.2 The TI maturity matrices outlined below show this progress and the improvement journey over the subsequent months



#### **Maturity Matrix progress**

#### 1. Leadership & Culture

We want to be an organisation that has the leadership capacity and capability to ensure the delivery of high quality care. We will ensure clinical leadership throughout the organisation and think long term about the future talent requiring development. We want leaders to be visible and to understand the organisational priorities as well as the qualities and needs of their teams.



#### 2. Re-building Trust & Confidence

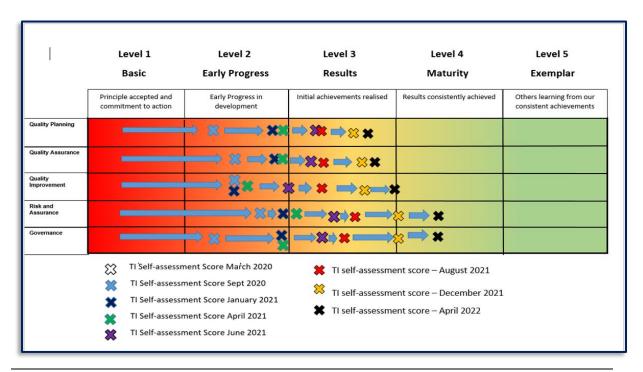
We want to be an organisation that engages and involves our staff, patients and public widely. We want to collaborate constantly with different partners via different mediums for the benefit of our patients. This benefit is felt throughout the organisation.



	Level 1	Level 2	Level 3	Level 4	Level 5
	Basic	<b>Early Progress</b>	Results	Maturity	Exemplar
	Principle accepted and commitment to action	Early Progress in development	Initial achievements realised	Results consistently achieved	Others learning from our consistent achievements
Patient and Public Engagement and Involvement	×	— ×⇒×	<b>** **</b>		
Staff Engagement and Involvement		×	<b>** * * * → *</b>		
Partnership Engagement and Involvement	× —	→ ×→×	<b>*→* *</b>		
Promoting the work of the organisation	x —	*	<b>→*** → *</b>	×	
	TI Self-ass TI Self-ass	sessment Score March 202 sessment Score Sept 2020 sessment Score January 20 sessment Score April 2021 sessment Score June 2021	TI Self-Assessm	ent Score August 2021 ent Score December 2021 ent Score April 2022	

#### 3. Quality & Governance

We want to be an organisation that puts quality at the heart of our planning and an organisation that has quality improvement embedded into the way we operate. We use our quality strategy to provide clear priorities in an intelligent and data-supported way. Our use of risk management should ensure mechanisms are in place identifying, recording, managing and escalating risk across the organisation with clear lines of accountability & responsibility.





# 4. Special Measures – Self score Maternity Services

Baseline Assessment (from 4 months ago)	Basic Level	Early Progress	Results	Maturity	Exemplar
Safe and Effective Care		Flogless		П	
				Ш	
Quality of Women's				П	
and Family Experience					
Quality of Leadership			П		
and Management					
Joint Maternity &					
Neonatal Working					
Proposed Assessment	Basic Level	Early	Results	Maturity	Exemplar
		Progress			
Safe and Effective Care					
Quality of Women's					
and Family Experience					
Quality of Leadership					
and Management					
Joint Maternity &					
Neonatal Working					

#### **Neonatal Services**

Baseline Assessment (from 4 months ago)	Basic Level	Early Progress	Results	Maturity	Exemplar	
Safe and Effective Care						
Quality of Women's						
and Family Experience						
Quality of Leadership						
and Management						
Joint Maternity &						
Neonatal Working						
Proposed Assessment	Basic Level	Early	Results	Maturity	Exemplar	
	Dasic Level	Progress	Results	iviaturity	LXemplai	
Safe and Effective Care						
Quality of Women's		П				
and Family Experience						
Quality of Leadership						
and Management						
Joint Maternity &						
Neonatal Working						



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

- 3.1 It has been agreed that, from a TI perspective, this will be the final time the Health Board reports and assesses on progress in this way. Working with Welsh Government colleagues we are in the process of updating the future focus areas and will report back at the next Board. The future focus will be formed around 'conditions for sustainability' to guide the organisation on its future improvement journey.
- 3.2 As part of the Special Measures conditions for sustainability, the team will self-assess in the same way once more time. This will take place in August this year.

#### 4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	There are no specific quality and safety implications related to the activity outined in this report.		
Related Health and Care	Governance, Leadership and Accountability		
standard(s)	If more than one Healthcare Standard applies please list below:		
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 Board is asked to **approve** the level of Targeted Intervention and Special Measures progression as outlined and endorsed at the TI & SM Self-Assessment Board on the 28<sup>th</sup> April 2022.