

AGENDA ITEM				
6.5				

CTM BOARD

CONTINUOUS IMPROVEMENT SELF ASSESSMENT PROCESS IN RESPONSE TO TARGETED INTERVENTION

Date of meeting	28 th July 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	

1. SITUATION/BACKGROUND

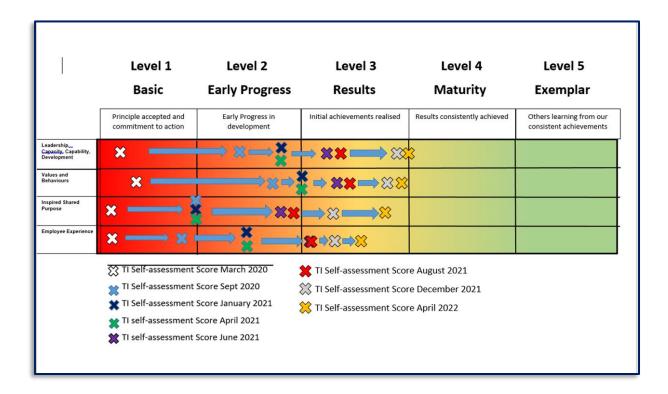
- 1.1 This paper seeks to formally update the Board as to the progress within the Targeted Intervention Improvement Programme and provide an update on how the scope of the programme has now been refined after agreement with Welsh Government in May 2022.
- 1.2 There are three overarching areas within the agreed targeted intervention improvement scope:
 - Leadership & Culture



- Trust & Confidence
- Quality & Governance
- 1.3 As a reminder to the Board, self-assessment Boards have been taking place every four months with 'showcase' Boards taking place in between.
- 1.4 The purpose of the TI & Special Measures Self-assessment Boards were 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. This allowed for a collaborative discussion and offered a 'self-score' against the maturity matrices.
- 1.5 The final maturity matrix 'self-scores' are presented below. These were presented to the Board in May 2022:

Maturity Matrix progress

1. Leadership & Culture

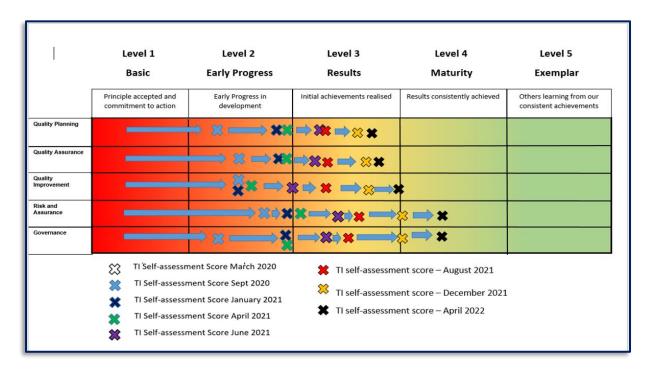




2. Re-building Trust & Confidence

	Level 1	Level 2	Level 3	Level 4	Level 5
	Basic	Early Progress	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	× —	— ×⇒×	** ** **		
Staff Engagement and Involvement		×	** * * * → *		
Partnership Engagement and Involvement	× —	→ × →	*→ * * → *		
Promoting the work of the organisation	x —	×=====================================	⇒×× → ⊗ →	×	
	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-Assessme	ent Score August 2021 ent Score December 2021 ent Score April 2022	

3. Quality & Governance





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

- 2.1 As previously agreed, from a TI perspective, this was the final time the Health Board would report on progress against the maturity matrix. After a number of discussions with Welsh Government colleagues the future focus areas, formed around 'conditions for sustainability', have been agreed. This approach has been useful over the past three years, however it is time to move on, aligned to our level of maturity and challenges we face.
- 2.2 On the 20th May a joint escalation meeting was held between the CTM Executive Team and Welsh Government colleagues. At this meeting the latest status of where targeted intervention progress had reached was presented. This showed good progress across the improvement domains where all areas were either in strong results or maturity. To get to this stage represented a lot of effort from multiple teams over the past three years.
- 2.3 The following describes the refined scope of targeted intervention

Quality & Governance

- **Embedding Improvement** Ensuring all staff groups have the required skills and support to enable continuous improvement. This should be focussed 'bottom up'. Priorities for improvement are clearly understood and constantly reviewed to maximise the use of experts within iCTM.
- Integrated Performance & Quality Ensuring CTM is a data-driven organisation that ensures data is understood and utilised in decision making at all levels. Demonstrating a strong link between ensuring quality and performance improvement. A culture of listening and learning is embedded throughout the organisation based on early and rapid triangulation and resolution of issues from a variety of sources, including patient, user and staff feedback.
- Structures & Delivery Ensuring the proposed operating model is clear on accountability and expectations at all levels to ensure successful delivery. Empowering effective decision making and a constant focus on performance improvement in a post-pandemic set up.



Leadership & Culture

Leadership & Management overall focus at all levels:

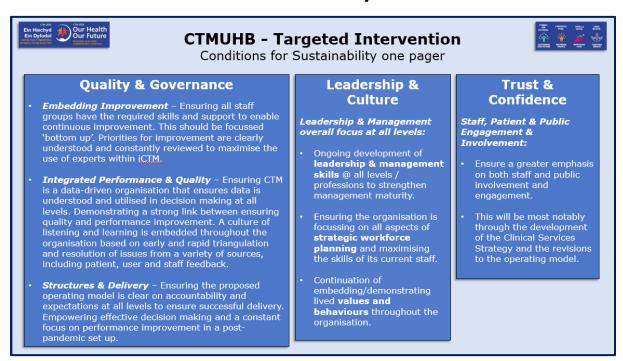
- Ongoing development of leadership & management skills @ all levels
 / professions to strengthen management maturity.
- Ensuring the organisation is focussing on all aspects of **strategic workforce** planning and maximising the skills of its current staff.
- Continuation of embedding/demonstrating lived values and behaviours throughout the organisation.

Trust & Confidence

Staff, Patient & Public Engagement & Involvement

• Ensure a greater emphasis on both staff and public involvement and engagement. This will be most notably through the development of the Clinical Services Strategy and the revisions to the operating model.

This has been collated onto a single page to provide the CTM Targeted Intervention 'conditions for sustainability'





3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD

- 3.1 The next Targeted Intervention Board session will take place in August. At this session the Maternity and Neonatal services will self-assess in the traditional way for the final time. The TI updates will be more holistic and will draw from key pieces of work ongoing within the organisation to ensure the refined scope is discussed in terms of its improvement plans.
- 3.2 The next Healthcare Inspectorate Wales / Audit Wales joint review is due to take place from September 2022. This will be a key review to allow the organisation to be truly assessed externally rather than only rely on internal self-assessments. This will provide both ourselves and Welsh Government key feedback as to where progress has been strong and where there is more to focus on.

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 standard(s)	Governance, Leadership and Accountability
	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	There is no direct impact on resources as a
£/Workforce) implications / Impact	result of the activity outlined in this report.
Link to Strategic Goals	Improving Care

5. RECOMMENDATION

5.1 The Board is asked to **note** the refined scope agreed with Welsh Government and the next steps including the upcoming HIW/AW review.