



AGENDA ITEM

5.2

CTM BOARD

CHIEF EXECUTIVE'S REPORT

Date of meeting	29 th September 2022
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Richard Morgan-Evans, Chief of Staff
Presented by	Greg Dix, Deputy Chief Executive Officer/Director of Nursing
Approving Executive Sponsor	Chief Executive
Report purpose	FOR NOTING

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

Committee/Group/Individuals	Date	Outcome
(Insert Name)	(DD/MM/YYYY)	Choose an item.

1. SITUATION/BACKGROUND

- 1.1** The purpose of this report is to keep the Board up to date with key issues affecting the organisation. A number of issues raised within this report feature more prominently within reports of the Executive Directors as part of the Board's business.
- 1.2** This overarching report highlights for Board Members the key areas of activity of the Chief Executive, some of which is further referenced in the detailed reports that follow, and also highlights topical areas of interest to the Board.

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

2.1 Institute for Healthcare Improvement / Improvement Cymru

In early August we welcomed the Institute for Healthcare Improvement and Improvement Cymru to the Health Board where, as part of wider Welsh Health Board visits, they observed our processes and spoke to several staff. We always welcome outside expertise to CTM so we can continue on our improvement journey and it was great to hear their views and feedback.

During the informal feedback we were told that out of five Health Board visits, CTM was seen to be the most positive visit with a number of specific pieces of exemplar feedback. Prince Charles Hospital was described being like a 'different hospital' since a year ago and the energy, enthusiasm and innovation experienced during the visit was praised.

As a Health Board we also received feedback on a small number of areas where we could work on including ensuring consistent messaging in relation to the innovation/improvement offer and ensuring a robust feedback loop after issues are raised.

2.3 Winter planning with Local Authority partners

As winter draws closer, planning has already begun in a number of ways within the Health Board. I have been working closely with our external partners including the Chief Executives of the three Local Authorities to ensure we can do all we can to avoid severe pressures this winter. This joint approach will be aligned to the six goals of urgent and emergency care programme and will ensure pragmatic solutions are found to both freeing up much needed capacity throughout the health and social care system as well as managing the patient demand as much as possible to avoid admission to acute hospitals as much as possible.

2.4 CTM2030 Community Network Meeting - Porthcawl

On Friday 9th September I had the pleasure of attending our latest community network meeting in Porthcawl. This event brought together multiple community groups to engage on our clinical services strategy as well as outlining some of our exciting recent developments such as the CTM Wellness Improvement Service. Being able to engage directly with local influencers and groups will remain a key part of how we both communicate to the public and also take onboard their ideas and concerns about how we deliver our health

care services. A big thank you to Natasha Weeks for coordinating the event and her role in this important engagement work.

2.5 Local Public Health staff transfer into CTMUHB

After a national consultation process lead by Public Health Wales, I have agreed to and signed the memorandum of understanding to transfer employment of our Local Public Health Team from Public Health Wales to CTMUHB. The transfer is expected to be completed by the 30th September 2022 and this arrangement is replicated across all Health Boards in Wales.

The Local Public Health Teams transfer project is part of a proposal, supported by the Minister for Health and Social Services, to respond to the system-wide challenges we face around the long-term impact on population health and to subsequently support Health Boards, and the wider system, to tackle these.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.3** The Board should note the changing context and environment for commissioning and delivering healthcare and wellbeing services, in the context of balancing the need to continue to respond to the COVID-19 pandemic, as well minimising harm from non-COVID-19 activity, and providing essential and routine services to our communities. This balance will bring a new set of issues to manage and risks to consider.

4 IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
Related Health and Care standard(s)	<p>Governance, Leadership and Accountability</p> <p>It is anticipated that all elements of quality, safety and patient safety will be impacted positively by the implementation of the "Continuous Improvement in response to TI Programme".</p>



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.
	Not required.
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

5.3 The CTM Board is asked to:

- **Note** the report.