



**AGENDA ITEM**

6.1

**CTM BOARD**

**CTM 2030 – OUR HEALTH, OUR FUTURE**

**Date of meeting**

29/09/22

**FOI Status**

Open/Public

**If closed please indicate reason**

Not Applicable - Public Report

**Prepared by**

Vicki Wallace, Deputy Director of Strategy and Partnerships

**Presented by**

Linda Prosser, Executive Director of Strategy and Transformation

**Approving Executive Sponsor**

Executive Director of Strategy and Transformation

**Report purpose**

FOR DISCUSSION / REVIEW

**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.

**ACRONYMS**

CTM

Cwm Taf Morgannwg

CTMUHB

Cwm Taf Morgannwg University Health Board

IHI

Institute for Healthcare Improvement

PDSA

Plan, Do, Study, Act

PREMs

Patient Reported Experience Measures

PROMs

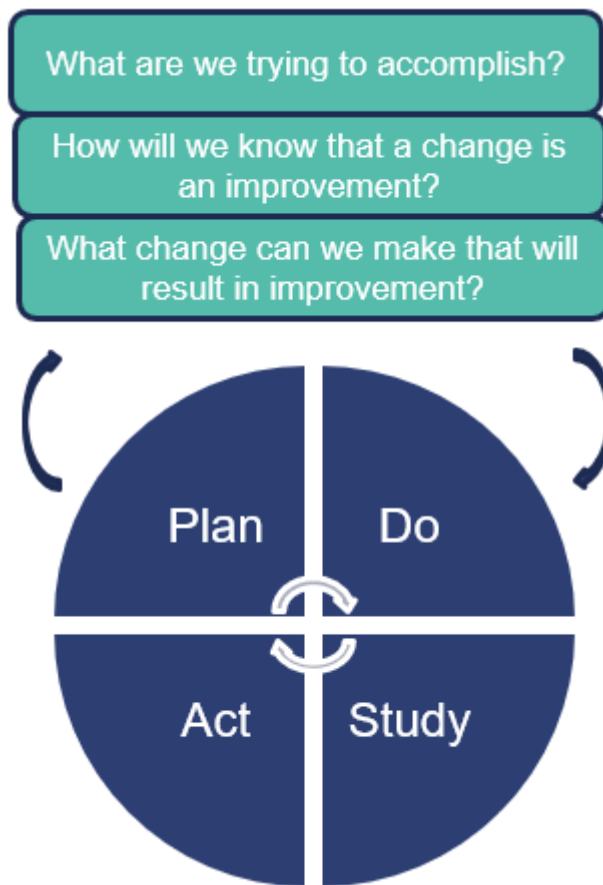
Patient Reported Outcome Measures

## **1. SITUATION/BACKGROUND**

- 1.1 CTM 2030: Our Health, Our Future was launched in 2021. Since that date, work has been underway to further understand our population health needs and engage with our communities and our staff, to better articulate what this will mean for the population of CTM.
- 1.2 CTMUHB recognise that the successful implementation of quality improvement and long term strategic change depends upon real and thoughtful engagement of our communities and partners. The thematic summary of our engagement to date has shaped and influenced the next stages of our strategy development.
- 1.3 CTMUHB also recognises the importance of understanding the impact on the health and wellbeing of our population due to any changes made through the implementation of CTM 2030. There is a need to capture, understand and reflect upon both the benefits and disbenefits of any changes made.

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

- 2.1 CTMUHB is taking a phased approach to the development of CTM 2030. It is recognised that due to the size and complexity of the work to be undertaken, it cannot all be delivered in one “go”. Therefore the implementation of CTM 2030 will be through parallel and complimentary workstreams over the next few years.
- 2.2 CTM 2030, Our Health, Our Future is not only about the development of hospital services. Our strategic goals set out the wide breadth of developments and changes which will take place through the delivery of our strategy, including Accelerated Cluster Development, Integrated Community Services, Value Based Healthcare, Workforce planning and integrated working with our partners.
- 2.3 One of the initial areas to focus on is the immediate planned care recovery, to enable waiting lists to reduce and activity across all of our sites to increase safely. To ensure we do this within a Learning Health and Care System approach, as outlined in the National Clinical Framework, it is proposed that we undertake changes needed for immediate improvement using PDSA methodology.
- 2.4 The PDSA methodology is set out within the IHI Model for Improvement, which encourages small changes to inform longer term strategy.



\* [Institute](#) [for](#) [Healthcare](#) [Improvement](#)

- 2.5 “Study” is a critical element of the PDSA cycle and it is therefore important that CTMUHB understand the impact of the changes made on patient experience and the quality of the service offered. This will involve qualitative approaches such as gathering patient feedback through PROMs and PREMs. It is also critical for us to understand the impact of these changes on service quality markers, for example as reported through Ministerial Measures.
- 2.6 It is important to have a consistent, robust approach across all service changes. Therefore CTMUHB are developing a monitoring and evaluation framework which will capture the impact of all service changes taking place through the implementation of CTM 2030.

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

3.1 None



#### 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>	Effective Care
	If more than one Healthcare Standard applies please list below: Staff and Resources Staying Healthy Safe Care Individual Care Timely Care Dignified Care
<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>	An EIA will be undertaken for each section/element of CTM 2030
	There are no specific legal implications related to the activity outlined in this report.
<b>Resource (Capital/Revenue £/Workforce) implications / Impact</b>	Yes (Include further detail below)
	There will be resource implications to the delivery of CTM 2030. Each element of CTM 2030 will have a resource plan to ensure realistic delivery and sustainability.
<b>Link to Strategic Goals</b>	Improving Care

#### 5. RECOMMENDATION

- 5.1 The Board is asked to **note** the update set out within this paper.
- 5.2 The Board is asked to **discuss** and **approve** the phased approach to the delivery of CTM 2030, Our Health, Our Future.