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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	26 September 2019	Agenda Item	1.9
Report Title	Chief Executive's Report		
Report Author	Irfon Rees, Chief of Staff		
Report Sponsor	Tracy Myhill, Chief Executive		
Presented by	Chris White, Deputy Chief Executive		
Freedom of Information	Open		
Purpose of the Report	The purpose of this report is to update the Board on current key issues and interactions since the last full Board meeting on 25 July 2019. Further detail on some of these issues is provided in the detail of the Board reports.		
Key Issues	This report provides key updates to the Board including: <ul style="list-style-type: none"> • Interactions with Government • Supporting delivery • Awards • Wellbeing week • Executive engagement • Health and safety • Establishment of an NHS Executive function • Brexit 		
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendations	Members are asked to: <ul style="list-style-type: none"> • NOTE the report. 		

CHIEF EXECUTIVE REPORT

1. PURPOSE

The purpose of this report is to update the Board on current key issues and interactions since the last full Board meeting on 25 July 2019. Further detail on some of these issues is provided in the detail of the Board reports.

2. KEY UPDATES

2.1 INTERACTIONS WITH GOVERNMENT

Executives attended a routine Targeted Intervention meeting with Welsh Government on 23 August 2019. The meeting was an opportunity to provide Government with an overview of progress and actions in relation to a subset of our performance priorities: most notably on positive progress in reducing rates of healthcare acquired infections and updating on our position in meeting the demands on our planned and unscheduled care systems.

The meeting was also an opportunity to update on our financial position. Prior to the meeting the Health Board had been in receipt of correspondence from Government setting out the conclusions of the arbitration process in respect of the Bridgend Boundary Change and on the implications of those conclusions on Swansea Bay University Health Board's financial plan. The correspondence provided helpful clarity to inform our plans and ambitions to break even in 2019/20. Further detail is provided in the report to the Board on our financial position.

The meeting was generally positive, with an open assessment of progress to date and a focus on actions in hand to address ongoing challenges.

Executives continue to have regular meetings with officials in Welsh Government, the NHS Delivery Unit and the NHS Financial Delivery Unit to discuss progress against plans. Since the last meeting of the Board this has included an unscheduled care 'summit', broadened to include colleagues from Local Authorities.

2.2 VISITS

Dr Andrew Goodall, Chief Executive of NHS Wales and Director General of Health and Social Care in Welsh Government, shared positive feedback following a planned visit to Neath Port Talbot hospital in August. He enjoyed a varied programme covering a number of services areas and commented afterwards that staff were evidently enthused and energised about the role of Neath Port Talbot hospital in the wider system.

Welsh Government's Chief Nursing Officer, Professor Jean White, spent a day with the Health Board in August spending time with nursing teams on a number of acute

and community sites. She fed back that she had enjoyed positive conversations with highly motivated and caring staff of all grades.

Vaughan Gething, Minister for Health and Social Services, formally opened Swansea University's Clinical Skills Centre earlier this month. The centre is housed in Singleton Hospital (what was Ward 10) and is a state-of-the-art facility providing an opportunity for nursing and medical students to practise clinical skills in a realistic environment.

2.3 PERFORMANCE

2.3 (i) QUALITY OF CARE

I am pleased to report that we continue to make improvements on a number of our markers of quality. Detail is provided within the performance report but it is worth noting the following August highlights in relation to Healthcare Acquired Infections:

- C Difficile infections: 10 cases against a trajectory of 12. This is the ninth successive month of the Health Board being (positively) under trajectory
- Staph Aureus infections: 7 cases against a trajectory of 12. This is a good recovery from July when the Health Board had 17 cases
- E. Coli infections: 22 cases against a trajectory of 38. This is the Health Board's sixth consecutive month of being (positively) under trajectory

2.3 (ii) UNSCHEDULED AND PLANNED CARE PRESSURES

The past few months remained very challenging from an unscheduled care perspective. Demand has been high and our admitting hospitals very busy. Attendances at Morriston Emergency Department and Neath Port Talbot Minor Injuries Unit experienced increases in attendances of 6% and 10% respectively in August 2019 when compared to the same period last year.

The pressures have been exacerbated by unforeseen hospital capacity issues. Singleton hospital Ward 12 remained closed as a result of fire damage and, whilst the ward was temporarily relocated, this resulted in the loss of 10 oncology beds. Further inpatient capacity was also lost on the Singleton site as a result of environmental issues identified at the early part of August resulting in a total net loss of 31 beds since March. The Health Board's ability to transfer people out of hospitals at the optimum time also remained challenging. There was an increase of five in the number of patients reported as a delayed transfer of care between July (81) and August (86).

The Health Board maintained 'winter' surge capacity on all its hospital sites to respond to the demand and the high number of patients in hospital identified as medically fit for discharge. The ring-fenced elective orthopaedic ward at Morriston remained breached with emergency patients.

The impact of these pressures is reflected in the separate data in the performance report to the Board today. The Executive Team and Service Directors have escalated effort and focus recognising that, despite the extensive and comprehensive plans and actions being progressed, the ongoing pressures within the system particularly during a time of the year when pressures usually subside means that a re-setting of

normalised thresholds is required along with greater pace, enhanced leadership (including clinical leadership) and a greater sense of urgency and alignment of effort. It has also been recognised that the myriad of one streamlined improvement plan with additional actions to de-escalate the level of system pressure is in place with progress against it is being reviewed on a weekly basis. It is recognised that the impact on patient and staff experience is significant.

The unscheduled care factors identified above have had a significant knock-on effect on planned care capacity, frustrating and causing concern for clinicians and extending waiting times for our patients. The pressures have been compounded by national changes to pension and tax arrangements which have significantly reduced the availability of clinicians to take up additional sessions of activity. Discussion on the performance report will provide an opportunity to discuss the recovery actions and longer term impact.

2.3 (iii) FINANCIAL PERFORMANCE

The Health Board is committed to delivering a breakeven financial position and has developed a balanced core financial plan.

While the Month 5 reported position is of an overspend of £5.994m against that plan, it also demonstrates an improving trajectory. The overspend reflects the challenges of unprecedented and sustained levels of operational pressure described above (which have resulted in much of the winter surge capacity remaining open and being staffed at premium rate), growth in continuing healthcare patient numbers and income risks associated with lower elective activity levels due to unscheduled care pressures. It also reflects the commitment and efforts being made to address the challenges of delivering the required level of savings whilst mitigating the operational pressures mitigating the financial implications of actions required to attempt to reduce operational pressures predominantly related to Unscheduled Care.

The financial report outlines the detailed position.

2.4 SUPPORTING DELIVERY

2.4 (i) WORK OF THE DELIVERY SUPPORT TEAM

In response to the challenging start to the year, the Executive Team established a Delivery Support Team and wider approach to drive improvements in the 2019/20 financial position and support our plans to achieve sustainability.

The Health Board has moved to weekly Service Delivery Unit Financial Recovery meetings to increase visibility, accountability and support for savings delivery and cost pressure management. The patterns of weekly meetings includes overall Unit financial performance, line-by-line savings focus, cross system opportunities and impacts, a focus on workforce and High Value Opportunities deep dives. On a monthly basis these report into the Financial Management Group chaired by myself, which was established to provide a more comprehensive review of the Health Board financial

performance, facilitating collective learning and good practice sharing and development clear action plans to support financial delivery.

The Welsh Government's externally commissioned support also commenced this month. KPMG were awarded the contract and will be working with the Health Board over a period of 12 weeks. This is a significant investment from Welsh Government to support, challenge and enable the Health Board to deliver financially during 19/20 and ensure development and delivery of a substance financial strategy and plan for the medium to long term.

2.4 (ii) STRENGTHENING OUR STRUCTURES – UPDATE ON PROGRESS

The Health Board committed as part of the Bridgend transfer to consider our organisational structures post boundary change to ensure they offer the best support for our new geographical footprint, and our wider service improvement agenda. The change provided an opportunity to review how the Health Board manages our new-style organisation to effectively delivery for our population and patients and to improve joint working. Other factors driving the need for the review were our new organisational strategy, *Better Health, Better Care, Better Lives*; our new Clinical Services Plan; our continuing Targeted Intervention status, the national and regional policy landscape and general feedback from staff on what is and what is not working well with our current structures.

We have undertaken organisation-wide engagement on options and ideas for optimising our structures to drive delivery. The initial engagement phase closed earlier this month and we are currently consider the feedback.

2.5 PEOPLE UPDATES

This will be the last meeting of the Board for Sandra Husbands in her capacity as Director of Public Health for Swansea Bay University Health Board. Sandra has been successful in securing a Director of Public Health position closer to her home in London. I am grateful to Sandra for her contribution during her time with us and I am sure Board members will join me in wishing her all the best in her new role. Sandra's last day with us will be 11 October. We will keep the Board informed on the progress of recruiting her successor.

I am pleased to announce the appointment of Craige Wilson as Deputy Chief Operating Officer. Craige will be joining us from Cwm Taf Morgannwg University Health Board where he holds the role of Assistant Director, Primary Care, Children's & Community Services. Craige has a wealth of experience over a period of 20 years in varied operational management roles within the NHS. He will join us at the end of October.

An appointment has also been made to the Unit Nurse Director post in Morriston, following Nicola Williams' departure in August to take up the Executive Nurse Director role at Velindre. Mark Madams, an experienced Nurse leader, will join the organisation in November.

2.5 (i) AWARDS

It is always welcome to see the commitment, professionalism, compassion and innovation of our staff being recognised through national awards.

Swansea Bay UHB's Primary Care Children and Families' Wellbeing Team has been recognised for its innovative approach to providing children from some of Swansea's most disadvantaged areas with the best possible chance in life. The service provides sessions to parents, carers and families to support the needs of children under the age of 11, in areas of such as parenting, wellbeing, anxiety, development and behavioral issues. The team has already been shortlisted in the NHS Wales Awards 2019 but now have also been shortlisted for a Royal College of General Practitioners Wales Award for the expansion of its programme across other areas of the Swansea Bay region.

A number of nurses in the Mental Health and Learning Disability Delivery Unit have been recipients of the Cavell Star Awards. The Awards recognise the contributions of nurses, midwives and healthcare assistants in relation to care for patients; carers; or fellow staff. This year's awards included:

- Brendan Collins, Unit Manager in the Laurels was nominated for his 'Support to Colleagues'
- Elizabeth Fair, Clinical Lead Nurse in the Swansea Community Learning Disability Team has been awarded the Cavell Star for showing exceptional care.
- Donna Jones, Acting Unit Manager on Hafod Y Wennol received the award for going above and beyond for her patients' families.
- Kath Evans, Unit Manager on Llynweryr acute admissions unit, was nominated for the exceptional care given to patients
- Mike Bamsey, a Behaviour Specialist in the Facing the Challenge team, was nominated for going above and beyond for his patients and their families.
- Helen Jenkins, Community Learning Disability Nurse, was nominated for the award for going above and beyond for all the service users and families she supports.

2.6 EXECUTIVE ENGAGEMENT

The monthly "Meet the Exec Team" events were held in Gorseinon hospital in August and Neath Port Talbot resource centre in September. Both were well attended and had great participation from staff.

The Health Board's Annual General Meeting was held at the end of July and provided an opportunity to profile the good work taking place recognise the further progress that is required and engage with our stakeholders. It was positive to have a number of stakeholders and partners in attendance.

2.7 WELLBEING WEEK

The Health Board's Wellbeing Week was launched on 16th September and involved a wide range of information sessions, workshops, and displays to promote healthy lifestyles and to provide access to support. The week culminated with the Swansea Bay UHB signing of the *Time to Change Wales* pledge, a commitment to the campaign to end mental health discrimination.

2.8 HEALTH AND SAFETY

In February of this year the Health Board was in receipt of a number of improvement notices from the HSE. A full response was sent to the HSE this month providing the detailed action plan in relation to each, and providing evidence in support of the work that has been completed. Board members will be aware that the Health and Safety Committee provided the scrutiny and assurance test for our response to the Improvement Notices, which was endorsed by a special meeting of the Board on 4th September.

I personally visited the areas affected by the Improvement Notices to meet staff and discuss their concerns. We have a committed and passionate workforce and it was a privilege to spend time with them discussing these matters. I have witnessed excellent local leadership in many of the areas I visited and we are working hard with all Health Board staff to improve Health and Safety management. I have also referenced this in my Chief Executive blog and in our 'Meet the Executive' meetings with our teams.

The formal response to the HSE is not the end of our improvement journey and we are already considering the work plan, not just for the remainder of 2019/20 but for the next 3 to 5 years to ensure that we have Health and Safety practices which are excellent and bear scrutiny and comparison with the best.

HSE undertook a further programme of visits this month and we are looking forward to receiving feedback.

2.9 ESTABLISHMENT OF AN NHS EXECUTIVE FUNCTION

The Chief Executive of NHS Wales has recently provided an update on the establishment of the NHS Executive Function. The Minister for Health and Social Services has determined that the NHS Executive will take the form of a Special Health Authority. The NHS Executive will operate against a Mandate from Government and will be able to call on Welsh Government / Ministerial powers where necessary to deliver against the Mandate. There will be a formal duty and related Ministerial Direction for existing NHS organisations to co-operate with the organisation.

For at least the initial two year establishment period, the dual role of Chief Executive of NHS Wales / Director General of Health and Social Services Group will continue and Andrew Goodall will therefore act as the Chief Executive of the new organisation. The more detailed functions for the new organisation will be settled as part of the establishment programme, but its core functions on establishment will be to

- Strengthen planning capability

- Reinforce and refocus national improvement, transformational and delivery capacity
- Enable stronger performance management and quality improvement support arrangements

The intention is that the new organisation will draw together and where necessary repurpose existing capacity in the system into a single delivery and accountability structure.

2.10 BREXIT

The Health Board has maintained its Brexit work programme. The Health Board's Brexit preparedness, particularly for a no-deal scenario, is managed through an integrated management approach including the domains of anticipation, assessment, prevention, preparation, response and recovery. The Health Board risk assessment is regularly reviewed and updated and the management of those risks is coordinated by an Emergency Preparedness Resilience and Response (EPRR) Strategy Group. The group membership is comprised of representation from corporate services, each Service Delivery Unit and each cross cutting service.

3. RECOMMENDATION

Members are asked to:

- **NOTE** the report.

Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input type="checkbox"/>
	Partnerships for Care	<input type="checkbox"/>
	Excellent Staff	<input type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input type="checkbox"/>
	Effective Care	<input type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
Ensuring that the Health Board make fully informed decisions is dependent on the quality and accuracy of information presented and considered by those making decisions. Informed decisions are more likely to impact favourable on the quality, safety and experience of patients and staff.		
Financial Implications		
There are no financial implications contained within this report. However, specific impact, where relevant, will have been considered within individual reports referenced within this update.		
Legal Implications (including equality and diversity assessment)		
There are no legal implications contained within this report. However, specific impact, where relevant, will have been considered within individual reports referenced within this update.		
Staffing Implications		
There are no direct implications on workforce in this report. However, specific impact, where relevant, will have been considered within individual reports referenced within this update.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
There are no direct implications on the Well-being of Future Generations (Wales) Act. However, the specific updates in this report will be subject to full impact against the act where necessary.		
Report History	None.	
Appendices	None.	