

MAIN REPORT		ABM University Health Board
Health Board		Meeting On 30 th March 2017 AGENDA ITEM: 1 (vi)
Subject	Chairman and Chief Executive's Report	
Prepared by	Steve Combe, Director of Corporate Governance	
Approved & Presented by	Andrew Davies, Chairman & Alex Howells, Interim Chief Executive	

1. PURPOSE

To advise Board Members of issues impacting on the Health Board.

2. KEY ISSUES

a. ABMU Chief Executive

Paul Roberts, who was our Chief Executive for over five years announced recently that he had decided to step down from his post in order to pursue other healthcare roles. Paul's leadership helped ABMU through many substantial challenges and we are immensely grateful to him and wish him well in the future. With the full support of the Board Alex Howells, Deputy Chief Executive & Chief Operating Officer has been appointed as Interim Chief Executive. Arrangements have been made to backfill Alex's substantive role. Rory Farrelly is taking on the role of Interim Chief Operating Officer and Deputy Chief Executive, whilst retaining his Executive accountability as Director of Nursing & Patient Experience. His role will be backfilled by a Deputy post which will be appointed through internal recruitment. These arrangements have been approved by the Remuneration and Terms of Service Committee

b. ABMU's response to NHS Wales Escalation arrangements

As Board members will be aware ABMU is currently under "targeted intervention" status by the Welsh Government due to specific concerns about performance, finance and medium-term plans. As part of ABMU's targeted intervention status Welsh Government has commissioned Deloitte LLP to undertake a financial governance review of the development, adoption and performance of the 2016-17 financial plan. The review will be undertaken during March and April 2017.

In February 2017, Robert Royce, took-up a temporary post as Recovery and Sustainability Director reporting to the Chief Executive. He is leading a programme to drive better value, efficiency and sustainability in our services with a particular focus on "recovery" of our financial position in 2017/18.

The Programme is being run through an operational sustainability group which meets fortnightly and reports to a Recovery & Sustainability Programme Board (RSPB). This held its inaugural meeting on 15th March 2017, chaired by the Chairman and attended by the vice chairman, executive directors, staff side representatives and ABM Community Health Council. The meeting considered proposed terms of reference and it was agreed these be further amended and

received at the next meeting in April 2017. A presentation was received from the Recovery & Sustainability Director regarding key elements of the delivery programme and the governance arrangements around this and also the actions taken to date in this regard. An update was received around the process for submission of the 2017/18 Annual Plan to Welsh Government. A presentation was received around a project designed to optimise medicines management. Finally a draft communications plan was received and discussed which would support the work programme.

Regular reports will be made to the Board on the work of the Programme Board.

c. Unscheduled Care

Unscheduled care services provided by our GP, community and hospital services continued to be very busy during the last quarter of 2016/17. The month of January was particularly busy, with the number of patients requiring an emergency admission to our hospitals much higher when compared with the same period over the last 2 years (5.5% and 10% respectively), and patient acuity has also remained high. Whilst February saw emergency admissions reducing to levels more in line with predicted demand, activity during this month also remained higher when compared with the previous 2 years.

Our winter plans have continued to be implemented during this period including continued promotion of the flu vaccine by patients and staff, increased community services support, new pathways of care to avoid hospital admission, the introduction of new models of care to reduce the time patients need to stay in hospital for investigation and diagnosis, such as additional ambulatory care services and 'hot' clinics for urgent patients, and the provision of temporary additional 'surge' bed capacity. We have continued to work closely with colleagues in social services and the Third sector to ensure patients who do not need hospital care have appropriate support at home to enable timely discharge.

Although admissions have increased above our predicted levels of winter demand, performance against our key unscheduled care measures has been able to demonstrate improvement, particularly during February.

Nevertheless, the increased demand and patient acuity has resulted in some very challenging days across the whole of the unscheduled care system within ABMU.

As ever we are grateful to our staff who have worked extremely hard to ensure that our sickest patients have continued to access the highest levels of care that they require in a timely way. This has however meant that at times some patients who have been less clinically urgent have had to wait longer to access our services than we would wish. Delivering sustainable improvements in urgent and emergency care remains one of our highest priorities.

d. Major Trauma

Following discussions at the Board meeting in January, the Chair wrote to the NHS Wales Health Collaborative setting out concerns raised at the meeting in relation to the proposed engagement process on major trauma.

The Independent Panel, chaired by Professor Chris Moran took place on 21st February. Representatives from each Health Board attended alongside Welsh

Government, Public Health Wales, Welsh Ambulance Service Trust (WAST), Emergency Medical Retrieval & Transfer Service (EMRTS) and the commissioning bodies of Welsh Health Specialist Services Committee (WHSSC) and the Emergency Ambulance Service Committee (EASC). The Community Health Councils (CHCs) for the region were invited and Clare Jenkins, joint Acting Chief Executive of the Board of CHCs attended on behalf of all the CHCs. Each of the candidate Major Trauma Centre sites – Morriston Hospital, ABMU Health Board and University Hospital Wales, Cardiff & Vale University Health Board, gave presentations about how they would establish the Major Trauma Centre (MTC) in the short, medium and long term.

The Panel's report will be provided to the Health Collaborative with a recommendation on a preferred location for the MTC towards the end of March. This recommendation will then need to be considered through the appropriate governance structure of the Health Collaborative before being considered by the Health Boards and CHCs.

The Health Collaborative are intending to meet with the CHCs in mid March to share details around the case for change for major trauma and to ascertain their view on the most appropriate steps for engagement and consultations based on the current position. It is not anticipated that the outcome from the Independent panel will be available for this meeting. However, it is likely that there will be a recommendation on a preferred location available before any discussions with stakeholders can realistically place, which may be something considered by the CHC in advising on engagement and consultation.

It is anticipated that the timelines for major trauma will need to be amended to reflect the advice from the CHCs. The amended timeline will be brought to Collaborative Board in March for consideration.

The interviews for the transitional clinical lead for major trauma took place on 1st March, 2017. This is a one year fixed-term post to lead on development of the major trauma network for south Wales.

d. Ward to Board Assurance Framework

At the November Health Board Meeting, the Board was advised that a number of Non Officer Members, Executive Directors and Senior Managers visited the University Hospital of the North Midlands (UHNM) to learn from their Ward to Board Assurance Framework. As a consequence of the visit, Abertawe Bro Morgannwg Health Board agreed to pilot a 3-month approach within the Morriston Hospital Service Delivery Unit (SDU). This pilot commenced in November 2016, involving 3 medical wards, and led by the Service Director and Unit Medical Director. The pilot was due to conclude in February 2017, with a full report being issued to the Board in March 2017. Due to winter emergency activity at Morriston Hospital Service Delivery Unit pilot was delayed by 1 month, concluding in March 2017. Key findings of the pilot have indicated that this is a positive initiative that could be rolled out across all Service Delivery Units within the Health Board. Key learning points to be considered related to the frequency and organisation of the Assurance Visiting programme and also the need to integrate this with other ward based initiatives such as the SAFER flow bundle.

The full evaluation will be reported to the Quality and Safety Committee in April 2017.

e. Executive Team Recruitment Update

Appointments have now been made to both the posts of Director of Finance and Director of Public Health.

Lynne Hamilton has been appointed to the Director of Finance. She is currently Director for Finance, Governance and Performance at Her Majesty's Courts and Tribunals Service. Lynne has also held a previous Director role within Finance at Welsh Government. Lynne joins the organisation at a challenging time and we are looking forward to her fresh perspective on our future plans. Lynne will take up her post at the end of May 2017, in the meantime we are very grateful to Paul Gilchrist for continuing to act into this role and provide leadership for the finance function.

Dr Sandra Husbands has been appointed to the Director of Public Health. This critical role and will be responsible for public health advocacy, leadership and action within the Health Board and also working as part of a unified public health system with Public Health Wales. Sandra brings with her a wealth of experience not only from her current role as Consultant in Public Health for Northamptonshire County Council but also from previous senior roles held within Public Health. We anticipate that Sandra will join us in May 2017.

This is the final Board meeting prior to the retirement of Sara Hayes as Director of Public Health and therefore Board members will wish to join us in thanking Sara for the important role she has played in ABMU in leading various work streams to promote better health and improve lifestyle choices. We wish her all the best for a long, happy and well deserved retirement.

f. Non-Officer Member (NOM) Arrangements

Paul Newman is serving the final six months of his eight year term as a NOM for ABMU Health Board and has recently been notified that he will also take up a new Non Officer role on Hywel Dda University Health Board in April 2017. Paul will remain as Chair of the ABMU Quality & Safety Committee. Arrangements are in hand to ensure that the transition is as smooth as possible.

The Welsh Government is currently overseeing the recruitment process to appoint two new Non Officer Members to ABMU as part of the first tranche of adverts for 2017. One of these posts will ensure we have a replacement for Paul Newman and the second is to fill the vacancy created when Charles Janczewski took up the post of Vice Chair at the end of 2016. Further advertisements will be placed later in 2017 to seek new appointments to other Non Officer Member positions that are also scheduled to come to an end later this year.

g. Awards/ Staff Recognition

The care provided to patients in the community by ABMU staff and their colleagues from Swansea Council has been celebrated at a special event held at Singleton Hospital as part of the Patient Choice Awards. And the winners were:

Members of the acute clinical response team, the district nursing team based in Gorseinon, staff nurse Angharad Walters (left), physiotherapist Anna Larkin and the

domiciliary care team, GP Russell Clark, occupational therapist Jamie Maund-Daly; social worker John O'Brien, Neil Wilson, Matthew Shephard, Rebecca Bushrod, John O'Brien, Andy Benford, June Phillips, Clare Whatty, Sarah Edwards, Hayley Magorrian, Angharad Walters, the West Hub, Kelly Jenkins, Dr Kerrigan, Carolyn Faulkner, Dr Pope Dr Porter and Dr Hawkins, Anna Nowak, Central Hub team, Dr Paul Harris, Mark Smith, Rachel Gillett, Diane Hall, Jackie Coates, Integrated Gower team, Continence Prescription Service, Reablement Team, Ceri Rodd, Alison Powell, Long-Care Team, Cwmfelin Medical Centre, Kirsty Rees and Kate Ashton.

Other departments and individuals who have received awards and or recognition since the board last met include:

- Sara Forster, head of occupational therapy, has been honoured with the College of Occupational Therapists' Merit Award following a nomination by colleagues;
- ABMU has been judged the best in Wales and joint second in the UK for training specialist doctors by the Joint Royal Colleges of Physicians Training Board;
- The health board's school nurses won a Public Health Wales Beat Flu award for their work to increase the number of eligible children receiving the influenza vaccine.

h. White Paper

Following consultation on the White Paper "Power to Local People", the previous Welsh Government set out proposals for local government reform in the "Draft Local Government (Wales) Bill in November 2015. Most proposals in the draft Bill were supported, however, it was clear that proposals for wide ranging mergers were not supported and are therefore no longer being pursued. However, Welsh Government are clear that in line with the ways of working set out in the Future Generations Act the approach to reform must continue to be developed with those involved in delivering public services. Welsh Government has therefore issued a White Paper "Reforming Local Government: Resilient and Renewed" which is its statement of intent about the future of local government in Wales. The proposals in the White Paper set out arrangements for regional working; describe a strengthened role for councils and councillors; provide a framework for any future voluntary mergers and set out the role of community councils.

The paper suggest that most planning of local authority services should be undertaken on a Health Board footprint – which would be the Western Bay Regional Partnership Board in our case, but that some, for example economic development and transport should be on a City Region basis. The position of Bridgend local authority is specifically highlighted as requiring further consideration to rationalise the pattern of regional services in which Bridgend is currently involved, and there is a specific question requesting a response in this case.

A response will be prepared based on the discussions at the Strategy Planning and Commissioning Group and shared with Board members.

i. Violence Against Women & Domestic Abuse and Sexual Violence

ABMU is committed to working with local authorities, third sector specialist services and all relevant agencies to provide help and support to victims of domestic abuse and sexual violence. A strategy (link below) has been developed setting out how Neath Port Talbot County Borough Council and Abertawe Bro Morgannwg University Health Board are working together and with a wide range of partner agencies to continue to tackle Violence Against Women, Domestic Abuse and Sexual Violence. ABMU is an early adopter of 'Ask and Act' whereby healthcare professionals identify signs a patient may be a victim of domestic abuse or sexual violence and ask the patient if they experience this. If it is occurring, appropriate referral to specialist services is made for the patient to receive help and support. This which will be rolled-out across Wales over the next five years

ABMU and Neath Port Talbot Council welcome the completion of the consultation survey on the strategy which is open between 14th March and 7th June 2017. Through the consultation, these organisations hope to better understand whether the actions will help them to achieve their objectives and also if there is anything else which needs to be included in it. The strategy is available via the following link: http://neath-porttalbot-consult.limehouse.co.uk/portal/ce/vawdasv_strategy_2016-2019

3. RECOMMENDATION

The Board is asked to note the foregoing.