



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>30 January 2020</b>		<b>Agenda Item</b>	<b>1.9</b>
<b>Report Title</b>	<b>CHIEF EXECUTIVE'S REPORT</b>			
<b>Report Author</b>	Irfon Rees, Chief of Staff			
<b>Report Sponsor</b>	Tracy Myhill, Chief Executive			
<b>Presented by</b>	Tracy Myhill, Chief Executive			
<b>Freedom of Information</b>	Open			
<b>Purpose of the Report</b>	To update the Board on current key issues and interactions since the last full Board meeting.			
<b>Key Issues</b>	As above			
<b>Specific Action Required (please choose one only)</b>	<b>Information</b> <input checked="" type="checkbox"/>	<b>Discussion</b> <input type="checkbox"/>	<b>Assurance</b> <input type="checkbox"/>	<b>Approval</b> <input type="checkbox"/>
<b>Recommendations</b>	Members are asked to: <ul style="list-style-type: none"> <li><b>Note</b> the report</li> </ul>			

## CHIEF EXECUTIVE'S UPDATE

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

## WINTER PRESSURES

The health and care system in Wales has already experienced significant pressure this Winter, over and above what many expected. A recent statement by Welsh Government highlighted the difference in the level and nature of demand in Wales across urgent and emergency care services over the festive period and early January:

- *“The Welsh Ambulance Service experienced a 23% increase in the number of immediately life-threatening or ‘Red’ calls when compared to the same period last winter. There was also an 8.4% increase in Amber calls over the same period*
- *Within this period, the Welsh Ambulance Service received over 100 Red calls per day on 8 out of these 17 days, peaking at 119 calls on 20 December.*
- *Emergency departments saw the highest number of attendances over a festive period, with considerable spikes of activity that caused extreme pressure on certain days.*
- *Within this broader increase in attendances, there was an 8.4% increase in attendances for over 75s compared to last year and an 8.6% increase on five years ago.*
- *There was a 5.2% increase in emergency admissions of people aged over 75 when compared with last year.”*

The Health Board has an extensive winter plan in place, developed in partnership with local authorities. The Board is receiving a full update on the progress of the implementation of the winter plan as part of the agenda for this meeting.

Despite extensive system-wide plans being in place to meet the anticipated additional demands of the period, the acuity of patients presenting and bed capacity constraints arising from multiple factors has led to delays for some patients in accessing care. Our acute hospital sites have experienced consistently high periods of escalation. On the evening of 9<sup>th</sup> January 2019 the Health Board briefly entered a Level 5 escalation – the highest level of escalation. This level of escalation prompted additional staff being called in to provide support and a limited number of patients being diverted to neighbouring Health Boards. The Health Board de-escalated within a few hours and appropriate recovery actions stabilised the system. A learning event has already taken place to consider the circumstances and actions taken.

The unscheduled care pressures manifest themselves in many ways and have a number of knock-on effects throughout the system. As part of its response, Welsh Government recently announced the establishment of a Ministerial Ambulance Availability Taskforce that will, among other things, lead the rapid delivery of alternative pathways and community-based solutions to prevent avoidable conveyance to emergency departments; the optimisation of the ambulance patient handover process; and improvement in Red performance. As a Health Board we look forward to participate fully in the work for the Taskforce. Welsh Government is also

targeting intervention and support at a number of hospital sites where the pressures are affecting performance greatest, including Morriston hospital. We are working with the NHS Wales Delivery Unit on the detail of that work.

I remain grateful to the staff of the Health Board for their ongoing professionalism and commitment in their provision of care to the population of SBUHB during these periods of heightened pressure.

## **INTERACTION WITH GOVERNMENT**

The Health Board has had significant interaction with Welsh Government over the Winter period to date. We were pleased to welcome Vaughan Gething AM, Minister for Health and Social Services, on visits to both Morriston Emergency Department and to the Neath Port Talbot Minor Injuries Unit during which he commented on the exceptional nature of the pressures and thanked staff for their efforts.

We also welcomed a visit by Julie Morgan AM, Deputy Minister for Health and Social Services, to the region. The meeting, which included key West Glamorgan regional partners, was focused on efforts to reduced delayed transfers of care (DTOCs). DTOCs, which can be as a result of multiple factors both within the health system and in social care, are a significant factor in reducing flow through our hospitals and therefore in exacerbating bed capacity constraints. Close joint working with Local Authority partners in particular has resulted in the month-on-month reductions in the number of DTOCs in SBUHB over the past 4 months and they are currently at their lowest levels for 8 months.

We were able to describe to the Deputy Minister the ongoing efforts to reduce this further, and what further action is planned. A key feature of our winter plan, and pivotal to reducing our DTOCs, has been the introduction and rollout of our regional *Hospital to Home* programme. This model is based on longstanding social care research undertaken by Professor John Bolton maintaining that a focus on reablement home-based support as the primary pathway of hospital discharge will reduce the need for ongoing domiciliary support and residential care. Assessment does not take place in a hospital bed and individuals tell their story once to a Home Navigator who can act on behalf of all agencies. The full assessment takes place once the person has returned home and is carried out by community specialists. The programme was initially the subject of a bid to Welsh Government's Transformation Fund, but both the West Glamorgan Regional Partnership Board and SBUHB have proceeded to fund the initial rollout using funding streams dedicated to winter pressures. The service was launched on 10 December 2019, with full rollout of the first phase to be completed by the end of January.

Earlier this month the Chief Executive of NHS Wales and Director General of the Health and Social Services Group confirmed the intention to recommend to Ministers that SBUHB remains at a 'Targeted Intervention' status, following the latest tripartite assessment between Welsh Government, Healthcare Inspectorate Wales, and the Welsh Audit Office. The Health Board's financial position and unscheduled care performance were highlighted as the areas of concern. There are regular and frequent interactions with Government where progress on these issues is scrutinised in detail. The next formal Targeted Intervention (TI) meeting between SBUHB executives and key officials in Government will be on 24 February 2020. The TI meetings also provide an opportunity to discuss improvements we have made in other service areas such a

stroke, cancer and infection control, as well as progress made in developing our Integrated Medium Term Plan. The Health Board Performance Report will provide further detail to Board members.

## **SINGLETON MIU**

As reported to the last meeting of the Board, work is progressing on developing an engagement plan and process on Singleton Minor Injuries Unit within the wider context of the Health Board's plans for acute and medicine unscheduled care services. This plan and process will be discussed with the Community Health Council in advance of being presented to the Health Board meeting at the end of March 2020 for agreement. An option appraisal workshop is planned in February 2020 with clinicians and stakeholders, including the CHC, to identify all the future options in relation to Singleton MIU.

## **BREXIT**

During 2019, the political and legal debate continued with regard to the extension of Article 50 and the UK's membership of the European Union. Consequently, the Prime Minister announced a further EU exit extension to the 31<sup>st</sup> January 2020. Throughout this time, Health Board oversight of Brexit preparedness, in particular for Operation Yellowhammer remained under the auspices of Emergency Preparedness Resilience and Response in order to plan the necessary mitigation measures of potential negative impacts.

It was confirmed on the 8<sup>th</sup> January 2020 that, following the successful vote on the second reading of the Withdrawal Agreement Bill and the decreased likelihood of the UK leaving the EU without a deal on the 31<sup>st</sup> January 2020, the Prime Minister has decided that Operation Yellowhammer (national preparedness work for a no deal Brexit) should be halted with immediate effect. The Welsh Government has advised that there will not be a requirement for further Yellowhammer preparedness work but they will continue to work to make sure that any adverse impacts of Brexit are mitigated as far as possible.

The current timeline for the EU Exit is as follows:

- UK Government introduce Withdrawal Act Bill back to Parliament, when it passes the UK due to leave EU by 31st January 2020, where the transition period begins.
- After 31st January 2020 trade talks between UK and EU begin on future relationships.
- Any new trade deal needs to be ratified by December 2020.
- The transition period is due to last until December 2020, UK Government can ask for an extension if no trade deal agreed, but must ask by June 2020.
- If no trade deal by end of December 2020, UK leaves EU on Jan 2021 under a no deal.

Organisations have also been advised to stand down all internal EU Exit task and finish groups within NHS Organisations. Some EU Exit impacts will nevertheless be picked up as part of the Health Board's wider resilience planning.

## **ENGAGEMENT**

The wider executive team and I continue to place an important emphasis on being visible and accessible to staff and engaging directly with them to understand their issues. This is particularly important during period of heightened pressure.

“Meet the Executive Team” sessions were held at Glan Rhyd and Neath Port Talbot Hospital in November and December respectively. Discussions varied from how quickly we are able to roll out digital projects to how funding from Welsh Government is allocated across NHS Wales. There were also ideas about how we can work more closely between teams.

I also continued with my own engagement visits. I spent time with the Nutrition and Dietetics team where I enjoyed hearing all their work across our schools including the Food and Fun and ‘Veg pledges’ through to the Foodwise for Life programme. It was encouraging to hear about how this work is positively influencing staff behaviour whilst targeting our patients, supporting them in their wellbeing.

Our patients began moving back into Ward 12, an oncology ward at Singleton Hospital in January following the extensive refurbishment caused by a fire last March. I visited the teams and patients there last week to see the full repair work and how they are settling back into their usual ‘home’ of Ward 12.

## **AWARDS**

The Rapid Diagnostic Clinic team based at Neath Port Talbot Hospital recently won a Macmillan Excellence Award for the huge strides in speeding up cancer diagnosis. While people with vague symptoms can often wait a long time for a cancer diagnosis, the new centre has been addressing the situation with outstanding results. Local GPs can now refer patients directly to the centre where a team of experts can conduct as many scans and tests as are needed to get a diagnosis – often all on the same day. If further tests are needed, patients receive them urgently and, if cancer is found, they are referred directly into the relevant service – reducing waiting time by weeks.

Swansea Bay staff have been recognised for their innovation, compassion and leadership at the 2019 Advancing Healthcare Awards Wales. Health board workers took home four of the eight category prizes at the inaugural awards, which celebrate allied healthcare professionals, healthcare scientists, pharmacists and those who work alongside them. Pharmacy technician Claire Page was named one of the two winners of the support staff member of the year award. Sue Koziel, clinical lead for speech and language therapy for preschool, was given the award for improving public health outcomes, while the health board’s neurophysiology department was given the award for Making Every Day Count. Nominated for Outstanding Contribution to Research Delivery was physiotherapy consultant Ceri Battle. Audiologists Nicola Phillips and Natalie Phillips were also nominated for the award for Leadership and Change Management. The latter award was won by another SBUHB nominee, head of paediatric occupational therapy Amanda Atkinson. Her work redesigning how Swansea Bay’s paediatric occupational therapy teams operate has transformed the service - and reduced waiting times from more than nine months to around eight

weeks, nearly half the government's target of seeing patients within 14 weeks of referral.

Swansea Bay nurses were also honoured in the Royal College of Nursing Wales Nurse of the Year awards:

- Jean Saunders triumphed in the 2019 RCN Wales Nurse of the Year Awards, winning both the Community Nursing Award and Nurse of the Year
- Mitchell Richards claimed the Nursing Student prize
- Lynne Hall won the Registered Nurse (Adult) award.

I am sure Board members will join me in congratulating all of the above.