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<th>Meeting Date</th>
<th>31st May 2018</th>
<th>Agenda Item</th>
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<td>Report Title</td>
<td>Chairman and Chief Executive’s Report</td>
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<td>Report Author</td>
<td>Pam Wenger, Director of Corporate Governance</td>
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<td>Report Sponsor</td>
<td>Pam Wenger, Director of Corporate Governance</td>
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<td>Presented by</td>
<td>Andrew Davies, Chairman and Tracy Myhill, Chief Executive</td>
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<td>Freedom of Information</td>
<td>Open</td>
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<td>Purpose of the Report</td>
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<td>This report is set in two sections, the Chair’s update and the Chief Executive’s update.</td>
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<td>Key Issues</td>
<td>This report provides key updates to the Board including:</td>
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<td></td>
<td>• Update on Non Officer and Executive Director appointments;</td>
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<td></td>
<td>• Kings fund Leadership Development Programme;</td>
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<td>• Visibility and Communication Programme;</td>
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<td>• Volunteers Week; and</td>
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<td>• Staff Survey 2018</td>
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<tr>
<td>Specific Action Required (please ✓ one only)</td>
<td>Information</td>
<td>Discussion</td>
<td>Assurance</td>
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<td>Recommendations</td>
<td>Members are asked to:</td>
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<td></td>
<td>• Note the report.</td>
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CHAIR & CHIEF EXECUTIVE’S REPORT

1. PURPOSE
The purpose of this report is to keep the Board up to date with key issues affecting the organisation, some of which feature routinely within the Board’s business, whereas others have previously been presented to the Board. This report is set in two sections, the Chair’s update and the Chief Executive’s update.

2. CHAIR’S UPDATE

a) External Partnerships
• A Joint Board Meeting between ABMU and the ABM Community Health Council is scheduled for 30th May 2018.
• A Board-to-Board meeting has been arranged between ABMU and Hywel Dda University Health Board on 28 June 2018. Details will be circulated shortly.
• NHS Delivery Unit will be attending the Board Development in June 2018 to present their findings following the review of ‘Intervention into Systems & Processes for the Management of Serious Incidents’

b) Awards and Staff Recognition
• Morriston Hospital’s Professor Farah Bhatti has just been elected to the Council of The Royal College of Surgeons of England. She becomes the first female cardiothoracic surgeon ever elected to serve on the Council.
• Plastic surgery registrar Tom Dobbs successfully applied for the 2018 Jill and Herbert Hunt Travelling Scholarship and will fly to the USA this summer. This supports travel abroad for clinical study or research for graduates of the Oxford University Medical School.
• The Diabetes Research Unit Cymru, headed up by Professor Steve Bain, our Assistant Medical Director for Research & Development and based at Morriston Hospital and Swansea Medical School’s Institute of Life Science, has been awarded the status of diabetes ‘Centre of Excellence’ by pharmaceutical giant, Sanofi. Swansea is Sanofi’s only diabetes centre of excellence in the UK, joining six other centres in Europe.

c) Inaugural Conferences
• The Nursing and Midwifery Conference was held on 4 May 2018. It saw around 200 nursing staff and midwives from across the health board unite to learn and discuss nursing achievements as well as how the profession can develop for the future. The conference was organised by the health board and Swansea University and working in partnership was one of the key themes that a variety of speakers explored throughout the day.
• Medical and Dental Conference was held on 11 May 2017 and gave health professionals the chance have a say in how population health and healthcare provision in the region develops and to discuss the issues that affect them in their work for and with the health board. Delegates included doctors and dentists at various stages of their careers within secondary care along with cluster network leads and clinical directors from primary care. The event was held in partnership with the Welsh NHS Confederation and BMA Wales and featured workshops designed to share good practice and input from a
range of speakers.

c) ABMU Board Member Vacancies
Since the last meeting Welsh Government has advertised the two Independent Member vacancies on the ABMU Board. Shortlisting and interviews have been arranged over the next few weeks with a view to the posts being filled as soon as possible.

d) Kings Fund Leadership Development Programme
During 2017/18, the Health Board commissioned The Kings Fund, to undertake a comprehensive Board, Executive and Leadership development programme to be delivered during 2018/19.

The programme comprises three work-streams designed to work in tandem to increase board, executive and senior leader confidence and capability.

- **Work-stream 1:** A bespoke board development programme that ensures ABMU’s board has the capability, capacity and confidence to lead ABMU through the challenging times ahead;
- **Work-stream 2:** An executive development programme that will work in parallel with the board programme to enable the executive team to work effectively as a team to deliver the organisation’s objectives; and
- **Work-stream 3:** A bespoke programme enabling executive and Delivery Unit leaders and their teams to make strong connections across ABMU and to deliver effectively as a collective.

The Launch Event took place on 10\(^{th}\) April 2018 and brought together the Board (Non-Officer Members and Executive Directors) and triumvirates of our six Service Delivery Units.

Key Actions from the ‘Getting Started Event’ are as follows:

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<th>ACTION</th>
<th>HOW</th>
<th>WHO</th>
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<tr>
<td>1. Utilise one of the sessions to review/develop our Vision and Purpose</td>
<td>To be included in the programme</td>
<td>Director of Corporate Governance</td>
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<td>2. To consider how as an organisation we can develop strong clinical leadership to drive out variation and to deliver value based healthcare</td>
<td>To be picked up as part of the work on the development of the organisational strategy</td>
<td>Medical Director (with unit Medical Directors)</td>
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<td>3. Clarity on roles and responsibilities supported with clear delegations between Units and Corporate Functions</td>
<td>Service Directors to work with the Director of Corporate Governance to develop accountability framework</td>
<td>Director of Corporate Governance (with Service Directors)</td>
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<td>4. To agree how we can develop meaningful engagement with the community, stakeholders and staff</td>
<td>To be picked up as part of the work on the development of the organisational strategy</td>
<td>Director of Strategy</td>
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5. To consider the involvement of the next tier down in the corporate functions

Deputies will be invited to part of the Executive Directors Events.

Director of Corporate Governance

The dates for the next stages of the Programme are in the process of being finalised and an update will be circulated to the Board in the next few weeks.

In addition to this Leadership Programme, Tracy and I will be participating in the ‘Two at the Top’ Programme.

3. CHIEF EXECUTIVE’S UPDATE

a) Visibility Communication and Engagement

Board members will be aware of the importance I place on visibility communication and engagement, particularly of Executives, and the approach that I have personally taken since arriving at the Health Board to develop a visible presence internally and with partners, stakeholders, patients and communities, having personally and virtually connected with 1000's of people to date.

I firmly believe that leadership is a 'contact sport' and not something that can be achieved from an 'ivory tower'.

In order to build on the progress I have made, a comprehensive and systematic approach involving all executives and myself to ensure that we listen, observe and learn to determine our actions as a standard feature of our leadership practise is required.

A systematic approach to Listen Observe Learn Act (LOLA) will ensure myself and members of my Executive Team remain relevant and connected to those we employ, work with, care for and serve. Such visible executive leadership will bring greater cohesion and profile to supplement and not replace the organisation's extant internal communications and engagement activities.

All executives will have a specific visibility objective for 2018/2019 which will enable measurement and review of individual executive practise in this respect.

The Executive LOLA programme will build on progress to date and be delivered through a number of phases including a programme of regular visibility to include communications and engagement activities in person and virtually; correlation, or otherwise, of executive feedback with analysis of findings from survey results including those from staff, patients, partners and stakeholders; CEO and Executive Conferences, supported by the Chairman of the Board, to share findings and confirm priorities and required actions.

The Executive LOLA programme very much embraces our organisational values – caring for each other, working together and always improving – and is a vital example that, through our executive leadership behaviours, we are putting our values into practice. It will give us the opportunity to gather evidence to ensure that we are putting our values into practice at all levels and in all parts of the Health
Board and enable us to understand and test how embedded our values are and identify what further work we need to do to improve.

The LOLA approach will be supported and co-ordinated by Executive Engagement Programme Manager, Lee Leyshon, and Lynne Pankhurst both on secondment to the Health Board until April 2019.

Based within Workforce and Organisational Development, Lee Leyshon and Lynne Pankhurst and will work closely with Health Board Values, Staff Experience, Partnerships, Communications and Workforce and Organisational Development Teams to align with extant engagement and communication activities and avoid duplication.

Through her work, the Executive Engagement Programme Manager, Lee Leyshon will provide additionally to ensure that organisational issues are visibly profiled within CEO and Executive communications and engagement activities and that priorities and decision making reflect the realities on the ground.

Further specific reflections from my personal activities since the last board will be shared orally at the Board meeting.

b) Volunteers’ Week
Volunteers’ Week (1 – 7th June) is a chance to say thank you for the fantastic contribution that millions of volunteers make across the UK. Over 500 individuals regularly volunteer in ABMU HB. Recognition and celebration is central to a positive volunteer experience and the Health Board will be participating in a number of celebration activities for Volunteers’ Week. Later on the agenda, the Board will consider the Volunteering Strategy.

c) NHS Wales Staff Survey
Every few years a national survey of directly employed NHS Wales staff is undertaken. The purpose of the survey is to measure staff opinion on a range of issues considered critical to the success of NHS Wales. It will help each organisation to understand what staff think are the positive aspects and negative issues in their part of NHS Wales; and the results will have a direct influence on changes and decision making in our organisation.

The NHS Wales Staff Survey is scheduled to run between 11 June 2018 and 22 July 2018.

d) Integrated Performance Dashboard
The Health Board’s Annual Plan 2018/19 sets out the actions, services changes and expected outputs for its activities in 2018/19.

The Director of Strategy, supported by all the Executive Directors will present the detailed integrated performance dashboard and covering summary report, which outlines the UHB’s reported position against key targets and provides updates on areas of performance that require more focused and targeted work.

The key high level performance messages for the month of April are set out below:
- Improved performance in April in unscheduled care and stroke but not yet at trajectory levels;
- Stable planned care position with plan to manage newly reportable cardiac diagnostics being developed;
- Challenging April for cancer performance with both measured under trajectory and not improving; and
- Reduced infection numbers in c.difficile and s.aureus but both above trajectory. Increase in E.Coli cases but within trajectory.

e) Financial Position
The Director of Finance will present a summary update on the financial position at the end of March 2018 (subject to audit) and the financial assumptions being considered and managed by the Board which were considered by the April and May meetings of the Performance and Finance Committee in respect of the 2018/19 financial year.

f) NHS Wales Informatics Services (NWIS)
The Health Board declared a Business Continuity Level 3 Incident as a result of the National Data Centre Failure on 24 January 2018, which resulted in loss of 17 national IT systems including Pathology (WLIMS), all GP systems, the Welsh Clinical Portal and the Internet and intermittent failure of a further 7 local IT systems. Aside from a very brief update received after a month, the Health Board has received very little formally by way of an explanation as to what went wrong and what is being done to ensure this does not happen again.

Throughout 2017/18 there were 2 other, less significant, incidents regarding the National data centres that affected ABMU services, particularly in pathology. During May, the Health Board has once again had to invoke Business Continuity processes due to loss of access to the pathology LIMS system. The unavailability of LIMS has a knock on effect to all services awaiting patient tests to be processed, as results are delayed. ABMU continue to work with NWIS to ensure that robust business continuity arrangements are in place within NWIS and that technical plans are in place to mitigate against further incidents. These outages created a serious governance risk and patient safety risk for the organisation and the Health Board has written to the Chief Executive of Velindre, as the host for NWIS to seek assurance that robust business continuity arrangements are in place within NWIS and that they are doing everything they should to ensure there are no further incidents of this nature.

g) Child and Adolescent Mental Health Services (CAMHS) Performance
The Health Board is working hard, in partnership with Cwm Taf University Health Board, to improve the performance of Child and Adolescent Mental Health Services against Welsh Government targets, as well as working with our Local Authorities to improve the signposting and range of alternative support available to children and young people who have emotional and mental health needs.

ABMU is in the process of finalising its revised Delivery Plan for Children & Young People’s Emotional and Mental Health Services 2018-19, which will be discussed at the next Strategy, Planning and Commissioning Group. In addition an update will be
given to the next Quality and Safety Committee on issues raised at the previous meeting to provide assurance on arrangements and progress being made.

**h) Recovery and Sustainability – Service Improvement**
The Board will remember that when it agreed the One Year Plan at the end of March, this included the intention to propose a range of permanent service improvements which had been trialled in 2017-18. As a result, and as part of the Recovery and Sustainability Programme, the Service Redesign project has initiated the service change public engagement required in order to take these changes forward, including the associated reductions in beds. A paper is included on the Board agenda including the documentation, process and timescales involved.

**i) Bridgend Local Government changes and implications for Health Board boundaries**
The Health Board is supportive of the recommendations contained within the consultation document, and believes that it could deliver significant benefits to the population of Bridgend. However, we are also clear that if the consultation proposal is agreed there will be significant implications for the Health Board in terms of senior management, and potentially senior clinical, time required to manage a smooth transition.

To begin the scoping process a clinical workshop was held on 16 February 2018 and a non-clinical workshop was held on 18 May 2018, so the two organisations can better understand each other’s services and agree what future discussions will be required over the next year.

Staff will be kept updated on related progress and joint staff engagement sessions will be arranged when there is more information available on the outcome of the consultation.

**j) Medical Director**
ABMU’s Medical Director and Responsible Officer, Professor Hamish Laing, is leaving the NHS for pastures new having accept a post in Swansea University to become Professor of Enhanced Innovation, Engagement and Outcome. Hamish Laing has worked for the NHS for 34 years and with ABMU and its predecessor organisations for 24 of these having taken up his current role some four years ago. We wish to pay tribute to the clinical leadership Hamish Laing has shown across a range of clinical services and the significant impact he has had in terms of moving forward our Digital agenda over the last two years. We will miss working with him on a day-to-day basis but look forward to continuing to receiving his valuable input through his new role in Swansea University.

We have begun the process of advertising the post of Medical Director bearing in mind Hamish Laing will be leaving his post at the end of July 2018. Until it is possible for the new incumbent to begin with us, Pushpinder Mangat, who is currently our Deputy Medical Director has agreed to undertake the role of acting Medical Director with arrangements being made to backfill his post. We will keep the Board informed as to developments with the substantive appointment.

4. **RECOMMENDATION**
The Board is asked to note the foregoing.
## Governance and Assurance

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<thead>
<tr>
<th>Link to corporate objectives (please ✓)</th>
<th>Promoting and enabling healthier communities</th>
<th>Delivering excellent patient outcomes, experience and access</th>
<th>Demonstrating value and sustainability</th>
<th>Securing a fully engaged skilled workforce</th>
<th>Embedding effective governance and partnerships</th>
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### Quality, Safety and Patient Experience

Ensuring that the Health Board make fully informed decisions is dependent on the quality and accuracy of the information presented and considered by those making decisions. Informed decisions are more likely to impact favourably 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