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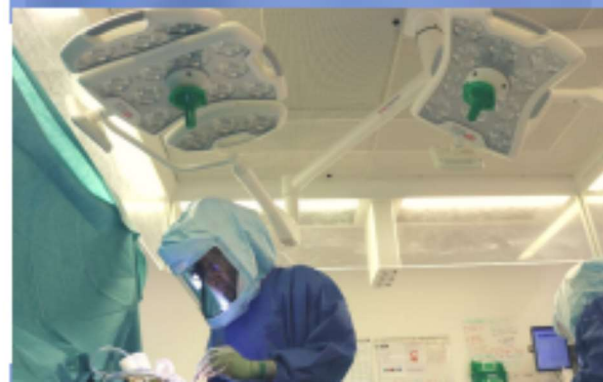
Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

Annual Quality Statement

1 April - 31 March 2020



Care Closer to Home



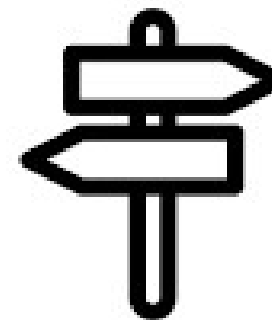
Excellent Hospital Care



**Health Improvement,
Health Inequalities**

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Where is the information you want to know?

“The different colours represent the 7 areas of the Health Care Standards.”



About this report

The Annual Quality Statement (AQS) provides information on the quality of care across our services and illustrates the improvements and developments we have taken forward over the last year to continuously improve the quality of the care we provide. This report follows the format of the Health and Care Standard themes:

Staying Healthy - you are well informed and supported to manage your own physical and mental health.

Safe Care - you are protected from harm and protect yourself from known harm.

Effective Care - you receive the right care and support as locally as possible and contribute to making that care successful.

Dignified Care - you are treated with dignity and respect and treat others the same.

Individual Care - you are treated as an individual with your own needs and responsibilities.

Our Staff - we have enough staff with the right knowledge and skills available at the right time to meet your need.

If you would like to access more of our published reports, or if you wish to get in touch with us, further information on how you can do this can be found in the 'Useful Information' section on page 55.

Introduction and Welcome

The purpose of our Board is to govern the organisation effectively. We aim to build confidence in the quality and safety of the care that we provide. For more information about Betsi Cadwaladr University Health Board (BCUHB) Board Members, please find us on our website: <https://bcuhb.nhs.wales/about-us/>

Joint statement from Mark Polin, Chairman and Simon Dean, Interim Chief Executive

In addition to the significant challenges we face as a Health Board, the global coronavirus pandemic has caused major change and disruption to the way we all live our lives, and the impact on the NHS has been both wide-ranging and severe.

There were significant changes and improvements during 2019/20, although it was evident that the Health Board continued to face challenges in a number of areas. The Health Board remains in Special Measures, although progress has been made on all the issues that led to this being imposed originally and a number of aspects have been removed as issues of concern.

It is important to also recognise those areas where improvements have been delivered, or where strong performance has been maintained.

The Health Board has one of the best records in Wales for protecting its residents through the various immunisations programmes that it promotes and operates, and this continued through the year. We were also amongst the best performers in Wales in respect of the time before patients who have been diagnosed with cancer start their treatment. Furthermore, we delivered a sustained reduction in the number of patients whose discharge from hospital was delayed, which has helped us manage the increased volume of patients requiring emergency admission.

There have also been improvements with regard to how we respond when things do not go as they should. Our performance in reporting and responding to serious adverse incidents has gone from the worst in Wales to the best, and we have delivered significant improvement in the speed with which we respond to complaints. We have also reduced the number of 'never events' that occurred during the year.

We are confident that the Annual Quality Statement for 2019-20 provides a clear overview of the areas of good practice and improvement we have made as a Health Board, together with emphasising the challenges we face now and over the next fiscal year, particularly in response to Covid-19.

North Wales Community Health Council

The North Wales Community Health Council (NWCHC) is the independent health watchdog for North Wales. It represents the interests of patients and the public who use BCUHB health services.

The NWCHC monitors and scrutinises BCUHB health services to improve the patient experiences; one of the many ways the NWCHC does this is by visiting health premises. All visits are undertaken by NWCHC volunteer members.

During 2019, NWCHC members visited all of our District General Hospitals and community hospitals, Emergency Departments and Mental Health Units. There have been in excess of 500 visits by NWCHC to our sites during this period when NWCHC members spoke to patients, their relatives and carers as well as staff about all aspects of health care experiences.

The NWCHC has focussed much of its work around BCUHB Mental Health Services. The NWCHC continues to be concerned that this service remains under special measures with an apparent lack of progress against the recommendations made by the HASCAS and Ockenden reviews. Much of the feedback provided to the NWCHC during visits to various healthcare settings (including primary and community sites) has led to NWCHC having grave reservations about the unique I-CAN service model developed as a way forward for many aspects of providing mental health support.

The BCUHB Transforming Care team and other directorates continue to work collaboratively with the NWCHC. The NWCHC visiting reports remain a part of the Ward Accreditation Programme.

To find out more about the work of the NWCHC, please contact:

- E-mail – admin@waleschc.org.uk
- Telephone – 01248 679284 (ext 3)
- Website – www.communityhealthcouncils.org.uk
- Write to – NWCHC, Unit 11, Chestnut Court, Parc Menai, Bangor LL57 4FH



Betsi Cadwaladr University Health Board (BCUHB)

The purpose of the Board is to govern the organisation effectively. We aim to build confidence in the quality and safety of care that we provide. For more information about Board members, please use the following link: <https://bcuhb.nhs.wales/about-us/health-board-meetings-and-members/>

This document forms part of our annual reporting. In addition to this report, our Annual Report and Annual Governance Statement can be found at the following link:

<https://bcuhb.nhs.wales/about-us/governance-and-assurance1/annual-report-and-accounts/>

This report and supporting documents can be made available in other languages or formats on request from the Corporate Communications Team:

Email: bcuhbpressdesk@wales.nhs.uk

Telephone: 01248 384776

Address: Communications Team
Block 5
Carlton Court
St. Asaph Business Park
St. Asaph
LL17 0JG

There are many opportunities to get involved and share your ideas about how we can improve health in North Wales.

We are keen to hear from you, whether as a member of the public, patient or carer, or if you have a compliment or a suggestion.

It is your local health service.
Help us to help you!

You can also sign up to our involvement scheme. By registering, (please use the link below) you will get our newsletter, hear about how you can share your views and ideas and get updates on activities and events. We want to involve everyone irrespective of age, disability, gender, gender identity, race, religion or belief or sexual orientation.

<http://www.bcugetinvolved.wales/register>

About BCUHB

BETSI CADWALADR UHB

POPULATION

698,400 persons

North Wales has an increasing and ageing population. The population is expected to increase to 734,700 by 2036; the percentage of the population aged 85 years and over is expected to increase by 154% between 2011 and 2036.

OLDER PEOPLE

15% of households in BCUHB are occupied by one person aged 65 years and over, which is just above the average for Wales (14%). Conwy has the highest percentage of one person households with people aged 65 years and over (17%).

Isle of Anglesey, Gwynedd and Denbighshire are also higher than the BCUHB average.

Flu immunisation uptake in 65 year olds and over in

FALLS

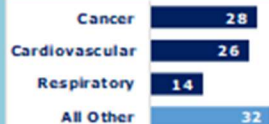
1 in 3 older people will suffer a fall each year. Only 1 in 3 will return to former levels of independence and 1 in 3 will end up moving into long term care.

Yet many falls are preventable.

MAIN CAUSES OF MORTALITY

Heart disease, cancer and respiratory disease are the leading cause of death in BCUHB.

This chart shows the main causes of death as a percentage of all deaths in BCUHB



LIFE EXPECTANCY

82.4
YEARS

BCUHB



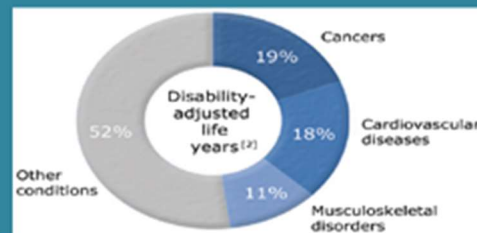
78.9
YEARS

The difference in life expectancy between the most and least deprived is 7.4 years for men and 6.1 years for women. In Wales, there has been a plateauing in increasing life expectancy since 2011.

BURDEN OF DISEASE

This chart shows the greatest cause of Disease burden in Wales, as measured by Disability Adjusted Life Years (DALY).

'Other conditions' includes mental & substance use disorders, other non-communicable diseases and neurological disorders.



DEPRIVATION

Around 12% of the population of BCUHB live in the most deprived fifth in Wales. The Health Board has some of the most deprived areas in Wales, particularly along the North Wales coastline.

CANCER
4 in 10 cancers are preventable.

MENTAL WELLBEING

16% of people in BCUHB report feeling lonely which is lower than Wales (17%). Across the Health Board, this ranges from 13% in Flintshire to 20% in Wrexham. 83% of people in BCUHB report having a high sense of life satisfaction compared to 81% across Wales.

BEHAVIOURS AFFECTING HEALTH

	BCUHB (%)	Wales (%)
Smoking	18	18
Use e-cigarettes	7	6
Drinking above guidelines	18	18
Physical activity	55	53
Fruit & vegetable consumption	23	24
Overweight/obese	54	60
Follow 0/1 healthy behaviours	10	10

Looking Back Over the Past Year

We have made significant progress against the priorities outlined in our **Quality Improvement Strategy 2017-2020**. The key priorities include reducing avoidable deaths, reducing harm and providing reliable care by strengthening our patient care pathways through our services and delivering what matters to patients accessing our services. Among the key things we have done to support these improvements are:

- The Maternity Dashboard has been introduced and captures BCUHB compliance against national standards for maternity care in Wales. The Inpatient and Community Dashboards are populated and reviewed monthly at the Women's Quality, Safety & Experience Sub Group and Women's Board meetings. For assurance, where themes or trends are identified, the meeting Chair may request an audit or thematic review is performed and presented at a future date for further information
- Using crude mortality as an indicator, we can identify any variation from normal and initiate investigation at case-note level to ascertain lessons to be learned. The Emergency Department at Ysbyty Glan Clwyd now have a process in place to review all deaths within 5 days and to capture lessons learned. Reviews now have a structured judgement approach (SJR hybrid) and are tracked on our information Reporting Intelligence System (IRIS).
- In November 2018, we introduced our Ward Accreditation programme which assesses wards and units across the region on a range of quality measures. As of January 2020, there have been 90 unannounced visits / Ward Accreditations to wards. These 90 accreditations include Acute, Community, Childrens, Critical Care, Women's and Mental Health & Learning Disabilities.
- Over the 3 years of the strategy, we recorded 17 Never Events compared to 15 in the three years prior. This is well within common cause variation and as such, there has been no change in the overall rate of Never Events. For assurance, a thematic review will take place and our next QIS strategy will ensure that there is a greater focus on patient safety.
- We have seen a decrease in clostridium difficile and MRSA blood stream infections over the past 3 years. The Infection Prevention & Control team have commenced several new initiatives during 2019, which will assist with trends and the ability to prioritise risks to the population, and increase screening.

Looking ahead, the aim is to complete a review of progress against the Quality Improvement Strategy and plan for the next three years by engaging with our patients, staff, partners and our communities. We will also reshape our Quality Strategy by January 2021. The Quality Strategy will be the vehicle for ensuring quality and providing assurance.

How we have measured our performance

	Improved performance	Sustained performance	Decline in performance	Performance Summary	Target Achieved*
STAYING HEALTHY - People in Wales are well informed & supported to manage their own physical & mental health	3 measures	0 measures	2 measures	↑	1 measure
SAFE CARE - People in Wales are protected from harm & supported to protect themselves from known harm	3 measures	0 measure	12 measures	↓	1 measure
DIGNIFIED CARE - People in Wales are treated with dignity & respect & treat others the same	1 measure	0 measures	1 measure	↔	
EFFECTIVE CARE - People in Wales receive the right care & support as locally as possible & are enabled to contribute to making that care successful	1 measure	0 measures	7 measures	↓	
TIMELY CARE - People in Wales have timely access to services based on clinical need & are actively involved in decisions about their care	6 measures	1 measure	19 measures	↓	3 measures
INDIVIDUAL CARE - People in Wales are treated as individuals, with their own needs & responsibilities	1 measure	0 measures	4 measures	↓	2 measures
OUR STAFF & RESOURCES - People in Wales can find information about how their NHS is resourced & make careful use of them	3 measures	0 measures	2 measures	↑	1 measure
SUMMARY	18 measures	1 measures	47 measures	↓	8 measures

*Relates to those measures with an absolute monthly / quarterly target for December 2019 / Quarter 3 2019/20

Note - this scorecard relates to the April 2019 to December 2019 period

Our performance is measured across seven key domains or areas, aligned to the Welsh Government's Health Care Standards and National Performance Frameworks.

The summary dashboard (left) shows our performance across the range of indicators the Welsh Government uses to measure all Health Boards in Wales. [The NHS Wales delivery framework and reporting guidance 2018 to 2019](#) provides further information.

We have demonstrated overall improvement in relation to helping people to stay healthy and in delivering dignified and individual care. However our performance has declined in respect of delivering timely care and when measured against the indicators for safe and effective care.

Each month we provide detailed briefings to our Board on our performance, outlining the Key Actions being taken to address poor performance, what the Outcomes of those Actions are and the Timeline for when we expect performance to consistently achieve the target.

For 2019/20, we have only included the nationally mandated Measures in our reporting to reflect the priorities of the organisation and improve the health, care and experience of the North Wales population.

The need to plan and respond to the Covid-19 pandemic has had a significant impact on the organisation, the wider NHS and society as a whole. It has required a dynamic response, which has presented a number of opportunities in addition to risks. The need to respond and recover from the pandemic will continue, both for the organisation and wider society, throughout 2020/21 and beyond. The organisation's Governance Framework will consider and respond to this need.

Progress against our strategic priorities

Improving Health and Reducing Health Inequalities	Care Closer to Home	Excellent Hospital Care
<ul style="list-style-type: none"> • Healthy Weight: We have developed the Tier 2 (Adult) Obesity service • We continue to review and identify opportunities for improving access to children's weight management services • Smoking Cessation: We have increased opportunities through stabilising the Help me Quit in Hospital • Wellbeing: We have developed the 'I Can' campaign and 'Let's get moving North Wales' partnerships • We have progressed our partnership plan for Children. • We continue to improve our outcomes through 'First 1000 days' programmes • Immunisation: We have developed BCUHB's first Strategic Immunisations Plan which outlines how we will optimise uptake of key vaccinations across the life course, with a specific focus on Flu and MMR • Reducing Health Inequalities: We are progressing our work on reducing health inequalities – we have worked with partners to develop initiatives which target food poverty, housing and homelessness • We have developed integrated multiagency Health & Wellbeing Centres 	<ul style="list-style-type: none"> • Healthcare Support Workers (HCSW) at Ysbyty Alltwen are leading a project which aims to prevent delays for patients leaving hospital by offering support for those, who are ready to leave hospital but may be waiting for a care package, in their own home. • A pilot scheme to help patients get fit for major surgery in order to reduce the risk of complications following their operations has been introduced at Wrexham Maelor Hospital • Community NHS staff are ramping up sepsis monitoring as part of Wales-wide improvement programme. New equipment is helping district nursing staff identify sepsis. • Wrexham Maelor Hospital is the first in Wales to offer same day discharge hip replacement surgery, some patients are able to go home on the same day due to surgeons using a new method of delivering post-operative care • Specialist teams of Occupational Therapists are helping Glan Clwyd patients get ready for returning home following a pilot study, which reduced length of stays by almost 50 per cent 	<ul style="list-style-type: none"> • Doctors in training have ranked Ysbyty Gwynedd's Emergency Department as one of the best places to train in the UK. Results from the recent National Training Survey by the General Medical Council shows over 85% of doctors in training are pleased with the quality of clinical supervision, experience, and the teaching they receive at the Emergency Department. • A new system designed to speed up diagnosis for people with suspected cancer has been introduced in North Wales. We have issued guidance to GPs to help them determine whether patients with symptoms of colorectal cancer can be referred directly for an investigation, bypassing an outpatient appointment and saving time. • People living with dementia and their carers have joined health experts in praising the 'first class' memory support provided across North West Wales. The Gwynedd and Môn Memory Service has been given a top quality mark by the Royal College of Psychiatrists for the third successive time for providing the highest standards of care for people living with dementia and other memory problems.

Staying Healthy

Smoking

Staff in the BCUHB Smoking Cessation Services have treated 3.08% of the smoking population which was the second highest performance in Wales, although it is acknowledged that this does not achieve the 5% target.

Of those people treated by the services, 38.46% were validated as having stopped smoking. Although an improvement on last year, this remains below the 40% target and continuing to improve this remains a priority for the next two years (2020 to 2022).

Respiratory Health Project

20% of the population of Blaenau Ffestiniog have been identified as being smokers. This, combined with the legacy of the slate mining industry has contributed to poor respiratory health and 11% of those patients registered at the GP practice (Canolfan Goffa Ffestiniog) were identified as suffering from chronic respiratory conditions.

The practice were identified as one of the highest prescribers of inhaled corticosteroids within the BCUHB, which prompted the cluster to identify ways to develop more effective strategies and treatments to improve respiratory health.



Steffan John, an independent pharmacist prescriber specialising in respiratory health conducted 6 sessions, which included:

- Identification of patients and inviting patients to respiratory clinics
- Education and training of healthcare professionals in COPD diagnosis and management
- Review and improve inhaler techniques

Protecting people against Flu

Protecting people against the risk of flu is a major element in helping the NHS reduce the demand for emergency care over the winter period. The number of people eligible to be vaccinated and receiving vaccinations has increased year on year in both the under 65 and over 65 age groups. The increased volume of vaccinations given demonstrates the hard work our staff have done to promote the need for vaccination. As a result, by 31st March 2020, 2,444 more people in North Wales had been vaccinated compared to the year before.

The national target is for 75% of the eligible groups (people aged over 65, and those aged below 65 who are at greater risk from infection) to be vaccinated. North Wales had the highest take up rate in Wales, at 71.4% for those over 65 and 46.9% for those under 65. This is an improvement for the over 65 age group. However, the increased number of people aged under 65 who were eligible to be vaccinated last year meant that the take up rate fell, even though the number of people in this group who were immunised increased. This shows that we need to continue our efforts to encourage people to protect themselves.



Three Year Strategic Immunisation Plan 2019-2022

Through the development of our three year Strategic Immunisation Plan (2019-22), BCUHB has committed to protecting and improving the health of the population through maximising uptake of vaccines for eligible groups across the life course. This will be achieved by focussing on reducing variation in uptake, sharing learning and further embedding a culture of quality improvement, strengthening governance arrangements, improving how we communicate and engage key stakeholders and taking every opportunity to immunise our public, patients and staff.

A range of routine vaccinations programmes are being delivered across North Wales by BCUHB and primary care contractors. Further selective, medical, occupational and travel immunisations are also provided, including influenza vaccinations for pregnant women and people with chronic conditions; Tuberculosis, Hepatitis B and influenza vaccinations for staff involved with direct patient care; and travel vaccines for people travelling to certain countries.



Childhood Immunisation

BCUHB has historically performed better than the national average for uptake of most childhood immunisations, although there is variation based on geographical area and uptake rates decline from infancy through to later childhood. In 2019/20, 90.3% of resident children in North Wales were up-to-date with scheduled vaccines on reaching their fourth birthday. This is higher than the other health board areas and Wales. However, uptake in the least disadvantaged areas in BCUHB is generally much higher than in the most disadvantaged areas and so there is an inequity. We have appointed a further two immunisation co-ordinators who are targeting the areas most in need.

Measles, Mumps and Rubella (MMR)

Uptake of the first dose MMR vaccine in children aged two years in BCUHB was just below the 95% target at 94.9% in 2019/20. However, two areas - the Isle of Anglesey and Wrexham – exceeded the target. MMR uptake at age five years in BCUHB was below the 95% target at 91.0% in 2019/20. No areas in North Wales reached the target. We continue to work with our communities to promote immunisation and dispel myths.

Healthy Weight Services

BCUHB continue to progress towards establishing a tier 2 service with the inclusion of a commercial weight provider as part of the package of service options. The Kind eating and Foodwise programs have expanded during 2019/20 with an increase in patient contacts.

We have been scoping models of good practice and performance to develop our tier 3 children's obesity service during 20/21. This work will contribute to the delivery of 'Healthy Weight: Healthy Wales' long term strategy to reduce and prevent obesity.

During 2019, our Infant Feeding Strategy was launched. The vision is to create a supportive culture in North Wales that enables parents to make the choice about infant feeding in an informed way that optimises nutrition and helps develop close, loving relationships with their baby.

Giving every child the best start in life is crucial to reducing health inequalities across the life course. The foundations for virtually every aspect of human development – physical, intellectual and emotional – are laid down in early childhood.

Let's Get Moving North Wales collaboration continues to work together to improve the health and wellbeing of the population of North Wales, through increasing opportunities to be more active.

Winter Wellness Campaign

Our East Area Team's Winter Wellness Campaign was a public facing awareness raising campaign provided to offer advice and support to members of the community on the importance of keeping well particularly through winter. The campaign covered five themes which include: Skin Care, Hydration, Falls Prevention, Choose Pharmacy and Flu Vaccination and Supporting Carers. Initially, a week of Roadshow events were held in Wrexham and Flintshire. Subsequently members of the team have been promoting the campaign in Food Festivals and Bite Size Health in the Workplace events.

Children's Outpatients: Free Fruit

BCUHB catering, dietetics and paediatric department alongside the Awyr Las charity collaborated in 2019 to trial offering free fruit to children in the paediatric outpatients area. The trial initially ran within the Wrexham Maelor paediatric outpatients but has since rolled out to the other main hospital sites. On average 40-60 pieces of fruit are being delivered four times a week with no wastage reported. The reception area actively promotes the offer with colourful posters and fruit themed activities for the children, such as colouring and word searches. Parental feedback has been so positive and the offer has continued with the support of the catering team.



Young People for Young People: increasing resilience

Hannah Mart, Children and Young Person's Sexual Violence Adviser, based at the Amethyst Sexual Assault Referral Centre has been working with a group of young people to develop a resource booklet entitled 'Sharing Stores / Rhannu Straeon'. The aim of the resource was to provide information and advice to other young people about and the criminal justice process and how to cope with it, to support their recovery, reduce their isolation and increase their resilience. In addition, it can be used to help professionals to understand the experience of the CJS journey from the perspective of the survivor and better support them.



The project developed momentum and in addition to the booklet a film and podcast was developed. The 'Sharing Stores / Rhannu Straeon' film and podcast was launched officially in September 2019. The project was submitted as an application to the Problem Orientated Police Awards (POP). Hannah and some of the young people involved were invited to the Awards ceremony to present the project, although it didn't win the judges were so impressed with the work they decided to award the judges discretionary fund of £3000 to the project.

Safe Care

Safe, Clean Care- reducing healthcare associated infections



There has been continued focused improvement and reactive work relating to infection prevention, as well as the inclusion of the Safe Clean Care campaign for the past year. This includes reducing unwarranted variation, a deep dive scrutiny of all trajectory infections, developing a link practitioner programme, with our first in house educational event.

An Independent Reviewer revisited the Health Board and gave a positive report back to the Executive team on the further progress during the last year. In addition, an internal audit was carried out and assurance levels overall were increased from the previous year in relation to Safe Clean Care and Infection Prevention & Control. A snap shot audit on urinary catheters took place in September 2019 and preliminary results suggest that less than 2% of those patients had an infection associated with urinary devices. This is alongside the achievements to date in reduction of Meticillin Resistant Staphylococcus Aureus (MRSA) blood stream infections, which has decreased per 100.000 population from 2.72 to 1.87.

However, we recognise there are still particular infections to concentrate on, such as gram-negative infections and the collaborative work programmes in primary and community care with other specialist services.

Focus on Quality Improvement – Falls and Hospital Acquired Pressure Ulcer Collaborative

BCUHB introduced a programme of focused improvement work that includes the Ward Accreditation Programme, which commenced mid October 2018, quickly followed by the Hospital Acquired Pressure Ulcer Collaborative (HAPU) in late November 2018 and then the Inpatient Falls Collaborative in June 2019.

All key programmes of focused improvements provide an opportunity for BCUHB to embed the principles of a common Quality Improvement language and methodology as well as embedding a set of standards to frame our quality, safety and patient care agenda and to maintain the momentum of the improvements and principles of the Safe Clean Care campaign (SCC).

Improving Safety and Reducing Harm

By using a collaborative approach, we have focused improvements relating to our key harms (Inpatient Falls and Hospital Acquired Pressure Ulcers). The collaborative is a small number of identified wards who have come together with support from Quality Improvement team & subject experts as a faculty through a planned sessions face to face and virtually has led the embedding of a common language and understanding of quality improvement for all levels of ward staff. It has helped us identify standards for all of our wards to follow in terms of identifying and reducing harm from Hospital Acquired Pressure Ulcers and then for Inpatient falls once collaborative completed.

Outcomes to date include standardise reporting of incidents, streamlining and easy access to educational resources, development of chair awareness audit engaging visitors and the public in reducing harm from falls.



Falls: DATIX reporting SBAR

S	Situation: What is the immediate situation? <ul style="list-style-type: none"> Identify self, unit, patient & room number. Briefly state the problem.
B	Background: What led to this situation? <ul style="list-style-type: none"> Admitting diagnosis and date of admission. Current medications, allergies & IV fluids.
A	Assessment: What do you think the problem is? <ul style="list-style-type: none"> Explain your assessment of the patient and how you came to this assessment e.g. stable or deteriorating.
R	Recommendation / Request: What do you recommend should happen next? <ul style="list-style-type: none"> Review / see the patient now. Perform / review tests. Reassess / consider: <ul style="list-style-type: none"> Foot wear; Location of patient on ward; Mobility aids; Falls Pathway; Inform family and members of MDT; Visual cues. Complete the post falls checklist / documentation.

Welsh Government Reportable Incidents

Where serious adverse incidents occur, it is important that these are thoroughly investigated, that we learn from what has happened and put in place measures to prevent them recurring and improve patient safety. We report serious incidents to the Welsh Government and aim to demonstrate, within an agreed timescale, that we have taken appropriate measures to reduce the risks of similar incidents happening in future.

This is an area where the Health Board has improved its performance significantly in the nine months from April to December 2019, from having the the worst performance in Wales in December 2018 to the best in December 2019 at 84%. This is an issue the Health Board takes very seriously and work continues to further improve learning from incidents to improve outcomes and experiences for our patients

Further information can be found in our Putting Things Right Annual Report 2019-20 which can be access via our website. Further details can be found in the 'Useful Information' section on page 53.

Never Events

Never Events are serious adverse incidents that our systems and processes should ensure are never able to happen, and we are committed to achieving this. We have reduced the number of never events, with four reported during the nine months between April and December 2019 compared to eight reported during the same period in 2018/19.

All never events are reported directly to our clinical executives as soon as possible following the incident, and are fully investigated under the serious incident framework. This process fully engages the patient, family and carers throughout. The investigation is chaired by a Director and carried out by the Senior Investigation Managers with support from the Welsh Government Delivery Unit. This ensures that robust investigations are carried out, all relevant lessons are learned and shared across the organisation, and any necessary actions are taken to prevent an incident from recurring.

Unfortunately, a further Never Event was reported in March 2020 bringing the total number for the 12 months of 2019/20 to five, compared to eight in 2018/19.

Further information can be found in our Putting Things Right Annual Report 2019-20 which can be access via our website. Further details can be found in the 'Useful Information' section on page 53.

Mortality

The Crude Mortality of Patients under 75 years of age, is based on the number of deaths in a specific period divided into the total inpatient admissions of that period (of patients under 75 years of age). For the year 2018/19 we reported a rate of 0.77%, while for the same period in 2019/20 we have seen a slight increase to 0.78%.

The Office of the Medical Director are working with our acute, community and mental health hospitals to use the all-Wales mortality review process to look at the way we review the care of patients who die. They are also working with Improvement Cymru on an all-Wales basis, to enhance the reviews further and make the required improvements identified by the reviews.

All Health Boards must conduct Universal Mortality Reviews within 28 days of a death occurring. Performance against this measure has improved from 87.8% reported in December 2018 to 92.8% reported in December 2019. We will continue to focus on this to ensure that we consistently achieve the 95% target rate throughout 2020/21 and beyond.

Ward Accreditation

Launched in November 2018, our Ward Accreditation programme assesses wards and units across the region on a range of quality measures. Wards which demonstrate excellent care are awarded a bronze, silver or gold award following an in depth assessment by nursing leaders.

Work of the Ward Accreditation programme continues with all wards having received an unannounced visit. To date 95 wards have been visited of which one has received a Gold ward.

The programme will continue and is fully embedded within BCUHB as a way of supporting our teams with implementing a set of standards, sharing improvements and celebrating success.



Medicines Information Service

The Medicines Information (MI) and Advice Service provided advice for 56 patients in 2019 via the medicines helpline. The majority of the patient advice calls concerned complementary and alternative medicines and whether they were safe to use in combination with prescribed medicines or if there are other cautions or contra-indications to their use.

More than 1000 queries from healthcare professionals were dealt with by the BCUHB Medicines Information Service, whose function is to support the safe, effective, economical and rational use of medicines both in the hospitals and the community, with a strong emphasis on promoting quality care and ensuring safety.

These queries concerned individual patient care that could impact on safety, experience and treatment effectiveness and outcomes. Split across three acute sites in BCUHB, the MI team work together to ensure access to information is available five days a week. Pharmacists providing on-call services are trained by the MI team to be able to provide quality advice on request.

Plans are underway to promote the medicines helpline more widely in 2020.

Psychiatric Intensive Care Unit: improving safety

Our Wrexham based Psychiatric Intensive Care Unit staff were named the Nursing Times' Team of the Year for their work to bring laughter and joy to people most seriously affected by mental ill health. Staff from Tryweryn Ward at Wrexham Maelor Hospital's Heddfan Unit beat stiff competition from NHS teams from across the UK.



The prestigious award has been given in recognition of “incredible” changes the team have made to the eight-bed Tryweryn Psychiatric Intensive Care Ward, which provides care and support for people who are so acutely unwell that they cannot be safely treated on a general mental health ward. This has seen the introduction of a range of new activities and therapies on the ward, including joint yoga sessions, hand massages and baking, as well as a new ‘rant and relax room’, which has been designed by patients.

Caniad Service Manager Denise Charles said: “Different people let off steam in different ways. If someone is feeling like they’re not able to express themselves, they may become very distressed. Instead of needing to safely restrain them, we can guide people towards the safe room and encourage them to either let it all out, or just lay under the weighted blanket. We comfort them”.

“Since introducing the changes, Tryweryn Ward staff have managed to halve the number of restraints performed, while patient satisfaction scores

have increased significantly in the same time. “There is now much more laughter on the ward because it’s patient-led”.

Ward Manager Matt Jarvis said: “It’s all very simple really – just asking how we can support people’s individual needs, and actually listening to what they have to say”.

Nutrition and Hydration: improving safety

In addition to continuing to promote optimal nutrition and hydration across BCUHB throughout 2019 – 2020, the nutrition teams, incorporating Dietetics, Nutrition Nurses and Catering services, supported a large piece of work to enable a pan BCUHB change to inpatient malnutrition screening.

From 2018 to 2019, members of the BCUHB “*Fundamentals of Nutrition, Catering & Hydration Standards*” (FINCHS) Group contributed to an All Wales review of malnutrition screening. It was concluded in 2019, that in all acute and community inpatient settings (bar Mental Health and Maternity Services), it was appropriate to change from using the long-utilised ‘MUST’ (**M**alnutrition **U**niversal **S**creening **T**ool), to using an alternative validated tool called ‘WAASP’ (**W**eight, **A**ppetite, **A**bility to eat, **S**tress factor, **P**ressure ulcer) Nutritional Risk Assessment Tool. Evidence suggests the tool is able to more sensitively capture patients at risk of inpatient malnutrition.

Following this work, all Welsh Health Boards were instructed by the Welsh Health Circular to change the documentation used for Adult Inpatients Nutritional Screening from 2 December 2019.

FINCHS continued to work across BCUHB and with All Wales stakeholders, including Nursing and Informatics to ensure appropriate Risk Assessment Booklets were designed and disseminated, plus e-learning platforms were updated to reflect the new tool. To support implementation, the BCUHB Dietitians and Nutrition Nurses delivered a comprehensive education programme from early September 2019 until the New Year.

The WAASP tool is now embedded across BCUHB in all the appropriate inpatient areas.



Safeguarding

The examples below are just some of the steps we have taken to provide assurance, make improvements and to learn, from a Safeguarding perspective.

Internal Audit Report 2019/20

A detailed review of service delivery against the requirements of the Health and Care Standards, Safeguarding legislation and guidance took place in 2017-2018 with limited assurance given. A follow up review of the period of 2019-2020 found substantial assurance with no recommendations made as report findings had evidenced significant improvements had been made.

Safeguarding Maturity Matrix

The Safeguarding Maturity Matrix (SMM) is a self-assessment quality monitoring tool used by all Health Boards/Trusts in Wales. In November 2019, the five standards assessed were; Governance and Rights Based Approach, Safe Care, ACE Informed, Learning Culture and Multi Agency Partnership Working. The highest achievable score is five for each standard, with a maximum score of 25.

BCUHB achieved a score of 14 in 2018, and a score of 23 in 2019. This demonstrates excellent progress, and is the highest score in Wales. This was achieved by the implementation of improved Governance, Performance and Assurance Frameworks, evidenced based learning, and the development of Communication Pathways.

Learning culture in safeguarding

The Corporate Safeguarding Team provide BCUHB assurance against Internal, Regional and National Reviews for both adults and children. A good example is a recommendation from a Child Practice Review recommending all agencies develop a critical incident debrief model. On the 4th May 2010, the Corporate Safeguarding Team launched the Trauma Risk Management (TRiM) which is supporting staff who suffer a traumatic event.

Effective Care

Home First Project

The central area community team as part of an innovative scheme, prevented more than 800 avoidable hospital admissions over a six month period and have shared their work with the Minister for Health and Social Services.

Vaughan Gething visited colleagues working on the Home First Project, based in the Emergency Department at Glan Clwyd Hospital.

The project, which assessed of more than 2,000 Emergency Department visitors between May and November 2019, brings together therapies, social care, housing and third sector staff to help people return home following treatment in the department.

The Step Down team work together to support patients who are discharged from hospital by finding solutions to barriers, which would otherwise prevent them from returning home. Occupational Therapists, Social Workers and Physiotherapists are working extended shift patterns in the Emergency Department and share advice and information with colleagues to support discharges home. Their work helps avoid admissions to hospital and prevents deconditioning, where people lose their independence and mobility following a stay in care.

The team tackle challenges including access to community-based support and organising follow-up visits with patients to ensure they can recover safely at home, instead of in hospital.

Sandra Naughton, Step Down Matron for Community Hospitals, said: “Our focus has been on asking people what matters to them, which more often than not means returning home and to their normal way of life as soon as possible.” “By offering expertise to colleagues in the Emergency Department over a longer period of time, we’ve managed to help more than 800 people avoid a stay in hospital they didn’t need, instead heading home or to community-based care with a treatment plan in place to recover.”

The project was recognised as a finalist in the Making Every Day Count category of the 2019 Advancing Healthcare Awards, which celebrated outstanding achievements of allied health professionals, healthcare scientists and pharmacists across Wales.



Effective Pathways of Care: Self Care Pathway

The purpose of the Emergency Department (ED) Direct Discharge for the East area, was to redesign the pathway of care for the management of six specific fractures and injuries. All patients with acute fractures have traditionally been referred to a fracture clinic soon after injury. However, many simple stable fractures and injuries can be discharged from the ED with standardised advice leaflets, access to telephone advice and no further follow up in fracture clinic.

- ➡ Implementation commenced on the 1st Oct 2018 and data was collected prospectively for 12-months. Patients diagnosed with one of the six specific injuries were put onto the 'Self Care Pathway' (SCP) receiving the appropriate treatment and an advice leaflet, prior to being discharged from the ED.
- ➡ The ED physiotherapist collated patients put onto the SCP, reviewed the notes/X T Rays with an Orthopaedic Consultant on a weekly basis, to ensure patients' were safely, and appropriately discharged from the ED. Patients either remained on the SCP, were referred to Occupational Therapy (OT) for onward management (mallet injuries only) or were recalled to attend fracture clinic. At 8 weeks post injury, the ED physiotherapy practitioner carried out a telephone review for patients who remained on the SCP without any routine follow up. Additionally, the ED software system was used to examine how many patients were referred to fracture clinic with one of the 'six' injuries, rather than being treated on the SCP:
- ➡ 255 (67%) out of a possible 378 patients were put onto the SCP, with 231 (91%) remaining on the SCP after the orthopaedic review. Only 2 (1%) patients who were accurately put on the SCP, re-attended the ED with ongoing pain/disability and were subsequently seen by an orthopaedic consultant and fracture clinic respectively. Of 62 patients contacted on the telephone review, 98% reported normal function and near/full recovery from their injury. 231 fracture clinic appointments were not needed.

This work has improved the pathway of care without compromising the overall outcome and subsequently, less travel time and time off work for the patients' to attend an appointment and fewer fracture clinic appointments, thus reducing the workload of the fracture clinic.

Effective Pathways: 'One Stop Shop' – Shoulder Clinic

Implementation of the 'One Stop Shop Shoulder Clinic' started on 1st April, 2019. The purpose of implementing a 'One Stop Shop' shoulder clinic within the musculoskeletal triage service (CMATS) was to improve the pathway of care for patients with shoulder conditions. This service enables patients to attend one appointment and receive a musculoskeletal assessment with immediate access to diagnostic ultrasound scanning and injection if indicated.

"Everything! One-stop service. Excellent consultation. Explained what was wrong with me – able to have tests, exam and ultrasound all in one visit. Brilliant! Can't fault".

- ➔ Between April 2018 and August 2019, 131 patients were seen in the one stop shoulder clinic. Following clinical assessment, 61% of these patients proceeded to ultrasound scan, 39% of patients did not require a scan.
- ➔ There were 142 GP referrals for shoulder ultrasound to the radiology department. There has been a 44% reduction in shoulder ultrasound activity when compared scans performed between April 2019 and August 2019.
- ➔ The average waiting time for ultrasound within the radiology department between April 2018 and August 2018 was 9.4 weeks. The average waiting time between April 2019 and August 2019 was 6.1 weeks. This demonstrates a 35% reduction in patient waiting times during April 2019 and August 2019.

Wrexham Maelor Hospital Annual Symposium: Quality Improvement (QI) and Audits



This was the second "Annual QI-Audit symposium" at Wrexham Maelor, which was attended by 94 staff members from various disciplines. It included 10 selected QI projects/audits presented by medical and nursing staff and was very well received by all attendees with excellent feedback. Three prizes were awarded for the best projects and the first prize was won by the orthopaedics team for their brilliant results with "Personalised total hip replacement pathway" at Maelor. Quotes from attendees included:

"Excellent. A wide range of subjects and inspirational for innovative change".

"Good practice to carry forward. Very informative and current, pro-active projects, very encouraging and a pleasure to hear".

"A variety of projects from various specialities! Wonderful presentations given throughout. Good quality projects! Excellent-excellent!".

Clinical Audit, Outcome Review and Service Evaluation

BCUHB continues to use a variety of quality improvement methods to identify how well care and treatment is delivered for our patients and carers. One of these approaches includes using 'Clinical Audit' to measure practice against agreed standards. The standards are based upon the best available evidence, which may be national guidance, clinical expertise or research findings. In this way quality improvement needs are identified and acted upon.

It is important that we look at the right topics for clinical audit at BCUHB, therefore a process of prioritising the projects we conduct which are motivated by factors important to improving outcomes and listening to feedback from patients and carers along with learning from feedback, incidents, concerns and research. These include the Welsh Government's *NHS Wales National Clinical Audit and Outcome Review Plan: 2019/20*. Here clinical audit projects and outcome reviews enable learning and comparison against other organisations in England and Wales.

An example of where a National Clinical Outcome Review has led to direct local engagement is the MBRRACE-UK: Mothers and Babies: Reducing Risk through Audits and Confidential Enquiries across the UK. Several immediate improvements have been identified and actioned, supporting improved care provision for high risk women in the following ways:

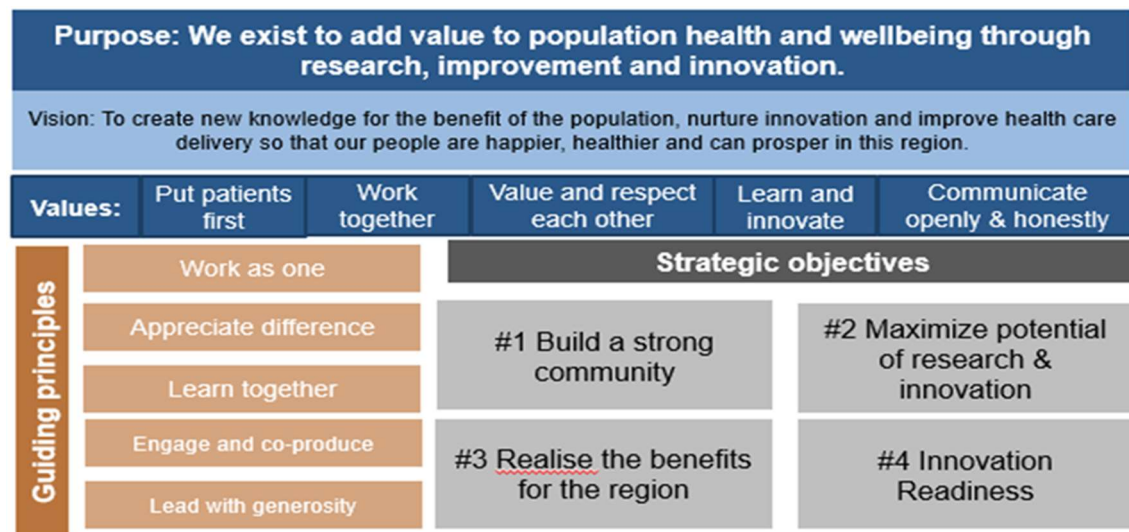
- Improved initial booking risk assessment form
- Training updates for all staff via sending out a link to a Perinatal Institute educational video with regards to symphysis fundal height measurement
- Face to face assessment of the practice of SFH measurement to ensure appropriate practice is in place and is standardised across BCUHB.

This will support increase detection of small for gestational age babies at risk of stillbirth.

Another positive example is of the impact that evaluation projects can make locally is one that supports the improvement demonstrated by a BCUHB education programme for staff; guiding and supporting them in caring for patients and the creation of Strategic delivery Groups & Subgroups around Palliative and end of life care.

Research, Development and Innovation

In addition to the work noted above, research is a daily part of our work. It helps to improve the health and wellbeing of the people of North Wales. We are always looking at new ways to prevent, manage and treat disease and of bringing hope to people living with illness. The research staff are mostly the same doctors and health professionals you will see at your appointments. A Research and Innovation **Strategy** has been launched for 2020-2025 (below).



Case Study: A group of people in North Wales were provided with a unique opportunity to take part in a study to discover whether it can improve their quality of life following cancer treatment.

The CLASP study, an online programme called Renewed for people who have had prostate, breast or bowel cancer, were offered to people who had finished their main cancer treatment in the last 10 years or are having active surveillance for prostate cancer. Renewed is an online programme that can help people to be more active, reduce their stress levels, manage their weight, eat a healthy diet and feel less tired.

Everyone who took part in the study, which finished at the end of October 2019, were asked to complete an online questionnaire after six months and a year. The questionnaire asks them about their feelings and whether the programme has helped them to improve their quality of life. The Health Board were the best recruiters in Wales for people following cancer treatment.



The Health Board participated in a number of COVID-19 trials and the RECOVERY trial has shown that dexamethasone, a steroid, significantly reduces the risk of dying from COVID-19 for seriously ill patients requiring respiratory intervention – a major breakthrough. Despite the challenges COVID-19 has created, the outbreak has inspired clinicians to develop innovative projects to help them better communicate between themselves and their patients.

Integration and Joint Working: Community Care Hub

The Community Care Hub is led by Dr Karen Sankey and Dr Dewi Richards and was established in the Salvation Army, Wreccsam in January 2017. Dr Sankey has been a GP for 25 years, but she feels modern general practice is "not fit for purpose", particularly for vulnerable groups, who tend to "just fall through the cracks".

You can see all services
at once No WAITING

Joey

The Community Care Collaborative Hub provides a one-stop shop for every service that people may need. It is a drop-in session which occurs every Friday bringing together 29 agencies. The 'Everyone in the Room' model brings together all the agencies that people need in the same room, at the same time every week. This system means people do not have to worry about missing appointments or needing paperwork they do not have access to. On average, it supports 60 people each week who are homeless, sleeping rough or have mental health or substance misuse problems. In the last financial year, 850 people accessed its services. The PALS have been working alongside the other 28 agencies since September 2019.

Stroke care

The improvement in performance against the Stroke Care measures that we achieved in the first half of 2019/20 did not continue into the winter months in respect of the number of patients being admitted to a specialist unit within four hours and the numbers seen by a specialist consultant within the first 24 hours of admission. In part, this has been because emergency care pressures had an impact upon the availability of stroke beds. However, performance in the year is an improvement on 2018/19 for both measures.

In response, awareness sessions are being held with staff working in our Emergency Departments (ED) to highlight the need for early referral to the Stroke Team. A proposal to ring-fence an appropriate number of beds only for use by Stroke patients is being considered.

Dignified Care

Dementia Care

The past year has seen a lot of positive work happening around dementia care at BCUHB. Whilst over 10,000 of our staff have now completed training in dementia we also partnered with TIDE, a dementia carer organisation, to train an additional 1,000 frontline staff to become more aware of the needs of families and carers. In support of this we also partnered with North Wales Police to launch the Herbert protocol which helps a person with dementia who may get lost to be found quickly and returned home safely and by doing so reducing the distress of becoming lost or of losing a loved one.

Our second Consultant Nurse for dementia, Suzie, joined us and has initiated a community of practice for all dementia support workers across the organisation to equip them with the knowledge and skills they need as they develop new roles in community hospitals and mental health units. Under our Dementia Strategy we saw a number of hospitals and units being accredited by the Alzheimer's society as Dementia Friendly and Ysbyty Gwynedd became our first District General Hospital to be accredited. In a similar way, all of our Memory Assessment Services across North Wales were again successfully accredited by the Royal College of Psychiatrists. These accreditations show services performing to national quality standards aimed at delivering high quality dementia care.



Dementia Care: a peaceful setting

In early 2019 we introduced a new care suite at Wrexham Maelor Hospital which will provide a peaceful setting for people with dementia to spend their final days. The facility at the hospital's Heddfan Older Persons Mental Health Unit will ensure that people with dementia can receive end of life care in a dignified setting away from the main hospital environment, if this is their wish and that of their family.

The refurbished suite, which will support patients on Gwanwyn Ward, has dedicated facilities to enable families to stay close to their loved one and follows our commitment to John's Campaign, which advocates for carers' right to stay. It forms part of our efforts to improve the quality of Older Person's Mental Health services and act on the recommendations of external reports by the Health and Social Care Advisory Service and health investigator Donna Ockenden.



"People with dementia have as much right as any other person to a dignified death with an assurance of compassionate and high quality care. As a health board, we recognise the need for preferences and decisions about end of life care to be identified as early as possible and we advocate for people to be able to have these conversations when they feel the time is right. As such we are supporting our staff to have the knowledge and skills that are needed." Sean Page, Consultant Dementia Nurse at BCUHB

Continence Care

Training and Education has taken place via our Electronic Staff Record (ESR) database, with all BCUHB healthcare professionals, and staff in the private sector - (in Residential and Nursing homes) having access to the following training; Continence update, Catheter Management, Bowel Dysfunction, Continence throughout the Lifespan. Urinary catheterisation and catheter care in adults is available as an e-learning package. Some sessions such as catheter update are well attended. Other sessions have had to be cancelled due to poor attendance. Additional training sessions such as bowel care have been added as required. Team leaders and managers have a responsibility to ensure their staff have the knowledge and skills to manage patients with continence care needs in their clinical area. Care agency staff can also receive specific training depending on patient continence care need.

Clinical placements with the continence advisors in their nurse-led clinics are offered to Allied Health Professionals, pre-registered students and Junior Doctors. Assessment of patients with bowel and/or bladder dysfunction is the responsibility of all BCUHB clinical and nursing staff, the continence service team are available to offer advice, support and joint visits as necessary.

The formulary nurse position offers advice and support to staff and patients with urology devices e.g. catheters/sheaths. Her remit is also looking at prescribed items, ensuring items on BCU formulary, used and prescribed correctly thus reducing wastage and cost.

Monthly Multidisciplinary Team meetings take place across BCUHB with Gynaecology, Urogynaecology, Urology, Continence Advisors and women's health physiotherapy to discuss complex cases and further management.

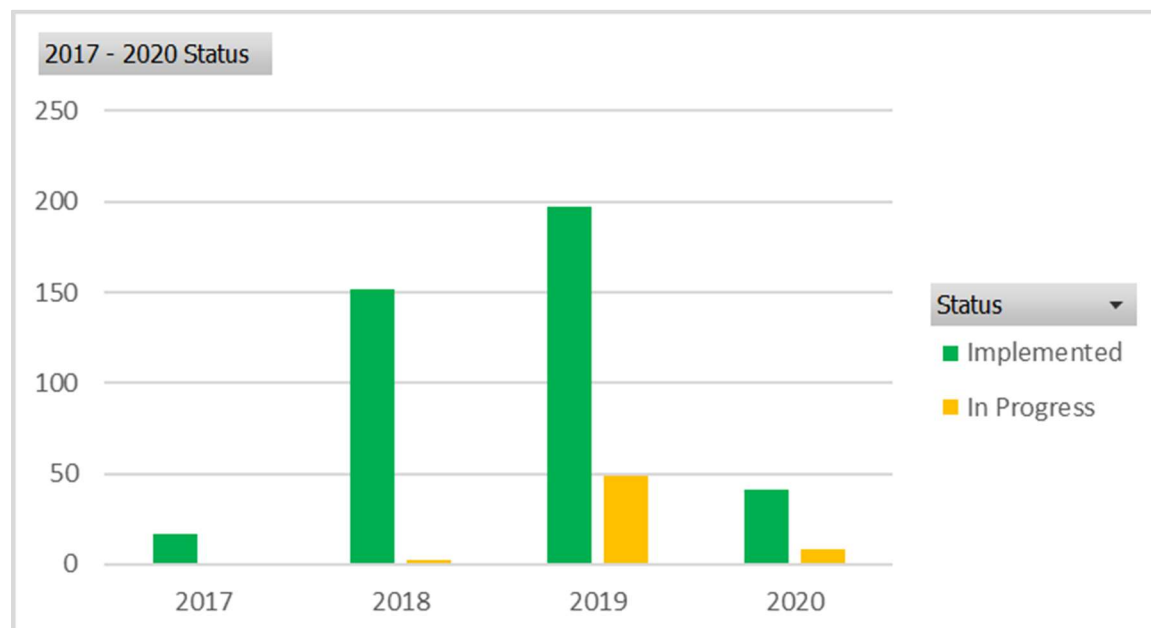
The All Wales Continence Forum (AWCF) have developed Continence / Risk Assessment Toileting tool to be rolled out across all BCUHB acute wards in the near future as part of the new Risk assessment booklet. In addition, the AWCF have also produced guidance for the provision of continence containment products for adults in Wales. A consensus document for the provision of containment products for adults with urinary and or faecal incontinence, undergo a comprehensive assessment and have access to an equitable service.

Healthcare Inspectorate Wales (HIW)

Healthcare Inspectorate Wales (HIW) is the independent inspectorate and regulator of healthcare in Wales. Their purpose is to check that people in Wales receive good quality healthcare.

The Health & Care Standards help us to provide a delivery of high quality services in the NHS in Wales. These standards were developed by Welsh Government in line with the NHS Outcomes and Delivery Framework through a broad range of consultation with stakeholders. Healthcare Inspectorate Wales assess healthcare provision against these standards. Each inspection considers how the service meet the Health and Care Standards under three domains: the quality of the patient experience; the delivery of safe and effective care; and the quality of management and leadership.

BCUHB has in place a process for managing HIW inspections, concerns and enquiries with a tested the assurance methodology, which provides opportunity for rigorous and meaningful action planning and tracking. In addition, it provides assurance through our governance reporting structure up to BCUHB's Quality, Safety and Experience Committee for scrutiny and oversight.



As shown (left), each year BCUHB has improved the progress we make with ensuring that any actions agreed following HIW inspections and recommendations are implemented in line with the Health and Care Standards.

In addition, work has been undertaken to ensure that there is sufficient assurance for each action, prior to closure through monthly reporting to BCUHB's Quality and Safety Group, which is chaired by the Deputy CEO / Executive Director of Nursing and Midwifery.

As a Health Board, we appreciate the work of Healthcare Inspectorate Wales as it enables us as an organisation to strengthen and improve the services we provide. As such, we welcome further opportunities to work closely together to provide assurance and to make a difference for our service users and residents.

Timely Care

Primary & Community Academy (PACCA): Transforming Care

In 2019, the Primary & Community Academy (The Academy) has been established to support the sustainability of primary and community services, focussing initially on General Practice. The Academy hosts a number of different schemes to support the training and education of Practitioners in Primary and Community services. Our schemes include developing the role of the Physician Associate in Primary Care. The Physician Associates Internship scheme has been designed by drawing together experience from across the UK and by involving the newly qualifying Physician Associates, still in its first year, feedback to date is very positive from both the participating Physician Associates and Practices. The Academy leads the work with the Welsh Ambulance Service Trust in the testing a Rotational Model of working with Advanced Paramedic Practitioners in Primary Care and Clusters, and again feedback from the Practitioners, Practices and Clusters is very positive. You can find out more about this project on Twitter by searching for the hashtag #APPinPrimaryCare.

Further information can be found online

Twitter: @nwacademy1

Facebook: nwacademy01

www.paccacademy.co.uk

The Academy supports Primary Care Recruitment in a number of ways including, dedicated social media pages for Primary Care vacancies, which is updated weekly. Which includes roles on NHS Jobs, and vacancies sent directly to the Academy.

Twitter: @nwprimcare

Facebook: primarycarenorthwales

Attending the Royal College of General Practitioners conference each year, in partnership with the National Train.Work.Live campaign, at the last conference in 2019 we met a number of GPs looking for roles in North Wales. Pre Covid-19, one GP was set to start working in the East area, and two other GPs are looking to join us in 2021 in salaried positions after they retire from partnership.



Unscheduled Care: a whole system approach

During 2019/20, we initiated a whole system approach for Unscheduled Care, ensuring delivery of the winter plan, with a focus on pre-hospital attendance and admission avoidance. In collaboration with the Wesh Ambulance Service NHS Trust, we developed the SiCat system, linked to the ambulance control centre, to provide clinical advice and alternatives to hospital attendance or admission. The Health Board developed community resource teams with the aim of keeping patients in their own homes and to help patients return to their home as early as possible after an admission. Combined with these initiatives, our teams worked on improvement of in-hospital flow, including the development of assessment and ambulatory care services on acute sites and improved discharge planning.

During the early part of declaration of the Covid-19 pandemic in March 2020 the number of attendances at Emergency Departments fell significantly, recovering to near normal levels by the end of Quarter 1 of 2020/21.

Unscheduled Care

Flow in our services: The Same Day Emergency Care in Ysbyty Glan Clwyd commenced on 3rd July 2019. This has been developed as an ambulatory emergency unit that will see, treat and discharge patients on the same day, many of whom would previously have stayed in hospital for several days and reduce non-admitted breaches and admissions and help to prevent overcrowding in ED.

Wrexham Maelor Hospital have reconfigured their Emergency Floor area to provide assessment space, including ambulatory emergency care and a frailty unit. The new space was opened on 4th November 2019 with the aim of reducing the number of patients waiting over 12 hour in ED, reducing admissions and reducing the length of stay across the Hospital.

SAFER principles (Senior review; All patients; Flow; Early discharge; Review) continue to be embedded across the sites and the number of patients with delayed transfers of care continues to improve with a focus on stranded patient reviews developing a specific focus on patients over 21 days in both Acute and Community Hospitals. This involves Local Authority, Area Colleagues and Hospital staff for more collaborative working in providing better care for patients and in the right setting. A standard operating procedure for SAFER has been developed to clearly define how this can be used to support patient flow, patient experience and keep our patients safe.

Discharge from our hospital services: Placements were trialled in wards in community and acute sites across BCUHB with the prompt for patients to ask questions about the reason for their admission, what is happening to them today and planning for their discharge and this concept has been adopted by the Delivery Unit across Wales. It is key that we engage our patients and carers in all aspects of their care (What Matters) and understand their needs from the time of their admission, to support early safe discharge.

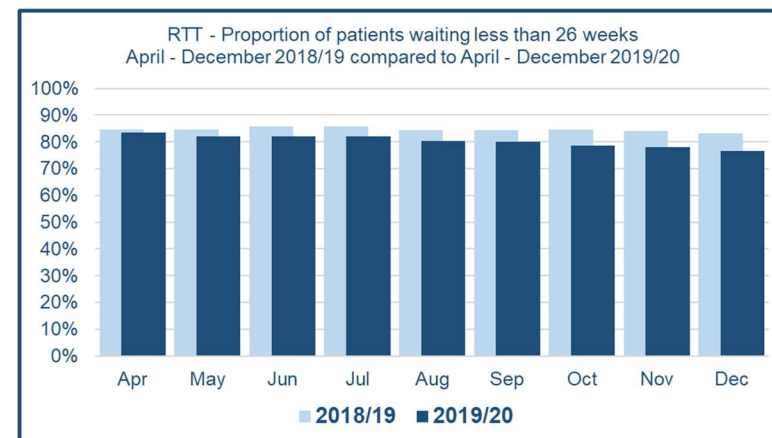
We are working closely with the Welsh Ambulance Service to develop our longer-term service model for call handling and triage. The SICAT (Single Integrated Clinical Assessment & Triage) service continues to develop. Our ambition is to work with all our partners and our public as part of our emerging services strategy to strengthen these so patients can receive the best care as close to home as possible. Planning work is underway to build this into the 111 service. We have secured recent funding to pilot an expansion of this service to support patients in nursing and residential homes in the East area to prevent hospital admissions.

Planned Care: Referral to Treatment (RTT)

Referral to Treatment measures the total time a patient waits after they have been referred by their GP until they start their active hospital treatment. This includes time spent waiting for outpatient appointments, diagnostic tests, scans, therapy services and inpatient or day-case admissions. The two targets for Wales are that 95% of patients are treated within 26 weeks and that no patients wait longer than 36 weeks.

While referrals for planned care have reduced since the start of the Covid-19 pandemic, the length of waits has increased due to the postponement of non-essential surgery, clinics and diagnostic services during the initial pandemic response. Alternative ways of reviewing patients have been introduced; however, the speed of introduction, very close to the year end, means that not all of our reporting systems have been adapted to capture these new ways of working in time to be reflected in the performance data in this report.

At the end of December 2019 76.74 % of patients had been waiting for fewer than 26 weeks. By the end of March 2020, 76.41% waited fewer than 26 weeks for treatment.



Planned Care

Doctors in training have ranked Ysbyty Gwynedd's Emergency Department as one of the best places to train in the UK. Results from the recent National Training Survey by the General Medical Council shows over 85% of doctors in training are pleased with the quality of clinical supervision, experience, and the teaching they receive at the Emergency Department.

A new system designed to speed up diagnosis for people with suspected cancer has been introduced in North Wales. We have issued guidance to GPs to help them determine whether patients with symptoms of colorectal cancer can be referred directly for an investigation, bypassing an outpatient appointment and saving time. More than 500 people are diagnosed every year in North Wales with a colorectal cancer, such as bowel, colon and rectal cancer. <https://bcuhb.nhs.wales/news/health-board-news/new-system-to-speed-up-cancer-diagnoses-introduced-in-north-wales/>

People living with dementia and their carers have joined health experts in praising the 'first class' memory support provided across North West Wales. The Gwynedd and Môn Memory Service has been given a top quality mark by the Royal College of Psychiatrists for the third successive time for providing the highest standards of care for people living with dementia and other memory problems. The 'Memory Services National Accreditation Certificate' recognises exemplary practice across key areas identified by mental health professionals, service users, carers and GPs. <https://bcuhb.nhs.wales/news/health-board-news/new-award-for-first-class-gwynedd-and-anglesey-memory-service/>

Staff in the Same Day Emergency Care (SDEC) unit (Central Area), which opened on July 3, have helped hundreds of people who had visited their GP or the hospital's Emergency Department avoid admission to hospital. Teamwork between nurses, doctors and radiography staff helped 70 per cent of visitors return home on the same day following treatment, allowing them to recover at home while also increasing capacity in the Emergency Department. The unit aims to assess, diagnose and provide treatment to eligible patients before safely discharging them home to recover or to wait for further test or treatment. Previously, those same patients would have had to be admitted to hospital while waiting for further care. <https://bcuhb.nhs.wales/news/health-board-news/more-than-500-people-seen-over-first-month-at-new-emergency-care-unit-designed-to-help-people-avoid-hospital-admissions/>



Cancer Diagnosis and Treatment

For December 2019, 98.0% of patients who were not initially referred as an urgent suspected cancer, but who were subsequently diagnosed with cancer, started their active treatment within 31 days of diagnosis. This is in line with the national target for delivery of treatment for this patient group.

This group of patients remains the highest volume of patients diagnosed and treated for cancer in North Wales. By December 2019 we had treated 1,747 patients, who were referred this way, for cancer which was 365 fewer than in 2018/19. The Health Board achieved or exceeded the 98% target rate for 7 of the 9 months to December 2019.

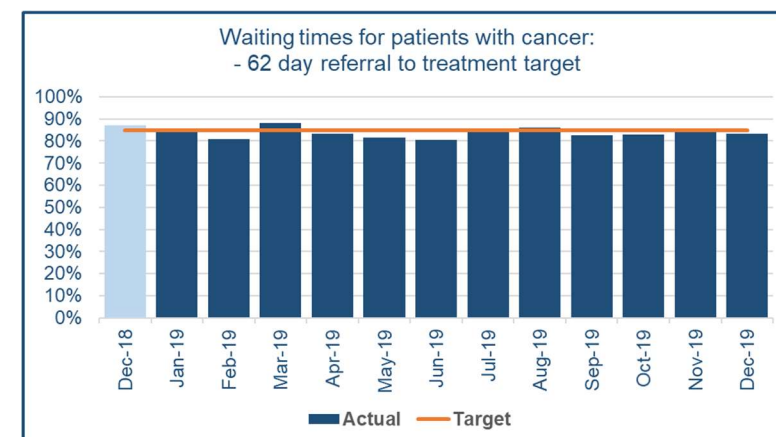
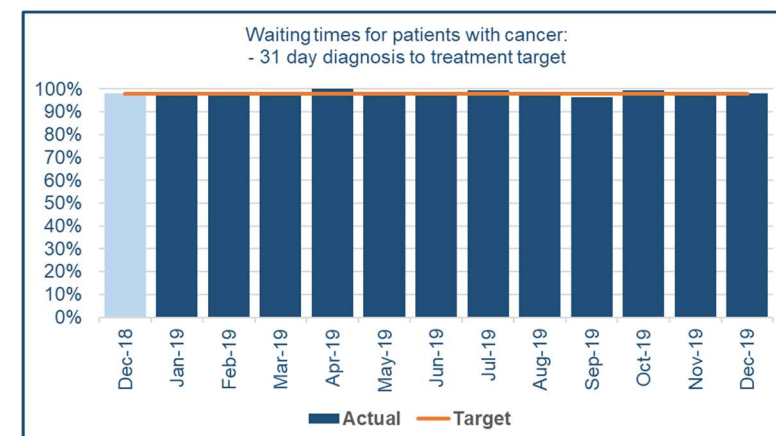
The 31 day target was also delivered throughout Quarter 4, ending the year at 98.3% for March 2020.

In the 9 months from April to December 2019, the number of patients referred and subsequently treated on the urgent suspected cancer pathway was higher than in 2018/19, at 1,366 compared to 1,290. The increase in demand is one of the reasons we did not achieve the 85% target rate for starting treatment within 62 days of referral. However, at 83.3%, we are the third best performing Health Board in Wales against this measure.

Weekly and bi-weekly escalation meetings continue to be held on each Hospital site with each specialty team to minimise delays. Managers receive a weekly cancer briefing outlining current and forecast performance to maximise opportunities to actively improve performance.

The impact of Covid-19 upon the availability of diagnostics, as described in an earlier section, has contributed to a deterioration in performance against the 62 day pathway target towards the end of Quarter 4, achieving 79.40% in March 2020.

Since the start of the pandemic, we have also noted a reduction in the number of urgent referrals of patients with suspected cancer. There is concern that patients have been delaying seeking attention for potentially serious conditions, and additional communications and publicity have been issued to encourage patients with symptoms to continue to present to their GP.



Treating People as Individuals

Improving services for vulnerable groups

In 2019, a Wrexham based health visitor was named the winner of the Advancing Equality Award at a glittering gala evening at Venue Cymru to mark the BCUHB Achievement Award 2019. The awards, sponsored by Centerprise International, celebrate the outstanding achievements of NHS staff from across North Wales.

Jackie has been recognised for what colleagues describe as an 'inspirational' commitment to providing health and wellbeing support to asylum seekers and refugees from Syria and other war torn countries. Since 2001 Jackie has supported the resettlement of hundreds of asylum seekers, trafficked women and refugees in the Wrexham area. Wrexham is one of four dispersal areas in Wales and the only area in North Wales which receives asylum seekers from the Initial Assessment Unit based in Cardiff. On arrival in Wrexham, Jackie coordinates their health and wellbeing assessments and provides ongoing support to ensure that asylum seekers can access a range of health services. She also runs drop in sessions which bring a range of support services together under one roof.



Support for individuals with Learning Disabilities

There are specialist learning Disability Acute Liaison Nurses (ALNs) covering the 3 District General Hospital's, within office hours, in BCUHB. They provide support to individuals with learning disabilities, their families and carers when they are accessing mainstream hospital services.

This service was introduced as a result of a plethora of evidence which highlighted that having a Learning Disability means that hospital services are not always aware of how to meet the care needs. This can result in delays in treatment, and worse case scenario, lead to premature, avoidable deaths (Confidential Inquiry into premature deaths of people with Learning Disabilities 2013, Death By Indifference MENCAP 2010)

The ALNs also provide education and training to hospital staff at all levels, and have also trained around 120 Learning Disability Champions with plans to continue to recruit more.

BCUHB also has a Patient Contact Notification system. This e-mails the ALNs when a person who is known to have a Learning Disability is admitted. This ensures that the person is identified as having a learning disability early in their admission to hospital. There are also Learning Disability Primary Liaison Nurses and skilled Health Care Support workers in the community. Their role is to improve access for individuals with a Learning Disability to mainstream primary care services and to improve the uptake of the annual health checks by working with service users, carers and families as well as services.

Listening and Learning from Feedback

The Patient and Carer Experience team has collected 22,247 real-time survey responses from patients, carers and relatives across North Wales, about their experiences of using our services within 2019. In addition to providing feedback in relation to the all Wales NHS Patient Related Experience Measures, the survey asks service users to share their opinions about:

- ➡ 'What was good about your experience?'
- ➡ 'Was there anything that could be improved' and
- ➡ 'Promoting Equality in everything we do'

Feedback provided from patients and carers provide us with the vital information on how we are doing which enable us to share what is working and make improvements where necessary. Overall, the feedback told us that our services contribute to a positive experience, with an overall satisfaction rating of 8.97/10. In addition to real time feedback, the Patient and Carer Experience Team received 2,201 comment cards, emails, letters, responses and feedback received by our Patient Advice Liaison and Support (PALS) officers.

Your feedback is extremely important to us and is used to focus service improvement efforts. We continue to aim to develop patient and carer feedback in order to listen to the voice of all the people who use our services, from the very young to the older person. Feedback from patients and carers will continue to be the most valuable source of information which helps inform the development of services.'



2019 saw the launch of PALS services in Ysbyty Gwynedd and Ysbyty Maelor Wrexham following a successful pilot of the PALS service in Ysbyty Glan Clwyd. All three localities have three PALS officers based in accessible hubs located in each main entrance of the hospitals and two Patient Experience Co-ordinators.

Following the launch of the PALS hubs we have seen a significant increase of patient liaison due to the prime locations and have formed / strengthened good working relationship with our colleagues.

Putting Things Right (PTR)

BCUHB recognises that patient safety and experience, public engagement and involvement is a vital aspect of the Health Board's governance arrangements. The NHS (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011 (the Regulations) came into force on 1st April 2011, to enable Responsible Bodies to effectively handle concerns.

The aim of the regulation is to streamline the handling of concerns and under the '*Putting Things Right*' (PTR) arrangements, all NHS Wales organisations should aim to "investigate once, investigate well", ensuring that concerns are dealt with in the right way, the first time around. The term "Concern" relates to any complaint, claim or reported patient/service user safety incident about NHS treatment or service.

This means, that whenever concerns are raised about treatment and care, whether through a complaint, claim or patient safety incident, those involved can expect to receive a prompt acknowledgement and response, about how the matter will be taken forward, be dealt with openly and honestly and have an appropriate investigation undertaken into the concerns raised.

Patient safety is paramount and is focused on the prevention of harm to patients by improving the way in which care is delivered so that errors are prevented, learning occurs from the errors that do occur alongside fostering a culture of patient safety, that involves health care professionals, partner organisations, patients, carers, families and the general public.

BCUHB's annual PTR Report has been prepared in line with the PTR Regulations to provide an overview of the 2019/2020 position in terms of how the Health Board has managed concerns during this time. It provides an overview of themes and trends emerging from Concerns including some of the lessons learned.

In October 2019, we were very pleased to welcome our new Assistant Director of Patient Safety and Experience who has brought a wealth of experience to support our commitment to patient safety and experience.

We would encourage you to view the report as it provides valuable information from learning to learning and improvement work, our priorities over the next year and key strategies and frameworks. Details of how to access the report can be found in the 'Useful Information' section of this report on page 53.

Supporting Welsh Speakers

BCUHB's Language Choice Scheme has been greatly expanded during the past year and is now in operation on wards within all three BCUHB acute hospitals and at numerous community hospitals. Orange magnets – adorned with the instantly recognizable orange 'Working Welsh' logo – are placed on bedside white boards (and also on staffing boards), in order to identify Welsh speakers and facilitate the process of pairing patients and staff who can speak the language.

Welsh language training has developed to be an integral part of developing Welsh language skills of BCUHB staff. Our comprehensive programme has attracted funding of over £200,000 a year from Gymraeg Gwaith/Work Welsh, a scheme funded by Welsh Government, which also includes funding to employ a Welsh Language Training Support officer for BCUBH since April 2018. Since being part of the Cymraeg Gwaith / Work Welsh scheme in April 2018, 9.4% of the workforce have registered, completed and received Welsh language training.

As well as the work welsh initiative our BCUHB Welsh Language Tutor offers courses tailored to the needs of BCUHB staff members - on a language level, and to the type of work they undertake from day to day, allowing staff members to gain the relevant Welsh language skills in order to offer a bilingual service and therefore meet the needs of their patients



Our staff

Challenges recruiting and retaining our staff

BCUHB employs 18178 staff (March 2020), allowing for part time workers, this equates to 15594 full time equivalent (FTE) staff. Recruiting and retaining key staff to meet increasing demand remains a challenge which is reflected in our vacancy rates.

As at March 2020, BCUHB had a 8.9% overall vacancy rate which has gradually improved from a high of 9.5% in January 2020.

Nursing and Midwifery

- There remains a shortage of skilled nurses, BCUHB has a Nursing & Midwifery vacancy rate of 12.3% (March 2020). However, this has been helped by the recruitment of 50 FTE Nursing and Midwifery staff in the final quarter of 2019.
- Across the 2019/20 year nursing staff leavers have been matched with newly recruited staff resulting in just 2 full time equivalent (FTE) fewer nurses in post at the end of the year, however the Nursing and Midwifery workforce budget has increased by 85 FTEs. This demonstrates the struggle for recruitment to keep pace with increased demand.

Medical and Dental

- BCUHB has an overall Medical and Dental staff vacancy rate of 9.6% (March 2020), however some specialisms face particular challenges. Vacancy rates for our most senior Medical and Dental staff are a little better at 7.8% (Consultants, March 2020).
- Medical and Dental recruitment / retention is matching an increase in demand with the Medical and Dental workforce growing by 37.5 FTEs over 2019/20 whilst budgets increased by 37.4 FTEs

Recruitment to Nursing, Midwifery, and Medical & Dental staff groups remains a challenge for BCUHB, as it is for all other Health Boards, owing to a general shortage of skilled staff. This issue is particularly acute within the following hard to fill specialisms; GPs, Mental Health and Learning Difficulties, General Surgery, Rheumatology, Care of the Elderly, Radiology (particular the specialisms relating to Breast), Gastroenterology and Obstetrics and Gynaecology.

So what are we doing about it?

In light of the challenges above, retention of skilled staff remains a key priority. Numerous improvement actions have been enacted as a result of feedback from the last NHS Wales Staff Survey. Over the last 12 months, all Divisions have developed their local improvement plans. In addition, an organisational wide plan has been implemented. Actions taken include the launch of a revised exit interview process, a review of internal communications which resulted in the launch of a new staff app and proactively managing early signs of stress at work by upskilling managers .

To increase Executive team visibility, all Executive Directors are now involved in presenting Seren Betsi awards to staff. In order to ensure staff feedback is a continuous process the organisation invested in a tool, which has been branded as 'ByddwchynFalch/BeProud. The tool offers a simple way to understand the science behind staff engagement in terms of cause and effect; provides clear practical recommendations to improve staff engagement; provides regular trend analysis and organisational and team level diagnosis of culture. Organisational surveys are conducted every 3 months, 29 teams have already undergone focussed team level journey of improvement.

BCUHB remains committed to investing in developing our staff. All Leadership & Management Development programmes have been reviewed to ensure compassionate leadership is threaded throughout each programme. Processes have been reviewed to ensure compassionate and values based conversations take place at appraisal. Appraisals have increased by 6.1% since April 2019 to 73% in March 2020.



Promoting Train/Work/Live

In order to address the challenges for skilled staff recruitment, BCUHB will continue to market itself through Welsh and UK wide recruitment events, promoting the Train/Work/Live North Wales brand. At a local level, BCUHB is planning for Recruitment Events days where candidates can be interviewed and receive an offer the same day. We have further streamlined the N&M and M&D Recruitment process to ensure recruited staff start safely and as soon as possible.

- ➡ Specific focus is being placed on wards with high vacancy numbers where social media campaigns are being run through Facebook, Twitter and Instagram.
- ➡ Whilst we hope to address the majority of our recruitment needs locally, we accept that there is still a need to source candidates from further afield so in Q1 2020/21 BCU will continue to build on our successful International Recruitment Programme with a commitment to source a further 50 Registered Nurses through this route.
- ➡ For Medical and Dental staff a dedicated weekly Medical Recruitment Panel will plan, monitor and speed up recruitment activity. BCU are also working with external recruitment specialists to help source new recruits into hard to fill specialisms.

Newly Qualified Nurses

From September, those student nurses on a Welsh Bursary will be expected to remain in Wales for 2 years post qualifying. They do not have to stay in an NHS role but this will improve our retention of students in particular in Paediatrics where we often lose staff to tertiary settings in England.

Improving Quality Together

Through the BCU QI hub, training has been delivered for the last 18 months. So far 123 staff have signed up for Silver Improving Quality Together (IQT), with 73% of them completing all study days. The Silver IQT training now forms part of ward managers training, with two cohorts of managers attending training to date. The improvement training has been standardised through the development of standard operating procedure. The BCUQI hub has opted to go live earlier than launch date (April 2020) of the new improvement in practice training which is replacing Silver IQT with the first cohorts (17 staff) now half way through their face to face training.

As part of the improvement training the BCUQI hub has developed a QI database for improvement projects to be loaded to and shared across BCUHB so others can adopt and learn, the database is also open for others to load their improvement work to as well. The database can be accessed via <https://www.bcuqi.cymru/database-1>.

Wales for Africa Programmes: International Health Partnerships

The BCUHB continues to be a signatory to the Charter for International Health Partnerships (IHP), which recognises the legitimacy of international health engagement, with the aim of bringing knowledge, and skills back to Wales to improve the health of Welsh Citizens along with sharing best practice and working with a range of nations. By engaging in international initiatives, we can learn from others and work to reduce inequalities whilst sharing our own experiences. BCUHB recognises the importance of being engaged in the international health agenda and this is reflected by the International Health Group (IHG) being Chaired by the Executive Director, Nursing & Midwifery / Deputy Chief Executive.

As well as benefitting people in poorer countries who have fewer resources and less developed healthcare systems, involvement in humanitarian overseas work also benefits our staff in a number of ways. These include improving their teaching skills, building leadership confidence, generating ideas for health service delivery within limited resources, learning about the delivery of healthcare to people from different cultures and also gaining direct experience of global diseases that may pose a risk to the population of Wales. This enhanced skill and knowledge can then be used by our colleagues when they return from overseas, for the benefit of patients in North Wales. Teams of local nurses, doctors, midwives, public health specialists, pharmacists, IT experts, researchers and others are involved in our international health links work, most notably as part of the Wales for Africa Programme.

In North Wales, there are active links to healthcare in the Quthing district of Lesotho, hospital care in Hossana Hospital, Ethiopia and primary care and eye care in Hawassa, Ethiopia. More recently, a healthcare in Busia County, Busia County Referral Hospital in Kenya. Over the past year, BCUHB has supported the work of the links by hosting the International Health Group (IHG), developing national guidance, awareness-raising, and by enabling staff to participate in reciprocal visits involving Wales for Africa partners.

Members of the IHG have made a number of overseas visits – including those to Lesotho, Tanzania, Libya, Ghana & Uganda as part of the International Learning Opportunities (ILO) scheme; to Ethiopia to provide hospital informatics support as well as ophthalmology, cardiology and basic emergency department training; to Lesotho to provide mental health and HIV anti-stigma training; and to Kenya on a fact-finding visit as part of plans to establish a new link. Following a successful visit to Busia County Referral Hospital in Kenya, the link is now preparing to undertake a comprehensive health needs assessment (HNA) within Busia County and a second visit is planned for May 2020. The Kenya Link HNA has been funded by the Welsh Government's Wales for Africa Grant Scheme, and is administered by Wales Council for Voluntary Action. BCUHB holds a list of 150 individuals who are either actively undertaking international work, involved in supporting this work, or who have expressed an interest in becoming involved in volunteering. Currently work is in place for planned review of volunteering to strengthen the ability of individuals to participate in opportunities such as IHP. The board encourages all links to work in partnership with local Universities (Bangor and Glyndwr) Universities.

Volunteers

It is recognised that volunteers play an important role in delivering NHS services by adding significant value to the activities of paid healthcare staff. The Robins Scheme is one example of this with their befriending and wayfinding roles. We currently have over 100 Robins across the health board available to support in a variety of roles across our acute and community hospitals.

BCUHB responded to the need to recruit a further pool of generic public volunteers to meet the anticipated demands of the Covid-19 pandemic and as a result, a further 700+ volunteers were cleared and ready to support during the crisis. 221 public volunteers have supported us during the pandemic and continue to do so in a variety of support roles – from delivering medication, to supporting Personal Protective Equipment (PPE) deliveries, to assisting patients, to manning reception desks.

We have and continue to be supported by third sector organisations and charities, including the Royal Voluntary Service, the British Red Cross and our own Charity partner Awyr Las, who have all greatly contributed to provide volunteers and support when needed.



Chaplains and Spiritual Care

The Chaplaincy Service delivers pastoral care to staff as well as our patients and their families. In addition, daily pastoral care of our staff, the Chaplaincy, over the last year has introduced new initiatives that encompass a wider spectrum of our world of spirituality. The introduction of guided mindfulness sessions and spiritual concerts have enhanced our service. One such initiative is the monthly gong bath for staff members at Ysbyty Gwynedd - which has proved very successful. These teatime sessions have been over-subscribed and planning is underway for the introduction of yoga sessions soon. Our new Chaplaincy Centre at Ysbyty Glan Clwyd is now operational and provides a modern, multi-faith spiritual centre. The Chaplaincy Centres have also been opened out for use by community self-help groups such as Alcoholics Anonymous and community choirs.



Celebrating success: Staff Awards

Our workforce is our most important asset in achieving our purpose of 'Improving Health and Delivery Excellent Care'. We recognise their hard work and commitment through our staff recognition programme, which includes the monthly "Seren Betsi Star" award. Externally achieved successes, including awards from professional bodies or community organisations, are recognised through the Health Board's communications team. An annual staff awards night also celebrates outstanding achievement and effort of Health Board staff and volunteers. In 2019, more than 300 people attended a gala dinner to recognise excellence in Healthcare in North Wales.



22/11/19

Seren Betsi surprise for Neonatal Nurse helping families take active role in their infant's care

A dedicated Glan Clwyd nurse whose innovative approach to involving families in the care of their poorly or newborn babies has won a healthcare award.



21/11/19

North Wales Cancer Centre takes part in unique study

A group of people in North Wales were provided with a unique opportunity to take part in a study to discover whether it can improve their quality of life following cancer treatment.



12/11/19

Wrexham critical care nurses scoop top award for work to support bereaved families

A team of nurses who help bereaved relatives come to terms with the loss of a loved one have won a top health award.

Be Proud Pioneer Programme Pass it on / Celebration event

As part of the Be Proud staff engagement programme for teams, a celebration event was held at the end of the cohort 1 to recognise, share and celebrate the excellent work of the teams on their 26-week journey. This involved sharing what tools and approaches they used to influence staff engagement within their teams, some images seen below.



Equality: Fairness, Rights and Responsibilities

At BCUHB our vision is to create a healthier North Wales, that maximises opportunities for everyone to realise their full potential, and helps towards reducing health inequalities.

To inform the BCUHB's strategic direction it is essential that we have a clear overview and understanding of the major issues facing people with different protected characteristics. This year we have undertaken a review of our equality objectives. We have drawn on evidence from a range of sources including the Equality and Human Rights Commission research 'Is Wales Fairer?', gathered and analysed relevant information and maintained engagement with communities, individuals and experts to help to further inform our priorities and objective-setting. The Strategic Equality Plan can be accessed via the following links;

English:<https://bcuhb.nhs.wales/use-of-site/publication-scheme/class-five-our-policies-and-procedures/equality-and-human-rights/strategic-equality-plans/>

Welsh:<https://bipbc.gig.cymru/use-of-site/cynllun-cyhoeddi/class-five-our-policies-and-procedures/cydraddoldeb-a-hawliau-dynol/cynlluniau-strategol-cydraddoldeb/>

The promotion of equality and human rights in everything we do is a key underpinning principle within all health board plans and the responsibility of the whole organisation. Progress and more information about the work we have done to advance equality this year is published in our Annual Equality Report 2019-2020;

English:<https://bcuhb.nhs.wales/use-of-site/publication-scheme/class-five-our-policies-and-procedures/equality-and-human-rights/equality-and-human-rights/annual-report-2019-20/>

Welsh:<https://bipbc.gig.cymru/use-of-site/cynllun-cyhoeddi/class-five-our-policies-and-procedures/cydraddoldeb-a-hawliau-dynol/cydraddoldeb-a-hawliau-dynol/annual-equality-report-2019-20/>

Special Measures

BCUHB has been in special measures since June 2015. Work has been ongoing to make improvements in line with the expectations of the Special Measures Improvement Framework (SMIF) issued by Welsh Government. During the first half of this reporting period, the Framework covered four themes: leadership & governance, strategic & service planning, mental health and primary care. In November 2019, the Minister for Health & Social Services issued a revised SMIF covering the four themes of leadership and improvement capability, strategic vision and change, operational performance and finance and use of resources. This latest version of the SMIF is split into Part A: expectations to be met as a minimum in order to be de-escalated from special measures, and Part B: characteristics BCUHB will need to demonstrate it is sustaining and building upon in order to step down to routine arrangements status.

The organisation undertook a self-review in December 2019 against Part A expectations. The self-review identified progress made over the past year. This included quality improvements such as the increased use of integrated dashboards for a range of data/intelligence; the requirement under the Ward Accreditation Programme for wards to undertake quality improvement projects driven by concerns and patient feedback and a range of “Going for Gold” quality improvement roadshows.

Initiatives to improve patient safety during special measures include the launch of an upgraded Harms Dashboard; establishment of the In-Patient Falls Collaborative to support areas with higher levels of harm, and delivery of winter plan initiatives such as increasing multidisciplinary team capacity and projects to support patients’ recovery in their own homes. Infection control work has led to a reduction in the number of cases of MRSA.

The work undertaken has led to a variety of improvements to the patient journey, such as the launch of the new Patient Advice and Liaison Service with hubs established at each District General Hospital; reconfiguration of beds and processes on the Wrexham site to create ambulatory and short stay medical capacity located close to the Emergency Department; and the SiCAT model of assessment and triage which has demonstrated a significant contribution to signposting patients to alternative care pathways.

Despite the progress made against the expectations of the revised Special Measures Improvement Framework, that a number of milestones, most notably in the key areas of finance, planning and performance (planned and unscheduled care), have not been fully achieved and it is recognised that there is considerable further work to be done to address the ongoing challenges. The Board remains fully committed and determined to achieve the required improvement in order to secure de-escalation from special measures.

Forward Look 2020/2021

Our vision and purpose is to create a healthier North Wales, that maximises opportunities for everyone to realise their full potential and reduce health inequalities in our population. Therefore, putting quality first in everything that we do to deliver outstanding healthcare to our local population is essential, and we will continue to do so. We have seen so many members of staff embrace quality improvement, and continuously raise standards and improve outcomes for our patients. Our Three Year Outlook and 2020/21 Annual Plan is the end product of a fully integrated process, which has taken account of service, quality and safety, financial and workforce considerations to ensure we have a coherent, consistent, and ambitious set of actions and deliverables.

This work will be guided by the principles within the Well-being of Future Generations Act, and together with our partners across the public and voluntary sectors.

Our **ambition** for 2020/23:

Exit Special Measures

Maximising our partnership working to deliver on the health inequalities and health improvement agenda

Implementing our model of Primary Care to ensure people have easy and timely access to services and deliver health and care support as close to people's homes as possible

Implementation of digitally enabled clinical pathways supporting timely access to safe and effective planned and unscheduled care in accordance with clinical need with the best possible outcome

Engage more widely and refine our digitally enabled clinical strategy proposals. Resources will be required for delivery of this ambitious strategy, which will include investment in digital systems and the requisite supporting staff, new workforce skills and capabilities, organisational development support, and a steering group to oversee the development of the strategy.

Our priority for action in **2020/21** is to make significant progress towards achievement of the following objectives.

Quality Improvement

Strategic Vision and Change

Developing a digitally enabled clinical strategy with our staff and partners

Improved Operational Performance and Governance

Focussing our improvement in the following key metrics:

- Planned care / Referral to treatment
- Unscheduled care

Strengthened Leadership and Improvement Capability

Supporting our key service transformation programmes:

- Health inequalities and health improvement
- Care closer to home

Financially Sustainable

- Using our resources effectively
- Moving towards a sustainable financial position

Covid-19

When I joined the Health Board as Interim Chief Executive in February 2020, it was difficult to envisage quite what was to unfold over the next few months. The global coronavirus pandemic has caused major change and disruption to the way we all live our lives, and the impact on the NHS has been both wide-ranging and severe.

I have been extremely impressed with the work done by colleagues across the organisation in responding to this unprecedented public health emergency. The energy and commitment in preparing for the expected number of cases and working tirelessly over the last few months is evident and very much appreciated by the Board.



The situation facing the Health Board changed drastically in late February and through March as the country faced up the threat of the coronavirus pandemic. We began preparing so that we would be ready to face a surge in emergency admissions and in demand for intensive care facilities. At the same time, we had to plan how we would continue to deliver emergency and essential care to patients with other serious health conditions in a safe manner. The response that followed demonstrated the enthusiasm, dedication and innovation of staff across the Health Board as they implemented radical changes to how our services operate.

Hospitals were reconfigured to create additional ward and intensive care capacity and to provide segregated facilities for patients with and without Covid-19. To support social distancing there was a major shift to telephone and virtual consultations taking place online, and a significant increase in remote and home working. We started work with key partner organisations to develop three 'rainbow' field hospitals that could provide additional emergency bed capacity if this was required.

As I write this report, we now know that North Wales experienced a slower increase in case numbers than other parts of the UK and, so far, our preparations meant we have been able to manage the volume of patients that have called upon our services. Tragically, we lost two members of our frontline staff to Covid-19, and I must pay tribute to Andy Treble, a member of the operating theatre team at Wrexham Maelor Hospital, and Rizal "Zaldy" Manalo, a Staff Nurse at Glan Clwyd Hospital.

I will close my statement by offering my thanks to staff across the Health Board for their efforts, throughout the year and, especially, over recent months. These have been exceptional times for the NHS, which demanded and received an exceptional response from colleagues for which I am extremely grateful.

Simon Dean, Interim Chief Executive

Engagement – sharing our news with our communities

News 28th July 2019 Ysbyty Gwynedd's UK's emergency department voted ninth best in UK for doctor training

By Dale Spridgeon



A BANGOR hospital emergency department is the ninth best in the UK for overall satisfaction by trainee doctors.

The National Training Survey by the General Medical Council showed that more than 85% are pleased with the quality of clinical supervision, experience, and teaching at Ysbyty Gwynedd's emergency department.



We use a range of channels to share news, updates and information with our communities, including traditional and digital media.

This means we are able to engage with our communities in a variety of ways that allows them to access up-to-date information at any time.



Useful Information

Publication of the AQS is aligned to the Annual Report and Accounts, which are part of the Health Board's public annual reporting which set out our service delivery, environmental and financial performance for the year and describe our management and governance arrangements.

Our Quality Improvement Strategy 2017-2020 sets out how we will provide safe, high quality care for everyone we treat. It describes our current position - what we are doing well, and where we need to improve - and sets out the range of actions we are taking to make those improvements. Our Quality Strategy for 2020-2023 is underway and will include good engagement.

The Putting Things Right Annual Report 2019-2020 has been prepared in line with the PTR Regulations to provide an overview of the 2019/2020 position in terms of how the Health Board has managed concerns during this time. It provides an overview of themes and trends emerging from Concerns including some of the lessons learned

Copies of all these documents and other public reports can be downloaded from the Health Board's website at <https://bcuhb.nhs.wales/about-us/governance-and-assurance1/>.

Thank you for taking the time to read this report. If you have any queries, would like to request further information in relation to this report, or of you would like to keep up to date with news in relation to our services, please visit our website. Details of how to contact our services can be found at the 'Contact Us' page: <https://bcuhb.nhs.wales/>