



7 August 2015

This is the third update (for the week commencing 3 August 2015) on progress against key areas highlighted by the Minister for Health and Social Care when placing the Health Board in Special Measures.

A series of “100 Day Plans” have been developed against the following headings:

- Reconnecting with the public and staff; communications
- Mental Health improvement
- Obstetrics and Gynaecology
- Corporate Governance
- GP Out of Hours Services

For each heading a detailed delivery plan has been produced and progress to date is highlighted below (the full plans are available at <http://www.wales.nhs.uk/sitesplus/861/opensdoc/269883>)

### **Reconnecting with the Public, Stakeholders and Staff**

- The next stage of our engagement programme has commenced with a Health Board presence at local events and in local shopping centres. Events so far include:
  - A stall at the Celtic Summer Fayre for 5 days and participation in the North Wales Pride event in Bangor
  - Street events in Rhyl and Llandudno actively encouraging public participation. Approximately 200 people contributed their thoughts and views
- Phase 2 of the programme continues with the following events planned:
  - A Health Board stand at the following regional outdoor events:
    - White Rose Shopping Centre, Rhyl: 8 August
    - Anglesey County Show: 11/12 August
    - Llanrwst Rural Show: 15 August
    - St Asaph Rotary Country Fayre: 16 August
    - Denbigh and Flint Show: 20 August
    - Deiniol Shopping Centre, Bangor: 21 August
    - Merioneth County Show, Harlech: 26 August
    - Tour of Britain finish line, Wrexham: 6 September
    - Mold Food Festival: 19/ 20 September
  - ‘Street team’ events in busy shopping areas:
    - Bangor (TBC) (3<sup>rd</sup> August )
    - Wrexham (Eagles Meadow shopping centre) (8<sup>th</sup> August)

Members of the public will be proactively approached and invited to share their views about and experiences of the health service in north Wales.

- The first edition of our “What We Are Hearing” update has been issued (and is attached). This describes the Phase 1 process and provides headlines in relation to the feedback received and will be shared with all those who have contributed
- Additional engagement activities planned for Phase 3 of the programme (commencing in September 2015) working with CVCs, the CHC and Local Authorities and our Health & Social Care Facilitators to engage third sector and community groups. A number of requests for discussions have already been received from groups across the area and resources are now being aligned to ensure all requests are met
- We have introduced a “*Why I Am Proud*” weekly blog from members of staff across the organisation which is featured on our internet and intranet sites
- A features reporter from the Wrexham Leader spent a day shadowing our catering and hotel services staff in Wrexham Maelor Hospital and further visits for journalists are being arranged

### **Mental Health**

- Work ongoing against each area of the plan with weekly monitoring through the Mental Health Improvement Group
- The Quality Assurance Framework is being trialled in several team and ward areas with the intention for full service roll-out following testing
- The development of mental health service patient pathways continues and is being supported by research and international learning

### **Obstetrics and Gynaecology**

- Work continues to develop a consultation document and all supporting evidence on potential options for temporary service change
- Views of Consultant Doctors from within the service, claimants in the recent Judicial Review and the CHC have been sought
- Intention is for Board to consider the consultation at an extraordinary Board Meeting to be held on 18 August 2015 with the process due to commence on 24 August 2015
- Risk monitoring and management being undertaken shift by shift to maintain service delivery

### **Corporate Governance**

- The first phase of redeveloping the Board Assurance Framework is underway and has included the approval of a revised Risk Management Policy and Strategy. A desk top review has been used to identify sources of assurance against the most significant risks with the aim of populating a new assurance ‘heat map’
- A revised Scheme of Reservation & Delegation, including new financial delegation arrangements, has been completed
- The methodology for the evaluation of the Committee Structures - including the contribution and impact of the Committee Adviser role - has been agreed and the work will now progress at pace
- Various Directors have been allocated roles as Senior Responsible Officers for all capital schemes

## GP Out of Hours Services

- Work continues to deliver the recommendations made in the recent independent review
- Discussions on the opportunities for further joint service development held across the Health Board area
- Discussion held with primary care services to look at staffing of the service, models of care for minor injuries and the role of the service in unscheduled care



**Byw'n Iach | Living Healthier**  
**Aros yn Iach | Staying Well**

### Feedback from Phase 1 – Living Healthier, Staying Well - Listening and Engagement

Public and staff drop in sessions have been held across the entire BCUHB geography in June and July.

In Phase 1, some 800 people (members of the public and staff) have provided feedback around their experiences of services, the future of health services and improvements to patient care. These include events specifically focussed on mental health and learning disabilities.

Conversations were around both specific local issues and more generalised concerns and thoughts. There were many positive conversations praising staff and the care received and some areas where experiences were not so positive.

Some personal concerns were raised, which have been dealt with through issues being passed to the relevant department or the Concerns Team.

Overall the following have been emerging themes:

**Access to care:** There were concerns raised around long waiting times across both primary (GP appointments) and secondary care (A & E, clinic and procedures). The need to improve appointments and scheduling systems and the desire for a reduction in cancellations was also raised.

**Access to services:** There was feedback regarding the ability to access specific services locally and the centralisation of specialised services. The importance of equity of access to safe and effective services to the population has come through strongly.

**Communication:** This was a common theme with several needs identified around provision of information pre and post care, clear communication around appointments and provision of Welsh Language services and communication between clinical teams.

**BCUHB staff:** Issues relating to staff were discussed and the need for continuous improvement in hands on nursing care was identified along with greater respect for vulnerable groups in particular the elderly. In addition, comments were often received about how people felt staff were under great pressure and staff shortages were a concern, especially in primary care.

**Service reorganisation:** Specific issues were discussed depending on the locality of the session but often related to community hospitals, beds in community settings, as well as the provision of services to people living at a distance from the main secondary care hospital sites.

It should be noted that attendees raised issues but also suggested solutions and ideas for the Health Board. For example there were innovative suggestions around greater use of technology to deliver care for patients living far from main hospitals, development of a single health care record across the Health Board and specific outreach services which could improve patient care.

The feedback we have received is being shared with our services, our planning teams and all those who participated.

We have now moved on to the next stage of our engagement programme which involves us going to a number of public events across North Wales such as county shows and food festivals to talk to people. We will collate the feedback we receive at the end of this and will share it widely again.

**[www.wales.nhs.uk/NWalesHaveYourSay](http://www.wales.nhs.uk/NWalesHaveYourSay)**

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