# WRITTEN STATEMENT

# BY

# THE WELSH GOVERNMENT

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| **TITLE** | **Betsi Cadwaladr UHB Improvement Framework** |
| **DATE** | **14 November 2019** |
| **BY** | **Vaughan Gething AM, Minister Health and Social Services** |

I am today publishing a revised special measures improvement framework for Betsi Cadwaladr University Health Board. I want to be clear with the health board, Assembly Members and key stakeholders what the health board will need to demonstrate to be considered for de-escalation.

The health board has already proven it can deliver on a number of improvement expectations. Maternity services and GP out-of-hours have been stepped down as special measures concerns and real progress has been made in primary care and infection control. It is also delivering good services across a range of areas such as public health and prevention with flu immunisation rates in people aged 65 years increasing since 2015/16 to 71% in 2018/19, above the Welsh average of 69%. Therapies are consistently achieving no over 14 week waits.

The immediate expectations the health board now needs to meet to be stepped down from special measures focus on:

* planning;
* unscheduled and planned care performance; and
* financial management.

It is also crucial the health board sustains the progress it is making in adult mental health services and quality measures, acknowledged in previous tripartite discussions.

I will be interested to hear the views from the next tripartite meeting on specific progress in the delivery of quality sustainable mental health services and development of new models of care. Welsh Government is providing additional investment to support further progress across a number of priority areas, including CAMHS, implementation of the mental health measure and neurodevelopmental services. The Regional Partnership Board has also secured £3million from the Transformation Fund to further develop integrated early intervention mental health support for children and young people and over £2million to support a multi-agency approach to crisis care.

This framework is not a list of actions to tick off but a clear set of immediate and medium term expectations for the health board to demonstrate progress to move down the escalation levels. I want to see it become an effective, well-governed organisation. This requires it to have a unified vision for the future that is developed in partnership with staff and partners and involves communities.

The development of the clinical services strategy is vital in ensuring the health board has clear direction for the future. It is being supported with renewed ambition by the Executive Director of Nursing & Midwifery and the new Medical Director. The Medical Director started in post in August and has a particular interest in ensuring digital opportunities are explored. This visible clinical leadership is essential to ensure that staff and partners can inform and shape the vision and new models of care.  I expect to see significant progress on this front in the next 5 months.

The key challenge for the leadership is to ensure they have the relevant capacity and capability in place to deliver demonstrable progress in planned and unscheduled care. We have seen recent progress in terms of cancer 62 day performance and 31 day performance is consistently or above the 98% target. The health board 90 day improvement cycles in unscheduled care are realising improvements in ambulance handovers and delayed transfer of care performance supported by stronger partnership working with WAST, local authorities and the third sector. Despite increased demand compared to the same period last year there has been a slight improvement in 4 hour performance but this falls short of expectations and remains weak from a comparative position. Further sustained action and the new initiatives introduced need to start showing further progress in reducing 4 and 12 hour waiting times.

I met with the Chair and Chief Executive on Monday to raise my continued concerns on the number of 36 week waits in planned care. Recent Welsh Government support includes £1.75 million for musculoskeletal and orthopaedic services and almost £12 million to provide additional capacity for treatments and diagnostic tests for patients on the waiting list. The health board is looking to innovate and improve, including day case hip and knee replacements, direct to listing cataract pathway and virtual reviews. However, it needs to urgently demonstrate more grip and improved planning to deliver better performance. I will be reviewing how we can provide further support and investment in planned care as the lack of progress is unacceptable.

I realise, over the last few weeks, there has been significant interest regarding the interim recovery director appointment. I fully recognise the rates of pay are significant. However, there is an urgent need, backed by the Public Accounts Committee findings, for the health board to address its financial position. Progress has been made since the recovery director started in post in developing a pipeline of opportunities to deliver their savings requirement. This is providing an increased level of assurance that the Board will make progress and report an improved financial position compared to last financial year.

At this week’s meeting with the Chair and Chief Executive I clearly set out how I expect the health board to involve staff and partners in delivering on the expectations and future transformation. The Board will need to make difficult decisions but this has to be done collaboratively and involve stakeholders throughout the process.

The health board will now undertake a self-review of its current position, in relation to the immediate expectations set out in the framework, to be submitted to Welsh Government by 13 December for consideration at the regular tripartite meeting. I have also asked that a special tripartite meeting is scheduled in spring 2020 to discuss BCUHB progress against the expectations set out in the framework.

The improvement framework is available on the link below:

[https://gov.wales/betsi-cadwaladr-university-health-board-improvement-framework](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fgov.wales%2Fbetsi-cadwaladr-university-health-board-improvement-framework&data=02%7C01%7CSioned.Rees%40gov.wales%7Cfc5790bd06784e48ada908d768e9bfb9%7Ca2cc36c592804ae78887d06dab89216b%7C0%7C0%7C637093225455615619&sdata=Gs56kGvBU1hUiYg3ZN%2FWATNgpcmlfRBb5xisrT4XoLU%3D&reserved=0)