



Llywodraeth Cymru
Welsh Government

POLICY AND STRATEGY, DOCUMENT

Betsi Cadwaladr University Health Board special measures priorities: October 2024 to March 2025

Welsh Government expectations for improvements to be made over the next 6 months.

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Introduction

Betsi Cadwaladr University Health Board has been in special measures since February 2023. **Quarterly reports have been published**, reflecting on the progress made, lessons learned, and improvements and challenges that have been identified.

The health board has made some good progress on enabling actions since its escalation to special measures. The health board is focused on building upon these to ensure they are further embedded, resulting in sustainable improvements.

It is essential that the outcomes and impact of the work undertaken so far translate into the delivery of real improvements and benefits to patients and staff, that quality and safety processes start to improve and waiting times for urgent and emergency care and elective care are in line with national metrics.

The Welsh Government expects the following areas to be prioritised over the next six months:

Governance

1. Evaluation and impact of the board induction and board development programme.
2. Completion of board self-assessment and committee effectiveness and assessment of next steps.
3. Implementation of the agreed action plan in response to the recommendations from the review of the office of the Board Secretary to be completed including assessment of implementation.

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Leadership, capability and culture

1. Continue the recruitment to a full executive team and implement a leadership development programme centred on the needs of the new team.
2. Clinical engagement and leadership of improvement to be apparent across services demonstrating joint working and leadership of “clinical executives” and an understanding by all executives of clinical areas of risk.
3. Continue implementation of a programme of work focussed upon strengthening culture, compassionate leadership, values and behaviours and engagement with a practical focus on driving change.
4. Continue to embed the agreed approach to build trust and confidence within the organisation and with stakeholders, including the establishment of an effective mechanism for monitoring and improving staff engagement and implement 6-monthly pulse surveys to monitor impact.

Quality of care

1. Complete and evaluate quality management system pathfinders - vascular and urology - and demonstrate how the integrated quality management system is being used across the organisation.
2. Demonstrate how improved data processes for clinical pathway delivery, clinical outcomes and patient experience are used to identify service failures and drive quality improvements.
3. Demonstrate how the integrated concerns policy is supporting the organisation to recognise, respond, learn and improve from incidents, complaints and mortality reviews.
4. Complete, where feasible, the recommendations from the special measures reviews and work with the NHS Executive to embed the required clinical governance processes.

Performance and outcomes

1. Improve access and experience as measured by improvement in 52-week waits at first outpatient stage month-on-month, zero patients waiting over 156 weeks for treatment, zero 4-hour ambulance handovers and improved 4 and 12-hour emergency department waiting time performance.
2. Demonstrate how the organisation is using the primary care and secondary care interface to reduce avoidable conveyance or admission to hospital, drive reductions in length of stay and develop enhanced community service provision to support older patients.
3. Develop and start to implement proposals aimed at stabilising primary care, with an immediate focus on dentistry services.
4. Continuing the roll-out of the continuous flow model across all three acute sites, aligned to pathways of care delay reductions and the embedding of Same Day Emergency Care (SDEC) and urgent primary care centres.
5. Make progress on the implementation of community health pathways, Getting It Right First Time (GIRFT) recommendations and theatre productivity actions.

Finance, strategy and planning

1. Continue to deliver, embed and demonstrate evidence against the key priorities set out in the special measures finance action plan.
2. Continue with progress made to support the organisation to demonstrate evidence of progress towards robust financial governance and a robust financial control environment.
3. Evidence clear improvement in the planned financial trajectory for 2024 to 2025. This includes delivering on the health board's financial plan, which would also reflect delivery of the target control total set in 2023 to 2024; improved grip and control of the existing financial and operational pressures;

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and further progress around identification and delivery of opportunities.

4. Develop and demonstrate a clear strategy to deliver a (recurrent) breakeven position with a clear roadmap and key milestones for delivery. This includes developing a credible annual plan for 2025 to 2026 with continued improvement to be made towards the development of a balanced, three-year IMTP in future years.
5. Commence a process with agreed timescales for the development of a clinical services plan, informed by stakeholder engagement.

Fragile services

1. Review capacity and demand in each service as the basis for a clinical operational delivery plan for all challenged specialities.
2. Implement clear improvement and transformation plans including but not limited to mental health and Child and Adolescent Mental Health Services (CAMHS), primary care, dentistry, vascular, urology, ophthalmology, oncology, oral health (to include orthodontics and max fax), general surgery, dermatology and plastics.
3. Ensure there are robust mechanisms in place to deliver the requirements of the orthopaedic business case, whilst ensuring existing sites operate against the agreed operating model and that productivity and activity levels are maintained.
4. Ensure there are robust alternatives to emergency departments across the region and take ongoing actions to ensure improvements across the three emergency departments.

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