



Llywodraeth Cymru
Welsh Government

STATEMENT BY THE WELSH GOVERNMENT

TITLE Oral Statement on Betsi Cadwaladr University Health Board
Special Measures Update

DATE 04 June 2019

BY Vaughan Gething, Minister for Health and Social Services

Betsi Cadwaladr University Health Board was placed in special measures in June 2015. The significant concerns at the time centred on leadership and governance, maternity services, mental health, re-connecting with the public and primary care out of hours services.

Progress has been made in each of these areas. Maternity services and primary care out of hours services have both been de-escalated and are no longer special measures concerns.

The health board has met a number of the expectations set in the special measures improvement framework to be achieved by April 2019. There have been improvements in governance and quality processes, board leadership, mental health services, engagement and partnership working and achieving sustainable in hours general practice.

David Jenkins, Independent Adviser to the Board, has provided assurance that Board oversight and scrutiny of delivery and performance has improved

markedly. He also reports the Board is now setting clear expectations and providing constructive challenge. The Chair has brought new impetus with more active and constructive participation in partnership working arrangements.

Quality improvement has been a key driver for the health board under the clinical leadership of the Executive Director of Nursing and Midwifery. Concerns related data is now available at ward level following the roll-out of the 'harms' dashboard and 'Harm summits' to promote shared learning. There has also been significant improvements in infection rates including a reduction of more than 50% in MRSA rates.

I have been pleased to see that recent Healthcare Inspectorate Wales reports on mental health together with feedback from Emrys Elias, Independent Adviser on mental health services, have provided independent assurance that improvements have been made to:

- the quality of care provided;
- the commitment of staff; and,
- access for patients.

Like all health boards, Betsi Cadwaladr University Health Board, is collaborating with partners through local primary care clusters to transform local services. The health board is achieving positive results with fewer GP practice resignations, managed GP practices moving back onto General

Medical Services contracts, and all trainee GP posts in North Wales filled for the first time.

The special measures oversight has, however, identified other concerns across the whole system to deliver the progress needed in finance, planning and waiting time performance. The health board has not met the expectations set out in the framework in these areas.

The health board faces a significant finance challenge but also opportunities to improve on its financial position and this has been supported by local assessments of financial opportunity and benchmarking. In 2013, a Deloitte's benchmarking exercise identified potential efficiency savings ranging between £85 million and £125 million. A further internal benchmarking exercise in 2017 estimated an even higher level of potential saving. It is simply not acceptable that little or no progress has been made in pursuing these opportunities.

To make the required progress I have agreed support that Price Waterhouse Cooper works alongside the health board during the first quarter of 2019/20 to improve its planning and approach to delivering sustainable financial improvement.

This will help to ensure it has a more robust plan for 2019/20 and a basis for sustainable financial planning for the future. I also recognise, the need for additional high calibre turnaround expertise. Officials will now work with the Chair to take forward the PAC recommendations.

The future success of the health board beyond special measures in delivering timely, high-quality services within the resources available, will depend upon its ability to develop a sustainable clinical strategy. A clear strategy is necessary to underpin the Board's wider vision of providing care closer to home with an increased focus on improved population health and wellbeing. This is also the clear view of the Wales Audit Office.

Without an appropriate clinical strategy, the Board will struggle to sustainably address its poor performance in planned and unscheduled care. It is also likely to remain overly reliant on locum and agency staff in trying to maintain services with associated service quality and cost implications.

Whilst the clinical services strategy is developed, I will be providing focused support to deliver progress in waiting times, specifically in orthopaedics, urology, endoscopy and Child and Adolescent Mental Health Services . To secure sustainable improvements in orthopaedic services I asked the NHS Chief Executive to intervene to ensure progress. Support will be provided to invest in community musculoskeletal services, expansion in the number of orthopaedic consultants (6 posts) and to finalise the capital design and procurement process for the capital schemes across the three hospitals.

Additional re-current funding, I announced last July, has supported increased capacity, capability and resilience across the three main hospitals.

I expect the 90-day improvement cycles in unscheduled care to maintain improvements in patient flow and to start demonstrating a sustained positive impact on other unscheduled care targets.

I expect to see significant action and progress on the outstanding concerns so that the people of North Wales are assured the focus is on making the improvements necessary.

850 words

Check against delivery

Embargoed until after Vaughan Gething, Minister for Health and Social Services has delivered the statement.