

Annex – Ministerial Advisory Group NHS Wales Accountability Review’s Overarching Recommendations and the Welsh Government’s Initial Response

Recommendation 1: Governance is a means to an end, not the end in itself. We need an ambitious vision and strategy for Wales underpinned by a clear set of priorities.

- Latest evidence shows that the underpinning vision and strategy set out in our long-term plan for health and social care *A Healthier Wales* remains relevant. We have refreshed the policy actions to deliver on *A Healthier Wales* to ensure these are the right ones in the current climate. However, there is a case for publishing a concise vision statement setting out the NHS we want to see in the future, as an easily accessible tool to shape expectations and behaviours.
- NHS plans should set out what organisations intend to deliver, and they should be held to account against those priorities. The process is set out in the [Oversight and Escalation Framework](#).
- We are reviewing the current NHS planning process so planning and performance frameworks are brought together in future. In the meantime our planning guidance will set out those key metrics we expect the NHS to focus on most intensively.

Recommendation 2: There is an urgent need to simplify the delivery landscape and the associated arrangements for governance

- We will seek ways to help people and organisations to navigate the NHS, including with practical tools and an update to the [NHS Wales Good Governance Guide](#).
- IN light of previous reforms to the health and care system, we will set out clearly and accessibly the roles and responsibilities of bodies and organisations within the NHS, including the NHS Executive.
- The [Oversight and Escalation Framework](#) sets out the accountabilities, roles and contributions in relation to performance and escalation.
- Our immediate focus in the coming 18 months is improving NHS performance and supporting the ongoing recovery from the pandemic. The [Ministerial Advisory Group on NHS Performance and Productivity](#) was established in October and will provide advice in early 2025.
- The NHS Executive is facilitating collaborative working and the sharing of good practice across health boards. Operational matters are properly in the hands of health boards but we will look to apply a principle of “adapt, adopt or justify” in relation to effective innovation. We will look to develop more national, once-for-Wales frameworks to be applied in the local context and will explore how the new Joint Commissioning Committee could be a forum to support national, supra-regional or regional decision making
- Where necessary, we will be ready to use Ministerial directions to overcome obstacles to effective regional collaboration. The establishment of the new Hywel Dda and Swansea Bay joint committee is a good example of a mechanism to support collaborative and regional working for other health boards.

Recommendation 3: There should be much greater transparency about what health boards are held to account to deliver. These accountabilities should be drawn from the strategy and agreed annually.

- The report makes a strong case for refocusing our priorities, but we must see performance improve markedly against the current priorities before we could fully achieve this.
- The new [Oversight and Escalation Framework](#) includes earlier intervention to support organisations and sets out criteria for de-escalation.
- Health boards and NHS trusts have a statutory duty to consult the public about service change. Llais was set up in 2023 with a remit to ensure representation from and consultation with the general public is taken into account. Llais can also make representations to NHS organisations about anything it considers relevant to the provision of health services. We do not think the case for a new independent commissioner is persuasive as it risks confusing lines of accountability.

Recommendation 4: The culture in NHS Wales is characterised by regulation, judgement and intervention related to failure. We should promote a culture that is based on support, earlier intervention, and improvement.

- Compassionate leadership is crucial and has been adopted as an approach across NHS Wales, but we believe more work is needed to embed this approach in practice.
- There is scope for a longer-term review of the inspectorates, and we will consider how this can be taken forward.
- We will continue to support Llais' growth.
- We are reviewing the guidance and advice relating to the process of performance management and standards for non-executive board members with the aim to develop new arrangements and good practice guidance to encourage constructive scrutiny and challenge around the delivery of organisations' plans, chairs' objectives and quality services. We will consider how we can improve the way chairs' objectives are set to ensure clear accountability.

Recommendation 5: The Cabinet Secretary should be able to hold boards and trusts to account in annual public accountability meetings. The agenda for these meetings should be informed by the agreed priorities referred to above.

- We recognise the value of public accountability and will explore further how to deliver this, drawing on evidence from NHS Scotland.

Recommendation 6: Leadership and people development needs to be a core investment in the creation of a high performing NHS Wales.

- We believe in continuous professional development for the NHS workforce and will continue to invest in it.
- We will explore a bespoke continuing professional development programme for NHS chairs, aspiring chairs and board members and a once-for-Wales approach.
- We are committed to expanding representation on boards including in line with our *Anti-racist Wales Action Plan*, for example through an Aspiring Board Members programme.
- The [NHS Wales Good Governance Guide](#) sets out the separate roles and responsibilities of NHS chairs and chief executives. The guide will be updated.
- Significant work has been undertaken to streamline and improve the public appointments process in the NHS to address many of the concerns and this

improvement process will continue. The UK Government Public Appointments Commissioners have an important role in this process to provide independent assurance.

- Work is underway to review and refresh the induction process for NHS boards and to review the role and purpose of board champions.

Recommendation 7: Patient and public participation in co-production of NHS services will lead to improved outcomes.

- This needs longer-term and concerted work, but health boards and NHS trusts have a role to improve engagement to ensure they have a genuine, ongoing conversation with the public, not solely in the context of service changes, which helps to inform and guide service delivery and planning.