

Betsi Cadwaladr University Health Board

Improvement Framework

1. Purpose

This framework sets out the Welsh Government expectations Betsi Cadwaladr University Health Board will need to progress to be stepped down from special measures. It also sets out longer term improvement expectations to ensure it sustains and builds on progress to further step down the escalation levels so that it returns to routine arrangements.

2. Background

2.1 NHS Wales Escalation and Intervention Arrangements

The NHS Wales escalation and intervention arrangements sets out three types of intervention, each an escalation of the previous.

- Enhanced Monitoring
- Targeted Intervention
- Special Measures

Depending on the nature of the issues, the escalation and intervention might be applied to either the NHS body as whole or particular service it provides or in some cases both.

The overall aim is to support NHS bodies subject to intervention arrangements to deliver the required improvement and address any issue(s) effectively to step down the levels of intervention so they may return to routine arrangements.

2.2 Betsi Cadwaladr University Health Board

Betsi Cadwaladr University Health Board was placed under Special Measures in June 2015. The key areas of concern at the time related to quality (infection control, management of complaints and concerns), leadership and governance, planning and issues in relation to specific services including maternity, mental health and GP out-of-hours. There were also significant concerns about the health board's connection and engagement with its local population. Since 2015 concerns regarding performance and financial management escalated and in February 2018 these were included under Special Measures arrangements.

In the areas of quality and specific services, progress has been made in making the improvements required and meeting the expectations and milestones set out in the previous frameworks. This, resulted in maternity services being de-escalated as a special measures concern in February 2018, and GP out-of-hours services reverting to normal monitoring arrangements in February 2019. Recent tripartite discussions noted the progress and improvements made in adult mental health services and quality measures and the importance of sustaining and building on this.

Clarity is now needed on expectations that require immediate improvement in relation to the key outstanding special measures concerns, namely planning,

performance issues and financial management, and sustaining progress in mental health services to be considered for step down to targeted intervention. These expectations are set out in PART A of the framework. The health board will need to make tangible progress against the expectations set out in PART A whilst also ensuring improvements in these areas doesn't impact negatively on other areas of its activity.

It is also essential the health board sustains momentum to demonstrate how it is making progress towards showing the characteristics expected of an effective, well-governed organisation. The framework in PART B sets out the expectations for the medium and longer term in order to ensure the health board further steps down the escalation levels to routine arrangements status.

The framework focuses on how the health board can assess and demonstrate it is improving and is not a list of actions for 'ticking off'. It will require the health board to make judgements on progress and what needs to be done to further improve in order to step down the escalation levels.

This framework in PART A focuses on the key expectations the health board will need to demonstrate progress to be de-escalated from special measures. PART B focuses on the medium/ longer term expectations to demonstrate progress towards it becoming an effective, well-governed organisation. The expectations are set out under four key areas:

- Leadership and improvement capability
- Strategic vision and change
- Operational performance
- Finance and use of resources

3. The Framework

PART A – expectations the health board as a minimum will need to demonstrate progress to be de-escalated from special measures.

Area: Leadership and Improvement Capability
<ul style="list-style-type: none"> ➤ Leaders understand the challenges and ensure relevant expertise and capability across the system are addressing barriers, making tangible impact and delivering improved outcomes.
Area: Strategic Vision and Change
<ul style="list-style-type: none"> ➤ It can evidence it is working with staff and partners to develop a clear and comprehensive picture of how services will look in the future and a realistic credible three year plan has been considered by the Board by April 2020.
Area: Operational Performance
<ul style="list-style-type: none"> ➤ Demonstrable progress being made in planned and unscheduled care performance underpinned by an understanding of demand and capacity;

- Sustained progress in the delivery of quality sustainable mental health services and development of new models of care.

Area: Finance and Use of Resources

- Improvements demonstrated in financial planning and in the financial position including delivery on savings/efficiency opportunities.

PART B - expectations and characteristics the health board will need to demonstrate it is sustaining and building on to ensure it steps down to routine arrangements status.

Area: Leadership and Improvement Capability

Expectations:

- A compelling vision for the health board which is understood, recognised and accepted throughout the organisation
- Visible leadership that is open to challenge, understands the issues and addresses the barriers
- Demonstrably improved capacity and capability to deliver
- Positive demonstration of organisational culture and behaviours
- Good quality of care and outcomes
- Clear accountability systems
- Effective use of data and intelligence to support decision making

Demonstrated by:

- Leaders are described by staff as increasingly visible, approachable and open to challenge
- Leaders understand the challenges and can identify and act to address them and use data and intelligence to monitor progress
- The organisation can evidence it understands and has the relevant capability, expertise and capacity across its system to deliver and invest time and resources in continuous organisational development
- The organisation has an open and transparent culture and willingness to learn
- Staff are increasingly aware and understand the accountability framework and systems in place including a clear structure that defines accountabilities
- Staff survey results demonstrate progress and positivity
- Evidence of effective mechanisms for raising, reporting and acting on concerns and incidents and taking action in response to internal investigations or external reviews.
- External stakeholders describe relationships with the health board as positive and there is evidence of improved joint working and ownership across the whole system including the Regional Partnership Board and Public Services Boards

Area: Strategic Vision and Change

Expectations:

- The organisation has a clear vision and a credible strategy to deliver high quality sustainable care underpinned by delivery plans
- Staff, partners and the public are engaged and involved in shaping the vision and strategy
- New models of care are developed with staff, partners and service users.
- A culture of high quality care

Demonstrated by:

- The board can evidence that the health board has a clear and comprehensive picture of how services will look in the future and a route map is in place to achieve this including quality, performance and financial objectives.
- The vision and strategy is aligned to the plans of partner organisations and staff and service users are actively involved in its development.
- The health board can demonstrate visible clinical leadership and how patients, partners and staff have been involved and contributed to its vision and strategy.
- Plans are realistic in achieving priorities and delivering quality care.
- Plan delivery is effectively monitored and reviewed by the Board.

Area: Operational Performance

Expectations:

- Key performance targets set out in its operating plan are met, with demonstrable progress towards meeting national standards
- Clear and effective processes are in place to manage risks and issues in delivering performance targets.
- Evidence of delivery is regularly reviewed and internal governance processes constructively challenge performance

Demonstrated by:

- A clear plan underpinned by an understanding of demand and capacity
- Effective internal governance and accountability processes which demonstrate evidence of effective risk management
- Meeting performance targets set out in the plan and demonstrating improvement towards meeting national standards in planned, unscheduled care and mental health services.

Area: Finance and Use of Resources

Expectations:

- The organisation uses its resources effectively and is moving towards a sustainable financial position

Demonstrated by:

- Delivery against the annual operating plan deliverables in managing the use of resources including savings/efficiency opportunities.
- Robust grip and control measures across the system to deliver on plan including managing in-year pressures.
- Staff members contribute and understand the accountability arrangements in place to deliver the plan.

4. Review

The health board will be expected to carry out a self-review of its current position and provide an initial report to Welsh Government by the 13 December. The self-review findings will be considered during the regular tripartite meeting and progress further discussed at a special tri-lateral meeting to be held in spring 2020.