

Agenda Supplement – Public Accounts and Public Administration Committee

Meeting Venue:

Committee Room 5, Tŷ Hywel

Meeting date: 7 March 2024

Meeting time: 09.45 – 13.00

For further information contact:

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Committee Clerk

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Hybrid – Supplementary Pack

Please note the documents below are in addition to those published in the main Agenda and Reports pack for this Meeting

4 Evidence Session – Betsi Cadwaladr University Health Board

(10:30–12:00)

(Pages 1 – 16)

Betsi Cadwaladr University Health Board Officials

- Dyfed Edwards – Chair of Betsi Cadwaladr University Health Board
- Carol Shillabeer – Chief Executive of Betsi Cadwaladr University Health Board

Attached Documents:

PAPAC(06)–04–24–P5–BCUHB Evidence Paper





Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

Agenda Item 4

Bloc 5, Llys Carlton, Parc Busnes Llanellwy,
Llanellwy, LL17 0JG

Block 5, Carlton Court, St Asaph Business
Park, St Asaph, LL17 0JG

Chair,
Public Accounts and Public Administration
Committee,
Welsh Parliament,
Cardiff Bay,
Cardiff.
CF99 1SN

Ein cyf / Our ref: CS/DE(CE24/0320)

☎: [REDACTED]

Gofynnwch am / Ask for: [REDACTED]

E-bost / Email: [REDACTED]

Dyddiad / Date: 1st March 2024

Dear Chair,

Betsi Cadwaladr University Health Board attendance at Public Accounts and Public Administration Committee evidence session

Further to our discussions with the Clerk to the Committee, please find attached an evidence paper ahead of our attendance at the committee on 7th March 2024. The paper is shaped around three areas, outlined in your invitation as of interest to the Committee.

We hope this will aid discussion and will provide some reassurance to the Committee that BCUHB want to be as open and transparent as can be on all matters, whilst safeguarding our duties as an employer.

We look forward to meeting the Committee on 7th March.

Kind regards,

Kind regards,

Dyfed Edwards
Cadeirydd/Chair

Carol Shillabeer
Prif Weithredwr/Chief Executive

Public Accounts and Public Administration Committee – 7th March 2024

Betsi Cadwaladr University Health Board Update

1) Introduction

This report seeks to provide an update on the three areas requested in correspondence from the Committee dated 6 December 2023:

Progress on BCUHB's stabilisation phase of 9 months which runs to February 2024 and progress against KPIs.

Issues surrounding the processes involved in commissioning the EY report which resulted in a higher cost to the Board than necessary.

Follow-up on issues arising from the forthcoming Auditor General's report on the Effectiveness of the BCUHB Board, which is expected to be published in early 2024.

2) Progress on BCUHB's stabilisation phase of 9 months which runs to February 2024 and progress against KPIs

On 27th February 2023 the Minister for Health and Social Services announced that BCUHB would be escalated to Special Measures, under the NHS Escalation and Intervention Arrangements (2014). The organisation had previously been at the Targeted Intervention level of escalation. The Minister for Health and Social Services indicated in the statement announcing Special Measures escalation particular concern regarding leadership, culture and performance, although there were eight areas of concern in total, including:

- 1) Governance and board effectiveness
- 2) Workforce and organisational development
- 3) Financial governance and management
- 4) Compassionate leadership and culture
- 5) Clinical governance, patient experience and safety
- 6) Operational delivery
- 7) Planning and service transformation
- 8) Mental health

A year on, it is helpful to outline where progress has been made in stabilising the health board and the next steps for the further work ahead.

Approach to stabilising the Health Board

The health board experienced significant leadership instability as a result of the reported dysfunction (Audit Wales Board Effectiveness Report - February 2023) and the subsequent substantial changes to Board membership in February 2023. This level of significant change has been unprecedented in health boards since their inception in 2009. The direct appointment, by the Minister for Health and Social Services, of an interim Chair and three Independent Members started the process of building a new Board.

The Board secured an interim Chief Executive with NHS Wales experience, and a Special Measures Response Plan was prepared for and approved by the Board in May 2023. The Response Plan focused on 5 outcomes and took a rapid stabilisation approach of three 90-day cycles running from 1st June 2023 to end February 2024. The 5 outcomes were designed not only to respond to the list of key issues of concern but also to start building a more effective organisation able to build the foundations for long-lasting change. These included:

- Outcome 1 – A well-functioning Board
- Outcome 2 – A clear, deliverable plan for 2023/24
- Outcome 3 – Stronger leadership and engagement
- Outcome 4 – Improved access, outcomes and experience for citizens
- Outcome 5 – A learning and self-improving organisation

Regular reports have been presented for consideration at the Board and published to enable an open and transparent approach to demonstrating progress. A substantive report detailing progress across all three stabilisation cycles is intended to be published at the end of March 2024.

Gaining Insights and utilising Independent Advice and Support

Welsh Government commissioned a series of Independent Reviews to assist the new Board in gaining rapid insights into key areas within the health board. The Reviews have been undertaken over the last nine months and have systematically been considered through Board Committees and subsequently published along with a response plan on the health board's website - [Independent reviews and our response - Betsi Cadwaladr University Health Board \(nhs.wales\)](#). The reviews and their status are included in the following table:

	Independent Review	Status
1	Mental Health Inpatient Safety	Report received, management response developed and signed off via relevant Board Committee, report and management response published through Health Board governance. Actions in progress
2	Patient Safety	Report received, management response developed and signed off via relevant Board Committee, report and management response published through Health Board governance. Actions in progress
3	Office of the Board Secretary	Report received, management response developed and signed off via relevant Board Committee, report and management response published through Health Board governance. Actions in progress
4	Use and recruitment of 'Interim' Staff	Report received, management response developed and signed off via relevant Board Committee, report and management response published through Health Board governance. Actions in progress
5	Executive Portfolio Review	Report received, reviewed and CEO leading on actions which are in progress
6	Contract and procurement management (commissioned by the health board rather than Welsh Government)	Report received and will be reviewed by relevant Committee shortly and then published through Board governance.
7	Vascular Services	There are two parts – the first has been received and a Committee development session held and it has informed the Vascular improvement plan. The second is concluding at the moment and both will go through formal Committees and Board together. and then published through Board governance.
8	Planning	Draft Report received; final report awaited. Action planning underway.
9	Stocktake review of progress against previous Mental Health Reviews	Draft report received; final report awaited. Action planning underway
10	Clinical Governance systems	Roundtable with Welsh Government to shape approach to intervention work held 16 th November 2023. The Health Board has since worked with a WG team led by Cathy Dowling to take forward discovery work on a Quality Management System with a view to bring forward a draft proposal to Board in May.

The Welsh Government also secured a number of Independent Advisors as part of Intervention and Support mechanisms in the areas of:

- Finance
- Clinical leadership and patient safety
- Board leadership and effectiveness;
- Mental Health
- Citizen, patient and carer engagement.

Further support was provided via the NHS Executive in areas including primary care, urgent and emergency care, and mental health.

In terms of accountability to Welsh Government, the core mechanisms in place have been:

1. Special Measures Improvement Forum: a regular meeting chaired by the Minister for Health and Social Services with the Board to review progress, challenges and discuss key enablers to success.
2. Quarterly Mental Health review meeting; chaired by the Deputy Minister for Mental Health and Wellbeing to review specific progress, challenges and key issues relating to mental health and child and adolescent mental health.
3. Special Measures Assurance Board; a regular meeting chaired by the Director General Health and Social Services Group/NHS Wales Chief Executive with the CEO and Executive Team to review progress and discuss challenges, issues and expectations.
4. Monthly one to one meeting between the Chair and the minister for Health and Social Services to discuss progress against objectives.

A number of key themes have emerged as a result of analysing the individual insights reports. These include:

- Data, Intelligence & Insight
- Culture
- Risk Management
- Patient, Family, Carer Involvement
- Operating Model
- Organisational Governance and compliance
- Integrated Planning

Specific work is therefore underway in relation to developing the organisations capability in these areas and form core components of the health boards Organisational Development Plan.

Progress

It is important to stress that the first nine months (3 x 90-day cycles) have focused on stabilisation, and that there is considerable work ahead to enable a truly sustainable, high quality health care in North Wales, supported and delivered by a highly effective health board.

The following high-level report against each outcome is provided:

Outcome 1: A well-functioning Board

The Board is responsible for developing culture, strategy and managing performance. The table below outlines the key areas of focus and the delivery of progress. Audit Wales' Board Effectiveness Follow-up Review, published in February 2024, one year following the original report of Feb 2023, is a critical marker of progress.

Outcome	Progress
<p>1) A well-functioning Board</p>	<ul style="list-style-type: none"> • Recruitment of Chair, Vice Chair and four permanent Independent Members complete, further permanent appointees due to be announced following a Public appointments process. • Substantive, experienced CEO appointed, with experience in NHS Wales. • A Board Development Programme has been developed and is being implemented, including focus-on areas such as: <ul style="list-style-type: none"> • Compassionate Leadership • Mental Health • Planning • Performance management • Risk management • Digital • Quality • Winter Resilience Planning • New Risk Management Framework agreed at the September Board, with implementation underway reporting to the Audit Committee. • The independent reviews received to date have been considered in Board Committee Development Sessions, prior to Management Responses being developed. These have been highlighted in the regular Special Measures reports to full Board. • Good progress made within corporate governance arrangements including Board Committee structures and cycle of business, with appointment made to the revised role of Director of Corporate Governance.

Outcome 2: A clear, deliverable plan for 2023/24

The requirements within this outcome seeks to improve the ability of the organisation to develop capability in planning, recognising the health board has been unable to develop an approvable Integrated Medium-Term Plan since the requirement was established. Furthermore, this outcome centres upon improving financial governance and performance.

Outcome	Progress
2) A clear, deliverable plan for 2023/24	<ul style="list-style-type: none">• Annual Plan developed and submitted to Welsh Government end June 2023. This provides the platform for moving toward a 3-year plan approach for 2024/27.• A new Integrated Planning Framework developed, approved by Board and implementation commenced.• Integrated Performance Framework developed, approved at the September Board, with implementation commenced.• The Independent Planning Review draft report has been received. The final report is expected by the end of February.• The Contract and Procurement Management Review has been received, with discussion and consideration of the management response due at the next scheduled Board Committee.• Financial Control Action Plan progressing well, with all Standing Financial Instructions (SFIs), Scheme of Reservation and Delegation (SORDs) and Standing Orders (SOs) revised and approved by Board and relevant Board committees.• Procurement training delivered to over 400 BCU staff.• Improved financial performance evident through the period.

Outcome 3: Stronger leadership and engagement

This outcome focuses on improving the stability of leadership in the organisation as well as enabling more effective engagement and involvement with staff internally and stakeholders and communities externally.

Outcome	Progress
<p>3) Stronger leadership and engagement</p>	<ul style="list-style-type: none"> • Board approved (Sept 2023) its Strategic Intent in relation to developing Culture, Leadership and Engagement, agreeing 9 key areas of initial focus. • A new Organisational Development Steering Group has been established to lead the work, chaired by CEO, and a new People and Culture (Board) Committee has been formed, chaired by the Chair of the Health Board. • Developing transparent, strong, and visible leadership specifically on key issues, e.g., Health and Social Care Committee and media interviews. • A new approach to the Public Annual General Meeting has been developed and implemented, including a Health Fayre held in local community centre, enabling conversations between health board and local communities. • Three community engagement events held during quarter 4 2023/24, testing and refining the approach for further events across the region during 2024. • New Integrated Leadership Development Framework in its final stages of development for implementation from March 2024 onward. • Draft 'Listening to Patients, Families and Communities' Report received from the Independent Adviser with findings and recommendations currently being considered. A new engagement approach taken with those affected by vascular service issues. • Clinical Engagement Rapid Review completed, considered by Executive Team and Organisational Development Steering Group ahead of consideration by the People and Culture Committee. • A series of Leadership Conferences is being implemented. Following a whole day, whole Board session on Compassionate Leadership, a health board-wide conference has been held focusing on compassionate leadership and culture, with sessions from experts Michael West and Henry Engelhardt. • There is significant reduction in the usage of agency interim staff - from 41 in December 2022 to one by the end of February 2023.

Outcome 4: Improved access, outcomes and experience

This outcome is the area that is most likely to impact patients and clients most directly, and not dissimilar to other NHS organisations is where significant service pressure exists. There are however specific issues relating to North Wales services that require both short and longer-term action.

Outcome	Progress
<p>4) Improved access, outcomes and experience for citizens</p>	<ul style="list-style-type: none"> • Planned care: A new Planned Care Programme has been established to take forward systematic improvements. These include streamlining and standardising the approach to booking and scheduling, implementing the GIRFT (Getting It Right First Time) findings and recommendation across several clinical service areas, and implementing developments such as 'See On Symptoms', 'Patient Initiated Follow-up' and the 3Ps 'Promote, Prevent and Prepare' assisting people awaiting their planned care intervention. • A new service model for high volume-low complexity Orthopaedics has been developed and is being implemented. The development of a Planned care Hub has been approved by Welsh Government and the development at Llandudno Hospital is now underway. The dedicated site will run for 50 weeks of the year, removing the risk of planned care cancellations that currently occur in District General Hospitals as a result of urgent and emergency care pressures. • Progress has been made across a range of indicators in relation to planned care waiting times, including: <ul style="list-style-type: none"> ○ 62% reduction in people waiting over 156 weeks to have their first appointment or have started treatment (November 2022 – November 2023) ○ 45% reduction in people waiting 52 weeks for their first outpatient appointment (November 2022 – November 2023) ○ 37% reduction in people waiting 104 weeks in comparison with our position last year (November 2022 – November 2023) • Vascular Services: Healthcare Inspectorate Wales, following their review, de-escalated the service from a 'Service of Concern'. Two further elements of review are currently in process. The first of these is a review by the National network which is reporting positive results; the second is yet to report. A full stocktake of the current vascular service will take place based on all the reviews undertaken over the last 9 months. • Dermatology: Significantly challenged service as a result of workforce gaps, however a plan to resolve immediate issues is being implemented with service modelling for a sustainable solution commenced. A new teledermoscopy service approach has been approved and funded by the Welsh Government. • Urology: This service is under pressure due to workforce challenges and service configuration issues. A GIRFT review and Royal College Review has been received and a plan for the short term is in place. Longer-term

service planning will be required for this specialty, in line with many others.

- Mental Health: Several key elements of work have been undertaken including:
 - Inpatient Quality and Safety Reviews: An initial review of inpatient safety took place in spring 2023 and an action plan implemented as a result. A follow-up review has been carried out to observe and evidence where improvements have been made and sustained. In addition, the views and experience of those not represented in the first review, e.g., ward staff, service users and carers, as well as those who previously participated have been asked their perceptions of progress or areas of concern. The report is due in March.
 - 'Review of Reviews': The Royal College of Psychiatrists have undertaken a look-back across several reviews dating back some 10 years to understand where progress has been made. The final report is awaited.
 - Performance in relation to access to mental health services continues to show an overall positive position. New services such as the '111 press 2' is now provided over the 24 hour period, providing immediate access to mental health support. This service is being well-utilised and has now formed a core element of provision across the region.
- Urgent and Emergency care: This area remains a significant concern. Over 360 people at any one time are delayed in hospital as a result of difficulties securing their next onward stage of care. This is having a profound impact on the way in which people who require urgent and emergency hospital care are seen and admitted to hospital in a timely manner. This is clearly an issue wider than North Wales and will require national and local action to bring improvements to bear. Improvement work at the Emergency Department as well as further into the hospital is taking place with the further development of Same Day Emergency Care for example. In relation to 4hr ambulance handover delays, some improvement has been achieved, however further improvement is still required. The Board dedicated a session in its development programme to urgent and emergency care and did a 'walk-through' of the hospital patient pathway at Ysbyty Gwynedd in October, prior to considering the Winter Resilience Plan at the Board meeting in November. It is worthy of noting that despite the pressures and challenges, that Ysbyty Gwynedd Emergency Department was ranked 1st in the UK GMC survey for best training site for doctors.

Outcome 5: A learning and self-improving organisation

It is essential in building an effective organisation that can implement long lasting change, that a focus on learning and mechanisms that support improvement are embedded. This outcome therefore draws in elements that will enable the organisation to identify issues and areas for improvement earlier and build capacity and capability to itself make changes without a heavy reliance on external support.

Outcome	Progress
5) A learning and self-improving organisation	<ul style="list-style-type: none">• Significant work has been undertaken to develop a business case to invest in an Electronic Healthcare Record for North Wales. This would enable systems of care to be transformed, supporting staff to provide safer, more effective care. Discussions are underway with Welsh Government and Digital Health and Care Wales in relation to progressing this case to the next stage.• A Healthcare Public Health Programme proposal has been developed and approved focusing on diabetes (prevention and care).• The development of a Quality Management System for the organisation is underway. The Board is working with the Institute of Healthcare Improvement and Improvement Cymru in developing a strong understanding of quality systems in healthcare. It is anticipated that the Board will consider a draft Quality Management System (Framework) in May 2024, testing, building and refining the system thereafter. Learning from other organisations in the UK and internationally is supporting this work.• A Learning Organisation Framework is being developed to support the culture, system and process of learning.• An Investigations and Learning Programme has been established to review retrospectively the standard and effectiveness of investigations relating to clinical care within the organisation. The Programme focuses on the quality of action planning and the evidence that embedded learning has taken place.

Looking Forward

The health board is currently developing its 3-year Integrated Medium Term Plan and this will integrate the work previously identified under 'Special Measures' (now identified as Level 5 intervention under the revised Escalation and Intervention Arrangements). Five key objectives are being proposed within the Plan moving forward that will both build on the work undertaken to stabilise the organisation over the last 9 months and to broaden the focus.

- 1) Building an effective organisation
- 2) Developing strategy and long-lasting change
- 3) Creating compassionate culture, leadership and engagement
- 4) Improving quality, outcomes and experience
- 5) Establishing an effective environment for Learning

Welsh Government is refining the approach to success criteria, however the organisation itself is setting clear goals and outcomes that will transparently demonstrate progress.

Summary

Important progress has been made over the 9-months of the Special Measures Response Plan implementation. The Board is now more stable and enabling stronger leadership and engagement. There is a clear direction and a positive and supportive culture is growing. There is however a long way to go in enabling a truly effective organisation that can successfully tackle the challenges that the NHS and wider public sector face. The health board however has a clear approach to the next stage of the work needed to continue the improvements already made.

2) Issues surrounding the processes involved in commissioning the EY report which resulted in a higher cost to the Board than necessary.

Significant work was commissioned starting in June 2023 by the (then interim) CEO as a result of concerns being raised. In summary these included:

a. **Review of procurement and contract management of EY. This review was undertaken independently by Audit and Assurance Services (Internal Audit).**

The high-level review, based on a thorough review of documentation, sought:

- i. To establish the procurement process followed by the health board in engaging EY (Ernst and Young) to undertake the review, and identifying the contract management arrangements in place to oversee the delivery of the review.
- ii. Accordingly, the scope focused on:
 1. Procurement – reviewing compliance with Health Board Standing Orders; Standing Financial Instructions and procurement processes.
 2. Contract management – reviewing the contract management arrangements in place.

b. **HR Management Processes and Practice Review** examining largely the treatment of staff prior to, during and after the EY interviews and a review of the HR processes and practice in relation to this from December 2022 up until October 2023.

c. **Information Governance breach and Information Governance/Corporate Records Review**, which included:

- i. A rapid examination of the circumstances regarding non-authorized disclosure of the EY report
- ii. Independent review of Information Governance with particular focus on Corporate Records Management.

In relation to the high-level review into the procurement and contract management of the EY report, the main findings advised to the CEO included:

1. The commissioning of the independent (EY) review was undertaken by the Audit Committee. No Executive officers appeared to be involved in the procurement of the supplier. Concerns had been raised by the (then CEO) regarding the governance of the contract, specifically it being open-ended as well as the sign-off required in line with the Scheme of Delegation.
2. The appropriate procurement processes do not appear to have been followed, with a direct award to the supplier being made, seemingly without the appropriate process being evidenced.
3. The approval of a contract for external consultancy is above the delegated limit (£500,000) of the Chief Executive and is a matter reserved for the full Board. No record of a Board decision or Chairs Action was evidenced for the contract award. The purchase order value of the contract was £922,110.00.
4. The service from EY appears to have been commissioned in September 2022, with requisitions completed and approved retrospectively in February 2023.
5. In terms of contract management, the engagement letter and statement of works did not include a total fee payable. It appeared that 311 hours were budgeted, however 671 hours were utilised to October 2022, with further costs becoming evident in November 2022. Commentary related to this from EY indicated that the Committee had requested further work to be undertaken.
6. The Audit and Assurance service also noted other matters including that the then CEO commented on the Terms of Reference, but could not confirm if these had been considered. The EY engagement letter was not signed by the Accountable Officer even though some of the key expectations are included in the Accountable Officer Memorandum.
7. Although EY had sent a draft report to key parties, they indicate they were asked to finalise the report before having received comments from all the parties.
8. External legal advice was procured to respond to concerns raised by a senior health board officer; the procurement of that advice did not comply with Standing Orders. The work was commissioned in October 2022 and the order to facilitate payment completed retrospectively in February 2023. The order value was £30,000.

Significant action has been taken as a result of the findings relating to the procurement of the Review. These include the wider consideration of procurement and contracting practice, revision of the Scheme of Delegation, Standing Orders and Standing Financial Instructions and the training of over 400 senior staff in effective procurement practice.

3) Follow-up on issues arising from the forthcoming Auditor General's report on the Effectiveness of the BCUHB Board, which is expected to be published in early 2024.

Audit Wales **has now published** their follow up report on Board Effectiveness [Board Effectiveness Follow-up - Betsi Cadwaladr University Health Board | Audit Wales](#) which identifies that the health board is now more stable with stronger leadership and engagement being evident. The Health Board is moving in the right direction, focusing on developing a positive and supportive culture and rebuilding trust and confidence in the health board amongst the public, staff and partners. The report also highlights the challenges the health board will need to tackle moving forward.

A response has been developed by the health board and this will further guide the improvement work underway and is detailed below.

BCUHB Response to Audit Wales' Follow up Review of Board Effectiveness

	Conclusion	Response
1.	Significant challenges remain which will need energetic, focused, resilient and brave leadership to address. There is an immediate need to continue, and to conclude the work aimed at stabilising the board and the wider senior leadership of the organisation. That includes getting to a position where the board has a full complement of substantive Executive Directors and Independent Members, and with a substantive Chair in place. Linked to this is the urgent need to re-establish a committee structure below the board that provides the necessary oversight, scrutiny, and support across all aspects of the organisation's business.	<p>A) Independent member recruitment is underway. it is anticipated that full recruitment could be achieved by March 2024.</p> <p>B) An Executive Director Recruitment Programme starts in earnest during Quarter 1 2024.</p> <p>C) The Committee structure will be fully established during Q4 of 2023/24. New Committees have completed their set-up meetings during January 2023, and development sessions are being planned for February and March 2024 in order to assist fully operational Committees for 2024/25.</p> <p>D) A focus on strengthening the approach to reporting (including standards of reports) will be undertaken in Q1 2024/25</p>
2.	The raft of disclosures that were received towards the end of 2022 should be used to inform the programme of board development that the new board will need to put in place. In particular, it should inform the work that is underway on	<p>A) The Board will be actively engaged in the Compassionate Leadership development following the Board Day with Michael west in Dec 2023.</p> <p>B) A Board 'Team-Development' approach will be determined during Quarter 1 of 2024/25 as new Board members join.</p>

	organisational culture and compassionate leadership, and ensure that this starts with the right “tone from the top”.	C) The Chair and CEO will take personal leadership roles in steering organisational development through leading the people and Culture Committee (Chair) and the Organisational Development Steering Group (CEO).
3.	A key priority for the new Chief Executive will be to build a stable, cohesive, and appropriately skilled Executive Team that can provide the organisation with the operational leadership it needs. This will include settling on the right mix of Executive Director portfolios, reducing reliance on interim arrangements for senior leadership roles, and building leadership capacity and capability for the Health Board’s corporate governance arrangements. The Executive Team must also be appropriately connected to the leadership structures that sit below it, something which will need to be supported by ensuring the Health Board’s operational model is fit for purpose	<p>A) The Executive Portfolio Review, as well as other sources of evidence, have provide insight that shapes the form and function of the Executive Team. Quarter 4 will see a revised approach proposed and following engagement and any necessary modification, actively implemented including recruitment into vacant posts.</p> <p>B) The Director of Corporate Governance role has been recruited and a commencement date likely ahead of the new financial year. This appointment should provide leadership capacity and capability required to strengthen corporate governance across the organisation.</p> <p>C) A review of the Operating Model Structures is part of the Special Measures Response Plan, which will indicate where modification is required. Wider ways of working that connect the Executive with broader leadership will be further evaluated as part of this work.</p>
4.	As the new board looks to take forward these challenges it will need to maintain a clear view on the outcomes it is seeking to achieve. Those must include rebuilding confidence in the Health Board’s leadership within the organisation, and rebuilding trust and confidence in the Health Board amongst its external stakeholders	<p>A) An outcomes focused approach has been set within the Special measures Response Plan and as the planning for 2024/25 and beyond proceeds, outcomes will form a key element of objective setting, performance monitoring and assurance mechanisms.</p> <p>B) In additional to internal staff surveys that measure confidence in leadership and management, consideration will be given to mechanisms to gain external, stakeholder feedback ahead of 2024/25.</p>
5.	In the short term, the Health Board will likely need to continue to draw upon appropriate levels of external advice and expertise as it responds to these challenges	A) As part of creating the Organisational Development Plan, a capacity and capability assessment will be undertaken, to reflect where specific expertise will be required. The implementation of the OD

<p>and the requirements of the special measures framework. However, it must also look to get itself as quickly as possible to a position where it has the necessary internal capacity and capability to sustain improvement and avoid the need to continually look to the outside for support to achieve the improvements which are necessary.</p>	<p>Plan will be incorporated into the 2024/27 3 Year Plan (IMTP).</p>
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