

Yr Adran Iechyd a Gwasanaethau Cymdeithasol
Cyfarwyddwr Cyffredinol • Prif Weithredwr, GIG Cymru

Department for Health and Social Services
Director General • Chief Executive, NHS Wales



Llywodraeth Cymru
Welsh Government

Mr Darren Millar AM
Chair
Public Accounts Committee
National Assembly for Wales
Cardiff Bay
Cardiff
CF99 1NA

Our Ref: DS/JJ/TLT

9 December 2013

Dear Darren

PAC INQUIRY INTO GOVERNANCE ISSUES AT BETSI CADWALADR UNIVERSITY HEALTH BOARD

Last week you advised me the Public Accounts Committee report into Governance issues at Betsi Cadwaladr University Health Board would be published in the near future. It is some months since we gave evidence so I thought you might welcome an update on the actions we have taken in the intervening period.

1. Quality and Safety Issues

Welsh Government Oversight

We have further strengthened the Quality and Safety Management systems within Welsh Government. We have put in place a group chaired by the Deputy Chief Medical Officer which meets regularly to oversee information and intelligence about the performance of NHS organisations. This enables interaction and if necessary escalation with Health Boards and Trusts.

Transparency

We are taking steps to ensure appropriate information is in the public domain. We have launched a website providing information on local health boards, hospitals and GPs, <http://mylocalhealthservice.wales.gov.uk>. This currently includes mortality and HCAI data as well as information on patient experience. This initiative will continue to be developed.

Quality Reporting

All Health Boards and Trusts have published an Annual Quality statement. These are comprehensive and set out the organisation's approach in areas such as audit, patient experience and complaints. A process of peer review is currently being progressed and a learning event will be held early in the New Year.

Mortality

There has been considerable progress across Wales to strengthen the process of reviewing mortality and mortality data. This includes undertaking case note reviews of all deaths in hospitals. The aim is to ensure a consistent approach is taken across Wales. We are paying particular attention to the work of Betsi Cadwaladr University Health Board in this area. They are reviewing relevant matters across their 3 District General Hospitals and undertaking necessary case note reviews. A major area of focus is any HCAI related deaths.

Health Care Acquired Infections (HCAIs)

This is a priority for attention across the Welsh NHS. It is a Tier 1 priority and we are taking action to share and adopt best practice. It is the focus for an All-Wales meeting on 11 December involving all Executive Teams. With reference to BCUHB we naturally remain concerned about levels of *Clostridium difficile* and other HCAIs across the Health Board. However there is evidence that the Board are now receiving timely, comprehensive information on the extent of infection and making progress with their 'Infection Prevention Improvement Action Plan'.

BCU have agreed a new structure for their infection prevention and control (IPC) team. This includes an agreement with the Royal College of Pathologists on a new IPC doctor post which will be directly accountable to the Executive Nurse lead for HCAI and an assistant director of nursing with extensive experience in IPC (who is already in post). When in place the team will provide the leadership, and have the capacity and capability to further strengthen systems and processes. There is emerging evidence of improved case ascertainment, outbreak management and proactive systems for root cause analysis of all deaths where C diff appears on the death certificate.

The Health Board has re-established local site specific IPC and decontamination groups and work is underway to develop and strengthen Board wide policies and procedures. This work includes:

- recent publication of an antimicrobial prescribing policy and guidelines;
- developing a more robust multidisciplinary education and training programme – for primary as well as secondary care;
- a communications strategy;
- appropriate interaction with local residential and nursing homes.

The Board is proactively engaging with the Community Health Council which has recently completed its 'Bugwatch' survey – the results of which has been shared with the Board and will be published.

2. **Joint Work with Welsh Government, HIW and WAO on Escalation Procedures.**

Work is well advanced through a task and finish group which has met regularly since August. The purpose is to agree protocols for the systematic and timely sharing of information, and ensuring appropriate intervention arrangements. The Project Board has considered:

- Escalation and Intervention arrangements elsewhere within Wales and the UK
- The powers and duties of Welsh Government, HIW and WAO as set out in legislation
- What information and intelligence should be shared routinely

This has informed proposals which we will be tested with stakeholders, leading to new arrangements being finalised early next year. These include

- WG, HIW and WAO to meet twice a year to share information and when required between these times when concerns arise
- A system with trigger points leading to various stages / levels of intervention
- Clarity about the range of intervention actions which should be taken.

3. **Board Training and Development**

As you know from the evidence session I consider effective Board development to be of critical importance. We need to ensure we have the right blend of consistent national activity and bespoke local arrangements to ensure non-executive Board members fully understand their roles and responsibilities and the Board functions effectively. In October I wrote out to all Chairs and Chief Executives restating the importance of Board development and advising them of the support available through Academi Wales. I am attaching a copy of my letter which sets this out in more detail.

4. **Financial Position**

We described a number of improvements we were taking forward in relation to budget and financial management arrangements at our Committee appearance in July. We are progressing these together with those recommended in the recent WAO NHS Finances report. We are already sharing the lessons from both reports with LHBs and Trusts. We will continue to monitor and seek assurances on all developments including improvements in local budgetary control and financial management arrangements.

An important development received approval this week. This is the new financial flexibility arrangements provided under the NHS Finances (Wales) bill. As already recognised by the Committee and the AGW these developments, linked to service planning improvements will substantially help to alleviate the over reliance on

unsustainable short term financial solutions. These new arrangements will apply from 2014/15.

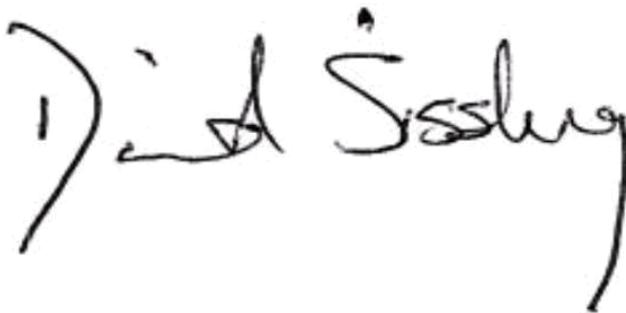
The development will provide greater clarity on the requirements going forward for all LHBs and Trusts. Each organisation is currently finalising a 3 year Integrated Plan which will be submitted in January 2014. These Plans will bring together service, workforce and financial considerations into one robust Plan.

5. Disseminating the Report

I circulated the WAO/HIW Report to all Boards and Trusts and asked them to provide formal assurance that their internal governance arrangements were appropriate. All organisations have now done this.

I hope that the information above provides some further reassurance that we have been taking forward a range of actions we discussed with Committee in July. I look forward to receiving the Committee's final report and we will respond in more detail at that point.

Yours sincerely

A handwritten signature in black ink, appearing to read "David Sissling". The signature is written in a cursive style with a large initial 'D' and a long, sweeping underline.

David Sissling

ENC.

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Llywodraeth Cymru
Welsh Government

Chairs – NHS Local Health Boards
Chairs – NHS Trusts

Our Ref: DS/JC/TLT

22 October 2013

Dear Colleague

Board Level Development Support

Effective Board development is of critical importance. We need to ensure we have the right blend of consistent national activity and bespoke local arrangements. The latter is, of course, for you to define and secure. The purpose of this letter is to advise you of the national support which is available through Academi Wales. Following recent discussions I am writing to advise you of Board level support available through Academi Wales.

- Two at the Top – New Chief Executive and Chair pairings to use this support in their first year, existing Chief Executives and Chairs to access when needs arise;
- Board Development Series – all Health Boards and Trusts should undertake the two parts of the programme over the next 2 years;
- The Good Governance Guide for NHS Wales Boards – to be used by all Board Members on an on-going basis;
- Governance Master class Series – Chairs to identify appropriate Board members to attend the series, learning to be shared with Boards on return to organisation;
- Bespoke Development – all Health Boards and Trusts to discuss other development support with Academi Wales as needs arise.



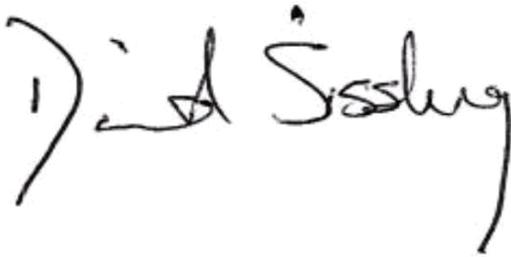
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I think it would be helpful if you could share a summary of your planned Board development activity for 2014. I would appreciate this by **end of December 2013**.

Yours sincerely

A handwritten signature in black ink, appearing to read "David Sissling". The signature is written in a cursive style with a large initial 'D' and a prominent 'S'.

David Sissling

- cc. Chief Executives – Local Health Boards/Trusts
- Board Secretaries – Local Health Boards/Trusts
- Directors of Workforce and OD – Local Health Boards/Trusts
- Bernard Galton, Director General, Welsh Government
- Jo Carruthers, Deputy Director Financial and Corporate Services, Welsh Government
- Julie Rogers, DHSS, Welsh Government