

Judith Paget
Director General Health/NHS Chief Executive
Welsh Government

18 Mai 2022

Dear Judith

NHS Wales Escalation and Intervention Arrangements

As you were unable to attend the planned evidence session on 9 March, the Committee agreed that I write with the following questions on the NHS Wales Escalation and Intervention Arrangements. On consideration of your response, Members will discuss whether the session should be re-arranged for the summer term.

The Committee Members were appreciative of the supporting paper submitted for the planned session and noted the Current Escalation Arrangements for NHS Organisations in Wales. Please can you expand on timeframes for when you expect those organisations who are currently in enhanced arrangements to be de-escalated.

Escalation and Intervention Framework - general

How effective do you believe the Framework to have been? Do you feel it has been a positive development in identifying concerns, agreeing the necessary responses, and supporting tangible improvement. Where has it worked less well, can you explain why?

The Welsh Government evidence notes that a review of these arrangements began in January 2020, has included an external review and indicates there's a need to 'revise and refresh' the current framework. What have been the key findings of this review work and what is the timescale for completing the review work?

What are the contributions of each of the three partners: Healthcare Inspectorate Wales (HIW), Audit Wales (AW) and the Welsh Government in delivering the process of escalation and intervention?

Decision-making

Who makes the ultimate decision following the tripartite discussions on whether or not to escalate or de-escalate?

What information and factors are brought to the discussion, and which are the most important in determining a decision?

Croesewir gohebiaeth yn Gymraeg neu Saesneg.
We welcome correspondence in Welsh or English.

How clear are the criteria for escalation and de-escalation and what role does NHS organisations play in determining or agreeing them?

Managing escalation

The Welsh Government evidence says that “having organisations in Special Measures for a prolonged period of time is not desirable”. Betsi Cadwaladr University Health Board was in special measures for around five years and has needed significant input of time and resources – both staff and money. Yet it still has financial and service problems. Are you satisfied that the intervention approach has been the right one?

Has Welsh Government looked at the potential of other approaches. For example; shorter, rapid, more intensive and focused interventions, the use of peer-to-peer or external challenge and review?

There’s evidence to suggest that delivering improvement can often depend on leadership beyond the health board Executive; amongst clinicians, middle managers, and independent Board Members. Does the process of escalation and intervention pay enough attention to supporting these groups?

Securing improvement and de-escalation

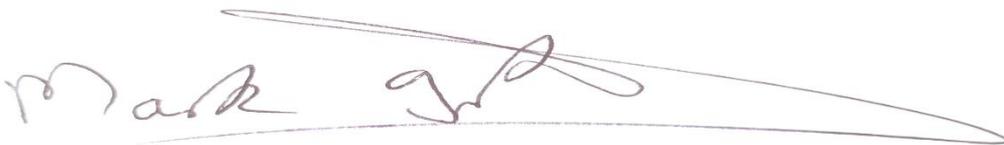
Do you have an opinion on whether the improvement frameworks can be too wide-ranging and perhaps need to focus on a smaller, more focused set of priorities and if so, can you expand on what you would like to see in a more focussed framework?

Over the years, escalation has often been driven by factors such as performance issues or sustained financial overspends. What needs to happen if evidentially effective decisions can’t be made unilaterally by the organisation on the size and shape of service transformation needed?

There is evidence that Ministerial leadership and ‘ownership’ of the improvement process, can play a role in shaping an intervention and helping to ensure its success. What role can and should the Minister play in supporting the intervention and escalation process?

Thank you

Regards

A handwritten signature in dark ink, appearing to read 'Mark Isherwood', with a long horizontal line extending to the right.

Mark Isherwood MS
Committee Chair