

**Cyfarwyddwr Cyffredinol Grŵp Iechyd, Gofal Cymdeithasol a'r
Blynyddoedd Cynnar / Prif Weithredwr GIG Cymru**

**Director General Health, Social Care & Early Years Group / NHS
Wales Chief Executive**



Llywodraeth Cymru
Welsh Government

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9 August 2024

Dear Abi

Integrated Medium-Term Plan 2024-27: Accountability Conditions

I am pleased to confirm that the Integrated Medium-Term Plans (IMTP) submitted by EASC and WHSSC on the 31 March 2024, together with the Ministerial priority templates, have been assessed as satisfactory. This recognises the development of integrated planning, against the current challenges and management of risks. In addition, the former Cabinet Secretary for Health, Social Care and Welsh Language has noted the position.

Going forward the expectation is that the NHS Wales JCC will work to convert these into a joint IMTP for 25-28, meanwhile this year I am looking for you to ensure that the deliverables in both plans are achieved.

I expect organisations to deliver the commitments set out within their plans, particularly in relation to the Ministerial priorities. This includes delivery of financial balance as set out in the Joint Committee's plans, and the JCC should continue to progress improvements of a clear triangulated financial position and key trajectories. This is fundamental to the successful delivery of your IMTPs as supported by the Joint Committee.

Organisations must lever improved efficiency and productivity to continue with significant efforts in order to achieve financial and service sustainability that will deliver demonstrable benefits and patient outcome for the allocation uplift provided to organisations this year.

There are a number of areas which were identified as accountability conditions through the formal review of both plans:

EASC:

- Continue to ensure WAST implement efficiencies when required to support the improvement in handover delays. In addition, continue to work with health boards to achieve this.
- Continue to work collaboratively with partners to improve flow across the system.
- Ensure 111 and 999 services are resourced appropriately to deal with demand

WHSSC:

- Ensure delivery of Bone Marrow transplantation and Car-T expectations
- JCC to set clear expectations around NCCU, SARC and 111.

The former Cabinet Secretary has set some additional in-year Key Performance Indicators (KPIs) – Annex 1. These are attached for awareness. In addition, should in-year expectations be required this will be communicated to you and the Joint Committee will still be expected to deliver in line with quality statements.

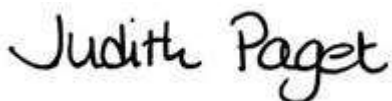
I expect the Committee to scrutinise the plan and ensure that progress is monitored effectively over the forthcoming year.

A copy of your Committee updates setting out progress of the plan during the year, should be forwarded on a quarterly basis to HSS-PlanningTeam@gov.wales. This should be accompanied by a refreshed Minimum Data Set (MDS) making clear any changes to the trajectories and goals at each quarter.

I note the governance arrangements for the JCC in relation to any requirement for JET and IQPD meetings are yet to be confirmed, but will be shortly. These will include the arrangements for monitoring progress against accountability conditions and delivery of your plans. In the meantime, should there be any material changes to the plans in year, you will be required to advise me of these changes through an 'Accountable Officer' letter.

I trust that this letter provides clarity on our expectations, but should you have any queries then please do not hesitate to contact me.

Yours sincerely



Judith Paget CBE

cc: Nick Wood, Deputy Chief Executive NHS Wales
Samia Edmonds, Director of Strategic Planning
Hywel Jones, Director of Finance
Jeremy Griffith, Director of Operations

Annex 1

Key Performance Indicators

Whilst I recognise you may not be directly responsible or accountable for all of these, it is important that you are sighted on the wider expectations of the system. There may be some areas where you can contribute and support health boards. I want to see that support is made readily available through the monitoring process so that I am assured your organisation is playing its part as a system leader.

Key Performance Indicators	Definition and Target
Urgent and Emergency Care	<p>Number of patients who spend 12 hours or more in all major and minor emergency care facilities from arrival to admission, transfer or discharge</p> <p>March 2024 baseline 20% Reduction by September 2024 Further 20% Reduction by March 2025</p> <p>Number of ambulance patient handovers over 1 hour</p> <p>March 2024 baseline 30% Reduction by December 2024</p>
Cancer	<p>Percentage of Patients starting first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)</p> <p>60% performance by December 2024 70% performance by March 2025</p>
Diagnostics	<p>Number of patients waiting more than 8 weeks for a specified diagnostic.</p> <p>95% to be zero by December 2024</p>
Elective Care	<p>Number of patients waiting over 52 weeks for a new outpatient appointment</p> <p>March 2024 baseline 40% reduction by end of September 2024 Zero by March 2025</p> <p>Number of patients waiting more than 104 weeks for referral to treatment</p> <p>Zero by end of December 2024</p>
Mental Health	<p>Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS for people aged 16 years.</p> <p>Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS for adults aged 18 years or over.</p> <p>80% for both by December 2024</p>

