



Minutes of the Welsh Health Specialised Services Committee
Meeting of the Joint Committee
held on 17 January 2017, 1.15pm

Conference Room 1 and 2 St Cadoc's Hospital, Lodge
Road, Caerleon, Newport NP18 3XQ

Members Present

Ann Lloyd	(AL)	Chair
Lyn Meadows	(LM)	Vice Chair
Marcus Longley	(ML)	Independent Member
Chris Turner	(CT)	Independent Member/ Audit Lead
Gary Doherty	(GD)	Chief Executive for Betsi Cadwaladr UHB (via videoconference)
Sharon Hopkins	(SH)	Interim Chief Executive, Cardiff and Vale UHB
Steve Moore	(SM)	Chief Executive, Hywel Dda UHB
Judith Paget	(JP)	Chief Executive, Aneurin Bevan UHB (item 3 only)
Carol Shillabeer	(CS)	Chief Executive, Powys THB
Allison Williams	(AW)	Chief Executive, Cwm Taf UHB
Stuart Davies	(SD)	Acting Managing Director of Specialised and Tertiary Services Commissioning, WHSSC
Carole Bell	(CB)	Director of Nursing and Quality, WHSSC
Sian Lewis	(SL)	Acting Medical Director, WHSSC

Associate Members

Chris Koehli	(CK)	Interim Chair of Quality and Patient Safety Committee
John Williams	(JW)	Chair of Welsh Renal Clinical Network

Apologies:

Tracey Cooper	(TC)	Tracey Cooper, Chief Executive, Public Health Wales
Steve Ham	(SH)	Chief Executive, Velindre NHS Trust
Paul Roberts	(PR)	Chief Executive, Abertawe Bro Morgannwg UHB

In Attendance

Paul Buss	(PB)	Medical Director, Aneurin Bevan UHB
Sian Harrop-Griffiths	(SHG)	Director of Strategy, Abertawe Bro Morgannwg UHB
Phil Jones	(PJ)	Consultant Physician and Hospital Director of Bronlais Hospital
Ian Langfield	(IL)	Acting Director of Planning, WHSSC
Kevin Smith	(KS)	Committee Secretary and Head of Corporate Services, WHSSC

Minutes:

Juliana Field	(JF)	Corporate Governance Officer, WHSSC
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The Meeting opened at **1.20pm**



JC059 **Welcome, Introductions and Apologies**

AL opened the meeting and welcomed members and the public to the meeting.

Apologies were received from Paul Roberts and it was noted that Sian Harrop-Griffiths, Director of Strategy, ABMUHB, attended the meeting on his behalf.

JC060 **WHSSC Integrated Commissioning Plan (ICP) 2017-20**

Members received the pre-circulated paper which described the process used to develop the WHSSC 2017-20 ICP, presented recommendations regarding the finalisation of the Plan, submission to Welsh Government by 27 January, and detailed the further work required to submit a final version to the Joint Committee in March 2017 for final approval.

Members received a presentation providing a high-level overview of the key themes from the Plan. A financial reconciliation of the 2017- 20 ICP to the 2016-19 ICP year two assumptions was included, showing that £5.3m of red schemes were catered for within the £23m provision indicated in the 2016-17 ICP base plan. Members were also briefed on the further actions required to ensure approval of the ICP within the required timeline.

The Chair provided an update on recent communications with Welsh Government regarding the constraints presented by the revised timeline for approval of the ICP and LHB Integrated Medium Term Plans (IMTPs). Members were advised that a positive response was received from the Welsh Government, which acknowledged the concerns raised and encouraged best efforts in finalising the ICP in conjunction with development of the IMTPs. The Chair invited members to share their views on the development process and offer suggestions on a more effective co-produced approach of the ICP and IMTPs for future years.

Members discussed the challenges of aligning available funds to the financial assumptions included within the ICP and the anticipated future cost pressures across the healthcare system in Wales. In relation to growth within the ICP it was noted that the majority of this related to existing services and that any innovation was already subjected to a high level of scrutiny. The full year impact of schemes approved during 2016-17 accounted for a relatively small proportion of overall spending.

Regarding the progress on development of a strategy for specialised services and sustainability of services, it was noted that the ICP provided some detail regarding the strategy for specialised services over the next year and that a number of the recent service reviews had been focussed in areas where sustainability had been noted as an issue.

Members also discussed sustainability and risk in the context of the importance of effective horizon scanning.



In response to observations from members, the Chair confirmed the intention to increase the rigor applied to commissioning value for money, focus on sustainability of services and introduce enhanced clinical review.

It was suggested that consideration of whole pathways was desirable to support realisation of benefits across the entire pathway, rather than focusing on specific specialist elements in isolation. The Chair invited LHB members to consider this and suggest suitable pathways for review.

A discussion was held around the role of the proposed Clinical Prioritisation Advisory Group which would review red and amber schemes to provide clinical guidance in relation to mitigation of clinical risk and prioritisation areas for investment.

It was noted that the WHSSC team would be working with LHB Directors of Finance to ensure that the financial assumptions in the 2017-20 ICP were reflected in LHB IMTPs.

Members extended their thanks to the WHSSC Team and the Management Group for their work and commitment in developing the ICP to date.

Members **resolved** to:

- **Receive** assurance regarding the development process which underpinned the 2017-20 ICP;
- **Support** the development of a proposal to increase the staffing within the Quality and Planning Directorates;
- **Support** the further work required to complete a final version of the plan for Joint Committee approval and submission to Welsh Government in March 2017
 - Review timescale for developing and agreeing WHSSC ICP;
 - Establish a Clinical Prioritisation Advisory Group to review Red and Amber schemes;
 - Explore opportunities for aligning existing Health Board Co-production work with ICP;
 - Undertake stakeholder engagement;
 - Discussion with Welsh Government regarding retained funding, WG priorities, and critical tariff assumptions; and
- **Note** the constraints which have prevented completion of the ICP in line with Welsh Government timescale.

JC061 **Clinician's Story**

The Chair welcomed Dr Phil Jones, Consultant Physician and Hospital Director of Bronlais Hospital, to the meeting. PJ presented an overview of the spinal and Neuro-rehabilitation services offering a clinician's perspective on both the service and patient experience.

PJ presented cases from both the past (1987) and present day (2014) noting the ways in which the services had developed positively over the years. In the more recent example, the initial care given to the patient was



exemplary. However, the issues arose during the follow up phase and specifically within the neuro-rehabilitation service where there were significant delays in trying to arrange a preliminary assessment for the patient. In this specific case there was third party funding availability and it was this which enabled an assessment to be undertaken in a more timely fashion. PJ provided a detailed overview of the process outlining the difficulties including (1) the family having to travel across Wales from the west to Cardiff and Bristol, and (2) repatriating the patient to a local service due to the lack of facilities and qualified professionals

It was noted that despite the progress made within neuro-services, there appeared to have been a focus on the 'front-end' of the service. It was important to ensure that there was integration between acute services, specialist rehabilitation, step down rehabilitation, specialist support and support for the family.

PJ noted that he felt that there was a need to look at a quality of life perspective and to view the pathway as a whole rather than just the initial phase of treatment.

Members acknowledged the difficulties recognising elements which underpinned the rationale for undertaking a review of the neurosciences services in Wales.

A discussion was held regarding the clinical benefits and outcomes, how to measure value for patients, prioritisation of services from limited finances, limited opportunity for generating evidence of the longer term outcomes for patients and understanding patient and relatives' expectations.

Members extended their thanks to PJ for his interesting and insightful presentation.

JC062 **Declarations of Interest**

There were no declarations to note.

JC063 **Accuracy of Minutes of the meetings held 22 November 2016**

Members approved the minutes of the meeting held on 22 November 2016 as a true and accurate record.

JC064 **Action Log and Matters Arising**

Action Log

Members reviewed the action log and noted the updates provided.

JC018- KS explained that this matter had been dealt with and was now closed.

Matters Arising

There were no matters arising.



JC065 **Report from the Chair of WHSSC**

Members received the report which provided an update of the issues considered by the Chair since the last report to Joint Committee.

Members noted that the Chair was due to meet with the Cabinet Secretary and would be discussing a number of key issues including PET scans, Neuroendocrine Tumours (NET) services, Transgender services, Thoracic surgery services, Neonatal services, sickle cell anaemia, review of high risk services, governance arrangements for WHSSC, WHSSC resources and the Integrated Commissioning Plan 2017-20.

The Chair extended her thanks to Maria Battle, Chair of Cardiff and Vale University Health Board and Carole Bell for their support in achieving a positive outcome in regard to the work relating to the NET service.

JC066 **Report from the Acting Managing Director of WHSSC**

Members received the report which provided an update on key issues that have arisen since the last meeting. The following areas were highlighted to note.

Medical Directorate Structure

Members noted that a review of the WHSSC Medical Directorate Structure had been undertaken with the objective of enhancing the clinical leadership within the organisation. A detailed report was included in the meeting papers for information.

Left Ventricular Assist Devices (LVADs)

Members noted that the Management Group approved the English Commissioning Policy and Service Specification for LVADs as an interim position.

Neuroendocrine Tumours (NET)

An update was received on the action taken since funding had been approved to implement the initial development of a NET service for south Wales. Members offered their support to the group which had been established to monitor the first phase of the service, and to the WHSSC team, recognising the sensitivities around this service.

JC067 **Neonatal Intensive Care Unit (NICU) - Medical Workforce Update**

Members received an update on the NICU medical workforce position, which included progress on the BAPIO supported recruitment process, the current risk log, a description of the employment models that had been considered by the Workforce Task and Finish Group, and draft contingency and escalation plans for south Wales.

Members noted that the current vacancy position across all three NICUs was positive and provided a good position as work moved forward.

Members were provided with an overview of the employment model as detailed in section 3.4 of the report and noted that detail regarding the preferred alliance model would be presented at the WHSSC Joint Committee meeting in March 2017.

Members were asked to support a proposal to maintain the neonatal network leadership of the task and finish group through a temporary governance arrangement between the WHSSC and the NHS Wales Collaborative. AW suggested that SL might want to consider putting into place a memorandum of understanding between WHSSC and the Collaborative to record the temporary governance structure.

A question was raised regarding availability of the higher level qualification for MTIs within Wales. It was noted that whilst a qualification was already available, there was currently no curriculum specific to Wales; however it was believed that there was an appetite for this happen.

Members **resolved** to:

- **Receive assurance** that the predicted workforce for March 2017 will deliver a sustainable model across the three Neonatal Intensive Care units in South Wales;
- **Support** maintaining the neonatal network leadership of the task and finish group through a temporary governance arrangement between the Welsh Health Specialised Services Committee and the NHS Wales Collaborative;
- **Note** that a comprehensive workforce model with supporting governance arrangements will be presented to the March Joint Committee meeting; and
- **Note** the draft escalation and continuity plan for completion by the March 2017 Joint Committee.

JC068 **Neurosciences Commissioning Plan**

Members received a paper which outlined the proposed process for developing the neuro-radiology element of the Neurosciences Commissioning Plan and provided an update on the development of the five year commissioning plan for Neurosciences.

Members were provided with an overview of the key issues relating to each service area detailed within the report. A discussion was held around the development of a model of care for the whole system neurosciences plan and that concerns had previously been noted regarding the risk of further requirements for piecemeal investment and a preference was voiced that, if required, additional funding should be used to support the team to complete the review and revise the system accordingly, rather than investing on an ad hoc basis until the review process was complete. It was noted that the review remained on schedule; however the review element of the process may run beyond March 2017.

Members suggested sources other than a Royal College of Radiologists



Invited Review that might be considered to provide expert external advice and support to the Neuro-radiology element of the Plan.

Clarity was sought in relation to the paragraph provided at the bottom of page two which suggested that despite being recorded as complete, some of the recommendations from the previous strategic review of neurosciences had not been completed. It was suggested that it may have been the case that following the review, the recommendations were implemented then later reversed as services moved forward. Members agreed that this should be further explored by the WHSSC team and clarity provided.

[Secretary's Note regarding previous paragraph: The main recommendation that had been deemed as successfully implemented in update reports since the Axford Review, that of "urgently establishing a single neuro-surgical service, with all emergency and intra-cranial activity being undertaken at the University Hospital..." was accepted to have not been fully implemented as, whilst a transfer of services took place, two of the neurosurgeons had not transferred to UHW, and now undertook spinal surgery as part of the Health Board's spinal surgery service at Morriston Hospital. Further work is required to clarify the pathways for patients from ABMUHB and HDUHB requiring non elective spinal surgery. *(Note the information in this paragraph was provided within the report but not explicitly discussed at the meeting and is provided for clarification)]*

Members noted their disappointment that Public Health Wales (PHW) was unable to support WHSSC by the provision of Healthcare Needs Assessments. Members agreed this was unacceptable and noted that the Chair had formally raised this with the Acting Chair at PHW and that WHSSC had since terminated its Service Level Agreement (SLA) with PHW and was looking toward other means of replacing the relevant support.

Members **resolved** to:

- **Support** the proposal to commission expert external advice and support to the Neuro-radiology element of the Plan via the Royal College of Radiology's service review process or an alternative source; and
- **Note** the update on the five year Commissioning Plan for Specialised Neurosciences.

JC069 **Risk Sharing Review Update**

Members received a report providing an update on progress of the Risk Sharing Review and the validation previously requested.

SD provided a high level overview of the technical elements of the process and assurance was received that all of the concerns of Health Boards had been taken through the Finance Working Group and were fully reflected in the paper.

Members acknowledged previous discussions on the points of principle

agreed and delegation of work to the Finance Working Group which reported directly into the All Wales NHS Directors of Finance Group.

A discussion was held which provided clarity regarding the available options and the need to ensure that there was a flexible rather than rigid process in place. It was recommended for the purposes of financial planning that (1) 2011-12 was to be used as the base year, and (2) LHBs consider providing for a third of the pooling adjustment (as previously advised), as whilst there were some areas outstanding for validation, this was coherent with the direction of travel that LHBs were experiencing.

It was agreed that the WHSSC team would resolve the remaining technical details and implementation options with the Finance Working Group for implementation by Health Board Directors of Finance, to evaluate the task to be concluded.

Members **resolved** to:

- **Support** the following recommendations for approval by the Joint Committee;
- **Receive assurance** that there are robust processes in place to ensure delivery of the Risk Sharing Review; and
- **Note** the information presented within the report.

JC070 **Delivery of the Integrated Commissioning Plan 2016-17**

Members received a paper which provided an update on the delivery of the Integrated Commissioning Plan for Specialised Services 2016-17 at the end of November 2016, including the Funding Release Schedule, Progress against the Work Plan, and Risk Management Summary.

Members **resolved** to:

- **Note** the progress made in the delivery of the 2016/17 ICP;
- **Note** the funding release proforma schedule; and
- **Note** the risk management summary.

JC071 **Performance Dashboard**

Members received an overview of the performance dashboard for October 2016.

Members noted that there had been an overall deterioration in performance, with winter pressures impacting on the delivery of services from tertiary providers.

The content of the report was reviewed and it was suggested that a greater level of information around patient outcome and quality assurance should be included; it was anticipated that this would be possible following the establishment of a Quality Assurance team within WHSSC.

Members discussed the referral to treatment performance; assurance was provided that accountability sat with providers for performance and financial



issues.

Members **resolved** to:

- **Note** current performance and the action being undertaken to address areas of non-compliance.

JC072 **Financial Performance Report**

Members received an overview of the Financial Performance Report which set out the estimated financial position for WHSSC for the eighth month of 2016/17.

Members noted that the movement from the previous month was a deterioration of £450k to date and a forecast deterioration of £948k for year-end. The movement was due to various adverse provisions against the CVUHB and ABMUHB and NHS England contracts, versus a favourable release of Development budget.

Members noted that the month 9 position was positive and showed improvement with an anticipated £3.7m year-end underspend.

Members **resolved** to:

- **Note** the current financial position and forecast year-end position.

JC073 **Medical Leadership Proposals**

Members received the report which presented the planned model of medical leadership in WHSSC which was designed to address the recommendations of the Good Governance Institute and Healthcare Inspectorate Wales Reviews.

Members noted that there was a focus on increasing clinical drive within WHSSC. A discussion was held around the way in which the LHBs could encourage clinical staff to apply for the roles and support them in undertaking the roles.

Members **resolved** to:

- **Note** the planned model of medical leadership within WHSSC.

JC074 **Reports from the Joint Sub-committees and Advisory Group Chairs'**

Members received the following reports from the Joint Sub-committees and Advisory Group Chairs':

Sub Committees

WHSSC Quality and Patient Safety Committee

Members noted the update from the meeting held 28 November 2016

All Wales Individual Patient Funding Request Panel

Members noted the update from the meeting held 14 December 2016

Welsh Renal Clinical Network



Members noted the update from the meeting held 2 December 2016

It was noted that Health Boards had an open invitation to the Network Board Meeting and at present there was limited Health Board representation at the meetings; members were asked to encourage appropriate staff to attend.

Members noted the Chronic Kidney Disease (CKD) WRCN view and approach which had been provided along with the report.

WHSSC Management Group

Members noted the update from the meetings held 24 November 2016 and 15 December 2016.

Members noted that the terms of reference for the Management Group would be reviewed as part of the wider culture review of WHSSC.

It was noted that concerns had been raised around performance within Bariatric services and that over the next quarter work would be carried out to review provider arrangements for the service to ensure the service was protected.

Advisory Groups

Wales Neonatal Network Steering Group

Members noted the update from the meeting held 8 November 2016

All Wales Gender Dysphoria Partnership Board

Members noted the update from the meeting held 3 January 2017.


Members noted that the revised terms of reference would be brought to the Joint Committee for approval.

Members were asked to and supported the recommendation that the name of the Gender Dysphoria Partnership Board be changed, with immediate effect, to NHS Wales Gender Identity Partnership Group.

JC075 **Date and Time of Next Meeting**

It was confirmed that the next meeting of the Joint Committee would be held on 28 March 2017.

The public meeting concluded at approximately 15.20pm

Chair's Signature: 

Date: 24/4/17