

**Minutes of the Welsh Health Specialised Services Committee**  
**Meeting of the Joint Committee**  
held on 28 March 2017, 9.30am

Boardroom, Welsh NHS Confederation, Ty Phoenix, 8  
Cathedral Road, Cardiff, CF11 9LJ

**Members Present**

Ann Lloyd	(AL)	Chair
Lyn Meadows	(LM)	Vice Chair
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
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**

Tracey Cooper	(TC)	Tracey Cooper, Chief Executive, Public Health Wales
John Williams	(JW)	Chair of Welsh Renal Clinical Network

**Apologies:**

Steve Ham	(SH)	Chief Executive, Velindre NHS Trust
Alex Howells	(AH)	Acting Chief Executive, Abertawe Bro Morgannwg UHB
Chris Koehli	(CK)	Interim Chair of Quality and Patient Safety Committee
Marcus Longley	(ML)	Independent Member

**In Attendance**

Elizabeth Gallagher	(EG)	Neonatal Network Manager (Item 10)
Hamish Laing	(HL)	Medical Director, Abertawe Bro Morgannwg UHB
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 **9.25am**

JC076 **Welcome, Introductions and Apologies**

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

Apologies were received from Alex Howells, Marcus Longley, Chris Koehli and Steve Ham. It was noted that Hamish Laing was in attendance at the meeting on behalf of Alex Howells.

JC077 **Patient Story**

CB presented two patient stories on behalf of Jackie and Elizabeth who had received cochlear implants. Members noted the circumstances which lead to the treatment and the impact it had on their respective lives.

Members asked CB to extend their thanks to Jackie and Elizabeth for sharing their stories.

JC078 **Declarations of Interest**

There were no declarations to note.

JC079 **Accuracy of Minutes of the meetings held 17 January 2017**

Members approved the minutes of the meeting held on 17 January 2017 as a true and accurate record.

JC080 **Action Log and Matters Arising**

**Action Log**

Members reviewed the action log for the year and noted the updates provided.

It was requested that the way in which actions were recorded and monitored be changed in the future to provide greater granularity around each action and its closure.

**Matters Arising**

GD raised a question regarding the minute around Risk Sharing and the actions taken. Members agreed that, given the current financial sensitivities relating to the development of Health Board plans, this would be discussed in the private session of the meeting.

JC081 **Report from the Chair of WHSSC**

Members received and noted the report from the Chair of WHSSC as presented.

Clarification was provided that due to unforeseen circumstances the Chair

was unable to attend the Welsh NHS Confederation Annual Conference.

### **Chair's Action**

Members noted the urgent action taken in relation to universal screening of blood products for Hepatitis E Virus, and ratified the decision.

Members **resolved** to:

- **Note** the contents of the report; and
- **Ratify** the Chair's action referred to in the report.

### JC082 **Report from the Acting Managing Director of WHSSC**

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

#### **Collective Commissioning**

Members were advised that the Management Group had received papers on 1) Inherited Bleeding Disorders (IBD), and 2) Endoscopic Mucosal Resection (EMR) and Radio Frequency Ablation (RFA) for Oesophageal Cancer.

It was noted that the Management Group members agreed to defer the decision made in 2015 relating to the transfer of resource to WHSSC to bring IBD under a single commissioner in the 2017-18 WHSSC workplan, that the proposal for WHSSC to take on full commissioning responsibility for EMR/RFA was not supported and that the proposal to fund an additional staff member in support of these activities, from anticipated costs savings, was also not supported. SD had written to Chief Executives advising them that, as a result of these decisions, the responsibility for these services now lay with Local health Boards.

Members questioned the governance process in relation to the Management Group overturning a decision made by the JC in 2015. It was noted that the decision was taken to defer the scheme, rather than to abort it, as there was insufficient resource available to progress it at the current time.

It was noted that the issues around the availability of resources to deliver work had been a recurrent theme and that it was important to ensure that such constraints were made clear when WHSSC was asked to take on such additional projects.

#### **Funding Release: Bone Anchored Hearing Aids (BAHA) and Cochlear growth South Wales**

Members noted that the Management Group had approved funding to support the delivery of the 52 week waiting time standards and maintenance requirements for cochlear implants and BAHA in South Wales. Members were informed that assurances had been received by the Group that the schemes would be completed by the end of the financial year.

Members raised the issue of ensuring that, going forward, there is an improved demand and capacity planning review for all services, which will improve visibility of recurrent capacity issues and ensure that there is value for money.

The Chair supported the requirement to have an explicit value for money assessment for every service commissioned or invested in, and clarity of actions to be taken where value for money was not achieved.

### **NHS England consultation – Congenital heart disease**

It was noted that Management Group had received a paper summarising the situation and that minimal impact was expected for Welsh patients.

### **Individual Patient Funding Requests (IPFR): Independent Review**

Members noted that the Independent Review had been published in January.

The Chair expressed disappointment that the review panel had not met the Chair of the WHSSC IPFR panel, given her expert knowledge. Members noted that the Chair of the WHSSC IPFR panel had provided a written response to the review.

The Cabinet Secretary's response, on 21 March, had accepted all of the review's recommendations.

Members enquired as to whether or not the response to the review provided by the Chair of the WHSSC IPFR panel could be circulated to members for information. It was agreed that Chair would speak with the Chair of the WHSSC IPFR panel in relation to this.

#### **Action:**

- **Chair to speak with the Chair of the WHSSC IPFR Panel regarding the possibility of circulating her response to the Independent Review Panel to WHSSC Joint Committee Members.**

Members **resolved** to:

- Note the content of the report.

#### JC083 **WHSSC Integrated Commissioning Plan 2017-20**

It was noted that that a Technical Plan had been provided to members which was to be reviewed as part of a presentation to be received in the Joint Committee's private session.

#### JC084 **Neonatal Intensive Care Unit Medical Workforce Employment Models**

Members received a paper which presented an option appraisal of three

potential employment models to support a sustainable neonatal medical workforce across South Wales and described the governance arrangements required for these models.

Members noted the work undertaken by the Task and Finish Group and thanks were extended in particular to Cathy Brooks, Head of Workforce Planning, Aneurin Bevan UHB.

SL provided an overview of the options presented within the paper and the recommendation that the Alliance model to be taken forward by the Task and Finish Group. Members discussed the options presented and supported the recommendation for the Alliance model. It was suggested that consideration be given to contracts for professionals recruited from overseas, who required an organisation specific permit to work, being placed with NHS Wales Shared Services Partnership to facilitate flexibility within the service.

Members discussed the requirement to monitor the success of the Alliance model and to report back in 12 months time. It was agreed that this report would be presented to the South Wales Workforce Group in the first instance and that any issues arising would be reported back to the Joint Committee.

Members **resolved** to:

- **Note** the Task and Finish Group reaffirming their recommendation that an Alliance workforce model is best suited to managing Neonatal workforce issues
- **Approve** that the functions of the Alliance model be taken forward by the South Central Alliance Neonatal Task and Finish Group, with revised terms of reference and membership.

#### JC085 **Wales Neonatal Network – Standards 3rd Edition**

Members received a report which presented the final draft of the revised All Wales Neonatal Standards – 3<sup>rd</sup> Edition 2017 (the standards) and discussed the process of peer review in assessing the units against these revised standards, and recommend that the standards and baseline assessment are submitted to Welsh Government for approval.

EG provided an overview of the paper and background to the development of the standards, sought further comments from members and requested support for the planned baseline assessment and process for referring to Welsh Government.

Members discussed the proposed standards and it was noted that further clarity was required as to which were mandatory, safety requirements or aspirational and the potential financial impact of compliance with the standards. It was also suggested that clarity be provided regarding the

governance and leadership of the entity in which the service/network sits and the processes by which they are linked.

A discussion was held around the requirement for the Network to work in an integrated manner with commissioners rather than assuming sole responsibility and a challenge was presented that some of the standard's domains may already sit as part of Health Boards' overarching responsibility rather than individual neonatal units (e.g. fire safety).

It was suggested that further consideration be given to the section relating to peer review and how this could be taken forward across all delivery groups and networks, and how work might be linked through the Collaborative, not just in relation to standards but also looking at value for money and other issues which challenge the system.

A query was made around the level of discussion that had taken place with the Deanery regarding impact on training. It was noted that EG had raised this with the Network's clinical lead who was currently in the process of reviewing this.

It was agreed that EG would provide members with an update on any amendments made following consideration of the points discussed.

Members **resolved** to:

- **Note** the revised Wales Neonatal Standards - 3rd Edition March 2017;
- **Support** in principle the revised standards and the planned baseline assessment against the standards of each neonatal unit in Wales; and
- **Support** the suggested process for referring the standards to Welsh Government for approval, subject to the results of the baseline assessment and sight of a further revised draft of the standards.

## JC086 **Thoracic Surgery**

Members received the paper which included updates on the Thoracic Surgery Review and the Additional Capacity Project. The paper included a 'short form' version of the report of the Royal College of Surgeons (RCS) Invited Review of Thoracic Surgery in Wales.

### **Thoracic Surgery Review**

Members received an overview of and background to the purpose of the RCS Invited Review, noting that it was anticipated that the review would provide an overview of strategic service issues together with insight into best standards that could be achieved in Wales. This would inform the development of the Service Specification.

It was noted that it had been the intention of WHSSC to publish the full report from the RCS; however, on receipt of the report a number of issues had been raised that were outside of the commissioned scope of the review,

which it was considered should be dealt with separately to the commissioned strategic report.

Discussions had been held with the RCS about the publication of the report and WHSSC's concerns about the inclusion of personally identifiable, unsubstantiated information within the body of the report. It was agreed that there was a real need to be able to publish the reports conclusions in respect of service design and best practice standards in order to ensure transparency in the future commissioning decisions.

The Chair informed members that, at her request, a 'short form', abridged version of the report would be published, as presented to the meeting, which would include the strategic outcome of the review. However, the full report, which included confidential person identifiable information, would not be published. Assurances would be provided to the Joint Committee in private session that appropriate action was being taken in regard to the matters contained within the more confidential content of the full report.

It was explained that the RCS had suggested that a redacted version of the full document be published. The Chair explained that the WHSSC Team did not feel that this was the right approach, as it was likely to dilute focus on the strategic service issues. The Chair also explained that she had received a letter from the RCS earlier in the day requesting that the 'short form' report contained in the meeting papers be replaced by a redacted version of the full report.

Members questioned whether opinions and quotations contained within the report had been triangulated or otherwise verified and whether contributors to the report had been given an opportunity to review the document for accuracy. It was explained the RCS methodology relied on triangulation of opinions and quotations but that WHSSC had been informed that contributors had not been given an opportunity to review the report for accuracy.

AW offered her full support for the Chair's actions and noted that from reading the report it was clear that the pertinent commissioning elements had been identified and that the action taken by the Chair regarding publication of a 'short form' version of the report was wholly appropriate. The other members present confirmed that they also supported the approach taken by the Chair.

Members noted that KS would be drafting a response to the letter received from the RCS regarding the publication of the 'short form' report and would reference the discussions at this meeting.

Members discussed what learning could be drawn from this experience. It was noted that for any future reviews consideration should be given to including guidance within the terms of reference on how any findings

identified outside of scope required should be managed.

Members received an overview of the work carried out by the Project Board over recent months and, in particular, the development of the Service Specification. It was noted that due to quoracy issues written confirmation had been received from each member of the Project Board to confirm agreement of the Service Specification, including the tracked changes, as presented to the Joint Committee.

Assurance was provided that the work required in the Service Specification would be delivered within the current financial envelope. The need to test that the additional non-recurrent funding in 2016-17 had achieved its intention was noted.

It was noted that the Specification included a requirement for minimum volumes. It was suggested that there was an opportunity to include a provision for benchmarking value for money through the specification using productivity targets if this was not to be expressly included through SLAs or elsewhere.

IL confirmed that the Project Board included representation from the Management Group.

It was suggested that on page 11 of the Service Specification consideration be given to the use the term 'sufficient' when referring to 'access to dedicated high dependency beds' and 'access to the intensive care unit'.

Members discussed the provider and commissioner responsibilities for efficiency improvements the need to ensure that there is clarity on this for both parties through the SLA and that the payment system used to fund the service reflects this.

Assurances were provided around the need to ensure demand and capacity planning is carried out for the service and the issues resulting in the requirement for additional capacity are clearly addressed.

Members noted that advice had been sought regarding the requirements for consultation and that clarification had been received that this could be dealt with through an engagement process.

Members noted the proposed revised process and timeline to completion of the Thoracic Surgery Review as detailed in the report.

### **Additional Capacity Project**

It was noted that additional capacity for south east Wales patients had been achieved through weekend working at Cardiff & Vale UHB, where the initiative had begun in February and was scheduled to complete after two months. Additional capacity for south west Wales had been identified from

an English provider; the pathway had been developed, providers assessed, patient information developed and detailed discussions had begun with the selected provider on 15 March with capacity about to come on line.

Members noted that SL had chaired a clinically led group to discuss the pathway for south west Wales patients and lessons learned from previous outsourcing programmes.

Members **resolved** to:

### **Thoracic Surgery Review**

- **Receive** the RCS 'short form' report;
- **Approve** the thoracic surgery Service Specification;
- **Approve** the proposed process for completing the review, in particular, the approach to stakeholder engagement and the role of the independent panel.

### **Additional Capacity Project**

- **Note** the progress implementing the Additional Capacity Project.

JC087

### **Neurosciences Strategy**

Members received the report which provided an overview of the five-year Commissioning Plan for Specialised Neurosciences.

It was noted that the final report would be presented at the May 2017 Joint Committee meeting. Members noted the progress made to date within a number of areas.

The report identified three key schemes. The three schemes represented a cross section of the specialised neurosciences programme and would be the main focus for 2017-18 to support the stabilisation of neuroscience services. The services were identified as (1) provision and utilisation of Specialised Rehabilitation Services; (2) provision of Paediatric Neurology; and (3) delivery of Neuro-Radiology.

Members discussed the requirement to ensure that a whole picture for neurosciences was available; given fragilities in the service it was felt important to ensure that any solution was sustainable across the whole service. Members noted that there had been significant investment in neurosciences and it was requested that information be provided which gave clarity on progression within the service and commissioner/provider responsibilities. It was noted that the final report in May 2017 would provide the current service mapped against best standards, identify any gaps and comparisons with other major providers of neuroscience services to make sure there is a baseline for comparison. It was suggested that further consideration be given to value of outcomes and that spinal surgery not get overlooked.

Members expressed disappointment that Public Health Wales was unable to provide any needs assessment. It was noted that WHSSC Team was looking at alternative ways of dealing with this.

TC explained that Public Health Wales were looking at a strategic review of its services and SD and SL would be included as part of the discussions.

It was agreed that the final paper would be circulated with sufficient time to allow members to raise any questions and provide feedback prior to the May 2017 meeting.

Members **resolved** to:

- **Note** the overview of the five year Commissioning Strategy for Specialised Neurosciences.
- **Support** the Neurosciences and Complex Conditions Programme Team initially focusing on the three outlined areas.

#### JC088 **Delivery of the Integrated Commissioning Plan 2016-17**

Members received the paper which provided an update on the delivery of the Integrated Commissioning Plan for Specialised Services 2016-17 at the end of January 2017.

AW requested that feedback on all additional investments made in 2016-17 be presented to the Management Group for scrutiny.

Members **resolved** to:

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

#### JC089 **Performance Report**

Members received the report for December 2016, which provided a summary of the key issues arising and detailed the action being undertaken to address areas of non-compliance.

Members noted performance issues in Cardiac Surgery, Plastic Surgery, Paediatric Surgery, Neurosurgery, and Bariatric Surgery. It was further noted that there had been a decline in performance against the Posture Mobility 26 week Referral to Treatment target which had been attributed to staff absence.

Members noted the appointment of a planning analyst who had been seconded to the Team to establish a consistent approach to the reporting process. It was noted that new escalation process had been established within WHSSC and that any services/ concerns regarded as high risk were

reported directly to the Cabinet Secretary for Health, Well-being and Sport.

AW requested that an explanation of the deterioration in Cardiac Surgery be reported to the Management Group for further scrutiny, particularly given the extra investment approved for this service. SD reported that there had been some recent recruitment of theatre staff.

Members **resolved** to:

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

#### JC090 **Financial Performance Report**

Members received the finance report for Month 10 and noted the year to date under spend of £6,110k and forecast year end under spend of £5,165k.

Members **resolved** to:

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

#### JC091 **WHSSC Joint Committee Annual Business Cycle**

Members received the paper which outlined the Joint Committee's Annual Business Cycle for 2017-18.

Members **resolved** to:

- **Note** the content of the report, including the schedule of meetings for 2017-18

#### JC092 **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**

Attention was drawn to the long standing concern that BCUHB's Blood & Marrow Transplant service had failed to achieve JACIE accredited status and that de-commissioning the service was being considered. GD had discussed the issues with the service and reported that he was hoping that a flexible and innovative approach could be developed with the Christie.

##### **All Wales Individual Patient Funding Request Panel**

Members noted the update from the meeting held 25 February 2017.

##### **Welsh Renal Clinical Network**

Members noted the update from the meeting held 2 February 2017.

**WHSSC Management Group**

Members noted the update from the meetings held 26 January 2017 and 23 February 2017.

**Advisory Groups**

**Wales Neonatal Network Steering Group**

Members noted the update from the meeting held 28 February 2017.

**All Wales Posture and Mobility Partnership Board**

Members noted the update from the meeting held 6 March 2017, and were invited to attend the service Audit Day which was scheduled for 6 June 2017.

JC093 **Date and Time of Next Meeting**

It was confirmed that the next meeting of the Joint Committee would be held on 30 May 2017.

The public meeting concluded at approximately **11.10am**

**Chair's Signature:** .....

**Date:** .....