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Pwyllgor Gwasanaethau Iechyd
Arbenigol Cymru (PGIAC)
Welsh Health Specialised
Services Committee (WHSSC)

WELSH HEALTH SPECIALISED SERVICES COMMITTEE JOINT COMMITTEE – NOVEMBER 2016

Welsh Health Specialised Services held its latest public meeting on 22 November 2016. This briefing sets out the key areas of discussion and aims to ensure everyone is kept up to date with what's happening in Welsh Health Specialised Services.

The papers for the November meeting are available [here](#).

Lyn Meadows (Vice Chair), Marcus Langley and Chris Turner were introduced as new Independent Members and Kevin Smith as new Committee Secretary.

Action Log

Members **noted** the action log. Members received updates on:

- JC001 Specialised Services
- JC012 Commissioning of Organ Donation Services from NHS Blood and Transplant

Chair's Report

Members **noted** the Chairs report.

Acting Managing Director's Report

Members **noted** the Acting Managing Director's report and in particular:

- Thoracic Surgery Review
A proposal to extend the timeline for the review would be considered;
- Neurosciences
The high risk schemes delegated to the Management Group for decision would be considered at the November meeting of the Management Group. The Acting Director of Planning updated the Joint Committee on the progress of the ongoing work on developing the Commissioning Strategy for Specialised Neurosciences Services;
- Ventricular Assist Devices
It was **agreed** that a paper would be tabled at the Management Group to be held on 24th November 2016 that would detail the impact of adopting the English policy as an interim measure. Following consideration by Management Group, WHSSC Chair's action will be considered for adoption of the English policy until a

Welsh policy was developed and considered through the Integrated Commissioning Plan;

- Blood Marrow Transplantation
Expansion of service provision for South Wales had been approved by Management Group; and
- Genetics
Increased investment had been approved by Management Group.

Non-Financial Outcome for Gender Identity Services Care Pathway in Wales

Members **received** a report on the outcomes of the non financial option appraisal exercise and scoring of the short listed options for the future configuration of the All Wales Specialist Gender Identity Services (SGIS). The paper provided detail of the rationale captured for each of the scores provided and presented the detailed sensitivity analysis that had been undertaken following to the scoring exercise. The paper confirmed the preferred option(s), and the ranking of all options appraised, from a non financial perspective.

Members welcomed the work undertaken, **noted** the previous difficulties in achieving progress and **acknowledged** the need to maintain momentum. The commitment of all LHBs to taking this work forward was **noted**.

Members suggested the following for consideration:

- LHB level primary care model to be considered;
- Develop a support network;
- Consider establishing a network of specialist clinical pharmacists
- Consider the necessary OD aspects for the workforce; and
- Enacting the Welsh Health Circular issued on hormone replacement therapy.

Members **resolved** to:

- **Note** the content of the report and progress made to date including the outcome of the non-financial option appraisal exercise;
- **Agree** that the two preferred options identified are taken forward for a detailed costing and financial option appraisal;
- **Consider** and make recommendations on the most appropriate mechanism and timescale for the detailed costing and financial option appraisal; and
- **Support** the following:
 - The preferred primary care model is considered as a primary care locality or cluster level clinic model. All GPs must offer basic care/referral. The more specialised gender identity care will be provided by GPs at higher tier

- levels within the locality or cluster level clinic model, backed by local Multiple Disciplinary teams;
- The future model(s) is a lifespan inclusive service for all adults, young people and children who identify as transgender, gender non-conforming, non-binary etc living in Wales;
 - A further paper be developed detailing the interim arrangements and continuity of care for existing Welsh patients, in light of the new national procurement of adult gender identity services and the specialist surgical elements of the gender identity pathway by NHS England. [commissioning intentions for specialised services](#) for 2017-19;
 - A task and finish group is set up to develop shared care protocols and guidelines to support practitioners including in the use of hormone prescribing;
 - A Task and Finish group to look at and report on the education and training needs for GPs, clinicians and other health service staff;
 - A set of guiding principles be developed for future work which should be informed by comments made by stakeholders at the non- financial options appraisal exercise; and
 - An engagement and communications plan is developed to support the work of the Partnership Board and the equality impact assessment of proposed models of care with all stakeholders. This engagement plan must include engagement with Welsh Government, and other interested parties' for example Stonewall, Assembly Members and Members of Parliament and BMA-GPC.

Neonatal Workforce Group Update

Members **received** a progress update regarding the recommendations agreed at the meeting of September 27, 2016 and seeking support on the proposed next steps.

Members **noted** concern regarding the need to ensure sufficient MTIs were in place by April 2017. Members discussed the contingency plans further and **agreed** that the details on workforce analysis should be circulated outside of the meeting.

Members **recommended** that further work was to be undertaken on the single employer model versus the alliance model to ensure that a robust system was in place going forward in order to hold providers to account. They supported that consideration be given to amend the terms of reference of the Network to take this work forward. Members **supported**

continuing the work considering standardised pay rates and a single nurse bank. Members **recommended** as well as linking with Director of Human Resources that a link be made with the All Wales Nurse Bank group led by Rory Farrelly on behalf of the all Wales Directors of Nursing.

Members also requested that business continuity / service contingency plans are developed along with and updated workforce plan and risk log.

It was **agreed** that a further update paper will be brought to the Joint Committee in January 2017.

Members **resolved** to:

- **Support** the recommendations from the Workforce Task and Finish Group
- **Approve** either the establishment of a Collaborative or a change in the terms of reference and membership of the Neonatal Network. The detailed proposal would be brought back to a subsequent meeting of the Joint Committee
- **Support** the Workforce Task and Finish Group to develop a proposal for standardised pay rates and a unified neonatal nurse bank, and advise on the process for final approval.

Collective Commissioning

Members **received** a report providing an update on the collective commissioning work programme for 2016/17 and making recommendations relating to the schemes where work is yet to commence.

Members **supported** empowering the WHSSC Officers to take action within the approved budget, including recruitment of additional staff to achieve delivery of the work programme.

The Chair **noted** that she had requested a full review of the staffing needs of organisation be undertaken.

Members **supported** a review of the function of Management Group.

Members **resolved** to:

- **Note** the level of resource required to support the requirements of the WHSSC management group.
- **Support** WHSSC to continue with existing collective commissioning arrangements where work has already commenced.
- **Approve** utilisation of a project based methodology to undertake collective commissioning, including the recruitment of a Project Manager to support the programme teams with scoping and delivery of the 16/17 collective commissioning work programme.

- **Support** a review of capacity within the WHSSC Planning Team during 2017/18 to ascertain whether it is possible to recommence collective commissioning.

Protocol for Dealing with Concerns, under the National Health Service (Concerns, Complaints and Redress arrangements) (Wales) Regulations 2011, which relate to Specialised Services commissioned by Welsh Health Specialised Services Committee (WHSSC)

Members **received** and **approved** the revised Concerns Protocol.

Risk Sharing Review: Update

Members **received** a report providing an update on the Risk Sharing Review to date and the actions required to conclude this task.

Members **agreed** that following review of the methodology by the Finance Working Group the proposed risk share would be supported by Joint Committee. Members **noted** that the Finance Working Group would now test the actual numbers and the final position would be referred back by March 2017.

Members **resolved** to:

- **Note** the progress made by the finance working group and in the provisional impact assessment.
- **Support** the recommendations of the finance working group regarding the allocation of services to utilisation or pooled risks.
- **Support** the recommendation regarding neutralising the impact of change from the end of 2011/12 financial year.
- **Support** the recommendation that implementation is phased in over a two to three year time period.
- **Support** the plan and timeline for completion and implementation.

Delivery of the Integrated Commissioning Plan 2016/17: Progress at the end of September 2016

Members **received** a report providing an update on the delivery of the Integrated Commissioning Plan for Specialised Services 2016/17 at the end of September 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;
- **Note** the risk management summary.

Performance Management

Members **received** the performance management report for August 2016.

Members **noted** the actions to be taken relating to Bariatric Surgery.

It was **agreed** that following assessment of the expected RTTs a position will be provided to the December Management Group meeting which would give a position by LHB for inclusion in the LHB end of year reports.

Finance Report

Members **received** the finance report for Month 7.

It was **agreed** that the column listing 'Other sundry Income' would be expanded to provide greater detail. It was also **agreed** that the recurrent and non recurrent position would be made visible in the next report to Joint Committee.

Joint Sub Committees and Advisory Groups

Members **noted** the update reports from the following joint sub committees and advisory groups:

- Integrated Governance Committee;
- Quality and Patient Safety Committee;
- All Wales Individual Patient Funding Request Panel;
- Management Group;
- Welsh Renal Clinical Network;
- Management Group;
- Wales Neonatal Network; and
- All Wales Posture Mobility Service Partnership Board.

The Acting Managing Director drew Members attention to the WHC Renal Services in Wales Delivery Plan 2016 to 2020 and **noted** that the Network are progressing this work.

It was **noted** that consideration of the Management Group terms of reference by Members was an outstanding action. It was **agreed** that this would be form part of the further work to be undertaken.

Date of Next Meeting

The Chair **noted** the difficulties with the timescales for approval of the Integrated Commissioning Plan and that a number of Chief Executives were unable to attend the Joint Committee scheduled for January 17, 2017. The approval of the plan requires agreement by all 7 Chief Executives and the vote of the Chief Executive cannot be delegated. The possibility of a short meeting by teleconference on 24 January 2017, or participation for part of the 17 January meeting by teleconference was suggested. It was **agreed** that these and other possible solutions would be considered further and members would be briefed on the most practical solution.

It was **noted** that the Joint Committee's Plan should be approved one month ahead of the LHBs' Plans and that this was unworkable given the deadline for submission of 27 January 2017. The Chair undertook to write to the Director General to explain this.