

## Minutes of the Meeting of the Welsh Health Specialised Services Committee

held on 10 July 2018 at Health and Care Research, Castlebridge 4, Cowbridge Road East, Cardiff

## **Members Present**

Members Present	<i>.</i>	
Vivienne Harpwood	(VH)	Chair
Carole Bell	(CB)	Director of Nursing and Quality Assurance, WHSSC
Gary Doherty (by VC)	(GD)	Chief Executive, Betsi Cadwaladr UHB
Charles Janczewski	(CJ)	Independent Member/Chair of the WHSSC Quality and
		Patient Safety Committee
Sian Lewis	(SL)	Managing Director, WHSSC
Lyn Meadows (by VC)	(LM)	Vice Chair
Steve Moore	(SM)	Chief Executive, Hywel Dda UHB
Tracy Myhill	(TM)	Chief Executive, Abertawe Bro Morgannwg UHB
Judith Paget	(JP)	Chief Executive, Aneurin Bevan UHB
Len Richards	(LR)	Chief Executive, Cardiff and Vale UHB
Carol Shillabeer	(CS)	Chief Executive, Powys THB
Jennifer Thomas	(JT)	Medical Director, WHSSC
Chris Turner	(CT)	Independent Member/Audit Lead
Allison Williams	(AW)	Chief Executive, Cwm Taf UHB
John Williams	(JW)	Associate Member/Chair of the Welsh Clinical Renal
	(300)	Network
		Network
Apologies		
Stuart Davies	(90)	Director of Einance, WUSSC
	(SD)	Director of Finance, WHSSC
Steve Ham	(SH)	Chief Executive, Velindre NHS Trust
Kevin Smith	(KS)	Committee Secretary & Head of Corporate Services,
		WHSSC
In Attendance		WHSSC
In Attendance		
In Attendance Andrew Champion	(AC)	Assistant Director, Evidence, Evaluation &
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Andrew Champion Ian Langfield	(IL)	Assistant Director, Evidence, Evaluation & Effectiveness Acting Director of Planning, WHSSC
Andrew Champion Ian Langfield Robert Mahoney	(IL) (RM)	Assistant Director, Evidence, Evaluation & Effectiveness Acting Director of Planning, WHSSC Finance Manager, Cardiff and Vale UHB
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Andrew Champion Ian Langfield Robert Mahoney Clare Nelson Stacey Taylor Observers:	(IL) (RM) (CN) (ST)	Assistant Director, Evidence, Evaluation & Effectiveness Acting Director of Planning, WHSSC Finance Manager, Cardiff and Vale UHB Acting Assistant Director of Planning, WHSSC Assistant Director of Finance, WHSSC
Andrew Champion Ian Langfield Robert Mahoney Clare Nelson Stacey Taylor <b>Observers:</b> Simon Dean	(IL) (RM) (CN) (ST) (SD)	Assistant Director, Evidence, Evaluation & Effectiveness Acting Director of Planning, WHSSC Finance Manager, Cardiff and Vale UHB Acting Assistant Director of Planning, WHSSC
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Andrew Champion Ian Langfield Robert Mahoney Clare Nelson Stacey Taylor <b>Observers:</b> Simon Dean Rosemary Fletcher <b>Minutes:</b> Michaella Henderson	(IL) (RM) (CN) (ST) (SD) (RF) (MH)	Assistant Director, Evidence, Evaluation & Effectiveness Acting Director of Planning, WHSSC Finance Manager, Cardiff and Vale UHB Acting Assistant Director of Planning, WHSSC Assistant Director of Finance, WHSSC
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JC18/031	Welcome, Introductions and Apologies The Chair formally opened the meeting and welcomed members.
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	Apologies were noted as above.
JC18/032	Declarations of Interest
	There were no declarations to note. The Joint Committee noted the standing declarations.
JC18/033	Accuracy of Minutes of the meeting held 15 May 2018
	The Joint Committee <b>approved</b> the minutes of the meeting held on 15 May 2018 as a true and accurate record.
JC18/034	Matters Arising
	There were no matters arising.
	Action Log
	The Joint Committee <b>received</b> the action log and noted the following updates:
	1010002 Integrated Commissioning Disp 2010, 21, Work
	JC18003 – Integrated Commissioning Plan 2018-21: Work Plan
	IL reported that the templates that go to the Quality and Patient
	Safety (Q&PS) Committee had been revised and a report would be produced for Q&PS setting out all the milestones for both this year's and next year's Integrated Commissioning Plan (ICP).
	JC18004 – Integrated Performance Report
	IL reported that following consideration by the planning team, it had
	not been possible to move any of the tolerances in the Integrated Performance Report but that time had been allocated at the next
	Management Group workshop to go through each of the tolerances
	and discuss whether there was any scope to move any of them.
	JC18005 – Report from the Quality and Patient Safety
	<b>Committee</b> VH noted the recommendation of Maggie Berry for appointment to
	the Committee. CJ noted that additional Committee members were still required as the last two meetings held had been inquorate.
	ACTION: Members agreed to give the matter further consideration and provide VH with the names of potential new members.



JC18/035	Report from the Chair
	The Joint Committee <b>received</b> an oral report from the Chair.
	The Chair reported that the Cabinet Secretary for Health and Social Services had completed her appraisal. The Chair reported that Major Trauma and Gender Identity Services were given as areas for particular focus in the forthcoming year.
	The Chair reported that the Cabinet Secretary had mentioned during the meeting his intention to create a different voting system for Joint Committee, EASC and NWSSP to move away from a unanimous decision requirement as previous Chairs of both WHSSC and EASC had mentioned the difficulty in relation to the operation of the WHSSC and EASC Standing Order process for voting on funding contributions. Following the meeting the Cabinet Secretary wrote a letter to the Chair and she responded in a personal capacity as there was no Joint Committee meeting before a response was due to decide on a collective response. A copy of the Chair's response was circulated to Members. It was noted that the Cabinet Secretary had also written to the Health Boards and that they would be responding separately in due course. Members agreed the Chair's response was consistent with the Committee's view and that no further action was required until such time as the Cabinet Secretary's responded further.
	The Chair reported that the Cabinet Secretary had appointed her for one more year by which time a decision may have been made on the future of WHSSC, EASC and Shared Services following the Parliamentary Review.
	The Joint Committee <b>received</b> a written report providing an update on the Chair's action taken concerning the adult thoracic surgery review consultation. Members <b>ratified</b> the Chair's action.
JC18/036	<b>Report from the Managing Director</b> The Joint Committee <b>received</b> the report from the Managing Director.
	SL drew attention to the following items within the report which the Joint Committee discussed further:
	<ul> <li>Neonatal Interim Work Stream – Members noted that ABUHB, as the provider-lead for the work stream, would submit a report to WHSSC imminently and that Management Group would consider the report as one of the key risks identified within the ICP that is expected to emerge in year.</li> <li>Thrombectomy / Stroke Commissioning</li> </ul>



	<ul> <li>Home Parenteral Nutrition – significant cost pressure flagged. Cost of the new contract was £500k more than the original £250k allowed for in the plan. Supplier perceived to have submitted low first year quote to secure contract. WHSSC working with C&amp;V to see what can be done to provide nursing support.</li> <li>Proton Beam Therapy</li> <li>Inherited Bleeding Disorders</li> <li>Sickle Cell and Thalassaemia – Members noted that this service was not currently commissioned by WHSSC and that this was a scoping exercise through the collective commissioning framework.</li> <li>BAHA and Cochlear – Members noted a significant increase in demand in south Wales, as well as the identification of a significant number of patients with BAHA implants that were due to become obsolete in 2018 and 2019</li> <li>Critical Care – Members noted an increase in demand for critical care within specialised services.</li> <li>WHSSC Corporate Values – SL reported that she had launched the new WHSSC Corporate Values on 5 July 2018 and distributed a small card showing the values</li> </ul>
JC18/037	Use of Crizotinib in the treatment of ROS1-positive advanced
	<b>non-small-cell lung cancer</b> The Joint Committee <b>received</b> the paper setting out a proposal to fund ROS1 gene fusion testing in people with advanced non-small- cell lung cancer (NSCLC).
	Members noted patients need to have the ROS1 gene mutation to be eligible to receive Crizotinib and that approximately 650 new patients per annum would be eligible for testing. Members further noted that the most definitive test for the gene was fluorescence in situ hybridisation (FISH) but that NICE were recommending that samples are tested using IHC first (which can produce a 17% false positive rate) and then samples that tested positive would be further tested with FISH.
	AC reported that while the use of Crizotinib was NICE mandated, the draft NICE guidance issued in January 2018 was negative.
	<ul> <li>Members resolved to:</li> <li>Support the funding for ROS1 gene fusion analysis to allow implementation of the NICE Final Appraisal Document (FAD) for the use of Crizotinib in the treatment of ROS1 positive advanced non-small cell lung cancer.</li> </ul>



JC18/038	<b>2018-2021 Key Risks – Cystic Fibrosis</b> The Joint Committee <b>received</b> the paper that set out the investment requirements for the All Wales Adult Cystic Fibrosis Centre to address
	the immediate clinical risk and service sustainability issue, and support the ongoing development of the service.
	Members noted the 2018-21 ICP highlighted Cystic Fibrosis as a key risk that was likely to present in year and require funding due to the service being almost at full capacity, and that additional investment in staff was necessary in order to demand the predicted increase in the patient cohort over the next year.
	Members noted the Cardiff and Vale UHB business case setting out the requirements for revenue investment for:
	<ul> <li>Investment in multi-disciplinary staff;</li> <li>Provision of a Premixed intravenous Antibiotic Service;</li> <li>Establishment and associated costs of proposed expansion from a 7 bed to a 16 bed unit</li> </ul>
	Members noted the proposal that a phased approached be used to meet the objectives above with Phase 1 encompassing the first two objectives and Phase 2 the third objective.
	Members discussed standards and service levels across all providers and equality of access across Wales.
	<ul> <li>Members resolved to:</li> <li>Note the information presented in the report and the impact of non-investment</li> </ul>
	• <b>Approve</b> the investment in the MDT on a recurrent basis, and the part year effect of the Premixed IV Antibiotic Service for the remainder of 2018/19. The Joint Committee <b>agreed</b> that the provider would need to submit a further proposal for
	recurrent funding for the Premixed IV Antibiotic Service for consideration as part of the 2019-21 Integrated Commissioning Plan.
JC18/039	Neuroscience Strategy Delivery Plan The Joint Committee received the paper that sought approval to
	take forward the actions specified therein to deliver the first two years of the Specialised Neurosciences Strategy in south, mid and west Wales.
	CN gave a presentation to the Committee in support of the paper.
	Members discussed:



	<ul> <li>the key actions at the various stages and the possible domino effect of failing to achieve a key action in line with the proposed timetable;</li> <li>the need to understand what the ideal service would like;</li> <li>the need to understand demand and capacity;</li> <li>the activities to be commissioned through the service;</li> <li>whether it was appropriate to incentivise the movement of patients into the correct beds, if so, how and if not then what other options should be considered.</li> </ul>
	discussions, linking in with the Chief Operating Officers, as to the appropriate use or otherwise of incentives and other options for driving change.
	ACTION: It was agreed that a further paper around the incentivisation element of the Neurosciences Strategy would be brought to a future meeting.
	<ul> <li>Members resolved to:</li> <li>Approve the delivery plan for the first two years of the Specialised Neurosciences Strategy in south, mid and west Wales</li> <li>Note the work underway to develop a delivery plan for parth</li> </ul>
	<ul> <li>Note the work underway to develop a delivery plan for north Powys and north Wales</li> </ul>
JC18/040	Integrated Performance Report The Joint Committee received the Integrated Performance Report.
	ACTION: It was agreed IL would discuss tolerance levels with Management Group at their next meeting and report back to the Joint Committee on those discussions.
	<ul> <li>Members resolved to:</li> <li>Note April performance and the action undertaken to address areas of non-compliance</li> </ul>
JC18/041	Financial Performance Report The Joint Committee received the Financial Performance Report.
	Members noted the financial position reported in Month 2 for WHSSC was an over spend to year-end of £576k with the movements being across various budget headings, improvements in Welsh contracts and deteriorations in non-Welsh contracts and IPFR.
	ST confirmed contingencies agreed today were included in year-end forecast.



	<ul> <li>ACTION: It was agreed there would be a more detailed discussion at the next meeting of the year-end position.</li> <li>Members resolved to: <ul> <li>Note the current financial position and forecast year-end position</li> </ul> </li> </ul>
JC18/042	<ul> <li>Reports from the Joint Sub-Committees</li> <li>Quality and Patient Safety Committee</li> <li>The Joint Committee received the report.</li> <li>ACTION: It was agreed members would provide feedback to</li> <li>CS on the draft Terms of Reference and, if there were no</li> <li>major changes, a Chair's Action to approve them would be</li> <li>noted.</li> </ul>
	ACTION: It was agreed all members would give consideration to proposing new Independent Committee members. IPFR The Joint Committee received the report.
JC18/043	Reports from the Joint Advisory Groups Welsh Renal Clinical Network The Joint Committee received the report.
JC18/044	Date and Time of Next Meeting The Joint Committee noted the date of the next meeting as the 11 September 2018.

The meeting concluded at 15:30

Chair's Signature: .....

Date: .....