

**Minutes of the Meeting of the
WHSSC Joint Committee Meeting held in public on
Monday 16 September 2019
at NCCU, Unit 1, Charnwood Court, Heol Billingsley,
Parc Nantgarw, Nantgarw, CF15 7QZ**

Members Present:

Vivienne Harpwood	(VH)	Chair
Stuart Davies	(SD)	Director of Finance, WHSSC
Gary Doherty	(GD)	Chief Executive, Betsi Cadwaladr UHB (by VC)
Paul Griffiths	(PG)	Independent Member/Audit Committee Representative
Sharon Hopkins	(SH)	Interim Chief Executive, Cwm Taf Morgannwg UHB
Carole Bell	(CB)	Director of Nursing and Quality Assurance, WHSSC
Tracy Myhill	(TM)	Chief Executive, Swansea Bay UHB
Sian Lewis	(SL)	Managing Director, WHSSC
Steve Moore	(SM)	Chief Executive, Hywel Dda UHB (by VC)
Ian Phillips	(IP)	Independent Member
Len Richards	(LR)	Chief Executive, Cardiff and Vale UHB
Carol Shillabeer	(CS)	Chief Executive, Powys THB
Jennifer Thomas	(JT)	Medical Director, WHSSC

Deputies Representing Members:

Nicola Prygodzicz (for JP)	(NP)	Director of Planning, Aneurin Bevan UHB
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Apologies:

Judith Paget	(JP)	Chief Executive, Aneurin Bevan UHB
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In Attendance:

Karen Preece	(KP)	Director of Planning, WHSSC
Claire Nelson	(CN)	Acting Assistant Director of Planning, WHSSC
Kevin Smith	(KS)	Committee Secretary & Head of Corporate Services, WHSSC
Rosemary Fletcher	(RF)	Director, NHS Wales Health Collaborative
Rob Mahoney	(RM)	Observer, Cardiff & Vale UHB

Minutes:

Helen Tyler	(HT)	Corporate Governance Manager, WHSSC
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The meeting opened at 13:30hrs

JC19/030	<p>Welcome, Introductions and Apologies The Chair formally opened the meeting and welcomed members.</p> <p>Apologies were noted as above.</p>
JC19/031	<p>Declarations of Interest The Joint Committee noted the standing declarations. No additional declarations were made.</p>
JC19/032	<p>Minutes of the meeting held 23 July 2019 The Joint Committee approved the minutes of the meetings held on 23 July 2019 as true and accurate records save that GD attended in person rather than by VC.</p>
JC19/033	<p>Action Log and Matters Arising The Joint Committee noted:</p> <p>JC19003: Adult Thoracic Surgery for South Wales – Consultant Workforce – The reference in the 19 September update to MTN was a typographical error and would be deleted.</p> <p>JC19004: Cystic Fibrosis Business Case – It was reported that a meeting had now been scheduled for the following day to progress matters.</p> <p>There were no matters arising not dealt with elsewhere on the agenda.</p>
JC19/034	<p>Chair's Report The Joint Committee received an oral report from the Chair. The Chair explained that Charles (Jan) Janczewski has stepped down as an Independent Member of the Joint Committee and as chair of the WHSSC Quality & Patient Safety Committee following his appointment as Interim Chair of CVUHB and that a replacement was being sought. The Chair recorded her thanks to CJ for his contribution.</p>
JC19/035	<p>Report from the Managing Director The Joint Committee received the report from the Managing Director. SL drew attention to the following items within the report:</p> <p>Soft Tissue Sarcoma Service in South Wales Monthly performance meetings had taken place to monitor the action plan and progress has been made in all areas; this was being monitored by WHSSC Q&PS Committee.</p> <p>Perinatal Mental Health – Mother & Baby Unit (MBU) The proposal for a new build MBU to be developed on the Neath Port Talbot site had made significant progress. The requested additional</p>



	<p>information around the clinical and staffing model was received and this was expected to be signed off at the next Management Group meeting. Some questions had been raised around cost and SD explained that the revenue figures had now been updated demonstrating increased cost effectiveness.</p> <p>Action: KS to check whether the business case needed to come back to Joint Committee for final approval.</p> <p>CAR-T The CAR-T business case had been approved and funding released, enabling CVUHB to proceed with the service.</p> <p>Veteran's Trauma Network Joint Committee was asked to endorse the approval by Management Group of the commissioning arrangements for the Veterans' Trauma Network (VTN) as described in the Report.</p> <p>WHSSC Office Relocation It was noted that the WHSS Team had relocated from its Caerphilly office to Unit G1, Treforest Industrial Estate between 28 - 30 August. IT connectivity was delayed and minimal disruption to WHSSC activities was achieved through deployment of its business continuity arrangements.</p> <p>Members resolved to:</p> <ul style="list-style-type: none">• Note the contents of the report; and• Endorse approval of the VTN for Wales.
JC19/036	<p>Major Trauma Network for South Wales – Tranche 2 Recruitment</p> <p>Members received a presentation from KP titled Major Trauma update and Tranche two funding request.</p> <p>In addition, members received a paper that had been circulated prior to receipt of key items, including CVUHB Business Case and output from the latest Gateway Review.</p> <p>KP provided a recap on funding agreed to August 2019. Tranche 1 Recruitment had been agreed by the Joint Committee on 30 August.</p> <p>The result of the latest Gateway Review was now known to be Amber/Red with good progress on many issues but four significant outstanding issues:</p> <ul style="list-style-type: none">• Establish whether feedback from peer review has been reflected in the latest MTC and Swansea cases;• Seek to close affordability gap;

- Model the timing of recruitment to assess what service can be offered from April 2020; and
- Determine operating, accountability and governance structure of ODN.

KP explained that although the overall assessment remained Amber/Red, the programme was close to achieving Amber status.

A Professional Peer Review had been undertaken during August. An Executive Steering Group (ESG) Report included recommendations from the ESG derived as a result of the Peer Review. CVUHB did not agree with all of the recommendations in the Report. The Report had been approved by the ESG earlier in the day, subject to comments received back within 48 hours. Peer Reviewers had also seen and confirmed support for the ESG Report and recommendations.

The paper and presentation identified Tranche 2 Recruitment items (1) that were in accord with recommendations derived as a result of the Peer Review (2) that did not accord with recommendations from Peer Review.

The SBUHB ODN Business Case had been reviewed on 11 September. The CVUHB Business Case had received preliminary review and it was noted that there were three main areas of discord (1) 24/7 consultant rota, (2) proposal for 14 (rather than 10) beds in Poly Trauma Unit, and (3) additional (fourth) plastic surgery consultant.

(1) 24/7 consultant rota

The recommendation was for 16 hours per day initially with a build up to 24 hour cover. In principle everybody supported a need for 24 hour consultant cover. LR explained that covering with less experienced staff will result in consultants needing to come in to cover and this has a detrimental effect on staffing for the next working day. LR supported the proposal of a 24 hour consultant rota and in his view this was the most affordable basis and provided a safer service.

CS questioned LR on whether there were any standards for Emergency Department staffing for a unit the size of the ED at UHW. LR explained that in an ED setting it was acceptable for a consultant to be called in if required as there was no standard requirement for an ED department to provide 24 hour consultant cover. In contrast the standard for a Major Trauma unit is for a patient to be reviewed within 5 minutes of attendance by a senior doctor.

LR also clarified that not all of the consultant cover for the Major Trauma Unit would need to be employed by CVUHB.

(2) proposal for 14 (rather than 10) beds in Poly Trauma Unit

KP noted that a dedicated Poly Trauma Unit is a key day 1 requirement for the MTC. Further scrutiny was required regarding length of stay assumptions (which was higher than average in the MTC business case) and therefore modelled bed numbers. The level of details and the difference between these figures needed to be worked on and the planning team would need to work with CVUHB to look at the detail further.

(3) additional (fourth) plastic surgery consultant

KP explained that Plastics was a day 1 requirement, initially a 12 hour, five days a week service. The Peer Review supported recruitment of three Consultants. The SBUHB case requested four consultants and cited unlikelihood of The Royal College to sign off a three consultant job plan. KP explained that further work was required to understand the detail and explore rota options.

It had been agreed at the ESG meeting earlier in the day that WHSSC would review these key issues with CVUHB and take them to the Management Group meeting on 26 September for scrutiny.

SD reported that Welsh Government was optimistic about funding start-up costs incurred during 2019-20 with some recognition that further top-up funding might be required for future years. The overall financial picture was noted as being an annual revenue cost of around £15m p.a.

The Finance Working Group was waiting for (1) finance and manpower baselines, (2) activity and income flows for non-elective cases, and (3) the business case for the CVUHB Trauma Unit (distinct from the MTC).

The key requirements for an April 2020 go live were noted as (1) physical and staff infrastructure, (2) governance structure for ODN, and (3) Welsh Government capital approval. EMERTS was scheduled for an April 2020 'go live' but they were asked to confirm that protocols can be varied and/or patient risks managed for a later go live of the MTC and ODN if necessary.

Members resolved to:

- **Note** the information presented within the report; and
- **Note** that the WHSS Team would develop commissioning advice to the Joint Committee.

Members felt unable to approve Tranche 2 Recruitment but approved the following process. The draft Project Business Case (PBC) would be

	<p>available in October 2019 and a PBC briefing for boards was being arranged for 23 October. It was agreed that affected health boards would hold short meetings at end of October 2019 to ascertain likely level of support from boards prior to formal consideration of the PBC at their public board meetings in November, this would inform the 'go live' date and potentially provide cover for incurring Tranche 2 Recruitment costs. The 12 November JC meeting would receive feedback on the draft PBC from the October meetings. It was agreed that the Tranche 2 recruitment process could begin ahead of late October support from boards (subject to Management Group scrutiny on 26 September) with interviews scheduled for late October but without confirming appointments until November. This reflected the need to manage the risks associated with moving too quickly or not quickly enough.</p>
	<p>Major Trauma – Commissioner’s Risk Register The Joint Committee received the first draft of the Commissioner’s Risk Register for the Major Trauma Centre and Operational Delivery Network. It was noted that the Register would now, and continuously, be updated for the latest developments.</p>
JC19/038	<p>Integrated Commissioning Plan (ICP) – Revised Timeline In June 2019, a paper setting out the initial timelines for developing the 2020-23 WHSSC ICP was presented and supported by Management Group before approval at Joint Committee in July 2019. This set out the commissioning intentions that the ICP would be informed by, along with the dates of key meetings that would support the prioritisation of new interventions and services requiring investment. These meetings had been arranged by working back from the date of 12 November 2019 when the ICP was required to be presented to Joint Committee for approval.</p> <p>Members received a paper explaining that Welsh Government has relaxed the submission date for IMTPs to 31 January 2020. The WHSS Team recommended adopting a more relaxed timeline to reflect the revised submission date.</p> <p>It was noted that the WHSSC ICP needed to include the Major Trauma Centre and Operational Delivery Network on approval of the Project Business Case.</p> <p>After due consideration it was agreed that the WHSS Team would continue to work toward submitting the ICP to Joint Committee for approval on 12 November 2019.</p>

JC19/039	<p>Radio Frequency Ablation for Barrett's Oesophagus</p> <p>The Joint Committee received a report that provided an update on the work led by WHSSC to develop the commissioning framework for a south Wales based Radiofrequency Ablation (RFA) service for patients with Barrett's Oesophagus.</p> <p>Members resolved to:</p> <ul style="list-style-type: none"> • Note the work carried out to date to develop the commissioning framework for a south Wales based RFA service for patients with Barrett's Oesophagus; • Confirm that WHSSC will become the commissioner of RFA for Barrett's Oesophagus; • Note the development by CVUHB of a business case to deliver RFA for the population of mid and south Wales, and that the business case was cost saving; • Support implementation of the RFA service as an in-year development (approval of the business case being delegated to Management Group).
JC19/040	<p>Finance Report Month 5 2019-20</p> <p>The Joint Committee received the report the purpose of which was to set out the financial position for WHSSC for the fifth month of 2019-20.</p> <p>Members noted the financial position reported at Month 5 for WHSSC was a YTD under spend of £455k and forecast year end under spend of £1,069k. A melanoma immunotherapy treatments overspend at Velindre is fully reflected at £2.1m variance against plan, a movement of £1.5m.</p> <p>SD reported that the forecast over spend within Welsh & English providers, IPFR and DRC was being offset by underspend movements in mental health, developments and the release of prior year reserves.</p> <p>Members resolved to:</p> <ul style="list-style-type: none"> • Note the current financial position and year end forecast.
JC19/041	<p>Integrated Performance Report – June 2019</p> <p>The Joint Committee received a report which provided members with a summary of the performance of services commissioned by WHSSC for June 2019 and details the action being undertaken to address areas of non-compliance.</p> <p>KP explained that, going forward, the latest report available would be shared with Joint Committee but that this meant it would be subject to scrutiny by Management Group after members had seen it. The purpose</p>



	<p>of this was to ensure that members received information on the most up to date position.</p> <p>KP reported that although plans had been developed to meet the cochlear RTT targets in the south Wales service, the unplanned loss of an audiologist at Bridgend would adversely impact the service. This was being pursued with CTMUHB.</p>
JC19/042	<p>Reports from the Joint Sub-Committees</p> <p>Management Group The Joint Committee received the July and August 2019 briefings.</p> <p>Quality and Patient Safety Committee The Joint Committee received the August 2019 report, together with a schedule of services in escalation. The Calea HPN position and improvements in the CAMHS quality and safety issues were noted.</p>
JC19/043	<p>Date and Time of Next Meeting The Joint Committee noted the next scheduled meeting would take place at 13:00 on 12 November 2019 in the Conference Room, WHSSC, Unit G1 The Willowford, Treforest, CF37 5YL</p>

The meeting closed at 16.00hrs.

Chair's Signature: *W. Haywood*

Date: *18/12/19*