

**Minutes of the Meeting of the  
WHSSC Joint Committee Meeting held In Public on  
Tuesday 9 March 2021  
by MS Teams**

**Members Present:**

Kate Eden	(KE)	Chair
Carole Bell	(CB)	Director of Nursing and Quality Assurance, WHSSC
Stuart Davies	(SD)	Director of Finance, WHSSC
Emrys Elias	(EE)	Independent Member/ Q&PS Committee Chair
Mark Hackett	(MH)	Chief Executive Officer, Swansea Bay UHB
Sian Lewis	(SL)	Managing Director, WHSSC
Steve Moore	(SM)	Chief Executive Officer, Hywel Dda UHB
Judith Paget	(JP)	Chief Executive Officer, Aneurin Bevan UHB
Len Richards	(LR)	Chief Executive Officer, Cardiff & Vale UHB
Carol Shillabeer	(CS)	Chief Executive Officer, Powys THB
Jo Whitehead	(JW)	Chief Executive Officer, Betsi Cadwaladr UHB

**Deputies:**

Steve Webster	(SW)	Finance Director, Cwm Taf Morgannwg UHB (deputising for Paul Mears)
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**Apologies:**

Iolo Doull	(ID)	Acting Medical Director, WHSSC
Kieron Donovan	(KD)	Affiliate Member/ Chair, Welsh Renal Clinical Network
Jason Killens	(JK)	Chief Executive Officer, WAST
Paul Mears	(PM)	Chief Executive Officer, Cwm Taf Morgannwg UHB
Ian Phillips	(IP)	Independent Member

**In Attendance:**

Claire Harding	(CH)	Assistant Director of Planning, WHSSC
Karen Preece	(KP)	Director of Planning, WHSSC
Kevin Smith	(KS)	Committee Secretary & Head of Corporate Services, WHSSC

**Minutes:**

Helen Tyler	(HT)	Corporate Governance Manager, WHSSC
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**Public Observer:**

A member of the public

The meeting opened at 09:30hrs.

JC20/074	<p><b>Welcome, Introductions and Apologies</b></p> <p>The Chair welcomed Members to the meeting and reminded them that, due to the COVID-19 pandemic, the meeting was being held virtually via MS Teams.</p> <p>The Chair noted that there was a member of the public observing the public meeting.</p> <p>It was noted that a quorum had been achieved.</p> <p>Apologies were noted as above.</p>
JC20/075	<p><b>Declarations of Interest</b></p> <p>The Joint Committee noted the standing declarations. No additional declarations were made.</p>
JC20/076	<p><b>Minutes of Previous Meetings</b></p> <p>Members approved the minutes of the meetings held on 10 November and 15 December 2020 as a true and accurate record.</p>
JC20/077	<p><b>Action Log &amp; Matters Arising</b></p> <p>The action log was taken as read and it was noted that there were no outstanding actions.</p> <p>No further matters arising were raised.</p>
JC20/078	<p><b>Chair's Report</b></p> <p>The Chair referred members to Chair's Actions taken to approve proposals to utilise forecast underspend in 2020-21. In response to a question, SD explained that none of the proposals created any new recurrent liabilities as any related schemes were already included within the WHSSC approved ICP. The providers had also been asked to report back on activity and outcomes related to the approved proposals. Members consented to the Recommendation set out in the report, namely to <b>ratify</b> the Chair's Actions to approve the underspend proposals.</p> <p>The Chair also referred members to a Chair's Action taken to approve the conversion of a locum plastic consultant surgeon post in the South Wales Trauma Network to a substantive post. The Joint Committee also <b>ratified</b> this Chair's Action.</p> <p>In addition, the Chair reported that Ian Phillips has agreed to stand for a further two years as an Independent Member, in accordance with the WHSSC Standing Orders. His initial term would expire on 31 March 2021. The Chair recommended his re-appointment with effect from 1 April 2021 which was supported by members.</p>

	<p>The Chair also updated members that WHSSC is still actively looking for a further independent member but none of the Health Boards' Chairs were able to support WHSSC with nominations at this time.</p>
JC20/079	<p><b>Managing Director's Report</b></p> <p>The Managing Director's report, including updates on the PET CT Programme Business Case and the revised WHSSC Risk Management Strategy, was taken as read. Members received an explanation as to why the PET CT Programme Business Case would be signed off at the NHS Wales Health Collaborative's Chief Executive Group's meeting on 16 March 2021 rather than at the WHSSC Joint Committee.</p> <p>The Joint Committee consented to the Recommendation set out in the report, namely to <b>note</b> the content of the report.</p> <p>In addition, an oral report was given on UHW2, explaining that, on 23 February, the CEO and representatives from CVUHB met with the WHSSC Executive team to present an overview of their programme business case for the development of a new strategic model for services, including specialised services, in Cardiff including the redevelopment of hospital based services. The current proposal does not set a physical location for hospital services but rather the key elements of the service model. The CVUHB team emphasised that core to the development of the case has been partnership working with other Welsh providers and commissioners. In addition they emphasised the opportunities of strengthening and building upon academic partnerships and business partners in the field of biotechnology. Following on from the meeting the team from CVUHB have agreed to extend the scope of the engagement to NHSE providers where synergies may exist or be developed.</p> <p>The WHSSC Executive team support the scope and approach to the development of the UHW2 programme business case which was submitted to Welsh Government on 01 March 2021.</p>
JC20/080	<p><b>CAMHS Tier 4 Services</b></p> <p>Members received a paper that sought to inform them of the current Tier 4 Child and Adolescent Mental Health Services (CAMHS) commissioning issues and risks. It also highlighted a number of wider pathway concerns that are having an impact on Tier 4 and the actions being proposed to address them.</p> <p>Members acknowledged that this was a high profile and a high priority area. It was noted that despite all the work being undertaken in this area including early intervention, demand for these services had continued to grow.</p>

	<p>CB highlighted that all three of the commissioned services were in the WHSSC escalation process due to a variety of issues including capacity, workforce and environment. However, the escalation process ensured enhanced monitoring of the services. CB noted that the bed management panel had provided additional support to the inpatient units and enabled wider discussions about complex cases especially during a period of severe bed shortages across the UK.</p> <p>CB reported that the implementation of the revised service specification would require additional resources and this had been highlighted in the WHSSC Annual Plan as a Strategic Priority.</p> <p>LR noted that this was a very important piece of work and supported the wider considerations of all areas but requested specific consideration of the capacity issues for Tier 4 services.</p> <p>EE noted that the role and function of Tier 4 units was often influenced by patient behaviour and not necessarily illness. Appropriate care models across the system were therefore necessary.</p> <p>Members were advised that a progress update would be provided to the May Joint Committee meeting.</p> <p>The Joint Committee consented to the Recommendations set out in the report, namely to:</p> <ul style="list-style-type: none"> <li>• <b>Note</b> the current Tier 4 CAMHS commissioning issues affecting service delivery outlined in the report; and</li> <li>• <b>Support</b> the proposed actions to address these issues including the wider pathway concerns.</li> </ul>
JC20/081	<p><b>Assurance Report on Commissioning of Independent Hospitals.</b> The Assurance Report on Commissioning of Independent Hospitals was deferred to the “in committee” session.</p>
JC20/082	<p><b>Disestablishment of the All Wales Posture and Mobility Partnership Board</b> Members received a paper that provided a brief overview of the work that had been undertaken to improve the Posture and Mobility Service in Wales and sought support to disband the All Wales Posture and Mobility Service Partnership Board and its sub-groups as they have served their purpose. The proposal included a move to managing the service with Stakeholder and Partnership Engagement events continuing twice yearly under ‘business as usual’ arrangements.</p> <p>The Joint Committee consented to the Recommendations set out in the report, namely to:</p>

	<ul style="list-style-type: none"> <li>• <b>Note</b> the work undertaken by the Posture and Mobility Service and the Partnership Board; and</li> <li>• <b>Support</b> the proposal to disband the All Wales Posture and Mobility Service Partnership Board along with the sub-groups; and</li> <li>• <b>Support</b> the recommendation to hold Stakeholder and Partnership Engagement events twice yearly.</li> </ul>
JC20/083	<p><b>Socio-economic Duty</b></p> <p>Members received a paper that briefed them on the new Socio-economic Duty that comes into effect from 31 March 2021 and the work done by the WHSS Team to prepare for compliance with the Duty.</p> <p>Members noted the content of the report.</p>
JC20/084	<p><b>WHSSC Joint Committee Annual Business Cycle 2021-22</b></p> <p>Members received a paper that provided them with the Draft Joint Committee Annual Business Cycle 2021-22.</p> <p>Members noted and supported the content of the report, including the schedule of meetings for 2021-22.</p>
JC20/085	<p><b>Integrated Commissioning Plan 2021-22 (ICP)</b></p> <p>Members received and supported the final version of the ICP that reflected the changes agreed by the Joint Committee on 16 February 2021.</p>
JC20/086	<p><b>Activity Report for Month 9 2020-21</b></p> <p>Members received a paper that highlighted the scale of the decrease in activity levels during the COVID-19 period, and whether there were any signs of recovery in specialised services activity. These activity decreases were shown in the context of the potential risk re patient harms and of the loss of value from nationally agreed financial block contract arrangements.</p> <p>The rate of recovery in England had slowed down and recovery of Welsh providers had stalled further in month 9 due to the second wave of COVID-19. However, some speciality areas, such as Neurosurgery, were not as badly impacted as others. Cardiac surgery was noted as an area of concern and work with south Wales' providers on recovery had already began.</p> <p>Paediatric Surgery had continued to recover even during this second wave.</p> <p>Members noted the information presented in the report and the overall summary.</p>

	<p>SD assured Members that the performance data had been reflected in the ICP 2021-22 discussions concerning the waiting list position and required investment.</p> <p>Members commented that overall the second wave had been much more demanding than the first wave and the impact of the 'Kent variant' could not be underestimated in terms of the challenges that faced hospital settings from December onwards. However, LR noted that activity levels had picked up from February and recovery plans from providers would demonstrate this.</p>
JC20/086	<p><b>Financial Performance Report – Month 10 2020-21</b></p> <p>Members received a paper that set out the financial position for WHSSC for month 10 of 2020-21, including an under spend to Month 10 of £16.7m and a forecast under spend of £14.7m at the year end.</p> <p>The under spend related mainly to months 1-10 underspend on the pass through elements of Welsh provider SLA's, NHS England anticipated underperformance against agreed block contracts where provider activity is forecast at &gt; 20% below agreed baseline and Q1 – Q3 2020-21 development slippage.</p> <p>SD noted clawback arrangements for NHS England providers were uncertain at the current time and would need to be carefully monitored.</p> <p>Members consented to the Recommendation set out in the paper, namely to <b>note</b> the current financial position and forecast year end position.</p>
JC20/087	<p><b>Other Reports</b></p> <p>The Joint Committee received reports from the following Joint Sub-Committees.</p> <ul style="list-style-type: none"> <li>• Management Group;</li> <li>• All Wales Individual Patient Funding Request Panel;</li> <li>• Quality &amp; Patient Safety Committee; and</li> <li>• Integrated Governance Committee.</li> </ul> <p>The Joint Committee consented to the Recommendation to <b>note</b> the content of the reports from the Joint Sub-Committees.</p>
JC20/088	<p><b>Any Other Business</b></p> <p><b><i>South Wales Neonatal Transport</i></b></p> <p>Members received a letter from clinicians working in the south Wales Neonatal Transport Service expressing their concerns with the current proposal to commission a permanent 24/7 service based on a lead provider model. Members were advised that the WHSS Team had agreed the next steps in commissioning the service in discussion with C</p>

	Shillabeer and the Director of the NHS Wales Health Collaborative, whereby a paper outlining the issues would be taken to the NHS Wales Health Collaborative Executive Group meeting on the 16 March 2021.
JC20/089	<p><b>Chair of Welsh Renal Clinical Network (WRCN)</b></p> <p>The Chair reported that Dr Kieran Donovan had signalled his intention to retire as Chair of the WRCN and from his clinical role as a consultant nephrologist with CVUHB. A vote of thanks was recorded for KD's work with the WRCN over the previous ten years, first as Clinical Lead, then as Chair, and for his massive contribution to the very successful development of the service.</p>
JC20/090	<p><b>Date and Time of Next Scheduled Meeting</b></p> <p>Members noted that the next scheduled meeting would take place on 11 May 2021.</p> <p>There being no other business other than the above the meeting closed.</p>

The meeting closed at 10:50hrs

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

**Date:** .....