

**Minutes of the Meeting of the  
WHSSC Joint Committee Meeting held In Public on  
Tuesday 11 May 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 (for part)
Judith Paget	(JP)	Chief Executive Officer, Aneurin Bevan UHB
Ian Phillips	(IP)	Independent Member
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:**

Nick Lyons	(NL)	Medical Director, Cwm Taf Morgannwg UHB (deputising for Paul Mears)
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**Apologies:**

Iolo Doull		Medical Director, WHSSC
Paul Mears		Chief Executive Officer, Cwm Taf Morgannwg UHB
Ian Wells		Independent Member

**In Attendance:**

Dinendra Gill	(DG)	South Wales Trauma Network (for part)
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

**Observers**

Jacqui Evans	(JE)	Head of Corporate Governance, CVUHB
Emma King	(EK)	Senior Specialised Services Planning Manager for Mental Health & Vulnerable Groups, WHSSC

**Minutes:**

Michaella Henderson	(SMH)	Corporate Governance Officer, WHSSC
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The meeting opened at 10:55hrs.

JC21/001	<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>It was noted that a quorum had been achieved.</p> <p>Apologies were noted as above.</p>
JC21/002	<p><b>Declarations of Interest</b></p> <p>The Joint Committee noted the standing declarations. No additional declarations were made.</p>
JC21/003	<p><b>Minutes of Previous Meetings</b></p> <p>Members approved the minutes of the meetings held on 09 March 2021 as a true and accurate record.</p>
JC21/004	<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>
JC21/005	<p><b>Chair's Report</b></p> <p>The Chair highlighted the forthcoming early retirement of Kevin Smith, Committee Secretary, on 31 May 2021, and his return part time for around five weeks from 07 June 2021, and the appointment of his successor, Jacqueline Evans, from 01 June 2021.</p> <p>The Chair highlighted the Chair's Action taken to approve the appointment of Professor Ian Wells as an Independent Member of the Joint Committee with effect from 01 May 2021 for an initial term of two years.</p> <p>In addition, the Chair reported that Emrys Elias had tendered his resignation with effect from 31 May 2021 and that a nomination had been received for a successor, whose appointment would be dealt with later in the week by Chair's Action.</p> <p>Members thanked both KS and EE for their service and wished them good luck for their futures.</p> <p>The Chair noted ID had been appointed to the permanent role of Medical Director.</p> <p>The Joint Committee resolved to</p> <ul style="list-style-type: none"> <li>• <b>Note</b> the contents of the report.</li> </ul>

	<ul style="list-style-type: none"> <li>• <b>Ratify</b> the appointment of Jacqueline Evans as Committee Secretary with effect from 01 June 2021; and</li> <li>• <b>Ratify</b> the Chair's Action appointing Professor Ian Wells.</li> </ul>
JC21/006	<p><b>Managing Director's Report</b></p> <p>The Managing Director's report, including updates on:</p> <ul style="list-style-type: none"> <li>• Opening of the interim Mother &amp; Baby Unit at Tonna Hospital;</li> <li>• The south Wales Thoracic Surgery Strategic Outline Case (SOC);</li> <li>• The PET Programme Business Case;</li> <li>• The status of the audit of the 2020-21 Accounts;</li> <li>• De-escalation the SBUHB TAVI service from level 3 to level 2;</li> <li>• Removal of the CVUHB Paediatric Intensive Care service from escalation; and</li> <li>• Removal of the SBUHB Soft Tissue Sarcoma service from escalation,</li> </ul> <p>was taken as read.</p> <p><b>PET Programme Business Case</b></p> <p>SL reported that Welsh Government had agreed to receive the PET Programme Business Case and was asking for letters of support from the Health Boards and Velindre to expedite the process of allowing the NHS Collaborative's Chief Executive Group to sign off the Programme Business Case at its meeting on 18 May.</p> <p>SD reminded Members that the year 1 and 2 revenue consequences were covered by the WHSSC ICP and that it was anticipated that growth would be factored into WHSSC ICPs in each of the following years.</p> <p>SL noted WHSSC was prepared to work with SBUHB to advance the timing of the service development on its site once funding was approved. MH noted SBUHB was concerned about equity associated with levels of capital investment around cancer services generally and that he would be discussing the matter with Welsh Government.</p> <p><b>Mother &amp; Baby Unit Opening</b></p> <p>The WHSSC team thanked MH and his team for all of their hard work in achieving the opening of the Mother &amp; Baby Unit at Tonna Hospital on 19 April 2021. JW noted there were discussions underway between WHSSC and NHS England regarding a unit in the north west of England, in the Wirral/Chester area, which would provide more access for north Wales' patients.</p> <p><b>Thoracic Surgery Strategic Outline Case</b></p> <p>Members requested early sight of the SOC by Health Boards so that they had time to consider the financial consequences.</p>

	<p><b>ACTION:</b> It was agreed MH would circulate the Thoracic Surgery SOC to Members.</p> <p>The Joint Committee <b>resolved</b> to note the content of the report.</p>
JC21/007	<p><b>South Wales Trauma Network (SWTN)</b></p> <p>The Joint Committee received a presentation on the work of the SWTN from its opening in September 2020 to March 2021, which included a summary of the Delivery Assurance Group report.</p> <p>Members received slides including:</p> <ul style="list-style-type: none"> <li>• Overview of the Network</li> <li>• Pre-hospital Care Patient Story</li> <li>• Acute Emergency Care &amp; Surgery Patient Story</li> <li>• Rehabilitation &amp; Social Care Patient Story</li> <li>• Service Specification Major Trauma Centre</li> <li>• Service Specification Trauma Units</li> <li>• Service Specification Other Stakeholders</li> <li>• Governance Structure</li> <li>• Governance Meetings</li> <li>• Activity</li> <li>• Analysis comparing predicted spells and patients added to the major trauma database</li> <li>• Proposed 1 year Evaluation of the Network</li> <li>• Service Development Next Steps</li> </ul> <p>Members discussed elements of the presentation in greater detail and congratulated the team on an effective first six months of operation.</p> <p><b>ACTION:</b> It was agreed a further update will be provided to the Joint Committee meeting in six months' time.</p>
JC21/008	<p><b>Neonatal Transport Service for South and Mid Wales</b></p> <p>The Joint Committee received a paper that proposed a project structure and governance assurance framework as requested following Joint Committee's decision regarding the establishment of an Operational Delivery Network Transport Service for mid, west and south Wales in April 2021. Members noted that the proposed structure borrowed many features from the SWMTN model, which was regarded as exemplary.</p> <p>KP noted that the new service and the new ODN would go live in January 2022, with an interim DAG running from the present time until Autumn 2021 with the implementation of the formal structures scheduled for November 2021 and it was agreed KP would update the timeline in Appendix 1 to reflect those arrangements.</p>

	<p><b>ACTION:</b> It was agreed the timeline would be revised and brought back to the July meeting for further consideration.</p> <p>Members agreed the success of the project would depend greatly on building relationships between all stakeholders. SL reported that the WHSS Team had met with Mark Dickinson of the NHS Wales Health Collaborative to discuss the value of the existing network and how it could focus on core clinical network functions.</p> <p>The Joint Committee resolved to:</p> <ul style="list-style-type: none"> <li>• <b>Note</b> the proposed project management process and associated timeline; and</li> <li>• <b>Note</b> the draft commissioner assurance process, recognising that this would be subject to further discussion in the 'In Committee' section of the meeting and with the programme team.</li> </ul>
JC21/009	<p><b>WHSSC Risk Management Strategy</b></p> <p>The Joint Committee received a paper that presented the revised Risk Management Strategy (RMS) for WHSSC for approval and shared the latest version of the Corporate Risk Register for information.</p> <p>KS reported the revised RMS had been supported by the WHSSC Integrated Governance Committee and Quality &amp; Patient Safety Committee and the CTMUHB Audit &amp; Risk Committee (in its capacity as host organisation). KS further reported that the WHSSC Team had looked at corporate risks in light of the revised RMS and updated the Corporate Risk Register accordingly. KS confirmed that clear actions and mitigations, including target dates and timescales for resolution, would be identified for all risks still on the Corporate Risk Register.</p> <p>The Joint Committee resolved to:</p> <ul style="list-style-type: none"> <li>• <b>Approve</b> the revised Risk Management Strategy;</li> <li>• <b>Note</b> the latest version of the Corporate Risk Register; and</li> <li>• <b>Note</b> that further work is on-going to develop risk reporting in line with the Risk Management Strategy.</li> </ul>
JC21/010	<p><b>COVID-19 Activity Reports for Months 11 and 12 2020-21</b></p> <p>The Joint Committee received papers 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. Members noted these activity decreases were shown in the context of the potential risk regarding patient harms and of the loss of value from nationally agreed financial block contract arrangements.</p> <p>Members noted the Month 12 report had been restructured from the previous format to deal with specialties/areas on an all-Wales basis and would be developed further based on feedback received.</p>

	<p>SD reported that there had been clear improvement in activity levels in some services over recent months, particularly from English providers. SD further reported that a strong NHS England recovery was anticipated due to the direction of core centralised investment from NHS England. SD noted the WHSS Team would be working very closely with NHS England providers to ensure maximum leverage out of those investments for Welsh residents particularly as block contracting arrangements would be in place for at least the first quarter of 2021-2022. SD reported that he and CB had been gathering quality and outcomes data, particularly from NHS providers, and that information on this would be reported through the Quality &amp; Patient Safety Committee in future.</p> <p><b>ACTION:</b> It was agreed IP and SD would discuss the reports further offline to enhance presentational aspects and aid IP's understanding of the data.</p> <p>The Joint Committee resolved to <b>note</b> the information presented in the reports.</p>
JC21/011	<p><b>Financial Performance Report - Month 12 2020-21</b></p> <p>The Joint Committee received a paper the purpose of which was to provide the final outturn for the financial year. Members noted that the financial position at was an under spend of £12.03m after making prudent provisions.</p> <p>SD reported that the under spend related mainly to months 1-12 under spend on the pass through elements of NHS Wales provider SLAs, NHS England anticipated underperformance against agreed block contracts where provider activity is forecast at &gt;20% below agreed baseline and Q1 - Q4 2020-21 development slippage. SD further reported that owing to uncertainty regarding the pace of activity, recovery and timing of information flows from NHS England providers, WHSSC had adopted a prudent approach to providing for expenditure reductions that may arise from under-performance.</p> <p>The Joint Committee resolved to <b>note</b> the content of the report.</p>
JC21/012	<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>

	The Joint Committee <b>resolved</b> to note the content of the reports from the Joint Sub-Committees.
JC21/013	<p><b>Any Other Business</b></p> <p><b>Standing Orders (SOs) and Standing Financial Instructions (SFIs)</b> KS reported that revised Model SOs and SFIs had recently been received from Welsh Government and that work was underway to review the WHSSC SOs and SFIs to propose any necessary changes.</p> <p>The changes to the Model SOs and SFIs would be subject to a Chair's Action and distributed to the Health Boards for consideration at their Board meetings.</p>
JC21/014	<p><b>Date and Time of Next Scheduled Meeting</b> Members noted that the next scheduled meeting would take place on 13 July 2021.</p> <p>There being no other business other than the above the meeting closed.</p>

The meeting closed at 12:30hrs

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

**Date:** .....