

**Minutes of the Meeting of the
WHSSC Joint Committee Meeting held In Public on
Tuesday 10 May 2022
via MS Teams**

Members Present:

Kate Eden	(KE)	Chair
Sian Lewis	(SL)	Managing Director, WHSSC
Iolo Doull	(ID)	Medical Director, WHSSC
Carole Bell	(CB)	Director of Nursing & Quality Assurance, WHSSC
Glyn Jones	(GJ)	Interim Chief Executive Officer, Aneurin Bevan UHB
Steve Moore	(SM)	Chief Executive Officer, Hywel Dda UHB
Ceri Phillips	(CP)	Independent Member, Cardiff & Vale UHB
Suzanne Rankin	(SR)	Chief Executive Officer, Cardiff & Vale UHB
Carol Shillabeer	(CS)	Chief Executive Officer, Powys THB
Ian Wells	(IW)	Independent Member, Cwm Taf Morgannwg UHB

Deputies:

Sian Harrop-Griffiths (for Mark Hackett)	(SHG)	Director of Strategy, Swansea Bay UHB
Claire Harding (for Karen Preece)	(CH)	Assistant Director of Planning, WHSSC
James Leaves (for Stuart Davies)	(JL)	Assistant Director of Finance, WHSSC

Apologies:

Karen Preece	(KP)	Director of Planning, WHSSC
Stuart Davies	(SD)	Director of Finance, WHSSC
Mark Hackett	(MH)	Chief Executive Officer, Swansea Bay UHB
Paul Mears	(PM)	Chief Executive Officer, Cwm Taf Morgannwg UHB
Jo Whitehead	(JW)	Chief Executive Officer, Betsi Cadwaladr UHB

In Attendance:

Jacqui Evans	(JE)	Committee Secretary & Head of Corporate Services, WHSSC
Helen Fardy	(HF)	Associate Medical Director, WHSSC
Kimberley Meringolo	(KM)	Planning Manager, WHSSC
Sian Morgan	(SiM)	Head of Laboratory, All Wales Medical Genomics Service, Cardiff & Vale UHB (For presentation only)
Nicholas O'Sullivan	(NO)	Senior Project Manager, Genomics Partnership Wales, Cardiff & Vale UHB (for presentation only)
Ian Phillips	(IP)	Chair, Welsh Renal Clinical Network (WRCN), Powys THB
Helen Tyler	(HT)	Corporate Governance Manager, WHSSC
Nick Wood	(NW)	Deputy Chief Executive NHS Wales, Welsh Government

Emma King (EK) Senior Specialised Services Planning Manager,
WHSSC

Minutes:

Richard Hughes (RJH) PA to Executives, WHSSC

The meeting opened at 09:30hrs

CONFIRMED

Min Ref	Agenda Item
JC22/053	<p>1.1 Welcome and Introductions</p> <p>The Chair welcomed members to the meeting in Welsh and English and reminded everyone that, since the COVID-19 pandemic, meetings will continue to be held virtually via MS Teams.</p> <p>No objections were raised to the meeting being recorded for administrative purposes.</p> <p>It was noted that a quorum had been achieved.</p> <p>The Chair reminded members that the purpose of the Joint Committee (JC) was to act on behalf of the seven Health Boards (HBs) to ensure equitable access to safe, effective and sustainable specialised services for the people of Wales by working collaboratively on the basis of a shared national approach, where each member worked in the wider interest.</p> <p>The Chair welcomed Dr Sian Morgan from the All Wales Genomics Laboratory who was in attendance to deliver a presentation on the Genomics Delivery Plan for Wales.</p>
JC22/054	<p>1.2 Apologies for Absence</p> <p>Apologies for absence were noted as above.</p>
JC22/055	<p>1.3 Declarations of Interest</p> <p>The JC noted the standing declarations and that there were no additional declarations of interest relating to the items for discussion on the agenda.</p>
JC22/056	<p>1.4 Minutes of the meeting held on the 15 March 2022 and Matters Arising</p> <p>The minutes of the JC meeting held on the 15 March 2022 were received and approved as a true and accurate record of the meeting.</p> <p>There were no matters arising.</p>
JC22/057	<p>1.5 Action Log</p> <p>The action log was received and members noted the progress on the actions including:</p> <ul style="list-style-type: none"> • JC22/004 – 3.5 Major Trauma Update – Dindi Gill from Major Trauma Network to provide an update in the September 2022 meeting. <p>All other items were confirmed as closed.</p>

JC22/058

2.1 Genomics Delivery Plan for Wales

Members received an informative presentation on the All Wales Genomics Laboratory. Dr Sian Morgan (SiM) Head of Laboratory, All Wales Medical Genomics Service, CVUHB gave an update on how the Wales Infants and Children's Genome Service (WINGS) had pushed the boundaries of genomic testing in Wales to an unprecedented scale using whole genome sequencing which has the capacity to sequence the entire DNA structure of the human body in a matter of hours.

Members noted the Watson family's patient story, which shared their first hand experience of using the WINGS, when their baby suffered from breathing difficulties and complications to her nose and airways.

Ian Wells (IW) queried how the service in Wales compared to the rest of the UK. SiM advised that the test directory in Wales was continually being updated as it was important to deliver equity of testing for Welsh patients.

Carole Shillabeer (CS) advised that the service was impressive and demonstrated a positive patient experience for the Welsh population. CS asked what potential genomics had in the field of mental health and neurodiversity. SiM advised that work in this area was progressing as described in the strategy, and that it aligned with Welsh Government (WG) policy. CS advised that it was important to ensure that whatever was being delivered through the genomic strategy was aligned to the mental health strategy. SiM agreed to discuss this further with CS outside of the meeting.

Members noted that that the genomics work was unique to Wales, and that NHS England were planning to undertake a similar pilot.

Suzanne Rankin (SR) thanked Sim for the work undertaken and asked what support was required from the HB's and other important stakeholders to support the delivery of the plan. SiM advised that since 2015, the importance of genomics had spread, and it was recognised that it was not just about diagnosis but also about prevention. There were two key areas that HB's could support relating to education, to enable patients in Wales to access screening as genomics was becoming more mainstream and ensure the right test, at the right time for the right patient; and to address the cancer challenge on dependency on materials, by asking oncology colleagues help the genomics to deliver.

Sian Lewis (SL) encouraged HB's to promote the engagement being undertaken on the Genomics Delivery Plan for Wales and the stakeholder engagement meetings, which will support WG to finalise the final draft in order for it to be publicised.

	<p>The Chair suggested that an update be brought back to the JC after the consultation.</p> <p>The Joint Committee resolved to:</p> <ul style="list-style-type: none"> • Note the presentation.
JC22/059	<p>3.1 Chair's Report</p> <p>The Chair's Report was received and the Chair gave an update on relevant matters undertaken as Chair since the previous JC meeting.</p> <p>Members noted:</p> <ul style="list-style-type: none"> • An update on the proposal for an interim Chair of the Individual Patient Funding Request (IPFR) Panel, • Attendance at the Integrated Governance Committee (IGC) meetings on the 30 March 2022 & 19 April 2022; and • Attendance at key meetings. <p>The Joint Committee noted that Professor Vivienne Harpwood had taken the decision to step down from her long serving role as Chair of the IPFR Panel in order to focus on the competing pressures within her HB as she enters the last six months of her tenure as Chair of Powys THB.</p> <p>The Chair expressed her gratitude to Professor Harpwood for the five years' service she had given to the IPFR panel and advised that she would formally write to thank her on behalf of the JC.</p> <p>The Joint Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report; and • Support that a letter of thanks be sent to Professor Harpwood for her commitment to the IPFR panel on behalf of the Joint Committee.
JC22/060	<p>3.2 Managing Director's Report</p> <p>The Managing Director's Report was received and the Managing Director gave an update on relevant matters undertaken since the previous JC meeting.</p> <p>Members noted updates on:</p> <ul style="list-style-type: none"> • an article published by WHSSC entitled "A Case Study on Reviewing Specialist Services Commissioning in Wales: TAVI for Severe Aortic Stenosis" in the Applied Health Economics and Health Policy Journal, and the success of the collaboration with CEDAR, • The first two NRP (Normothermic Regional Perfusion) organ retrievals undertaken by the Cardiff Transplant Retrieval Service,

	<ul style="list-style-type: none"> • The stakeholder engagement being undertaken on the Genomics Delivery Plan for Wales, • The positive feedback received following the Extension of the FastTrack Process for Military Personnel; and • The findings of a review into Molecular Radiotherapy (MRT) to guide development of an all Wales MRT service. <p>Members resolved to:</p> <ul style="list-style-type: none"> • Note the report; and • Note the consultation and engagement on the three-year Genomics Delivery Plan for Wales and cascade the document within Health Boards (HBs) and provide feedback by the 20 May 2022 deadline.
JC22/061	<p>3.3 Appointment of an Interim Chair for the All Wales IPFR Panel</p> <p>The report proposing that Dr Ruth Alcolado, the Vice Chair of the Individual Patient Funding Request Panel (IPFR), be appointed as Interim Chair of the IPFR Panel for a 3 month period (unremunerated) was received.</p> <p>Jacqui Evans (JE) advised that the proposal for an interim chair would support business continuity and allow sufficient time to prepare for, and undertake, an open and transparent recruitment process to appoint a substantive Chair. This included an update of the Terms of Reference (ToR) regarding the increased time commitment required and remuneration.</p> <p>Steve Moore (SM) advised that this had been identified by the NHS Wales Board Secretaries group, and JE gave an assurance that WHSSC provide regular updates to the group and that a specific briefing session on IPFR governance had been arranged for the Board Secretaries in June 2022.</p> <p>Members resolved to:</p> <ul style="list-style-type: none"> • Note the report; and • Approve the proposal to appoint Dr Ruth Alcolado as interim Chair to the Individual Patient Funding Request Panel (IPFR) for a 3 month period to support business continuity and to allow sufficient time to recruit a substantive Chair.
JC22/062	<p>3.4 Neonatal Transport – Update from the Delivery Assurance Group (DAG)</p> <p>The report providing an update from the Neonatal Transport Delivery Assurance Group (DAG) established to provide commissioner assurance on the neonatal transport service was received.</p>

Claire Harding (CH) presented the report and members noted the progress made against some of the governance risks identified and that feedback received indicated that arrangements to complete the Operational Development Network (ODN) were on track and nearing completion. Members noted that there was requirement to finalise the staffing and TUPE transfer issues through staff consultation.

Members noted that the template provided for performance data was a good example of the business intelligence that will be gathered, and that future reports would include real time data.

CS queried the level of clinical engagement involved and CH advised that positive contributions had been received.

Helen Fardy (HF) and Kimberley Meringolo (KM) both confirmed that that positive progress was being made in both Delivery Assurance Group (DAG) and ODN meetings, and that Gareth Howells, Director of Nursing, SBUHB had met with all of the clinicians involved.

The Chair requested that a progress report be brought as a routine item for future meetings.

Action: An update report on the Neonatal Transport Operational Delivery Network to be presented to the WHSSC Joint Committee at the next meeting.

It was noted that further work will be required once the ODN is established to fully implement the recommendations from the two transport reviews (Puddy and Fox) commissioned by WHSSC.

The Joint Committee resolved to:

- **Note** the information presented within the report; and
- **Receive assurance** that there were robust processes in place to ensure delivery of the neonatal transport services.

JC22/063

3.5 Draft Mental Health Specialised Services Strategy for Wales 2022-2028

The draft Mental Health Specialised Services Strategy for Wales 2022-2028 was received.

CH presented the report and members noted:

- work began in June 2021 on the development of the Specialised Services Strategy for Mental Health through a programme management structure,
- The programme had received excellent engagement from all HB's, and included key workstreams; and
- It was proposed that the draft strategy and questionnaire be circulated through a comprehensive stakeholder list in a bilingual format for comment between 10 May and 6 June 2022.

	<p>The feedback from stakeholder engagement process will be used to inform amendments to the strategy document and the EQIA, and it was anticipated that the final strategy will be published during Winter 2022</p> <p>Members queried if sufficient time had been allowed for the consultation period. CH advised that the consultation period had been considered in the overall timeline, which would be circulated to members.</p> <p>Members requested a list of the stakeholders who had been sent the draft strategy for comment and requested that the timeline be reviewed and that consideration be given to the Mental Health strategy evaluation report which was due to be published by July 2022. CH agreed to discuss this with CS outside of the meeting.</p> <p>ACTION: It was agreed that WHSSC would circulate additional information including a list of stakeholders that had been sent the draft strategy. A timeline on milestones and target dates would also be circulated.</p> <p>IW queried the scope of the capital investment and the availability of funding. SL advised that discussions had commenced with WG regarding capital availability including any capital monies which had been earmarked for Mental Health services.</p> <p>The Joint Committee resolved to:</p> <ul style="list-style-type: none"> • Note the draft Mental Health Specialised Services Strategy for Wales 2022-2028, and provided comments on the document; • Note that the draft Mental Health Specialised Services Strategy for Wales 2022- 2028 would be circulated through a comprehensive stakeholder list in a bilingual format for comment and that the suggested date of between 10 May and 6 June 2022, would be reviewed; and • Note that it was anticipated that the final strategy would be published during winter 2022, and would be brought back to the Joint Committee for approval.
JC22/064	<p>3.6 Preparedness for the COVID-19 Inquiry</p> <p>The report on preparedness for the COVID-19 inquiry was received.</p> <p>JE presented the report and members noted that:</p> <ul style="list-style-type: none"> • Since autumn 2021 Kevin Smith (KS), ex WHSSC Committee Secretary has been supporting WHSSC on a project to prepare for the forthcoming public inquiry into the COVID-19 pandemic, • the main activity of the project to date had been the creation of a COVID-19 structured archive, which included a timeline of key decisions taken by WHSSC,

	<ul style="list-style-type: none"> • WHSSC have been working with the legal and risk team at the NHS Wales Shared Services Partnership (NWSP) since summer 2021 and will engage legal representation through them should it be required, • At present it seemed unlikely that WHSSC would be a core participant of the inquiry, however they may be required to provide written evidence; and • The Committee Secretary role had been identified as the SRO for the work and linked in with the Board Secretaries group to discuss national progress. <p>SM advised that he had written to WG requesting clarity regarding legal issues and potential conflicts concerning the inquiry.</p> <p>The Joint Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report.
JC22/065	<p>3.7 Disestablishment of the Learning Disability Advisory Group (LDAG)</p> <p>The report seeking support to formally disestablish the Learning Disability Advisory Group (LDAG) was received.</p> <p>JE gave an overview of the work of the group and advised that as the group has not met for several years and the work of the group has been incorporated into the Inclusion and Corporate Business Division within Social Services in WG approving the disestablishment ensured effective governance for the JC.</p> <p>CS advised that it was not possible for the National Collaborative Commissioning Unit (NCCU) to provide the commissioning element previously undertaken by the LDAG, and that there was a requirement to establish a mechanism to provide commissioning as well as clarity on reporting arrangements. Members agreed that further consideration was required on the system of oversight of HB commissioned LD placements.</p> <p>Action – SL and CS to consider the system of oversight of HB commissioned LD placements and to provide an update at a future meeting.</p> <p>The Joint Committee resolved to:</p> <ul style="list-style-type: none"> • Note the work undertaken by the Joint Committee’s sub group the NHS Wales Mental Health and Learning Disability Collaborative Commissioning Group; • Approve the proposal to disestablish the NHS Wales Mental Health and Learning Disability Collaborative Commissioning Group subject to a commissioning mechanism and reporting arrangements; and

	<ul style="list-style-type: none"> • Note that the work of the group has been incorporated into the Inclusion and Corporate Business Division within Social Services in Welsh Government (WG), and that further consideration was required on the system of oversight of Health Board commissioned LD placements.
JC22/066	<p>3.8 Annual Governance Statement (AGS) 2021-2022 The Annual Governance Statement (AGS) 2021-2022 was received for retrospective approval.</p> <p>JE presented the report and member noted:</p> <ul style="list-style-type: none"> • As a hosted body under Cwm Taf Morgannwg UHB (CTMUHB), WHSSC is required to produce an Annual Governance Statement (AGS), and is not required to follow the same process for statutory bodies who are required to produce a three part annual report, • The statement brings together, in one place, all disclosures relating to governance, risk and control and is included within the CTMUHB Annual Report and Accounts presented to WG, • The AGS also provides assurance to the Joint Committee and individual HB's on the processes and procedures in place to enable the WHSSC to carry out its functions effectively, • The draft AGS 2021-2022 was considered by the Integrated Governance Committee (IGC) on the 19 April 2022, and the committee put forward some minor amendments to strengthen the document, • The statement was submitted to the governance team CTMUHB by the 29 April deadline; and • The final version of the document will be included in CTMUHB annual report and accounts being submitted to Welsh Government and Audit Wales on the 15 June and will be presented to the CTMUHB Annual General Meeting (AGM) on the 28 July 2022. <p>There Joint Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report, • Note that the Draft Annual Governance Statement (AGS) was endorsed at the Integrated Governance Committee (IGC) on 19 April 2022 and the draft was submitted to CTMUHB in readiness for the 29 April 2022 deadline set, • Approve the WHSSC Annual Governance Statement (AGS) 2021-2022, • Note that the WHSSC Annual Governance Statement (AGS) 2021-2022 will be included in the CTMUHB Annual report being submitted to Welsh Government and Audit Wales by 15 June 2022, recognising that it had been reviewed and agreed by the relevant sub-committees of the Joint Committee; and

	<ul style="list-style-type: none"> • Note that the final WHSSC Annual Governance Statement (AGS) will be included in the Annual Report presented at the CTMUHB Annual General Meeting (AGM) on 28 July 2022.
JC22/067	<p>3.9 Sub-Committee Annual Reports 2021-2022</p> <p>The Sub Committee Annual Report for 2021-2022 were received.</p> <p>JE introduced the report and members noted the reports for the:</p> <ul style="list-style-type: none"> • Integrated Governance Committee (IGC), • Quality & Patient Safety Committee (QPSC), • All Wales Individual Patient Funding Request (IPFR) panel, • Welsh Renal Clinical Network (WRCN); and • Management Group. <p>The Joint Committee resolved to:</p> <ul style="list-style-type: none"> • Note the Sub-Committee Annual Reports for 2021-2022.
JC22/068	<p>3.10 Sub-Committee Terms of Reference</p> <p>The Sub-Committee Terms of Reference (ToR) were for the Integrated Governance Committee (IGC), the Quality & Patient Safety Committee (QPSC) and the Management Group (MG) were received.</p> <p>JE presented the report and members noted that the ToR for the sub-committees of the Joint Committee were reviewed on an annual basis in line with Standing Orders (SO's) and to ensure effective governance. The ToR for the IGC, QPSC and MG been updated to strengthen them in accordance with the list outlined in the SO's, and to achieve consistency in the information included. In future, a detailed schedule of changes will be provided with updated ToR for completeness.</p> <p>Members noted that the ToR for the Welsh Renal Clinical Network (WRCN) were approved by the Joint Committee on 18 January 2022, and discussions were ongoing with Welsh Government concerning updating the ToR for the All Wales IPFR panel.</p> <p>The Joint Committee resolved to:</p> <ul style="list-style-type: none"> • Note that the Terms of Reference were discussed and approved at sub-committee meetings on 30 March 2022 and 28 April 2022; and • Approve the revised Terms of Reference (ToR) for the Integrated Governance Committee (IGC), the Quality & Patient Safety Committee (QPSC) and the Management Group (MG).
JC22/069	<p>4.1 COVID – 19 Period Activity Report Month 11 2021-2022</p> <p>The COVID-19 activity report for month 11 was received and members noted the scale of the decrease in specialist activity delivered for the Welsh population by providers in England, together with the two major supra-regional providers in South Wales.</p>

Members noted:

- the decrease during the peak COVID-19 periods, which informed the level of potential harms to specialised services patients,
- the loss of financial value from the necessary national block contracting arrangements introduced to provide overall system stability; and
- recovery rates, access comparisons across HB's and waiting lists.

Members discussed the challenges in obtaining recovery trajectories from HB's and the importance of receiving this information in order to plan specialised services. James Leaves (JL) advised that the information was being sought from NHS Wales providers with an option to make a formal request through alternative methods. It was noted the trajectories received from North West England NHS had been fairly robust.

CS suggested that flexible options be considered through moving patients to alternative service providers which could provide a suitable service with lower waiting times.

The Chair suggested that the recovery trajectories should be discussed further and proposed extending July's Joint Committee meeting in order to review the trajectories from NHS Wales providers.

ACTION: the July JC meeting to include a workshop on recovery.

The Joint Committee resolved to:

- **Note** the report.

JC22/070

4.2 Financial Performance Report Month 12 2021-2022

The financial performance reports setting out the financial position for WHSSC for month 12 of 2021-2022 was received.

Members noted that the financial position was reported against the 2021-2022 baselines following approval of the 2021-2022 WHSSC Integrated Commissioning Plan (ICP) by the Joint Committee in January 2021.

The financial position reported at Month 12 for WHSSC was a year-end outturn under spend of £13,112k. The under spend predominantly relates to slippage in new planned developments, underperformance against Welsh Service Level Agreement (SLA) baselines, unrealised growth provisions against 2021-2022 forecast requirement and releasable reserves from 2020-2021 provisions.

The Joint Committee resolved to:

	<ul style="list-style-type: none"> • Note the report.
JC22/071	<p>4.3 Corporate Governance Matters Report</p> <p>The Corporate Governance Matters report was received and members noted the update on corporate governance matters that had arisen since the last meeting.</p> <p>The Joint Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report.
JC22/072	<p>4.4 Reports from the Joint Sub-Committees</p> <p>The Joint Committee Sub-Committee reports were received as follows:</p> <p>i. Audit and Risk Committee (ARC) Assurance Report</p> <p>The Joint Committee noted the assurance report from the CTMUHB Audit and Risk Committee meeting held on the 28 April 2022.</p> <p>IW paid tribute to the continuing development work on the Corporate Risk Assurance Framework (CRAF), which provided a clear sight on risks. IW also expressed a real concern regarding the position of handover times for Ambulances and noted this as a major risk for the Emergency Ambulance Services Committee (EASC).</p> <p>ii. Management Group Briefings</p> <p>The Joint Committee noted the core briefing documents from the meetings held on the 24 February 2022, 24 March 2022 and the 28 April 2022.</p> <p>iii. Quality & Patient Safety Committee (QPSC)</p> <p>The Joint Committee noted the Chair's report from the meeting held on the 30 March 2022.</p> <p>iv. Integrated Governance Committee (IGC)</p> <p>The Joint Committee noted the Chair's report from the meeting held on the 30 March 2022 and 19 April 2022.</p> <p>v. Individual Patient Funding Request (IPFR) Panel</p> <p>The Joint Committee noted the Chair's report from the meeting held on the 22 April 2022.</p> <p>It was noted the meetings scheduled for 7 April and 21 April 2022 had to be stood down due to the lack of quoracy.</p> <p>vi. Welsh Renal Clinical Network (WRCN)</p> <p>The Joint Committee noted the Chair's report from the meeting held on the 8 April 2022.</p>

	<p>IP highlighted the proposed name change of WRCN to the “Welsh Kidney Service” and members noted that a formal proposal would be brought to the next meeting for consideration and approval.</p> <p>The Joint Committee resolved to:</p> <ul style="list-style-type: none"> • Note the reports.
JC22/073	<p>5.1 Any Other Business No other items of urgent business were received.</p>
JC22/074	<p>5.2 Date and Time of Next Scheduled Meeting The JC noted that the next scheduled meeting would be on the 12 July 2022.</p> <p>There being no other business other than the above the meeting was closed at 10:40 hrs.</p>
JC22/075	<p>5.3 In Committee Resolution The Joint Committee resolved: “That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest” (Section 1 (2) Public Bodies (Admission to Meetings) Act 1960)”.</p>

Chair’s Signature:

Date: