



CORE BRIEF TO MANAGEMENT GROUP MEMBERS

MEETING HELD ON 23 JANUARY 2020

This briefing sets out the key areas of discussion and decision. It aims to ensure the Management Group members have a common core brief to disseminate within their organisation.

1. Welcome and Introductions

The Chair welcomed members to the meeting.

2. Minutes from Previous Meeting and Action Log

The Minutes from the meetings held on 12 December 2019 were noted.

Members noted the action log and received updates on:

- **MG172** – 2020-23 ICP: Public Health input – SL invited to attend LHB directors of public health meeting, date to be confirmed. A Public Health secondee would be joining WHSSC for six months and a consultant had been identified who might be available to do additional work with WHSSC.
- **MG179** – Redesign of cardiac pathway: CTMUHB Board paper – item deferred to February 2020.
- **MG191** – Provision of Funding for Paediatric Activity Blades: circulate patient numbers by ALAS Centre - difficulty in obtaining information, action deferred to February 2020.

3. Report from the Managing Director

Members received the Managing Director's report and in particular noted an update on the Investment in Phase 1 Adult Congenital Heart Disease, where the provider health boards had confirmed that the original activity agreed in the business case was greater than could be realistically achieved in practice partly due to over-ambitious scheduling of work but also due to staff absences and the impact of 'DNAs'. WHSST would pursue improvements and report back in around six months.

4. CAMHS Tier 4 Inpatient Service Specification

Members received a paper that sought approval for publication of a new Tier 4 CAMHS service specification and support for the proposed implementation process. Members expressed some reservations as to whether all of SBUHB colleagues' issues raised through consultation had been addressed; it was also acknowledged that there could be some cost pressures around implementation of the new specification that needed to

be explored with the providers through a mapping exercise that may identify gaps.

Members were supportive of the proposed new service specification in principle but it was agreed that a dialogue with SBUHB regarding any remaining clinical concerns was required together with a gap analysis for phases 1 and 2; following which the proposal should be brought back for approval.

5. Cystic Fibrosis - Home IV Antibiotics Service

Members received a paper that provided an update on the implementation of a prepared Home IV antibiotics service for patients with Cystic Fibrosis in south Wales and Southern Powys. It was noted that this service had been considered separately from the case for an MDT and extra beds and that this was not ideal from a commissioning perspective.

Members:

- Noted the information presented within the report;
- Supported taking forward the case for a recurrent Home IV service and satellite clinic staff to the 2020/21 ICP; and
- Supported further evaluation of the impact on inpatient demand to inform the planned bed base to be supported by WHSSC within Phase 2 of the business case.

6. Aortic Stenosis Clinical Pathway Update

Members received a paper that provided an update on the development of a clinical pathway for the treatment of Aortic Stenosis. The importance of the pathway had been acknowledged at a recent joint meeting of Cardiology and Cardiac Surgery colleagues at CVUHB. It was noted that much of the pathway sat in secondary care services but Joint Committee had made it clear that it wanted the WHSS Team to be more involved in overall pathway design. NICE had recently published helpful guidance which provided the basis of the care pathways.

Members noted the progress in the development of a clinical pathway treatment of Aortic Stenosis; and supported the further work required to agree and implement the proposed pathway and to seek support through the Heart Conditions Implementation Group (HCIG).

7. Cardiac Magnetic Resonance Imaging (MRI)

Members received a paper that provided them with the current position with regards to the commissioning and monitoring of Cardiac MRI. The paper informed members about concerns raised by the Cardiac Network through the HCIG regarding the uncertainties around the health boards' progress against the 5 Year plans as neither the data sharing nor the discussions regarding future commissioning intentions appear to have been progressed. HCIG agreed that the Cardiac Network would seek WHSSC support in taking forward the issues, particularly in relation to recording data.

Members noted the information presented within the report but referred the issues regarding data collection back to HCIG as it was felt that this was not a matter for WHSSC.

8. Interim Mobile Positron Emission Tomography (PET) Unit

Members received a paper that provided an overview on the process of commissioning additional interim PET-Computer Tomography (PET-CT) capacity for the south Wales population via a mobile PET-CT scanner. The paper also outlines the advantages and disadvantages of continuing to commission a mobile scanner after the replacement PETIC scanner is installed in Cardiff. Members sought assurance that the commissioning of additional interim capacity for south Wales wouldn't be inconsistent with work being done on the all Wales strategy for PET capacity and that the detailed financial assumptions supported the utilisation of a mobile PET scanner.

Members noted the information presented within the report and provided feedback asking for the detailed financial assumptions to be taken through the finance sub-group and clarification that the proposed commissioning of additional interim capacity for the south Wales population via a mobile PET-CT scanner would not be at odds with the all Wales strategy for PET-CT scanning, and for the proposal to be brought back to the February meeting.

9. Extracorporeal Photopheresis (ECP)

Members received a paper that informed members that a proposal to provide ECP for patients in south Wales with chronic graft versus host disease (GvHD) at the University Hospital of Wales (UHW) as an outreach service delivered by NHS Blood & Transplant (NHSBT) has been approved by WHSSC Corporate Directors Group.

Members noted that the proposal to provide ECP for patients in south Wales with chronic GvHD at UHW as an outreach service delivered by NHSBT has been approved by WHSSC Corporate Directors Group.

10. Replacement Wheelchair Programme for North Wales

Members received a paper that requested approval for the release of funding for the BCUHB Wheelchair Replacement Scheme as included in the 2018-21 Integrated Commissioning Plan.

Members:

- Approved the release of funding for the replacement wheelchair programme in North Wales for 2019/20 (part year) and recurrent funding for 2020/21 and 2021/22); and
- Noted the evidence that there is a more rigorous performance management process being established for the posture and mobility wheelchair service.

11. Neonatal Transport Review Recommendations

Members received a paper that set out the key recommendations from the Review of the South Wales Neonatal Transport Service and sought support for the next steps to develop a 24 hour neonatal transport service. It was noted that the Neonatal Network had historically suggested duplication of the existing service but this was neither cost effective nor clinically effective and that the recommendations from the Review were different to this.

The paper included a suggestion that the commissioning of the service might be better suited to EASC. Members generally expressed a preference for WHSSC to commission the 24 hour service initially and possibly transfer responsibility, after this, to EASC.

Welsh Government had indicated that its Quality Delivery Board members were united in a wish to see interim arrangements introduced as soon as possible, so as to minimise the risks of further avoidable harm being caused by the absence of a 24 hour service. Members agreed that prioritising a permanent 24 hour solution was preferable, provided there was no further significant delay.

Members noted the draft recommendations within the report; and supported the development of future commissioning arrangements for neonatal transport services in south Wales.

12. 2020-20 Integrated Commissioning Plan (ICP)

Members received the latest version of the ICP that was being considered by the Boards of LHBs together with a supporting paper outlining the actions to be taken by the WHSS Team in relation to the ICP following its approval in principle by the Joint Committee on 6 January 2020. Members noted that the ICP was being recommended for approval by all seven LHBs.

13. WHSSC Policy Group Update

Members received a paper on the work of the WHSSC Policy Group and noted the information presented within the report. It was agreed to reduce the frequency of reporting to quarterly.

14. Integrated Performance Report

Members received a report on the performance of services commissioned by WHSSC for October 2019 and noted the services in escalation and actions being undertaken to address areas of non-compliance.

In particular it was noted that cardiac surgery performance in south Wales was a continuing concern but that CVUHB was progressing outsourcing to North Staffordshire (Stoke), also that SBUHB had a plan to eliminate 36 week RTT breaches by 31 March 2020. The plastic surgery service at SBUHB was still a cause for concern with some very long waiting times. The cochlear service at POW hospital in Bridgend was still suspended.

15. Finance Report 2019-20 Month 9

Members received a report on the financial position for WHSSC for the ninth month of 2019-20 showing an under spend of £5.1m year to date and forecast underspend of £3.3m for the full year.

16. Other business

Perinatal Mental health – Mother and Bay Unit Members noted a letter from the Minister for Health & Social Services asking WHSSC to proceed with an interim option, being a six bedded unit at Tonna Hospital.

Coronavirus A Welsh patient had been assessed with a negative indication the previous week via NHSE. The WHSS Team had put contractual arrangements in place with NHSE for any future cases.

Shrewsbury and Telford Hospital NHS Trust (SaTH) It was noted that some CAMHS cases were being held in inappropriate beds in ED at this Trust which was in special measures.

Major Trauma Network (MTN) – Recruitment It was reported that recruitment to the MNT was progressing well and that weekly flash reports supported this.

