

CORE BRIEF TO MANAGEMENT GROUP MEMBERS

MEETING HELD ON 21 JANUARY 2021

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 noting that, due to the COVID-19 pandemic, the meeting was being held via MS Teams. It was noted that a quorum had been achieved.

Written questions from members and answers had been published in advance of the meeting and had been embedded within the meeting papers.

2. Action Log

Members noted the action log and received an update on:

- MG180 Specialised Haematology Commissioning: Report on work on BMT pathway. Indefinitely delayed by pandemic – carried forward.
- **MG202** Replacement Wheelchair Programme for the Posture and Mobility Service in South Wales. Little has changed since previous paper presented to MG – carry forward to February 2021.
- **MG227** Update on the Collaborative Kidney Care Project: PTHB issues. Action closed but noted that S Spence is dealing with issue at Llandrindod Wells dialysis unit.
- **MG228** Augmentative and Alternative Communication (AAC) Service Review. The service has not yet moved to Phase 2; a report will follow in May 2021.

3. Utilisation of Forecast Underspend

Members received a paper that reported the WHSSC Chair's Actions taken to approve proposals for the utilisation of forecast underspend, based on the Joint Committee's decision taken on 15 December 2020 and asked members to consider the utilisation of forecast underspend for a CT-MRI proposal received from SBUHB.

It was noted that SBUHB could have proceeded with the CT-MRI proposal without referral to WHSSC but members were supportive of the proposal in any event.

Members (1) noted the list of proposals supported by WHSSC Corporate Directors Group Board and approved by WHSSC Chair's Action in line with the decision of Joint Committee taken on 15 December 2020; and (2) supported the use of the WHSSC forecast underspend to increase CT-MRI capacity at SBUHB, to reduce the backlog, on a non-recurrent basis until 31 March 2021.

4. Neonatal Transport Update

Members received an oral update and noted that the interim 24/7 model went live on 4 January but was only agreed for six months. Members of the Neonatal Transport Sub-group had previously been asked to consider the clinical model for the permanent solution but had recently indicated that they were too busy to do this. The WHSS Team was disappointed to hear this but would proceed with the commissioning process based on a lead provider model.

5. Integrated Commissioning Plan 2021-22 (ICP)

Members received the draft ICP. Following the formal meeting members received a presentation on the key features of the ICP and noted that the final version would be presented to Joint Committee on 16 February for approval.

6. All Wales Lymphoma Service (AWLS) Update

Members received a paper that provided an update on the AWLP service, in particular outlining:

- previous investment in the service;
- growth in demand and underlying drivers;
- current service model and capacity;
- performance against turnaround time targets;
- contracting arrangements;
- areas of risk in the service; and
- areas for future service improvement.

Members (1) noted the previous investment in the service and level of baseline activity; (2) noted the increasing demand for lymphoma pathology testing since investment in 2015-16 and the factors underlying this increase; (3) noted the performance against the revised turnaround time target to date in 2020-21 (in the context of reduced activity due to the pandemic); (4) noted that adjustments to the contract have been agreed to help manage increasing activity; (5) noted the work proposed by the cancer and blood commissioning team into 2021 to strengthen commissioning and assurance in relation to the quality of the AWLP service; and (6) supported WHSSC making a formal request that the AWLP service nominate a clinical lead.

7. Hepato-Pancreato-Biliary Surgery in South Wales

Members received a paper that sought support to include a provision for tertiary hepatology within the 2021-22 WHSSC financial plan, and to include as part of the collective commissioning framework of the 2021-22

WHSSC ICP. The paper also provided a briefing for the members, on the current status of Hepato-Pancreato-Biliary services in south Wales.

It was agreed that utilisation of the proposed provision in the ICP would be subject to approval of a business case and that the collective commissioning work would initially be exploratory in its nature.

It was agreed that the Associate Programme Director for Tertiary and Specialist Services Planning Partnership, CVUHB/SBUHB should be asked to address the sustainability issues.

Members (1) supported the inclusion of a provision for tertiary hepatology within the 2021-22 WHSSC financial plan; (2) supported inclusion of tertiary hepatology for the collective commissioning within the 2021/22 WHSSC ICP; and (3) noted the information presented within the report.

8. Month 8 Activity Report

Members received a paper the purpose of which was to highlight the scale of the decrease in activity levels during the peak COVID-19 period and whether there are any signs of recovery in specialised services activity. These activity decreases are shown in the context of the potential risk re patient harms and of the loss of value from nationally agreed financial block contract arrangements.

The rate of recovery in England had slowed down and recovery of Welsh providers had stalled in month 8.

The early month 9 data showed some erratic signs of recovery but the latest information from England suggested that elective capacity was being turned off.

Members noted the information presented within the report.

9. 2020-21 Month 9 Finance Report

Members received a paper the purpose of which was to provide the current financial position of WHSSC together with the outturn forecast for the financial year. The financial position at month 9 is a year to date underspend of £14.1m and a forecast year end under spend of £14.8m.

This under spend relates mainly to months 1-9 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 >20% below agreed baseline and Q1 – Q3 2020-21 development slippage.

Members noted the information presented in the paper.

