

CORE BRIEF TO MANAGEMENT GROUP MEMBERS

MEETING HELD ON 21 OCTOBER 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 received an update on progress against the action log and **noted** the updates.

3. Managing Director's Report

Members received the Managing Director's Report and **noted** updates on:

- The De-Escalation of SBUHB Cardiac Surgery,
- The De-escalation of SBUHB Trans-catheter Aortic Valve Intervention (TAVI) Service,
- The Commissioning of Future New Services for Mid, South and West Wales, specifically relating to Health Board (HB) Board approval for requests from the NHS Wales Collaborative (Collaborative) for WHSSC to:
 - Commission Hepato-Pancreato-Biliary Services,
 - Commission the Hepato-Cellular Carcinoma (HCC) MDT,
 - develop a specialist orthopaedic paediatric service specification with a view to future commissioning of the service,
- The All Wales Positron Emission Tomography (PET) Programme Update,
- An Organisational Development Session with Improvement Cymru, and
- Cochlear Services.

4. Complex Cardiac Devices – Consideration of Wye Valley Trust as a Designated Commissioned Provider

Members received a report seeking support to designate Wye Valley Trust (Herford County Hospital) as a commissioned provider of Complex Cardiac

Devices for Powys residents and a small number of Welsh Border residents.

Members (1) **noted** the information presented within the report, and (2) **supported** designating Wye Valley Trust (Hereford County Hospital) as an additional commissioned provider for Complex Cardiac Devices for Powys Residents and patients who reside along the border who are referred to or under the care of the cardiology service in Hereford.

5. Adult Inherited Metabolic Disease (AIMD)

Members received a report requesting support for the release of funding to enable the implementation of the 2020/21 Integrated Commissioning Plan (ICP) scheme for the development of the Adult Inherited Metabolic Disease Service.

Members (1) **supported** the release of funding to enable the implementation of the 2020/21 ICP scheme for the development of the Adult Inherited Metabolic Disease Service, and (2) **noted** that the requested funding is within the provision made for Adult IMD within the ICP 2020-21.

6. Tertiary Hepatology – Collective Commissioning

Members received a report outlining the background to the inclusion of \pounds 300k within the WHSSC ICP 2021-24 for collective commissioning of tertiary hepatology; which summarised the tertiary hepatology proposal submitted by CVUHB and the advice to WHSSC received from hepatology leads; and which in view of the advice received on the proposal, and Joint Committee's agreement to include the HCC MDT within WHSSC's commissioning remit, to propose an alternative approach to utilising the \pounds 300k provision for the benefit of patients with liver disease.

Members noted that the proposal that the scheme was re-focused to address the risks to sustainability and quality of the HCC MDT only. This follows advice received through engagement with Health Boards (HBs) on the tertiary hepatology business case, further clinical conversations held between the WHSSC cancer & blood commissioning team and the HCC MDT, and the recent decision of Joint Committee (currently being ratified by HBs) to approve delegation of the HCC MDT to WHSSC's commissioning remit.

Members (1) **noted** the information within this report, including the advice WHSSC has received on the tertiary hepatology business case, the risks affecting the HCC MDT, and the change to WHSSCs commissioning remit to include the HCC MDT, (2) **noted** that the current tertiary hepatology business case is unlikely to be supported by HBs as a collective commissioning scheme, and that it only partially addresses the risks to the sustainability and capacity of the HCC MDT, (3) **agreed** that that the proposal for the provision of £300k for hepatology in the WHSSC ICP 2021/24 be re-purposed to address the immediate risks to the sustainability and capacity of the HCC MDT as a WHSSC commissioned service (4) **supported** that WHSSC requests a specific HCC MDT proposal

from CVUHB to address the immediate risks in the service (developed with input from Velindre Cancer Centre and hepatology leads). In addition, that WHSSC continues their work regarding the collective commissioning of tertiary hepatology services.

7. Major Trauma Recurrent Funding

Members **noted** that the item had been deferred until a future date.

8. Integrated Commissioning Plan 2022-2025

Members received an early draft of the Integrated Commissioning Plan (ICP) 2022-2023.

Members **noted** report.

9. COVID-19 Activity Report for Month 5 2021-2022

Members received a report highlighting the scale of the decrease in activity delivered for the Welsh population by providers in England, together with the two major supra-regional providers in South Wales.

Members noted the decrease in activity 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. The report also gave an update on recovery rates, access comparisons across HBs and waiting lists.

Members **noted** the report.

10. Financial Performance Report - Month 6 2021-22

Members received the Financial Performance Report for Month 5 which provided the current financial position of WHSSC together with the outturn forecast for the financial year. The financial position reported at Month 6 for WHSSC is a year-end outturn forecast under spend of $\pounds 9,308k$.

Members **noted** that the under spend predominantly related to the slippage of planned developments, declared slippage of prior year developments by Cardiff & Vale, handback of 50% of the COVID recovery funding and releasable reserves from 2020/21 provisions. There is a partial cost pressure offset with the over spend in Independent Patient Funding Requests (IPFR), inclusion of inflation in English provider positions for the second half of the year and Mental Health due to high Children and Adolescent Mental Health Services (CAMHS) out of area activity and complex Learning Disability (LD) patient placements. Members **noted** the current financial position and forecast year-end position.

11. Forward Work Plan

Members **noted** the forward work plan.

