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Pwyllgor Gwasanaethau Iechyd
Arbenigol Cymru (PGIAC)
Welsh Health Specialised
Services Committee (WHSSC)

WELSH HEALTH SPECIALIST SERVICES COMMITTEE

PERFORMANCE FRAMEWORK

FEBRUARY 2023

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<i>Issue Date:</i>	16 May 2023
<i>Review Date:</i>	16 May 2026
<i>Document No:</i>	Corp-024 A

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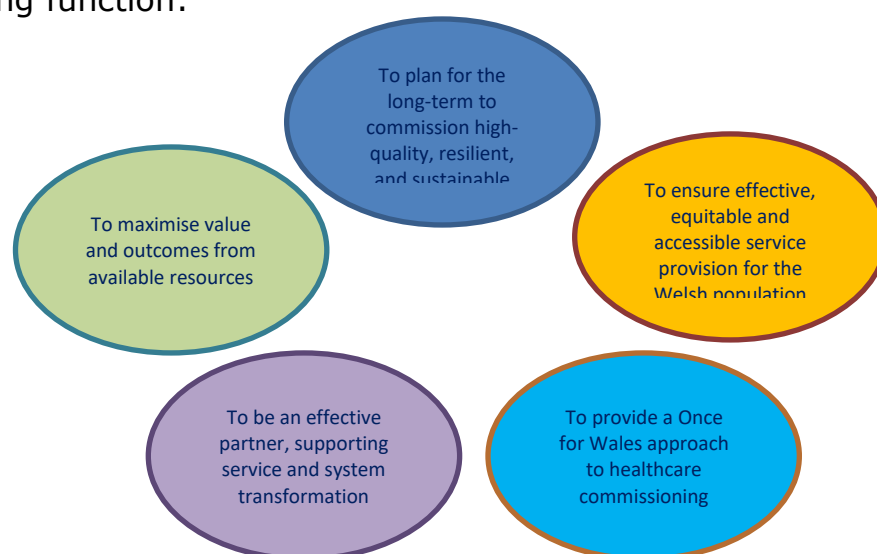
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1. INTRODUCTION

On behalf of the 7 Health Boards in Wales, The Welsh Health Specialist Services Committee (WHSSC) has a responsibility to commission services of the highest quality for the best cost for the Welsh population. It is committed to the prudent use of resources, and value based commissioning.

WHSSC aims to ensure that services are commissioned and delivered to a high quality, monitoring services regularly, and realising both value for money and service sustainability.

WHSSC seeks to pursue the following Strategic Objectives to fulfil its National commissioning function:



As a National Commissioner, WHSSC has responsibility to performance manage commissioned services and has therefore developed this framework to outline how it will fulfil its functions in this regard. We are committed to developing a compassionate and collective culture that is underpinned by effective performance management and a focus on improvement. We consider that effective performance management is the responsibility of every member of the WHSSC team.

2. PURPOSE

The purpose of the Performance Framework is to describe the organisation's system for ensuring effective commissioning including appropriate monitoring, performance management and escalation. Working on behalf of the 7 Health Boards in Wales, WHSSC has a duty to monitor and report on providers performance and ensure contracted services are delivered within cost, to the appropriate levels of activity and to the standard and quality set out within WHSSC service specifications. The Performance Framework is part of our wider governance framework which ensures our commissioning activities are undertaken in line with public sector accountabilities.

The development and communication of the Framework will act as a useful engagement tool to embed ownership of performance at every level within WHSSC, and also to

articulate our performance management expectations from those we commission services from.

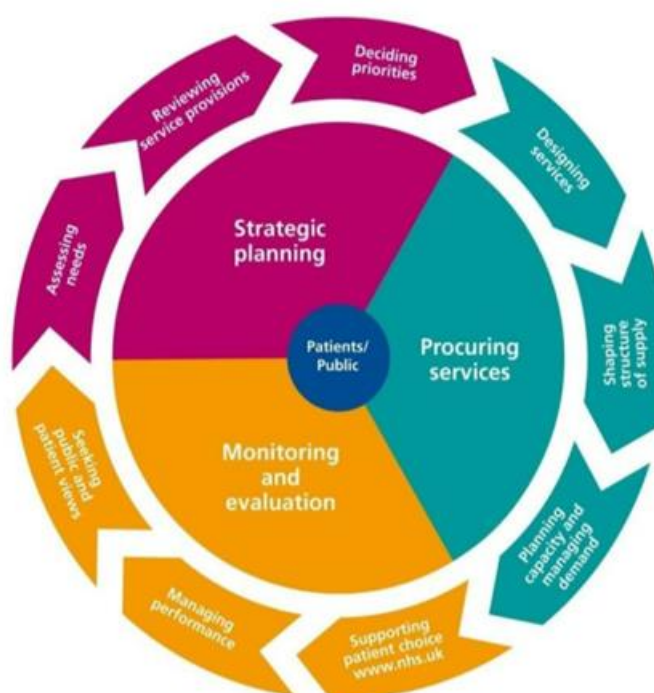
This document therefore sets out the performance management approach, including how it will operate and be embedded. Specifically it details:

- The Commissioning Cycle
- The WHSSC Performance Management Approach
- How the approach will be embedded
- Accountabilities
- Escalation

The framework is supported by a suite of templates (included as appendices) which aim to bring standardisation and commonality to the activities set out within this framework.

3. THE COMMISSIONING CYCLE

The Commissioning cycle sets out a range of activities associated with effective commissioning through strategic planning, procurement of services and Monitoring and evaluation. This framework concerns itself predominantly with the monitoring and evaluation activities, specifically; performance management; performance monitoring; performance reporting; and escalation.



4. WHSSC PERFORMANCE MANAGEMENT APPROACH

4.1 Principles

WHSSC's Performance Management arrangements are driven by the following principles:

Arrangements that:

- Demonstrate clear expectations of ourselves and providers with regards performance management
- Demonstrate behaviours aligned with WHSSC values with an emphasis on continual improvement
- Enable a balanced scorecard approach, aligning quality, cost and performance
- enable openness and transparency as related to the commissioning of specialised services for the welsh population
- enable commissioning of services to the highest quality for the most effective cost (Value based commissioning)
- enable scrutiny and assurance of commissioned services (both quality and cost)
- Enable clear processes for risk and escalation
- Offer opportunities for re-commissioning where necessary based on a) non performance b) creating a richer market
- Has a clear thread across all levels of its hierarchy with well defined roles and responsibilities at each level

4.2 Performance Management levels

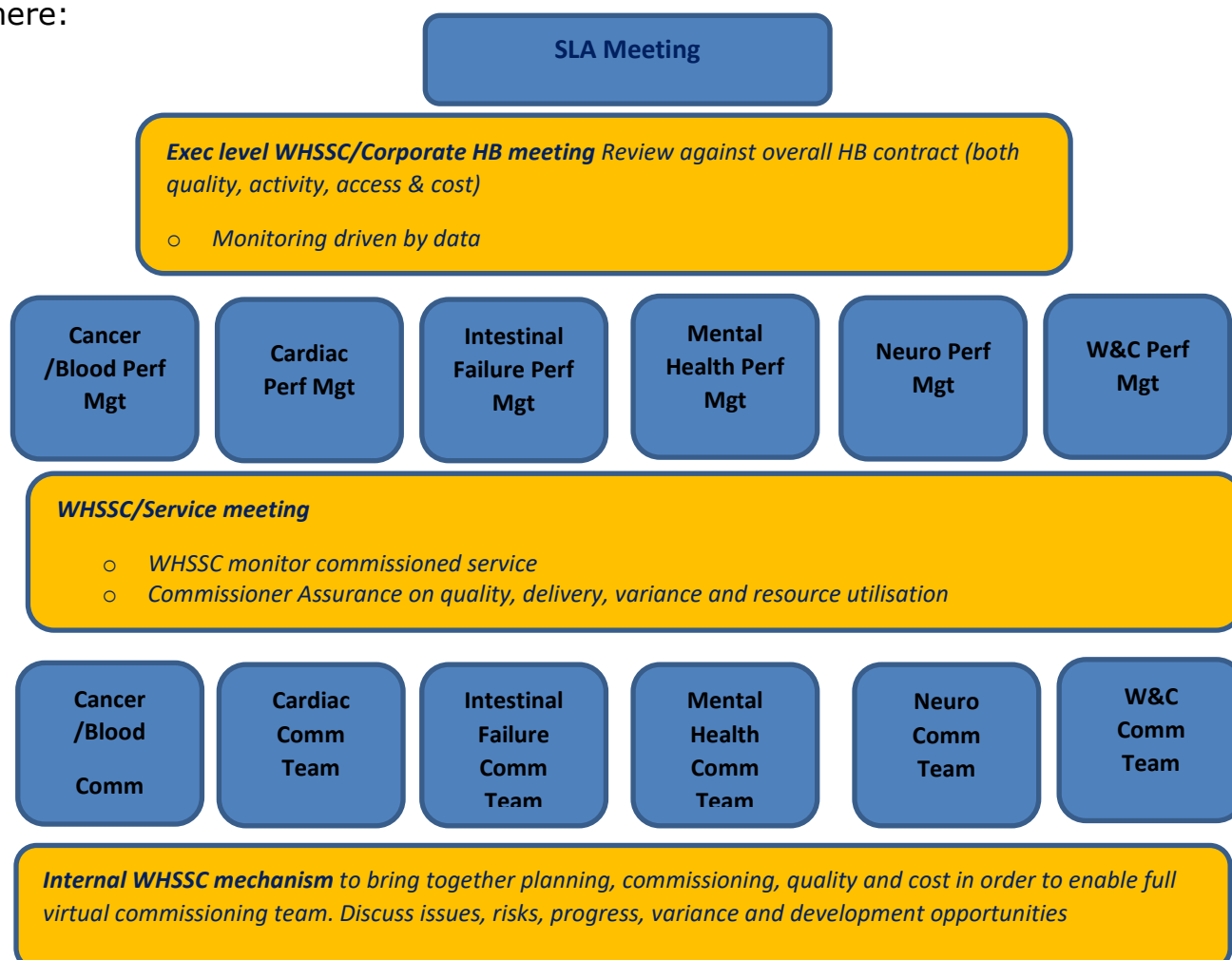
There are 3 levels at which performance management discussions between WHSSC and provider Health Boards take place, and upon which the Performance Management arrangements have been built; Strategic, Planning and Performance.

The performance framework hierarchy is outlined below:

Level of discussion	Meeting	Purpose
Strategic	Board to Board	<ul style="list-style-type: none"> • Strategic direction • Strategic risks • Strategic appetite for service developments • Strategic discussion on population health, equity, access etc • Enabling delivery
	Exec to Exec	
Planning	Planning team to HB corporate teams	<ul style="list-style-type: none"> • Monitor progress with development of ICP and IMTPs Identify barriers/risks to implementation of plan and developments contained therein • Share intelligence in order to triangulate workforce, finance and performance improvement • Ensure there are 'no surprises' on performance and delivery issues
Performance	SLA Meetings	<ul style="list-style-type: none"> • Formally manage and escalate variation in performance on quality, activity, delivery of Ministerial measures and financial performance. • Formally receive exception reports on services in Escalation • Deal with issues escalated from the service level performance meetings

		<ul style="list-style-type: none"> Formally note and monitor investments and benefits
	Service level performance meetings	<ul style="list-style-type: none"> To monitor performance in individual service areas – including quality, activity, Ministerial and service specification measures and financial performance To monitor investments and benefits To escalate issues as needed to the SLA meeting with Health Boards
	Escalation	<ul style="list-style-type: none"> To enable development of an action plan for those services in escalation To enable monitoring of necessary actions To enable de-escalation

A more detailed understanding of the performance element in particular can be seen here:



It is essential for the performance arrangements to be effective, that clear terms of reference are established for all of the constituent parts. Attached to this paper therefore are draft terms of reference for the following framework groups:

- Board to Joint Committee meetings
- Exec to Exec meetings
- Planning Interface Meetings

- Service Level Agreement Meetings
- Service performance management meetings
- Escalation framework

It is important that membership of the varying components is at the appropriate and necessary level of operation. Membership of each is therefore also contained within the relevant Terms of Reference. To guide suggested level of operation and discussion for each of the components, an outline agenda for each is contained within the supporting pack.

4.3 Performance reporting

A number of data sources will be brought together by the WHSSC Information team in order to inform performance management discussions. Reports will be prepared on overall WHSSC performance and presented to both Management Group and Joint Committee.

4.4 Escalation

Where there is variance with regard anticipated performance, WHSSC staff will work within the agreed escalation framework to support organisations to recover their performance position, enabling the development of an action plan; monitoring necessary actions and working towards a position of de-escalation. The escalation framework is also appended to this document.

5. EMBEDDING THE APPROACH

5.1 Values and Behaviours

WHSSC has a strong set of values that has been collectively developed by the team. They are as follows:



These values will be evident through our performance management approach as we work in partnership with others to ensure high value services are commissioned and delivered through improvement and innovation and with respectful enquiry that drives improvement and effective commissioning.

5.2 Internal to WHSSC

Responding to our commissioner responsibilities, all WHSSC staff have a responsibility with regard performance management. As such this framework will be shared broadly with on-boarding sessions taking place for all staff at its acceptance, and with new starters as part of induction.

5.3 With providers

It is equally important that all providers are clear on the framework and there is transparency in its use. Informal discussions on the approach have thus far been held with providers. The approach has been welcomed, in particular clarity on the roles, responsibilities, membership and level of operation of each of the framework parts. We will work together with providers to understand impact of approach and seek to mature together over time. It is also suggested that the framework is shared at a forthcoming management team for discussion/awareness All WHSSC colleagues should be familiar with the key messages presented by information colleagues in readiness for discussions on their own service areas at various stages of the performance management framework. A sample pack is contained within the supporting pack.

5.4 Roles and responsibilities

Whilst performance management is everyone's responsibility within WHSSC, bringing clarity to key functions is considered essential for the process to be effective, and ownership to be clear.

Joint Committee – Joint Committee are ultimately responsible for the Governance of WHSSC setting the strategic direction and holding responsibility for approving the Integrated Commissioning Plan. Members of the Committee have concern with the matter of performance management and reporting such as to ensure the commissioning and delivery of high quality services for the population of Wales. Regular performance reports are presented here.

Management Group - Have regard performance management of specialised services, as a delegated group acting on behalf of Joint Committee they have regular reports presented, and have the opportunity to work alongside WHSSC colleagues in order to scrutinise/deep dive on issues of concern or escalation.

Senior Responsible Officer – The Director of Planning and the Director of Finance are the Senior Responsible Officers for the Framework. The Director of Planning will lead the development and implementation of the Performance Framework and has delegated responsibility for preparing, implementing and updating this. The DOP will also ensure that systems are in place for the measurement of national and local measures and KPIs which are reported via the Dashboard(s). The Director of Finance will ensure Performance Reports are produced for scrutiny and assurance by CDGB and the Board. The Director will ensure that these include transparent reporting of areas of good progress as well as areas of performance that require attention and/or escalation. The WHSSC team will implement the Framework by:

- ensuring the performance cycle is maintained and reporting requirements are met.
- working with services, in partnership to develop the KPIs, Dashboard and Reports.

- working with services, in partnership with others, to undertake targeted work to improve performance as required.

Information & Data – The WHSSC information team are responsible for the collation of data and presentation of information

Finance and contract monitoring information – Financial and contract monitoring information will be provided by the WHSSC finance team

Quality & patient safety – Issues of patient safety and quality will be provided and reported on by the WHSSC Quality and Patient safety team

Planning & Service development – Service development and planning activities will be undertaken by members of the WHSSC planning team.

5.5 Performance Management Toolkit

A suite of documentation has been developed in support of these arrangements, and can be found in the toolkit appended to this framework. It includes:

- A schedule of the dates across the year
- A proposed Mandate/Terms of Reference/membership for each group
- An outline agenda for each group
- An example data pack to drive discussions at SLA and service level performance meetings
- The Escalation framework

APPENDIX A



WELSH HEALTH SPECIALIST SERVICES COMMITTEE

PERFORMANCE FRAMEWORK TOOLKIT FEBRUARY 2023

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1	Schedule of meeting dates across the year	15
2	Mandate/Terms of Reference/membership for each group <ul style="list-style-type: none"> • TOR Board/Joint Committee • TOR Exec to Exec • TOR Planning Interface Meetings • TOR SLA Meetings • TOR Service Performance Management Framework • TOR Commissioning Teams 	20 21 22 24 30 33
3	Agenda templates for each group <ul style="list-style-type: none"> • Agenda -Board/Joint Committee • Agenda - Exec to Exec • Agenda - Planning Interface Meetings • Agenda - SLA Meetings • Agenda - Service Performance Management Framework • Agenda - Commissioning Teams 	40 41 42 44 46 47
4	The Escalation framework	48
5	Example data pack to drive discussions at SLA and service level performance meetings	59

[illegible]

Liverpool Heart and Chest SLA				16 th			18 th								
Manchester FT SLA										19 th					
Robert Jones & Agnus Hunt		22 nd													
Royal Liverpool SLA								10 th							
Salford SLA		8 th													
St Helens & Knowsley SLA					8 th										
Sheffield SLA												12 th			
Walton Centre SLA				25 th			26 th								
Cancer & Blood Plastic surgery Performance Management SBUHB		7 th	5 th	2 nd	6 th	6 th	3 rd	1 st	5 th	3 rd	7 th	4 th	2 nd	6 th	4 th
Cardiac Performance Management C&VUHB		25 th		14 th											
Mental Health Performance Management Meetings		BCUHB 5 th SBUHB 6 th				BCUHB 6 th SBUHB 7 th			BCUHB 5 th SBUHB 6 th			BCUHB 4 th SBUHB 5 th			BCUHB 4 th SBUHB 5 th
Gender Service Performance Management Meetings		16 th	7 th	4 th	1 st	1 st	5 th	3 rd	7 th	5 th	2 nd	6 th	4 th	1 st	6 th
Neurosurgery		17 th		12 th		9 th		4 th		6 th		7 th			

TERMS OF REFERENCE

TOR Board/Joint Committee

TOR Exec to Exec

TOR Planning Interface Meetings

TOR SLA Meetings

TOR Service Performance Management Framework

TOR Commissioning Teams

BOARD/JOINT COMMITTEE

The WHSSC Standing Orders can be found here:

<https://whssc.nhs.wales/publications/governance/whssc-standing-orders/>

EXEC TO EXEC

In Development



PLANNING INTERFACE MEETINGS DRAFT TERMS OF REFERENCE (for consideration)

1. PURPOSE

To ensure strong alignment between the WHSSC Integrated Commissioning Plan and Health Boards Integrated Medium Term Plans, specifically as they relate to the commissioning and provision of Specialist services.

Specifically to:

- track progress with implementation of strategic plans (specifically business case development, funding release and performance management)
- share updates on relevant strategic work pieces i.e. Mental Health Specialist Services Strategy, Paediatrics Specialist Services Strategy, Intestinal Failure strategic review.
- Discuss service planning issues, with a view to development or resolution as needed
- Share capital planning developments/issues as they relate to the provision of Specialist Services
- Share information as relevant to the progression of specialist services provision in NHS Wales

2. MEMBERSHIP

Membership of the group will comprise of:

WHSSC	PROVIDER
Director of Planning	Director of Planning
Asst Director of Planning	Asst Director of Planning
Snr Specialised Planners	Planning leads as required
	Corporate Finance lead
	Ops planning lead

- *Other members can be co-opted to enable depth of agenda items as needed*

3. QUORACY

The meeting will be deemed quorate when 50% of both organisations are present.

4. FREQUENCY

The meetings will be held quarterly

5. BUSINESS MANAGEMENT

Papers for the meeting will be circulated no less than 5 working days in advance of the meeting. This process will be managed by the WHSSC Planning Business Manager



Service Level Agreement Meeting

Terms of Reference

*Version: 0.1
September 2022*

Document information	
Document purpose	Terms of Reference
Author	Director of Planning
Document Lead	Director of Finance
Approved by	
Publication date	TBC
First Review Date	TBC
Second Review Date	TBC
Revision Date	TBC

1. Introduction

The Service Level Agreement (SLA) Meeting Terms of Reference has been established in line with the requirements of the Welsh Health Specialised Services Committee (WHSSC) performance management and assurance framework for the provision of specialised services for the people of Wales.

2. Purpose

The purpose of the meeting is to ensure that Health Board/Trust/other service provider services are being delivered in line with contracted activity as outlined within the commissioned SLA.

Providers are required to provide updates and raise issues across the following areas:

- **Awareness of contracted activity across the entire organisation**
Contract expectations (quality, activity and cost) reiterated each meeting as context for discussion that follows (WHSSC DOF/ADO)
- **Overview of performance (activity, quality and cost)**
WHSSC Dashboard – shared monthly by Director of Planning and Performance/Director of Finance
Provider position – Section to include activity against contract, variance and plans to get back on track. Should include both immediate performance plans, and trajectories for recovery
Section also to include any performance issues (under and or over) emerging from WHSSC commissioning meetings and or Service/WHSSC performance management meetings)
- **Quality and Patient Safety –**
Reminder of quality indicators and expectations within the contract and overview of performance/variance against these
- **Areas of service risk/exception**
Arising from the service/WHSSC performance management meetings, or anything that has emerged as critical to the sustainability of a service after the meeting or considered corporately
Opportunity to align risk appetite
- **Finance**
Receive updates on the 'global' SLA financial position including any reasons for material variance
Deep dive into any areas escalated from service/WHSSC performance management meetings
- **Commissioned Services in escalation/impact on contracted activity/plans to get on track**
Formal notification (arising from commissioning team and WHSSC/service meeting that a service is being escalated- note will have been agreed at CDGB)
Generic updates on services already in escalation beyond that discussed in escalation meetings
Notification of de-escalation

Outside of the scope of the SLA meetings are:

- Update against Integrated Commissioning Plan (picked up in planning interface meetings)
- Scrutiny on progress with specific schemes/proposals (Picked up in planning meetings)
- Outcome of horizon scanning/prioritisation (Picked up in planning meetings)
- Specific service issues (not needing escalation beyond service/performance level)

3. Membership

The meeting will be chaired by:

- Director of Finance and Information, WHSSC

In the absence of the Chair the appointed deputy chair is:

- Director of Planning and Performance, WHSSC

The SLA meeting membership is presented in Table 1.

Other members may be appointed, or invited to attend specific meetings as deemed appropriate by WHSSC.

Table 1: SLA Membership list

WHSSC

Title	
Director of Finance (Chair)	Stuart Davies
Director of Planning (Deputy Chair)	Nicola Johnson
Assistant Director of Planning	Claire Harding
Assistant Director of Finance	James Leaves
Finance and Contracts Manager	TBC
Specialised Services Planning Manager/s	Various dependent on provider
Information Manager	Sandra Tallon/Dan Lewis/Martin Hoff
Quality Lead	Adele Roberts/Vickie Dawson-John

Commissioned Provider

Medical Director	Health Board / Trust
Director of Planning / Performance	Health Board / Trust
Deputy Director of Finance Strategic	Health Board / Trust
Chief Operating Officer (or deputy)	Health Board / Trust
Head of Quality/Quality service lead	Health Board / Trust
Clinical Consultant Lead / Clinical Representative(s)	Health Board / Trust

The secretariat function of the group will be provided by the Planning and performance Business Manager/admin officer who will ensure that all papers are distributed at least 5 working days prior to the meeting.

4. Meetings

The Chair will ensure any decisions are balanced, equitable, transparent and unbiased to ensure decisions are made upon the best interests of NHS Wales. The Chair may convene additional meetings as deemed necessary.

The timing of meetings will be arranged to allow adequate time for the business of the meeting to be conducted effectively.

At least 50% of members from both organisations must be present to allow any formal business to take place.

Meetings shall be held on a quarterly basis.

Dealing with Members' interests during meetings

The Chair will ensure that the decisions on all matters brought before it are taken in an open, balanced, objective and unbiased manner. In turn, individual members need to demonstrate, through their actions, that their contribution to the decision making is based upon the best interests of the NHS in Wales.

Where individual members identify an interest in relation to any aspect of business set out in the meeting agenda, that member should declare the interest at the start of the meeting. Members should seek advice from the Chair if they are in any doubt as to whether they should declare an interest.

All declarations of interest made at a meeting must be recorded in the minutes.

5. Reporting and assurance arrangements

The Chair of the meeting shall:

- enable through the secretariat both formal notes, and a generic core brief
- report formally to WHSSC on the meeting activities. This includes the provision of verbal updates, the submission of the action log and written reports
- bring to WHSSC's specific attention any significant or critical matters under consideration

SERVICE PERFORMANCE MANAGEMENT MEETINGS

DRAFT TERMS OF REFERENCE (for consideration)

PURPOSE

To ensure robust performance management arrangements are in place for services commissioned from xxxx service, by WHSSC on behalf of the 7 Health Boards in Wales.

Specifically:

- WHSSC will develop and issue a performance framework to enable collation of appropriate information relevant to commissioned service
- Provider colleagues will share information against the framework in order to demonstrate performance against commissioned activity
- The group will discuss performance against contracted activity (activity, finance and quality) and will provide assurance of delivery, or agree mitigating actions and milestones where there is variance beyond the tolerances within the contract
- The group will discuss any service development proposals, in particular those associated with WHSSCs commissioning intentions or related to new and emerging practice, drugs or technology
- The group will identify risks, and issues, escalating as necessary to the broader SLA meeting of the provider and through WHSSC internal processes as required.

6. MEMBERSHIP

Membership of the group will comprise of:

WHSSC	PROVIDER
Senior Specialist Service Planner	Clinical Board/Divisional lead (clinical)
Planning Assistant	Clinical Board/Divisional lead (managerial)
Finance lead	Service lead
Quality lead	Financial support

- *Note deputies should be identified to aid quoracy and traction of business*
- *Other members can be co-opted to enable depth of agenda items as needed*

7. GOVERNANCE/ORGANISATION



8. QUORACY

The meeting will be deemed quorate when 50% of both organisations are present.

9. FREQUENCY

The meetings will be held (Need to check what they are now)

10. BUSINESS MANAGEMENT

Papers for the meeting will be circulated no less than 5 working days in advance of the meeting. This process will be managed by the assistant planner

WHSSC COMMISSIONING TEAM MEETINGS



1.0 Accountability

- 1.1 The Commissioning Team will be accountable to the Corporate Directors.

2.0 Purpose

- 2.1 The Commissioning Team is a multi-professional group that delivers high-quality commissioning advice for the WHSSC Joint Committee.
- 2.2 The Commissioning Teams include the relevant Associate Medical Director, planning, quality, finance and information representatives.
- 2.3 There are five Commissioning Teams (and the Renal Network) which cover all of the services which are delegated by the Health Boards to be commissioned by WHSSC.

3.0 Role

The role of the Commissioning Team is:

- To assure the Joint Committee regarding the process of commissioning, and the recommendations made;
- To deliver the commissioning of specialised services on behalf of the Joint Committee to ensure a multi-professional approach is taken to the commissioning process, providing a structure for co-ordinating the work of the functional departments within WHSSC;
- To deliver robust commissioning documentation, particularly Commissioning Policies and Service Specifications;
- To ensure that the commissioning intentions are reflected in the Integrated Commissioning Plan;
- To ensure the commissioning teams work plan fits with the wider priorities of WHSSC and the wider NHS Wales;
- To ensure that quality and risk issues in the commissioned services are formally reported and action taken where appropriate;
- To receive, review and consider appropriate action from the Assistant Director of Evidence and Evaluation.

4.0 Sub Groups and Relationships

- 4.1 The Commissioning Teams will work closely with the Assistant Director of Evidence and Evaluation.
- 4.2 The Specialised Services Planner for the commissioning team will be responsible for ensuring that the development of policies and service specifications is co-ordinated through the team prior to presentation to the WHSSC Policy Group.
- 4.3 Specific task and finish groups can be established to deliver specified products on behalf of the Commissioning Team.
- 4.4 Timescales for delivery of reports will be in accordance with the agreed timescales as set out in the business cycle for the organisation.
- 4.5 Where appropriate Clinical and Managerial Leads of the relevant Networks will be invited to support discreet pieces of work and attend the Commissioning Teams Meeting

5.0 Membership

- 5.1 The Associate Medical Director will chair the meeting.
- 5.2 The core membership of the Commissioning Team will include:
 - Associate Medical Director
 - Specialised Services Planning Manager;
 - Assistant Planning Manager
 - Quality Team Representative;
 - Finance Representative; and
 - Information Representative.
- 5.3 Further individuals, may be co-opted to the Commissioning Team to support specific areas of work.
- 5.4 The Corporate Directors will have an open invitation to attend the Commissioning Team meetings.

6.0 Commissioning Team Meetings Administration

Quorum

- 6.1 One member from each team should be present to ensure the quorum of the Meeting. Members should provide (where relevant) an update report if unable to attend the meeting.

Frequency of meetings

- 6.2 Meetings should be held monthly and no less than 6 weekly.

Circulation of Papers

- 6.3 The Specialised Planning Manager will ensure that all papers are distributed at least three days prior to the meeting.

7.0 Reporting

7.1 The Chair shall:

- Report formally to the Corporate Directors Group on the Commissioning Team's activities.
- Bring to the Corporate Directors Group attention any significant matters under consideration by the Commissioning Team; and
- Ensure appropriate escalation arrangements are in place to alert the Director of Planning of any urgent or critical matters that may compromise patient care and affect the operation or reputation of the Joint Committee.

8.0 Review

These terms of reference shall be reviewed bi-annually by the Corporate Directors Board.

9.0 Addendum

Relationships with Networks

Where appropriate Clinical and Managerial Leads of the relevant Networks will be invited to the Commissioning Teams Meeting.

The individual Commissioning teams will agree whether attendance at the meetings is on a regular basis or on an ad hoc basis to support particular pieces of work.

The Specialist Planner will agree with the Network Clinical and/or Managerial Lead the opportunities for joint initiatives and joint working that maximises the benefits for meeting the needs of patients.

The roles and responsibilities for the Commissioning team and the Network will be agreed and documented at the outset of any joint initiatives.



Welsh Health Specialised Services Committee Commissioning Advisory Group (CAG)

Title: **DRAFT** Terms of reference (11th July 2017). Version 1.0

Purpose: To scrutinise the escalation of quality concerns by the WHSSC team according to the WHSSC Escalation Process:

- To consider whether action plans are reasonable and achievable
- To consider whether there is sufficient mitigation of risk
- To provide advice on the need for further escalation/de-escalation taking into account proportionality and consistency and;
- To provide assurance to the Quality and Patient Safety Committee

Membership:

- 4 Health Board (HB) Commissioning Management Representatives. Appointments will be for 2 years and will rotate so that all HBs will have representation on the group over a 4 year period
- 3 patient and public representatives
- WHSSC Director of Nursing and Quality (Chair)
- WHSSC Director of Planning
- WHSSC Quality Manager
- Associate Medical Director and Senior Planner (or deputies) from the relevant Commissioning Team to present evidence and provide further information for the Group

Accountability: To report to the Quality and Patient Safety Committee

Review:

The group will carry out an annual review its relevance, the value of its work and the terms of reference

Working methods:

- Bi- monthly meetings will be established.
- All services where a stage 3 Commissioning Quality Visit has been carried out or services which have been escalated to stage 4, bypassing stage 3 escalation, will be considered.
- For newly escalated services the group will examine the evidence and provide advice on the appropriateness of the action plan, the mitigation of risk and any further escalation proposed by the WHSSC team
- For previously escalated services the group will examine the ongoing evidence consider whether the requirements of the action plans have been met and advise on the further escalation or de-escalation
- Papers will be circulated 5 working days before the meeting. Confidential papers will be clearly marked.
- The output of the group will be:

- Advice to the WHSSC team on further evidence which may be required to effectively monitor the service
- A view as to whether the action plan is likely to deliver effective improvement or whether additional requirements should be added or whether requirements should be removed
- A view as to whether the timelines are appropriate
- A view as to whether there is sufficient mitigation of existing risk
- A view as whether escalation to stage 3 or 4 was appropriate and whether further escalation is required
- A summary of their findings for the Quality and Patient Safety Committee

Quorum: At least 2 HB members and 2 public and patient representatives should be present.

(SL 12.07.17)

DRAFT AGENDA TEMPLATES

Agenda -Board/Joint Committee
Agenda - Exec to Exec
Agenda - Planning Interface Meetings
Agenda - SLA Meetings
Agenda - Service Performance Management Framework
Agenda - Commissioning Teams

AGENDA BOARD/JOINT COMMITTEE

Formulated from current strategic issues. Likely to include areas such as:

For all commissioning organisations:

- Specialised Services Strategy
- Access and Equity for Specialised services for resident population
- Population Health/need
- Value for investment
- Discussion on service developments/risks
- Discussions on how activity further down a pathway may convert to specialised service need (i.e. increased diagnostics, conversion rates etc)
- Any changes to NHSE provision affecting welsh patients
- No surprises

For specialist service provider organisations:

All of the above, plus issues pertaining to the delivery of services i.e.

- Outsourcing conversations
- Any strategic issues linked to contract performance in particular service areas

AGENDA EXEC TO EXEC

Formulated from current strategic issues. Likely to include areas such as:

For all commissioning organisations:

- Specialised Services Strategy
- Access and Equity for Specialised services for resident population
- Population Health/need
- Value for investment
- Discussion on service developments/risks
- Discussions on how activity further down a pathway may convert to specialised service need (i.e. increased diagnostics, conversion rates etc)
- Any changes to NHSE provision affecting welsh patients
- No surprises

For specialist service provider organisations:

All of the above, plus issues pertaining to the delivery of services ie

- Outsourcing conversations
- Any strategic issues linked to contract performance in particular service areas

AGENDA PLANNING INTERFACE MEETINGS



GIG
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Pwyllgor Gwasanaethau Iechyd
Arbenigol Cymru (PGIAC)
Welsh Health Specialised
Services Committee (WHSSC)

PLANNING INTERFACE MEETING
WHSSC and XXXX Health Board

No.	Item	Lead	Att.
1	Welcome and introductions		
2	Notes/actions from previous meeting		
3	Overview of Business Case position <ul style="list-style-type: none"> ○ Previous ICP year BC's outstanding ○ Current ICP year Business Cases received Business Cases outstanding ○ Forthcoming ICP Schemes prioritised for investment 		
5	Strategic planning issues <ul style="list-style-type: none"> ○ Paediatric strategy ○ Mental Health strategy ○ Intestinal Failure Strategic review 		
4	Service planning issues Eg Paediatric Neurology, paediatric pathology		
5	Capital planning issues		
6	General Information exchange		
7	Any Other Business		

AGENDA SLA MEETINGS



SERVICE LEVEL AGREEMENT MEETING

BETWEEN WHSSC AND xxxxxxxx HEALTH BOARD

No.	Item	Lead	Att.
1	Welcome & Introductions	Chair	
2	Summary of Contract (value, activity levels etc)	DOF	
3	Performance against contracted volumes (Activity) <ul style="list-style-type: none"> • WHSSC data pack/dashboard • Provider perspective 	NJ TBC	
4	Performance against contract – Quality <ul style="list-style-type: none"> • Quality indicators within contract • Performance/variance • Any service quality issues as escalated through WHSS/service discussions 		
5	Performance against contract – finance <ul style="list-style-type: none"> • Contract value • On track/variance • Any necessary actions to get back on track 		
6	Escalation <ul style="list-style-type: none"> • Services in formal escalation arrangements • Any issues of escalation from WHSSC/Service meetings 		
7	Any Other Business		

WHSSC/SERVICE PERFORMANCE MANAGEMENT MEETINGS



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Welsh Health Specialised
Services Committee (WHSSC)

STANDARDISED AGENDA (ALIGNS WITH STEEP)

<u>1</u>	Welcome		
<u>2</u>	Notes and actions from previous meeting		
<u>3</u>	Update against investment <ul style="list-style-type: none"> ○ Staff structure ○ Benchmark against investment profile/service specification 		
<u>4</u>	Activity <ul style="list-style-type: none"> ○ Waiting list position ○ Outreach waiting list ○ Diagnostics 		
<u>5</u>	Key Performance Indicators for the service		
<u>6</u>	Quality update <ul style="list-style-type: none"> ○ Staffing (wellbeing) ○ Incident reporting / lessons learnt ○ Patient Experience (concerns / PREMS / Patient stories) ○ PROMS 		
<u>7</u>	Risk		
<u>8</u>	Any areas requiring escalation to SLA meeting		
<u>9</u>	Any other business		

COMMISSIONING TEAM AGENDA



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Agenda**XXXXXXXXXX****Commissioning Team Meeting**

AGENDA ITEM		Lead	Att.
1.1	Apologies for Absence		
1.2	Action notes from the last meeting – 23rd August 2022		
1.3	Closed Action Log		
2. Performance / Information / Finance			
2.1	Monthly BI Performance Report including all services – Activity, KPI's and Waiting times		
2.2	Monthly Finance Report Finance Report – All Welsh Health Boards, NHS E providers		
2.3	North Wales issues		
3. Quality & Patient Safety			
3.1	<ul style="list-style-type: none"> • Risk Register • Serious Incidents – Outcome and Action Plans • Service Improvement Days 		
4. Work plan			
4.1	ICP 2022-25 <ul style="list-style-type: none"> • Business cases in • Business cases awaited 		
4.2	ICP 2023-26 <ul style="list-style-type: none"> • CIAG Schemes – to be taken forward 		
5. Policies and Service Specifications			
	Policies in Development Policies on Work plan	LK	Att.7
6.	Issues for escalation/external discussion		
	<ul style="list-style-type: none"> • Next WHSSC service interface meeting • SLA meeting 		
7.	Any Other Business		
8.	Date of Next Meeting		

WHSSC ESCALATION PROCESS

The WHSSC escalation process can be found here: <https://whssc.nhs.wales/publications/corporate-policies-and-procedures/corp-24c-escalation-process/>