Specialised Services Commissioning Strategy

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

2023 - 2033



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1. Foreword

We are pleased to present the Welsh Health Specialised Services Committee's (WHSSC) Specialised Services Commissioning Strategy, which sets out the overall vision and priorities for the commissioning of Specialised Services for the Welsh population between 2023 and 2033, and sets the context for all other Specialised Services strategic developments.

Every person in Wales who uses health services or supports others to do so, whether in hospital, primary care, their community or in their own home has the right to receive excellent care as well as advice and support to maintain their health. All health services in Wales need to demonstrate that they are doing the right thing, in the right way, in the right place, at the right time and with the right staff.

The aim of this Specialised Services Commissioning Strategy is to ensure that the residents of Wales can now, and in the future, receive equitable access to high quality specialised services, which are clinically effective, and that offer the best outcomes and experience for patients, as well as providing the greatest value for our population.

Development of the strategy post COVID-19 has provided us with the opportunity to shape the direction to focus on recovery, value, and to exploit new technologies and innovative ways of working through the development of our individual service specific clinical strategies.

Key to this is the recognition of the diverse relationships that exist between North, Mid and South Wales with Welsh Providers and NHS England where both patient pathways and direct access to specialised services differ. The objective of this strategy is therefore to define the overall approach for Wales to the future development of specialised services from a local, regional and national perspective, our priorities in relation to the wider NHS and our priorities within specialised services.



Dr Sian Lewis Managing Director



Kate Eden Chair

Work is underway building a set of meaningful success measures against which we can monitor and assess achievement of our strategic aims and objectives, with a timescale of September 2023 for completion. The measures within this strategy are therefore outlined, however the detail will remain under development.

Because of the pace of change in specialised services, we will review this strategy in 5 years to consider whether it remains fit for purpose for the following 5 year period.

We would like to thank you for taking the time to read our plans and ambitions, and for your input in developing them.

2. What You Told Us

Welcome to our new ten-year strategy for specialised services for the residents of Wales and our responsible population. Our strategy sets out what we will do between now and 2032.

The strategy has been developed over a number of months, based on the feedback we received from our twelve week engagement exercise with key stakeholders within the NHS in Wales and England, as well as wider organisations across health, social care and the third sector representing the patients and public voice.

In bringing the strategy together, we have reflected on the ideas, suggestions and priorities put forward to understand what you think and what you

would like us to do differently.

These are some of the things you said to us:

Collaborate with NHS England to establish cross border networks to ensure resilience in the

> Where appropriate, commission services in Wales to necessitate investment and drive specialisation within our

Ensure alignment with Health Board priorities and strategies

Incentivise and celebrate good practice and over performance in services

Poor performance should be actively addressed, holding services to

> Greater visibility and transparency, with public accessibility, on performance, quality and patient

> > Drive research and innovation and support to publish papers

WHSSC could have a Services should be 'Once for Wales' role commissioned on for fragile services, or evidence based where specialist skills, outcomes and value workforce or equipment are required

Distance and access to services should be a key driver for digital

> and increased focus on patient experience and the public voice

> > provision where it is in the patients best interest to do so

Increased emphasis on population health needs assessment to underpin all future commissioning

Offer shadowing, secondments and rotation of staff between WHSSC and Health Boards to share knowledge, expertise and learning

Define commissioner whole of the patient

responsibilities across the

Ensuring equity for all

access services

3. Background

The Welsh Health Specialised Services Committee (WHSSC) was established in 2010 as a Joint Committee of each local health board in Wales, established under the WHSSC (Wales) Directions 2009 (2009/35). The remit of the Joint Committee is to enable the seven health boards in Wales to make collective decisions on the review, planning, procurement, and performance monitoring of agreed specialised and tertiary services.

WHSSC has an overall annual budget of over £752 million with the financial contributions determined by population need. Typically, WHSSC spends two thirds of its budget within NHS Wales and one third within NHS England.

On a day-to-day basis, the Joint Committee delegates operational responsibility for commissioning to WHSSC Officers, through a management team supported by six multidisciplinary commissioning teams. WHSSC also hosts the Welsh Kidney Network and Traumatic Stress Wales. The tables in Appendix 1 show the services that WHSSC is currently responsible for commissioning. Not all specialised services, as defined in the NHS England Prescribed Services Manual, have been delegated to WHSSC and some remain the commissioning responsibility of health boards.

Specialised services generally have a high unit cost as a result of the nature of the treatments involved and are provided to a smaller number of patients compared to routine services and treatments. They are not available in every local hospital because they have to be delivered by specialist teams who have the necessary skill, equipment and experience, and cover conditions such as rare cancers, genetic disorders, severe mental health and complex medical and surgical disorders. The particular features of specialised services, such as the relatively small number of centres and the unpredictable nature of activity, require robust planning and assurance arrangements to be in place to make the best use of scarce resources and to reduce risk.

This strategy encompasses not only current WHSSC and health board commissioned specialised and highly specialised services, but also recognises their evolution, and therefore the approach to commissioning new services. As the strategy looks ahead 10 years, many new technologies and practices are unknown fully and are still emerging. Therefore, WHSSC will need to provide a commissioning system that can respond to Health Board and Welsh Government priorities with urgency and agility as new opportunities arise.

The role of WHSSC and health boards in non-specialised commissioned services where pathway development directly impacts on access to specialised and highly specialised services have been considered as part of this strategy. As part of the service reviews, WHSSC, in collaboration with health boards, will use a recommissioning approach to pathway development and service change, and where evidenced we will work with health boards to redeploy resources earlier in the pathway to support a stronger focus on prevention of disease progression.

In addition, this strategy reflects the role of partnerships with a view to strengthening and developing new ones. This includes NHS partners inside and outside Wales as well as non-NHS partners such as the Third Sector, Social Care, Universities and the Llais Wales.

4. Context

The last specialised services commissioning strategy was published in 2012. During the intervening period there has been significant challenge related to the rapid pace, and often unpredictable development of innovative treatments, an increasingly austere financial climate and more recently the unprecedented and disruptive impact of the COVID-19 pandemic on NHS care. A key focus of this strategy therefore is on WHSSC's ability and agility to respond to evolving challenges and risks as they present themselves.



The policy context within NHS Wales has also changed during this time and the strategy needs to align to a number of major policy developments including Welsh Government's "a Healthier Wales: Long Term Plan for Health and Social Care" (2021), Prudent Health Care (2018), Welsh Government's NHS Quality & Safety Framework, the provisions of the Health and Social Care (Quality and Engagement) (Wales) Act 2020 in relation to the new duty of quality and duty of candour.

We will be guided by the principles within the Well-being of Future Generations Act 2015, to inform all of our work with a renewed emphasis on commissioning for population health, outcomes and across pathways, as well as a greater focus on the long-term view, partnership and patient experience and engagement.

Wales has its own distinctive approach to health and care provision. Integration and co-operation between health organisations is a key principle of healthcare policy, along with a commitment to avoid duplication and do things 'Once for Wales'. To realise the benefits of an integrated health and care system in Wales, it is vital to secure the best possible services through effective commissioning. Through a recommissioning approach, services can also be decommissioned where they are no longer needed, could be better provided elsewhere, or are not providing the expected outcomes or value.

NHS Wales established WHSSC in order to support collaborative commissioning and as health boards and trusts develop integrated care and services with local authorities, collaborative approaches based on evidence must play through in these joint commissioning arrangements to ensure shared values, common goals and joint aspirations for the long-term. It is important to recognise that a number of specialised services remain the commissioning responsibility of individual health boards and may be better commissioned by WHSSC, if value could be added through a once for Wales approach.

4. Context

In May 2021, Audit Wales published its report on the "Welsh Health Specialised Services Committee Governance Arrangements". The report found that since the previous reviews in 2015, governance, management and planning arrangements have improved, but the impact of COVID-19 now required a clear strategy which would now provide opportunity to shape the direction to focus on recovery, value, and to exploit new technologies and innovative ways of working.

In addition to the Welsh context, in July 2022 the Health and Care Act 2022 for NHS England (NHSE) legally established 42 Integrated Care Systems (ICSs). Each ICS will have an Integrated Care Board (ICB), a statutory NHS organisation responsible for developing a plan for meeting the health needs of the population, managing the NHS budget and arranging for the provision of health services in the ICS area.



Through this new legislation, ICBs have also been given the opportunity to take on delegated responsibility from April 2023, where appropriate, for specialised services but within a framework of continued national accountability, national standards, national service specifications and national clinical policies. NHSE has recognised that not all specialised services will be suitable, or ready, for delegation to ICBs. Where this is the case there will be a further year of transition with additional support so they are ready to take on full delegated responsibility from April 2024.

WHSSC will continue its well established relationship at a national level with NHSE Specialised Commissioning and will continue to develop relationships at a regional level and with the new ICSs who will have an influence on the future direction for some of our providers in England of national and regional/supra-regional services. This will be of particular importance for patients from North and Mid Wales.

Alongside all these policy changes, we have an ageing population and increasing number of treatment options for patients with more advanced disease, all creating a growing demand for specialised services. It is against this backdrop that it has becoming increasingly important that we renew the strategy and ensure it can meet the needs of the population of Wales for the next 10 years.

A PESTLE analysis has been undertaken across a range of factors to take advantage of opportunities and mitigate threats to WHSSC's functions in the development and achievement of our strategic aims (see Appendix 2). This has been used to inform our strategy development.

5. National Commissioning Functions Review

In 2018 when a Healthier Wales was published, the Welsh Government signalled an intention to review a range of hosted national functions alongside the establishment of the NHS Executive. In January 2023, a review of National Commissioning Functions was announced by Welsh Government which will conclude in May 2023. The development of our specialised services commissioning strategy continued alongside this, with the aim of agreeing the strategy in the context of the recommendations of the review when concluded.

National commissioning is vital in improving the outcomes for the population of Wales and in reducing any inequalities in access. The review is an opportunity to reflect upon the experiences of WHSSC, the Emergency Ambulance Services (EASC), and the National Collaborative Commissioning Unit (NCCU), and to further build upon and strengthen national commissioning arrangements.

The Review will identify options and make recommendations about the future configuration of national commissioning and national commissioning organisations, EASC, WHSSC and the NCCU. The final recommendation will be made by the Chief Executive of the NHS in Wales for the Minister for Health and Social Services to make a final decision. It is expected both Joint Committees of WHSSC and EASC to be integral to supporting this work and during the review.

The review recommendations will be founded on the following principles:

- Improving outcomes and reducing inequalities
- Adding further value to the NHS system in Wales
- Strengthening and streamlining of commissioning functions, and associated decision making
- Building on evidence of good practice
- Supporting the development of commissioning expertise within the NHS in Wales
- Maximisation of national commissioning capacity and capabilities
- Minimal disruption to the system

Whilst this strategy has not pre-empted the outcome of the review, the above principles have been reflected as a theme throughout the strategic aims and objectives.

6. Quality and Patient Safety

WHSSC recognises the key importance of patients being able to access safe, effective specialised services that provide excellent user experience. In line with the new statutory Duty of Quality in Wales, the quality of care and experience that patients and their families receive is therefore central to the commissioning of specialised services. A focus on improving the quality of care and population outcomes is everyone's business and all of our staff strive to ensure that quality and patient centred services are at the heart of commissioning.

The WHSSC Quality Framework was first developed in July 2014 with the purpose of setting the direction for the quality assurance of services and providing a structure for both the commissioning and provider element of specialised and tertiary services for the population of Wales. In 2021, the framework was revised and renamed the Commissioning Assurance Framework (CAF) to encompass all of the components necessary to provide assurance to Health Boards and the public that WHSSC commissions high quality clinical care and there are robust processes in place to monitor services, and where there is concern regarding the quality of services and remedial action is required, that escalation processes are initiated and acted upon in a timely manner.

The CAF is supported by the following suite of documents which signal our approach to the robust management of specialised services:

- Performance Assurance Framework,
- Risk Management Strategy,
- Escalation Process; and
- Patient Engagement & Experience Framework.

The aim of the Commissioning Assurance Framework (CAF) is to move beyond the basic infrastructure to the next stage of driving quality assurance and more importantly improvement in our specialised commissioned services. The fundamental principles underpinning the Commissioning Assurance Framework are to develop open and transparent relationships with our providers, to engage and involve the clinical teams and work in partnership with stakeholders when planning and commissioning services. This requires a facilitative and proactive approach where intervention as early as possible is key in order to provide support to services where issues of concern are identified.

A key element of commissioning services is ensuring that patients are put at the centre and is seen pivotal to the success of the framework. Patient experience is an important element of the quality cycle capturing both patient experience and concerns raised whilst accessing specialised services.

Good experience of care, treatment and support is an essential part of an excellent health and social care service. A person's experience starts from their very first contact with a service, through to their last. We want to broaden our approach to engage with patients, their families and carers to support the shaping of our future service commissioning, to make it easier for the patients voice to be heard and to learn from their lived experiences. WHSCC is keen to increase its work with patient advocacy groups, and health providers to support this approach.

Clinical

7. Decarbonisation and the Foundational Economy

Decarbonisation

Welsh Government declared a Climate Emergency in 2019 and expects the public sector to be net zero by 2030. The NHS Wales Decarbonisation Strategic Delivery Plan was published on 24 March 2021.



WHSSC is committed to taking assertive action to reducing the carbon footprint through mindful commissioning of services that take account of the decarbonisation agenda, where possible, providing services closer to home by enabling enhanced digital and virtual access for patients. We will also seek to support staff considerations and behaviours for those actions that have a positive effect on decarbonisation, for example, reduced travel, efficient travel and use of electric vehicles where possible. With effect from the commencement of the 2022-2023 year all policies will contain a decarbonisation statement and a focus on innovative ways of working.



Foundational Economy

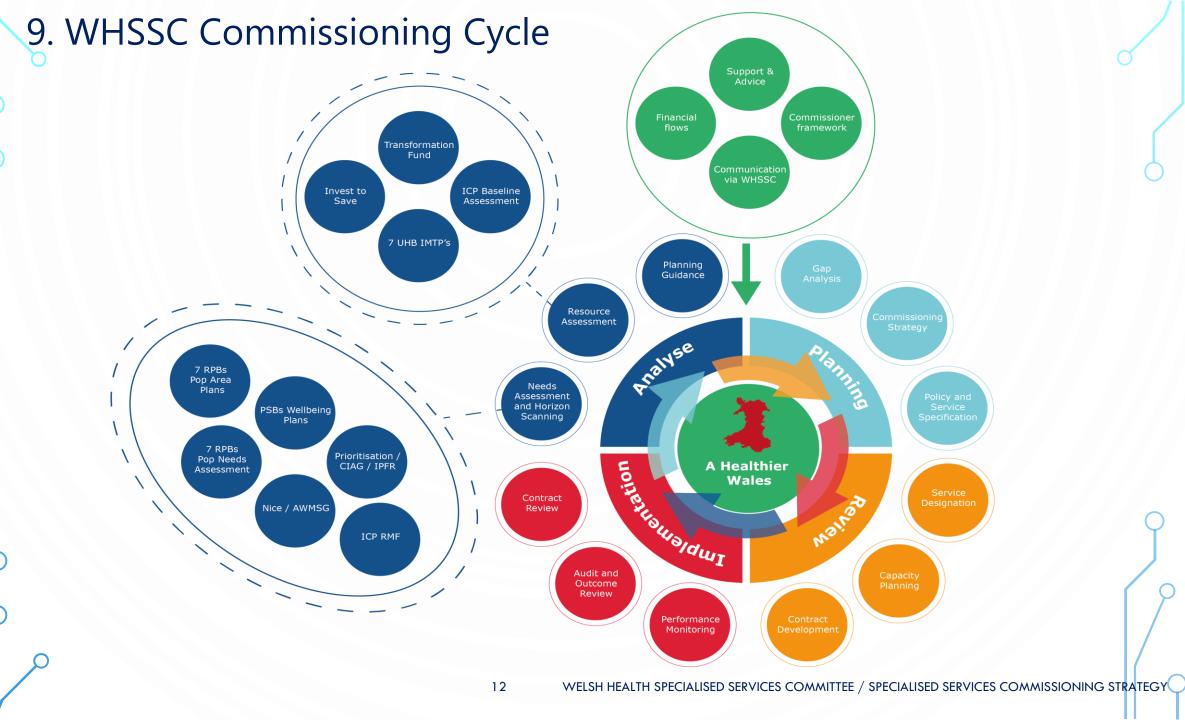
The Foundational Economy is an approach taken by the Welsh Government to ensure that funding improves the way the local economy works in Wales by developing the growth to vital services and goods.

Through working in partnership and Welsh Government, over the last decade WHSSC has supported significant investment into moving care closer to home and creating services based in Wales. It is estimated that the £45m revenue investment has created over 750 high quality and stable employment jobs within NHS Wales, whilst also moving services out of the main specialist centres into more local settings in West and North Wales. WHSSC's ambition is to continue developing services closer to home by creating new services within Wales and repatriating activity from the private sector providers and NHS England where it is appropriate to do so.



To deliver this work, we will review our contracts with a view to delivering within Wales where it is safe and effective to do so. Through appropriate engagement and consultation we will develop implementation plans to deliver services as accessible from home as possible, through digital and alternative delivery models. And, working in partnership with providers external to Wales, we will look to repatriate parts of pathways that could be delivered locally where it is not appropriate or possible to deliver wholly in Wales.

8. Strategic Alignment Welsh Health Board Government Priorities Priorities WHSSC Specialised Services Commissioning Strategy Kidney **Specialist** Specialist Specialist Specialist Specialist Services Cardiology/ Cancer & Blood Mental Health Neurosciences Paediatric Cardiac surgery Quality Strategy Strategy Strategy Strategy Strategy Statement WHSSC Integrated Commissioning Plan 11



10. Our Strategy on a Page

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Our Vision What is our goal?	'Im	proving Patie	ent Outco	mes through Expert No	ational	Commissionir	ng'
Our Mission What will we do to achieve our goal?				tainable healthcare service comes within available res		people of Wale	es which are responsive
Our Values What matters to us?	RESPECT We will listen to ever We will treat peop We will recognise e contribution	ole fairly everyone's	We v	We will work as a team will communicate effectively vill build strong and inclusive relationships will be positive role models	re	We will co We will stri We will acce	OVEMENT & OVATION Ontinuously learn ve for excellence ept challenge and portunity
Our Strategic Aims What do we want to achieve?	1. To ensure the provision of safe, high-quality services for the people of Wales	2. To plan for term to ensure sustainable, ac service provisi- the residents of which is respon	ccessible on for of Wales,	3. To provide an expert approach to national healthcare commissioning	partne service	oe an effective er, supporting e and system ormation	5. To maximise value and outcomes within available resources

change

11. Our Strategic Aims and Objectives

Our Strategic Aims What do we want to achieve?	1. To ensure the provision of safe, high-quality services for the people of Wales	2. To plan for the long term to ensure sustainable, accessible service provision for the residents of Wales, which is responsive to change	3. To provide an expert approach to national healthcare commissioning	4. To be an effective partner, supporting service and system transformation	5. To maximise value and outcomes within available resources
Our Strategic Objectives How will we achieve this?	1.1 To commission safe, high-quality services by ensuring the STEEP principles are at the heart of all our work 1.2 To be an evidence- based commissioner, securing clinically effective services 1.3 To promote equitable provision of services and minimise unwarranted variation 1.4 To ensure services are as efficient and timely as possible for all patients 1.5 To continuously improve patient experience and engagement through our commissioning activities.	2.1 To ensure services are commissioned on a robust assessment of population health need 2.2 To become a strategic commissioner, planning for all service areas for the long term 2.3 To commission and maintain sustainable services from designated providers 2.4 To encourage innovation and responsiveness in service design and provision through commissioning mechanisms 2.5 To ensure services are as accessible as possible through use of digital opportunities 2.6 To encourage robust workforce redesign and provision through commissioning	3.1 To be an expert commissioner for services where a national or regional approach is required 3.2 To act as a system expert to enhance and develop commissioning capacity and capability for NHS Wales	4.1 To work in partnership with Health Boards to maximise the benefits of national commissioning in NHS Wales 4.2 To foster partnerships with NHS England commissioners and providers to improve services for Welsh patients 4.3 To ensure a whole system approach to pathway management to reduce unintended consequences	5.1 To maximise the use of core resources by recommissioning services where necessary 5.2 To focus on improving strategic, service and patient outcomes 5.3 To achieve the greatest value for money for the Welsh population

Strategic Aim 1. To ensure the provision of safe, high-quality services for the people of Wales

Why is this Important? The quality of care and experience that patients and their families receive is central to our commissioning. Quality is everyone's business and as a national organisation working on behalf of the 7 Health Boards we have a duty to continuously improve the quality of services delegated to us.

Strategic objectives	How will we do this?	How will we measure success?
1.1 To commission safe, high-quality services by ensuring the STEEEP principles are at the heart of all our work	We will continuously use our published Commissioner Assurance Framework and Escalation Frameworks to ensure the quality and safety of commissioned services	 Measures related to the Escalation Framework Measures related to service reviews
1.2 To be an evidence- based commissioner, securing clinically effective services	We will continuously use clinical evidence, GIRFT reports, benchmarking, outcomes and other comparative information to develop our integrated Commissioning Plan, service specifications and commissioning policies We will continue to use robust prioritisation methodology, aligned to system priorities, to make effective, evidence-based commissioning decisions and plans	 Measures related to the development of service specifications and commissioning policies Measures related to the horizon scanning and the prioritisation process

Strategic Aim 1. To ensure the provision of safe, high-quality services for the people of Wales

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Strategic objectives	How will we do this?	How will we measure success?
1.3 To promote equitable provision of services and minimise unwarranted variation	We will continue to develop our systems to measure and report on unwarranted variation in service provision, using Business Intelligence and comparative information We will work with Health Boards and Trusts to promote mutual understanding and plans to reduce variation for their commissioned populations We will continue to apply the WHSSC Referral Management Policy to minimise inequities and unwarranted variation of referrals outside of Wales	 Measures related to Service Improvement and Innovation Days Measures related to referral gatekeeping
1.4 To ensure services are as efficient and timely as possible for all patients	We will plan to improve the efficiency and timeliness of service provision in line with the Ministerial Measures and system priorities We will monitor and manage performance and delivery of our contracted services in line with our Performance Management Framework	 Measures related to efficiency targets as part of the ICP process and commissioning intentions Measures related to contract performance
1.5 To continuously improve patient experience and engagement through our commissioning activities.	We will use our published Patient Engagement and Experience Framework to ensure patients have a voice in commissioning the services delegated to us We will develop and implement a systematic approach to collecting and using PROMS and PREMS in our commissioning activities	 Measures related to the collection of PROMS and PREMS Measures related to patient engagement

Strategic Aim 2. To plan for the long term to ensure sustainable, accessible service provision for the residents of Wales, which is responsive to change

Why is this Important? We aim to become a strategic commissioner, planning to put services on a longer term sustainable footing and improve access for patients. We know that the pace of change is accelerating and we need to be agile to respond to developments in the wider environment that will impact the services we commission, as well as playing our part in the decarbonisation of NHS Wales.

Strategic objectives	How will we do this?	How will we measure success?
2.1 To ensure services are commissioned on a robust assessment of population health need	We will partner with NHS and academic bodies to implement a systematic approach to health needs assessment When we develop our service specific commissioning strategies we will use a systematic approach based on population health needs assessment as well as outcomes and evidence of effectiveness	 Measures related to developing a partnering approach for health needs assessment Measures related to service commissioning strategies based on population health needs assessment
2.2 To become a strategic commissioner, planning for all service areas for the long-term	Through engagement with Health Boards and NHSE specialised providers we will develop and implement a clinically-led 5-year service-specific commissioning strategy for each of our portfolios / groups of services	 Measures related to service commissioning strategies for each commissioning portfolio Measures related to Integrated
	Our Commissioning Intentions and commissioning plans will be based on the service strategies, enabling medium-term financial and service planning	 Commissioning Plan developments Measures related to carbon reduction
	We will play our part in the NHS in Wales becoming carbon net-zero by 2030	

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Strategic objectives	How will we do this?	How will we measure success?
2.3 To commission and maintain sustainable services from designated providers	We will review and recommission services on a systematic basis to promote sustainable service models We will use our published Designated Provider process to secure new providers for services where required	 Measures related to service fragility Measures related to the review of services and service specifications Measures related to Service Improvement and Innovation Days
2.4 To encourage innovation and responsiveness in service design and provision through commissioning mechanisms	We will collaborate with providers and partners including the NHS Innovation services, NHS England Specialised Commissioning and others to continuously horizon scan and evaluate new research, treatment and guidance to inform our commissioning plans and policies	Measures related to innovation

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Strategic objectives	How will we do this?	How will we measure success?
2.5 To ensure that where appropriate, services are as accessible as possible through use of digital opportunities	We will use a Digital First approach to commissioning; working with Directors of Digital to develop a brief digital commissioning tool to encourage and incentivise accessibility, efficiency and innovation	Measures related to digitally led approaches
2.6 To encourage robust workforce redesign and provision through commissioning	We will encourage and incentivise workforce redesign and innovation through our planning and commissioning processes to ensure sustainable and high quality services We will work with HEIW on targeted initiatives to address workforce shortages and fragility in the services delegated to us	 Measures related to service fragility Measures related to the alignment of the ICP with National Education and Training Plan (HEIW)

Strategic Aim 3. To provide an expert approach to national healthcare commissioning

Why is this Important? There is renewed interest in healthcare commissioning as a tool for change and improving value in NHS Wales, and we believe we can share our expertise, skills and experience to help the system to develop in this area.

Strategic objectives	How will we do this?	How will we measure success?
3.1 To be an expert commissioner for services where a national or regional approach is required	We will use our expert commissioning skills and expertise to add value to the NHS Wales system through commissioning services delegated to us by Health Boards or Welsh Government We will develop a Commissioning Framework, based on best practice adapted for the Welsh system to lay out our standard commissioning cycle and methodology	Measures related to the Commissioning Framework
3.2 To act as a system expert to enhance and develop commissioning capacity and capability for NHS Wales	We will provide leadership for the development of healthcare commissioning skills and expertise in NHS Wales We will develop a suite of commissioning tools and learning and development opportunities in conjunction with Health Boards, Welsh Government and the Directors of Planning Peer Group / Assistant Directors of Commissioning.	Measures related to commissioning learning and development

Strategic Aim 4. To be an effective partner, supporting service and system transformation

Why is this Important? We work on behalf of the 7 Health Boards in Wales and we need to work effectively and transparently with the NHS in both Wales and England to provide excellent services for the whole of the Welsh population.

Strategic Objectives	How will we do this?	How will we measure success?
4.1 To work in partnership with Health Boards to maximise the benefits of national commissioning in NHS Wales	We will aim to be a good partner, working collaboratively and with integrity at all levels of service delivery to deliver system benefits We will ensure robust, open and transparent decision-making and governance is in place for commissioning on behalf of Health Boards across NHS Wales	 Measures related to reputation and status Measures related to commissioner partnerships Measures related to the Performance Management Framework
4.2 To foster partnerships with NHS England commissioners and providers to improve services for Welsh patients	We will work collaboratively with NHSE Specialised Services Commissioners and ICBs to promote innovation and sustainability of service delivery We will systematically review and recommission services with Health Boards to make appropriate decisions about the location of services for border populations	 Measures related to the NHSE relationships Measures related to border Health Boards Measures related to service reviews
	We will maintain our all-Wales focus including our North Wales office to ensure we represent the interests of the whole Wales population	

Strategic Aim 4. To be an effective partner, supporting service and system transformation

Why is this Important? We work on behalf of the 7 Health Boards in Wales and we need to work effectively and transparently with the NHS in both Wales and England to provide excellent services for the whole of the Welsh population.

Strategic Objectives	How will we do this?	How will we measure success?
4.3 To ensure a whole system approach to pathway management to reduce unintended consequences	We will work in partnership with health boards and clinical networks to improve standardisation across patient pathways, in line with NICE and GIRFT recommendations We will work in collaboration with health boards to play a greater role in pathway development and service change, and where evidenced we will work with health boards to redeploy resources earlier in the pathway to support a stronger focus on prevention of disease progression.	Measures related to pathway development Measures related to partnership engagement
	We will connect with our wider stakeholders, including the third sector, to align patient pathway development to national approaches	

Strategic Aim 5. To maximise value and outcomes within available resources

Why is this Important? We deploy a significant amount of public resources on behalf of the Welsh NHS, in a continuously constrained financial environment. Ensuring value for money and improved outcomes for patients is an important motivation for us in all of our work.

Strategic Objectives	How will we do this?	How will we measure success?
5.1 To maximise the use of core resources by recommissioning services where necessary	We will have a systematic recommissioning programme in place, driven by quality, outcomes and value for money, as laid out in our Commissioning Framework All investments will include a clear benefits realisation plan and will be reported to Management Group no later than 3-years post-investment	 Measures related to service reviews Measures related to benefits realisation
5.2 To focus on improving strategic, service and patient outcomes	Patient outcomes will be one of the key drivers of commissioning, as well as population health and value-based healthcare All new service specifications will include the appropriate service and patient outcome measures and these will be used to shape our commissioning decisions	 Measures related to the collection of PROMS and PREMS Measures related to Service Improvement and Innovation Days
5.3 To achieve the greatest value for money for the Welsh population	The Integrated Commissioning Plan including the financial plan each year will include contracting and activity assumptions based on clear demand/capacity plans, benchmarking and value for money We will have clear SLAs with all our providers that are managed through our Performance Management Framework and improvement action taken where there is persistent poor performance	 Measures related to contract performance Measures related to investment in Wales/out of Wales
	Value for money in commissioning includes measures to invest in the foundational economy in Wales	



13. APPENDICES



WHSSC Commissioned Services



Cancer and Blood Services

- All Wales Lymphoma Panel
- All Wales Medical Genomics Service
- Brachytherapy
- Burns and Plastics
- CAR-T therapy
- ECMO
- Extra corporeal photopheresis
- Haematopoietic Stem Cell Transplantation
- Hepato Cellular Carcinoma (HCC) MDT
- Hepatobiliary Surgery Cardiff
- Hepato-Biliary-Pancreatic surgery
- Hepatocellular Carcinoma MDT
- Hereditary Anaemias specialist service
- Hyperthermic Intraperitoneal Chemotherapy (HIPEC) for Pseudomyxoma Peritonei
- Immunology
- Immunology for Primary Immuno Deficiency

- Long Term Ventilation
- Mesothelioma MDT
- Microwave ablation for liver cancer
- Molecular Radio Therapy
- Pancreatic Surgery Morriston
- Peptide Receptor Radionuclide Therapy (PRRT) for Neuroendocrine Tumours
- PET scanning
- Proton Beam Therapy
- Radiofrequency Ablation for Barrett's Oesophagus
- Specialist MDT for Soft Tissue and Bone Sarcoma
- Specialist service for Neuroendocrine Tumours
- Specialist service for Paroxysmal Nocturnal Haemoglobinuria
- Stereotactic Ablative Body Radiotherapy
- Swan Clinic
- Thoracic surgery
- Welsh Blood Service

WHSSC Commissioned Services



Cardiac Services

- Heart Transplantation including VAD's
- Electrophysiology, ablation and complex ablation
- Complex Cardiac devices
- Interventional Cardiology, (PPCI, PCI, PFO closures, TAVI, PMVLR)
- Inherited Cardiac Conditions
- Adult Congenital Heart Disease
- Cardiac Surgery
- Heart Transplantation including VAD's
- Electrophysiology, ablation and complex ablation

- Complex Cardiac devices
- Inherited Cardiac Conditions
- Adult Congenital Heart Disease
- Pulmonary Hypertension
- Cystic Fibrosis
- Cardiac Networks (SWSWCHD Network, NWNWCHD Network, All Wales Cardiac Network)
- Bariatric Surgery
- Heart Transplantation including VAD's

WHSSC Commissioned Services

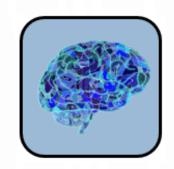


Mental Health & Vulnerable Groups

- All Wales Traumatic Stress Quality Improvement Initiative (Traumatic Stress Wales)
- CAMHS (Child and Adolescent Mental Health Services) Tier 4
- Forensic Adolescent Consultation and Treatment Service (FACTS)
- Gambling
- Gender Identity Development Service for Children and Young People
- Gender Identity Services for Adults

- High Secure Psychiatric Services
- Medium Secure Psychiatric Services
- Mental Health Services for Deaf People (Tier 4)
- Neuropsychiatry
- Specialised Perinatal Services
- Specialised Eating Disorder Services (Tier 4)

WHSSC Commissioned Services



Neurosciences Services

- Alternative Augmentative Communication (AAC)
- Artificial Limbs and Appliances Service including
- Cochlear and BAHA
- Electronic assistive technology
- Inherited White Matter Disorders
- Neuroradiology (diagnostic and interventional undertaken by neuro-radiologists)
- Neurorehabilitation

- Neurosciences
- Orbital prosthetics
- Prosthetics
- Rare Diseases RDIG
- Spinal
- Spinal rehabilitation
- Wheelchair and special seating

WHSSC Commissioned Services



Women and Children's Services

- Fertility
- Fetal Cardiology
- Fetal Medicine
- Neonatal
- Neonatal Transport
- Paediatric Cardiology
- Paediatric Cardiac Surgery
- Paediatric Cystic Fibrosis
- Paediatric Endocrinology
- Paediatric ENT
- Paediatric Gastroenterology
- Paediatric Intensive Care
- Paediatric Immunology

- Paediatric Inherited Metabolic Disease
- Paediatric Nephrology
- Paediatric Neurology
- Paediatric Neuro-rehab
- Paediatric Oncology
- Paediatric Radiology
- Paediatric Radiotherapy
- Paediatric Rheumatology
- Paediatric Surgery
- Paediatric Orthopaedic Surgery
- Paediatric Infectious Diseases
- Perinatal Pathology

WHSSC Commissioned Services

Cross Commissioning Areas

- Intestinal Failure
- Home Parental Nutrition
- Hyperbaric Oxygen Therapy
- Inherited Metabolic Disorder

Appendix 2 - The PESTLE Analysis

Political	Economic	Social
Government policies beneficial/detrimental to WHSSCs success. Is the political environment stable or likely to change?	Economic factors that will impact on us moving forward. Is current economic performance affecting WHSSC? Any impact on our revenue/costs?	How does human behaviour or cultural trends play a role in WHSSC?
 Welsh Government policy and legislation (Wellbeing of Future Generations (Wales) Act, a Healthier Wales: Long Term Plan for Health and Social Care (2021), the Health and Social Care (Quality and Engagement) (Wales) Act (2020), The Foundational Economy in Health and Social Care Strategy (Wales) (2021), Is Wales Fairer? (2018), NHS Quality & Safety Framework (Wales) (2021) Wales has remained relatively stable politically (Welsh Elections not until May 2026) and uncertainty caused by Brexit and UK General Election December 2022 has now worked through. The National Clinical Framework (Wales) (2021) will determine how clinical services should develop across Wales, underpinned by a suite of Quality Statements which will provide the next level of detail for specific clinical services. System changes in the wider NHS such as the establishment of Integrated Care Boards and Integrated Care Systems in England will take on delegated responsibility from April 2023, where appropriate, for specialised services. The Duty of Candour (Wales) 2023 and the Citizen Voice Body (Wales) 2023, will change the status of equality and human rights and will impact on all public bodies in Wales to be open and honest with service users receiving care and treatment. Establishment of NHS Executive which will operate under a direct mandate from Welsh Government. 	 Economic trend for austerity and spending cuts across public services exacerbating Wales' economic difficulties and impact upon funding settlements. Lack of investment in capital infrastructure to improve and redesign NHS estates and facilities. Welsh Government economic policy (Prosperity for all: economic action plan; prudent healthcare) and uncertain WG funding allocation for FE/HEIs in Wales and to meet the increasing funding demands for future social care. Impact of Health Board funding allocations on WHSSCs funding levels. Impact of economic and social environment on health inequalities. 	 Increasing pressures from a growing and ageing population with more complex health needs; an ageing workforce and generating pressures on workforce and increasing demand on services in a time of austerity and spending cuts. Health trends such as mental health, obesity and smoking related illnesses. Post Covid-19 workforce challenges and increasing pressures on staff due to rising demand for health and social care services Impact on mental health as a result of the Covid-19 pandemic Trends such as heavy workload, balancing career and personal responsibilities and health resulting in measures to offer more flexible approaches to work and careers for a better work-life balance (part time, portfolio work). Healthcare inequalities i.e. health provision for children and young people, learning disability. Urban/rural geography of Wales resulting in hard to recruit areas to maintain sustainable services. Impact of different levels of Digital literacy (how to use digital functions and use it properly) is variable amongst different age groups.

Appendix 2 - The PESTLE Analysis

Technological	Legal	Environmental	
What innovation and technological advancements are available or on the horizon? How will this affect our operations?	What regulation and laws apply to our business? Do they help/hinder WHSSC. Do we understand the laws across WHSSC?	What are the effects of our geographic location? Are we prepared for future environmental targets?	
 Topol Review support the aims of the NHS long term plan and the workforce implementation plan (i.e. creating a digitally ready workforce ready to use new technology and medicines and to adapt to new ways of working). Technological advances to provide quality and speedy healthcare through access to digital services Continuing medical advances in technology (Al, Genomics, digital medicine, robotics) will require changes to the education and training of the workforce. Changes within technology and communications infrastructure will require a change in roles and functions of clinical staff. Digital solutions to analyse data, improve intelligence. 	 A Healthier Wales: Long Term Plan for Health and Social Care (2021). Well-being of Future Generations (Wales) Act 2015. The Health and Social Care (Quality and Engagement) (Wales) Act (2020). The Foundational Economy in Health and Social Care Strategy (Wales) (2021). The National Clinical Framework (Wales) (2021). NHS Quality & Safety Framework (Wales) (2021). The Duty of Candour (Wales) 2023. The Citizen Voice Body (Wales) 2023 Equality Act (2010). Welsh Language (Wales) Measure 2011. 	 Climate Change Act 2008 to reduce carbon emissions, a key contributor to the causes of climate change (50% reduction by 2025 and 80% by 2050) The Environment (Wales) Act 2016 introduced a duty on Welsh Government to develop carbon budgets for Wales, and to reduce emissions by at least 80% by 2050. Welsh Government Net Zero Strategic Plan 2022 set out a net zero target for 2050 The Environment (Wales) Act 2016 requires the government to reduce emissions by at least 80% by 2050. Increase the amount of renewable energy used, limit emissions from transport, agriculture, industry and business. Wellbeing of Future Generations (Wales) Act 2015 seeks to reduce our environmental impact in line with the meaning that we are low carbon and efficient with our resources. Introduction of OFGEM DCP228 will mean a rise in energy costs. 	J