



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>30 January 2020</b>	<b>Agenda Item</b>	<b>3.4</b>
<b>Report Title</b>	<b>Joint NHS Partnership and Commissioning Update Report</b>		
<b>Report Author</b>	Nicola Johnson, Interim Assistant Director of Strategy		
<b>Report Sponsor</b>	Siân Harrop-Griffiths, Director of Strategy		
<b>Presented by</b>	Siân Harrop-Griffiths, Director of Strategy		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	This paper provides an update on the issues for SBUHB arising out of the partnership and commissioning meetings which have taken place with other NHS organisations since the Board last met.		
<b>Key Issues</b>	<p>The paper provides an update on our work to plan, commission and deliver services through the following joint arrangements:</p> <ul style="list-style-type: none"> <li>• Welsh Health Specialised Services Committee (WHSSC)</li> <li>• Emergency Ambulance Services Committee (EASC)</li> <li>• NHS Wales Collaborative Executive Group</li> <li>• Joint Regional Planning and Delivery Committee</li> <li>• ARCH Programme Board</li> <li>• Joint Executive Group with Cwm Taf Morgannwg UHB</li> <li>• Regional and Specialised Services Provider Planning Partnership with Cardiff and Vale UHB</li> <li>• NHS Wales Shared Services Partnership.</li> </ul>		
<b>Specific Action Required</b> <i>(please choose one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE</b> the update on the Health Board's joint NHS partnership and commissioning arrangements.</li> </ul>		

# JOINT NHS PARTNERSHIP AND COMMISSIONING UPDATE REPORT

## 1. INTRODUCTION

This report provides a brief summary of the joint NHS partnerships and commissioning meetings that have taken place since the last Board and the relevant issues for Swansea Bay University Health Board (SBUHB).

## 2. BACKGROUND

In line with 'A Healthier Wales' the Health Board works in partnership with other NHS organisations to plan, commission and deliver services for our resident population and to improve population health. The paper specifically summarises the issues arising from the:

- Welsh Health Specialised Services Committee (WHSSC)
- Emergency Ambulance Services Committee (EASC)
- NHS Wales Collaborative Executive Group
- Joint Regional Planning and Delivery Committee
- ARCH Programme Board
- Joint Executive Group with Cwm Taf Morgannwg UHB
- Regional and Specialised Services Provider Planning Partnership with Cardiff and Vale UHB
- NHS Wales Shared Services Partnership.

## 3. GOVERNANCE AND RISK ISSUES

The most recent minutes or informal notes of the meetings are included in the Appendices or informally through Admincontrol and the main issues for SBUHB are summarised as follows:

### 3.1 WHSSC Joint Committee

The last scheduled meeting of the Committee also took place on 12 November. The informal briefing is included on Admincontrol for information and the issues of interest to SBUHB are:

- **Perinatal Mental Health Unit** – discussions have commenced with SBUHB as the provider on the interim solution and the business case for the substantive model has progressed.
- **Vulnerable Group Portfolio** – WHSSC has been formally tasked and resourced to take forward commissioning work related to mental health and gender dysphoria including Traumatic Stress, further development of Gender Services, a Forensic Adolescent Service and refugee resettlement.

A Joint Committee private session was held on 12 December to consider the Major Trauma Network Programme Business Case, the notes of which are confidential. Agreement was reached on the handling of advanced recruitment to Tranches 1 and 2 posts in preparation for the 'go live' date of April 2020.

An Extraordinary Meeting of the Committee was held on 6<sup>th</sup> January at which the WHSSC Integrated Commissioning Plan (ICP) was approved in principle.

A number of strategic priorities are highlighted within the 2020-23 WHSSC ICP as service developments which are either currently mandated by organisations such as the National Institute for Health and Care Excellence (NICE) or have already been agreed as service priorities through previous ICPs or through the Clinical Impact Advisory Group (CIAG) process. These include the implementation of new treatments, such as Advanced Therapeutic Medicinal Products (ATMPs) and Thrombectomy or are working through the required step change in investment for services including Cystic Fibrosis and Intestinal Failure Services which are faced with challenging levels of growth.

The agreed funding settlement is represented in the Health Board's Integrated Medium Term Plan/Annual Plan as a net contribution of £3m. It was recognised that funding this level of pressures and developments is a significant challenge for all Health Boards and WHSSC will be undertaking further work to mitigate cost pressures and focus on pathway value efficiencies. The ICP will also be submitted to the Board for approval in January (as an appendix to the IMTP paper).

The next meeting is on 28<sup>th</sup> January and will be reported to the March Board.

### 3.2 EASC Joint Committee

The EASC Joint Committee was held on 12<sup>th</sup> November and the Chair's Briefing Note is available on Admincontrol. The main issues for SBUHB are:

- **Red Performance Requirements** – members raised concerns about the ability to achieve the performance improvement to 65% from November.
- **Amber Review** – discussions are ongoing about the outstanding actions and next steps now that the review is complete.
- **Mental Health Clinical Staff Desk** – a mental health access review is moving into the data collection phase and will be reporting in early 2020.
- **Non-Emergency Patient Transport Services (NEPTS)** – a report was provided updating the Committee on progress to date with transforming NEPTS in line with the 2015 business case.
- **WAST Provider issues** – a report was received highlighting the WAST operational and IMTP issues.
- **Emergency Department Quality and Delivery Framework (EDQDF)** – an update was received and health board-specific sessions were offered if required.
- **EASC Commissioning Intentions and IMTPs** – the approach for aligning the commissioning intentions, WAST IMTP and Health Board IMTPs was agreed.
- **Emergency Medical service Demand and Capacity Review** – the initial findings were received in a private session. Further work will be undertaken through the EASC Management Group.

The next meeting will be held on 28<sup>th</sup> January and will be reported to the March Board.

### 3.3 NHS Wales Collaborative Executive Group

The last NHS Wales Collaborative Executive Group was held on 17<sup>th</sup> December. Draft minutes are on Admincontrol and the main issues to note are:

- Health Boards may be asked to financially support the implementation of a Critical Care Clinical Information System.
- The service specification for tertiary oesophageal and gastric cancer services was approved for formal adoption by individual Boards. An action plan will be developed.
- Inflammatory Bowel Syndrome (IBS) – the Collaborative will be supporting work on IBS.
- An Outline Business Case for a radiology information system will be developed by March 2020.
- The funding allocations for Major Health Conditions Implementation Groups (£1m for each of the 10 groups) will be pulled back into a central allocation to be managed by the Collaborative. Funding will not be removed in 2020/21.

### 3.4 Joint Regional Planning and Delivery Committee (JRPDC)

The Committee has been formally stood down in line with recommendations outlined in November 2019. Progress continues to be made on the clinical/service projects previously reported via the JRPDC namely: pathology, cardiology, endoscopy, and vascular. The forward plans to deliver the Regional Clinical Services Plan are included in both Health Boards' IMTP/Annual Plans.

The Directors of Strategy/Planning are overseeing the transition to the revised regional planning and delivery arrangements, taking into account further opportunities to manage and streamline ARCH governance arrangements. These revised arrangements will be confirmed at the March Board meeting.

### 3.5 ARCH Programme Board

The ARCH Programme Board last met on 29<sup>th</sup> November 2019, the main issues to note are:

- **Regional Governance arrangements** –The Board supported proposals to dis-establish the ARCH Programme Board and replace it with an ARCH Partnership meeting which will convene twice a year. There was agreement to move from a Programme focus (Service Transformation, Research, Enterprise & Innovation (REI), Wellbeing and Workforce & Skills and Education (WSE)) to a project focus, with an integrated and whole systems approach to all regional projects. Directors of Strategy/Planning were asked to look at further opportunities to streamline arrangements and these will be ratified at the ARCH Partnership meeting in March 2020 and will be included in the next update to Health Boards.
- **Health and Life Science Campus Development** – progress to deliver the first phase of a Swansea University Institute of Life Science (ILS) at Morriston, via refurbishment of existing facilities and the expansion of ILS facilities at Singleton Hospital, were presented. Plans are on track to submit a proposal to the Swansea Bay City Deal Regional Board in May 2020. This relates to work the Health Board has been progressing to deliver a full detailed planning application, to develop a new road infrastructure from junction 46 of the M4 into the Morriston hospital site. The Campus Business Case will be presented to the Health Board in March.
- **Clinical Services** - A range of detailed planning and implementation improvement actions across regional clinical services such as stroke, cardiology, interventional radiology, dermatology, neurology were reported;

- **Regional Wellbeing and Prevention Project** - Health Board Public Health Directors and the Director of Swansea Universities' Health and Wellbeing Academy are hosting a stakeholder workshop on 18th February to shape the development of a project around regional wellbeing and prevention through exploring opportunities for a systematic approach to prevention and population wellbeing.
- **Research, Enterprise and Innovation** - A range of research, enterprise and innovation improvements are being taken forward including the Health Technology Centre and the Swansea Bay City Deal Campuses project.
- **Enabling Workforce Projects** - Executive Directors of Workforce and Organisational Development have identified four regional projects and/or networking opportunities: Community Participation, Apprenticeships Networking, Staff Wellbeing and Experience and Strategic Workforce and Planning.

### 3.6 Joint Executive Group (JEG) with Cwm Taf Morgannwg UHB

The Joint Executive Group with Cwm Taf Morgannwg UHB (CTMUHB) was held on 22<sup>nd</sup> November 2019. Draft minutes are on Admincontrol and the main decisions and issues arising were:

- **Obstetric Flows and Births** – a report was presented which showed that there are projected to be 200 more births from the Neath Port Talbot area at Singleton in 2020/21. This is not related to the boundary transfer but is driven by a planned change in the maternity service in Cwm Taf Morgannwg UHB. There are no sustainability issues at present for Princess of Wales Hospital (POWH) as there has been a corresponding increase in births on the site from the East of the CTMUHB area. It was agreed this was a commissioning issue for finance colleagues to resolve in-year through LTA negotiations.
- **Mortuary Services** – a verbal update was provided on progress to date. It was highlighted that the transfer was on-track for the end of February 2020, but a formal report was requested for the next meeting.
- **Operational Issues** – it was agreed monthly joint operational meetings will be held going forward. On specific services the following decisions were made:
  - A report on the pathway options for Gynaecology Surgery patients would be received at the January 2020 JEG meeting.
  - Further discussions to be held on the urology pathway.
  - Transfer of care and liaison service (TOCALs) at POWH – it was agreed the team would take patients from POWH into the community again with immediate effect.
- **Future Working Arrangements** – the revised membership and frequency of the Joint Executive Group, Management Group and Task and Finish Groups were agreed. JEG meetings will move to quarterly from January 2020 onwards. Programme resources were not agreed due to the financial constraints in both organisations, this may mean the programme of work will take longer to complete. The January meeting will consider the programme timeline.
- **Patient Knows Best (PKB)** – CTM UHB were asked to advise on the future of PKB in the Bridgend area as the contract is due for renewal, there are no implications for SBUHB of a decision either way. CTMUHB would take back to their Executive Team and advise.

- **Informatics** – Work is ongoing on the draft business case and timelines in conjunction with the service timelines. The JEG will need to consider at a future date if external support is required to finalise the business case.
- **Commissioning and Contracting** – an update report was provided on the commissioning reviews that had been undertaken and it was noted that all the SLAs will need to be refreshed for agreement for 2020/21.

The next meeting of the JEG is on 31<sup>st</sup> January, which will be reported to the March Board.

### **3.7 Regional and Specialised Services Provider Planning Partnership Group with Cardiff and Vale UHB**

The Regional and Specialised Services Provider Planning Partnership Group met on 22<sup>nd</sup> November. The draft Action Notes are on Admincontrol and the main items for SBUHB under discussion were:

- **Major Trauma** – a letter has been received from the Minister regarding funding commitments and the expectations around delivery. It was agreed that the process for transferring the Operational Delivery Network from the Collaborative to the UHB would need to commence once the programme business case has been approved and ODN staff are in post.
- **Thoracic Surgery** – it was confirmed that WHSSC has agreed to fund benign surgery. It is expected that the business case should be signed off in March or April. It was agreed that the 4<sup>th</sup> post should include references to the future service model.
- **Upper Gastro Intestinal Surgery** – the group was updated on the planning to be undertaken in two workshops, the first scheduled for the 26<sup>th</sup> November, and the second scheduled for the 11<sup>th</sup> December. The service specification was approved by the NHS Wales Collaborative Executive Group on 17<sup>th</sup> December.
- **Tertiary Services Strategy** – The group considered the tertiary service risk assessments completed to date. It was agreed to develop a process for the partnership to validate scores, thus ensuring consistency in scoring across organisations.
- **Spinal Surgery** – A joint meeting with spinal surgeons been arranged with the aim of establishing a high level dialogue.
- **Radiopharmacy** – It was confirmed that the service at UHW has now resumed and is now fully operational

The next meeting of the Partnership is on 23<sup>rd</sup> January and will be reported to the Board in March.

### **3.8 NHS Wales Shared Services Partnership (NWSSP)**

The last meeting was held on 2<sup>nd</sup> December, minutes are not yet available but the Assurance Report from the meeting is on Admincontrol. The main issues arising for the Health Board are:

- **National Health Application and Infrastructure Services Business Case** – the case was approved to purchase an All-Wales solution for this software which processes payments to primary care.

- **Brexit** – preparations for Brexit are in place regarding stock-holding and a business case was approved for the use of the storage facility after the Brexit arrangements are stood down.
- **Primary Care** – NWSSP have put in place arrangements for a Lead Employer Scheme for dental and pharmacy trainees as well as a small number of specialty medical trainees.
- **Financial Plan** –a forecast £2m will be distributed back to Health Boards at the year-end which has changed from the initial estimate of £750k.
- **Confidential Board** - The confidential part of the meeting comprised an update to the Welsh Risk Pool forecast outturn and approval of the proposal to establish a Collaborative Staff Bank Employment Service.

#### **4 FINANCIAL IMPLICATIONS**

The report highlights the net contribution in the Health Board's integrated three-year plan to the WHSSC ICP of £3m, and the forecast distribution in 2019/20 of £2m back to Health Boards from the NWSSP.

#### **5 RECOMMENDATIONS**

Members are asked to:

- **NOTE** the update on the Health Board's joint NHS partnership and commissioning arrangements.

Governance and Assurance		
<b>Link to Enabling Objectives</b> (please choose)	<b>Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities</b>	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	<b>Deliver better care through excellent health and care services achieving the outcomes that matter most to people</b>	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
Through the joint partnership and commissioning arrangements, the Health Board plans and commissions services to improve population health and quality of service delivery.		
Financial Implications		
There are no direct financial implications of this report.		
Legal Implications (including equality and diversity assessment)		
Under the Wellbeing of Future Generations Act the Health Board has a duty to work in an collaboration and integration to plan, commission and deliver services for the benefit of the population.		
Staffing Implications		
There are no direct staffing implications of this paper.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
<p>The paper gives an update on how the Health Board is working in collaboration with other NHS bodies to plan, commission and deliver integrated services in line with 'A Healthier Wales' and the WBFGA. .</p> <ul style="list-style-type: none"> <li>○ <b>Long Term</b> - The importance of balancing short-term needs with the need to safeguard the ability to also meet long-term needs.</li> <li>○ <b>Prevention</b> - How acting to prevent problems occurring or getting worse may help public bodies meet their objectives.</li> <li>○ <b>Integration</b> - Considering how the public body's well-being objectives may impact upon each of the well-being goals, on their other objectives, or on the objectives of other public bodies.</li> <li>○ <b>Collaboration</b> - Acting in collaboration with any other person (or different parts of the body itself) that could help the body to meet its well-being objectives.</li> </ul>		



<ul style="list-style-type: none"> <li>○ <b>Involvement</b> - The importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the body serves.</li> </ul>	
<b>Report History</b>	None.
<b>Appendices</b>	None