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Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>27 May 2021</b>	<b>Agenda Item</b>	<b>6.1</b>
<b>Report Title</b>	<b>Joint NHS Partnership and Commissioning Update Report</b>		
<b>Report Author</b>	Ian Langfield, Associate Programme Director, Tertiary Services Karen Stapleton, 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 Joint Committee Meeting</li> <li>• SBUHB/HDUHB interface and ARCH Service Transformation Group</li> <li>• Joint Management 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 (please choose one only)</b>	<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 Joint Committee
- ARCH Service Transformation Group
- Joint Management Group with Cwm Taf Morgannwg UHB
- Regional and Specialised Services Provider Planning Partnership with Cardiff and Vale UHB
- NHS Wales Shared Services Partnership.

All formal partnership arrangements were paused during the early stages of the Covid-19 pandemic but have gradually been reinstated, albeit in many cases with lighter agendas.

## 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

This report provides an update on the Management Group meeting held on 9<sup>th</sup> March. The issues of interest to SBUHB are:

- **Utilisation of Forecast Underspend** – Members ratified the Chairs action to approve proposals to utilise the forecast underspend to address non recurrent service issues.
- **South Wales Major Trauma Network** - Members ratified the Chair's action to approve the conversion of a locum plastic consultant surgeon post in the South Wales Trauma Network to a substantive post.
- **UHW 2** – Members were notified that the WHSSC Executive Team had confirmed their support for the scope and approach of the development of the programme business case to replace the University Hospital of Wales.
- **CAMHS Tier 4 Services** - Members received an update on current Tier 4 Child and Adolescent Mental Health Services (CAMHS) commissioning issues and risks, and agreed a series of actions to address issues and mitigate the risks. A progress report will be provided at the May meeting of the Joint Committee.
- **Disestablishment of the All Wales Posture and Mobility Partnership Board** – Members agreed to disband the All Wales Posture and Mobility Service

Partnership Board and to hold two Stakeholder of Partnership events per annum.

- **Integrated Commissioning Plan 2021-22 (ICP)** - Members received and supported the final version of the WHSSC Integrated Commissioning Plan.
- **Activity Report for Month 9** – Members received an update on the activity levels for services commissioned through WHSSC. Key items of note were that the rate of recovery across providers in NHS England and NHS Wales had slowed in month 9 as a consequence of the impact of the second wave of COVID-19.
- **2020-21 Month 10 Finance Report** - Members were informed that the forecast year end under spend was £14.7m, which mainly relates to underspend on pass through elements of Welsh provider SLA's and NHS England anticipated underperformance.
- **South Wales Neonatal Transport** - Members were advised that a paper outlining the current proposal to commission a permanent 24/7 service based on a lead provider model, would be considered at the NHS Wales Health Collaborative Executive Group meeting on the 16 March 2021. Subsequently agreement had been made at the Joint Committee on 11th May 2021 that SBUHB will take on the role of Lead Provider and undertake the necessary work to establish an ODN, deliver on the agreed service specification and develop an appropriate clinical model.

### 3.2 EASC Joint Committee

This report provides an update on the EASC Joint Committee meeting held on 9<sup>th</sup> March, based on the unconfirmed Minutes. The issues of interest to SBUHB are:

- **Chief Ambulance Services Commissioner's Report** – Members noted that the Ministerial Ambulance Availability Taskforce Interim Report had been unanimously supported by the Taskforce Members and submitted to the Minister. The report will be shared with members following clearance by Welsh Government. The Committee was notified that accessing capital funding had been an issue for the EMRTs service in terms of their expansion plans and this had now been resolved. The Committee were advised that a number of small amendments were required to the Emergency Medical Services Framework, and agreed that these could be finalised through Chair's action.
- **WAST Provider Report** – The Committee received and noted the WAST provider report.
- **EASC Annual Plan and Commissioning Intentions** – The Committee received the Annual Plan and Commissioning Intentions. The Committee noted that these had been discussed at the EASC Management Group and that the financial schedules had been shared with the Deputy Directors of Finance peer group. The following commissioning intentions were outlined for emergency medical services:
  - Seizing the opportunities afforded by the Welsh Clinical Response Model and the 5 Step EMS Ambulance Pathway.
  - Optimising the availability and flexibility of front line resources to meet demand.
  - Maximising productivity from resources and demonstrate continuous improvement.

- Developing a value-based approach to service commissioning and delivery which enables an equitable, sustainable and transparent use of resources to achieve better outcomes for patients.
- Collaborating to reduce and prevent harm, and improve quality of service and outcomes for patients.
- Collaboratively developing and delivering services that allow the ambulance service to contribute to the wider health system.

The Committee approved the Annual Plan and Commissioning Intentions.

- **Welsh Ambulance Services Draft IMTP** – The Committee received the draft WAST IMTP. Members noted the summary position:

- The plan built on previous plans
- Recognises the EMS 999 service and also the front end of the 111 service (through the programme board)
- Recognised that this was a 3 year plan although Welsh Government only asked for an annual plan
- Demand and Capacity review investment and efficiencies to be made; increasing hear and treat rate

The Committee supported the draft IMTP, and approved that the Chair and Chief Ambulance Service Commissioner sign off the plan before submission to Welsh Government.

- **Finance Report** - The Committee were advised that the plan remained in balance, with no difficulties anticipated by year end.

### 3.3 SBUHB/HDUHB Interface and ARCH Service Transformation Group

ARCH Partnership Board has reaffirmed their commitment to the ARCH collaboration and agreed shared strategic priorities from each of the three partners for the next phase of delivery through ARCH. The Partnership Board will meet again in May to discuss and agree key success factors for ARCH.

The next ARCH Partnership Board is on 28 May.

- **ARCH Service Transformation Projects** – The Dermatology Regional Services Vision document was well received by the ARCH Partnership in March 2021.
- **ARCH Supporting and Enabling Regional Service Transformation Activity**
  - **Regional Pathology Service** – The Regional Pathology Project Board undertook an option appraisal of sites to support development of the Outline Business Case in April. A more detailed appraisal will take place in the next 4-6 weeks of the preferred sites.

A Project Team and Task & Finish Groups are being established to take forward workforce transformation, service modelling, financial and procurement related activities to support delivery. The indicative completion date for the Outline Business Case is May 2022,

- **South West Wales Regional Cancer Centre** – The first steering meeting was positive, with discussions indicating a shared vision for the future where aspirations of all parties were well aligned. Next steps are to develop an updated Service Specification document to act as a baseline from which a collaborative Regional Transformational Programme Business Case can be developed.
- **ARCH Supporting and Enabling Research, Enterprise and Innovation**
  - **Health Campuses** – Grant Thornton (consultancy) interviewed key stakeholders in late March/ early April. A workshop was held on 15<sup>th</sup> April to draw together this work.  
  
Branding and communications development has started and two Branding Workshops scheduled in April.
  - **ARCH Innovation Forum** – On 29 March, the Arch Innovation Forum was able to guide and support two health staff to progress their innovations via Accelerate, identified a potential new ARCH service transformation project (Cancer Prehabilitation) to scope and develop, and heard from Rociale about their new gown sanitisation technologies.
  - **Covid Insights Survey** –The report's findings were presented to the NHS Wales Chief Executive Group in March. The final report will be available in mid-May.
  - **MediWales Connects** – Swansea Bay Medical Director and ARCH's Head of Strategic Planning addressed the MediWales Connects conference in March to highlight ARCH's priorities and our drive to encourage collaboration with industry to support the region's research, enterprise and innovation ambitions.

### 3.4 Joint Executive Group with Cwm Taf Morgannwg (CTM) UHB

The Joint Executive Group between Swansea Bay UHB and CTM UHB last met on 12th March, and an update was received at the 30<sup>th</sup> March Health Board meeting. The next meeting is on 10<sup>th</sup> June 2021.

### 3.5 Regional and Specialised Services Provider Planning Partnership Group - (RSSPPP) with Cardiff and Vale UHB

The Regional and Specialised Services Provider Planning Partnership Group met on 18<sup>th</sup> March. The main items for SBUHB under discussion were

- **Spinal Surgery** – the Group received the final report from the Spinal Surgery Project, which set out a series of recommendations for modernising spinal services in South East and South West Wales, including:
  - Services for patients with spinal conditions must be modernised, with patient centred pathways which are clinically informed and underpinned by the value based healthcare principles.
  - The outputs from the Regional and Supraregional working groups should be used to inform the future delivery and commissioning of services for patients with spinal conditions, which should be formalised by Health Boards.
  - .

An Operational Delivery Network should be established across the region. The Group accepted the recommendations, in its capacity as the Project Board. The Group agreed that the two Chief Executives would present the finding and recommendations from the project to the NHS Health Collaborative Executive Group, and seek approval for the model, and a mandate to develop a business case.

- **Oesophageal and Gastric (OG) Cancer Surgery** – the Group received a report on the urgent service change for OG cancer surgery, and agreed a process to take forward the work of the service model workstream to identify the definitive model for OG cancer surgery.
- **Paediatric Orthopaedic Surgery** – the Group received a report on paediatric orthopaedic surgery, which set out the current service provision across South and West Wales. The Group agreed that a strategy was necessary to address sustainability issues, and to safeguard the future delivery of these services. It was agreed to undertake further work to develop a proposal for consideration at the next meeting of the Group.

### 3.5 NHS Wales Shared Services Partnership (NWSSP) Committee

The last meeting was held on 18<sup>th</sup> March. The main issues arising for the Health Board to be aware of are:

- **Welsh Risk Pool** – the Committee received an update on the Welsh Risk Pool. The 2021 forecast contains significant additional risk of £6m due to the current national lockdown, subject to further mitigating actions. The risk-sharing agreement has been frozen as at the end of January at the agreed figure of £13.779m and this has been communicated to Directors of Finance.
- **Transforming Access to Medicines (TRAMS)** – The Committee was advised that NWSSP had received support from all NHS organisations for the TRAMS proposal and to fund a small and non-recurring gap through NWSSP savings.
- **Annual Plan** – the Committee received and approved the annual plan. The plan seeks to:
  - Support the NHS in reducing the four harms of COVID19, including the vaccination campaign.
  - Continue to deliver the basics well, with a strong focus on end user experience.
  - Review processes and tailor services to customer priorities as they restart areas such as planned care.
  - Implement a number of 'Once for Wales' solutions that deliver service improvement and transformation.
  - Apply learning from the pandemic and embed new efficient and sustainable ways of working across the organisation.
  - Put the voice, health, and wellbeing of our staff at the heart of our plans.
- **Laundry Services** – the Committee received an update on the progress of the TUPE transfer process. The financial position for the Swansea Bay service has been agreed, and the service will transfer on the 1<sup>st</sup> April. The Committee approved a draft Service Level Agreement, which will be reviewed at the end of quarter one.
- **Temporary Medicines Unit** - The Committee approved the extension of the Service Level Agreement and Technical Agreements until March 2023.

- **Scan for Safety** –The Committee approved the submission of a business case to Welsh Government subject to endorsement of the revised funding arrangements by DOFs on 19th March 2021.
- **NHS Wales Mediation Network** – The Committee received a request to fund the development of a new Mediation Network for NHS Wales. The network will provide a framework for improving working relationships and encouraging respect and early resolution of grievances and dignity at work matters. The Committee approved the request to fund the 2021/22 costs through NWSSP savings.
- **Digital Workforce Systems Scheduling** – the Committee noted the award of a two year contract for a Once for Wales e-scheduling system contract for District Nursing and other Community-based staff.
- **Finance and Workforce Report** – The Committee were advised that at the end of month 10 the year end forecast was break even.

#### 4 **FINANCIAL IMPLICATIONS**

There are no financial consequences associated with the updates in this report.

#### 5 **RECOMMENDATIONS**

Members are asked to:

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

<b>Governance and Assurance</b>		
<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"/>
<b>Health and Care Standards</b>		
(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"/>
<b>Quality, Safety and Patient Experience</b>		
Through the joint partnership and commissioning arrangements, the Health Board plans and commissions services to improve population health and quality of service delivery.		
<b>Financial Implications</b>		
The consequences of the pandemic on the Risk Pool arrangements is identified in section 3.7 although the financial consequences are not yet known.		
<b>Legal Implications (including equality and diversity assessment)</b>		
Under the Wellbeing of Future Generations Act the Health Board has a duty to work in collaboration and integration to plan, commission and deliver services for the benefit of the population.		
<b>Staffing Implications</b>		
There are no direct staffing implications of this paper.		
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>		
<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>	Appendix 1 – EASC Joint Committee – 09/03/21 Appendix 2 – WHSSC Joint Management Group – 25/03/21 Appendix 3 – NHS Wales Collaborative Executive Group – Appendix 4 – ARCH Partnership – Appendix 5 – Joint Executive Group SBUHB & CTMUHB – Appendix 6 – Regional and Specialised Services Provider Planning Partnership – 18/03/21 Appendix 7 – NHS Wales Shared Services Partnership – 18/03/21