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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	30 January 2020	Agenda Item	4.1
Report Title	Hosting of Operational Delivery Network - Major Trauma Network		
Report Author	Patsy Roseblade, Programme Director Governance Improvement		
Report Sponsor	Pam Wenger, Director of Corporate Governance		
Presented by	Pam Wenger, Director of Corporate Governance		
Freedom of Information	Open		
Purpose of the Report	To provide an update to the Health Board on the ongoing work regarding the governance framework for the Operational Delivery Network and the hosting arrangements within Swansea Bay University Health Board.		
Key Issues	<ul style="list-style-type: none"> ○ SBUHB is currently developing a hosting agreement that will set out the responsibilities of the ODN and the responsibilities of the MTN member health boards in order that the service can perform to its maximum effectiveness. ○ The hosting agreement will take the form of a Memorandum of Understanding (MOU) and be signed by SBUHB as host to the ODN and all health boards within the major trauma network. This will include SBUHB as a provider of services to the MTN. ○ It is important to note that the MOU can only be completed following final agreement of the WHSSC service specification. ○ The current plan is that a near final version of this will be presented at the MTN Board on 17 February 2020 followed submission to all health board boards in March 2020 for final agreement. 		
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Recommendations	Members are asked to: <ul style="list-style-type: none"> • NOTE the details contained in this update 		

MAJOR TRAUMA NETWORK – OPERATIONAL DELIVERY NETWORK

1. INTRODUCTION

This report is intended to provide an update to the Board on the ongoing work regarding the governance framework for the Operational Delivery Network and the hosting arrangements within Swansea Bay University Health Board

2. BACKGROUND

- 2.1. Swansea Bay University Health Board (SBUHB) has been designated as the host of the Operational Delivery Network (ODN) for the Major Trauma Network (MTN). The primary purpose of the ODN is to provide the management function for the network, to coordinate operational delivery and enhance major trauma learning thus improving patient outcomes, patient experience and quality standards from the point of wounding to recovery.
- 2.2. The ODN is central to the development of the trauma network for South Wales, West Wales and South Powys and involves cross-organisation and multi-professional working through a whole system collaborative approach ensuring the delivery of safe and effective services across the patient pathway.
- 2.3. As a healthcare provider, Swansea Bay University Health Board will be responsible for an adult and paediatric trauma unit, with specialist services, at Morriston Hospital. It will provide specialist support to the MTC and provide specialist surgery for patients who do not have multiple injuries, for burns, plastics, spinal and cardiothoracic surgery. This is entirely separate from the health board's responsibility as the host of the Operational Delivery Network.
- 2.4. The responsibilities as the host of the ODN is essentially an employment and corporate services role along with delivery of all elements of the service specification. In this role SBUHB will be expected to provide HR support, finance support, accommodation etc. to the small team (as listed at 2.5 below) that form the ODN.
- 2.5. The hosting role incorporates employing the members of staff that will form the ODN. This consists of:
 - ODN Manager
 - Data Lead
 - Admin support
 - Programme Manager
 - Network Clinical Lead (sessional)
 - 5 clinical leads (sessional)
- 2.6. The hosting arrangements include all responsibilities that are associated with the employment of staff including payment, mandatory training, PADR, record keeping, budgeting etc.
- 2.7. Alongside this, as part of the hosting of the ODN, SBUHB is responsible for ensuring the team have been recruited and trained in time for go-live.

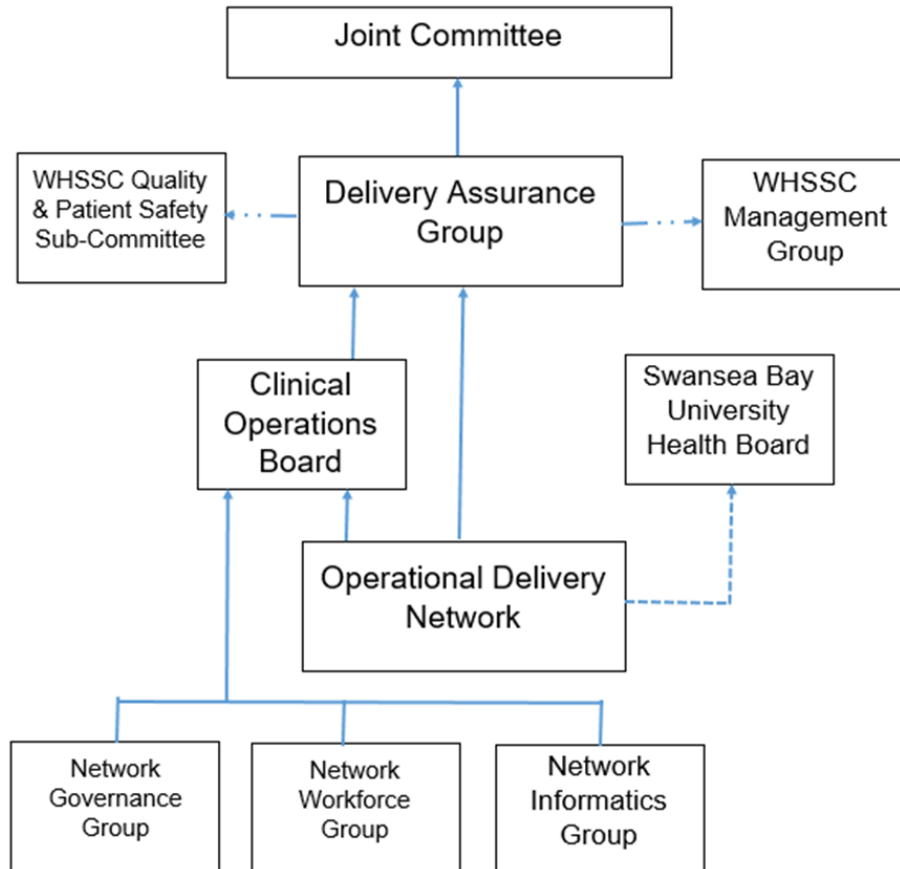
3. CLINICAL GOVERNANCE

- 3.1. It is important to note that the ODN will not have statutory responsibility for clinical governance within the MTN. Rather it will be responsible for ensuring regular and complete reporting into the ODN for clinical governance relating to the trauma network

- 3.2. The ODN will be responsible for ensuring all health boards operating within the MTN comply with clinical governance reporting requirements as per the approved Programme Business Case. The ODN will be responsible for completion of investigations in the event of a MTN clinical incident and also that learning from the incident is disseminated to all MTN members. The ODN will be required to ensure all clinical governance issues follow the escalation process as identified below. SBUHB will be accountable for ensuring the ODN discharges these functions effectively via the Clinical Operations Board (COB) through to the DAG and the WHSSC Q&S committee. The DAG will be responsible and accountable to the WHSSC Joint Committee to ensure that any clinical and operational governance issues that have been escalated to it by the ODN or the COB are reported to respective organisational executive leads for major trauma and that appropriate action is taken to address weaknesses.

- 3.1. Assurance on all clinical governance issues will be provided to the WHSSC Quality and Patient Safety Committee via the Delivery Assurance Group (DAG) as per the diagram at 3.2 below:

- 3.2.



3.3. Please note the diagram above is currently in draft form as it needs to be adapted to include the reporting line from the WHSSC Quality & Patient Safety Sub-Committee and the WHSSC Management Group. It also needs to be updated to include the Emergency Ambulance Service Committee (EASC).

3.4. The ODN will report twice yearly to the SBUHB Quality and Safety Committee in order to provide assurance that all clinical governance issues and responsibilities have been appropriately discharged as per the diagram above.

3.5. This reporting schedule is consistent with the reporting arrangements of the Emergency Medical Retrieval and Transfer Service (EMRTS).

4. OPERATIONAL DELIVERY NETWORK

4.1. The Trauma Operational Delivery Network (ODN) involves cross-organisation and clinical multi-professional working through a whole system collaborative approach ensuring delivery of safe and effective services across the patient pathway.

4.2. Within the ODN, patient trauma pathways are coordinated between providers over a wide geographical area to ensure equity of access to specialist resources and expertise.

4.3. The details of the Major Trauma Network (MTN) and specifically the ODN were included, in detail, in the Programme Business Case that has been approved by all network member Health Boards.

4.4. The Health Boards included in the network are:

- Swansea Bay University Health Board
- Hywel Dda University Health Board
- Cardiff and Vale University Health Board (Major Trauma Centre)
- Cwm Taf Morgannwg University Health Board
- Aneurin Bevan University Health Board
- Powys Teaching Health board

4.5. Note, North Powys and Betsi Cadwaladr University Health Board are part of the North West Midlands and North Wales Trauma Network.

4.6. The responsibilities of the ODN are outlined within the Programme Business Case. The commissioner, WHSSC, has produced a draft service specification which, when finalised, will form the basis of the operating responsibilities of the ODN.

4.7. The draft Service Specification Proposal for the ODN issued by WHSSC outlines the expectations for service delivery. It also includes a set of Quality Indicators that the ODN is responsible for ensuring are delivered across the MTN. The Quality Indicators are based on those that have been tried and tested in the English Major Trauma Network system.

4.8. The following list, whilst not exhaustive, provides an indication of the ODN responsibilities:

- Providing professional and clinical leadership across the network;
- Benchmarking and audit across the network through use of the TARN information and other sources of data;
- Development of an annual work plan for the network ensuring delivery against the quality indicators;
- Overseeing the development of the network against key milestones identified in the programme business case;
- Development of a long term plan;
- Develop coordinated patient clinical pathways between services over a wide area to ensure access to specialist major trauma care;
- Develop a comprehensive system of delivery through A) a pre-hospital triage tool and criteria for immediate inter-hospital transfer and transfer within 48 hours of referral; B) automatic acceptance and repatriation policies and, C) rehabilitation pathways;
- Be responsible for monitoring day-to-day capacity across the network, agreeing and working to an escalation plan (with agreed thresholds for escalation triggers) both within and across the network to monitor and manage surges in demand;
- Develop and implement network protocols for trauma patients;
- Deliver a clinical governance framework with the MTC, TUs, Rural Trauma Facilities and Local Emergency Hospitals (LEHs), pre-hospital services and rehabilitation services including a process for incident reporting with follow up action plans and network morbidity and mortality review. This includes collaborative serious incident investigation;

- Deliver a network-wide training and education programme encompassing the whole patient pathway prioritising key areas;
- Engagement with third sector organisations.

4.9. In order for the ODN to ensure seamless operational delivery and in keeping with the OGC Gateway recommendations, it is essential that it hold 'operational authority'. To enable the ODN to carry out its responsibilities with regards to flow through the network, there will be an updated repatriation policy in place. This will crucially include an automatic acceptance of all patients back into their 'home' health board immediately the critical trauma element of their care is completed.

5. GOVERNANCE

5.1. The lines of accountability for the ODN are a little complex extending to both the SBUHB Board and WHSSC via the Delivery and Assurance Group (DAG).

5.2. As outlined in point 2.4 above, SBUHB will be responsible for recruitment of the team to work explicitly within the ODN. This will necessarily include provision of all employment and corporate services along with accommodation.

5.3. SBUHB, as host of the ODN, will be held accountable for the continued delivery of the core team. It is proposed that the ODN report quarterly into the Senior Leadership Team (SLT) meeting to provide assurance and evidence that the service is being delivered.

5.4. The ODN will be held to account by the DAG for delivery of all elements of the service specification, this includes the clinical governance responsibilities as detailed above.

5.5. The SBUHB Chief Executive Officer and the Board will need to be assured that the ODN is delivering against all elements of the service specification.

5.6. This will be achieved through the quarterly reporting to the SLT meeting as described above but also via the Senior Responsible Office (SRO) of the ODN who will be an Executive member of the SBUHB Board.

5.7. The SRO of the ODN will be expected to report twice yearly into the SBUHB Quality and Safety Committee providing assurance of the on-going compliance with the service specification including a summary issues escalated to the DAG.

5.8. The diagram below summarises the responsibilities of the ODN and where it will be held to account for delivery:

ODN Responsibility	Accountable to:
Employment and Corporate Services →	SBUHB Board via Senior Leadership team
WHSSC Service Specification →	Delivery Assurance Group (DAG)
*Clinical Governance →	DAG Via Clinical Operations Board
Bi-Annual Governance Statement - Assurance →	SBUHB Quality and Safety Committee
*note clinical governance activity relates to information collection, investigation of incidents and dissemination of learning through the MTN	

6. HOSTING AGREEMENT

- 6.1. SBUHB is currently developing a hosting agreement that will set out the responsibilities of the ODN and the responsibilities of the MTN member health boards in order that the service can perform to its maximum effectiveness.
- 6.2. The hosting agreement will take the form of a Memorandum of Understanding (MOU) and be signed by SBUHB as host to the ODN and all health boards within the major trauma network. This will include SBUHB as a provider of services to the MTN.
- 6.3. It is important to note that the MOU can only be completed following final agreement of the WHSSC service specification.
- 6.4. The current plan is that a near final version of this will be presented at the MTN Board on 17 February 2020 followed submission to all health board boards in March 2020 for final agreement.

7. RISK ISSUES

- 7.1. The approved Programme Business Case provides clear 'Operational Authority' to the ODN. There is a risk that the ODN will be unable to hold organisations to account since it will not have a direct commissioning remit and will be acting in a professional capacity in relation to developing responses to clinical and operational governance issues. An inability to be effective at maintaining 'operational delivery', given the complexity of commissioning arrangements and multiple providers, will inevitably be challenging and result in a risk for SBUHB's ability to deliver the objectives of the ODN.
- 7.2. The financial risk of hosting the ODN is minimal as the staff employed to operate the ODN have been fully funded. However, any long term, unexpected absence is not covered in the funding agreed. The Programme Business Case, under the 'Contracting Framework' within the Management Case states "WHSSC is responsible for implementing the contractual framework for both the MTC and the trauma ODN. This framework will ensure that health boards appropriately contribute to the cost of the MTC and the trauma ODN and that there is appropriate 'risk sharing' between health board commissioners and the providers for the operating costs of the MTC which will include adjustment for variation in performance and cost of delivery". Reference to this will be included within the MOU to provide mitigation of financial risk in hosting the ODN within SBUHB.
- 7.3. There is a reputational for SBUHB if the ODN fails to deliver against the requirements of the service specification and fails to effectively escalate issues that arise. Mitigation to this will be the assurance reporting to both the SLT and the health board Quality and Safety Committee.

8. FINANCIAL IMPLICATIONS

- 8.1. As stated in paragraph 7.2 above the financial risk of hosting the ODN are minimal.

9. RECOMMENDATION

Members are asked to:

- **NOTE** the details contained in this update

Governance and Assurance		
Link to Enabling Objectives <i>(please choose)</i>	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	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"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	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 checked="" type="checkbox"/>
Health and Care Standards		
<i>(please choose)</i>	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input type="checkbox"/>
Quality, Safety and Patient Experience		
The ODN will be responsible for ensuring all health boards operating within the MTN comply with clinical governance reporting requirements as per the approved Programme Business Case.		
Financial Implications		
There are no financial implications with hosting the ODN as all posts are fully funded. There is a risk of financial exposure if there is unexpected long term absence of ODN staff.		
Legal Implications (including equality and diversity assessment)		
There are no known legal implications of hosting the ODN		
Staffing Implications		
SBUHB is responsible for employing the staff to work within the ODN. The Clinical Lead posts are sessional with the clinicians potentially being substantively employed by a different health board. SBUHB will need assurance that the substantive employer supports the ODN work and that the clinician is not exceeding the working time directive.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
Briefly identify how the paper will have an impact of the "The Well-being of Future Generations (Wales) Act 2015, 5 ways of working.		
<ul style="list-style-type: none"> ○ Long Term – Development of the MTN will improve patient outcomes in both the long-term and short-term. ○ Prevention – The research element of the ODN will lead improved outcomes. Also, whilst not covered in this paper there is an aspirational aspect to the ODN 		

<p>which delivers an injury prevention programme in collaboration with Public Health Wales.</p> <ul style="list-style-type: none"> ○ Collaboration – The Major Trauma Network is a collaboration of all health boards in South and West Wales working together to deliver an improved trauma service for patients. 	
Report History	<p>An early draft version of this paper was presented to the MTN Board on 16 December 2019.</p> <p>A copy of this paper will be submitted to the MTN Board on 20 January 2020 for information.</p>
Appendices	None