

Enw'r Pwyllgor: Name of Committee:	Joint Regional Planning & Delivery Committee (JRPDC)
Cadeirydd y Pwyllgor: Chair of Committee:	Steve Moore Chief Executive – Hywel Dda University Health Board
Cyfnod Adrodd: Reporting Period:	Meeting Held on 24 th November 2017
Y Penderfyniadau a'r Materion a Ystyriodd Pwyllgor: Key Decisions and Matters Considered by the Committee:	
<p>The Committee has a key role to drive forward at pace a range of projects that have been identified by both Hywel Dda University Health Board (HDdUHB) and Abertawe Bro Morgannwg University Health Board (ABMUHB) as priorities for joint working to deliver Ministerial objectives, especially those relating to the NHS Outcomes Framework, as well as alignment to the more strategic A Regional Collaboration for Health (ARCH) Programme Board and that of the Service Transformation Programme.</p> <p><u>Summary report of the work of the Joint Regional Planning and Delivery Committee (JRPDC) at its meeting on 24th November 2017.</u></p> <p><u>Regional Planning and Delivery Intentions</u></p> <p>An update report on regional planning and delivery progress was presented, with it emphasised that the two UHBs now have a clearer understanding and approach, and are committed to working together in a different way in the future. An example was the Orthopaedic workshop held on 24th November 2017, which had been extremely positive, with agreement on a number of short term actions to create a more robust position, and a move away from outsourcing of services. There are clear plans for a joint Orthopaedic organisational forum and a summit in February 2018, which will be followed up in the same way as the Ophthalmology workshop. The need to ensure that national planned care pathways are being implemented as part of any plans was noted. Dr Andrew Goodall complimented the UHBs on the partnership and leadership shown in this matter. With regard to planned care pathways, Dr Goodall endorsed the need to provide assurance that all pathways are being embedded and recommendations implemented. The Committee considered each of the specialty updates in the report, as follows:</p> <p>Ophthalmology – Members noted that there are certain digital opportunities, in terms of sharing electronic images between primary and secondary care.</p> <p>Orthopaedics – HDdUHB is potentially interested in implementing the 'Amplitude' system utilised in ABMUHB. Also, mirroring the Orthopaedic Follow-Ups system, which includes the patient in the decision-making process. It was noted that in those specialties where there is good clinical engagement, such as Ophthalmology and Orthopaedics, challenges result from the non-recurrent funding format; and enquired whether, if the UHBs are able to produce feasible, sustainable regional plans, it would be appropriate to approach Welsh Government to seek recurrent funding. It was suggested that Welsh Government would potentially be more minded to consider such a request, particularly if the UHBs can demonstrate shared learning. The UHBs were encouraged to formulate plans in this regard for 2018/19 promptly, whilst ensuring that they are considered plans. Noting the success seen by engendering discussion around Ophthalmology and Orthopaedics, it was suggested that a similar approach be applied to ENT and General Surgery. It was felt that the UHBs should examine as far as possible high-volume surgical areas, whilst not losing focus on Ophthalmology and Orthopaedics.</p>	

Endoscopy – Whilst the UHBs are still hopeful of a regional approach, this may not be possible until early 2018/19.

Regional Cancer Services including Non-Surgical Oncology – Members noted that the draft Non-Surgical Oncology strategy had been approved by HDdUHB's Public Board on 21st November 2017, and that it will be considered by ABMUHB's Public Board on 8th December 2017. UHBs noted the need to ensure that the implications of this strategy are embedded into their plans for next year.

Cardiology – Although a great deal of work has been undertaken since the previous meeting, the UHBs do not yet possess a full understanding of demand. A regional cardiology workstream meeting would take place on 1st December 2017 which will discuss and consider plans. Whilst there is a clear 'steer' on demand and capacity, further information is required in terms of Needs Assessment. Public Health Wales (PHW) have been commissioned to undertake a piece of work around this, which should be available for the meeting on 1st December 2017. It was emphasised that operationally, the cardiology pathways between the two UHBs are causing real pressure points, with high numbers of patients waiting. The reasons for this, whether increased referrals or lack of movement, need to be explored. As well as longer-term projects such as the Cardiac Cath Labs, there is also a need to consider how more effective day-to-day processes might be implemented in order to address patient flow. Discussions are taking place between the two UHBs around this issue. Welsh Government will monitor this situation from a capital point of view and agreed that delays in the system need to be explored and addressed. Consideration should be given to whether the issue is caused by a backlog of patients, increased demand, or a combination of the two.

Vascular – a recent workshop, together with a presentation at the Service Transformation Project Board meeting had been held. The UHBs are working through operational pressures on a day-to-day basis. A regional diabetic foot pathway has been agreed and Programme Budgeting and Marginal Analysis (PBMA) approach adopted for implementation, to ensure best use of resources. This work offers good opportunities to demonstrate the benefits of a regional approach.

Pathology – It was noted that this specialty does not tend to attract as much clinical funding as others. However, consideration is being given to challenging questions around different workforce models, and whether specific tasks can be undertaken by staff other than consultants. Recommendations and outcomes from national work are also being taken into account. Members were advised that the Pathology laboratory particularly in HDdUHB, required much improved facilities. Staff have been considering what new facilities might comprise and potential sources of income to abate costs. Other issues which have been discussed include the digital component (primarily relating to microbiology) and transport issues, in terms of maintaining turnaround times for samples. It was noted there will be certain revenue consequences, however focus is on ensuring a sustainable footprint and workforce model, together with a regional lab which is fit for purpose. The UHB Executive Teams will consider proposals in December 2017. Members were advised that the capital position on this project is high and the teams are examining costs to ensure that there is no 'drift'. Those involved are open to the challenge and clinical leadership has been exemplary. In terms of capital costs, Dr Goodall confirmed that teams should explore the reasons for these costs and whether the project can be made more achievable. The UHBs agreed that costs need to be challenged and value for money ensured; it was noted that both UHBs have individual

mechanisms for considering business cases and should explore a joint approach. Other potential sources of income should also be considered.

Long Term Agreements (LTAs) – the respective UHB teams will be undertaking work on LTAs over the next few weeks.

In considering messages from the planning event held on 23rd November 2017, it was noted that it had affirmed the forward trajectory; however the Cabinet Secretary had requested more information around what the UHBs are doing in terms of links with primary care. It was suggested that perhaps the UHBs had not effectively communicated the integration involved in the wellness and well-being centres at Llanelli and Neath Port Talbot. Consideration should also be given to the role of primary care clusters in demand management and around the outpatients and follow-up components of the patient pathway. The UHBs should be considering what more General Medical Services can provide. It was agreed that a joint, regional approach to negotiations with the clusters, with a consistent message, would be beneficial. It was suggested that the focus has probably been greatest on secondary care, with issues such as Referral to Treatment Time (RTT) to the fore. Whilst this has been the correct approach, and the work on Ophthalmology, Orthopaedics, etc, should continue; it is correct to reference links with primary care.

Frequency of Meetings

It was requested that consideration be given to scheduling meetings of JRPDC bi-monthly, to facilitate full updates and greater progress on actions. The need for balance between achievement and assurance was recognised; and it was agreed that this would be discussed by the Chairs and Chief Executives of both UHBs. Dr Goodall emphasised the importance of productivity, outcomes and delivery and stated that bi-monthly or quarterly meetings would be acceptable to Welsh Government, providing that progress is being made. The initial stimulus for regular meetings had been to establish and maintain momentum. Members were reassured that representatives from both UHBs are meeting and will continue to meet on a regular basis, to ensure that the pace of work is maintained.

Materion y Mae Angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd ar eu Cyfer: Matters Requiring Board Level Consideration or Approval:

- To note the current joint working that is being progressed.

Risgiau Allweddol a Materion Pryder: Key Risks and Issues/Matters of Concern:

- Both organisations need to be realistic in terms of the number of priorities that are committed to, in view of other work streams and priorities both are currently dealing with.
- Capacity is highlighted as a risk to moving this work forward.

Busnes Cynlluniedig y Pwyllgor ar Gyfer y Cyfnod Adrodd Nesaf: Planned Committee Business for the Next Reporting Period:

Adrodd yn y Dyfodol: Future Reporting:

Progress on current work streams.

Dyddiad y Cyfarfod Nesaf: Date of Next Meeting:

1st February 2018.

