

	Agenda Item 5v. ABMU Health Board – Meeting 29 <sup>th</sup> November 2018
<b>Enw'r Pwyllgor / Name of Committee</b>	Joint Regional Planning & Delivery Committee
<b>Cadeirydd y Pwyllgor/ Chair of Committee:</b>	Steve Moore Chief Executive – Hywel Dda University Health Board
<b>Cyfnod Adrodd/ Reporting Period:</b>	Meeting held 11 <sup>th</sup> October 2018

**Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:**

The Joint Regional Planning & Delivery Committee (JRPDC) has a key role in driving 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 on a regional basis, 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.

This paper is an update of the meeting held on 11<sup>th</sup> October 2018.

**Regional Cardiology**

The JRPDC received a paper focusing specifically on:

- A position statement on the proposal to develop a local diagnostic cardiac catheter laboratory in HDdUHB for their patient population.
- The expansion requirements for tertiary cardiac catheter laboratory capacity at Morriston Hospital, ABMUHB, to improve treatment access for the patient population of South West Wales (SWW) for emergency and elective treatment pathways, long time decision making arrangements and the timescales for decision making and implementation.
- Providing an update to the JRPDC on the scoping work to explore the benefits of developing an operational delivery network for Cardiology within SWW.

The JRPDC was asked to acknowledge the paper, noting that decisions for the development of services within the two University Health Boards (UHBs) currently sit with those UHBs for approval. The HDdUHB decision will be made by the Executive Team for the provision of a local diagnostic cardiac catheter laboratory, the expansion through ABMUHB will be taken through their Investment Business Group.

The JRPDC agreed that the Acute Coronary Syndrome (ACS) pathway and Saturday Cardiac Catheter List should be discussed at respective UHB Executive Team meetings. It was also agreed that both UHBs need to submit a joint paper to the next JRPDC meeting on 3<sup>rd</sup> December 2018, describing the sustainability gap.

**Orthopaedics Update**

Through regional planning discussions, both UHBs have identified capacity and demand shortfalls in their planned care service models for 2018/19. Both UHBs' systems of care for orthopaedics have identified sustainability gaps and backlogs.

The JRPDC was asked to consider the proposed concept to close the sustainability gap in principle and determine a way forward for the working group, acknowledging the need for the case to be considered within the emerging strategic direction of both UHBs.

Both UHBs are clear where the shortfalls in capacity exist, and the following solutions should be applied to close the gap in the following sequence:

- Efficiency gains (no revenue requirement)
- National Planned Care Programme gains, including service redesign (no revenue requirement)
- Internal capacity solutions (revenue requirement)
- External capacity solutions (revenue requirement)

For clarity, it should be noted that both UHBs will not be exploring cost based solutions until such time as they are satisfied that capacity and demand plans reflect the benefits of efficiency gain, productivity gain and that any redesign could be implemented via the National Planned Care Programme or indeed any local service redesign.

The JRPDC was updated on progress since the last meeting, and in particular, to the emerging operational issues and delivery developments within each UHB.

The JRPDC agreed that efficiency figures should be reviewed and clarity provided on the efficiency benchmark to update the scope for options, which will be submitted to the next JRPDC meeting. The JRPDC also agreed that clarity is needed on the options around funding, being submitted to the December meeting of the JRPDC.

### **Endoscopy Update**

The purpose of the paper was to provide the JRPDC with an update on the progress being made by the two UHBs, to work more closely on a regional basis with respect to endoscopy services.

The JRPDC were asked to note the progress made, including the establishment of a Regional Group, with both operational and clinical representation. The first meeting of the Group was held on 25<sup>th</sup> September 2018.

The key areas of consideration for the Group include:

- Regional Endoscopy Services;
- Response to the All Wales Sustaining Endoscopy Services recommendations, as per the National Endoscopy Implementation Group;
- The impact of projected demand and capacity implications of the First Line Faecal Immunochemical Testing (FIT) within the bowel screening programme;
- Understanding the impact of the new single cancer pathway on endoscopy services.

The JRPDC requested a paper to be submitted to the 1<sup>st</sup> meeting held in 2019, detailing the scale of the problem, as well as the options and associated timescales.

### **Vascular Update**

The purpose of the project is to inform, develop and agree recommendations to ABMUHB Planned Care Commissioning Board and HDdUHB Executive Team on the future delivery of vascular surgery services, and to ensure a safe effective quality service.

The objectives of the project are as follows:

- Quality of Service

- Clinical Outcomes
- Economy
- Efficiency of Service

The JRPDC agreed that an initial work plan needs to be signed off at the Vascular Group meeting which links to the objectives initially set out. Furthermore, a governance system needs to be developed to address the objectives and presented to the JRPDC at its next meeting in December. The JRPDC also suggested that a Joint Business Case be explored.

### **Pathology Update**

The JRPDC received the Strategic Outline Case (SOC) and was asked to note the progress of discussions to date. The SOC outlined the potential long term solution but recognized the immediate pressures for Hywel Dda's Cellular Pathology services which requires an interim solution.

The paper highlighted the schemes which the scope review confirmed support for, either in terms of the regionalization of pathology services and/or maintained business continuity up to and during the building phase. Consequently, and from this, the itemization of those schemes which the Project Board recommended should remain within scope of the Discussion SOC. The paper also listed the services which were identified as meeting local service needs, which the Project Board recommended be addressed outside the regional business case at a local level.

It was highlighted that the capital costs outlined within the paper need to be the subject of affordability discussions with Welsh Government (WG) colleagues prior to progression of the Business Case to Outline Business Case (OBC) stage.

The JRPDC was asked to endorse the Project Board's recommendation that only those services which directly support the development of regionalised services should remain within the scope of the SOC. They were also asked to consider Murryston Hospital's future mortuary workload and how this may affect service flows and capacity under ARCH, as this would require an additional (approximately) 30 body store places, a high-risk post mortem room, and possibly a dedicated CT Scanner. This may potentially increase the indicative capital cost of £39.7m by approximately £3.7m. The estimated revenue cost consequences were noted by the JRPDC as well as the sustainability issues facing Cellular Pathology Services in HDdUHB.

The JRPDC requested that a Scope Justification Paper be submitted to the Executive Teams in both UHBs for the rationale to be signed off.

### **Integrated Medium Term Plan (IMTP) 2019/22**

The JRPDC was provided with a 'strawman' paper which provided an overview of the proposed structure for the narrative for both Plans. This work will also take into consideration the feedback from WG on the 2018/19 Plans on an All-Wales basis which notes that, '*Strong narrative on regional planning was provided in each plan (where applicable), but detailed actions plans not yet developed*'. It was noted that as part of this process, there is a need to ensure that detailed action plans are developed.

A draft structure was proposed which detailed four main sections and the JRPDC commented that Section 3 needed to be more granular in terms of the JRPDC agenda. The JRPDC also commented that Joint Regional Working needs to be reflected throughout the Plan wherever

possible and not be limited to the relevant sections. Additionally, it was requested that within the Executive Summary of the IMTP, the work of the JRPDC should be highlighted and profiled.

**Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd are u 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:**

- The increase in patient demand for cardiac treatment, and resulting challenges in terms of capacity across the region.
- The shortfall in capacity in orthopaedics.
- The impact of the new single cancer pathway and the recently introduced FIT test on endoscopy services.
- Workforce and sustainability pressures within HDUHB and ABMUHB.

**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:**

3<sup>rd</sup> December 2018