





Meeting Date	26 March 202		Agenda Item	3.3	
Report Title	Joint NHS Partnership and Commissioning Update				
	Report				
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Report Sponsor	Siân Harrop-Griffiths, Director of Strategy				
Presented by	Siân Harrop-Griffiths, Director of Strategy				
Freedom of	Open				
Information					
Purpose of the	This paper provides an update on the issues for SBUHB				
Report	arising out of the partnership and commissioning meetings				
	which have taken place with other NHS organisations				
	since the Boa				
Key Issues	The paper provides an update on our work to plan,				
	commission and deliver services through the following joint				
	arrangements:				
	<ul> <li>Welsh Health Specialised Services Committee</li> </ul>				
	(WHSSC)				
	<ul> <li>Emergency Ambulance Services Committee</li> </ul>				
	(EASC)				
	<ul> <li>NHS Wales Collaborative Executive Group</li> </ul>				
	<ul> <li>Joint Regional Planning and Delivery Committee</li> </ul>				
	<ul> <li>ARCH Programme Board</li> </ul>				
	<ul> <li>Joint Executive Group with Cwm Taf Morgannwg</li> </ul>				
	UHB				
	<ul> <li>Regional and Specialised Services Provider</li> </ul>				
	Planning Partnership with Cardiff and Vale UHB				
	<ul> <li>NHS Wales Shared Services Partnership.</li> </ul>				
Specific Action	Information	Discussion	Assurance	Approval	
Required		$\boxtimes$	$\boxtimes$		
(please choose one					
only)					
Recommendations	Members are				
	<ul> <li>NOTE the update on the Health Board's joint</li> </ul>				
	NHS partnership and commissioning				
	arra	angements.			

### 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

This report provides an update on the Joint Committee meeting held on 28 January 2020 and the Minutes are attached at Appendix 1. A scheduled meeting took place on 10<sup>th</sup> March but actions and notes are not yet available. Tformance Report - he issues of interest to SBUHB are:

- Plastic Surgery Performance concern noted about the impact of the major trauma centre on the waiting times and SBUHB will confirm contingency plans.
- **Neonatal Transport Review** SBUHB is one of the three providers of this service, the report will be circulated when complete and an outline plan for an interim service will be brought back in March.
- **Perinatal Mother and Baby Unit** the proposed options for an interim 6-bedded Unit at Tonna Hospital was supported and a task and finish group is being set up to review the options for a permanent solution.
- Thoracic Surgery good progress is being made on the implementation of the Adult Thoracic Surgery service at Morriston.

The meeting held on 10<sup>th</sup> March will be reported to the May Board.

### 3.2 EASC Joint Committee

This report provides an update on the EASC Joint Committee meeting held on 28 January 2020 and the Unconfirmed Minutes are attached at Appendix 2. A scheduled meeting took place on 10<sup>th</sup> March but actions and notes are not yet available.

The main issues for SBUHB are:

- **EASC IMTP** the EASC element was approved and the financial commitment was agreed as £1.8m. The Health Board's share is £186k which is reflected in the Health Board's Annual Plan.
- Demand and Capacity Review the final version was received and this will be scrutinised in the Ministerial Ambulance Availability Task Force. It has been agreed that the Director of Strategy will be the Health Board's representative on the Group.
- WAST Provider Report, Serious Adverse Incidents increased levels of SAIs have been reported. SBUHB is one of the two health Boards highlighted.

The meeting held on 10<sup>th</sup> March will be reported to the May Board.

# 3.3 NHS Wales Collaborative Executive Group

The last NHS Wales Collaborative Executive Group was held on 25<sup>th</sup> February but minutes or action notes are not yet available and the Board will be updated at the May meeting. The previous meeting took place on 25<sup>th</sup> January and the main issues to note are:

- **Mental Health Plan** the Chief Executive had an engagement session and gave feedback on the emerging MH Plan.
- Lymphoedema a report was presented on the evaluation of the lymphoedema business case. An explanation was given following a query on increasing costs within SBUHB.
- Cancer Case for Change the work to date suggests a gap of £17m to implement the Single Cancer Pathway.
- **LINC Programme** electronic test requesting to be included in all Health Board IMTPs.
- Major Trauma support for four Consultant sessions to be included in all IMTPs.

## 3.4 ARCH Service Transformation Group

The ARCH Service Transformation Group last met on 5<sup>th</sup> March 2020, draft minutes are not yet available however the main issues to note are:

- Regional Governance arrangements The group was updated on work to streamline ARCH and JRPDC governance arrangements and the latest arrangements were presented prior to being signed off by the ARCH Partnership in March 2020
- Interventional Radiology (IR) Regional Ambitions an updated vision and ambitions paper for a Regional IR Service was welcomed by the Group in January and a detailed work plan was signed off in March 2020

- **Dermatology Regional Services** following sign off of a Project Initiation Document (PID) and Terms of Reference (TOR) for this new regional project in January, a work plan was accepted by the group in March 2020
- South West Cancer Centre Update the programme business case was approved as a direction of travel for both Health Boards and has been shared through each organisation's own governance arrangements and will be flagged in both annual plans
- Hyper Acute Stroke Service (HASU) the Group received an update report and noted that there had been challenges in agreeing a regional HASU model within the original timeframes due to factors in both Health Boards. This means work to present a final model will be delayed for up to 18 months
- Eye Care Regional Project the Group was updated on the need to establish this new regional project due to a number of fragilities in elements of the current service. A clinical workshop is being planned for May 2020.
- The following regional projects updates were noted via Flash reports;
   Regional Cardiology Services, Neurological Conditions, Regional Pathology
   Centre, Digitisation of Services, Major Trauma Network implementation,
   Endoscopy and Vascular.
- Regional Wellbeing and Prevention Project an update was received on a
  a regional wellbeing and prevention workshop held in February 2020 hosted by the
  Public Health Director Swansea Bay UHB and the Director of Swansea
  Universities' Health and Wellbeing Academy. Outputs included developing a
  "healthy lungs" programme incorporating vaping and drug smoking
  Another output concerned strategies to change culture and behaviours to prevent
  unhealthy habits and focusing on a whole wellbeing pathway. The Group noted
  that the current coronavirus outbreak will temporarily curtail the next steps
- GEPHI ARCH asset map the Group received a presentation on progress to develop a visualisation of innovation and assets amongst organisations across the region. A further update will be provided as this work develops and it was noted that the work to date has involved colleagues in the West Glamorgan Regional Partnership Board
- 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 were highlighted
- Enabling Workforce Projects –an update was received Community Participation, Apprenticeships Networking, Staff Wellbeing and Experience and Strategic Workforce and Planning projects.

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

The Joint Executive Group between Swansea Bay UHB and CTM UHB met on 31st January and the notes are available on AdminControl. The main issues for the Health Board to note are:

- Mortuary transfer this has been delayed due to operational issues. It was agreed a short term extension of the SLA will be put in place until 30th April at the latest, with the Director of Planning at CTM to write formally to the Director of Strategy in SBUHB if a further extension is requested.
- Obstetrics flows Directors of Finance were asked to resolve the LTA issue to support the additional flows into Singleton and the SBUHB Director of

Finance has written to CTM UHB to outline the proposed revision to the contract.

- Operational Issues a monthly operational phone call will take place between the two Health Boards to ensure issues are resolved locally as far as possible.
- SLA Rollover the SLA pack will need to go to Board in March. A summary
  of SLAs that will be cease or be amended will be produced for the next JEG
  meeting.
- Programme Arrangements the main issue is a complex piece of work to unpick the service issues around NPTH and POWH. It is proposed to take this back to the meeting in July.
- **Informatics** it was agreed to undertake a pragmatic approach to disaggregate the informatics and IT systems in line with local and national improvements and changes, rather than through a single business case approach.

# 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 23<sup>rd</sup> January. The main items for SBUHB under discussion were:

- Major Trauma the group was advised that the service is still working towards 1st April start date. The polytrauma ward is scheduled for completion at the end of March. The Major Trauma Network will be conducting a site visit on the 17th March
- Thoracic Surgery the group was advised that the draft clinical model has been reviewed by thoracic surgery board. It will be submitted for approval once WHSSC have concluded their consultation on the service specification. WHSSC have accepted additional capacity for benign work. SOC scheduled to be completed in April / May.
- Tertiary Services Strategy the group agreed a process for validating all risk assessments with a score of 15 or greater.
- Oesophageal and Gastric Cancer Surgery the group agreed to establish a surgical service model working group, jointly chaired by the two Medical Directors, with the remit to include the development and consideration of proposals to maintain interim service provision. It was agreed that the Chief Executives would seek support from the NHS Wales Health Collaborative Executive Group to formally request that the Wales Cancer Network prioritise the development of the OG pathway and data through the OG Cancer Site Specific Group.
- Spinal surgery the group discussed the current difficulties in managing unscheduled referrals from Hywel Dda. It was advised that work was progressing in SBUHB to establish additional capacity to manage the referrals by April / May, but that in the interim it was seeking support from C&VUHB to manage approximately 12 unscheduled spinal referrals from Hywel Dda. It was agreed that the two Medical Directors should meet with each team to agree an interim position to manage unscheduled referrals from Hywel Dda. It was acknowledged that there was need for a joint commitment from both Health

- Boards, to develop an interim arrangement, and that support would be required from commissioning Health Boards to support any changes in patient flow.
- Hepatobiliary (HPB) surgery the group discussed the letter to the Wales
  Cancer Network from the DCMO on HPB services. The group agreed that both
  services should work together to identify opportunities to work together, and
  that support should be sought from the NHS Wales Health Collaborative to:
  - Advise on the commissioning arrangements for the non-commissioned elements of service provision;
  - Request that the Wales Cancer Network to undertake a peer review of HPB cancer, and lead the development of a service specification for HPB services;

The next meeting of the Partnership is on 27<sup>th</sup> March and will be reported to the Board in May.

# 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:

- Medical Examiner Scheme Deep Dive a presentation was given on a single Medical Examiner service for Wales to improve safety and families' experience after a bereavement
- Laundry Services the locations for the three laundries are being finalised to be consulted upon to inform the development of an Outline Business Case.
- Transforming Access to Medicines the Chief Phamaceutical Officer in Wales has written to CEOs, and Directors of Workforce and Planning to raise awareness of the project.

### 4 FINANCIAL IMPLICATIONS

The report highlights that the Health Board's net contribution of £186k to the EASC IMTP is in the Annual Plan 2020/21.

### **5 RECOMMENDATIONS**

Members are asked to:

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

Governance and Assurance					
Link to Enabling	Supporting better health and wellbeing by actively empowering people to live well in resilient communities	promoting and			
Objectives (please choose)	Partnerships for Improving Health and Wellbeing	$\boxtimes$			
	Co-Production and Health Literacy				
(10.0000)	Digitally Enabled Health and Wellbeing				
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people				
	Best Value Outcomes and High Quality Care	$\boxtimes$			
	Partnerships for Care	$\boxtimes$			
	Excellent Staff				
	Digitally Enabled Care				
	Outstanding Research, Innovation, Education and Learning				
Health and Care Standards					
(please choose)	Staying Healthy	$\boxtimes$			
	Safe Care				
	Effective Care	$\boxtimes$			
	Dignified Care				
	Timely Care				
	Individual Care				
	Staff and Resources	$\boxtimes$			
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 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)**

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. .

- **Long Term** The importance of balancing short-term needs with the need to safeguard the ability to also meet long-term needs.
- o **Prevention** How acting to prevent problems occurring or getting worse may help public bodies meet their objectives.
- o Integration 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.
- **Collaboration -** 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.

 Involvement - 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.

Report History	None.
Appendices	Appendix 1. WHSSC Minutes Appendix 2. EASC Minutes Appendix 3. Draft Notes Joint Executive Meeting Appendix 4. Assurance Report