

## **CORE BRIEF TO MANAGEMENT GROUP MEMBERS**

### **MEETING HELD ON 19 AUGUST 2021**

This briefing sets out the key areas of discussion and decision. It aims to ensure the Management Group members have a common core brief to disseminate within their organisation.

#### **1. Welcome and Introductions**

The Chair welcomed members to the meeting noting that, due to the COVID-19 pandemic, the meeting was being held via MS Teams. It was noted that a quorum had been achieved.

Written questions from members and answers had been published in advance of the meeting and had been embedded within the meeting papers.

#### **2. Action Log**

Members received an update on progress against the action log and **noted** the updates.

#### **3. Managing Director's Report**

Members received the Managing Director's Report and **noted** updates on:

- A Funding Release Process for Medium Risk Scheme in 2021-2022 Integrated Commissioning Plan (ICP),
- WHSSC Cancer & Blood Programme Internal Audit report, which received a substantial assurance assessment rating,
- Ty Llidiard Escalation Review,
- The commissioning of Cardiac services

#### **4. Clinical Impact Assessment Group (CIAG)**

Members received an informative presentation on the Clinical Impact Assessment Group (CIAG) prioritisation process held on the 3 August 2021 and plans to develop the Integrated Commissioning Plan (ICP) 2022-2023. Members noted that 20 schemes had been considered, with a cumulative financial value of £2.8 million, that Welsh Government's (WGs) Planning framework had not yet been published, and that the draft ICP would be presented to the Management Group on the 21 October and to the Joint Committee for final approval on the 9 November 2020, prior to submission to WG.

Members **noted** the update.

## 5. Review of Neonatal Cot Capacity and Neonatal Tariff

Members received a report proposing that a review is undertaken into Neonatal Cot Capacity and the Neonatal Tariff. Members noted that:

- The review of neonatal transport involving Dr Grenville Fox, Consultant Neonatologist, Guys & St Thomas, London, recommended a review of cot capacity in light of the high number of capacity transfers carried out by the transport team,
- The Maternity and Neonatal Network have recently undertaken peer reviews of the units across south Wales and have recommended that there is a shortfall in varying posts across the units,
- NHS England have recently undertaken a Review of Neonatal Critical Care and have published the 'Implementing the Recommendations of the Neonatal Critical Transformation Review',
- The neonatal tariff was introduced in February 2017 and baselines were set using three year activity levels up until March 2015. Since the introduction of the tariff and the setting of the baselines there has been no review of activity,
- The WHSSC ICP 2021-2024 identified neonatal capacity as a strategic priority that would require a specific programme of work to complete. The Women and Children's Commissioning Team proposed that a review of cot capacity, cot configuration and the neonatal tariff was undertaken in 2021-2022 in order to inform the 2022-2025 WHSSC ICP that will be submitted to WG in December 2021.

Members **supported** the proposed programme of works; the objectives of the review; the planned methodology for demand and capacity modelling and the timelines for completion of review.

## 6. Funding Release for Implementation of 2021-22 Adult Home Care Parenteral Nutrition (HPN) Service

Members received a report request support for the release of funding to enable implementation of the 2021-2022 ICP scheme for the Home Parenteral Nutrition (HPN) service. Members noted that:

- the HPN service was prioritised for investment in the CIAG process undertaken in 2020, in order to inform the ICP for 2021-2022,
- A detailed business case had been devised which includes funding to support the surgical element of the HPN service, appropriate resourcing for the pharmacy element, a 7 day nursing service, the development of an outreach service to other HB's to improve quality of care whilst waiting for admission to UHW and clinical advice to support other HB's.

Members (1) **noted** the report; and (2) **supported** the release of funding for the HPN service, which was approved within the 2021-2022 Integrated Commissioning Plan (ICP).

## **7. Commissioning Arrangements for GammaCore for the Treatment of Chronic or Episodic Cluster Headaches**

Members received a report providing an update on progress to commission gammaCore for the treatment of chronic or episodic cluster headaches.

Members **noted** that:

- gammaCore had been prioritised for investment in the 2021-2024 ICP prioritisation process,
- The use of gammaCore is included in the NHS England MedTech Funding Mandate,
- A Policy Position (PP220) setting out the inclusion criteria for the use of gammaCore has been developed by the WHSS team,
- Neurologists in South Wales are already prescribing gammaCore through their Health Board (HB) Independent Patient Funding Request Process (IPFR) process. The current agreement in place is that the company fund the first 3 month “trial period” with the HBs picking up the costs if the patient is considered to have benefited from the treatment.

Members (1) **noted** the information in the report; and (2) **supported** the following recommendation that the commissioning of gammaCore to remain with HBs supported by the implementation of the Policy Position developed by WHSSC; and that WHSSC undertake a stakeholder consultation exercise on the draft policy position on behalf of the HBs.

## **8. Impact on WHSSC Commissioned Specialised Services of SBUHB’s Engagement on Service Reconfiguration**

Members received an update report and presentation on progress made by SBUHB since the finalisation of the HBs Annual Plan on developing the engagement document, timeline and supporting engagement process for the “Changing for the Future” engagement process to consult stakeholders on plans for changing urgent and planned care services across SBUHB post COVID-19. Members noted the updates, the associated timeline and that the process had been agreed with the Swansea Bay Community Health Council (CHC).

Members **noted** the report.

## **9. Forensic Adolescent Consultation and Treatment Service (FACTS) Update**

Members received a report providing an update on the Forensic Adolescent Consultation and Treatment Service (FACTS) and which sought support to transfer funding for the community element of the service from WG to WHSSC, joining up services for some of the most vulnerable children in Wales.

Members noted that:

- A new service specification outlining ‘Core FACTS’ is in development, co-produced by WHSSC and the FACTS Team,

- FACTS in the Community (Youth Offending Teams/YOTS) is currently funded by WG but has never been formally “commissioned”. The FACTS team recently worked with the YOTS to develop a document outlining the referral pathway and access criteria for this element which has been accepted in principle by policy colleagues in WG,
- FACTS In-reach to HMP YOI Parc was provided when additional recurrent funding was provided by WG in 2016 to extend the in reach of FACTS into HMP YOI Parc through additional nursing and a psychology input to create a multi-disciplinary team. Separate to this service and from November 2021, CTMUHB will provide all primary, secondary and community care into HMP YOI Parc, including Child and Adolescent Mental Health Services (CAMHS),
- A strategic review identified a gap in service for vulnerable children based at Hillside Secure Children’s Home.

Members (1) **noted** the information presented within the report; (2) **supported** in principle the transfer of funding from Welsh Government to WHSSC for the community element of the service (Youth Offending Teams); (3) **supported** the inclusion of the community element in the FACTS Service Specification and Access Policy.

## 10. Update on Cochlear Implant and Baha® Services

Members received a report providing an update on the Cochlear Implant and Baha® service and the next steps in respect to the future configuration of the tertiary auditory services.

Members noted that there is opportunity to consider the optimum service model for this patient group and it is proposed that the outstanding work is progressed through a series of engagement workshops to commence in September 2021 with a view to undertaking a full consultation exercise in 2022.

Members (1) **Noted** the delay in the intended engagement and consultation process; (2) **Agreed** that the work outlined in the report was required prior to moving towards any formal engagement and consultation; and (3) **Considered** the timescales set

## 11. Revised Mental Health Specialised Services Strategy Programme Structure

Members received a report providing an overview of the programme structure for the development of a 5 year specialised services mental health strategy for Wales.

Members noted the proposed programme structure for the development of a 5 year specialist mental health strategy for the people of Wales and the associated delivery plan.

Members **noted** the report.

## **12. Strategic Outline Case - Development of a Single South Wales Thoracic Surgery Centre at Morriston Hospital**

Members received an update on the Strategic Outline Business Case (SOC) to develop a single South Wales Thoracic Surgery Centre at Morriston Hospital.

Members noted the case for change and that a report would be presented to a future meeting for consideration.

Members **noted** the report.

## **13. Major Trauma**

Members received an update report on the current activity and performance of the Major Trauma Network.

Members noted the requests being made by the network to address the identified risks and the use of current resources within the network.

**Members** (1) **Discussed** the issues in the report; (2) **agreed** to update the relevant HHB Joint Committee Chief Executive prior to a discussion on risk and investment requests at Joint Committee in September; and (3) **Noted** that following the Joint Committee discussion any agreed investments will be included in the ICP for 2022-25.

## **14. Policy Report**

Members received a report which provided an update on activity and output from the WHSSC Policy Group during quarter 2 May 2021 – July 2021, and an overview of the WHSSC policies and service specifications that had been published during the current financial year and the rationale for their development.

Members **noted** the report.

## **15. COVID-19 Activity Report for Month 3 2021-2022**

Members received a report highlighting the scale of the decrease in activity delivered for the Welsh population by providers in England, together with the two major supra-regional providers in South Wales.

Members noted the decrease in activity during the peak COVID-19 periods, which informed the level of potential harms to specialised services patients, the loss of financial value from the necessary national block contracting arrangements introduced to provide overall system stability, recovery rates, and access comparisons across HBs.

Members **noted** the report.

## **16. Financial Performance Report - Month 4 2021-22**

Members received the Financial Performance Report for Month 4 which provided the current financial position of WHSSC together with the

outturn forecast for the financial year. The financial position reported at Month 4 for WHSSC was a year-end outturn under spend of £4,804k.

Members **noted** that the under spend predominantly relates to the English SLAs block framework and releasable reserves from 2020-2021 provisions. There is a partial cost pressure offset with the over spend in Independent Patient Funding Requests (IPFR's) and Mental Health that includes high Children and Adolescent Mental Health Services (CAMHS) out of area assessment (OOA) activity and complex Learning Disability (LD) patient placements.

Members **noted** the current financial position and forecast year-end position.

