



**PWYLLGOR CYNLLUNIO POBL A SICRWYDD PERFFORMIAD
PEOPLE PLANNING AND PERFORMANCE ASSURANCE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	27 April 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	A Regional Collaboration for Health (ARCH) Portfolio Update Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Huw Thomas, Director of Finance
SWYDDOG ADRODD: REPORTING OFFICER:	Siôn Charles – Head of ARCH Strategy & Service Planning Sharon Hughes – ARCH Senior Project/Business Manager

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Trafodaeth/For Discussion

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

This report provides an update on the activities of the 'A Regional Collaboration for Health' (ARCH) Portfolio for the period February 2021 to April 2021. It also provides an update on the regional discussions that have taken place between Hywel Dda University Health Board (HDdUHB), Swansea University and Swansea Bay University Health Board (SBUHB).

The People, Planning and Performance Assurance Committee (PPPAC) is asked to note the content of the report for information.

Cefndir / Background

The ARCH Delivery & Leadership Group met in February 2021. Service Transformation, Research Enterprise & Innovation (REI) and ARCH Partnership meetings were undertaken in March 2021. The main topics that were discussed are summarised throughout this report.

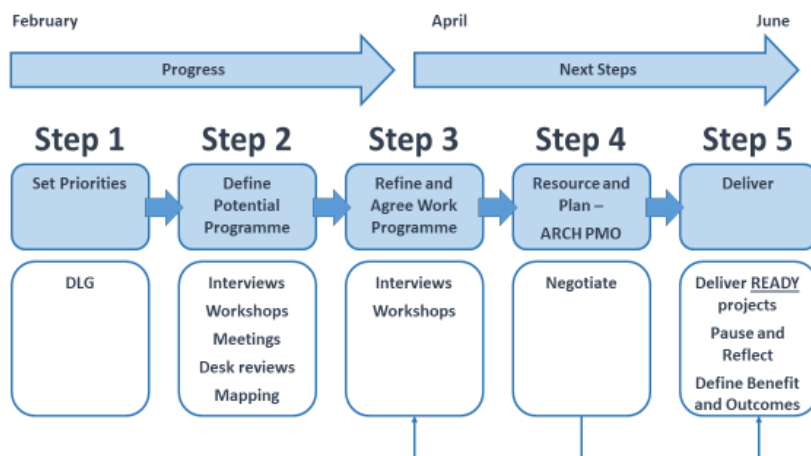
Asesiad / Assessment

ARCH Partnership Board has in March reaffirmed their commitment to the ARCH collaboration and agreed shared strategic priorities from each of the three partners for the next phase of delivery through ARCH. This will make best use of scarce resources, having previously agreed the streamlining and simplifying of ARCH structures and processes. The Partnership Board will meet again in May to discuss and agree key success factors for ARCH.

The next ARCH report to PPPAC will set out the priorities and activities in detail.

Approach

The ARCH PMO have been working through this five step approach to review and map the ARCH work programme and engage with key stakeholders. The next steps will finalise the work programme aligned to the priorities and set success factors, giving ARCH clarity of purpose and a sound foundation for delivery.



Service Transformation

Black, Asian and Minority Ethnic (BAME) – work has progressed to structure the existing/new activities into projects/programme of works. Engaged stakeholders across the three partners e.g. Annmarie Thomas / Kay Myatt / Kamila Hawthorne are working to form a project team and plans with clear workstreams.

Eye Care – Work continues in the sub-speciality Task and Finish (T&F) groups for Glaucoma, Diabetic Retinopathy, Non-Medical workforce and Cataract.

An options appraisal for a regional theatre solution for cataract waiting list backlog is expected May 2021 and the initiation of the Open Eyes digital platform between July and September 2021.

The Eye Care Regional Services Vision document was well received by the ARCH Partnership in March with healthy discussion. A business case for the Glaucoma Service will be developed and presented to the Regional Steering group in June 2021.

Dermatology – The Dermatology Regional Services Vision document was well received by the ARCH Partnership in March 2021.

The regional Plastics/Dermatology Consultant post expected start date remains May 2021.

'Point, Click, Notify' has recommenced and progress made. 3000+ images have been collated and are being transferred to start AI model testing. Following the completion of model testing, clinical validation will be supported by Consultant Dermatologists in SBUHB in order to verify and evaluate the model at the end of April.

A task and finish group to explore developing medical photographers to assist with triaging Dermatology referrals has been established and a pilot scheme is being developed to deliver the model in HDdUHB.

Neurology – The Headache pathway, based on the HDdUHB model, is now well established in Swansea Bay and delivering real change. The approach has been replicated in Epilepsy and again delivered significant improvement.

Developing the Functional Neurological Disorder (FND) Business Case continues with workshops planned through May and June to develop to make a more compelling case.

A Regional FND Awareness/Training event is planned, which will target Primary and Secondary Care clinical teams as well as Executive/Senior Management with a view to driving the case for change.

Epilepsy services is being discussed further within HDdUHB to ensure equitable access to the service. There will be a renewed focus on creating a single regional service for Neurology with meetings planned to discuss with commissioners and deliver real change across the region for patients.

Regional Cancer Centre – The first steering meeting proved fruitful, with discussions indicating a shared vision for the future where aspirations of all parties were well aligned. Representation was reviewed and an action taken to develop clear terms of reference outlining all key stakeholders. Annual plan submissions were discussed with an agreement to share finalised plans, ensuring visibility of respective Health board's goals with regard to Cancer Services. Next steps discussed were the development of an updated Service specification document that seeks to act as a baseline from which a collaborative Regional Transformational Business Case can be developed.

Regional Pathology Service – Welsh Government agreed to support the Strategic Outline Business Case in November 2020. The preferred way forward aims to develop a co-located South West Wales Regional Centre of Excellence Cellular Pathology Laboratory; develop a Regional Diagnostic Immunology Laboratory Facility; and; reconfigure and refurbish local non-regionalised services accommodation to ensure facilities are fit for purpose.

The regionalised service will co-locate with local SBUHB Medical Microbiology services, to achieve integration and service efficiencies. The reconvened Regional Pathology Project Board members (represented by SBUHB, HDdUHB, Public Health Wales (PHW), Swansea University and the National Collaborative) met on the 13th April 2021 to evaluate a list of potential sites along the M4 corridor between Carmarthen and Port Talbot for the new co-located build.

Utilising an independent facilitator, the Board agreed a shortlist of five sites in the Swansea area, including three hospital sites (two at Morriston and one at Singleton Hospital) a third site is adjacent to the Morriston Hospital site.

Project Board will undertake further detailed appraisal of the shortlisted sites within the next 4-6 weeks to determine the preferred location. Following agreement on the preferred location a Supply Chain Partner will be appointed from Welsh Government's procurement framework to undertake design activities to support production of an Outline Business Case. A Project Team and Task & Finish Groups are being established to take forward workforce transformation, service modelling, financial and procurement related activities to support delivery. The indicative completion date for the Outline Business Case is May 2022.

Research, Enterprise and Innovation

Intensive Learning Academies (ILAs) – The Value Based Healthcare ILA is in operation but gaps need to be plugged when talking to industry / support orgs. One of the main priorities across Health Boards with primary care is to further roll out Value Based Healthcare. One of HDdUHB adopt and spread innovation sites is a value based healthcare project and are working with Dr Ffion John on the project following funding won from the Welsh Health Hack.

The Innovation ILA is making good progress developing its Masters, and Executive Education content.

Powys THB and partners are developing a digital leadership ILA which was due to be signed off around easter.

Innovation Leads –

Innovation Leads group have agreed joint working priorities. These are:

Innovation Study – complete the study, launch, and act on recommendations for action.

Procurement – establishing a process and policy for spending public funding on innovation that enables innovation to develop from an the initial challenge or idea through to wide scale adoption. This should include collaboration with the private sector.

Commercial Enterprises – establishing a policy and strategy framework for creating and running enterprises that support innovation in healthcare where income can be realised to support further innovation and income generation for NHS organisations. This includes filling skills and capacity gaps such as IP, contracting, marketing etc.

Adopt and Spread Innovation – a commitment to support a number of innovations to spread across Wales. This would include progressing the bid to the Health Foundation that Lynne facilitated and coordinated.

Intellectual Property – share policies, templates, collaboration agreements and lessons learned from our work. Establish a shared resource to provide IP advice and guidance, contracting services, and support with negotiating contracts.

Developing an Innovation Workforce – people, skills, and competence framework, including the Innovation Intensive Learning Academy

During April the Innovation Leads have focused on developing their collaborative approach to supporting adopting and spreading innovation.

Research Innovation & Improvement Hubs (RIIC) – West Wales RIIC Hub are currently undertaking a staff experience piece which feeds into the health boards covid recovery plans, focusing on people recovery and engaging with frontline workers to understand how they want them to prioritise recovery, rehab and wellbeing moving forward.

Service innovation examples will be collected from a people and service perspective and a decision made on what should be continued. Following the Wales-wide interim mapping reports from Swansea University, findings suggest social care does not have capacity / capability / experience around research and innovation. A provider has been commissioned to co-produce with social care what they want research / innovation to look like and how it will work.

Campuses – Grant Thornton consultant have been commissioned to support creating consolidate the harmonized vision between parters/stakeholders. Key stakeholders have been interviewed in late March/ early April. A workshop is planned for 15th April 2021 to finalise and draw together this work.

Branding and communications development is about to commence and two Branding Workshops scheduled for April to progress this work. ARCH has part-funded a project manager to progress/complete work required to fill gaps in the outline business case before taking it back to City Deal. A Project Board meets monthly, and a Delivery Team meets weekly. ARCH is represented at both meetings. Terms of reference for the Project Board and Delivery Team are agreed.

Accelerate – The team are resubmitting their business case over next few weeks and are aligning projects and communications. Accelerate is now in it's final 12 months and the remit for projects is short-term but sustainability options are being developed for Accelerate 2.0.

Llanelli Wellbeing Village (Pentre-Awel) – The City Deal Business Case is now approved, providing £40M for the project. Preparing to go out to procurement to acquire a contractor to develop the main zone. Undertaking significant work around community benefits and quality questions to assess contractors against. They intend to hit the market with a 60:40 quality/price split. MOU's are signed with 3 Universities / 3 Colleges to provide integrated education, skills and training. Significant innovations around social care and digital infrastructure are ongoing.

AgorIP – Mid-term evaluations have taken place, focussing on longer-term delivery and sustainability strategies. A new strategic plan will be created going forward in collaboration with ARCH.

Argymhelliad / Recommendation

The People, Planning & Performance Assurance Committee is asked to note the HDdUHB and SBUHB regional discussions and the ARCH Portfolio Summary Update.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.6 Provide assurance to the Board that, wherever possible, University Health Board plans are aligned with partnership plans developed with Local Authorities, Universities, Collaborative, Alliances and other key partners, such as the Transformation Group who form part of A Regional Collaboration for Health (ARCH).
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	See Risk section below.
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	2.1 Managing Risk and Promoting Health and Safety 3.3 Quality Improvement, Research and Innovation 7. Staff and Resources 7.1 Workforce
Amcanion Strategol y BIP: UHB Strategic Objectives:	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners. 5. Deliver, as a minimum requirement, outcome and delivery framework work targets and specifically eliminate the need for unnecessary travel & waiting times, as well as return the organisation to a sound financial footing over the lifetime of this plan
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report	8. Transform our communities through collaboration with people, communities and partners

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Each element of ARCH is being developed against a series of evidence bases.
Rhestr Termau: Glossary of Terms:	Included within the body of the report.
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Cynllunio Pobl a Sicrwydd Perfformiad: Parties / Committees consulted prior to People Planning and Performance Assurance Committee:	All items have been discussed within the ARCH programme structure.

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	ARCH is funded by the three organisations which form the partnership.
Ansawdd / Gofal Claf: Quality / Patient Care:	<p>The regional models of service will place the patient at its centre and works together with patients and citizens to co-produce healthier people and communities and deliver better outcomes that matter to people. ARCH partners will work with our population to develop local values, focused on the health of our communities. Working with the wider public, and third sectors, the Health Boards will implement new regional service models based on the principle of care being provided closer to home. Expanding access through the development of new infrastructure and redeveloping and redefining the use of existing infrastructure will radically transform patient pathways across the region.</p> <p>ARCH will provide a significant contribution to:</p> <ol style="list-style-type: none"> 1. Addressing the chronic staff shortages for certain specialities/services and in doing so improve quality of care through meeting the correct standards of staffing and providing more consistent staffing. 2. Improving the efficiency with which services are delivered. 3. Increasing non NHS income through expanding research, clinical trials and other collaborative partnerships with industry. <p>Over time, reduce (or at least stabilise) the burden from chronic disease through prevention and public engagement with their health.</p>
Gweithlu: Workforce:	<p>ARCH will provide a significant contribution to addressing the chronic staff shortages identified across the Health Board; this will be achieved through:</p> <ol style="list-style-type: none"> i. improving training numbers and then retention

	<p>ii. where appropriate moving to regional delivery of certain service models and in doing so reducing the premium rate variable pay costs.</p>
<p>Risg: Risk:</p>	<p>The ARCH Board maintains a wide ranging risk register that is reviewed at every ARCH Board meeting and reviewed by the Delivery and Leadership Group of the ARCH Partnership (an Executive Level meeting at which all three partners are represented).</p>
<p>Cyfreithiol: Legal:</p>	<p>Not Applicable</p>
<p>Enw Da: Reputational:</p>	<p>Not Applicable</p>
<p>Gyfrinachedd: Privacy:</p>	<p>Not Applicable</p>
<p>Cydraddoldeb: Equality:</p>	<p>Equality Impact Assessments as appropriate will be undertaken on each of the projects within the PDP as they are developed as an integral part of each business case</p>