



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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	29 October 2020
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	A Regional Collaboration for Health (ARCH) Portfolio Update Report
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Huw Thomas, Director of Finance
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Steve Evans – ARCH Service Planning Manager Sharon Hughes – ARCH Senior Project/Business Manager

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Gwybodaeth/For Information

**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 August to October 2020. It also provides an update on the regional discussions that have taken place between Hywel Dda University Health Board (HDdUHB) and Swansea Bay University Health Board (SBUHB) in September 2020.

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

**Cefndir / Background**

During the period, there has been a concerted effort to reinstate the ARCH regional meetings and groups. The ARCH Partnership and ARCH Service Transformation Group both met during September 2020, with the Delivery & Leadership Group meeting scheduled for 29<sup>th</sup> October 2020. The main topics that were discussed are summarised throughout this report.

**Asesiad / Assessment**

**ARCH Partnership**

Part 1 of the meeting involves the Health Board (HB) Chairs, Chief Executives and Vice Chair of Swansea University (SU), with part 2 involving the Health Board Executive Teams only.

- **Collaborative Working** – The Partnership will ask Executive leads in Health Boards to identify, in a tripartite way, three to five key collaborative partnership priorities that organisations can be held accountable for delivering.
- **Digital/Lightfoot** – It was acknowledged that both Health Boards had met with Lightfoot Solutions with regards to modelling capabilities and therefore recognised there was value in working collaboratively in this area.
- **Black, Asian, Minority Ethnic (BAME)** – A tripartite meeting is scheduled for the end of November 2020 to examine approaches around BAME and identify best practices utilising the experiences of HDdUHB and SU.
- **ARCH Service Transformation** – This is described in greater detail below.

## **ARCH**

- **Eye Care** – The Regional Eye Care Steering Group has resumed with glaucoma services identified as the priority initially with an immediate need to stabilise services and an agreement to joint consultant appointments with a clinical lead to support the service in HDdUHB. There is also an agreement for joint implementation of Open Eyes. Further work will be undertaken across all areas through Digitisation and Value Based Healthcare approach.
- **Dermatology** – Regional project group meetings have resumed and a review of priorities and the implementation plan commenced to establish the current position. A Clinical Lead role will be required to be appointed following retirement. Recruitment of a joint consultant post between HBs will resume. The sub project, funded by the Wales Cancer Network Innovation bid, to utilise artificial intelligence and mobile phone pilot is expected to continue in Quarter 4.
- **Endoscopy** - Endoscopy was halted to focus on national endoscopy priorities during COVID-19, however it has now been agreed for this work to continue with a focus on wider planned care. A regional meeting is planned for December 2020 to discuss options for both Endoscopy and Elective Care.
- **Orthopaedics** – SBUHB are investigating plans to potentially utilise Neath Port Talbot Hospital as an elective orthopaedic unit, however further enquiries are to be undertaken to ascertain whether this is feasible. It is noted that HDdUHB's plans for elective services at Prince Phillip Hospital are underway and it was agreed by the leads from both Health Boards to liaise with regards to the best use of resources.
- **Regional Cancer Centre** – The Regional Cancer Centre is in the process of refreshing the business case and a formal group has been established to prioritise some key areas of focus over the next year.
- **Neurology** - Work has continued on the development of the Regional Functional Neurological Disorder (FND) Business Case with a greater focus on case studies and building upon the existing evidence base. The Clinical Lead has been co-opted on to a UK National FND Group as the representative for Wales. The Regional Group will monitor progress against the implementation plan and reassess timescales where necessary.
- **Pathology** – Following the submission of the Strategic Outline Case for a Regional Pathology Service, there will be a co-ordinated approach to the Infrastructure Investment Board (IIB) invite in October 2020. A focussed regional group, which will include HDdUHB, SBUHB and Public Health Wales (PHW), will attend to share key messages and priorities.
- **Research, Enterprise and Innovation (RE&I)**
  - The development of the **Campuses** business case continues, however has been delayed due to COVID-19 priorities. Discussions are ongoing concerning commercial and loan arrangements, with engagement with the private sector to leverage additional funds. Effective collaboration with all partners is continuing, with a communication document being devised to describe the project.
  - The **ARCH Innovation Forum** took place in September 2020 and was established to provide guidance, advice, support, and signposting from a multi-disciplinary stakeholder group to innovation projects from across the region. There were a total 22 applications received from industry and health, four of which were prioritised at the first forum. Future forums are expected to be held on a monthly basis.

- The **Pentre-Awel** development is currently being endorsed by the City Deal, and Welsh Government (WG) are examining the business case. Partners are engaged and agreements are being established with universities across the region.
- **Accelerate** is undergoing a re-profile and readjustment of budgets and is anticipated to be complete by the end of October 2020, and through the **Healthcare Technology Centre (HTC)** is looking towards embedding some of the work carried out during COVID-19 within the university and health boards.
- The **NHS Wales Innovation Leads** Group continues to meet regularly to align the Intellectual Property Policy across Wales, commercialisation and shaping the direction of innovation in NHS Wales.
- Following the approval of the funding extension until 2023 for pan Wales activity, **AgorIP** are launching an internal call to NHS Wales members who have a novel innovation needing commercial support. This is seen as a considerable opportunity to bring new technologies and ideas to the marketplace, and to link with industry partners and investors.
- Two **Intensive Learning Academies (ILAs)** have been proposed locally through Swansea University; Value Based Healthcare and Innovation Scale and Spread. Outline Business Cases (OBCs) have been developed and submitted to WG, with a final decision expected imminently.

#### Argymhelliad / Recommendation

The People, Planning & Performance Assurance Committee (PPAC) is asked to note the SBUHB and HDdUHB Regional meeting and the ARCH Portfolio Summary Update.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	4.6 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 2019-20	8. Transform our communities through collaboration with people, communities and partners

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Each element of ARCH is being developed against a series of evidence bases.
Rhestr Termiau: 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.

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	ARCH is funded by the three organisations which form the partnership.
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	<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"> <li>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.</li> <li>2. Improving the efficiency with which services are delivered.</li> <li>3. Increasing non NHS income through expanding research, clinical trials and other collaborative partnerships with industry.</li> </ol>

	Over time, reduce (or at least stabilise) the burden from chronic disease through prevention and public engagement with their health.
<b>Gweithlu: Workforce:</b>	ARCH will provide a significant contribution to addressing the chronic staff shortages identified across the Heath Board; this will be achieved through: <ul style="list-style-type: none"> <li>i. improving training numbers and then retention</li> <li>ii. where appropriate moving to regional delivery of certain service models</li> </ul> and in doing so reducing the premium rate variable pay costs.
<b>Risg: Risk:</b>	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).
<b>Cyfreithiol: Legal:</b>	Not Applicable
<b>Enw Da: Reputational:</b>	Not Applicable
<b>Gyfrinachedd: Privacy:</b>	Not Applicable
<b>Cydraddoldeb: Equality:</b>	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