

TABLE OF ACTIONS FROM SUSTAINABLE RESOURCES COMMITTEE (SRC) MEETING HELD ON 22nd AUGUST 2022

MINUTE REFERENCE	ACTION	LEAD	TIMESCALE	PROGRESS
SRC(22)92	To circulate the Financial Recovery slide pack to Members following the meeting	AS	22.08.22	Action complete
SRC(22)97	REGIONAL INTEGRATION FUND (RIF) PLANS To provide an update on queries raised in relation to the Investment Proposal document at the next Committee meeting	EL/KN	06.09.22	Action complete; Update attached at Appendix 1/1a
	 In terms of the match funding aspect of the RIF, to provide a breakdown of the £18.7m allocation between the Health Board and Local Authority to the next Committee meeting. 	AS	06.09.22	Forward planned for inclusion on the agenda for the November 2022 Committee meeting
SRC(22)98	HEALTHCARE CONTRACTING, COMMISSIONING AND OUTSOURCING UPDATE • To present a report on the development of the Strategic Programme Case (SPC) by the South West Wales Cancer Centre (SWWCC) Regional Strategic Programme to the Strategic Development and Operational Delivery Committee.	SA	06.09.22	The SWWCC Regional Strategic Programme Group is preparing a joint report for the respective Executive Teams. Therefore, subject to Executive approval, the SPC will then be presented to the Strategic Development and Organisational and Operational Delivery Committee

MINUTE REFERENCE	ACTION	LEAD	TIMESCALE	PROGRESS
	 To feedback to NHS Wales Shared Services Partnership the risk of having limited ISO27001 accredited providers under the modified Framework Agreement for the Provision of Insourcing/Outsourcing Clinical, Surgical and Diagnostic Procedures and provide an update within the Healthcare Contracting, Commissioning and Outsourcing Update report to the November 2022 Committee meeting. 	SA	06.09.22	Update attached at Appendix 2
SRC(22)101	To review and clarify the roles and responsibilities of the Directorate Budget Holders and Finance Business Partners.	HT/JW	06.09.22	It has been agreed that all financial risks will be owned by the Directorate budget holders on Datix. The Finance team has updated all existing risks to reflect the financial circumstances as at September 2022, with risks scheduled to be transferred to services in October 2022. Communication is being sent by the Assurance and Risk Team to Directorates to confirm the process going forward.
SRC(22)104	INFORMATION GOVERNANCE SUB-COMMITTEE UPDATE REPORT • To review the further benefits of the clinical coding data	нт	06.09.22	Action to be addressed at the next Information Governance Sub- Committee meeting

MINUTE REFERENCE	ACTION	LEAD	TIMESCALE	PROGRESS
SRC(22)105	DECARBONISATION TASK & FINISH GROUP UPDATE REPORT To circulate the current Decarbonisation Task and Finish Group Terms of Reference to Committee Members prior to submission for approval at the November 2022 Committee meeting	LD	06.09.22	Forward planned for inclusion on the agenda for the November 2022 Committee meeting
SRC(22)108	To complete the review of those Financial Procedures that have expired/due to expire ahead of the November 2022 Committee meeting	RD	06.09.22	Forward planned for inclusion on the agenda for the November 2022 Committee meeting
SRC(22)77 (Action from June 2022 SRC)	 INFORMATION GOVERNANCE SUB-COMMITTEE UPDATE REPORT To provide an update on the current position regarding those medical records that have not been scanned, due to workload and the COVID-19 pandemic, and whether these records have been transferred to Digital Health and Care Wales (DHCW) for scanning. 	НТ	04.08.22	Action requested to be amended to state that the records are to be sent internally to the Access to Health Records team for appropriate storage and scanning. The responsible manager is currently on leave until 22 nd August 2022, after which a further update will be provided. Update attached at Appendix 3

WW- Winston Weir

HT – Huw Thomas

LD – Lee Davies

SA – Shaun Ayres AS – Andrew Spratt RD – Rhian Davies

Appendix 1

SRC(22)97 To provide an update on queries raised in relation to the Investment Proposal document at the next Committee meeting

Providing assurance on service delivery in response to care and support needs of autistic people following diagnosis. Please see extract, attached at Appendix 1a, from the 2022 Population Assessment recently approved by HDdUHB Integrated Autism Service lead Angela Lodwick, which outlines the response to care and support needs.

Outlining baseline, target and current outcomes for the Health Check Champions project Baseline:1,483 People with mild or moderate LD (from 2017 Population Assessment)
Annual target number: 75% of baseline divided by 5 (assuming 5 year proposal) = 222; Quality:95% reporting service good or excellent

Actual numbers reported: 47 Health check conversations reported in 21-22; no quality measures submitted.

Providing assurance on sustainability for the Dream Team

There are a number of avenues for sustainability being developed by March 2025 including:

- Income generation (pre-Covid-19, the Dream Team provided charged for consultancy services and training)
- Input from 3rd sector partners
- Mainstreaming investment from statutory partners.

Providing assurance on the approach and current status of Carers Needs Assessments and those services delivered support the identified needs of unpaid carers.

Ceredigion: All requests for carers assessments are received through the Integrated Triage and assessment team and are immediately triaged. There are currently 19 carers assessments awaiting allocation in Ceredigion, these are regularly reviewed and prioritised according to need. We both provide and commission services to Carers that are based on a "what matters" conversation, to identify an individual's needs with a support package built with carer at the centre to help meet those identified needs. The Information, Advice and Assistance service is provided in house and our commissioned service is monitored & reviewed regularly for quality of service provided to Carers.

Pembrokeshire: The Carers commissioned service have reported support for 312 carers in Q1 of 2022, 14 referrals were then made to the Local Authority for a Carers needs assessment. 2 Carers Officers have recently been appointed, one in Withybush and one in South Pembrokeshire Hospital, they support discharge communication and planning. The Carers Needs Assessment trigger is incorporated into the new Electronic Nursing Documentation within the general wards across Acute and Community Hospitals, this highlights the need for a Carers Needs Assessment. Fields have also been added to SharePoint system so that 'every contact counts' in highlighting the need of an assessment to the staff member and so that the number of referrals can be gathered.

Appendix 1a Population Group: Autism

Overview and key messages

Autism is a term used to describe people with a group of complex neuro developmental symptoms, of variable severity which affects how people communicate and interact with the world. Autism is generally described as a spectrum and can cover a wide range of behaviours and needs. Autism was covered under the Learning Disability chapter in the 2017 Population Assessment. However, in response to the introduction of the <u>Autism Code of Practice</u> in 2021, a separate Autism chapter is being developed.

The term 'autistic people' rather than 'people with autism', reflects the language preferences expressed by autistic people. The term 'people' refers to children, young people and adults. Estimates of the prevalence of autism spectrum disorders suggest rates of around 1% in the general population. This would suggest there are about 4000 autistic people living in West Wales. However, there is much debate and the suggestion that not all individuals are identified (Brugha et al., 2011, 2016; Chiarotti & Venerosi, 2020;

New services for adult diagnosis have been set up across Wales at a time of rising awareness of the spectrum of autism experiences; however, until recently no studies have examined adult autism prevalence in Wales

Increased rates of diagnosis and more prevalence of autism will require more specialist support in the community.

Care and support needs

Since the 2017 Population Needs Assessment the needs of Autistic people have been recognised as a separate requirement to Learning Disabilities. This recognition of the needs of Autistic people, be they children or adults, is also reflected within the Welsh Government's Autism Code of Practice. The Code of Practice sets out what autistic people, their parents and carers can expect from public services in Wales and how Welsh Government intend to adapt the way we organise society to be more aware and more attuned to neurodiversity.

The Code of Practice recognises that whilst some autistic people may have a co-morbid learning disability or mental illness, many will not, yet will still at times require specific advice, help and support.

Current care and support provision

In March 2016, as part of the refreshed Autistic Spectrum Disorder Strategic Action Plan the Welsh Government announced that it would be funding a new national Integrated Autism Service (IAS), information on which can be found here: https://autismwales.org/en/integrated-autism-service/
The service was developed across Wales following consultation with autistic people, carers and professionals which highlighted the lack of support available for autistic people who did not meet the criteria for mental health and learning disability services.

The West Wales Integrated Autism Service (WWIAS) established in 2019 and is a joint service delivered by Hywel Dda University Health Board in partnership with the local authorities of West Wales. It offers diagnostic assessment for <u>adults</u> who do not have a significant learning disability or mental health problem and a range of support for autistic people, their families, including unpaid carers and advice for professionals. Further information can be found here: https://fis.carmarthenshire.gov.wales/disability-autism/autism/

Gaps and areas for improvement

To provide an assessment of the current services to determine the gaps and areas for improvement, engagements have been completed with autistic people, parents, carers and professionals. In West Wales a regional strategic group of all key partners meets to oversee the implementation of services for Autistic people, including the Integrated Autism Service (IAS). This strategic group is chaired by the Head of Service within Hywel Dda University Health Board with the responsibility for Autism.

In each local authority there is an 'Autism Lead' a named contact responsible for overseeing and coordinating the activity in their area. This includes the coordination of local steering and stakeholder groups (with autistic people and their families) as well as training and awareness raising for staff. Our engagement activities have been limited during the COVID 19 pandemic. However, our agreed approach for the future is set out below.

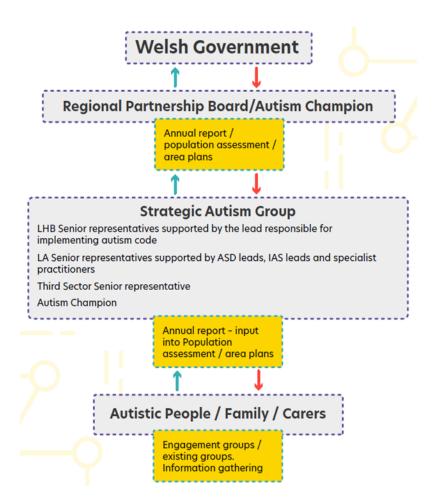


Figure 19: Diagram illustrating the role of the Autism Champion in collating and sharing information to inform the Regional Partnership Board (Welsh Government, 2021)

Engagement through the strategic groups has allowed us to reflect what matters to autistic people in West Wales including the impact of the COVID-19 Pandemic on their wellbeing and care and support needs. In addition, a virtual meeting was held with 10 parents of children and young people with complex needs, including autism.

Impact of the COVID-19 pandemic

The pandemic has impacted on the care and support available for autistic people as many support services were paused. In addition, the uncertainty and frequent changes to routines and rules will, in some cases have had a significant impact upon people's mental-health and wellbeing. This has placed increased pressure on family members and carers.

For Autistic People, the resumption of and reintegration to activities such as education following prolonged periods of lock down has also presented significant challenges.

Appendix 2

SRC(22)98To feedback to NHS Wales Shared Services Partnership the risk of having limited ISO27001 accredited providers under the modified Framework Agreement for the Provision of Insourcing/Outsourcing Clinical, Surgical and Diagnostic Procedures and provide an update within the Healthcare Contracting, Commissioning and Outsourcing Update report to the November 2022 Committee meeting.

The ISO27001 accreditation is not a mandatory requirement; it is for information only as it was deemed a "nice to have" alongside the Cyber Essentials Plus (CE+) accreditation that is needed for all outsourcing providers. At one of the earlier project team meetings, it was queried if providers could gain access to NHS systems to update patients' files; the only way of allowing providers to do this securely, would be if they have CE+ and the ISO 27001 accreditation. The understanding is that the ISO accreditation is quite an ask so the decision was made to have this as a non-essential requirement.

The initial understanding from the market so far, is that a number of the providers already have ISO 27001 however there are some difficulties in obtaining re-accreditation of Cyber Essentials as the parameters have increased.

As part of the tender, the stipulation is that providers must obtain (and maintain) CE+ by the commencement of the framework agreement (1st April 2023). However, based on feedback received to date, bidders have advised that whilst they are actively working towards achieving the accreditation, and can provide evidence of this, they will struggle to have this in place by the 1st of April 2023.

Consequently, the project team have engaged in a number of conversations with colleagues in NWSSP Informatics in order to establish a pragmatic way forward to ensure that the necessary assurances are sought in relation to Cyber Security, without alienating the market. As such the following proposal has been put forward.

Procurement to advise all bidders that the requirement to attain CE/CE+ will remain as the 1st April 2023. Any bidders that have not attained CE/CE+ at the point of award onto the FA but that have demonstrated that they are working towards can be awarded onto the Framework, providing all other requirements are met, under a condition precedent placed within the award requiring the provider to attain the necessary level of cyber security before receiving an invitation to submit a bid/receive a direct award to call off services from the framework agreement. Alternatively, at point of call off, the Health Board can choose to include the bidder/s in the call for competition (mini comp / direct award), however would be required to seek additional assurances in relation to Cyber in the absence of the relevant accreditation.

All Health Boards are required to confirm that they are happy to proceed with this approach. Advice has been sought from the Hywel Dda Cyber Security team.

Appendix 3

SRC(22)77 To provide an update on the current position regarding those medical records that have not been scanned, due to workload and the COVID-19 pandemic, and whether these records have been transferred to Digital Health and Care Wales (DHCW) for scanning.

Background

The implementation and adoption of the Electronic Document Management Systems has been challenging on a number of fronts. Firstly, the scanning providers have not been able to provide a set of test scans that can be ingested into the system in the correct format. This has, of course, been further complicated because we need to do this three times (with three different suppliers). We have had a couple of test runs, which unfortunately failed whilst being transferred and failing along the way is perfectly normal given the complexity we're talking about. However, this has recently been addressed.

Secondly, there was a requirement from Digital Health and Care Wales to provide access to the "test" environment, and access to the cloud storage. As with many digital projects the complexities of ensuring that the data is secure and available has added to the challenges.

Update:

As at 25th October 2022, 14 test files have been successfully ingested into the "test" system, and clinical colleagues are now reviewing for quality assurance. Sign off will begin the next 2 weeks, and then we will be moving the test environment into Live. The next step will be to begin the ingestion of all the files that have been sent out to be scanned.

Timescales:

- Movement to Live Mid November 2022
- System available for ingestion End November 2022
- Quality Assurance checks Dec 2022 Jan 2023
- Ingestion of files Dec 2022 June 2023