



## CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	25 July 2024
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Joint Committees and Collaboratives Update Report
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Professor Philip Kloer, Interim Chief Executive
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Clare Moorcroft, Committee Services Officer

### 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

The purpose of this report is to provide an update to the Board in respect of recent Joint Committee and Collaborative meetings to include the following:

- Joint Commissioning Committee (JCC)
- NHS Wales Shared Services Partnership (NWSSP) Committee
- Mid Wales Joint Committee for Health and Care (MWJC)

##### Cefndir / Background

The Hywel Dda University Health Board (HDdUHB) has approved Standing Orders in line with Welsh Government guidance, in relation to the establishment of the Joint Commissioning Committee (JCC) and NHS Wales Shared Services Partnership (NWSSP) Committee. In line with its Standing Orders, these have been established as Joint Committees of HDdUHB, the activities of which require reporting to the Board.

The confirmed and unconfirmed minutes, agendas and additional reports from JCC and NWSSP Committee meetings are available from each Committee's websites via the following links:

[Joint Commissioning Committee Website](#)

[NHS Wales Shared Services Partnership Website](#)

The Mid Wales Healthcare Collaborative was established in March 2015 following a study of healthcare in Mid Wales commissioned by Welsh Government and undertaken by the Welsh Institute for Health and Social Care (WIHSC) (*ref: Mid Wales Healthcare Study, Report for Welsh Government, WIHSC – University of South Wales, September 2014*). In March 2018, the Mid Wales Healthcare Collaborative transitioned to the [Mid Wales Joint Committee for Health and Care](#) whose role will have a strengthened approach to planning and delivery of health and care services across Mid Wales and will support organisations in embedding collaborative working within their planning and implementation arrangements.

## Asesiad / Assessment

The following Joint Committee and Collaborative updates are attached for the Board's consideration:

### **Joint Commissioning Committee (JCC)**

- Briefing notes from the JCC meeting held on 21 May 2024, setting out the key areas of discussion, plus related letter, circulated following the meeting.

### **NHS Wales Shared Services Partnership (NWSSP) Committee**

- Summary of key matters considered by NWSSP, and any related decisions made at its meeting held on 16 May 2024.

There are no further Joint Committee or Collaborative updates to include for the following reasons:

### **Mid Wales Joint Committee for Health and Care (MWJC)**

- The MWJC will report to the November 2024 Board meeting.

## Argymhelliad / Recommendation

The Board is asked to **RECEIVE** the minutes and updates in respect of recent JCC and NWSSP meetings.

### **Amcanion: (rhaid cwblhau)**

#### **Objectives: (must be completed)**

Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Parthau Ansawdd: Domains of Quality <a href="#">Quality and Engagement Act (sharepoint.com)</a>	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: <a href="#">Quality and Engagement Act (sharepoint.com)</a>	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a>	8. Transform our communities through collaboration with people, communities and partners

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	<a href="#">Link to JCC Website</a> <a href="#">Link to NWSSP Website</a> <a href="#">Link to MWJC Website</a>
Rhestr Termiau: Glossary of Terms:	Included within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Joint Commissioning Committee NHS Wales Shared Services Partnership Committee Mid Wales Joint Committee for Health and Care

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	Explicit within the individual Joint Committee and Collaborative reports where appropriate.
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	Not Applicable
<b>Gweithlu: Workforce:</b>	Not Applicable
<b>Risg: Risk:</b>	The Board has approved Standing Orders in relation to the establishment of the JCC and NWSSP Joint Committees, and Terms of Reference for the MWJC.
<b>Cyfreithiol: Legal:</b>	In line with its Standing Orders, the Health Board has established JCC and NWSSP Joint Committees, the activities of which require reporting to the Board.
<b>Enw Da: Reputational:</b>	Not Applicable
<b>Gyfrinachedd: Privacy:</b>	Not Applicable
<b>Cydraddoldeb: Equality:</b>	Not Applicable

## JOINT COMMISSIONING COMMITTEE (JCC) MEETING BRIEFING – 21 MAY 2024

The Joint Commissioning Committee (JCC) held its latest public meeting on 21 May 2024. This briefing sets out the key areas of consideration and aims to ensure everyone is kept up to date with what is happening within the JCC.

The papers for the meeting can be accessed using the link below:  
[Meeting Dates and Papers - NHS Wales Joint Commissioning Committee.](#)

### 1. Minutes of Previous Meetings

The minutes of the JCC meeting held on the 23 April 2024 were **approved** as a true and accurate record of the meeting, subject to a minor amendment to the list of attendees.

### 2. Action log and matters arising

Members **noted** the progress on the actions outlined on the action log.

### 3. Chairs Report

Members received the Chair's Report and **noted**:

- **JCC Induction Programme** – introductory meetings had been held with key personnel and partners, including Lay Members, JCC Directors, HB Chairs and CEOs, and a local induction session had commenced in tandem with the Welsh Government (WG) NHS Wales Induction Programme for Independent Members (IMs) taking place on 23 April, 4 June and 11 June 2024.
- **Appointment of Lay Members** - In order to establish the new JCC the Welsh Government Public Appointments Unit undertook a public appointments recruitment process to appoint a new Chair and 3 independent lay members in readiness for 1 April 2024. Now that the JCC had been established and we are into the transition process it has been agreed to proceed with recruiting the final two lay members in accordance with the National Health Service Joint Commissioning Committee (Wales) Regulations 2024 and the JCC Standing Orders and Welsh Government has commenced this process. It was agreed that Dr Paul Worthington was assigned as the interim Audit and Finance led for the CTMUHB Audit and Risk Committee (ARC) for hosted bodies; and that Susan Elsmore was assigned to the role of Chair of the Quality and Patient Safety Committee (QPSC) for the JCC for an interim period until the full complement of 5 lay members were appointed; and
- **Key Meetings attended by the Chair.**

Members **noted** the report.

#### **4. Appointment of Vice Chair**

Members received a report proposing that a Vice Chair is appointed to the Joint Commissioning Committee (JCC) from the Lay Members to ensure business continuity should the Chair be absent due to leave or for other reasons. It was agreed that Nia Roberts, Lay Member, be appointed to the role of Vice Chair of the JCC for 2 years until 30 April 2026, in accordance with section 6.1.4 the JCC Standing Orders (SO's). It was noted that the role does not attract additional remuneration.

#### **5. Interim Chief Commissioners Report**

Members received the interim Chief Commissioners Report and **noted** the following updates:

- **Deep Brain Stimulation (DBS) Service** - DBS services for people in South Wales with Parkinson's disease and movement disorders have been provided by the North Bristol NHS Trust (NBNHST). However, the JCC (previously WHSSC) was made aware of concerns relating to these services, particularly relating to communication regarding post-surgery care. Following several discussions with NBNHST, these were unable to be brought to a timely resolution. As a result, WHSSC needed to identify a temporary solution to ensure new patients from South Wales had access to high quality DBS services moving forward. Within this context the JCC (previously WHSSC) determined an urgent temporary service change was deemed necessary. This was discussed with Llais Wales who supported this decision. A 'designated provider process' was undertaken and an additional service provider had been designated (St Georges University Hospitals NHS Foundation Trust). To minimise disruption and maintain continuity for those patients who were already in the pathway or who had undergone DBS in NBNHST, it had been agreed they would continue to receive follow-up care as planned. The report also confirmed that commissioning discussions regarding the re-establishment of access to the NBNHST.
- **JCC Integrated Medium Term Plan (IMTP)** - The Interim Chief Commissioner outlined proposals for the development of the 2025/2026 JCC Integrated Medium Term Plan (IMTP) that recognises that 2024/2025 is a transition year as the JCC becomes fully established. It is proposed that the plan is developed with an overarching corporate and aligned strategic intent section, and single financial plan, with three implementation plans ('chapters') for:
  - Ambulance Commissioning,
  - Specialised Services Commissioning; and
  - Mental Health and Vulnerable Groups Commissioning (and NCCU)

With the intention that there will be further integration from 2026/2027 onwards. Work is being undertaken with the NHS Wales Directors of Planning peer group to identify any lessons learned from the process for this years plans, and a Finance Working Group is being established by the JCC Director of Finance and Information. A more detailed report on the development of the JCC's IMTP will be presented at the JCC on 16 July 2024.

- **Non-Emergency Patient Transport Service (NEPTS) workshop** - In December 2023, EASC endorsed the development of a new future vision for Non-Emergency Patient Transport Service (NEPTS), following the formal closure of the 2016 NEPTS Business Case. On 20 April 2024, the JCC Team held a NEPTS Future Vision Event. This event was the first phase in working in collaboration with NHS Wales organisations and external partners, to shape a new vision for the NEPTS in Wales. The work will be brought into the JCC for consideration at key decision points and key milestones.
- **111 Update** - responsibility for the commissioning of 111 call handling and clinical advice transferred to the JCC on 1st April 2024. The transfer went smoothly and there remains close liaison with the former 111 team now part of the urgent and emergency care 6 goal support team in the NHS Executive. The implementation of the new Call Answering System (CAS) in the last 10 days went well and service continuity was maintained, although some temporary dips in performance have been noted. The new CAS will offer opportunities to enhance existing services and members will be kept up to date with progress,
- **Adult Specialised Rehabilitation Services Commissioning Strategy** - The JCC is responsible for commissioning Specialised Rehabilitation Services for neurological conditions on behalf of the seven Health Boards. Services are delivered by tertiary centres across NHS sites in Wales and England. The commissioning strategy for adult specialised rehabilitation services will set out the JCC overall vision and priorities for the next five years to improve equitable access to high quality specialised rehabilitation services for the adult population of Wales. The draft strategy was considered by the WHSSC Management Group in February 2024 and was supported for consideration by the WHSSC Joint Committee in March 2024, however this was delayed due to the transition to the new JCC. The draft strategy is currently being finalised and will be brought to the JCC later in the year and will be issued for stakeholder stakeholder feedback. The final strategy will be brought to the JCC in the final quarter for approval to be reflected in the 2025/2026 IMTP; and
- **NHS Wales Joint Commissioning Committee establishment** - The programme of work to establish the new NHS Wales JCC came to fruition on 1 April 2024. The final WG Oversight Board

meeting was held on 30 April 2024 to complete the programme. JCC members received the transitional plan for Quarter 1 2024-2025 at its meeting on 9 April 2024. As recommended in the Q1 transition plan, a Transition/Transformation Director is being appointed to work with the Chair, Chief Commissioner, JCC and JCC directors to support the development of the JCC Operating Model which will bring the governance framework into operation and ensure delivery of the commissioning plans for 2024/2025. Assurance reports will be reported to the JCC as appropriate.

Members **noted** the report.

## **6. Emergency Medical Retrieval and Transfer Service (EMRTS Service Review Update on Implementation Plan**

Members received a report providing an update on the Emergency Medical Retrieval and Transfer Service (EMRTS) Service Review.

Members noted that the JCC at its meeting on 23 April 2024, agreed to support the recommendations set out in the EMRT Service Review report, and had requested that additional detail on the implementation plan for the bespoke road-based response service be brought back to the May meeting outlining key milestones.

Members noted that the Wales Air Ambulance Charity Trust (WAACT) had welcomed the decision of the Committee to accept the recommendations of the Review. As a result of the decision, the Charity had begun active engagement with their stakeholders on the implementation of the recommendations, and continued to monitor the public and stakeholder reaction to the decision and the impact on their income and funding position and will provide regular updates on any emerging risks to the Charity's operation to the Committee.

Members noted that as a result of the decision the Charity and its staff had been subject to difficult and inappropriate comments and behaviours and that the Charity were providing additional support to its staff in response to this.

Members noted that the EMRTS leadership team had welcomed the certainty the decision brought for them and their operational teams. The leadership team were focused on the development of the operational implementation plan and supporting its staff across Wales through the changes required as part of the implementation.

Members noted that initial discussions had been held with the Chief Executive of the Welsh Ambulance Services University NHS Trust (WAST) and the Clinical Director of EMRTS on the development of a bespoke road-based service and they had confirmed their organisational support for the development and implementation of such a service. A task and finish group will lead a delivery plan on the development of the commissioning

requirements for the bespoke road-based model and will provide update briefings and recommendations for approval to the JCC following each meeting against the milestones. In addition, routine updates on progress against the project plan and communication and engagement plan will also be provided. The JCC will receive the outcome of this work at its October meeting.

Members (1) **Discussed** and **approved** the timeline for the delivery of the commissioning approach for the bespoke road based model, (2) **Discussed** and **approved** the proposed membership and chair of the Task and Finish Group, (3) **Discussed** and **noted** the public and stakeholder position in relation to the decision of the JCC, (4) **Discussed** and **noted** the WAACT position in relation to the decision of the JCC; and (5) **Discussed** and **noted** the EMRTS Leadership team position in relation to the decision of the JCC.

## **7. Neonatal Transformation Programme Phase 2**

Members received a report providing an update on the agreed Neonatal Transformation Programme Phase 2 review to undertake strategic planning on the service model and designation of cots to ensure an efficient and sustainable model is in place to support optimal outcomes for the mothers and babies in Wales. It was noted that it had previously been agreed that this review would be undertaken jointly between the JCC and Health Boards due to the need to consider neonatal and maternity services together.

Members noted the engagement which had been undertaken with the NHS Wales Directors of Planning Executive Peer Group (DoPs) and other Executive Peer Groups in the course of designing the Neonatal Phase 2 Programme, including the scope and indicative timescales for the programme, and the request for the resources required to successfully deliver the programme. Members discussed the importance of effective engagement and the need to liaise with Llais early in the process. The proposal to secure additional independent advice and support in respect of the engagement work stream was also supported. The need to reflect issues of equity and diversity in the work was also emphasised. Nicola Prygodzicz agreed to take on the Senior Responsible Officer role for the programme. It was agreed that a Programme Initiation Document would be produced and brought back to the JCC for approval.

Members (1) **Noted** the previous agreement by the then WHSSC Joint Committee to undertake a Phase 2 Transformation Programme for Neonatal Services, (2) **Noted** the pre-planning engagement that had taken place to design the Programme and develop the Case for Change, (3) **Approved** the scope, remit and high-level design of the Programme; and (4) **Approved** the financial resource requirements to support the successful delivery of the Programme.



## **8. Performance Report:**

- **Specialised Services – Feb 2024**
- **EASC Performance (incl Ambulance Service indicators) – March 2024**

The Interim Chief Commissioner introduced the report and set out that the sections of the report reflected the style and content developed in the predecessor bodies. Work would be undertaken with the JCC to determine how the integrated performance report should be developed overtime to reflect the full remit of the JCC.

Members received the report on performance up until 31 March 2024 for the former Emergency Ambulance Services Committee (EASC) and the former Welsh Health Specialised Services Committee (WHSSC) and noted the additional key performance indicators for 2024/2025 recently introduced by Welsh Government (WG).

Members noted the ambulance performance indicators, the ambulance performance dashboard, the immediate release requests and the Integrated Commissioning Action Plan (ICAP) actions aligned to the goals of the Six Goals for Urgent and Emergency Care Programme.

Members noted the integrated overview of the performance of specialised services commissioned by the former WHSSC up to the end of February 2024.

Members noted that the NHS Wales Chief Executive had written to all health boards, WAST and Velindre University NHS Trust (VUNT) on 7 May 2024 in relation to Key Performance Indicators and that there was an expectation that all organisations set out a clear improvement trajectory against each to achieve milestones by December 2024, and March 2025.

Members noted that for Ambulance and 111, whilst some improvements were being made, within the ASIs and the Performance Dashboard there were a number of areas of concern regarding response performance and lost hours and the resulting impact on patient care.

Members agreed to develop a revised red performance indicator action plan in conjunction with WAST, and agreed to discuss the ICAP with each HB with a view to focussing on the following priorities

- Flow in hospitals,
- Targeting patients with breathing difficulties and individuals who have fallen to avoid unnecessary hospital attendances and admissions – use Care Homes as a start point,
- Targeting mental health patients to avoid an increase in demand from changes to regulations,
- Understanding the impact and potential of all of the above,
- Collating and sharing best practice; and
- Developing trajectories for approval by the JCC.

Members agreed that a longer term strategy should be the focus for a future JCC development session. It was also agreed that a deep-dive on ambulance services commissioned by the JCC would be undertaken in the July meeting.

Members (1) **Noted** the former EASC performance report and Ambulance Service Indicators (ASI) for month 11 2023/2024, (2) **Noted** the former WHSSC performance report for month 11 2023/2024; and (3) **Noted** the Welsh Government additional targets for 2024/2025.

### **9. Financial Performance Reports Month 12 – EASC and WHSSC**

Members received the financial performance reports for month 12 2023-2024 for EASC and WHSSC for information and completeness.

Members noted the outturn position for both predecessor committee's as being a small overspend for EASC of £0.026m and an underspend for WHSSC of £6.121m as per the anticipated forecasts reported through the committees throughout 2023/24.

In addition, ST briefly updated that for Month 1 of 2024/25, the financial position for the new NWJCC reflected the latest activity information where received (that being month 12 for most provider contracts) or the financial plan position that had been agreed at the previous Joint Committee's. ST highlighted that the team were actively working with provider finance teams to assess the provider proposals against the commissioner funding available, with the aim of approving Heads of Agreement by the 28th June. This is not without risk but ST updated that she will keep the committee sighted as discussions progress.

Members (1) **Noted** the 2023/24 financial year-end position of EASC; and (2) **Noted** the 2023/24 financial year-end position of WHSSC.

### **10. Gender Identity Services for Children and Young – Final Report of the Cass Review**

Members received a report providing an update on the final report on the independent review led by Dr Hilary Cass OBE which was, commissioned by NHS England and NHS Improvement in 2020 to make recommendations on the services provided to children and young people who were exploring their gender identity or experiencing gender incongruence.

Members noted that the aim of the Cass Review was to ensure that children and young people who were questioning their gender identity or experiencing gender dysphoria, and who needed support from the NHS, received a high standard of care that met their needs and was safe, holistic and effective. It was noted that services for children and young people are commissioned from providers in England.

Members noted that the JCC commissions CVUHB to provide gender identity services for adults (non-surgical) through the Welsh Gender Service (WGS), and whilst this service is commissioned in Wales, in light of the Cass Review it was proposed that the NHS Wales JCC work with NHS England in the review of the service specification for adult services (non-surgical) rather than a single site approach.

Members discussed the recommendations of the review, and agreed that further information was required and that a further report be brought back to the next meeting.

Members (1) **Noted** the recommendations of the Cass Review and the continued alignment of the NHS Wales Joint JCC with the NHS England Implementation Plan, (2) **Noted** the Cabinet Secretary's direction that the Welsh Gender Service fully co-operates in the delivery of the data linkage study, (3) **Noted** the implications for CAMHS which may require additional resources outside of the commissioned service, (4) **Noted** that the NHS Wales Joint Commissioning Committee had written to Health Education and Improvement Wales (HEIW) to set up a working group to consider current training available for gender care. This work will include linking with the work being undertaken by NHS England to ensure consistency of approach and access to training materials.

### **11. Work Plan and Performance Update for Mental Health and Learning Disabilities**

Members received a report highlighting the work to date and outlining the programme of work for 2024/25 for the former National Collaborative Commissioning Unit (NCCU).

Members **noted** the Work Plan / Performance Update for Mental Health & Learning Disabilities previously part of the National Collaborative Commissioning Unit.

### **12. Corporate Governance Report**

Members received a report providing an update on corporate governance matters that had arisen since the previous meeting.

Members (1) **Noted** the report, (2) **Approved** the JCCs Annual Plan of Committee business for 2024-2025, (3) **Approved** the Annual Governance Statements 2023-2024 for EASC and WHSSC, and the Annual Compliance Statement for the NCCU 2023-2024, (4) **Reviewed** the responses prepared for the EASC and WHSSC Annual Audit Enquiries Letter responses for 2023-2024 and, subject to any required amendment, endorse for onward submission to Audit Wales; and (5) **Noted** the update on the development of the JCC hosting agreement and memorandum of understanding.

### **13. Other Reports**

Members also **noted** update reports from the following joint Sub-committees:

- CTMUHB Audit and Risk Committee (ARC) Assurance Report,
- Management Group Briefing,
- Individual Patient Funding Request (IPFR) Panel,
- Welsh Kidney Network (WKN),
- South Wales Trauma Network Delivery Assurance Group,
- Neonatal Transport DAG; and
- Emergency Medical Retrieval Transport Service (EMRTS) DAG Action Notes.



Llywodraeth Cymru  
Welsh Government

Abigail Harris – Chief Commissioner (Interim), NHS Wales Joint Commissioning Committee

Ian Green – Chair, NHS Wales Joint Commissioning Committee

CC:

Carole Bell – Director of Nursing and Quality Assurance  
NHS Wales Joint Commissioning Committee

Krysta Hallewell, NHS Wales Joint Commissioning Committee

David Thomas, Suicide and Self-harm Prevention Team, Welsh Government

Beverley Morgan, Suicide and Self-harm Prevention Team, Welsh Government

Jon Lane, Suicide and Self-harm Prevention Team, Welsh Government

Stuart Hackwell, Senior Medical Officer, Mental Health and Primary Care

Anna Kuczynska, Senior Medical Officer, Mental Health and Primary Care

15 May 2024

Dear Abigail and Ian

Following the publication of the final report from the Cass Review on 10 April 2024, I am writing to thank you and colleagues at the NHS Wales Joint Commissioning Committee (JCC) for your ongoing role in commissioning gender identity services for people in Wales.

I would also like to thank you for your continued representation on the NHS England Programme Gender Board and associated sub-groups and for publishing the [Joint Commissioning Committee briefing](#) to the Cass Review which sets out anticipated next steps.

As you know, on 1 May 2024, a debate by the Welsh Conservatives took place focussing on the CASS Review, where Senedd Cymru / Welsh Parliament was asked to:

1. Note the publication of the Cass review.

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

2. Note that NHS Wales commissions gender identity services for children and young people 17 and under from NHS England.
3. Note that NHS England has concluded there is not enough evidence to support the safety or clinical effectiveness of puberty suppressing hormones for the treatment of gender dysphoria in children and young people at this time.
4. Note the Welsh Government will continue to develop the transgender guidance for schools taking account of the Cass review and stakeholder views.

In light of these developments, I am writing to request formally that the NHS Wales JCC give specific consideration to the findings of final Cass Report. This must include a consideration of its findings in the review of the service specification for the adult gender identity service in Wales, which is planned to commence in 2024.

In addition, one of the recommendations of the Cass Review was to consider how interventions impact on outcomes. For that to happen, there is a need to monitor the long-term impact through tracking into adult gender services. Therefore, I am requesting that in line with this Cass recommendation, the NHS Wales JCC also ensures that gender identity services commissioned by the JCC share relevant data as part of the wider data linkage study referred to in the Cass Review (Recommendation 5). The data should be collected in a consistent and comprehensive manner to support an evidence-based approach to the support and interventions put in place.

We would also request that through the NHS Executive CAMHS Network, the NHS JCC informs health boards about the recommendations of the final Cass report to support the development of local implementation plans.

The Welsh Government also recognises the importance of existing services having the necessary training to support transgender children and young people in Wales, and as such, we are very supportive of the engagement that has taken place between the NHS Wales JCC and Health Education and Improvement Wales on this matter. I look forward to an update on training and workforce developments.

Yours sincerely,



**Matt Downton**

Deputy Director for Mental Health, Substance Misuse and Vulnerable Groups,  
Welsh Government

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

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## ASSURANCE REPORT

### NHS WALES SHARED SERVICES PARTNERSHIP COMMITTEE

Reporting Committee	Shared Service Partnership Committee
<b>Chaired by</b>	Tracy Myhill, NWSSP Chair
<b>Lead Executive</b>	Neil Frow, Managing Director, NWSSP
<b>Author and contact details</b>	James Quance, Assistant Director of Corporate Services
<b>Date of meeting</b>	16 May 2024
<b>Summary of key matters including achievements and progress considered by the Committee and any related decisions made.</b>	
<b><u>Chair's Report</u></b>	
<p>The Chair updated the Committee on her activities since the last meeting and forthcoming events. This includes:</p> <ul style="list-style-type: none"> <li>- RadioPharmacy developments;</li> <li>- Consultation with JQ in his new role supporting the SSPC's continued development and improvement;</li> <li>- The all-Wales Chairs' meeting due to take place at the end of May;</li> <li>- The Welsh Risk Pool Committee due to meet in June and an update would be received at the July SSPC meeting; and</li> <li>- The SSPC autumn development workshop would be held on 11 October 2024. TM reminded Committee Members to diarise in advance to ensure good attendance and participation.</li> </ul> <p>The Committee <b>NOTED</b> the update.</p>	
<b><u>Managing Director Update</u></b>	
<p>The Managing Director presented his report, which included the following updates on key issues:</p> <ul style="list-style-type: none"> <li>- The 2023/24 financial year finished with a small surplus of £12,000. This includes a confirmed return of £1m of funding to Welsh Government and £2m distribution to NHS Wales organisations and capital expenditure of under £8million, which was positive position.</li> <li>- The report from the Infected Blood Inquiry would be published on 20 May and would be of interest to NWSSP as host to the Welsh Infected Blood Support Scheme on behalf of Welsh Government.</li> <li>- DHCW had notified NWSSP that there was a contracting issue with the audit software used to check records by the Post Payment Verification team in</li> </ul>	

Primary Care Services. Options were being explored to mitigate the impact and a contract extension was being explored.

- The Medical Examiner Service would go live on a statutory basis from September, covering 95% of deaths in acute settings (around 30,000 deaths in the last 6 months). The stages to be worked through would increase the coverage which was circa 50% of GP practices, with the remaining 50% being managed practices within Health Boards. Contingency planning was to be agreed and NWSSP would deliver training to update Health Boards as to the changes.

In respect of RadioPharmacy, there was a need to procure three production isolators at a cost of £1.5m for the safe preparation of Radioactive medicines in sterile conditions and the equipment meets an urgent operational need, following the closure of the Radio-pharmacy unit at University Hospital Wales in October 2023. The procurement forms part of the project to provide a replacement RadioPharmacy unit for South and South East Wales, located in IP5 in Newport, hosted by NWSSP, and delivery is being managed by the Transforming Access to Medicines Programme (TRAMs), which has an endorsed Programme Business Case. The funding had been confirmed in the past 24 hours and the Committee were asked to support an urgent Chairs Action for commitment of expenditure for the programme, which would then be taken to Velindre University NHS Trust Board for approval by inclusion within its meeting papers being issued this week, and a report would be received for ratification by the Committee at its next meeting in July 2024.

NWSSP Finance colleagues were working with colleagues in other organisations to understand the revenue implications of the RadioPharmacy Business Justification Case (BJC) which were not anticipated to be of a high level. NF re-iterated that this request relates to RadioPharmacy only, not the TrAMS project as a whole. The intention was for NWSSP to provide the required information to enable each organisation to take the BJC through their governance processes which would likely vary depending upon the revenue implications. There would be a further Business Case for the Hub, which covered two suites of clean rooms, with costs to be confirmed to NWSSP by the working group.

The comments received were in terms of the revenue implications of the RadioPharmacy BJC and the need to establish written communication of the governance to be considered within organisations; outlining the timescales, draft BJC, and details of the finance group overseeing the project. A paper would be circulated with key milestones and key dates of different groups and programmes with arrangements to support this workstream and anticipated that some initial figures would be ready to be shared around mid-June with the overall aim of submitting the BJC to Welsh Government by the end of July.

The Committee **NOTED** the update.

### **Deep Dive – Recruitment Modernisation**

Positive progress continues to be made in implementing the Recruitment



Modernisation Programme. NWSSP has been working with organisations to implement agreed actions to streamline the recruitment process and reduce time to hire.

In recent months the impact of the actions taken is coming through in greatly improved performance, with the time from vacancy creation to ready to start date at April 2024 standing at 59.4 days against the target of 71 days.

The Committee **NOTED** the information provided in the Deep Dive session.

### **Items Requiring SSPC Approval/Endorsement**

#### **NHS Resolution Service Level Agreement**

The Committee considered the 3 year renewal of the existing NHS Resolution Service Level Agreement which is an invaluable service to clinical colleagues which is hosted by NWSSP.

The Committee **APPROVED** the Service Level Agreement.

#### **2024/25 Service Level Agreements**

Service Level Agreements are annually updated and submitted to SSPC for approval. It was confirmed that the Single Lead Employer and associated KPIs would be discussed under cover of a separate meeting.

The Committee **APPROVED** the Service Level Agreements.

#### **Proposed Changes to Scheme of Delegation**

Amendments to the Scheme of Delegation are required in order to provide greater clarity in financial delegation arrangements and to ensure that approval levels are appropriate for the size and complexity of NWSSP operations today. In addition, an update to the matrix of delegated powers for warnings, suspension and dismissal in the Disciplinary Policy and Procedure for NWSSP was proposed in order to ensure that it covers all possible fair reasons for dismissal aligned to employment policies.

The Committee **APPROVED** the proposed changes to the Scheme of Delegation and Disciplinary Policy and Procedure.

#### **Procure to Pay (P2P) Governance Update**

At the November 2023 Partnership Committee meeting it was agreed that the Committee would provide the future governance forum for All Wales P2P initiatives. This was agreed following the closure of the Finance Academy All Wales P2P Forum in September 2023. An update on the proposed governance arrangements was provided to the Committee.

The Committee **NOTED** the progress made to establish new P2P governance arrangements.

### **P2P Invoices on Hold Not on Statement Clearance Proposal**

A new process was proposed under the above temporary governance arrangements in order to clear invoices on hold which are not on supplier statements with a review of the procedure after 6 months.

The Committee **APPROVED** the process.

### **Items for Noting**

#### **Duty of Quality Annual Report**

The inaugural draft report on Duty of Quality highlighted how the story of quality within NWSSP was being told and the work that had been done so far. The report, when published, will be a public facing document and it would also be integrated into the Velindre Report, for completeness.

The Committee **NOTED** the progress made.

### **Finance, Performance, People, Programme and Governance Updates**

**Finance** – NWSSP reported a small surplus of £0.012m for the 2023/24 financial year. Savings achieved during the year led to the final 2023/24 distribution to NHS Wales and Welsh Government of £3m. Welsh Risk Pool 2023/24 DEL expenditure is £135.966m compared with £136.727m in 2022/23. The small increase of £0.037m above the IMTP forecast was agreed with and funded by Welsh Government. The value of stock held in stores at 31 March 2024 was £24m. NWSSP continue to await a Welsh Government decision regarding the level of PPE stock to be held in the longer term.

**People & OD Update** – The sickness absence rate remains very low with the average for the last 12 months being 3.07%. Statutory and Mandatory training compliance remains good at over 93% and PADR compliance continues to improve with the current reported level being 84%.

**Performance** – The in-month March performance was generally good with 40 KPIs achieving the target against the total of 43 KPIs. The three that missed the target were CTeS which very marginally missed the 90% customer satisfaction index with 89%, and two for Audit & Assurance in respect of the issue of draft audit reports and the subsequent timeliness of management responses.

**IMTP Quarter 4 Update Report** – A total of 74% of NWSSP's objectives are either completed and on track for delivery as part of those longer-term programmes of work or have been successfully achieved, as planned, in year across divisions. For those objectives not completed and not completed due to external factors, targeted actions for 2024/25 are in place with a view to bring

them back in line or to complete and close within the year.

**Project Management Office Update** – Two projects are currently rated as red. These are the Primary Care Workforce Intelligence System and Transforming Access to Medicine (TrAMS). On the former there are issues with increasing costs and extremely tight implementation timescales and on the latter the lack of capital is the major issue although good progress is being made on the development of the RadioPharmacy Service.

**Corporate Risk Register** – In addition to the three red risks remaining on the Register relating to the impact of industrial action and also of responding to the UK COVID Public Inquiry, and the development of the TrAMS project, a further risk was added regarding the lack of availability of capital funding and its potential impact on the achievement of objectives.

**Annual Report Concerns and Complaints 2023/24** – During 2023/24, 26 formal concerns were received and recorded by Corporate Services. This compares with 35 concerns received in the same reporting period during the 2022/23 financial year. 60% of the complaints received were responded to in full within the 30-working day target. Additionally, there were 20 matters that were categorised as early resolution complaints during 2023/24, which were locally resolved within 24 hours, thus negating the requirement for a formal concern to be made. 33 early resolution complaints were received during 2022/23.

The Committee **NOTED** the above reports.

### **Papers for Information**

The following items were provided for information only:

- Finance Monitoring Returns (Month 12 2023/24 and Month 1 2024/25);
- PPE Report;
- NWSSP Audit Committee Assurance Report - April 2024;
- Internal Audit Plan & Charter 2024-25;
- Audit Wales Audit Assurance Arrangements 2023-24; and
- 2024/25 SSPC Forward Plan.

### **AOB**

The Committee was reminded to diarise the Development Day planned for 11 October 2024. The Chair requested that any topics of particular interest to Committee members that could be explored in the Development Day be submitted to the Assistant Director of Corporate Services.

### **Part B (Private Session)**

#### **Legal & Risk Case & Document Management System Procurement**

The Committee was asked to approve the contract award following the tender for

the implementation of a case management system for Legal and Risk Services.

The Committee **NOTED** and **APPROVED** the paper to be submitted to Velindre University NHS Trust Board.

**Matters requiring Board/Committee level consideration and/or approval**

- The Board is asked to **NOTE** the work of the Shared Services Partnership Committee.

**Matters referred to other Committees**

N/A

**Date of next meeting**

18 July 2024