



**CYFARFOD BWRDD PRIFYSGOL IECHYD
UNIVERSITY HEALTH BOARD MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	30 May 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Hywel Dda University Health Board (HDdUHB) Joint Committees and Collaboratives Update Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Prof Philip Kloer, Interim Chief Executive
SWYDDOG ADRODD: REPORTING OFFICER:	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 meetings held on 9 and 23 April 2024, setting out the key areas of discussion.

NHS Wales Shared Services Partnership (NWSSP) Committee

- Summary of key matters considered by NWSSP, and any related decisions made at its meeting held on 21 March 2024.

Mid Wales Joint Committee for Health and Care (MWJC)

- Update report from MWJC – May 2024.

Argymhelliad / Recommendation

The Board is asked to **RECEIVE** the minutes and updates in respect of recent JCC, NWSSP and MWJC 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 Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	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: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	8. Transform our communities through collaboration with people, communities and partners

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Link to JCC Website Link to NWSSP Website Link to MWJC Website
Rhestr Termau: 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

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Explicit within the individual Joint Committee and Collaborative reports where appropriate.
Ansawdd / Gofal Claf: Quality / Patient Care:	Not Applicable
Gweithlu: Workforce:	Not Applicable
Risg: Risk:	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.
Cyfreithiol: Legal:	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.
Enw Da: Reputational:	Not Applicable
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable

JOINT COMMISSIONING COMMITTEE (JCC) EXTRAORDINARY MEETING BRIEFING – 9 APRIL 2024

The Joint Commissioning Committee (JCC) held an inaugural extraordinary public meeting on 9 April 2024. The next public meeting will take place on 23 April 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 Chair welcomed members and the newly appointed Lay Members to the newly established JCC.

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

1. Joint Commissioning Committee Standing Orders (inc Scheme of Delegation) & Standing Financial Instructions (inc Financial authorisation matrix)

Members received a report requesting that the JCC approve the JCC Standing Orders (including the scheme of delegation) & the Standing Financial Instructions (SFI's) (including the financial authorisation matrix).

Members noted that guidance on the handling of interests had been developed, that the memorandum of agreement between the 7 Health Boards (HBs) will be established; and that the hosting agreement between the host body CTMHB and the 6 HBs will be established to outline the accountability arrangements and resulting responsibilities of the Host Body, the JCC and its team.

Members (1) **Noted** the establishment of the NHS Wales Joint Commissioning Committee (JCC) from 1 April 2024, as directed by Welsh Ministers, (2) **Noted** that the JCC has superseded the Welsh Health Specialised Services Committee (WHSSC) and Emergency Ambulance Services Committee (EASC) with effect from 1 April 2024, (3) **Noted** the development of the JCC's governance framework, as a key component of the Health Board's governance framework, (4) **Approved** the Standing Orders and Scheme of Delegation and Reservation of Powers for the NHS Wales Joint Commissioning Committee, as issued by the Minister for Health and Social Services on 18 March 2024, (5) **Approved** the Standing Financial Instructions for the NHS Wales Joint Commissioning Committee, as issued by the Minister for Health and Social Services on 19 March 2024, (6) **Approved** the financial authorisation matrix; and (7) **Noted** the JCCs accountability map for information.

2. Interim Operating Model Framework for the NHS Wales Joint Commissioning Committee (JCC)

Members received a report requesting that the JCC note the transitional plan for Quarter 1 to enable the JCC to transact business when it went live on 1 April 2024. The plan incorporates the transitional plan developed by Welsh Government and the actions required to ensure stability and business continuity of the functions to be delivered.

Members **noted** the report.

JOINT COMMISSIONING COMMITTEE (JCC) MEETING BRIEFING – 23 APRIL 2024

The Joint Commissioning Committee (JCC) held its latest public meeting on 23 April 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 Emergency Ambulance Services Committee (EASC) and the Welsh Health Specialised Services Committee (WHSSC) meetings held on the 19 March 2024 were **approved** as a true and accurate record of the meetings. The minutes of the Joint Commissioning Committee (JCC) meeting held on 9 April 2024 were **approved** as a true and accurate record of the meeting.

2. Chairs Report

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

- **The update from the new Chair of the JCC** - the inaugural JCC meeting on 9 April 2024 received and approved the governance framework for the new JCC after it had been approved by the 7 x Health Boards (HBs) in March 2024, and the overwhelming first impression was of an organisation in good heart and in good shape, notwithstanding the significant challenges and complexities of combining the different organisations into one new national NHS sub committee,
- **JCC Induction Programme** – an update on introductory meetings with key personnel and partners and the local induction session attended and the forthcoming NHS Wales Induction programme for new Independent Members (IMs),
- **Chair's Action WHSSC – Approval of the WHSSC Legacy Statement** – the Chairs action taken by the Chair of WHSSC on 25 March 2024 to approve the WHSSC Legacy Statement as part of the work to support the establishment of the new NHS Wales Joint Commissioning Committee (JCC) from 1 April 2024 in accordance with the NHS Wales Joint Commissioning Committee (Wales) Regulations 2024 was ratified; and
- **Key Meetings attended.**

Members (1) **noted** the report; and (2) **ratified** the WHSSC Chairs action taken on 25 March 2024 to approve the WHSSC legacy statement.

3. Interim Chief Commissioners Report

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

- **New Interim Chief Commissioner** - an update on the interim 6 month appointment of Chief Commissioner, meetings held with key partners, staff and stakeholders to build relationships and the warm welcome received from everyone; and
- **NHS Wales Joint Commissioning Committee Implementation** - The programme of work to establish the new NHS Wales JCC came to fruition on 1 April 2024. The final Welsh Government Oversight Board meeting is being 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 which incorporated the transitional plan developed by Welsh Government and the actions required to ensure the stability and business continuity of the functions to be delivered.

Members **noted** the report.

4. Emergency Medical Retrieval and Transfer Service (EMRTS Service Review

Members received a report presenting the Joint Commissioning Committee (JCC) with recommendations of the Emergency Medical Retrieval and Transfer Service (EMRTS) Service Review which has been ongoing since November 2022 and overseen by the Emergency Ambulance Services Committee (EASC) up until 31 March 2024 which had responsibility for commissioning these services prior to the establishment of the Joint Commissioning Committee (JCC) on 1 April 2024.

The Committee gave thanks to stakeholders for their patience during the time taken to ensure the work could be carried out robustly, and were especially grateful for the way in which the Charity and EMRTS had supported and contributed to the Review in what had been challenging circumstances for them given the uncertainty affecting their people and business planning.

The Committee expressed gratitude to Llais, the national citizens voice body for Wales, who advised on the engagement as well as NHS Wales colleagues to have helped deliver the all Wales engagement with citizens.

Members noted that since taking up appointment the Chair and the interim Chief Commissioner felt it was important to listen to a variety of concerns and had been proactive in meeting with key stakeholders and had been struck by the passion and high regard that is held for the Wales

Air Ambulance Charity and the clinical teams of EMRTS, which had been acknowledged throughout the Review.

Members noted that the report presenting the recommendations of the EMRTS Service Review had been considered individually by each of the 7 x Health Board (HBs) in Wales between 20 March and 11 April, and they gave consideration to the following recommendations:

Recommendation 1 – EMRTS Service Model. The Committee approves the recommended service model for EMRTS including the consolidation of the Emergency Medical Retrieval and Transfer Services currently operating at Welshpool and Caernarfon bases into a single site in North Wales (Option A) as it best meets the objectives of the EMRTS Service Review,

Recommendation 2 – Implementation. To enable delivery of the agreed service model, the Committee requests that the Charity secures an appropriately located operational base in line with the agreed service model (as per the final recommendations of the Review),

Recommendation 3 – Implementation. The Committee approves that a joint plan is developed by EMRTS and the Charity, that maintains service provision across Wales during the transition to a new base and develop a comprehensive implementation plan for the agreed service model. This plan will be reflected in the Committee’s future commissioning arrangements with EMRTS and the Charity,

Recommendation 4 – Additional service provision. The Committee approves the development of a commissioning proposal for bespoke road based enhanced and / or critical care services in rural and remote areas to enhance the core service model. It is recommended that the Ambulance and 111 Commissioning Team establish a Task and Finish Group to further refine and develop the approach and to deliver a detailed implementation plan by the end of September 2024. The Group will work in partnership with HBs and Llais and other key stakeholders and report to the JCC in October 2024. Following conclusion of this work, and agreement of the way forward, the implementation plan will be updated,

Recommendation 5 – Lessons Learned. The Committee supports a Lessons Learned exercise of the review and engagement process to help inform the future work of the JCC; and

Recommendation 6 – Implementation. The Committee agrees to receive regular progress reports on achievement of the implementation plan milestones, and benefits realisation.

Members discussed the recommendations and through a majority of 5 of the 7 HBs supporting, along with the 3 Lay members and Chair the recommendations were approved. Members noted that Betsi Cadwaladr UHB and Powys tHB did not support the recommendations.

Members requested that additional detailed work be undertaken, aligned to key milestones for delivery and that there was a need to provide the public with confidence on the process and impact across Wales.

Members (1) **Noted** the risks outlined above, (2) **Noted** the risk to patients and under-utilisation levels across Wales, (3) **Noted** the national feedback provided by the Picker Institute, (4) **Noted** the localised feedback from communities surrounding Caernarfon and Welshpool bases, (5) **Noted** the representations raised by Llais and the other representations, (6) **Noted** the risks to the Charity, (7) **Noted** that communications and engagement strategies are needed from both the Charity and EMRTS to rebuild trust and confidence with rural communities specifically to ensure the future of this partnership service; and (8) **Approved** recommendations 1 to 4 in line with the Review report and to approve recommendations 5 and 6 on implementation monitoring lessons learned on implementation monitoring lessons learned; and that a report to be brought back to May 2024 meeting outlining key milestones.

5. Legacy Statements

Members received a report presenting the legacy statements from the predecessor joint committees / teams that transitioned into the new NHS Wales Joint Commissioning Committee (JCC) on 1 April 2024 for assurance.

Members noted that JCC became operational on 1 April 2024 and in accordance with the Interim Operating Model Framework for the NHS Wales JCC for Quarter 2024-2025 received by the JCC on 9 April 2024, there was a requirement for the new JCC to receive the legacy statements from the predecessor joint committees/teams.

Members noted the legacy statements for the:

- Emergency Ambulance Services Committee (EASC)
- National Collaborative Commissioning Unit (NCCU)
- 111 Service
- Sexual Assault Referral Centre (SARC)
- Welsh Health Specialised Services Committee (WHSSC)

6. Other reports

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

- Audit and Risk Committee (ARC),
- Management Group (MG),
- All Wales Individual Patient Funding Request (IPFR) Panel,
- Integrated Governance Committee (IGC),
- Quality & Patient Safety Committee; and
- Welsh Kidney Network (WKN).

ASSURANCE REPORT

NHS WALES SHARED SERVICES PARTNERSHIP COMMITTEE

Reporting Committee	Shared Service Partnership Committee
Chaired by	Tracy Myhill, NWSSP Chair
Lead Executive	Neil Frow, Managing Director, NWSSP
Author and contact details.	Peter Stephenson, Head of Finance and Business Development
Date of meeting	21 March 2024
Summary of key matters including achievements and progress considered by the Committee and any related decisions made.	
<u>Chair's Report</u>	
<p>The Chair updated the Committee on her activities since the last meeting. This includes attending the Chairs' Peer Group and meeting with the Minister. The Welsh Risk Pool Committee was held the previous week with a full agenda and the Staff Awards Ceremony at the end of February was a very positive experience. The Chair also advised Committee members that there may be a need for an urgent Chair's Action before the May Committee. This is in respect of Radiopharmacy Isolators where approval is likely to be required in April to progress this urgent procurement.</p> <p>The Committee NOTED the update.</p>	
<u>Managing Director Update</u>	
<p>The Managing Director presented his report, which included the following updates on key issues:</p> <ul style="list-style-type: none"> • Following the approval of the IMTP by the Committee in January, the two keeping in touch meetings, with the Finance Delivery Unit and the Planning Director at Welsh Government, produced no significant issues and the plan, has now been formally submitted; • Work to finalise the Business Justification Case for the Radiopharmacy service to be located in IP5 is progressing well with all necessary appointments to relevant contractors having been made; • The NWSSP People & OD Team have recently supported a further visit to Kerala in India which included attendance by the Minister for Health and Social Care from Welsh Government, who signed a formal agreement with the Kerala Government to continue the current co-operation arrangements which provides for a further 250 qualified healthcare professionals to be recruited into NHS Wales; 	

- The closure of the Laundry in Carmarthen is well underway and is on track for the end of March, with the new hub coming into operation in April. All affected staff have been given the opportunity to continue to work in the service at the Swansea Laundry or working in a suitable alternative role within Hywel Dda UHB;
- The recruitment process to replace the Director of Finance & Corporate Services has concluded and Alison Ramsey, the current Director of Planning, Performance, and Informatics was successful in being appointed to this post;
- Similarly, Nicola Phillips the current Deputy Director of Primary Care Services was successful in being appointed to the role of Director of Primary Care Services.

The Committee **NOTED** the update.

Items Requiring SSPC Approval/Endorsement

Decarbonisation Action Plan

The original Action Plan covered the period 2021-23 and there is now a need to update it. The plan is both externally and internally focused. External achievements to date include setting up a reporting template for all NHS Wales organisations to measure their progress against the 46 initiatives contained in the Welsh Government Plan and providing advice on achieving net zero in future construction projects. Internally we have invested in LED lighting across the estate, solar panels, and electric vehicles in our fleet. Going forward the plan continues to provide support to NHS Wales organisations and to take forward projects within NWSSP subject to the availability of capital. The plan is ambitious but is equally pragmatic, given the financial context to the years ahead. In the light of these challenges, a coordinated approach across NHS Wales is essential. Monitoring of progress against the plan at Committee is via the quarterly IMTP updates, albeit this is by exception, and it was agreed that a more detailed half-yearly report would be helpful.

The Committee **APPROVED** the Decarbonisation Action Plan.

NHS Building for Wales 2 Framework

The framework provides a number of specialist advisors to support major capital schemes across NHS Wales. The current framework expires in April and work has been undertaken over the last two years to prepare for a new framework, which will commence in May for a period of four years, with the option to extend for a further two years. There has been extensive consultation with Health Boards throughout the development of the new framework, and there has been proactive initiatives to support the Welsh economy wherever possible,

The Committee **ENDORSED** the Framework for formal approval by the Welsh Government.

Nantgarw 2 Lease

Due to low occupancy rates at both Companies House and the current Nantgarw HQ, NWSSP is taking the opportunity to consolidate staff into one new building on the Nantgarw estate. This will provide a better working environment and will release revenue savings. The previous plan to move into Cathays Park was discounted due to increasing costs and restrictions on access, and it would also not have allowed the exit from the current HQ. The Committee was therefore asked to approve NWSSP entering into a 10-year lease for the new building.

The Committee **APPROVED** the signing of the lease for Nantgarw 2.

Items for Noting

All-Wales Energy Arrangements

The Committee were updated on developments with the implementation of new governance and contracting arrangements, and also the proposals for the supply of energy in the next few years.

The Welsh Energy Group, supported by the Welsh Energy Operating Group, were both established in March 2023, replacing the Energy Price Risk Management Group. Both of the new groups have performed well, with regular and well attended meetings, which has led to informed strategic decisions on energy supply. The governance arrangements were recently reviewed by Internal Audit and their report was rated as providing substantial assurance. NHS Trusts in England are considering the benefits of centralising their purchase of energy requirements and the Welsh Energy Group is similarly considering the benefit of joining this arrangement.

The Committee **NOTED** the update.

Flu Vaccination Proposal

The Central Procurement of Influenza project brief was approved by the Vaccination Programme Wales Transformation Board last July. The aim was to deploy centrally procured adult Influenza vaccine during the autumn of 2025. NWSSP have formed part of the Project Group to establish feasibility and design of a centrally procured Influenza model.

The next phase of implementation requires the Minister to direct General Practice to not purchase Influenza vaccine for Autumn 2025, which they would normally commence in September of this year. For this direction to be given, assurance needs to be provided that NHS Wales will be ready to provide GPs, Health Boards and Trusts with centrally procured adult Influenza vaccine. An Influenza vaccine tender process would run over the summer of 2024 to enable vaccine delivery commencing in September 2025.

NWSSP will procure the vaccines but there is the option of these being directly

delivered by the supplier or being held and distributed centrally via NWSSP. The paper provided to Committee focused in the latter option, but it is for Welsh Government to decide the preferred approach.

The Committee **NOTED** the proposal.

Staff Benefits Update

NWSSP currently provide administration services for several Staff Benefit Schemes for multiple NHS Wales organisations covering Salary Sacrifice Cars, Bicycles and Home Electronics. These services ensure that a fully procured supplier has been sourced, providing quality and value for money.

The Salary Sacrifice Car Scheme current fleet of vehicles stands at 3,736 at February 2024 which represents a 23% increase over the last 12 months. Additionally 94% of live fleet are electric/hybrid vehicles and 87% of cars on order are electric/hybrid vehicles. The car scheme deliver savings estimated at £750 per car per annum, resulting in a total annual saving of £2.8m across NHS Wales.

The Home Electronic scheme provides employees access to over 5000 items from Currys taken via salary sacrifice, allowing the employees to make savings through their salary.

The Cycle to Work scheme is supplied in conjunction with Halfords. The scheme provides employees access to bikes and accessories from Halfords and Tredz taken via salary sacrifice, allowing the employees to make savings on the cost of new bicycles.

The Committee **NOTED** the update.

Finance, Performance, People, Programme and Governance Updates

Finance – NWSSP reported a break-even Month 11 financial position with a year-to-date additional non-recurring savings of £2.277m. The 2023/24 distribution to NHS Wales is now finalised at £2m. In addition NWSSP anticipate being able to return £1m of funding to Welsh Government so that the total additional savings generated and distributed for 2023/24 is £3m.

People & OD Update – The sickness absence rate remains very low with the average for the last 12 months being 2.98%. Statutory and Mandatory training compliance is good at over 93% but PADR compliance needs to improve from the current level of 83%.

Performance – The in-month January performance was generally good with 38 KPIs achieving the target against the total of 41 KPIs. The three that missed the target were Recruitment, where performance has improved and the target was only marginally missed, and two for Audit & Assurance in respect of the issue of draft audit reports and the subsequent timeliness of management responses.

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 – There remain three red risks relating to the impact of industrial action and also of responding to the UK COVID Public Inquiry, and the development of the TrAMs project.

The Committee **NOTED** the above Reports.

Papers for Information

The following items were provided for information only:

- Finance Monitoring Returns (Months 10 and 11).
- Final Version of IMTP.
- PPE Dashboard
- Audit Committee Assurance Report.

AOB

N/a

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

16 May 2024

MID WALES JOINT COMMITTEE FOR HEALTH AND CARE

UPDATE REPORT – MAY 2024

1. Introduction

- 1.1 The statutory health and care organisations covering the Mid Wales region include the three Local Health Boards (Betsi Cadwaladr University Health Board, Hywel Dda University Health Board, Powys Teaching Health Board), Welsh Ambulance Services NHS Trust and three Local Authorities (Ceredigion County Council, Gwynedd Council and Powys County Council). A formal collaborative arrangement, the Mid Wales Healthcare Collaborative, was established between these organisations in 2015 in response to a study of healthcare in Mid Wales commissioned by Welsh Government and undertaken by Professor Marcus Longley in 2014. As from March 2018 this collaborative arrangement transitioned into the Mid Wales Joint Committee with a strengthened role in the joint planning and implementation of health and care services across Mid Wales.
- 1.2 The Mid Wales Joint Committee has a set of annually agreed Mid Wales specific priority areas which have been identified as areas that will provide added value by working on a Mid Wales footprint and which align to the Integrated Medium-Term Plans (IMTP) / Annual / Regional Plans of the Joint Committee's partner organisations. The priority areas focus on a whole pathway approach with regional links between primary, secondary, community and social care to support the Welsh Government's expectation for Health Boards to work together to plan and deliver regional solutions across organisational boundaries.
- 1.3 The work of the Joint Committee is coordinated by the Mid Wales Planning and Delivery Executive Group. The focus of the group's work is to oversee the development and implementation of the Mid Wales Priorities and Delivery Plan which is considered alongside individual organisational plans together with the consideration of any other emerging matters which require a collaborative discussion and regional approach.
- 1.4 The Planning and Delivery Executive Group is supported in its work by the following sub-groups:
- The Mid Wales Clinical Advisory Group which advises on specific clinical models of care, taking a leadership role in detailed design where appropriate.
 - The Mid Wales Social Care group which focuses on Social Care and the alignment of plans for social care services across Mid Wales.
 - The Rural Health and Care Wales Stakeholder Group for which the work programme links to and supports the delivery of the Mid Wales priorities.
- ### 2. Mid Wales Priorities
- 2.1 The Joint Committee has agreed that its overarching priorities for 2024/25 are a continuation of its 2023/24 priorities as follows:
- i) Urology
 - ii) Ophthalmology
 - iii) Cancer and Chemotherapy Outreach
 - iv) Community Dental Services
 - v) Clinical Strategy for Hospital Based Care and Treatment and regional solutions.
 - vi) Cross Border workforce arrangements

2.2 Supporting the delivery of the overarching Mid Wales priorities are a set of three clinical and three social care priorities.

Clinical priorities

For 2024/25 the clinical priorities and how they will be taken forward are:

- i) Urology: The Mid Wales 'Urology' priority is being taken forward by the Mid Wales Urology group and led by the Lead Clinical Executive Director for the Joint Committee.
- ii) Palliative Care: The Mid Wales priority for 'Cancer' includes an objective for Palliative Care.
- iii) Rheumatology: The Mid Wales priority for 'Clinical Strategy for Hospital Based Care and Treatment and regional solutions' includes the Bronglais General Hospital Strategy for which the action plan for Acute Medicine includes Rheumatology services.

Social Care priorities

The social care priorities which will be taken forward by the Mid Wales Social Care Group are:

- i) Residential Children's Accommodation with links to eliminating profit on small homes (Children's Services)
- ii) Welsh Community Care Information System (WCCIS)
- iii) Trusted Assessor along with Delayed Pathways of Care

2.3 The following provides the latest update on the overarching priorities for Mid Wales.

2.3.1 Urology

Prostate cancer pathway

The first area which the Mid Wales Urology group has focused on is the prostate cancer pathway, with the main issues identified being a lack of clarity over responsibility for monitoring of PSA levels if the first PSA test is within normal limits and monitoring and surveillance of patients post diagnosis and treatment. The Mid Wales Urology group have been able to clarify that primary care are responsible for the second PSA test and that there is an agreed mechanism in place for the on-going monitoring and surveillance of patients post diagnosis and treatment. The group has confirmed that the pathways in Wales are well established with the Welsh pathway similar to that described for the English pathway for which a proportion of Powys residents access services from cross border. However, the main issues appear to be a lack of consistent implementation of the nationally agreed mechanism and the administration of the monitoring systems used as some organisations are using clerical workarounds until a formal e-solution is agreed.

The Mid Wales Urology group met on 23rd April 2024 and agreed that no further work is required on pathway development for prostate cancer but there is a need to ensure consistent implementation of the nationally agreed mechanism across the region and the current administration systems currently being used for the surveillance of patients. A meeting of relevant Health Board clinical and managerial staff has been arranged for 12th June 2024 to look at both of these issues.

The Mid Wales Clinical Advisory Group have agreed with the Urology group's recommendation that the next area of focus for 2024/25 will be Trial Without Catheter. A

task and finish group is in the process of being established to look at the current position and identify available opportunities to address any gaps in the service.

2.2.2 Ophthalmology

Due to an inability to recruit to the joint Ophthalmology lead post it was agreed that the proposal to cover the joint Ophthalmology post through paid sessions should be explored further. However, due to financial constraints there is currently no available funding. Powys Teaching Health Board are exploring available options which includes the repatriation of work back into Powys and bid has been submitted to the National Planned Care Programme for clinical sessions to work on a regional basis. Confirmation is currently awaited on whether or not the bid has been successful.

2.3.3 Cancer and Chemotherapy Outreach

Chemotherapy Day Unit, Bronglais General Hospital

Hywel Dda University Health Board has confirmed that building work on the new Chemotherapy Day Unit at Bronglais General Hospital, Aberystwyth, will start in May 2024. The budget for the development has been under pressure because of rapidly rising material costs. However, following careful planning and budgeting, work is now on-track to nearly double the floor space available for treatment and staff areas to 600 square metres. The project will remodel part of the existing floor area and repurpose accommodation to ensure it meets the needs of staff and patients to deliver a modern and welcoming facility.

The project will deliver significant enhancements in care and experience for Mid Wales patients accessing chemotherapy services at Bronglais General Hospital. It is expected that the £3million unit will be ready to welcome its first patients in 2025.

Oncology

There is Mid Wales Joint Committee representation on the South West Wales Cancer Oncology Outpatients working group. Links between this group and Powys Teaching Health Board have now been established.

The Joint Committee team have been asked to support the Hywel Dda University Health Board cancer team in exploring the future proofing of Oncology services at Bronglais Hospital, Aberystwyth, through in-reach from organisations neighbouring the Mid Wales region. Initial contact was made with relevant officers from Shrewsbury and Telford NHS Trust and Betsi Cadwaladr University Health Board. Shrewsbury and Telford NHS Trust are currently not in a position to support Hywel Dda with any future proofing of services. A meeting was held on 1st May 2024 between Hywel Dda and Betsi Cadwaladr University Health Board representatives to discuss the available options for the long term strategy for oncology service provision at Bronglais Hospital.

Powys Teaching Health Board have agreed to explore the feasibility of providing adjuvant biphosphate infusion therapy at Bro Ddyfi Hospital, Machynlleth, in addition to what is already being provided at Llanidloes Hospital. Feedback is currently awaited from Powys Teaching Health Board on the outcome of internal discussions.

Radiotherapy

There is Mid Wales Joint Committee representation on the South West Wales Cancer Radiotherapy working group. Links between this group and Powys Teaching Health Board have now been established.

A Business Case for the recommissioning of the CT1 Simulator at Singleton Hospital, Swansea, has been considered by the Radiotherapy Modernisation group and shared with Powys THB representatives for their feedback. The proposal for the CT1 Simulator to be recommissioned is necessary due to the length of time it will take to commission a second new simulator (CT3).

The group have also considered the draft assessment criteria and options appraisal for a 5th LinAcc (radiotherapy machine) to be in place and operational by 2026/27 which is required to meet the increased demand for Radiotherapy services. Two options are currently being considered for the regional model as follows:

- Singleton Hospital to continue to be the main radiotherapy site for South and West Wales with the 5th LinAcc sited at Singleton Hospital, Swansea.
- Satellite Radiotherapy Centre to be established at a site within the Hywel Dda University Health Board area with the re-distribution of current LinAcc machines over a 5-10 year period as they become out of date and need replacing.

The Joint Committee team have asked that consideration be given to the needs of the Mid Wales population when considering the regional model, in particular, the options considered for the site for a potential satellite radiotherapy centre and the availability of patient accommodation at the main Radiotherapy site at Singleton Hospital.

Palliative care

In 2023, the National Clinical Lead for the National Palliative and End of Life care programme asked the Joint Committee team to support the national team in facilitating group discussions on a Mid Wales level which will inform the national programme work. Feedback from a Joint Committee facilitated workshop with Mid Wales Health Board palliative care leads has been provided to the national lead and this feedback outlined the current issues and challenges faced across Mid Wales, in particular, out of hours and weekend working. The outputs of the national work have not yet been seen.

The Joint Committee team are due to meet with the National Clinical Lead on 6th June 2024 to discuss what further support they require and the next steps for this work.

2.3.4 Community Dental Services

Referrals for new Hywel Dda University Health Board patients to the Newtown clinic for intermediate oral surgery for complex extractions have not resumed as the Consultant Oral Surgeon based at Newtown left the employment of Powys Teaching Health Board in 2023. An alternative proposal to explore the provision of a level 2 extractions Service Level Agreement service for Hywel Dda patients at Llandrindod Wells has been considered but was not possible due to financial constraints.

A meeting of the clinical and managerial leads for Powys Teaching Health Board and Hywel Dda University Health Board has been arranged for 18th June 2024 to discuss the plan for this priority for 2024/25 with the following areas to be considered:

- General Anaesthetic Paediatric service in Bronglais General Hospital
- Tier 3 Minor Oral Surgery at Bronglais General Hospital (if there is available theatre space)
- Tier 2 Minor Oral Surgery
- Opportunities for the Expansion of Aberystwyth Community Dental Service
- Contract risks in Aberystwyth General Dental Services
- Hywel Dda University Health Board Estate issues

2.3.5 Clinical Strategy for Hospital Based Care and Treatment and regional solutions Bronglais General Hospital Strategy

The Bronglais General Hospital Strategy Implementation Plan action plans have been reviewed in detail and updated to reflect the current position. Progress on the implementation of the strategy is continuing but is slower than planned. However, key areas of work being progressed are:

- Rheumatology: The Hywel Dda Rheumatology Consultant, based at Bronglais General Hospital, is now in post. The Consultant is having various discussions both with Hywel Dda University Health Board and Powys Teaching Health Board representatives regarding the potential future model for the service.
- Colorectal: The first colorectal clinic at Newtown Hospital which was provided by Hywel Dda for Powys patients was held on 12th April 2024 with positive feedback received from staff and patients who were happy to be seen at Newtown. The second clinic was held on 3rd May 2024 with the third clinic planned for 7th June 2024. Following this the Mid Wales Colorectal Services group will meet on 25th June 2024 to consider the review of the 3 month pilot which will include consideration of feedback from patients and clinical staff. The group will use this review to inform its recommendation as to whether or not the 3 month pilot should continue as a permanent arrangement.

In anticipation that the pilot is a success and the clinic is to continue, the Joint Committee team are co-ordinating the development of a draft service specification for the service to move from a Long Term Agreement to a Service Level Agreement arrangement.

- Gastroenterology: Hywel Dda University Health Board is in the process of appointing a Consultant Gastroenterologist for Bronglais General Hospital.

Hywel Dda UHB Clinical Services Plan programme

In 2023, Hywel Dda University Health Board established a Clinical Services Plan programme, to review some fragile services and develop a set of proposals for the provision of these services over the medium-term, until the establishment of the new hospital network as part of its long-term health and care strategy 'A Healthier Mid and West Wales: Our Future Generations Living Well'. At the Board meeting of Hywel Dda University Health Board in March 2023, it was agreed that the following services required focused support and would form a programme of work to deliver the Clinical Services Plan:

1. Critical Care
2. Dermatology
3. Emergency General Surgery
4. Endoscopy
5. Ophthalmology
6. Orthopaedics
7. Radiology
8. Stroke
9. Urology
10. Primary Care and Community

Phase 1 - As part of the first phase of the review, staff were invited to share their views through completing a survey during September and October 2023. A survey was also

shared with patients in October and November 2023, to capture their views of using services included in the Clinical Services Plan. The initial phase for Primary Care and Community invited the four contractor professions, as well as the out of hours and community dental workforce, to share their feedback through the completion of a survey that was open between November 2023 and January 2024

An issues paper has been developed that highlights a broad range of factors that impact on services and includes the feedback gained through the staff, patient and contractor surveys. This paper was presented to the Health Board's public board meeting on 28th March 2024

Phase 2 - Workshops for patients, their representatives, and staff across a wide range of services, will now be held as part of the next stage of the Clinical Services Plan. The first nine service areas will now develop the workshops with Primary Care and Community Care to develop their own strategy. The workshops will develop a set of potential options that will support and improve these services over the coming years.

2.3.6 Cross Border workforce arrangements

Five priority areas have been agreed to focus on developing solutions to establish cross border health and social care workforce arrangements across Mid Wales as follows:

- a) Build unified workforce intelligence that identifies the workforces required and to create new and enhanced roles across Health Boards and Social Care. (Aligning to the All Wales Health and Social Care Strategy)
- b) Scope and deliver development programmes which include effective and efficient leadership, talent management, clinical education (including inter-professional education) which creates consistency in how we lead and support people and where possible provide intra organisation delivery.
- c) Develop compassionate processes/initiatives that support workforce wellbeing.
- d) Share good practice across the Mid Wales region.
- e) Develop recruitment strategy to encompass portfolio careers, apprenticeships, and joint working.

A workshop of Mid Wales workforce leads for the three Mid Wales Health Boards was held on 28th February 2024 to develop the scope for each of the priority areas identified. A presentation on the outputs from this meeting was provided to Mid Wales Planning and Delivery Executive Group on 18th March 2024.

The next meeting of the Mid Wales workforce group is due to be held on 8th May 2024 to undertake further scoping and to refine the scope. The Joint Committee team are meeting with the group's lead on 13th May 2024 to support them in the development of detailed work plans (with milestones and targets) for these priority areas.

3. Mid Wales Social Care priorities

3.1 Residential Children's accommodation

Work on Residential Children's accommodation priority commenced in 2023/24 and will continue into 2024/25. The Residential Children's accommodation workshop was held on 7th February 2024 and was attended by representatives from Powys and Ceredigion County Councils and the Joint Committee Team.

The workshop focused on sharing the current position for Residential Children's accommodation services for each county, looking at examples of best practice across the

UK (a paper and a set of presentation slides was developed by Rural Health and Care Wales), current issues / challenges and opportunities for shared learning. During the session, the group identified a number of areas where there could be shared learning which included rota management systems, recruitment, induction and training programmes. Also, opportunities for undertaking joint induction and training programmes were considered and it was agreed this would be feedback to the Mid Wales Workforce group for which the membership includes a social care representative.

The workshop has led to the establishment of a network between the Registered Managers for Powys and Ceredigion and an offer has been made to Gwynedd Council to be a part of this arrangement.

3.2 Welsh Community Care Information System (WCCIS)

A significant amount of work is being undertaken nationally on a replacement system for the WCCIS system which is currently in place at 18 of the 21 Local Authorities across Wales including Ceredigion County Council, Powys County Council and Gwynedd Council. Given the work that is being undertaken nationally, the Mid Wales Social Care Group have agreed that the first piece of work will be for the group to share a position statement for their respective Local Authority to outline the current situation, proposed actions and plans and risks.

3.3 Trusted Assessor along with Delayed Pathways of Care

Clarification is required over how the role, purpose and expected outcomes for the Trusted Assessor role is being implemented. A meeting is in the process of being arranged for members / their nominated representatives to discuss the Trusted Assessor role and to share what is working well, what is not working well and the challenges being encountered.

4. Rural Health and Care Wales

4.1 Mid Wales Demographic and Health / Wellbeing report

A review of the revised Population Needs Assessments and Wellbeing Plans covering Mid Wales, together with the ONS demographic statistics for the area, are being reviewed in order to consolidate this information into a comprehensive demographic and health / wellbeing report for the region by July 2024.

4.2 Cardi Care project

Notification was received on 21st December 2023 from the Mid Wales UK Shared Prosperity Fund stating that the application to extend the Cardi Care project into Powys and another location in Ceredigion had been held in the “amber zone”, asking for a re-submission to be done, with a re-profiling to reflect a much shorter project (to end by December 2024). This was undertaken and a grant has been confirmed for £30,206 to run similar a project from March to November 2024 in Lampeter, Ceredigion and Llanidloes, Powys.

4.3 Multi-agency responses during the Covid-19 Pandemic

The final report on the multi-agency responses during the Covid-19 Pandemic (vulnerable groups) in the Hywel Dda University Health Board and Powys Teaching Health Board regions has been completed and was presented to the Mid & West Wales Safeguarding Board Executive Board on 23rd April 2024. The purpose of this work, commissioned by the Integrated Executive Group of the West Wales Care Partnership, the Mid & West Wales Safeguarding Board and the Powys Partnership Board, was to look at Covid-19 and its impact on vulnerable clients of statutory agencies.

4.4 Impact of rurality on the cancer patient experience

The 2-year research project which is funded by Macmillan Cancer Research is exploring the impact of rurality on the cancer patient experience. The work is now focusing on one-to-one interviews (27 undertaken to date done) and setting up focus groups as part of the interactive information gathering. The 12-month case study aspect has also commenced.

4.5 Virtual Rural “Hospital” for Mid, North and West Wales

The draft proposal for the Virtual Rural “Hospital” for Mid, North and West Wales is currently under development with a presentation on a draft business case to be presented to the Rural Health and Care Wales Stakeholder Group in June 2024. A scoping exercise of existing virtual services / wards across the whole Mid Wales region has been undertaken.

4.6 Cymru Wledig LPIP Rural Wales

Confirmation of the UKRI grant for the Rural Wales Local Policy and Innovation Partnership, now called Cymru Wledig LPIP Rural Wales, has been received. The partnership, which included Rural Health and Care Wales, has received over £5 million in funding to research and explore solutions to rural challenges. Cymru Wledig LPIP Rural Wales, the Local Policy and Innovation Partnership for Rural Wales, connects researchers, communities, and policy-makers to support inclusive, sustainable development.

The project is due to be officially launched at the Senedd in early July 2024

4.7 Graduate Entry Medicine

Rural Health and Care Wales participated in the international Graduate Entry Medicine interviews for medical students on the 19th February 2024 and its work programme includes a project to support the increase in applications from the Mid Wales region.

4.8 Rural Health and Care Conference 2023

The feedback received for the ‘Rural Health and Care Conference 2023: Embracing Change – welcoming innovation and new ways of delivering Rural Health and Care Services’ was overall very positive. The Joint Committee have agreed with the proposal to extend the Conference to 3 days (from 2 days) in 2024 to enable more social networking time and gaps between presentations (from feedback received), with the intention also to include a section that reflects on achievements and developments made in Mid Wales since the publication of the Mid Wales Healthcare Study ten years ago in October 2014.