



<b>AGENDA ITEM</b>
7.3

<b>CTM BOARD</b>
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<b>REGIONAL COLLABORATIVE PROGRAMME UPDATE</b>
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<b>Date of meeting</b>	24/11/2022
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<b>FOI Status</b>	Open/Public
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<b>If closed please indicate reason</b>	Not Applicable - Public Report
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<b>Prepared by</b>	Elizabeth Beadle, Assistant Director of Transformation
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<b>Presented by</b>	Linda Prosser, Director of Strategy and Transformation
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<b>Approving Executive Sponsor</b>	Executive Director of Strategy and Transformation
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<b>Report purpose</b>	FOR NOTING
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<b>Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)</b>		
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Committee/Group/Individuals	Date	Outcome
(Insert Name)	(DD/MM/YYYY)	Choose an item.

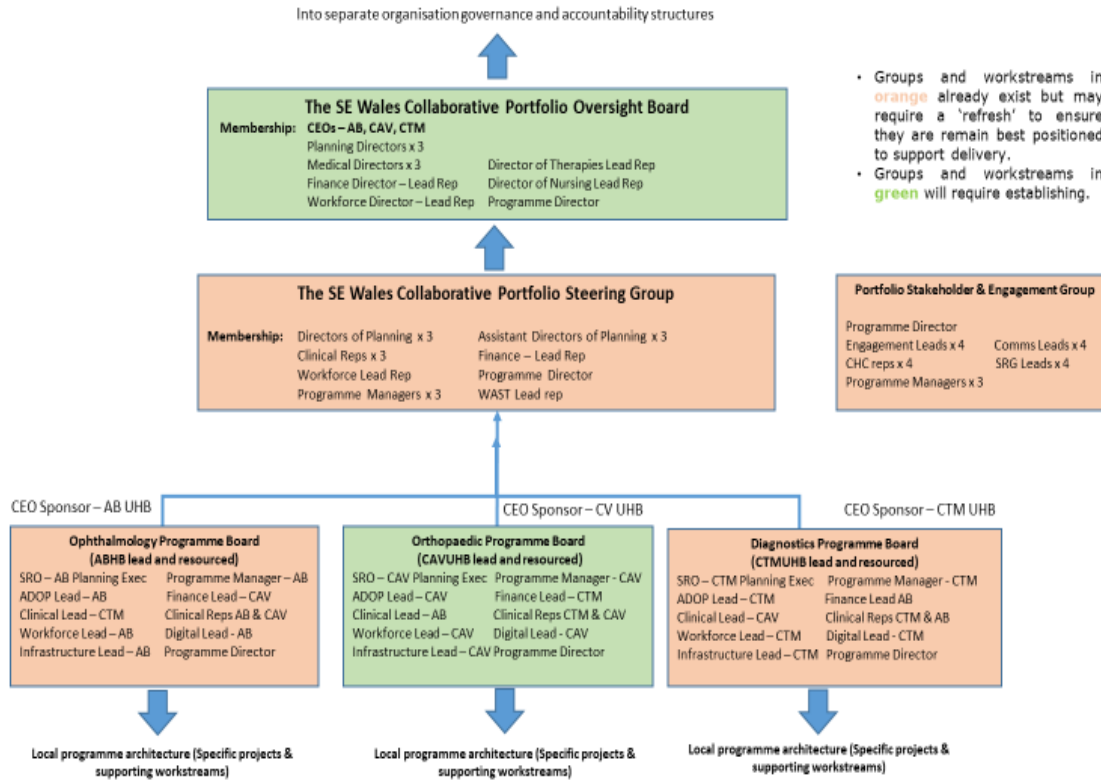
<b>ACRONYMS</b>	

## 1. SITUATION/BACKGROUND

1.1 Following a renewed commitment of the chief executives across Aneurin Bevan University Health Board (ABUHB), Cardiff & Vale University Health Board (CAVUHB), and Cwm Taf Morgannwg University Health Board (CTMUHB) to work regionally where clinically appropriate, a portfolio of programmes across Orthopaedics,

Ophthalmology and Diagnostics has been agreed along with the creation of Regional Programme Director role to facilitate delivery.

- 1.2 The objective of the regional programme is to work collaboratively across South East Wales to bring together collective resources, talent and expertise in order to achieve the best outcomes for the populations we collectively serve by giving colleagues the mandate to co-create solutions and plans to meet the collective challenge. Initially, the focus is on the three identified specialities.
- 1.3 A number of guiding principles have been agreed by the three chief executives.
- Reduce unwarranted variation and inequality in health outcomes and access to services and experience.
  - Improve resilience.
  - Make effective use of capacity and capability in whichever organisation it sits.
  - Create critical mass for effective high-quality care
  - Accepting service delivery occurs when and where it makes sense to do so and accepting that may not reside in every organisation.
  - Take all opportunities to use the evidence base and best practice to improve quality, efficiency, productivity, and use of finite resources.
  - Enable clinical leaders, and others, to work together, lead together and learn together.
  - Approach all aspects of the collaboration with benign intent, honesty, transparency, and integrity in order to build trusting and effective relationships.
  - Agree approaches to engagement and communications together.
  - Avoid leaving anyone behind.
  - Establish an effective but not overly bureaucratic governance structure
  - Learn from past regional initiatives in an open, honest and humble way.
- 1.4 A governance structure and approach has been developed to build on existing fora that are operating in the regional planning sphere across the three health boards.
- 1.5 The image below represents a schematic of the proposed structure to progress this work, and further details are supplied in Appendix one.



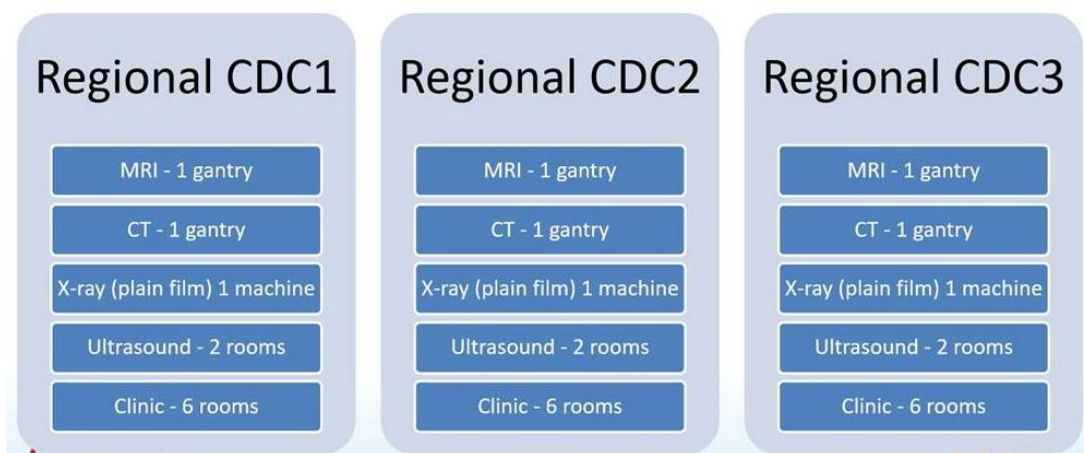
- Groups and workstreams in orange already exist but may require a 'refresh' to ensure they remain best positioned to support delivery.
- Groups and workstreams in green will require establishing.

1.6 Chief Executives have committed to this regional programme of work and the development of the associated programme infrastructure.

## 2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 2.1 The Ophthalmology programme is the longest-standing of the regional programmes and is shortly due to deliver a business case for regional cataract service recovery. The business case proposes to utilise hubs in the south and north of the region in a joint outsourcing arrangement to run from April 2023 onwards, subject to funding. The business case is due to be submitted to Welsh Government by December 2022.
- 2.2 The Orthopaedics programme has appointed a programme manager who is due to commence in post by the end of the calendar year.
- 2.3 The Diagnostics programme, hosted by Cwm Taf Morgannwg University Health Board now has a programme infrastructure in place, with the exception of the programme board which is expected to hold its inaugural meeting in December 2022.

- 2.4 Within the diagnostics programme there are three constituent projects. The first is the community diagnostics centre project. Work to develop a specification to procure a regional diagnostics solution comprising between three and nine regional diagnostics centres is nearing completion. This will be presented to the programme board in December.
- 2.5 The community diagnostic centres are intended to provide a number of modalities, as set out in the image below, with the aim of improving access times to diagnostics across the region. Subject to approval of a business case to Welsh Government, it is anticipated that it would be possible to establish a first unit during 2023-24.



- 2.6 The regional pathology project board has met twice, with excellent engagement from colleagues across the region. The group has identified initial aims for the collaboration and the supporting project group is being established.
- 2.7 The endoscopy project has been supported by demand and capacity assessment undertaken by the NHS Wales Delivery Unit and a South East Wales regional plan has been developed to deliver longer-term solutions to endoscopy capacity challenges, with a number of potential options under consideration. This plan will be presented to the National Endoscopy Board during week commencing 7<sup>th</sup> November 2022.

### **3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE**

- 3.1 Key challenges to delivery of the regional development programmes are:
- 3.1.1 Securing the programme/ project team resources to progress at pace. Programme managers are in place or being recruited to for each programme and additional resource has been sought from regional and national partner organisations, where appropriate.



- 3.1.2 Capital and revenue to deliver the schemes, however the programmes will all develop robust business cases setting out the value of each proposed case.
- 3.1.3 Close links are maintained with Welsh Government, in support of business cases under development.

#### 4. IMPACT ASSESSMENT

<b>Quality/Safety/Patient Experience implications</b>	There are no specific quality and safety implications related to the activity outlined in this report.
	Regional planning and service development is intended to provide improvements to
<b>Related Health and Care standard(s)</b>	Safe Care
	Timely care
<b>Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.</b>	No (Include further detail below)
	Not required at this stage. All service developments associated with regional work will have all appropriate impact assessments undertaken.
<b>Legal implications / impact</b>	There are no specific legal implications related to the activity outlined in this report.
<b>Resource (Capital/Revenue £/Workforce) implications / Impact</b>	Yes (Include further detail below)
<b>Link to Strategic Goals</b>	Improving Care

#### 5. RECOMMENDATION

- 5.1 The Board is asked to **note** the contents of the report and to receive regular updates on progress with regional developments to deliver improved access to care to patients across the regional partnership.

## **Appendix One – SE Wales Collaborative Programme Governance and Roles**

The roles of the Portfolio Oversight Board, Steering Group and supporting Programmes are outlined below:

### **SE Wales Collaborative Portfolio Oversight Board:**

#### **Scope:**

The Portfolio Oversight Board (POB) will provide strategic direction to and seek assurance for the delivery of the agreed programmes within the regional portfolio to enable these services to provide safe, sustainable and equitable care across the region by optimising the collaborative opportunity.

#### **Role:**

The POB will provide the strategic direction as well as regional and local leadership for the regional programmes and to agree the programmes that should be included within the Portfolio. The POB will also seek assurance for delivery of the programmes within the portfolio against the agreed objective and milestones. The POB will provide assurance to Welsh Government of the partner UHBs' commitment to the development and delivery of effective regional service redesign and delivery.

## **SE Wales Collaborative Portfolio Steering Group:**

### **Scope:**

The Portfolio Steering Group (PSG) will ensure effective planning and coordination of the programmes within the regional portfolio and ensure the Programme Director, Health Boards lead reps and the programme managers are enabled to progress, at pace, the agreed programmes and supporting projects.

### **Role:**

The PSG will ensure the programmes:

- Develop clear objectives and measurable outcomes/benefits for each programme
- Develop consistent and joint approaches to communication, engagement and planning – at programme and implementation level
- Share workforce, infrastructure and other appropriate resources and, in doing so, get the best possible outcomes for all patients within the regional partners' catchment populations.

Specifically, the PSG will:

- Ensure that the appropriate governance and resources are appropriately identified for each of the programmes and secured from the appropriate sources within partner UHBs and expert national resources e.g. NHS Finance & Delivery Unit, Welsh Modelling Collaborative and Digital Health Improvement Wales lead reps to ensure that effective data extraction, demand and capacity analysis and operational modelling methodology is led and supported by these national expert teams across the programmes within the regional portfolio.
- Receive formal Programme Assurance Updates from each of the Programme Board leads to report to POB.
- Ensure the critical risks and interdependencies between the programme plans are clearly identified and either:
  - Explicitly managed within the relevant programmes' plans
  - Escalated to POB with a recommendation for action
- Ensure alignment in the planning and delivery of the Regional Portfolio with the partner UHBs' strategies and statutory corporate plans e.g. Strategic & Operational Programmes, IMTP/Annual Plans, Major and/or Discretionary Capital Business cases.

**Programme Boards:**

**Ophthalmology Programme -**

**Scope:** Regional Eye Service Model, Low Risk Cataract Centre

**Role:**

To develop the programme governance, programme plan and implementation plan to deliver agreed objectives and measurable outcomes agreed with the POB.

Specifically, the Programme will:

- Develop a clear programme plan with key milestones to meet the agreed objectives for the programme.
- Confirm the key products and timescales required within the programme plan e.g. stakeholder mapping, communications and engagement plan, development of service specification, options appraisal, business case(s), implementation plan
- Ensure that the appropriate governance and resources are deployed to enable the programme and supporting projects and/or workstreams (e.g. clinical modelling, digital, workforce, finance, estates) to operate effectively.
- Ensure that the critical activities to deliver the programme plan milestones are explicitly defined within project/workstream plans and allocated to appropriate leads with delivery timescale and outputs agreed (what/who/when).
- Ensure that risks and dependencies within the programme are clearly identified and reported with proposed mitigation or management plans or escalated to PSG if executive support is required.

**Orthopaedics Programme –**

Scope: TBC

Role: As Ophthalmology above.

**Diagnostics Programme –**

Scope: Projects include – Endoscopy, Pathology (Phase 1), Community Diagnostics Centres

Role: As Ophthalmology above