

<b>NWJCC FOUNDATION PLAN IMPLEMENTATION FRAMEWORK</b>						
<b>Strategic Priority</b>	<b>Unique Identifier (Strategic)</b>	<b>Unique Identifier (Local)</b>	<b>Outcome</b>	<b>Deliverable/Output</b>	<b>Milestone</b>	<b>Delivery Qtr</b>
<b>Strategic Priority 1: Development of a JCC Strategy</b>	<b>SP1</b>		Develop a 5/10 Year Strategy for the NWJCC			
				Strategy document for Joint Comitee approval	Strategy to Joint Committee Meeting	Q4
				Framework to support Joint Committee decision-making	Framework in Strategy	Q4
	<b>SP1</b>	AMB12	NHS 111 Wales commissioned capacity is aligned with demand	Strategic Demand and Capacity Report on NHS Wales 111		

					Completion of a scoping document that clarifies the process and dependencies for the review	Q3
	<b>SP1</b>	AMB5	Improved responsiveness to meet Health Board requirements in relation to ACCT and improve clinical outcomes for the population.	Report including proposals on ACCT service		
					Report to Joint Committee	Q3
					Recommendations arising from the review	IMTP
	<b>SP1</b>	AMB6	Deliver infrastructure and capacity improvements in relation to ACCT service.	Strategic Plan with recommendation to Joint Committee on future commissioning intentions for ACCT.		
					Strategic plan to Joint Committee	IMTP
	<b>SP1</b>	SS1	Commissioning of an optimum model for plastic surgery services.			

				Options appraisal proposed to SSCCG	Phase 1 outcome reported to SSCCG.	Q2
					Development of options appraisal, including feedback from provider and project board	Q2
					Recommended option presented to JCC for consideration	Q3
				Implementation plan presented to CCLG	Development of an implementation plan.	IMTP
	<b>SP1</b>	SS10	Mechanical thrombectomy services for the Welsh population are delivered closer to home			
				Development of model/pathway	Develop a Mechanical Thrombectomy service specification and policy.	Q3
					Proposal through Specialised Services Commissioning Group and to JCC following	Q3

					Work with designated provider to implement phase 1 of the Mechanical Thrombectomy service.	IMTP
	<b>SP1</b>	SS14	Commissioning implications of the Women's Health Plan are understood by the JCC	Womens health plan implementation requirements made explicit within JCC IMTP		
					Understand the requirements of the plan and how it relates to JCC commissioned services.	Q4
					Womens Health Plan implications built into planning for IMTP	IMTP
	<b>SP1</b>	SS15	Commissioned capacity is aligned with demand for unit-based Haemodialysis across Wales.			
				Undertake a demand and capacity analysis.	Demand & capacity Report to appropriate governance structure.	Q4

				Unit Dialysis implementation plan	Develop an appropriate Unit Dialysis model to meet demand.	Q4
				Commissioning policy & service specification	Re-fresh current Commissioning Policy and Service Specification.	IMTP
	<b>SP1</b>	SS16	To increase Home Dialysis.	Implement the Value in Healthcare objectives linked to increasing Home Dialysis		
					Milestones aligned with ViH Programme	Q4
					Commissioning Strategy, Service Specification through appropriate governance	Q3
				Home Dialysis Framework		IMTP
	<b>SP1</b>	SS17	Optimum services are commissioned for the Welsh population on organ donation and transplantation.	Refresh Transplantation Commissioning Policy and Service specification.		

					Get it Right First Time (GIRFT) recommendations implemented.	Q4
					Commissioning policy & service specification for approval through appropriate governance route.	Q4
	<b>SP1</b>	SS18	Strengthen National approach on information technology through the development of a Kidney Digital Strategy.	Digital Kidney Strategy recommended through appropriate governance route following review		
					Development of Kidney Digital Strategy	Q4
					Kidney Digital Strategy through appropriate governance route.	Q4
			A		Implementation of strategy & agreed approach to the use of digital in supporting the commissioning and delivery of renal services.	IMTP

	<b>SP1</b>	SS19	Linked with SS18	Achievement of milestones in ViHC Kidney Programme.		
					Reconfirm plan required to increase number of patients receiving a) transplantation b) home dialysis.	Q4
					Monitor implementation of regional value in healthcare programmes, taking remedial action as required.	IMTP
	<b>SP1</b>	SS3	Welsh residents have equitable access to effective treatments (ATMPs) to maximise survival and quality of life.	ATMPs commissioned in line with guidance		
					Develop commissioning policies	Q4
					Work with stakeholders to commission pathways and designate providers	IMTP

	<b>SP1</b>	SS4	PET indications are available to the Welsh population leading to improved patient outcomes	Commissioning policy for PET	Update PET commissioning policy.	IMTP
				Commission additional indications	Update appropriate contracting arrangements with provider	IMTP
<b>Strategic Priority 2: Centre of Commissioning Excellence</b>	<b>SP2</b>		<b>The JCC will become the Centre of Commissioning Excellence on behalf of NHS Wales</b>			
				NWJCC Strategy to identify best practice and route map to achieve centre of excellence.		Q4
					Early engagement with stakeholders and staff will take place in order to develop the vision and approach.	Q2
					Development of a commissioning maturity matrix.	Q3

<b>Strategic Priority 3: Population Health Perspective</b>	<b>SP3</b>		<b>Population health based commissioning will underpin the work undertaken by the NWJCC through an increased population health perspective</b>			
				Sessional time secured from a public health consultant	Discussion with PHW and secured staff member	Q1
					Appoint an Assistant Medical Director for Public Health, increasing leadership and influence in decision making within the organisation.	Q3
					With Public Health Wales develop a support and development framework that will further strengthen and embed a population health approach.	Q4

<b>Strategic Priority 4: Strategic Service Reviews</b>	<b>SP4</b>		<b>Strategic Service Review to determine the optimal service configuration to ensure efficient, sustainable model to support outcomes for patients.</b>			
<b>Cardiac Service Review</b>	<b>SP4.1</b>		Cardiac services are reviewed for optimum commissioning/value/productivity/su stainability	Recommendatio ns arising from review used to inform commissioning intentions for IMTP		
Note dependency on SS5 & SS6 until this review has concluded and made recommendations					Develop the scope of the review	Q1
					Identify & appoint project team	Q1
					Develop PID	Q2
					Demand and Capacity review	Q3
					Review 2018 Thoracic services review	Q2
					Report with recommendations on optimum service model to Joint Committee	Q4

					Develop options for future model (inc workforce, digital and informatics requirements) - leading to a preferred model	IMTP
	<b>SP4.1</b>	SS2	Commissioning position on thoracic services.	Revisit process and decision from 2018 review alongside Cardiac Review		
					Formal consultation and engagement of any proposed changes.	Q4
	<b>SP4.1</b>	SS5	Equity of access for Welsh patients requiring cardiac devices and provision of care closer to home.	Consistent commissioning model for cardiac devices.		
					Review current provision across Health Boards.	Q3
					Detailed analysis of current provision and allocated resource, highlighting inequity and variation.	Q3

					Assess impact of differential arrangements and work to establish a consistent commissioning model, underpinned by agreed baselines.	Q4
					Report to Specialist Services Commissioning Group.	Q4
	<b>SP4.1</b>	SS6	Identify optimal commissioning and delivery models for <b>cardiac surgery and TAVI</b> activity, to improve outcomes and efficiency <i>Dependency – cardiac review needs to conclude first</i>	New commissioning policy		
					Proposal for optimum commissioning and delivery model to SS Commissioning Group	IMTP
<b>Neonatal Service Review</b>	<b>SP4.2</b>	SS12	Neonatal Model to be reviewed for optimum commissioning/value/productivity/sustainability	Recommendations arising from review to inform commissioning intentions for		

				JCC & Health Board IMTPs		
					Develop the scope of the review	Q1
					Identify & appoint project team	Q3
					Develop PID	Q3
					Revisit Phase 1 Demand and Capacity analysis	Q4
					Develop implementation plan	IMTP
	<b>SP4.2</b>	AMB9	A sustainable service that supports the safe transport of babies when necessary.			
				Commissioning of a sustainable and efficient neonatal transport service for South Wales provided 24 hours a day.	Interim arrangements to ensure service continuity whilst strategic review is undertaken	Q3

					Proposal on future service configuration is dependent on the wider Neonatal Services strategic review.	IMTP
<b>Ambulance Model Review</b>	<b>SP4.3</b>		Ambulance Model to be reviewed for optimum commissioning/value/productivity/sustainability			
				Report to include recommendations on optimum service model for Ambulance Services	Develop the scope of the review	Q1
					Identify project team	Q1
					Develop PID	Q1
					Develop implementation plan	Q3
					Report to Joint Committee	Q4
	<b>SP4.3</b>	AMB1	Produce a commissioning vision for Ambulance Services to enhance productivity of Emergency Ambulance Services			

				Commissioning Vision Statement for Ambulance Services	Vision Statement to Joint Committee	Q4
	<b>SP4.3</b>	AMB13	Patients can access the right information via digital platform in a timely manner			
				Develop the online infrastructure for NHS 111 Wales.	Consider urgent care policy direction from Welsh Government	Q4
					Work with the provider to ensure an appropriate update and refresh of the NHS 111 Wales website including how the public access the service	Q4
					Update and improve symptom checker including opportunities for technology	Q4
					Relaunch the NHS 111 Wales website	Q4
	<b>SP4.3</b>	AMB2	Reduction in Ambulance hand-over delays resulting in improved ambulance response times for the population.			

				Revised ambulance performance measures to support implementation of MAG recommendations	Development of a performance dashboard	Q2
	<b>SP4.3</b>	AMB3	Patients will have the right response from the Ambulance Service resulting in improved clinical outcomes for patients.	Performance dashboard		
				The development and implementation of the evolved clinical response model	Appointment of evaluation team	Q1
					Development of quality and performance metrics	Q1
	<b>SP4.3</b>	AMB10	Existing capacity aligned to demand for NHS 111 Wales			
				Right size NHS 111 Wales Service capacity to respond to demand	Roster review	Q2

					Assurance that revised roster is implemented by WAST	Q4
<b>Mental Health Service Review</b>	<b>SP4.4</b>		Mental Health service model to be reviewed for optimum commissioning/value/productivity/sustainability			
				Recommendation on optimum service model for Mental Health Services	Develop the scope of the review	Q1
					Identify project team	Q1
					Develop PID	Q1
					Develop implementation plan	Q3
	<b>SP4.4</b>	MHLD1	Commissioned activity for patients in medium secure placements (adults) and CAMHs (Tier 4) are optimised.			
					Explore alternative funding models for various commissions	Q2

				New contractual model agreed	Discuss possible commissioning options with relevant providers in order to agree the most appropriate way forward.	Q3
					Consider provider risks/impact of implementing alternative models, such as, occupancy-based funding.	Q3
					Introduce new agreed commissioning arrangements	IMTP
	<b>SP4.4</b>	MHLD2	NHS Wales capacity is optimised for JCC commissioned mental health in-patients.			
				Bed utilisation in NHS Wales is optimised and prioritised before out of area placements are made	Implementation Plan developed with providers to increase repatriation and mitigate any blocks to admission	Q3

					Implementation of agreed new commissioning arrangements.	IMTP
	<b>SP4.4</b>	MHLD3	All MHL D services commissioned by the NWJCC are reviewed to ensure optimum commissioning.			
				Systematic approach is in place that will ensure continuous review of MHL D services commissioned by the NWJCC (starting with Perinatal).	Collect regular and relevant data for each commissioned service.	Q2
					Development of programme for systematic review	Q2
					Complete and publish report relating to first review completed in this portfolio (Perinatal demand and Capacity)	Q1

					Regularly review and evaluate the data provided.	Q2
					Complete reviews of other portfolio services (Neuropsychiatry, Eating Disorder Outreach, Forensic Adolescent Consultation Service)	Q4
					Implications of reviews to be considered in IMTP	IMTP
	<b>SP4.4</b>	MHLD4	MHLD commissioning is driven by robust performance & activity data to inform Commissioning			
				Data dashboard	Agree relevant data set for all commissioned services	Q2
					Data to be collected from all relevant services at regular intervals.	Q2
					Development of a single dashboard.	Q4

					Data will be reviewed, analysed and utilised for performance management and future commissioning.	IMTP
	<b>SP4.4</b>	MHLD5	Repatriation of medium-secure case management to NWJCC to enable the provision of a consistent service across NHS and independent services.			
				Directly employed case managers within the JCC	Consider and address any TUPE implications with CTM	Q2
					Define process for repatriation of case management personnel from relevant Health Boards.	Q3
					Enact re-alignment of employment subject to agreement and following due HR processes as required.	Q4

	<b>SP4.4</b>	MHLD6	More inclusive services for those with Learning Disability or Neuro-Divergence.			
				Revised MHLD service specifications	Review service specifications for commissioned services to ensure that neurodiverse people and People with a Learning disability have equitable access to services	Q3
					Implement all revised specifications	Q4
					Commence a process to ensure that services are enabled to treat and care for neuro divergent people and people with a Learning Disability.	IMTP
	<b>SP4.4</b>	MHLD7	All MHLD services are commissioned and monitored against agreed policies and specifications.			
				Complete suite of service specifications	Work with Governance team to review policies.	Q2

					Review specifications and policies relating to commissioned services to ensure all are up to date and remain relevant.	Q3
					Ensure all policies are up to date.	Q4
<b>Strategic Priority 5: Pathway and Referral Management</b>	<b>SP5</b>		Develop a Framework for referrals to English providers to ensure value, quality and equity.			
				Agree and implement new commissioning and delivery models.	Develop scope review	Q1
				Referral Framework	Identify project teams	Q1
					Develop PIDs	Q2

					Develop implementation plans	Q3
<b>Strategic Priority 6: Manchester Arena</b>	<b>SP6</b>		<b>Enable a NWJCC Commissioner response to the Manchester Arena Inquiry</b>			
				Commissioner response to 106 recommendations from MAI review	Develop review scope	Q1
					Identify project teams	Q1
					Develop PIDs	Q1
					Develop implementation plans	Q3
					Seek legal advice on recommendations	Q1
					Broader assessment workshop with WG/DOPs	Q2
					Commission & undertake independent assessment	Q3
					Proposed response to Joint Committee for approval	Q3

					Formally respond to WAST on recommendations	Q4
<b>Strategic Priority 7: Focus on Benchmarking and Contracting</b>	<b>SP7</b>		<b>Services commissioned by the JCC will be compared to those elsewhere in Wales and the UK to ensure cost parity, access equity and performance equality.</b>			
		<b>B&amp;C 7.4</b>			<i>Develop scope for the Immunology review</i>	Q1
		<b>B&amp;C 7.2</b>			<i>Develop scope for Cystic Fibrosis Review</i>	Q1
		<b>B&amp;C 7.3</b>			<i>Develop scope for Ambulance Review</i>	Q1
		<b>B&amp;C 7.1</b>			<i>Develop scope for ALAS Review</i>	Q1
					Identify project team	Q1
					Develop PID	Q2
					Develop implementation plan	Q3
	<b>SP7</b>	AMB11	Maximise the productivity of NHS 111 Wales commissioned capacity.			
				Report on Productivity Review	Scope on Review of productivity of revised arrangements	Q1

					Recommendations on maximising productivity to Ambulance/111 Commissioning Group	Q3
	<b>SP7</b>	AMB14	Revision of EMRTS Commissioning Framework.			
				Revised commissioning framework	Review the current commissioning framework against the current expanded service	Q2
					Work with EMRTs & host body to update framework as necessary	Q2
					Present draft revised framework to EMRTs DAG	Q3
	<b>SP7</b>	AMB8	Optimise resource capacity to increase the availability of NEPTs resources to respond to planned care and patient discharge requests			
				Joint Improvement Plan to improve efficiency with WAST & HBs on NEPTs	Support provider to undertake a review of current rostering practices.	

					Assurance that revised roster is implemented by WAST	
	<b>SP7</b>	AMB9	Improved access to high quality non-emergency patient transport through system integration and efficiency gains.			
				Milestones for achievement of the NEPTs Future Vision set for WAST	Agreement of milestones for WAST to support delivery	Q2
					Seek assurance from WAST on achievement of milestones	IMTP
<b>Strategic Priority 8: Continuing Healthcare and Third Sector</b>	<b>SP8</b>		<i>Between plan endorsement and implementation planning, the request to JCC has been withdrawn by Welsh Government.</i>			
<b>Legacy Priorities</b>	<b>LP</b>		<b>Urgent focus required on priority areas to address temporary service change or mitigate high risk from legacy or existing plans</b>			

		LPAMB7	Delivery of NEPTs Future Vision to improve access to high quality patient transport through system integration and efficiency gains.			
				NEPTS Future Vision Statement approved by Joint Committee	Future Vision Statement	Complete
		LPSS14	Equitable access to Specialised Paediatric Ophthalmology for the population of Wales.			
				Recommendations to Specialised Services Commissioning Group and then to JCC on commissioning model	Development of future model	Q3
					Proposal for implementation to SS Commissioning Group	IMTP
		LPSS8	To designate a provider for the Specialist Auditory Implant Device Service for South East Wales, South West Wales and South Powys.			

				Contracts realigned	Realignment of contract	Q2
					Conclude temporary service arrangements	Q3
				Permanent provider established	Conclude designated provider process	IMTP
				New model designed	Consider any implications that may require engagement/consultation	IMTP
		LPSS9	A Functional Neurosurgery Service for Welsh residents with movement disorders is secured.			
					Conclude temporary arrangements.	Q3
				Proposal to JCC on designated provider against agreed service model	Develop future policy, service model and service specification.	Q4
				Proposal to JCC on designated provider against agreed service model	Go out to designated provider process.	IMTP

					Consider any implications that may require engagement/consultation	IMTP
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