



Agenda Item
4.2

Quality Safety and Outcomes Sub-Committee

Director of Commissioning for Specialised Services

Dyddiad y Cyfarfod / Date of Meeting	31/03/2025
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	Not Applicable
Awdur yr Adroddiad / Report Author	Senior Planning Managers and Quality Leads for Cancer & Blood, Cardiac, Neurosciences & Long-Term Conditions and Women & Children Commissioning Portfolios
Cyflwynydd yr Adroddiad / Report Presenter	Melanie Wilkey, Director of Commissioning for Specialised Services
Noddwr yr Adroddiad / Report Sponsor	Melanie Wilkey, Director of Commissioning for Specialised Services.

Pwrpas yr Adroddiad / Report Purpose	For Noting Choose an item.
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Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group)		
Committee / Group / Individuals	Date	Outcome
	Click or tap to enter a date.	Choose an item.

Acronyms / Glossary of Terms	
BCUHB	Betsi Cadwaladr University Health Board
CABG	Robotic coronary artery bypass graft
CHI	Congenital hyperinsulinism

CQC	Care Quality Commission
CUBRIC	Cardiff University Brain Research Imaging Centre
CVUHB	Cardiff and Vale University Health Board
DBS	Deep Brain Stimulation
GMC	General Medical Council
GOSH	Great Ormond Street Hospital
HEIW	Health Education Improvement Wales
IMTP	Integrated Medium Term Plan
JCC	NHS Wales Joint Commissioning Committee
LHCH	Liverpool Heart and Chest NHS Foundation Trust
MHRA	Medicines and Healthcare products Regulatory Agency
MWLNT	Mersey and West Lancashire NHS Trust
NBT	North Bristol NHS Trust
NHSE	National Health Service England
NMTR	National Major Trauma Registry
PDOC	Prolonged Disorder Of Consciousness
PET-CT	Positron emission tomography computerised tomography
PETIC	Positron emission tomography Imaging Centre
PICU	Paediatric Intensive Care Unit
PRRT	Peptide Receptor Radionuclide Therapy
PSMA	Prostate-Specific Membrane Antigen
QSO	Quality, Safety and Outcomes Sub-Committee
RTT	Referral to Treatment Targets
SBUHB	Swansea Bay University Health Board
SLT	Senior Leadership Team
SRH	Salford Royal Hospital
SWTN	South Wales Trauma Network
TARN	Trauma Audit and Research Network
UCLH	University College London Hospital
WHSSC	Welsh Health Specialised Services
WIMOS	Welsh Institute of Metabolic and Obesity Surgery

1. SITUATION/BACKGROUND

The Joint Commissioning Committee (JCC) plans and commissions specialised and tertiary services on behalf of Local Health Boards (LHB) in order to reduce duplication and ensure consistency.

This report provides the Quality Safety and Outcome Sub Committee (QSC) with an update on the work of the specialised services commissioning portfolios for:

- Cancer & Blood,
- Cardiac,
- Intestinal Failure,
- Neurosciences & Long-Term Conditions; and
- Women & Children

Incident and Concerns related to specialised services are reported in agenda item 4.5.

2. SERVICES IN ESCALATION

There are currently two specialised services in escalation and are summarised as follows. These are also reported in the Joint Commissioning Committee Risk Register.

2.1 Neonatal Services and Paediatric Intensive Care Double Escalation Meeting

The last double escalation meeting took place on 18 March 2025. The Health Board presented their PICU progress against the agreed actions and objectives and this was noted by the NWJCC. The escalation level was discussed in the Women and Children's commissioning team meeting on 19 March 2025. The team agreed that improvements have been made against the agreed actions and objectives, therefore, the decision was made to de-escalate to level 2. Whilst improvements were noted it was decided that further sustained progress is required, prior to considering de-escalation of the NICU service so this will remain in Level 3 escalation. The team from CVUHB are due to provide a detailed update to the JCC QSOC committee at today's meeting.

2.2 Salford Royal Hospital Obesity Surgery

Patients from Betsi Cadwaladr University Health Board (BCUHB) and North Powys awaiting obesity surgery procedures have had their treatment delayed as a result of waiting times for the service provided by Salford Royal Hospital (SRH). The JCC has previously agreed that a portion of the resource allocated to Swansea Bay University Health Board (SBUHB) may be used to support the recruitment of an additional dietician, thereby enabling the Welsh Institute of Metabolic and Obesity Surgery (WIMOS) to undertake a number of additional procedures for BCHUB and North Powys patients (c.15 per annum). The recruitment is complete; WIMOS is working with BCUHB to develop and implement the pathway and a visit is planned in April 2025 to meet with WIMOS colleagues and monitor its delivery.

The Salford Royal have consistently reported an increase in the total number of patients waiting and the number of patients waiting over 36 weeks. Given the underperformance and the lack of assurance provided by Salford Royal, the recommendation of the Commissioning Team to escalate the service to Level 3 of escalation framework was endorsed by SLT on 8 January 2025, and the steps mandated by the framework are now in progress. The escalation trajectory for this service can be found **Appendix 1** of the document the expectation of which will be shared with the JCC through the QSO Chair's report.

3. COMMISSIONING RISKS

The Specialised Services Commissioning Teams manage a portfolio of risks by means of the organisational risk register, reporting risks and any services placed in escalation. In addition to the services in escalation the following risks are highlighted to be of particular note to the Quality, Safety and Outcomes (QSO) Sub-Committee and have been reported to the Joint Commissioning Committee on the 21st January 2025. The full Joint Commissioning Committee Risk Register is presented as item 3.1 of the agenda.

3.1 Cancer and Blood Commissioning Risks

3.1.1 Plastic Surgery waiting times South Wales

There are currently plastic surgery patients with longer waits than the current target of no patients waiting longer than 104 weeks by March 2025. Swansea Bay UHB is utilising planned care funding from Welsh Government to implement its delivery plan to treat all patients in the breach cohort by March 2025. At the time of writing, the commissioning team has been advised by the plastics service that they are confident of achieving the target by the end of March. There will be significant risk to sustaining the target through 2025/26 in the absence of further additional funding above contract baseline.

3.1.2 Plastic surgery outreach clinics in North Wales

A meeting was held between Mersey and West Lancashire NHS Trust (MWLNT) and the JCC on the 14 February 2025, unfortunately BCUHB were unable to attend. At the meeting the funding of the outreach service for 2024/25 was resolved and it was agreed that a task & finish group would be set up to develop the proposal for 2025/26. It was agreed that progress would be reported back to a further executive level meeting on 24 March 2025.

3.1.3 PET-CT for prostate cancer

There are currently delays in access to Positron Emission Tomography (PET) for prostate cancer for patients in south east Wales due to constraints in the supply of the radioisotope Prostate-Specific Membrane Antigen (PSMA) at the PET Imaging Centre (PETIC). Waits are currently in excess of 6 weeks against the target of 10 working days. PETIC, usually manufactures its own PSMA however at present is not currently able to do so due to a possible quality issue which remains under investigation. Due to wider national supply constraints for PSMA it has not been possible to source PSMA from elsewhere. An action plan is in place to mitigate the impact on patients as much as possible. In order to provide equitable access to the service support is being provided from the PET service in Swansea which has contracts with alternative PSMA suppliers. At a meeting with the clinical and PET teams chaired by the JCC Medical Director took place on the 20 March 2025 agreed a prioritisation process, so the highest priority patients are given access to a scan in an equitable time frame. Swansea are in the process of securing one or two additional days per week of their mobile PET scanner. The actual number will be dependent on having the demand for other PET scans to fill

the available capacity. The service in Wrexham has also offered support. Taunton may be able to scan up to 10 patients per week and PETIC has arranged a contract for patients to be able to be seen there. PETIC staff will offer patients the option for quicker access to a scan in Taunton if they are able to travel. The lead clinicians from across South Wales have agreed to a prioritisation process across the area to ensure equity of access. PETIC is expecting the feedback from MHRA on the results of the investigation into the quality issue for the supply of PSMA. If they are content, then it is expected that production will restart from early April, albeit that some of these contingency arrangements will need to remain in place until the backlog is cleared.

3.2 Cardiac Commissioning Risks

3.2.1 Trauma Audit and Research Network (TARN) delays

Following the TARN database being taken offline in June 2023 as the result of a cyber-attack, there have been delays in implementing both interim arrangements and a sustainable long-term solution for the South Wales Major Trauma Network, resulting delays to the availability of reporting (e.g. quarterly dashboards, clinical reports and TARN analytics). This has impeded the ability of the Network to monitor the implementation of the Programme Business Case and benchmark performance. With the National Major Trauma Registry (NMTR) now being available to colleagues from the South Wales Major Trauma Network and Major Trauma Centre, a portion of this risk has been mitigated, although there remain concerns arising from historical reporting and benchmarking that has led to agreement that the risk will be retained until sufficient reporting data for comparative analysis is available (c.6-12 months).

4. ADDITIONAL COMMISSIONING TEAM HIGHLIGHTS FOR CONSIDERATION

4.1 Neurosciences and Long-Term Conditions

4.1.1 Deep Brain Stimulation (DBS)

Following the suspension of the North Bristol NHS Trust (NBT) DBS pathway in 2023, a temporary pathway was agreed for patients at University College Hospital London, with elements of the pathway provided by Cardiff and Vale University Health Board at the Cardiff University Brain Research Imaging Centre (CUBRIC).

Following assurances provided by colleagues in North Bristol NHS Trust, the Commissioning Team are working with the Nursing and Medical directorate to confirm the process and communications for the re-opening of the DBS pathway and a paper is due to be considered by the Senior Management Team next week.

An extension of the pathway provided by University College Hospital London and Cardiff & Vale University Health Board has been agreed by the Senior Leadership team to ensure continuity of care until the formal process to designate a provider of DBS services for South Wales patients is concluded. The designation process will commence on conclusion of the temporary urgent service change and will

take approximately 6 months. A formal process to designate a permanent provider(s) of DBS services for South Wales patients will take place in the future.

4.1.2 Neuro-rehabilitation

It is pleasing to report that the leak previously reported has now been repaired and the two beds have re-opened. There are however ongoing issues with the lift however they are in process of undertaking the repairs.

4.1.3 South Wales Specialist Auditory Implant Device Service

The Specialist Auditory Implant Device Service has been subject to ongoing staffing challenges, resulting in a risk that South Wales patients requiring a Cochlear Implant or Bone Conduction Hearing Implant are unable to access the service in a timely manner. The health board has been asked to provide information by the 24th March, the outcome of which will inform the recommendation to put the service into escalation. The health board were planned to provide a designated provider submission to the JCC in February 2025, the submission has not yet been received.

4.1.4 Postural Mobility Service in North Wales – Bryn y Neuadd Building Condition Concerns

The service provided by BCUHB has highlighted ongoing estate issues on the Bryn Y Neuadd site at Performance and Assurance meetings with the commissioning team. It is currently on the Service's risk register and has been escalated through the Service Level Agreement meetings.

There is a risk that the condition of the Bryn y Neuadd site will further deteriorate and impact on the provision of the service. The health board has completed a condition assessment. The JCC has requested a copy of the report and following review will consider adding it to the commissioning team risk register, as proposals for capital investment to date have been unsuccessful.

4.1.5 South Wales Mechanical Thrombectomy Capacity

In January 2024, the WHSSC Joint Committee approved a Phase 1 investment for the Delivery of Mechanical Thrombectomy Capacity in south Wales to provide a Monday to Friday 9-5pm service at Cardiff & Vale Health Board with the North Bristol NHS Trust providing a wraparound service from 6am-9am and 5pm to midnight. A further 3 phases are planned to support an increase in service availability from Monday 9-5pm to 24 hours 7 days/week. There is currently inequitable service provision as North Wales patients have access to a 24 hour 7 days/week Mechanical Thrombectomy Service through the Walton Centre.

Cardiff and Vale University Health Board has submitted a benefits realisation and workforce plan prior to the phase 1 funding release planned for quarter 4 (2024-25). The benefits realisation plan proposes a delayed Q1 (2025/26) start. The JCC is meeting with the health board fortnightly and are awaiting formal notification from the health board regarding the delay and proposed start date.

4.2 Cardiac

4.2.1 Cardiac Surgery

Following a General Medical Council (GMC) visit in November 2024 and information received from Health Education Improvement Wales (HEIW), Cardiac surgery at University Hospital Wales was placed into GMC enhanced monitoring. The Clinical Board has outlined a plan to the JCC on how they intend to develop the trainer and mentorship capacity; implementation is being monitored by the Cardiac Commissioning Team by means of bi-monthly Cardiac Services Risk and Assurance meetings, with the most recent meeting indicating progress against the aforementioned plan.

4.2.2 Liverpool Heart and Chest Hospital

The Robotic Coronary Artery Bypass Graft and Mini Mitral Surgery Service has been suspended due to staffing pressures and waiting list has also been closed to new referrals. LHCH have also advised Directors of Nursing Spec Comm of significant pressures in delivering mini mitral valve repair. Patients have been offered alternative surgery providers. The position for Welsh patients will be monitored through the commissioning team and also through the SLA with the provider. A harm review process is in place, no harms reported thus far.

5.0 NHS ENGLAND SPECIALISED COMMISSIONING, HEALTH AND JUSTICE, AND ARMED FORCES NATIONAL QUALITY AND GOVERNANCE GROUP

The above group last met on the 19 March 2025. There are no findings to be reported.

6. ASSESSMENT

Objectives / Strategy	
Dolen i Amcan (au) Strategol CBC / Link to JCC Strategic Objectives(s)	Ensure Quality
	Improve Equity and Population Health
Dolen i Ddeddf Llesiant Cenedlaethau'r Dyfodol – Nodau Llesiant / Link to Wellbeing of Future Generations Act – Wellbeing Goals 150623-guide-to-the-fg-act-en.pdf (futuregenerations.wales)	A Healthier Wales
	A More Equal Wales
Dolen i Hwyluswyr Ansawdd	Learning, Improvement & Research Leadership

(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Enablers of Quality (Duty of Quality Statutory Guidance (gov.wales))	
Dolen i Feysydd Ansawdd (Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Domains of Quality (Duty of Quality Statutory Guidance (gov.wales))	Effective
	Efficient Equitable Person Centred Timely Safe
Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)	No - Not Applicable

Impact Assessment		
Ansawdd Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? / Quality Have you undertaken a Quality Impact Assessment Screening?	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	Individual Quality Impact Assessments are carried out as necessary and can be requested.
Cydraddoldeb Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb? / Equality Have you undertaken an Equality Impact Assessment Screening?	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	Individual Equality Impact Assessments are carried out as necessary and can be requested.
Cyfreithiol / Legal	There are no specific legal implications related to the activity outlined in this report.	

Enw da / Reputational	Yes (Include further detail below)
	Reputational impact of delivering those activities delegated to the NHS Wales Joint Commissioning Committee
Effaith Adnoddau <i>(Pobl /Ariannol) /</i> Resource Impact <i>(People / Financial)</i>	Yes (Include further detail below)
	Any resource implications associated with current specialised commissioning activities described in the in the paper are described within the body of the text

7. RECOMMENDATIONS

The Quality, Safety and Outcomes Sub Committee is asked to:

- **Note** the specialised commissioning updates summarised in this report; and
- **Note** the summary of specialised risks described and escalate as necessary.

8. NEXT STEPS

Further updates will be provided at future meetings and monitored through the commissioning teams.