

Summary report of the Cross Border Network meetings on 8 September 2015 and 9 November 2015

Introduction

1. In its report, [Cross-border health arrangements between England and Wales](#) of 12 March 2015, the House of Commons Welsh Affairs Committee set out a number of recommendations in support of closer working between the NHS in England and the NHS in Wales for the benefit of patients along the border.
2. The UK Government's [response to the report](#) highlighted work between NHS England and the Welsh NHS to refresh the NHS Cross Border Network. This network had previously existed for a number of years but had latterly fallen into abeyance.
3. The NHS Cross Border Network met again in Cardiff on 8 September 2015. At this meeting new terms of reference were discussed and the appointment of a joint chair from NHS organisations in England and Wales was agreed. It was also agreed to seek membership to the network from patient representative groups in both countries.
4. In order to facilitate communications to the broad range of commissioning, provider and patient organisations on both sides of the border, the network secretariat will produce a summary report from the meetings for onward cascade by the membership. Initially, it was proposed to publish this report on a biannual basis but, at the most recent meeting of the network on 9 November 2015, this position was revised so that regular summary reports following every meeting will be produced.
5. This report is presented as a summary of both the September and November meetings of the NHS Cross Border Network. As such, combined updates will be made on matters which were discussed at both meetings under those headings.

Terms of reference

6. The terms of reference (TOR) for the NHS Cross Border Network were discussed at the meeting in September and agreed at November's meeting.
7. It was agreed to:
 - Appoint a joint chair across the NHS in England and Wales, to lead the meetings alternately.
 - Seek representation from patient groups in England and Wales although – due only to the relatively large size of the network – the offer of one seat each would be made to Healthwatch organisations and Community Health Councils along the border. A letter requesting representation was sent from the secretariat to the chief executives of both organisations.

- Revise the governance structure of the network into diagrammatical form to set out the nature of the network, its core membership and to reflect the fact that it is not a decision making forum and is therefore reliant on the cascade of information by its members. This governance structure is set out at annex A of the TOR and at annex A of this report.
- It was agreed that representation at the meeting would also be sought from specialised services commissioners in England and Wales. This will be finalised in due course.
- In order to maintain a reasonable meeting size it was agreed that representation from organisations wider than the core membership would need to be determined by the agenda and invitations extended to those people on that basis.
- It was agreed the network would need to reflect a balanced representation from both sides of the border but that, as a minimum, it would be quorate when the four border clinical commissioning groups (CCGs) and three local health boards (LHBs) were represented.
- Meetings take place on a quarterly basis and the schedule of meetings has been set in advance for one year. The chair and secretariat arrangements will be reviewed at the end of this period and the TOR will be revised if required.

Proposed changes to the current cross border arrangements

8. The current cross border protocol between the Welsh Government (WG) and NHS England sets out the arrangements for English and Welsh patients registered with GP practices on the opposite side of the border to where they live. The protocol seeks to ensure smooth and efficient interaction between the English and Welsh NHS to support better patient outcomes and avoid the fragmentation of care.
9. However, in accordance with section 13(1A) of the NHS Act 2006 (as amended by the Health and Social Care Act 2012), the secondary care for English cross-border patients is the responsibility of CCGs. As such, changes to arrangements for English patients now need to be set in train.
10. The current proposal to extend an referral assessment service (RAS) in Shropshire to direct approximately 21,000 English patients registered with Welsh GP practices into secondary care services commissioned by their respective CCGs, should they so choose.
11. The Cross Border Network provides strategic oversight of this project and CCGs and LHBs are collaborating through this forum to scope and plan the required changes to the protocol arrangements.
12. The WG has always been clear that these arrangements should place no additional administrative or financial burden on Welsh GPs. WG has also been

clear that the Welsh Minister for Health and Social Services must agree to the proposed GP referral process for English residents.

13. At the network meeting in September the WG requested assurance on behalf of the minister that the proposed arrangements would have no negative consequences on the quality or safety of patient care.
14. Work to provide this assurance was taken forward by the project Implementation Task & Finish (IT&F) group which has membership from LHBs, CCGs and GPs on both sides of the border.
15. The IT&F presented a report at the network meeting in November giving this assurance.
16. However, the IT&F also reported that mapping community services in any detail would be too great a task to undertake by the end of 2015/16 and recommended that this work be taken forward into 2016/17 supported by an agreed set of principles to ensure that commissioning and financial flows were clearly set out for these services.
17. The WG explained that, in order to satisfy the minister and gain his agreement to take the proposal forward, there needed to be assurance that all pathways had been fully mapped, including community services.
18. The meeting resolved that the IT&F would, in partnership with WG, undertake an initial scoping exercise for community services and together prepare a paper for the minister detailing their findings.
19. The next meeting of the IT&F is scheduled for early December where the details of this paper will be agreed.
20. It is hoped that application can then be made to the minister seeking his approval of the proposal and agreement to proceed to pilot these new arrangements.

Update on response to the Welsh Affairs Committee

21. A report by the Welsh Affairs Committee (WAC) on the healthcare arrangements across the Welsh/English border was published in March 2015. The report issued 10 recommendations encouraging the Department of Health (DH) and the WG to work more closely together.
22. DH has worked with WG to produce a response which underlines this commitment.
23. The response was published on 10 September 2015 and can be accessed [here](#).

Policy differences log

24. A policy differences log document, which identifies the main policy differences for services in England and Wales, was drafted by the Cross Border Network some time ago.

25. The document sets out in detail the key differences in the healthcare systems between England and Wales.
26. It was agreed that this document should be regularly updated and changes brought back to the network as a useful way in which to monitor changes to commissioning policy that may impact patients on either side of the border.
27. The network discussed and agreed the need to review the document in light of the proposed changes to protocol arrangements.
28. The network also agreed to publish a simpler and more patient facing version of the document.

Next meeting

29. The next meeting of the NHS Cross Border Network will take place on Monday, 8 February 2016.

Annex A: Cross Border Network - governance arrangements to support decision-making



