

Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg University Health Board Your Ref/Eich cyf: Our Ref/Ein cyf: Date/Dyddiad: Tel/ffôn: Fax/Ffacs: Email/ebost: Dept/Adran:

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<u>greg.dix@wales.nhs.uk</u> Executive Directorate

Mr. Daniel Price, Chief Officer, Cwm Taf Morgannwg CHC, Ty Antur, Parc Navigation, Abercynon. CF45 4SN

Electronic response via email – no hard copy to follow

Dear Daniel,

Re:- Cwm Taf Morgannwg Community Health Council – Waiting times for elective surgery, the patients' / carers' experience report

Firstly we would like to thank Cwm Taf Morgannwg Community Health Council for sharing the 'Waiting times for elective surgery – The patients' / carers' experience report' which identifies for Cwm Taf Morgannwg (CTM) residents, what we know to be a distressing experience for a number of people who are waiting for elective surgery within the Health Board.

The recovery of elective services post-COVID at CTM remains a challenge particularly as COVID remains active both within our communities and within the Hospital.

To address the delays we know our patients are experiencing, a number of actions are in place which we would like to share to enable the recovery of surgical services and ensure patients get treated as quickly as possible.

Protected Surgical Beds

On two of the acute Hospital sites, there are a number of protected elective surgical beds, with plans for the third Hospital to mirror this model. This means that only patients requiring elective surgery are admitted to the wards.

Croeso i chi gyfathrebu â'r bwrdd iechyd yn y Gymraeg neu'r Saesneg. Byddwn yn ymateb yn yr un iaith a ni fydd hyn yn arwain at oedi.

You are welcome to correspond with the health board in Welsh or English. We will respond accordingly and this will not delay the response.

Cyfeiriad Dychwelyd/ Return Address:

Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg, Pencadlys, Parc Navigation, Abercynon, CF45 4SN Cwm Taf Morgannwg University Health Board, Headquarters, Navigation Park, Abercynon, CF45 4SN

Cadeirydd/Chair: Emrys Elias

Prif Weithredwr/Chief Executive: Paul Mears

Bwrdd lechyd Prifysgol Cwm Taf Morgannwg yw enw gweithredol Bwrdd lechyd Lleol Prifysgol Cwm Taf Morgannwg ICwm Taf Morgannwg University Health Board is the operational name of the Cwm Taf Morgannwg University Local Health Board

There are a significant number of patients attending the three Hospital Emergency Departments that require admission to a Hospital bed and this has traditionally meant that elective operations are postponed to accommodate these acutely unwell patients. Protecting the beds ensures the planned operations go ahead as scheduled.

Operations in the Private Sector

During COVID, CTM commissioned private healthcare providers to undertake some elective orthopaedic procedures for those patients with an ASA score of 1 or 2.

The ASA score is a system to assess and communicate a patient's potential risk of having surgery. An ASA score of 1 identifies a patient who is fit and well and likely to be a lower risk through to an ASA score of 4 that identifies a patient with significant other illnesses that make their operation a higher risk. For those assessed as higher risk (ASA 3 or 4), the most appropriate and safe place for their surgery is in an acute Hospital which may have resulted in longer than expected waits.

This service remains in place and patients are assessed for their suitability and when appropriate, their surgery and care is transferred to private providers at the Nuffield and Spire Hospitals.

Elective Orthopaedic Services

An additional protected orthopaedic ward is also available at the Royal Glamorgan Hospital (RGH) which is increasing its bed base to accommodate additional activity from Prince Charles Hospital (PCH) and once established, additional activity from the Princess of Wales Hospital (POW) too.

The ward at RGH focuses on patients requiring major joint replacement surgery who are not fit enough to have their surgery delivered in the private sector.

Because of the long waits for surgery, we are aware of a number of patients who are now less well and less mobile when they come in for surgery. This means their recovery from surgery is taking longer than expected and work is also ongoing with our teams to see how this can be improved.

Enhancement of Day Surgery Activity

There are a number of operations that are currently performed that require an inpatient bed but which in other services around the country, are performed as day cases. Therefore there is a large piece of work taking place to enhance the day surgery activity on each of the three acute sites to understand how we can safely increase the number of patients having their surgery this way.

This is not suitable for all patients, but where possible it allows more patients to have their surgery providing the support in their homes and in the community is available for them.

WISE Service

WISE is the Wellness Improvement Services which is a new service for CTM patients. It is a wellness coach-led service to empower patients to improve their own long-term health and reduce the burden of their symptoms to improve the quality of their life.

Through this programme, patients are educated and coached to manage their health condition. The coach helps the patient to look holistically at all the factors

affecting their health and happiness. Any patients on a current waiting list are welcome to access the service and their contact details are:-

Email:- <u>CTM.WISE@wales.nhs.uk</u> , call 01685 351451, or complete a form on the Health Boards website <u>https://ctmuhb.nhs.wales/wise-ctm/wise-registration-form/</u>

Physio Waiting Well Pilot

The physic service is currently undertaking a small pilot of a Waiting Well Programme with Welsh Government support, for those patients waiting for hip and knee surgery. This pilot programme includes content on how to wait well for surgery and is aimed at those on a waiting list whose health is likely to decline whilst they wait, which is called deconditioning.

It is only a pilot at present but with the help of an external team and Welsh Government support, it is being delivered via video group consultations and if successful, there will be opportunities to roll it out more widely to help more patients waiting for surgery.

Ophthalmology

A number of programmes of work are in place to support increasing the activity that the ophthalmology service is able to deliver to address those waiting for treatment and surgery. This includes the pooling of waiting lists to ensure patients are offered the next available date regardless of geographical area and a choice to attend anyone of the sites for equity of care.

There service currently operates over 4 sites, and we are in the process of appointing a Service Pathway Co-ordinator, funded by Improvement Cymru, to review the patient's pathway whilst attending an appointment at one of the sites.

The intention is to make recommendations to improve the access to the CTM Ophthalmology service so that everyone has access to safe, effective and efficient care in the right place at the right time.

This will include an assessment of how much space each site requires, the allocation of workforce and skills and how we ensure each site delivers as efficiently and safely as possible.

There is a significant plan being prepared to undertake additional weekend activity to clear patients who have waiting a long time for their cataract surgery. The aim is to perform one stop sessions to include the outpatient and procedure during the same appointment.

This arrangement will avoid patients making numerous journey to a Hospital, optimise clinic and theatre capacity, increase productivity and improve the quality of care.

The service is also working with Primary Care to allow patients who are currently experiencing extended waiting times to have follow up appointments by a suitably qualified community Optometrist closer to home.

Clinics are in place in the community for Glaucoma and Diabetic Retinopathy.

Longer Term Regional Solutions

CTM is also working on longer term solutions with our neighbouring Health Boards and Welsh Government colleagues, on regional solutions to address the long waits for Cataract operations, Orthopaedic Surgery and Endoscopy procedures.

Plans are being developed for high volume surgical centres for these specialities outside of acute Hospital sites, which would mean that admissions would not be affected by the number of emergencies that arrive via the Emergency Department.

I hope the above overview provides the Community Health Council with the assurance that CTM UHB has its community at the centre of all it does, and that we will continue to ensure that our patient's voices are heard and that we will continue to take action where needed in order to ask as quickly as we can to make things better for our staff and our community.

Yours sincerely,

Gus To

Professor Gregory Padmore-Dix Cyfarwyddwr Gweithredol Nyrsio, Bydwreigiaeth a Gofal Cleifion / Executive Director of Nursing, Midwifery & Patient Care