



Quality, Safety and Experience Committee Commissioning for Quality Outcomes 7th December 2021

Situation

- There has been a significant step change in the monitoring of our Commissioned Services
- The Long Term Agreement (LTA) now has a quality section that specifically addresses service and quality concerns.
- LTA Review meetings also include a focus on clinical services and quality (normally the most challenged), for example Cardiology was discussed on 24th May and Spinal on 22nd November 2021 (with both Operational, Commissioning and Quality Assurance colleagues).
- In conjunction with the LTA meetings, the Assistant Director (AD) of Commissioning is also co-chair of the South West Wales Cancer Network, where current challenges are also discussed, with agreed actions and mitigations
- Both Hywel Dda University Health Board (HDdUHB) and Swansea Bay University Health Board (SBUHB) continue to be open and transparent around the pressures on the services.

REFERRAL TO TREATMENT TIME (RTT) – Month 7

At the end of October 2021, there were 7,901 HDdUHB residents awaiting treatment in other Welsh NHS organisations within all stages of pathways. The volume and percentage change since April 2021 are included (see right) for each provider.

The table shows that there has been a monthly increase to the waiting list. Within the seven months under consideration, this has resulted in an increase in demand by 24% for HDdUHB residents waiting at other Health Boards (HBs). Unsurprisingly, the majority of HDdUHB patients at other Welsh HBs are waiting at SBUHB and Cardiff & Value University Health Board (C&VUHB).

Provider/ Health Board	Apr	May	Jun	Jul	Aug	Sep	Oct	Qty Change	% Change
Aneurin Bevan University (ABU)	64	69	71	72	74	73	79	15	23.4%
Betsi Cadwaladr University (BCU)	23	22	21	19	22	22	22	-1	-4.3%
Cardiff & Vale University (C&VU)	918	978	1,005	1,043	1,058	1,086	1,129	211	23.0%
Cwm Taf Morgannwg University (CTMU)	72	84	88	88	90	98	109	37	51.4%
Powys Teaching	7	5	9	11	20	25	16	9	128.6%
Swansea Bay University (SBU)	5,289	5,322	5,566	5,816	6,206	6,351	6,546	1257	23.8%
Grand Total	6,373	6,480	6,760	7,049	7,470	7,655	7,901	1,528	24.0%
% Month on Month Change		1.68%	4.32%	4.28%	5.97%	2.48%	3.21%		

C&VUHB RTT New Outpatient (all waits)

- The table shows the position during October 2021 for all patients waiting for a new outpatient appointment by speciality within C&VUHB.
- The majority of HDdUHB patients waiting for a new outpatient appointment at C&VUHB are waiting for Clinical Immunology & Allergy. They account for 31.9% of the October waiting list and have been increasing month on month, with a slight dip between September and October 2021.

Mitigating Actions.

- An alternative commissioned pathway proposal is being undertaken for Clinical Immunology and Allergy, as a result of the Commissioning Team being notified of certain issues within the service, which will follow the Paediatric Immunology and Allergy service currently commissioned within HDdUHB. A working group will consider new and innovative ways to deliver this service internally.

Specialty	Apr	May	Jun	Jul	Aug	Sep	Oct	% Change
Clinical Immunology and Allergy	162	167	178	179	180	186	183	13.00%
Trauma & Orthopaedics	71	64	67	63	72	70	76	7.00%
Neurosurgery	46	49	49	51	55	60	52	13.00%
Neurology	26	26	29	31	32	34	37	42.30%
Paediatric Surgery	58	57	59	51	38	32	35	-39.70%
General Surgery	15	15	19	19	26	23	30	100.00%
Ophthalmology	21	24	30	28	25	26	30	42.90%
Paediatrics	28	32	31	33	27	19	22	-21.40%
Cardiology	8	13	12	15	14	13	12	50.00%
Dental Medicine Specialties	5	5	7	8	7	8	12	140.00%
ENT	16	13	12	13	11	13	11	-31.30%
Oral Surgery	7	5	5	5	8	7	9	28.60%
Dermatology	5	5	7	6	6	8	8	60.00%
Gastroenterology	6	4	5	6	5	5	8	33.30%
Clinical Haematology	3	7	5	3	4	6	7	133.30%
General Medicine	7	6	2	4	6	6	6	-14.30%
Gynaecology	2	2	3	8	7	8	6	200.00%
Paediatric Neurology	1	2	4	4	5	6	5	400.00%
Anaesthetics	2	3	2	2	3	3	4	100.00%
Cardiothoracic Surgery	2	3	3	4	2	1	4	100.00%
Clinical Pharmacology	5	3	3	2	3	4	4	-20.00%
Urology	2	3	1	3	5	7	4	100.00%
Geriatric Medicine	0	1	1	1	1	2	2	200%
Orthodontics	0	0	0	1	1	1	2	200%
Paediatric Dentistry	1	2	2	1	2	2	2	100.00%
Restorative Dentistry	1	1	1	0	0	0	1	0.00%
Nephrology	2	2	1	1	1	1	0	-100.00%
Pain Management	1	1	1	1	1	0	0	-100.00%
Respiratory Medicine	0	1	0	0	1	0	0	-
Grand Total	503	516	539	543	548	551	572	13.70%

C&VUHB RTT New Outpatient (>36 weeks) Top 5 Specialties

- The table shows that there is a correlation between the overall numbers on the waiting list and those waiting >36 weeks.
- Unsurprisingly, Clinical Immunology & Allergy has the greatest number of patients waiting over 36 weeks and account for 56% of >36 week of the October 2021 waiting list.

Specialty	Apr	May	Jun	Jul	Aug	Sep	Oct	% Change
Clinical Immunology and Allergy	90	91	93	95	100	104	102	13%
Trauma & Orthopaedics	27	26	30	30	30	30	31	15%
Neurology	6	10	10	10	12	10	10	67%
Ophthalmology	10	9	10	11	11	9	10	0%
General Surgery	7	8	9	8	8	8	9	29%
Total (top 5)	140	144	152	154	161	161	162	16%
Grand Total (all specialties > 36 weeks)	161	163	172	172	182	179	182	13%

SBUHB RTT New Outpatient (all waits)

- The table shows the latest position as at October 2021 for all patients waiting for a new outpatient appointment by speciality within SBUHB.
- The majority of HDdUHB patients waiting for a new outpatient appointment at SBUHB are waiting for Oral Surgery. They account for 37.5% of the October 2021 waiting list and have been increasing month on month.
- Neurology has also seen a substantial rise in the number of patients waiting for a new outpatient appointment from April – October 2021 (302% increase).

Mitigating Actions

- **Oral Surgery** - HDdUHB representatives met with SBUHB at the end of October 2021 to discuss. SBUHB advised that part of the plan is to outsource some of this work to Parkway Clinic in Swansea, on a facility only basis. Work is still ongoing to address the backlog.
- **Orthopaedic/Spinal Surgery** – Discussed at a recent LTA meeting. The Spinal Consultant was present and provided an update consequently the option of redirecting the Spinal commissioned pathway, away from Swansea to Werndale Hospital on a temporary basis is being explored.
- **Neurology** – Query raised with SBUHB to understand the increase.

Specialty	Apr	May	Jun	Jul	Aug	Sep	Oct	% Change
Oral Surgery	1,109	1,155	1,196	1,292	1,321	1,325	1,349	22%
Orthodontics	359	391	413	427	438	475	482	34%
Trauma & Orthopaedics/Spinal	320	344	372	404	434	427	456	43%
Plastic Surgery	258	291	286	331	356	374	433	68%
Neurology	59	55	66	102	243	232	237	302%
Cardiology	86	79	94	99	101	112	117	36%
General Surgery	66	63	67	70	80	83	82	24%
Ophthalmology	60	64	69	71	69	73	71	18%
Gynaecology	32	34	32	33	34	59	63	97%
Cardiothoracic Surgery	32	39	45	51	52	58	62	94%
Restorative Dentistry	130	105	90	78	58	66	51	-61%
ENT	30	37	38	34	33	35	40	33%
Urology	28	26	31	35	37	40	40	43%
Rehabilitation Service	13	19	18	25	29	28	26	100%
Paediatrics	18	17	22	23	17	19	22	22%
Gastroenterology	22	22	21	21	18	18	15	-32%
Nephrology	8	6	9	5	4	12	10	25%
Dermatology	18	15	8	11	11	9	9	-50%
Paediatric Neurology	6	7	10	9	8	6	8	33%
General Medicine	3	4	5	3	3	2	5	67%
Respiratory Medicine	4	5	6	3	5	6	5	25%
Rheumatology	1	3	4	7	5	5	5	400%
Clinical Haematology	2	2	5	4	4	3	3	50%
Endocrinology	3	6	5	6	3	5	3	0%
Geriatric Medicine	2	1	0	0	1	1	2	0%
Dental Medicine Specialties	0	0	6	0	11	0	0	-
Pain Management	0	0	1	1	0	0	0	-
Grand Total	2,669	2,790	2,919	3,145	3,375	3,473	3,596	35%

SBUHB RTT New Outpatient (>36 weeks) – Top 5 Specialties

- The table illustrates that in the main, the specialties with long waiters correlate to the overall number of patients waiting, with the exception of Neurology, which does not have any patients waiting > than 32 weeks.
- Unsurprisingly, Oral Surgery has the greatest number of patients waiting over 36 weeks and account for 49% of >36 week October 2021 waiting list.

Specialty	Apr	May	Jun	Jul	Aug	Sep	Oct	% Change
Oral Surgery	470	507	534	591	620	618	628	34%
Orthodontics	182	180	192	207	213	219	232	27%
Trauma & Orthopaedics/Spinal	119	128	134	144	149	148	164	38%
Plastic Surgery	75	80	79	90	98	99	112	49%
General Surgery	23	25	28	28	30	29	34	48%
Total (Top 5)	869	920	967	1,060	1,110	1,113	1,170	35%
Grand Total (all specs)	1,023	1,059	1,089	1,193	1,231	1,227	1,283	25%

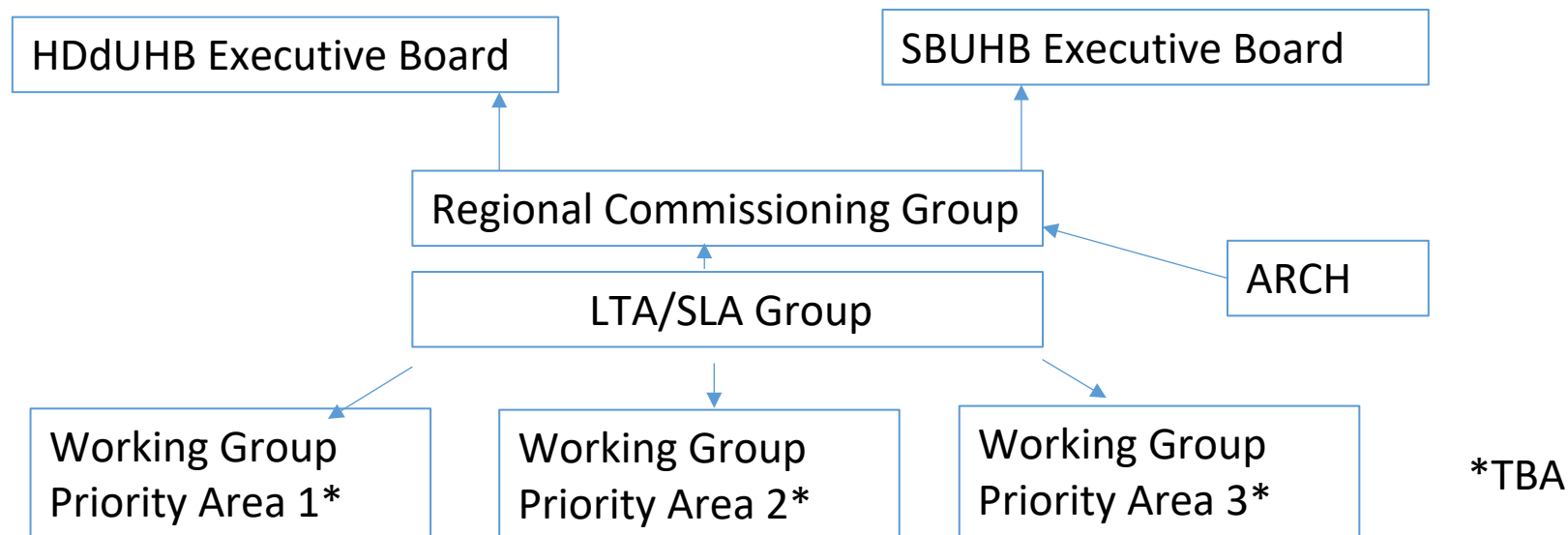
Cancer

- In line with reviewing and co-chairing the longer-term Cancer Strategy between HBs, HDdUHB continues to actively engage and understand the pressures on Cancer Services at Singleton Hospital to ensure that a full understanding of the pressures by tumour site can be collectively addressed
- The current trajectory sets a 7% month on month recovery plan for all 62 Days
- The position illustrated will be closely monitored in conjunction with SBUHB, with any significant changes and/or change to the proposed trajectory to be prioritised and addressed urgently
- Action - HDdUHB has requested a breakdown of achievement to date. Any slippage and issues will be addressed in the South West Wales Cancer Centre (SWWCC) and LTA meetings

Target for PTL Backlog 7% improvement month to month	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
Acute Leukaemia	0	0	0	0	0	0	0	0
Brain/CNS	1	1	1	1	1	1	1	1
Breast	30	28	26	24	22	20	17	15
Children's Cancer	0	0	0	0	0	0	0	0
Gynaecological	38	35	33	30	27	25	22	19
Haematological	10	9	9	8	7	7	6	5
Head and Neck	26	24	22	21	19	17	15	13
Lower Gastrointestinal	360	335	310	284	259	234	209	184
Lung	26	24	22	21	19	17	15	13
Other	5	5	4	4	4	3	3	3
Sarcoma	7	7	6	6	5	5	4	4
Skin	22	20	19	17	16	14	13	11
Upper Gastrointestinal	60	56	52	47	43	39	35	31
Urological	95	88	82	75	68	62	55	48
Total	680	632	585	537	490	442	394	347

Risks and Mitigation

- It is paramount that HDdUHB continues to work closely with SBUHB, and that both HBs support each other via collaborative and regional solutions to ensure that the multitude of challenges affecting both can be addressed collectively.
- Consequently, a Regional Commissioning Group (RCG) has recently been established, which contains Executive presence and oversight. The first meeting was held in November and a follow up meeting is scheduled for December 2021 to discuss and agree priority areas. It is envisaged that the priority areas, will include Oral Surgery, Cardiology, Neurology & Orthopaedics/Spinal for the reasons previously outlined.



Risks and Mitigation (cont'd)

Improving Data Availability

General

- It recognised that HBs should be routinely sharing Commissioner data/information and SBUHB has agreed to take this forward at an Executive to Executive meeting in November 2021.

Quality Metrics

- Both Heads of Quality from HDdUHB and SBUHB have met and will work together to agree on quality metrics (those that can only be sourced by DATIX) such as complaints, concerns, never events, SIs, infections, etc and once the RCG agree on the priority areas, they will test the agreed quality metrics on those specialties.
- The Commissioning team are concentrating on those quality metrics that can be pulled from CHKS such as readmission rates to display via a dashboard.

Outcomes linked to specialty

- Due to the difficulties with receiving granular data from other HBs, the Commissioning team will issue correspondence to all the patients who have completed their spell (via SBUHB activity MDS), requesting feedback by means of a patient questionnaire. The questions are in development, however will be based on Patient Reported Experience Measures (PREMs)/ Patient Reported Outcome Measures (PROMs) and the team are linking in with Value Based Health Care colleagues. The team will pilot one speciality area, most likely spinal, although this is to be agreed.

Risks and Mitigation (cont'd)

- The difficulty in obtaining quality metrics and outcomes for existing contracts is acknowledged and therefore when entering new contracts with independent providers, the Health Board ensures that these are built in.
- Below are examples of some of the reporting metrics that are requested:

Activity
Total referrals received.
Patients accepted/rejected at Triage (reasons categorised)
Referral rejection rate
Outpatient assessments (New and Follow UP)
Outpatient - minor op conversion rate
DNA/late cancellations - First Out patient
DNA/late cancellations – Follow Up Out patient
Patients cancelled on day of admission due to Clinical reasons.
Patients cancelled on the day of admission due to Non-Clinical reasons.
Unexpected patients Transferred Out due to clinical issues.
Emergency Readmissions within 28 days
Revision Surgery required
Coded Discharges
Breach of Treat by Date
Breaches of Diagnostic tests within 6 weeks

Patient Experience
Complaints & Congratulations received in period, categorised.
Number of outstanding complaints
% of the patients would recommend to Friends and Family.
PLUS - Other Quality issues requiring discussion.

Health Board KPI Required	Metric
Hospital acquired infections:	Zero
Deep infection (post-surgical)	No greater than 0.1%
Surgical repairs	0%
Readmission rates	Less than 0.5%
Post-Operative Mortality (within 30 days)	Zero
Appointment/procedure cancellation rates	Less than 1%
Patient satisfaction	At least 94%

Quality (numbers and percentage of HDUHB cohort and total facility)
Post Op. Mortality within 7 days/30 days
Patient Safety Incidents SIRIs
Returned to theatre cases
Inpatient admissions to another provider
Clinical cancellations on day of surgery
Non-Clinical cancellations on day of surgery
Surgical repairs
Deep infection post-surgery
MRSA incidence (positive bacteria)
Failure to report SIRI within timescale
Incidents reportable to a statutory body
Cancelled procedure rebooked within 5 days
MRSA screening rate
MSSA incidence (positive bacteria)
Cdiff incidence (post 72 hour)
Falls whilst in providers care
Blood Transfusion unplanned
24 hour helpline calls (each specialty)
Onward cancer referral within 24 hours
Medication Errors Reported
Incidents involving medical equipment
Information Governance Breach

Recommendation

- Traditional commissioning and provider approaches are not going to remedy the significant pressures across both HBs.
- The Committee is asked to take assurance from mitigating actions in place.