
Specialised Services Integrated Performance Report

February 2024

NWJCC

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1. Key Information for February 2024

Services in escalation: At the end of February there were 9 services in escalation, the same as last month; there were 5 services at level 2, 3 services at level 3 and 1 service at level 4. There is also one related service which is under Welsh Government escalation (North Wales Plastics Outreach clinics). Changes from last month:

The Wales Fertility Institute is at level 4 escalation and progress is made on addressing the issues relating to Human Fertilisation and Embryology Authority (HFEA) licensing and quality. These remain under close monitoring in conjunction with Swansea Bay (SBUHB) through the escalation process.

As previously reported, there are three women and children's services in Cardiff & Vale (CVUHB) at Level 3 escalation. There are a number of themes underpinning these service risks; namely workforce, financial frameworks and regional service provision. All three services have been brought together for the purposes of managing the escalation, through monthly meetings covering all three sets of objectives. Following a review by the Senior Leadership Team, the escalation objectives are being reset in partnership with CVUHB to enable further improvements to be made in the paediatric intensive care unit (PICU) and the neonatal intensive care unit (NICU). The JCC are also asked to consider the appetite for de-escalation of paediatric surgery.

Quality: There have been 10 incidents recorded within Quarter 1 (April-June 2023), and 14 within Quarter 2, 23 within Quarter 3, and 3 so far in Quarter 4. There have been 8 complaints/concerns recorded within Quarter 1 (April-June 2023), 16 within Quarter 2 (9 of which relate to the Wales Fertility Institute), and 6 within Quarter 3. No complaints have been recorded in Quarter 4 to date.

Finance: The annual delegated budget for NWJCC is currently £1.09 billion, with three quarters of this related to specialised services (£0.750m). At month 11 there is a year to date underspend of (£5.315m), and a deterioration of £2.5m in the yearend forecast position to an underspend of (£7.134m). Further information on this is included in the Finance report.

The adverse movement is primarily in the English contract areas, and therefore affected our Betsi Cadwaladr (BCUHB) and Powys Teaching (HB) commissioner positions. The NWJCC Team will work with them over the coming month about this position.

Welsh Government performance targets: At the end of Quarter 1 Welsh Government announced revised Ministerial Measures for 2023/24. The main ones affecting specialised services are the requirements to have:

- Improvement towards no patients waiting over 52 weeks for a new outpatient appointment, then leading to no patients waiting over 36 weeks.

- Improvement towards no patients waiting over 104 weeks for treatment (97% expected to achieve this by December 2023, and 99% by March 2024), then leading to no patients waiting over 52 weeks for treatment.

All main specialty services are meeting the 104 week target, except for Plastic Surgery at Swansea Bay UHB. This service is in escalation (see section below).

The new measures for 2024/25 from Welsh Government will be reflected in the April reports onwards.

Key Planned Care Specialties:

Cardiac Surgery: By the end of February 2024, waiting lists for Cardiac Surgery treatments have started to steadily increase at the Welsh providers. Liverpool Heart & Chest did see a slight drop in waiting list numbers from December 2023 to January 2024 but has increased in February 2024. Very few patients are currently waiting over 36 weeks at the Welsh providers, but numbers continue to increase at Liverpool Heart & Chest. Work is underway to investigate the continuing growth in the number of TAVI (transcatheter aortic valve implantation) procedures and resultant impact on Cardiac Surgery as a whole.

Specialised Cardiology: The volume of specialist cardiology activity at Cardiff and Vale and Swansea Bay University Health Boards is significantly greater than that delivered by other providers, reflecting the greater range of procedures undertaken, population sizes, and the relative stage of development of the different services. Overall inpatient activity since 2021/22 has been relatively flat, noting a degree of (occasionally significant) month-on-month volatility.

Bariatric Surgery: Swansea Bay UHBs significant improvement in meeting contract volumes and waiting times in 2023/24 continues to be evident.

Thoracic Surgery: Whilst the Welsh centres are not performing to the full inpatient contract levels, waiting lists have improved compared to pre-Covid figures and are approximately half of the total at the end of 2019/20. It is important to note that collaborative arrangements are in place between the two South Wales services to use their joint capacity to ensure equitable access.

Plastic Surgery: Patients continue to breach the Ministerial Measures waiting times for treatment at Swansea Bay UHB. There were 842 patients that were recorded at the end of February that have been waiting for inpatient treatment for over 1 year, including 254 that have been waiting over 2 years (down from 291 last month). In both categories, this is a reduction from last month and the number of patients in both categories has been steadily reducing. The service has cleared the longest waiters for new outpatient appointments and is now achieving the WG performance target of no New outpatient waits over a year.

The SBUHB service is at escalation Level 2 for performance reasons. At the end of March, there were 217 patients waiting over 104 weeks. We are currently awaiting a delivery plan from SBUHB to set out a plan to achieve a 0 position by March 2025.

59 patients have been formally reported as waiting more than a year for any part of the pathway at Mersey & West Lancashire Trust (formerly known as St. Helens & Knowsley); there are also a small number at Countess of Chester, although this is a local BCUHB contract and not paid for through NWJCC. The BCUHB part of the North Wales pathway is in escalation via Welsh Government for quality reasons. Following investigation, the waiting times for the West and Central areas of BCUHB are currently not being reported to Welsh Government by the Health Board (not via the NWJCC contract). There are patients waiting over 156 weeks on the list and a backlog reduction is being progressed, with additional clinics commissioned to reduce the back log.

Paediatric Surgery: The end of February position at Cardiff & Vale UHB includes 32 patients waiting over 52 weeks for treatment; however, the 104 week target for inpatient and 52 week target for first outpatient appointments continue to be met. The service is in Escalation level 3. In November the Joint Committee agreed an objective to achieve 52 weeks for inpatients by the end of March 2024. Although, with the outsourcing support agreed by the JCC there has been significant improvement in waiting times, this target was not achieved due to the impact of industrial action. At the end of March, there were 12 patients waiting over 52 weeks with an aim to be at a 0 position at the end of May 2024.

Alder Hey NHS Foundation Trust has reported that activity is higher than pre-Covid; however, there is a small number (6) of patients waiting over 52 weeks at the end of December.

Paediatric ICU (PICU): The C&VUHB service was put into escalation Level 3 in September, around concerns regarding capacity, staffing levels, bed availability and related adverse incidents. Weekly data has been requested to monitor the service, along with regular update meetings.

Neonatal ICU (NICU): Badgernet is the system that collates all the NICU activity from Welsh providers. The patient level data for analysis has historically been received annually, but it has recently been agreed that NWJCC will receive this monthly going forward. The service was put into escalation Level 3 in September for reasons of quality and cot availability.

In-Vitro Fertilisation (IVF): A number of concerns regarding the safety and quality of service at the Welsh Fertility Institute (WFI) have been raised through different routes, including the HFEA re-inspection report of January 2023, NWJCC Quality and Assurance meetings, and WFI/Individual Patient Funding Requests (IPFR) requests. WFI was placed into escalation level 43 in July 2023, and due to increasing concerns with regards to the HFEA licence the escalation level was increased to level 4 at the end of October.

Neurosurgery: The C&VUHB service has met the Welsh Government target of zero patients waiting over 52 weeks. In February 2024, there were 9 patients waiting over 36 weeks for admission, with the intentions that these will be cleared by March 2024.

The Walton Centre performance trajectory was discussed at a recent service level agreement (SLA) meeting, and the centre plans to clear the backlog of longer waiters by March 2024. At the end of December 2023, there were no patients waiting over 52 weeks, and 31 patients waiting over 36 weeks. NWJCC will continue to monitor the situation at the regular quarterly SLA meetings.

Performance of other areas by exception:

PET: Breaches of the 10-day turnaround time continue to fluctuate across the 3 centres. All 3 (PETIC, Singleton and Wrexham) centres are unable to sustain performance above the 10 day turnaround. This is down to unpredictable supply of radiopharmaceuticals and scanner breakdowns especially seen at mobile sites. The scanning capacity at Cardiff is now at 91 scans per week. Business cases are expected from SBUHB (fully tendered single case) and BCUHB (OBC) in 2024.

Artificial Limbs Service: Posture & Mobility and Prosthetics - after an initial lull in referrals since Covid-19, these have now increased again. There has been a significant reduction in numbers waiting since last month with <5 patients waiting over 52 weeks for the North Wales Posture and Mobility services, and 13 in total for the Cardiff/Swansea services.

CAMHS: CAMHS Out of Area (OoA) performance is much improved and has been consistently below target for an extended period. The NHS inpatient units are close again to pre-Covid activity levels. The FACTS service was de-escalated completely in August 2023, and Ty Llidiard in September 2023.

Adult Medium Secure: While both NHS inpatient units are delivering fewer bed-days than pre-Covid, the use of other providers has increased. Performance meetings are occurring with both units monthly to monitor progress and a repatriation plan is in place for each unit and is on profile.

Neuropsychiatry: A risk has been logged internally that Neuropsychiatry patients may not be able to be treated in a timely manner with the appropriate therapy support, due to staffing issues within the Cardiff & Vale service. Consequently, patients may have long waiting times to access the service, and the lack of availability of step down facilities to support the acute centre may also result in delays.

Renal Network: There are 3 regional providers of renal activity, with various over and underperforming service areas. Dialysis demand has been increasing on average 3% across Wales, however there are significant regional variations with the Cardiff and Vale Service currently being the highest.

As a consequence the Welsh Kidney Network is undertaking a demand and capacity review across Wales.

English provider activity (those with a NWJCC contract, DHCW data): On average, English provider activity is 3% lower to date in 2023/24 than in 2019/20. It is noteworthy that A&E and Trauma are still seeing lower levels within that (18% less to date), which indicates higher recovery in the other treatment specialties.

Episodes by provider - full years except current year (data: DHCW inpatient episodes)					2019/20	2021/22	2022/23	2023/24	Episodes 2023/24 %	
Main HB	2019/20	2021/22	2022/23	2023/24	Total	(M1-11)	(M1-11)	(M1-11)	diff from 19/20	
Major North Wales provider	4,213	3,515	3,711	3,800	15,239	3,949	2,902	3,393	3,800	-4%
Major Powys provider	14,853	12,731	13,278	12,803	53,665	13,816	10,544	12,116	12,803	-7%
Total	17,650	15,685	16,768	16,516	66,619	16,415	13,143	15,301	16,516	1%
	36,716	31,931	33,757	33,119	135,523	34,180	26,589	30,810	33,119	-3%

Summary of main specialty inpatient activity and waiting lists (DHCW data):

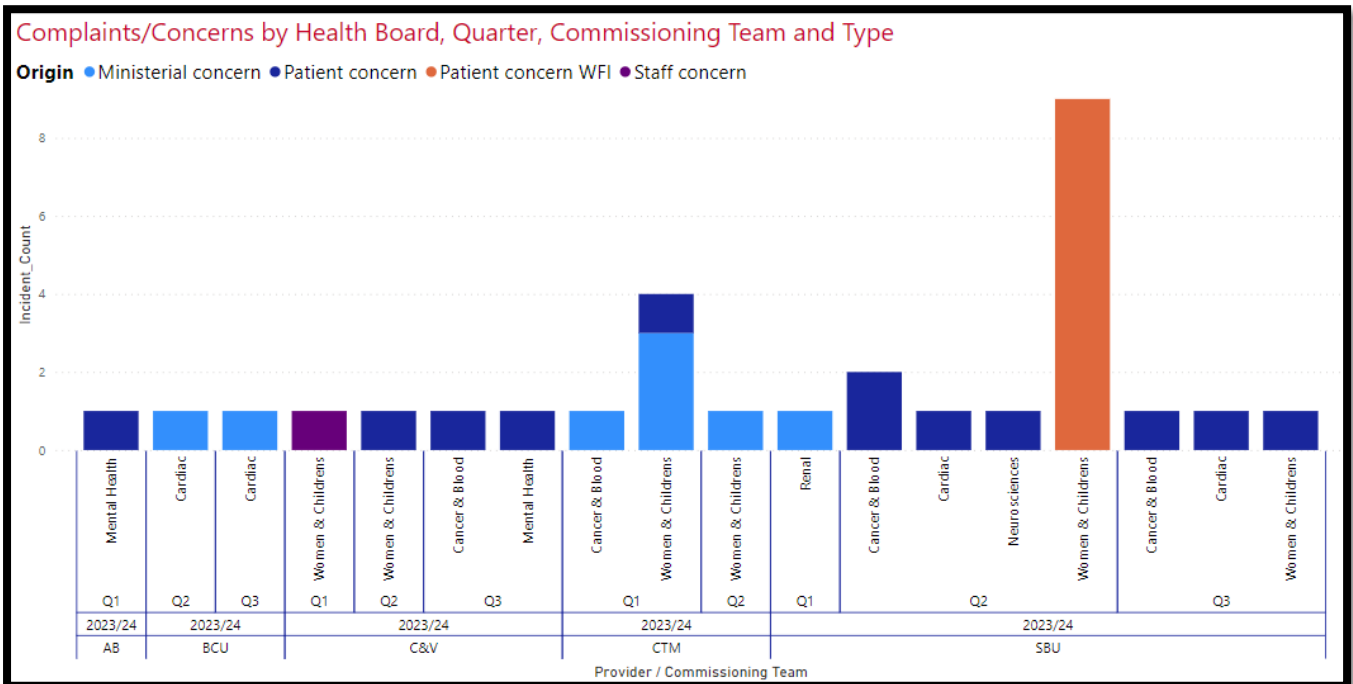
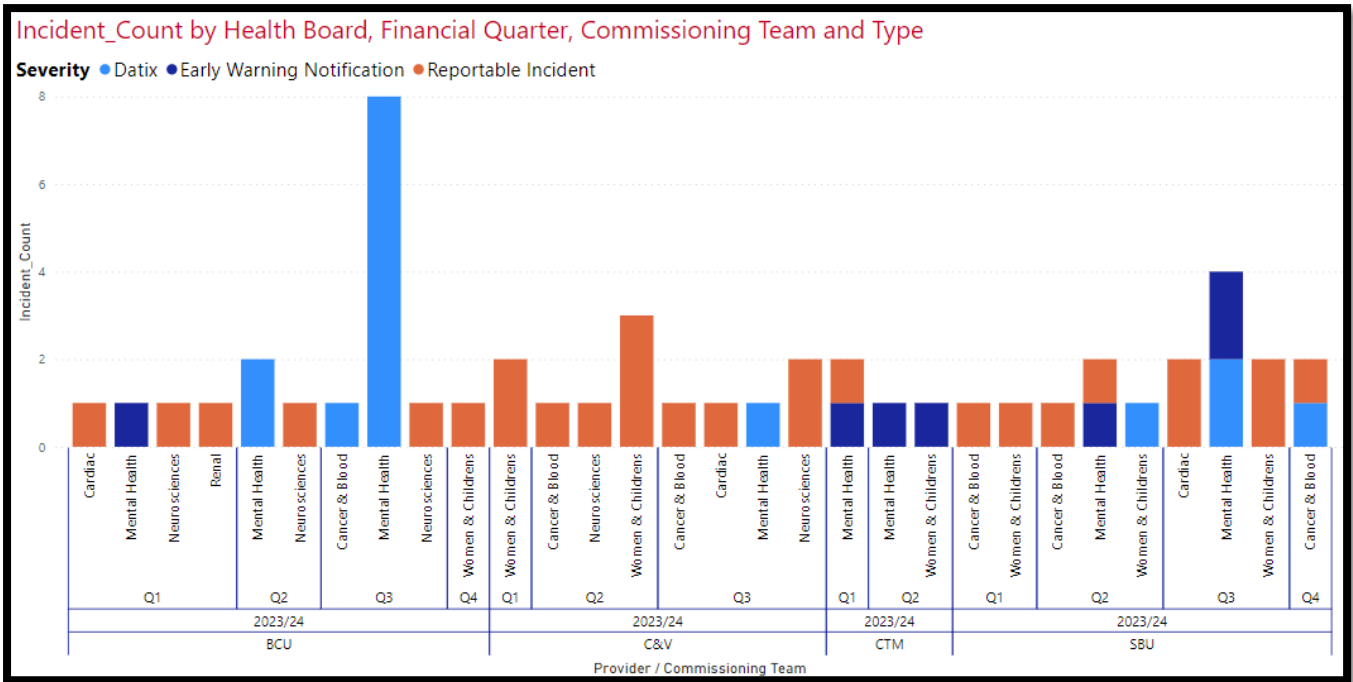
Specialty_WHSSC	Episode comparison to current month (DHCW data warehouse)					Current Waiting List totals (DHCW data)			
	Episodes for 2019/20 (M1-11)	Episodes for 2021/22 (M1-11)	Episodes for 2022/23 (M1-11)	Episodes for 2023/24 (M1-11)	Episodes 2023/24 % diff from 19/20	202311 Admitted diagnostic intervention	FUP OP appointment	New OP appointment	Total
Cardiac Surgery	2,009	1,658	1,728	1,665	-17%	176	59	97	332
Cardiff and Vale University Local Health Board	762	579	647	559	-27%	118	25	27	170
Liverpool Heart And Chest Hospital nhs foundatio	431	427	388	444	3%				
Swansea Bay University Local Health Board	699	555	567	561	-20%	58	34	70	162
University Hospitals Birmingham Nhs Foundation t	64	49	66	72	13%				
University Hospitals Of North Midlands nhs trust	53	48	60	29	-45%				
Neurosurgery	3,155	2,568	2,658	2,694	-15%	241	159	367	767
Cardiff and Vale University Local Health Board	1,992	1,646	1,767	1,763	-11%	241	159	367	767
The Walton Centre Nhs Foundation trust	1,026	794	786	805	-22%				
University Hospitals Of North Midlands nhs trust	137	128	105	126	-8%				
Paediatric Surgery	2,676	2,085	2,120	2,085	-22%	430	78	359	867
Alder Hey Children's Nhs Foundation trust	410	327	394	331	-19%				
Cardiff and Vale University Local Health Board	2,266	1,758	1,726	1,754	-23%	430	78	359	867
Plastic Surgery	10,536	7,851	8,483	8,979	-15%	2,532	409	1,290	4,231
Countess Of Chester Hospital Nhs foundation trus	641	430	504	627	-2%				
Mersey and West Lancashire nhs trust	1,248	1,035	1,151	1,188	-5%				
Swansea Bay University Local Health Board	8,647	6,386	6,828	7,164	-17%	2,532	409	1,290	4,231
Thoracic Surgery	1,211	1,156	1,126	1,235	2%	61	51	96	208
Cardiff and Vale University Local Health Board	572	562	538	621	9%	37	39	53	129
Liverpool Heart And Chest Hospital nhs foundatio	200	255	232	254	27%				
Swansea Bay University Local Health Board	413	308	331	342	-17%	24	12	43	79
University Hospitals Of North Midlands nhs trust	26	31	25	18	-31%				
Total Specialty	19,587	15,318	16,115	16,658	-15%	3,440	756	2,209	6,405

2. Overview of services in escalation

Escalation level	Move ment	Provider	Service	Notes
WG Escalation	same	English providers	Plastic Surgery Outreach	Note: Welsh Government leading the escalation process along with a wider escalation of Dermatology issues in North Wales
Level 4	same	Swansea Bay UHB	Welsh Fertility Institute (WFI)	In escalation since June 2023 due to concerns about the safety and quality of the service at the Welsh Fertility Institute (WFI). These were identified by a Human Fertilisation and Embryology Authority (HFEA) inspection report, leading the service being placed in escalation level 3. Further raised to level 4 in October 2023.
Level 3	same	Cardiff & Vale UHB	Neonatal Intensive Care (NICU)	In escalation since September 2023 due to similar concerns about PICU and Paediatric Surgery at C&VUHB. These concerns are being jointly addressed at Executive level.
Level 3	same	Cardiff & Vale UHB	Paediatric Intensive Care	In escalation since May 2023 due to concerns regarding capacity, staffing levels, bed availability and related adverse incidents. Weekly data has been requested to monitor the service, along with regular update meetings.
Level 3	same	Cardiff & Vale UHB	Paediatric Surgery	In escalation since November 2022, level increased to Level 3 in March 2023; weekly performance data requested to give assurance on delivery against baseline for future recovery, and monthly escalation meetings being held.
Level 2	same	Cardiff & Vale UHB	Cardiac Surgery	In escalation since July 2021 for not implementing the GIRFT review or addressing issues identified by HEIW; SMART action plan has now been developed, leading to de-escalation to Level 2 in May 2023.
Level 2	same	Swansea Bay UHB	Adult Burns	In escalation since November 2021; At the time of initial escalation, the burns service at SBUHB was unable to provide major burns level care due to staffing issues in burns ITU. An interim model was put in place allowing the service to reopen in February 2022. The current escalation concerns the progress of the capital case for the long term solution and sustainability of the interim model. Estimated capital completion: end of 2023. De-escalated to level 2 in December 2023.
Level 2	same	Swansea Bay UHB	Cardiac Surgery	In escalation since July 2021 due to GIRFT review highlighting a high rate of poor clinical outcomes; de-escalated on immediate actions required by GIRFT review. De-escalation to Level 2 implemented in March 2023.
Level 2	same	Swansea Bay UHB	Plastic Surgery	In escalation since November 2022 due to significant waiting list numbers including long waiters over 2 years, escalation increased to level 2 in July 2023
Level 2	down	University Hospitals Bristol & Western Foundation Trust	Paediatric Cardiac Surgery	In escalation since October 2023 due to concerns about the waiting times for patients and the pace of improvement in this. An action plan is being developed by the Children's Hospital. Escalation reduced to level 2 in January 2024.
Total				

Please see the bi-monthly Quality & Patient Safety (QPS) reports from the Quality team for more details.

3. Quality Dashboard



There have been 10 incidents recorded within Quarter 1 (April-June 2023), 14 within Quarter 2, 23 within Quarter 3, and 3 so far in Quarter 4. There have been 8 complaints/concerns recorded within Quarter 1, 16 within Quarter 2 (9 of which relate to the Wales Fertility Institute), 6 within Quarter 3, and none reported in Quarter 4 to date.

Please see the bi-monthly Quality & Patient Safety (QPS) reports from the Quality team for more details.

4. Financial Summary

Heading	Annual Budget £'000	Actual to Date £'000	Variance to date £'000	Forecast Variance Year-end £'000
Income	(1,091,883)	(1,000,893)	5,315	7,134
Spend - NHS Wales				
Aneurin Bevan Health Board	11,914	11,590	669	729
Betsi Cadwaladr University Health Board Provider	48,118	44,892	784	856
Cardiff & Vale University Health Board	292,204	274,645	6,791	7,450
Cwm Taf Morgannwg University Health Board	11,546	10,583	-	-
Hywel Dda Health Board	2,110	1,934	-	-
Swansea Bay University Health Board	124,133	119,142	5,354	5,936
Velindre NHS Trust	58,733	54,072	234	10
Total	548,757	516,858	13,831	14,981
Spend - Other				
2021/22 Reserves	-	(14,942)	(14,942)	(16,300)
2022/23 Plan Developments	29,321	11,978	(14,900)	(16,926)
Direct Running Costs	6,845	6,376	101	168
EASC (incl WAST and EASC/QAT team costs)	254,381	232,796	(386)	(421)
IPFR	72,853	67,928	1,146	601
IVF	5,094	4,455	(215)	(217)
Mental Health	43,147	40,760	1,209	1,394
Non Welsh SLAs	132,236	129,120	7,903	8,556
Phasing adjustment	-	-	-	-
Prior Year Developments	(11,510)	(8,878)	1,673	1,827
Renal	4,984	3,833	(736)	(795)
Total	537,351	473,426	(19,146)	(22,114)
Total	(5,775)	(10,609)	0	0

At month 11 there is a year to date underspend of (£5.315m), and a deterioration of £2.5m in the yearend forecast position to an underspend of (£7.134m).

The adverse movement is primarily in the English contract areas, and therefore affected our BCU and Powys commissioner positions. NWJCC will work with them over the coming month about this position.

Please see the monthly Finance report and Risk-sharing tables for more details.

5. Welsh Government Performance measures

New performance measures were announced by Welsh Government in January 2022, with a new Performance Framework for 2022/23. Some targets were amended in June 2023/24 for this current financial year. The measures relevant to NWJCC activity are listed below:

Performance Measure	Target	Reporting Frequency	Source	Ministerial Priority	Status
28 Number of patients waiting more than 52 weeks for a new outpatient appointment	Improvement trajectory towards a national target of zero	Monthly	Referral to Treatment (combined) Dataset (DHCW)	Planned Care Recovery, Diagnostics & Pathways of Care	Revised
	Rationale: The number of patients waiting for a new outpatient appointment has increased year on year whilst capacity has been unable to meet demand. NHS organisations are required to improve service planning and clinical pathways to deliver sustainable planned care services, where waiting lists are reduced to a manageable level.				
29 Number of patients waiting more than 36 weeks for a new outpatient appointment	Improvement trajectory towards a national target of zero	Monthly	Referral to Treatment (combined) Dataset (DHCW)	Planned Care Recovery, Diagnostics & Pathways of Care	New
	Rationale: As above.				
31 Number of patients waiting more than 104 weeks for referral to treatment	Improvement trajectory towards a national target of zero	Monthly	Referral to Treatment (combined) Dataset (DHCW)	Planned Care Recovery, Diagnostics & Pathways of Care	Revised
	Rationale: Patients receiving timely access to high quality elective treatment and care should experience improved outcomes. Reducing the time that a patient waits for treatment reduces the risk of the condition deteriorating and alleviates the patient's symptoms, pain and discomfort sooner. This measure provides greater transparency and encourages improvement in the timeliness of treatment across NHS services.				
32 Number of patients waiting more than 52 weeks for referral to treatment	Improvement trajectory towards a national target of zero	Monthly	Referral to Treatment (combined) Dataset (DHCW)	Planned Care Recovery, Diagnostics & Pathways of Care	New
	Rationale: As above.				

Welsh Government have confirmed that there are no target dates for the revised targets, but they expect over 97% of NHS Wales services to meet the 104 week treatment target by December 2023, and 99% by March 2024.

Most services are meeting the required trajectories; please see the detailed pages in the underlying NWJCC Performance Dashboard report in Power BI for specific figures, including splits by resident Health Board.

The exceptions/services worth noting are (February 2024 DHCW data):

- Plastic Surgery (Swansea Bay UHB) – 842 waiting over 52 weeks for treatment, including 254 waiting over 104 weeks. This is an improvement from 917 waiting over 52 weeks, and 291 over 104 weeks in last month's report.
- Paediatric Surgery (Cardiff & Vale UHB) – 32 waiting over 52 weeks for treatment
- English providers – of the main specialist specialties that NWJCC reports on, there were 106 patients reported though DHCW that had been waiting longer than 52 weeks in total across all parts of the pathway. NWJCC has been working with DHCW to start separating the pathway stages in the English provider data shortly, where possible.

6. Service Performance Scorecard

**No English RTT data for Jan 24. This is due to an error in DHCW. Normal service should resume next month

Specialty / Provider Name	Measure	Tolerance Levels			Dec 2023	Jan 2024	Feb 2024	Latest Movement
Cardiac Surgery	RTT < 36 weeks - admissions	< 95%	95-99%	100%	85.14%	92.06%	91.17%	↓
Cardiothoracic Surgery	RTT < 36 weeks - admissions	< 95%	95-99%	100%	100.00%			
Neurosurgery	RTT < 36 weeks - admissions	< 95%	95-99%	100%	96.96%	98.62%	98.83%	↑
Paediatric Surgery	RTT < 36 weeks - admissions	< 95%	95-99%	100%	76.99%	81.49%	85.67%	↑
Plastic Surgery	RTT < 36 weeks - admissions	< 95%	95-99%	100%	68.02%	68.52%	69.12%	↑
Spinal Surgery Service	RTT < 36 weeks - admissions	< 95%	95-99%	100%	83.87%			
Thoracic Surgery	RTT < 36 weeks - admissions	< 95%	95-99%	100%	92.98%	93.27%	92.52%	↓
Bariatric Surgery	RTT < 36 weeks - admissions	< 95%	95-99%	100%	76.06%	78.57%	76.47%	↑
PET Scans	Pet scan < 10 days after referral	< 90%	90-95%	> = 95%	76.22%	75.08%	66.25%	↓
Posture & Mobility RTT - Adult	RTT < 36 weeks	< 90%	90-95%	> = 95%	95.19%	95.63%	95.86%	↑
Posture & Mobility RTT - Paeds	RTT < 36 weeks	< 90%	90-95%	> = 95%	96.58%	95.29%	95.59%	↑
CAMHS Beddays (excl. Out of Area)	NHS Beddays against contract	< 85%, > 105%	< 90%, > 100%	90% - 100%	68.77%	57.51%	50.00%	↓
CAMHS Home Leave (excl. Out of Area)	NHS Home Leave against total	< 20%, > 40%	< 25%, > 35%	25% - 35%	26.66%	18.22%	22.94%	↑
Medium Secure Beddays	NHS Beddays against contract	< 90%, > 110%	< 95%, > 105%	95% - 105%	85.49%	86.23%	74.23%	↓

Specialty / Provider Name	Measure	Tolerance Levels			Dec 2023	Jan 2024	Feb 2024	Latest Movement
Cardiac Surgery	RTT < 105 weeks - admissions	< 95%	95-99%	100%	100.00%	100.00%	100.00%	→
Cardiothoracic Surgery	RTT < 105 weeks - admissions	< 95%	95-99%	100%	100.00%			
Neurosurgery	RTT < 105 weeks - admissions	< 95%	95-99%	100%	100.00%	100.00%	100.00%	→
Paediatric Surgery	RTT < 105 weeks - admissions	< 95%	95-99%	100%	100.00%	100.00%	100.00%	→
Plastic Surgery	RTT < 105 weeks - admissions	< 95%	95-99%	100%	92.96%	93.46%	94.25%	↑
Spinal Surgery Service	RTT < 105 weeks - admissions	< 95%	95-99%	100%	100.00%			
Thoracic Surgery	RTT < 105 weeks - admissions	< 95%	95-99%	100%	100.00%	100.00%	100.00%	→
Bariatric Surgery - Swansea Bay UHB	RTT < 105 weeks - admissions	< 95%	95-99%	100%	100.00%	100.00%	100.00%	→
Bariatric Surgery - Salford Royal	RTT < 105 weeks - admissions	< 95%	95-99%	100%	100.00%	100.00%	100.00%	→
Cardiac Surgery	RTT < 52 weeks - admissions	< 95%	95-99%	100%	93.94%	98.24%	97.72%	↓
Cardiothoracic Surgery	RTT < 52 weeks - admissions	< 95%	95-99%	100%	100.00%			
Neurosurgery	RTT < 52 weeks - admissions	< 95%	95-99%	100%	99.93%	100.00%	100.00%	→
Paediatric Surgery	RTT < 52 weeks - admissions	< 95%	95-99%	100%	89.24%	93.60%	96.01%	↑
Plastic Surgery	RTT < 52 weeks - admissions	< 95%	95-99%	100%	78.01%	78.20%	79.66%	↑
Spinal Surgery Service	RTT < 52 weeks - admissions	< 95%	95-99%	100%	93.55%			
Thoracic Surgery	RTT < 52 weeks - admissions	< 95%	95-99%	100%	98.76%	98.56%	98.13%	↓
Bariatric Surgery	RTT < 52 weeks - admissions	< 95%	95-99%	100%	90.14%	95.71%	95.59%	↑
Cardiac Surgery	< 36 weeks for First OP	< 95%	95-99%	100%	99.24%	98.23%	98.97%	↑
Neurosurgery	< 36 weeks for First OP	< 95%	95-99%	100%	100.00%	100.00%	100.00%	→
Paediatric Surgery	< 36 weeks for First OP	< 95%	95-99%	100%	92.92%	96.76%	99.25%	↑
Plastic Surgery	< 36 weeks for First OP	< 95%	95-99%	100%	99.31%	98.31%	96.82%	↓
Thoracic Surgery	< 36 weeks for First OP	< 95%	95-99%	100%	100.00%	100.00%	100.00%	→
Bariatric Surgery - Swansea Bay UHB	< 36 weeks for First OP	< 95%	95-99%	100%	100.00%	100.00%	100.00%	→
Cardiac Surgery	< 52 weeks for First OP	< 95%	95-99%	100%	100.00%	98.23%	98.97%	↑
Neurosurgery	< 52 weeks for First OP	< 95%	95-99%	100%	100.00%	100.00%	100.00%	→
Paediatric Surgery	< 52 weeks for First OP	< 95%	95-99%	100%	99.46%	100.00%	100.00%	→
Plastic Surgery	< 52 weeks for First OP	< 95%	95-99%	100%	100.00%	100.00%	100.00%	→
Thoracic Surgery	< 52 weeks for First OP	< 95%	95-99%	100%	100.00%	100.00%	100.00%	→
Bariatric Surgery - Swansea Bay UHB	< 52 weeks for First OP	< 95%	95-99%	100%	100.00%	100.00%	100.00%	→

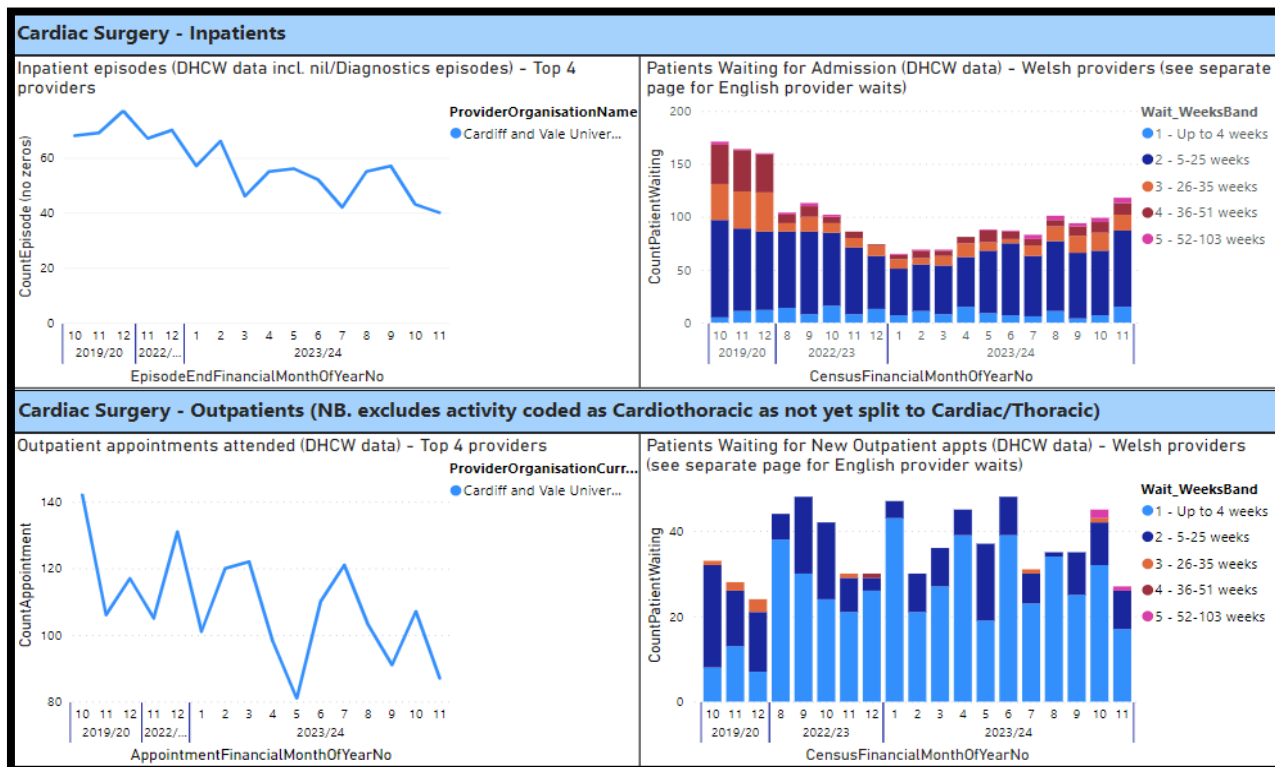
Note: OP figures relate to Welsh providers only as pathway stage not known for English providers

7. Specific Service details

7.1 Cardiac Surgery

Cardiff & Vale UHB - Performance data and forecasts

Cardiac Surgery current performance:



Waiting list analysis:

CensusFinancialYearStyle	2023/24				
Specialty_WHSSC	202307	202308	202309	202310	202311
Cardiac Surgery	158	147	153	174	173
Cardiff and Vale University Local Health Board	158	147	153	174	173
Admitted diagnostic intervention	83	101	94	99	118
Diagnostic	3	4	2	3	3
FUP OP appointment	41	7	22	27	25
New OP appointment	31	35	35	45	27
Total	158	147	153	174	173

CensusFinancialYearStyle	2023/24				
Specialty_WHSSC	202307	202308	202309	202310	202311
Cardiac Surgery	158	147	153	174	173
Cardiff and Vale University Local Health Board	158	147	153	174	173
1 - Up to 4 weeks	41	50	40	49	35
2 - 5-25 weeks	89	72	82	89	104
3 - 26-35 weeks	17	15	18	18	15
4 - 36-51 weeks	7	6	10	12	13
5 - 52-103 weeks	4	4	3	6	6
Total	158	147	153	174	173

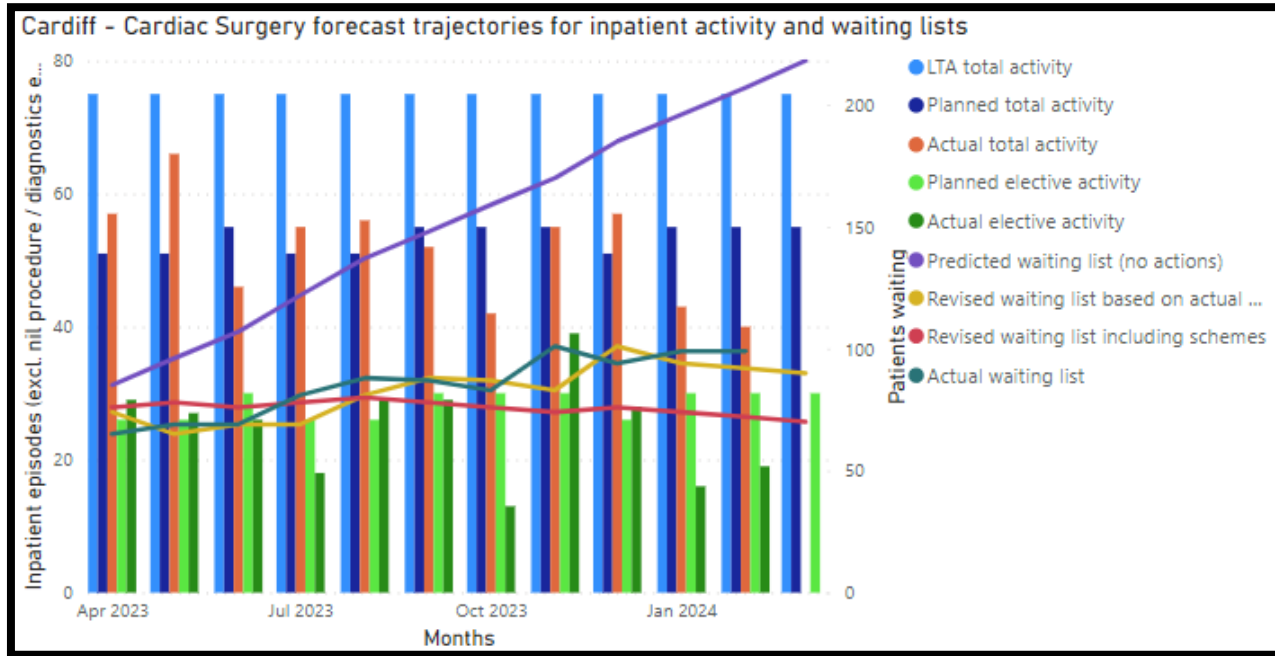
Current Performance

Following a decrease in inpatient waits through 2022/23 and early 2023/24, waits have gradually increased over the past few months, with a significant increase in month 11 noted, including an increase in the number of longer (52-103 week) waiters.

The Health Board have continued to advise that increases in the number of waiters is indicative of the continuing challenges that the service faces in respect of anaesthetist and ODP cover, with similar challenges evident across the UK. Outpatient waits – which are subject to notable month-on-month volatility – jumped significantly in month 10 before dropping back in month 11.

Waits will continue to be monitored via Risk, Recovery and Assurance meetings. Moving forward, these meetings will also be used to discuss the service's escalation status (currently level 2). Although escalation-specific meetings were held in January and March 2024 as a result of NWJCC not receiving adequate assurance of the status of those remaining escalation actions, significant progress was evident, and the service is on track to return to the Hospital of Wales in July 2024.

Cardiac Surgery 2023/24 forecasts:



What actions are NWJCC taking?

NWJCC is continuing to investigate the growth in the number of TAVI procedures, the profile of devices employed, and any resultant impact on the volume of NWJCC-commissioned cardiac surgery. It was agreed in January 2023 that this work would be taken forward as a two-phase review.

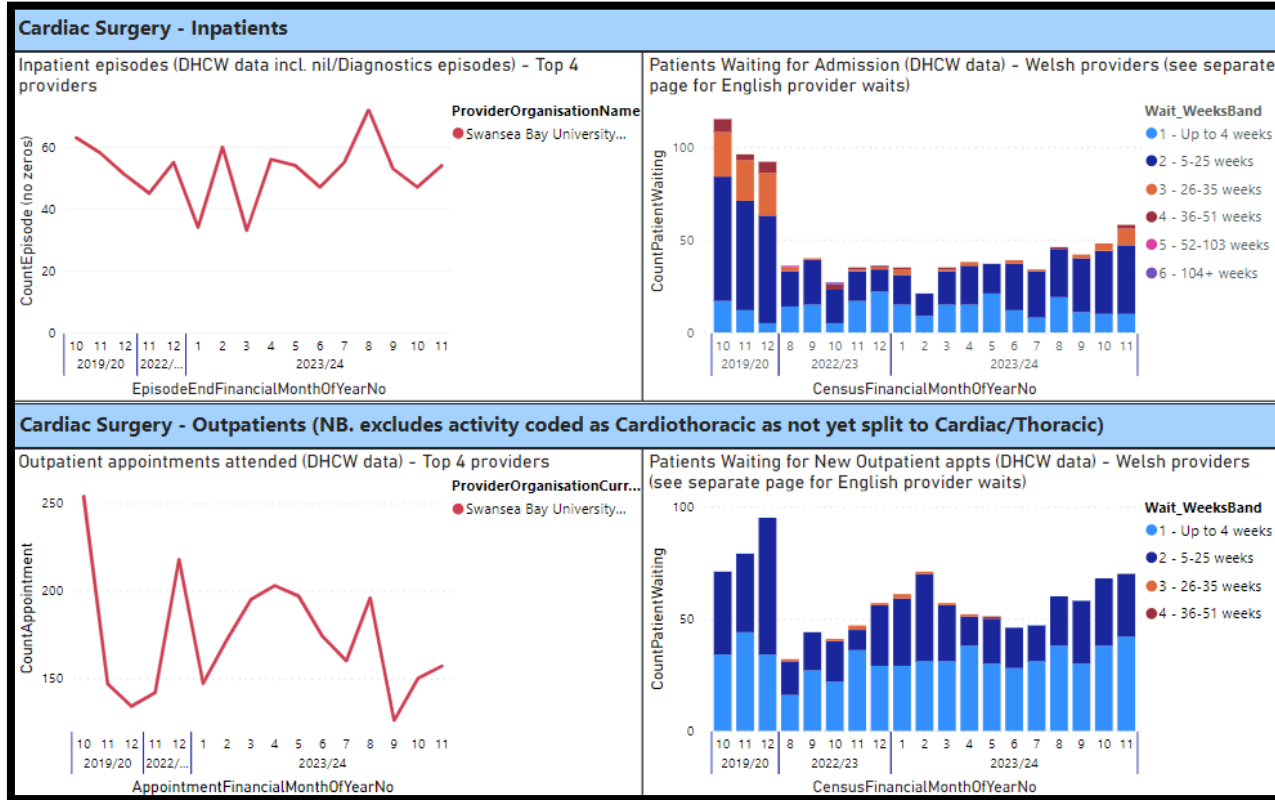
Phase 1 sought to re-baseline the TAVI/cardiac surgery contract, ascertain whether the TAVI policy remains fit for purpose, and consider the differential costs of TAVI valve types. The outcomes of Phase 1 were reported to Joint Committee in January 2024 and will now be followed by a negotiation with health boards relating to the TAVI/cardiac surgery contract. Phase 2 – which is focussed on the optimising the configuration of the cardiac surgery service – has been commenced with the collation of related evidence and analysis.

What are the main areas of risk?

The service is not planning to meet the contracted inpatient levels; Health Board forecasts include assumptions of additional activity through a sustainable theatre staffing and the recruitment of a 6th consultant. Although it has been previously highlighted that any change to these assumptions would see waiting lists increase, concerns with theatre staffing are understood to have been addressed, with the 6th consultant having recently commenced in post.

Swansea Bay UHB - Performance data and forecasts

Cardiac Surgery current performance:



Waiting list analysis:

Current Performance

The data indicates a decrease in the number of inpatient waiters though 2022/23, followed by a more variable picture during 2023/24. Although a decrease in the number of outpatient waiters through the early part of 2023/24 was also evident, both inpatient and outpatient waits trended upwards in months 8-10, with a significant increase (particularly in respect of longer waiters) in month 11. The Health Board has highlighted a growth in referrals, but remains confident that waits can be managed.

The Cardiac surgery service has previously highlighted that it has additional inpatient capacity, which has been offered to NHSE cardiac surgery centres as a way of ameliorating ongoing service pressures. At the time of writing (April 2023), this offer is yet to be taken up, although NWJCC is continuing to work with the Health Board and BCUHB to understand whether some of this capacity may be utilised by North Wales patients.

The monitoring of Welsh patients continues to be undertaken via Cardiac services Risk, Assurance and Recovery meetings. These meetings are also used to monitor the Cardiac Surgery service's current escalation status (currently Level 2). It had been planned that the service's escalation level would be discussed by the Commissioning Team in December 2023 following the planned submission of an escalation actions update by

CensusFinancialYearStyle	2023/24				
Specialty_WHSSC	202307	202308	202309	202310	202311
Cardiac Surgery	123	155	156	166	178
Swansea Bay University Local Health Board	123	155	156	166	178
New OP appointment	47	60	58	68	70
FUP OP appointment	26	32	36	34	34
Diagnostic	16	17	20	16	16
Admitted diagnostic intervention	34	46	42	48	58
Total	123	155	156	166	178

CensusFinancialYearStyle	2023/24				
Specialty_WHSSC	202307	202308	202309	202310	202311
Cardiac Surgery	123	155	156	166	178
Swansea Bay University Local Health Board	123	155	156	166	178
1 - Up to 4 weeks	43	64	47	51	57
2 - 5-25 weeks	71	81	95	94	94
3 - 26-35 weeks	7	4	6	12	15
4 - 36-51 weeks	2	6	8	9	10
5 - 52-103 weeks					2
Total	123	155	156	166	178

the cardiac surgery service, but this submission was delayed and the service will remain in level 2 until discussed in 2024. Given the continuing wait for the update to be submitted, the NWJCC Associate Medical Director has recently corresponded with the SBUHB Interim Executive Medical Director.

What actions are NWJCC taking?

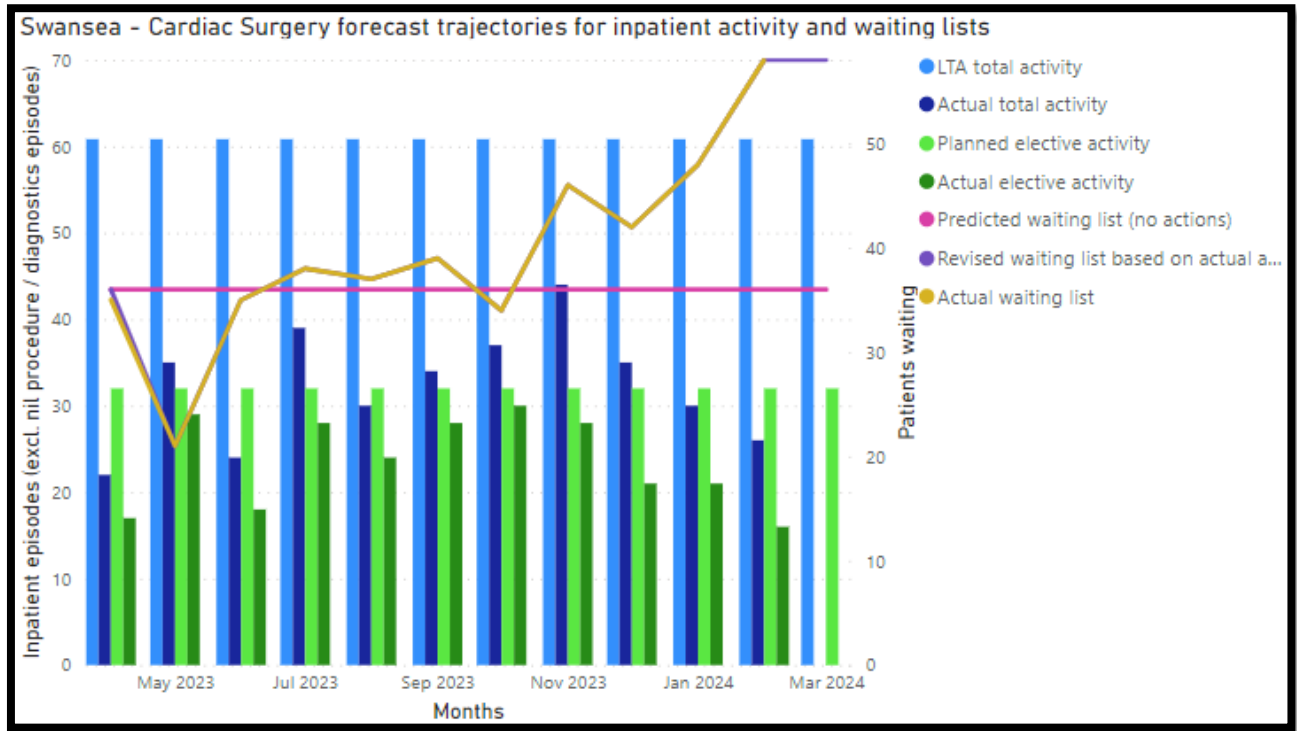
NWJCC is continuing to investigate the growth in the number of TAVI procedures, the profile of devices employed, and any resultant impact on the volume of NWJCC-commissioned cardiac surgery. It was agreed in January 2023 that this work would be taken forward as a two-phase review.

Phase 1 sought to re-baseline the TAVI/cardiac surgery contract, ascertain whether the TAVI policy remains fit for purpose, and consider the differential costs of TAVI valve types. The outcomes of Phase 1 were reported to Joint Committee in January 2024 and will now be followed by a negotiation with health boards relating to the TAVI/cardiac surgery contract. Phase 2 – which is focussed on the optimising the configuration of the cardiac surgery service – has been commenced with the collation of related evidence and analysis.

What are the main areas of risk?

Swansea Bay has hit the WG target of no waiters for admissions over 52 weeks, with the longest current waiters being 1 patient in the 36-51 week wait band.

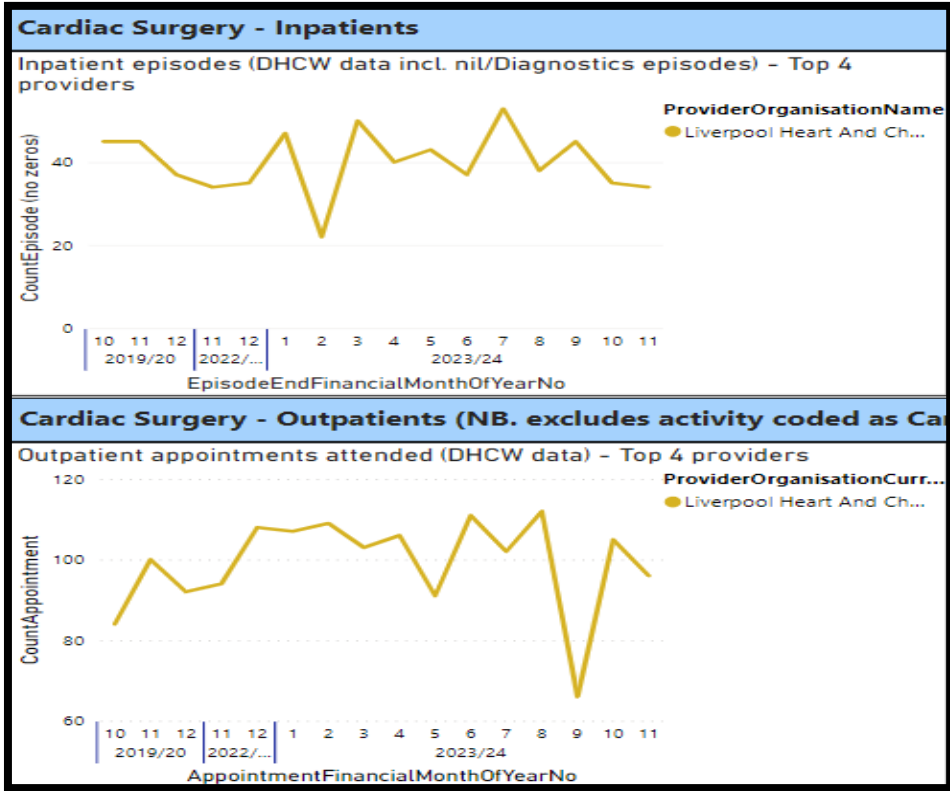
Cardiac Surgery 2023/24 forecasts:



The service is not planning to meet the contracted inpatient levels, but demand is also appearing lower, hence the waiting lists do not appear to be affected adversely.

Liverpool Heart & Chest - Performance data and forecasts

Cardiac Surgery current performance:



Waiting list analysis:

Current Performance

As noted in previous updates, although Liverpool Heart & Chest Hospital has recovered well when compared to pre-Covid levels, inpatient waiting lists have been steadily rising during 2023-24, flattening slightly between months 8-10 and reducing marginally in month 11. It is understood that such pressures are evident across NHSE cardiac surgery services; the potential for LHCH to utilise the NHSE Interim Policy Position Statement for TAVI (which would facilitate TAVI being used as an alternative to cardiac surgery for intermediate and low risk patients) has been discussed, with the service having indicated that the policy is in line with extant clinical practice.

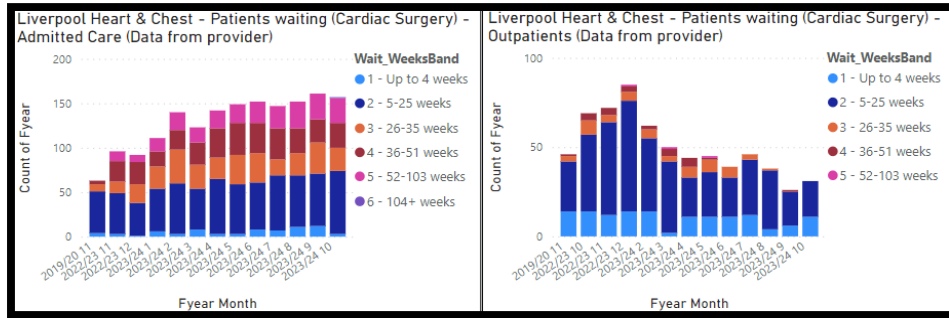
Although outpatient waits had reduced significantly over the course of 2023-24, the data for months 7-11 would indicate greater volatility. At its most recent SLA meeting, the hospital provided assurance that it has actions in place to manage waits, but these will continue to be monitored.

What actions are NWJCC taking?

Although the LHCH waiting list position had been monitored via regular SLA meetings, recent trends and increasing correspondence from BCUHB relating to waits, activity, communication and outreach has compelled the reinstatement of regular LHCH Risk and Assurance meetings, which were last undertaken in January 2019. The intention is that these meetings will be bi-monthly, commencing 19 April 2024.

What are the main areas of risk?

Liverpool appears on track to hit the WG target of no waiters for admissions over 52 weeks, although waiting lists have marginally increasing lately. The New outpatient target of no waiters over 36

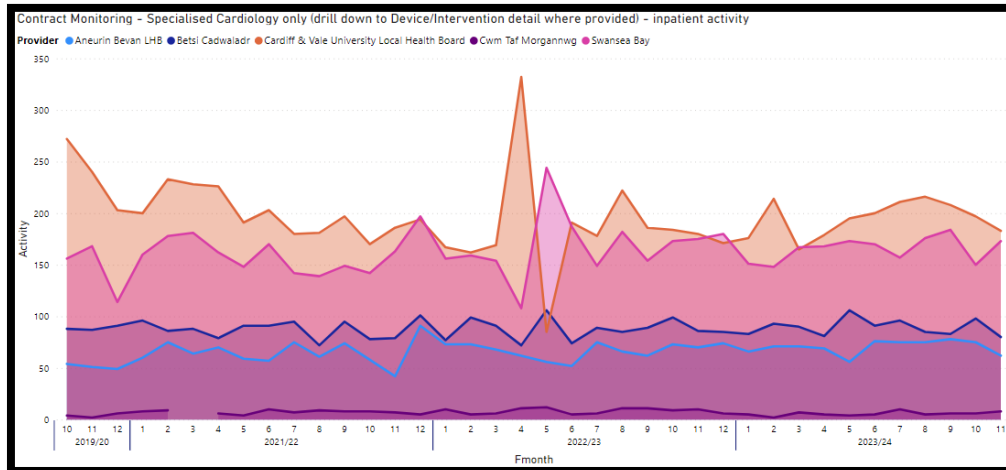


weeks also appears on track with no patients currently waiting longer than that.

7.2 Cardiology (specialised Cardiology only)

Cardiology - Performance data and forecasts

Cardiology current performance (specialised inpatient activity):



Cardiology Waiting list analysis (Note: ALL Specialised and Non-specialised):

Current Performance

It is evident that the volume of specialist cardiology activity at Cardiff & Vale and Swansea Bay UHB's continues to be greater than that delivered by Aneurin Bevan, Betsi Cadwaladr and Cwm Taf Morgannwg University Health Boards, reflecting the greater range of procedures undertaken, population sizes, and the relative stage of development of the different services.

Although overall inpatient activity since 2021/22 has been relatively flat, Cardiff and Vale's activity levels rose steadily between month 2 and month 8, before dropping back between months 8 and 11. Activity in SBUHB appears subject to significantly great month-on-month volatility. The Cardiac Commissioning Team has previously observed that the CTMUHB device service had been undertaking less activity during 2023/24 than during 2022/23; investigations indicated that the temporary loss of an implanter (now resolved) has been keenly felt, and it is evident that activity has increased over the course of the last three months. Volumes in BCUHB and ABUHB have dipped between months 10 and 11, which will be discussed with the services.

DHCW Patients waiting - Cardiology						
CensusFinancialMonthNo	Admitted diagnostic intervention	Diagnostic	FUP OP appointment	New OP appointment	Unknown	Total
202309	1,603	3,153	6,333	21,453	922	33,464
Cardiology	1,603	3,153	6,333	21,453	775	33,317
Aneurin Bevan University Local Health Board	177	322	208	4,877		5,584
Betsi Cadwaladr University Local Health Board	53	1,022	433	4,602		6,110
Cardiff and Vale University Local Health Board	637	362	913	3,737		5,649
Countess Of Chester Hospital Nhs foundation trust					183	183
Cwm Taf Morgannwg University Local Health Board	225	862	164	4,518		5,769
Hywel Dda University Local Health Board	122	32	4,425	2,066		6,645
Liverpool Heart And Chest Hospital nhs foundation				162	167	329
Manchester University Nhs Foundation Trust					5	5
Powys Teaching Local Health Board		24	9	192		225
Royal United Hospitals Bath Nhs Foundation trust					5	5
Swansea Bay University Local Health Board	389	529	181	1,299		2,398
University Hospitals Birmingham Nhs Foundation t					15	15
University Hospitals Bristol And Weston nhs foun					70	70
University Hospitals Of North Midlands nhs trust					5	5
Wye Valley Nhs Trust					325	325
Paediatric Cardiology					147	147
Alder Hey Children's Nhs Foundation trust					67	67
University Hospitals Bristol And Weston nhs foun					78	78
Wye Valley Nhs Trust					2	2
Total	1,603	3,153	6,333	21,453	922	33,464

What actions are NWJCC taking?

NWJCC monitors specialist cardiology performance in Cardiff & Vale and Swansea Bay UHB's via Risk, Assurance and Recovery meetings, agreeing mitigating actions as required. The performance of Aneurin Bevan, Betsi Cadwaladr and Cwm Taf Morgannwg University Health Boards is monitored via SLA meetings.

What are the main areas of risk?

NWJCC will be working to agree performance baselines performance baselines for Aneurin Bevan, Betsi Cadwaladr and Cwm Taf Morgannwg University Health Boards (per 2024/25 ICP) in order to facilitate robust performance monitoring and the gauge the success (or otherwise) of recent repatriations.

7.3 Bariatric Surgery

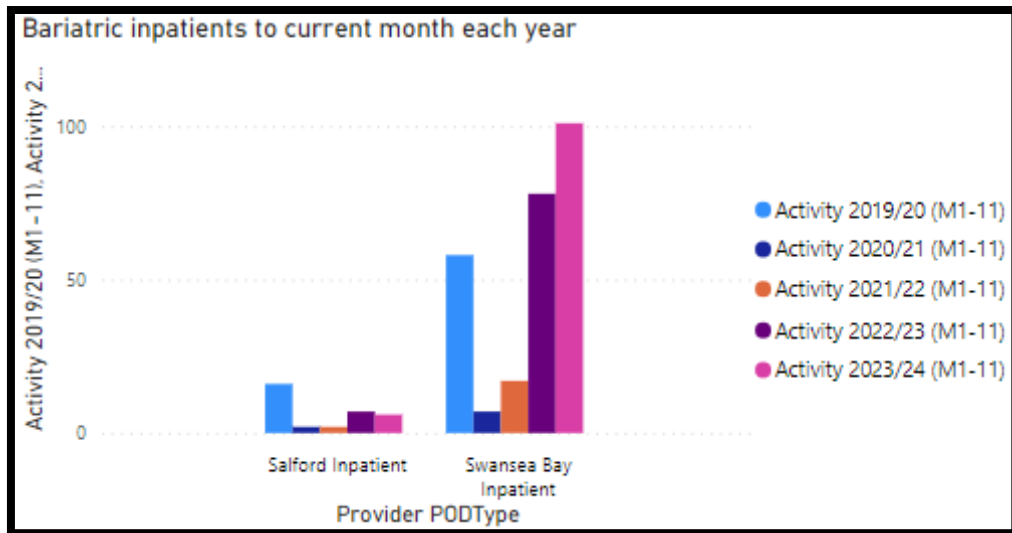
Bariatric Surgery - Performance data and forecasts

Bariatric Surgery current performance:

Bariatric inpatients to current month each year					
Provider	Activity 2019/20 (M1-11)	Activity 2021/22 (M1-11)	Activity 2022/23 (M1-11)	Activity 2023/24 (M1-11)	Activity 2023/24 % diff from 2019/20
Swansea Bay	58	17	78	101	174%
Sleeves/Bypass		7	49	72	
Removal of banding		10	29	29	
Inpatient	58				
Salford	16	2	7	6	38%
Inpatients	16	2	7	6	38%
Total	74	19	85	107	145%

Current Performance

As highlighted in previous updates, the Swansea Bay Bariatric Surgery service has delivered significant increases in the volume of inpatient and outpatient activity since January 2023, significantly reducing both the overall waiting list and the number of long waiters. In line with the service's expectations, activity levels have reduced slightly from April 2023, but the Health Board has advised that it has exceeded its contract levels for 2023-24. In addition, although the overall number of waiters did not materially increase between months 10 and 11, the proportion of longer waiters appears higher than had been the case previously. WIMOS has also advised that they are seeing an increasing number of referrals from Level 3 services, which may impact on waits moving forward.



In view of concerns with the waits experienced by patients from north Wales and north Powys seeking to access the service provided by Salford Royal Hospital, NWJCC is continuing to investigate whether patients can be referred to WIMOS in the short term in order to avoid regional inequity.

What actions are NWJCC taking?

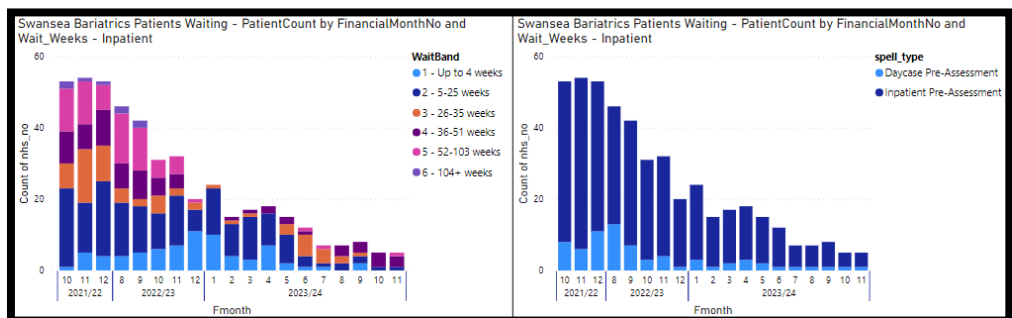
NWJCC continues to meet with the service on a bi-monthly basis to monitor the position and agree any mitigating actions as required. NWJCC also continues to work with the National Healthy Weight Pathway Steering Group in order to understand and enable the integration of Level 4 services and the Level 1-3 weight management pathway, and continues to correspond with the Welsh Government concerning the post-surgical follow-up needs of patients returning from private surgery abroad, mindful of any impact on NWJCC-commissioned Level 4 provision.

What are the main areas of risk?

If the service is to operate at full capacity, both referrals from the weight management pathway and WIMOS's improved performance will need to be maintained.

The Welsh Government has advised that patients returning from private surgery abroad who require post-surgical follow-up can be referred to Level 4 services. In the absence of any corresponding enabling resource, there will be a significant and potentially unmanageable effect on Level 4 services, impacting on waits and the activity delivered for patients who have been referred to the service via the Weight Management pathway. The Welsh Government are therefore exploring what additional resource may be required.

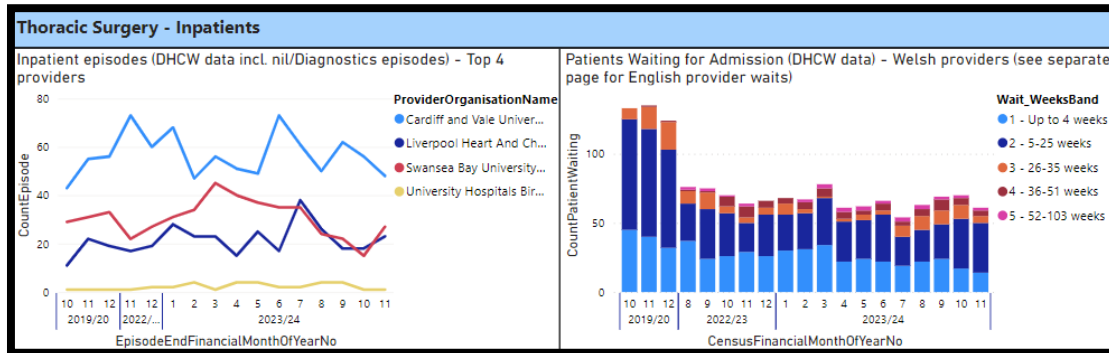
Swansea Bay Waiting list analysis:



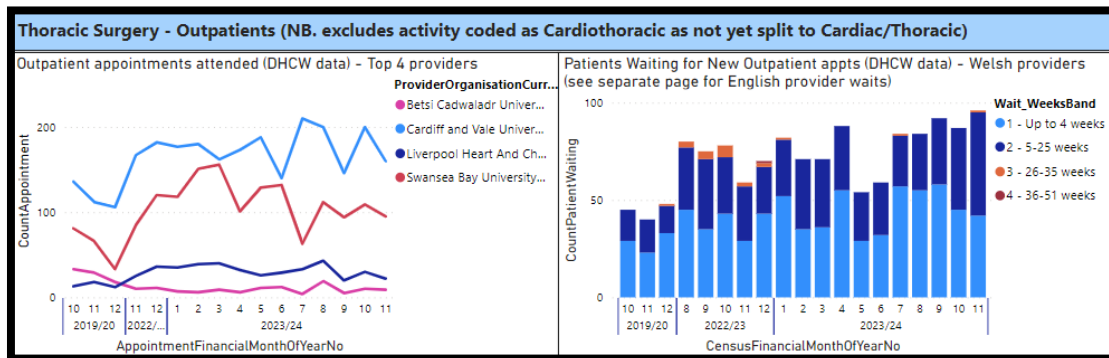
7.4 Thoracic Surgery

Thoracic Surgery - Performance data and forecasts

Thoracic Surgery current inpatient performance and Welsh provider waits:



Thoracic Surgery current outpatient performance and Welsh provider waits:



Forecast trajectories for 2023/24 have been received from Cardiff & Vale. It shows lower planned inpatient activity than contracted, but does not forecast material increases in the waiting lists, or breaches of the Welsh Government targets.

Current Performance

Whilst the Welsh centres are not performing to the full inpatient contract levels, this has not impacted waiting list levels compared to pre-Covid figures. The waiting list for inpatients has actually halved compared to the end of 2019/20.

What actions are NWJCC taking?

In interpreting the data, it is important to note that collaborative arrangements are in place between the two South Wales Thoracic surgery services to use the joint capacity across the 2 services to ensure equitable access. This ensures that if the usual centre is capacity constrained and there is available capacity at the other south Wales service, patients can be cross referred and access treatment on the basis of clinical need. This means that activity at a particular centre does not directly translate into access for residents of Health Boards for which it is the usual provider.

To date, the joint meeting has focused on primary lung cancer patients. The service has been providing elective operations for non-cancer patients, but a small number of long waiters still remain within the backlog.

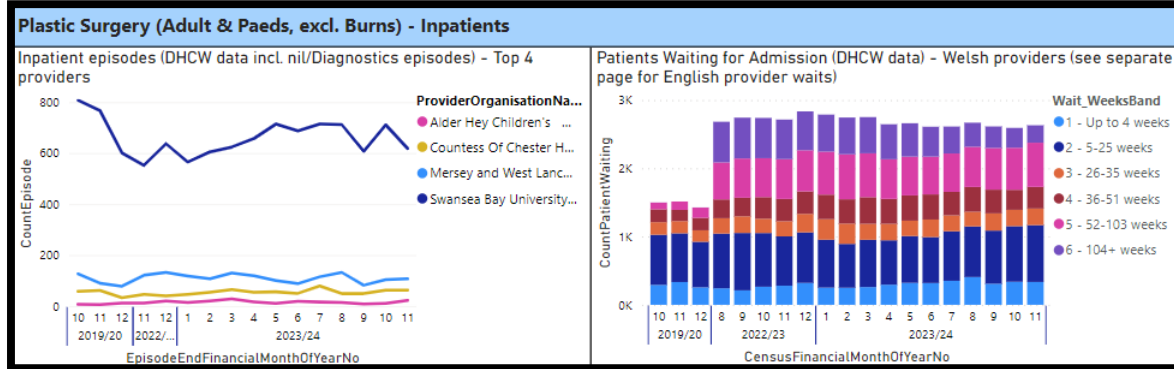
What are the main areas of risk?

With increasing activity for New outpatients, this demand will increasingly put pressure on the waiting lists for admission and treatment.

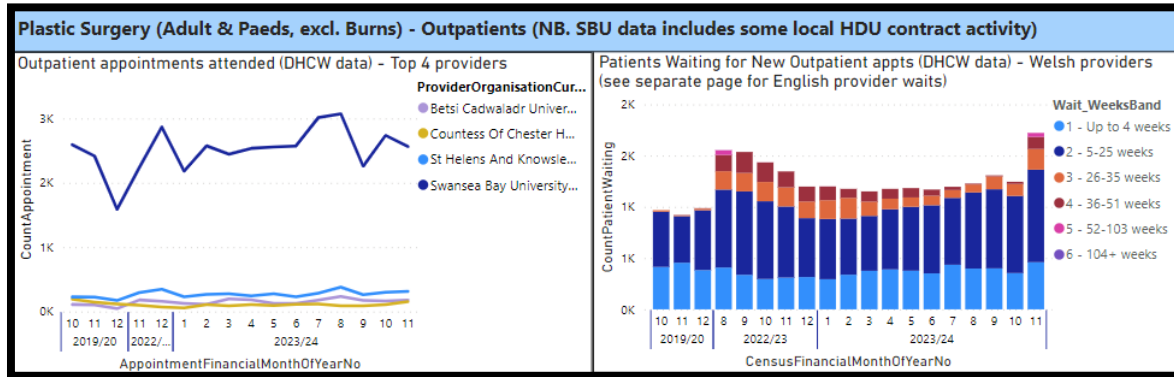
7.5 Plastic Surgery

Swansea Bay UHB - Performance data and forecasts

Plastic Surgery current inpatient performance and patient waits:



Plastic Surgery current outpatient performance and patient waits:



Current Performance

The service at Swansea Bay has been struggling with treatment and patients waiting for some time, even before Covid-19. Over 2,500 patients are waiting for admission, including 254 patients that have been waiting over 2 years, and 842 that have been waiting over 1 year.

Please note the numbers of patients waiting is as per DHCW data for February 2024, and has reduced from last month; the service have advised that they have cleansed the waiting list and have removed some of the patient numbers.

What actions are NWJCC taking?

NWJCC put the service into level 1 escalation in December 2022, which has since been increased to level 2 in July 2023.

Since the original escalation, the new outpatients waiting have reduced significantly, usually with no patients now waiting over a year, which will meet the WG New outpatient target. The total of patients waiting for admission has remained static i.e. not continued to deteriorate.

What are the main areas of risk?

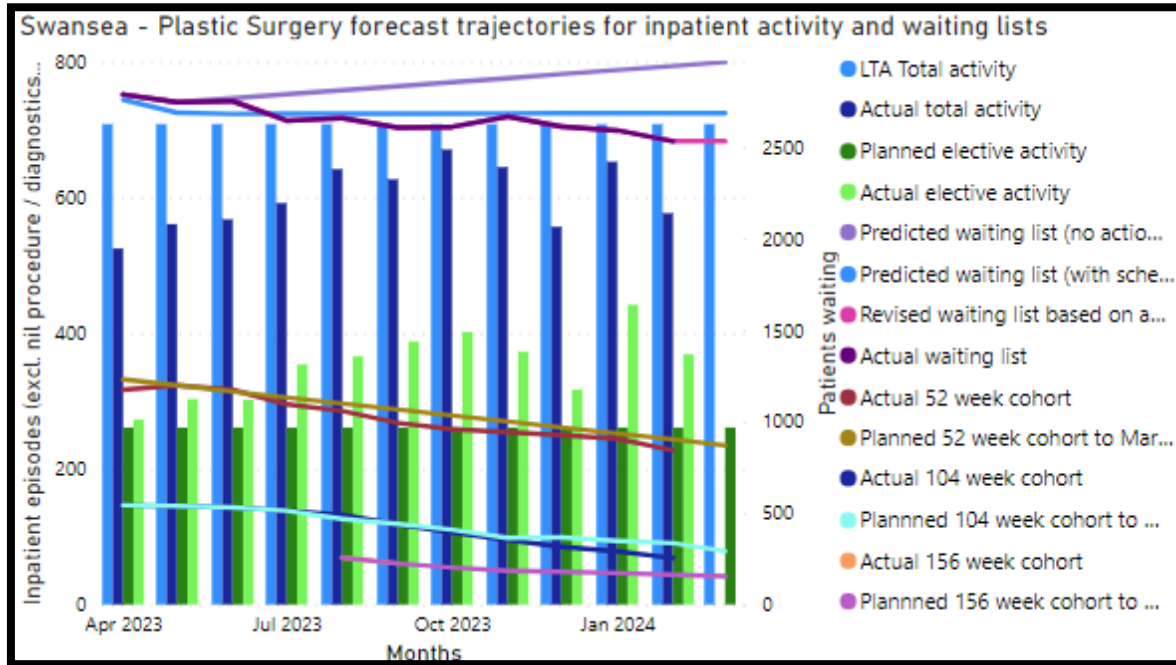
The 2023/24 forecast provided by the service assumes some small additions to capacity from various schemes, which would lead to a static total waiting list.

Breakdown of patients waiting:

CensusFinancialYearStyle	2023/24				
Specialty_WHSSC	202307	202308	202309	202310	202311
Plastic Surgery	2,610	2,667	2,612	2,591	2,532
Swansea Bay University Local Health Board	2,610	2,667	2,612	2,591	2,532
Admitted diagnostic intervention	2,610	2,667	2,612	2,591	2,532
1 - Up to 4 weeks	352	407	309	338	329
2 - 5-25 weeks	723	740	777	814	818
3 - 26-35 weeks	233	215	252	238	236
4 - 36-51 weeks	344	363	348	294	307
5 - 52-103 weeks	563	589	611	616	588
6 - 104+ weeks	395	353	315	291	254
Total	2,610	2,667	2,612	2,591	2,532

CensusFinancialYearStyle	2023/24				
Specialty_WHSSC	202307	202308	202309	202310	202311
Plastic Surgery	1,194	1,228	1,307	1,245	1,290
Swansea Bay University Local Health Board	1,194	1,228	1,307	1,245	1,290
New OP appointment	1,194	1,228	1,307	1,245	1,290
1 - Up to 4 weeks	433	398	400	354	367
2 - 5-25 weeks	653	743	772	753	748
3 - 26-35 weeks	76	78	126	117	134
4 - 36-51 weeks	32	9	9	21	41
Total	1,194	1,228	1,307	1,245	1,290

Swansea Bay UHB - Plastic Surgery 2023/24 forecasts:



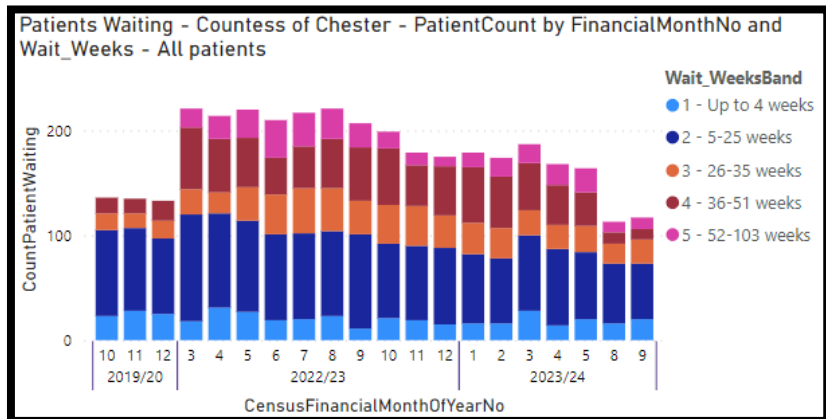
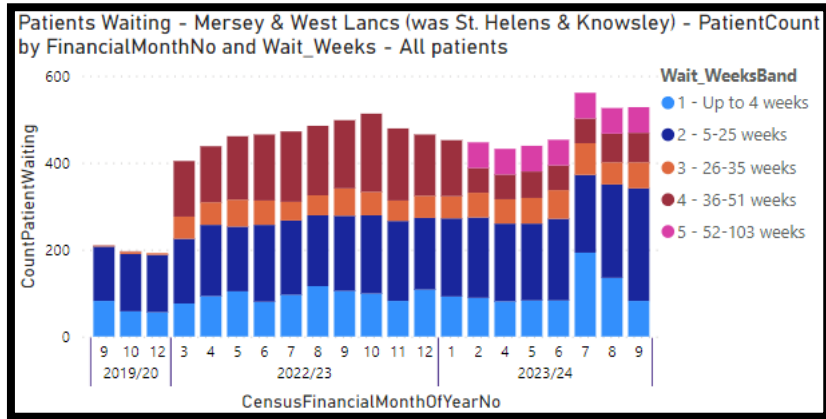
However, within that total, they estimate the patients waiting over a year would reduce from 1,231 to 870, although this would still breach the WG inpatient target.

The risk is that demand would increase and negate the impact of the additional capacity schemes.

Please note that it has been agreed that the commissioning of Plastic Surgery as a Specialty will return to Health Boards, with NWJCC retaining only an agreed sub-section of Specialised activity. A Project group is being formed to work out the details.

Plastic Surgery English providers - Performance data and forecasts

English providers waiting list analysis (total pathway, as the pathway point is not provided for English data):



Current Performance

Mersey and West Lancashire Teaching Hospital NHS Trust operate outreach clinics (outpatient, minor operations and dressing clinics) into 3 BCUHB sites. These are inconsistent across the sites. There are a number of concerns with regards to the outreach model currently in place:

- Access to appropriate facilities across the sites leading to different levels of service
- The number of vacancies in Dermatology, with referrers increasingly referring into Plastic Surgery, as the waiting lists in this area are lower compared to Dermatology
- The differing IT systems across the BCUHB sites, which has led to different waiting list management arrangements.

The BCUHB element of the North Wales Plastics pathway has been put into escalation by Welsh Government due to concerns about the quality of the service. Following investigation, the waiting times for the West and Central areas of BCUHB are currently not being reported to Welsh Government by the Health Board (not via the NWJCC contract). There are patients waiting over 156 weeks on the list and a backlog reduction is being progressed, with additional clinics commissioned to reduce the back log.

What actions are NWJCC taking?

Regular meetings with WG and BCUHB, with a request for BCUHB to convene a Task & Finish group to address the concerns Mersey and West Lancashire have been requested to undertake a Harms review of the waiting lists. BCUHB have been requested to model the demand and capacity of this service. An SLA has been developed by BCUHB for the outreach clinics from MWLT, having received feedback from MWLT on the proposed SLA, BCUHB are reviewing the proposed SLA document.

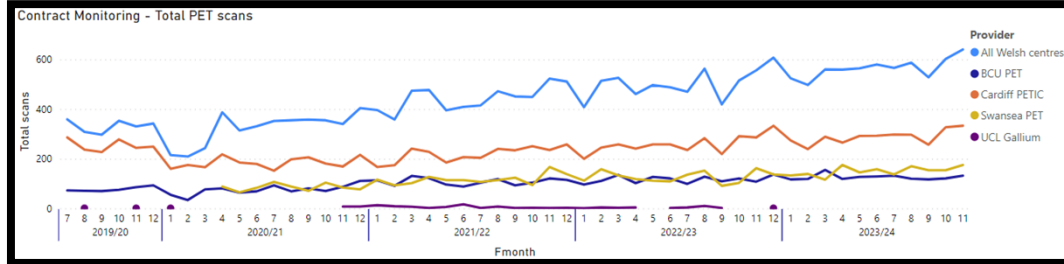
What are the main areas of risk?

Lack of Dermatology services within BCUHB which is impacting on the demand for plastic surgery and appropriate clinic space across the localities. Lack of clarity in relation to the waiting list held by BCUHB for the clinics held at Ysbyty Glan Clwyd and Ysbyty Gwynedd, including a lack of reporting arrangements about these patients.

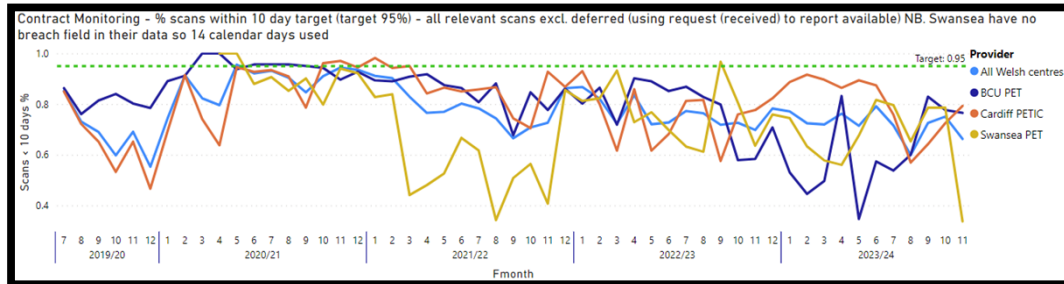
7.6 PET Scans

PET Scans - Performance data and forecasts

PET Scans current performance:



Performance against 10 working day target from PET scan request to the report being available:



Current Performance

PET scanning is an area with increasing growth and interest, which has led to capacity pressures. Cardiff recently provided significant support to Swansea when their site had major mobile scanner failures; this is now longer necessary.

What actions are NWJCC taking?

Welsh Government (WG) requested NWJCC to lead the all-Wales PET Programme, which has an oversight and assurance function for the capital replacements across Wales. A small team sit within NWJCC to facilitate all aspects of capital replacement at PET sites, and are funded from WG until early 2025.

The programme has made significant input to the PET service across Wales. A first in the UK digital scanner became live in Cardiff in July 2023. Although image optimisation is still ongoing, the site in Cardiff capacity has increased from 75 to 91 scans per week. Business cases are expected from SBUHB (fully tendered single case) and BCUHB (OBC) in 2024.

NWJCC are also working with all 3 Welsh providers to improve and standardise data collection across all sites, to ensure consistency and additional analysis opportunities.

What are the main areas of risk?

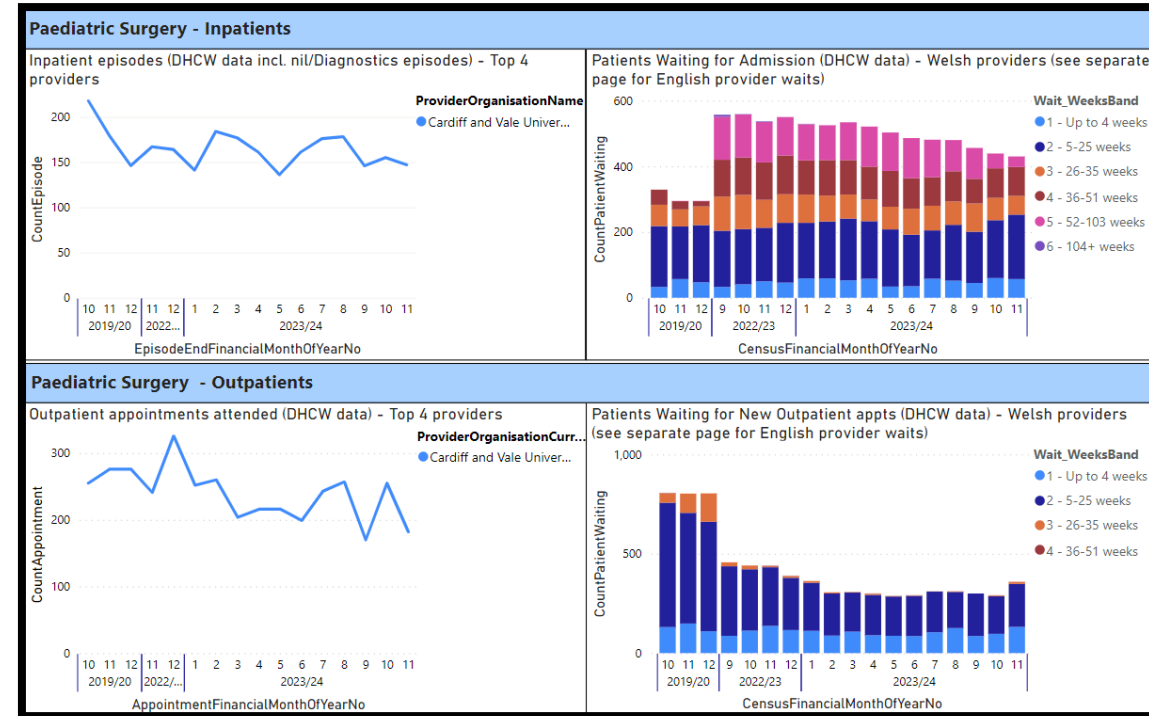
Increased demand has put significant pressure on the service, with the resulting drop of achievement of the 10 working day target of the PET scan report being available to the referring clinician.

The continued use of mobile scanners at BCUHB and SBUHB is resulting in frequent service failures due to scanner breakdown and radiopharmaceutical supply issues.

7.7 Paediatric Surgery

Cardiff & Vale UHB - Performance data and forecasts

Paediatric Surgery current performance:



Waiting list analysis:

CensusFinancialYearStyle	2023/24				
Specialty_WHSSC	202307	202308	202309	202310	202311
Paediatric Surgery	481	480	456	439	430
Cardiff and Vale University Local Health Board	481	480	456	439	430
Admitted diagnostic intervention	481	480	456	439	430
1 - Up to 4 weeks	58	52	45	60	57
2 - 5-25 weeks	147	170	156	176	196
3 - 26-35 weeks	75	71	86	68	57
4 - 36-51 weeks	87	92	75	90	88
5 - 52-103 weeks	114	95	94	45	32
Total	481	480	456	439	430

CensusFinancialYearStyle	2023/24				
Specialty_WHSSC	202307	202308	202309	202310	202311
Paediatric Surgery	311	311	300	291	359
Cardiff and Vale University Local Health Board	311	311	300	291	359
New OP appointment	311	311	300	291	359
1 - Up to 4 weeks	105	126	86	97	132
2 - 5-25 weeks	205	182	214	189	216
3 - 26-35 weeks	1	3		4	10
4 - 36-51 weeks				1	1
Total	311	311	300	291	359

Current Performance

Cardiff and Vale is reporting 32 patients waiting over 52 weeks for treatment. In dialogue with the provider, there are a number of contributing factors to the waiting list including paediatric intensive care pressures, nurse capacity, bed capacity, anaesthetic support and theatre availability.

What actions are NWJCC taking?

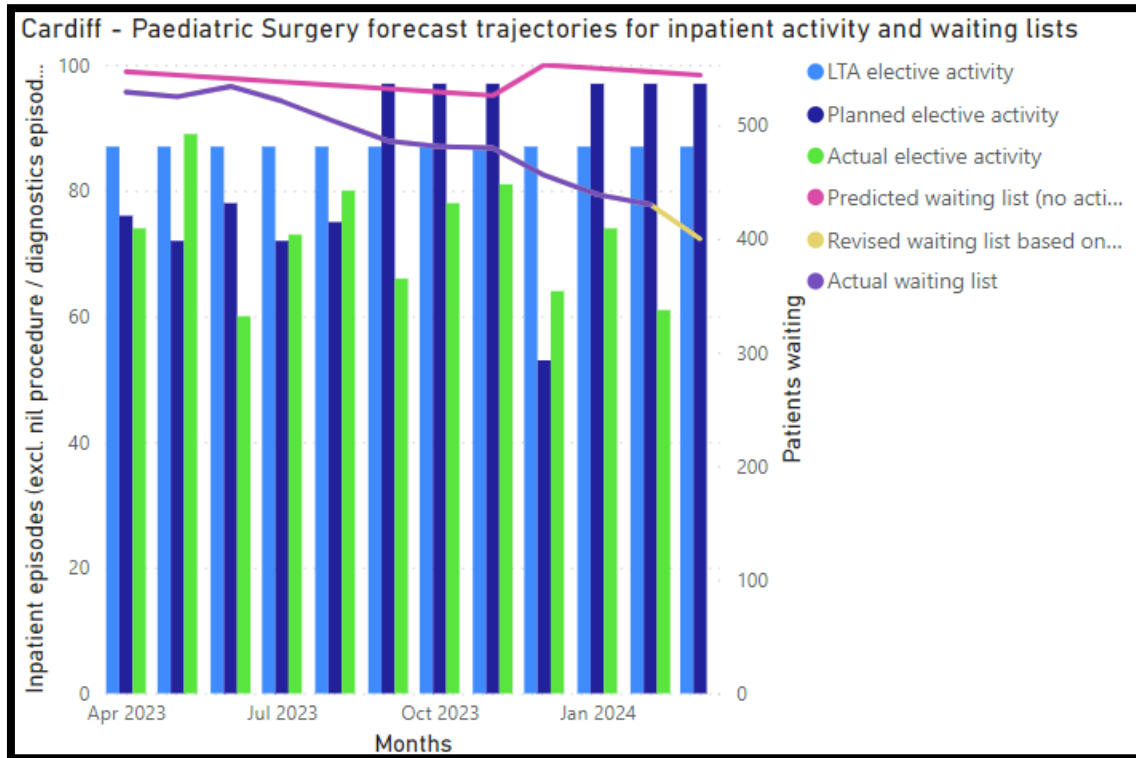
Following concerns around performance, NWJCC put the service into Level 1 escalation in December 2022, with weekly performance updates now being submitted. The escalation was increased to Level 3 in March 2023.

An improvement plan is in place for the service to deliver a 52 week waiting list position by the end of the FY, this is being monitored at Executive-led Escalation meetings, and a revised trajectory has been received. Outsourcing remains in place for the remainder of the FY.

What are the main areas of risk?

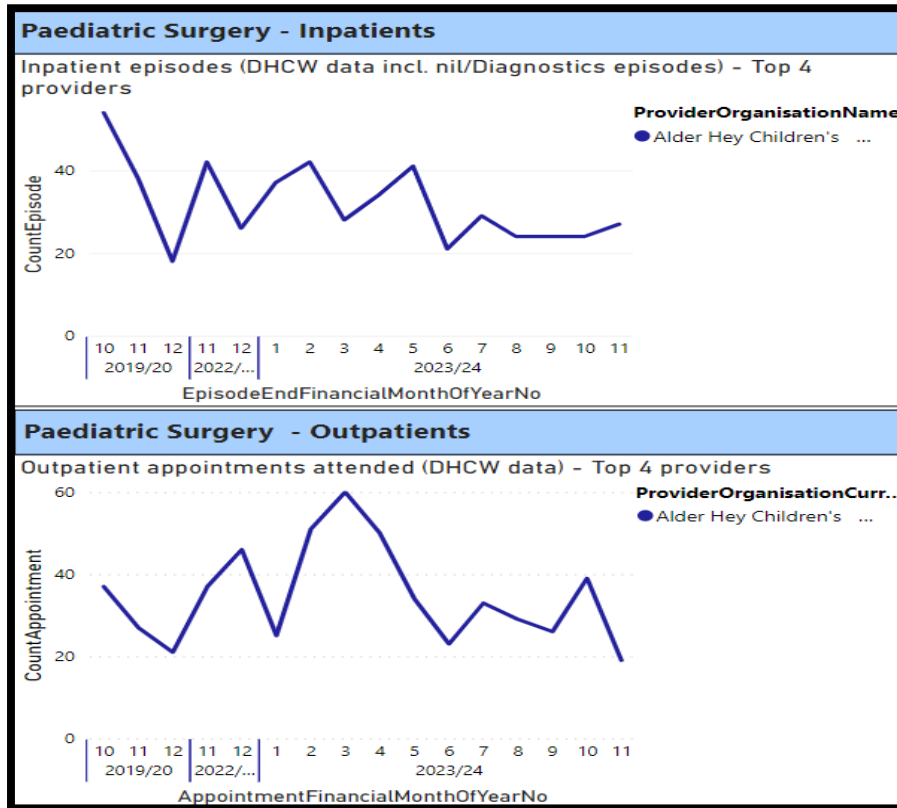
At this point, the Cardiff service is hitting the amended WG targets for 2023/24 of zero patients waiting more than 52 weeks for new outpatient appointments, or over 104 weeks for inpatients.

Cardiff & Vale UHB - Paediatric Surgery 2023/24 forecasts:



Alder Hey Childrens Hospital - Performance data and forecasts

Paediatric Surgery current performance:



Waiting list analysis:

Current Performance

Whilst activity totals are very close to pre-Covid levels, however the number of patients on the waiting list has increased. The increase in patient numbers is due to a number of contributing factors including increased referrals, post-Covid backlog and recent junior doctor strikes.

What actions are NWJCC taking?

A face to face visit took place in Quarter 1 and Alder Hey reported to NWJCC a robust plan is in place to manage the small number of patients waiting over 52 weeks. This has been achieved.

What are the main areas of risk?

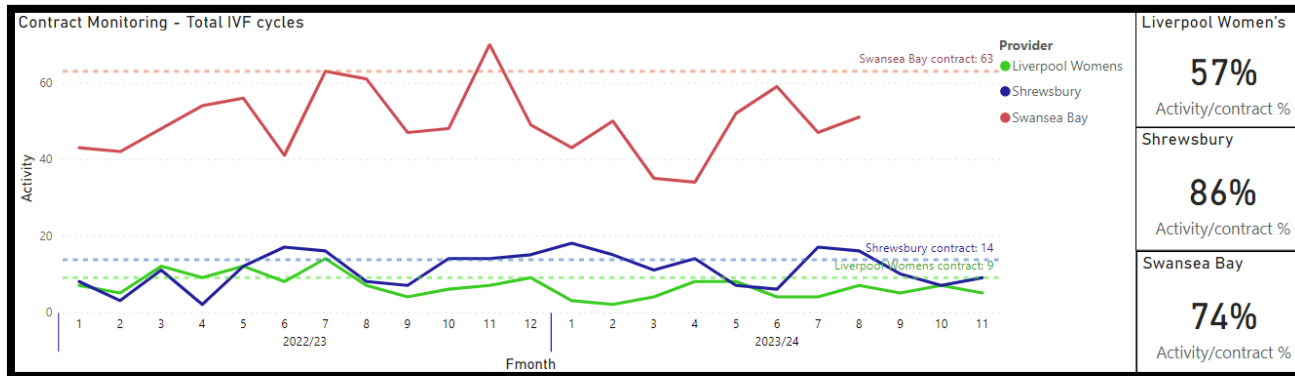
Before Covid, no patients at Alder Hey were waiting over 26 weeks, but this now applies to about a third of the patients. However, there are currently no patients waiting over 104, and just 2 waiting over 52 weeks at the end of November.

CensusFinancialYearStyle Specialty_WHSSC	2019/20			2023/24				
	201910	201911	201912	202304	202305	202307	202308	202309
Paediatric Surgery	50	49	54	90	89	89	93	89
Alder Hey Children's Nhs Foundation trust	50	49	54	90	89	89	93	89
Unknown	50	49	54	90	89	89	93	89
1 - Up to 4 weeks	18	14	13	17	18	14	17	6
2 - 5-25 weeks	32	35	41	51	42	51	50	44
3 - 26-35 weeks				18	19	9	6	13
4 - 36-51 weeks				4	10	13	18	20
5 - 52-103 weeks						2	2	6
Total	50	49	54	90	89	89	93	89

7.8 In Vitro Fertilisation (IVF)

IVF - Performance data and forecasts

IVF current performance: **No Dec 23/Jan 24/Feb 24 data from WFI**



Liverpool Women's	57%
Activity/contract %	
Shrewsbury	86%
Activity/contract %	
Swansea Bay	74%
Activity/contract %	

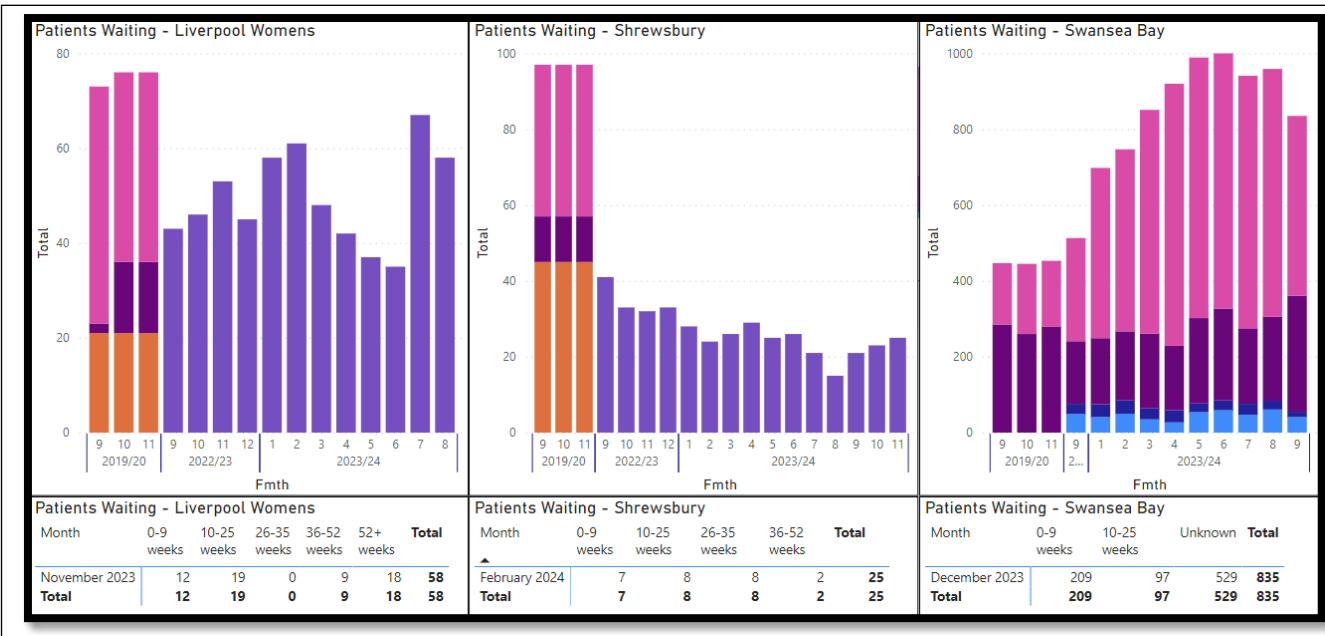
Waiting list analysis: **No Jan 24/Feb 24 data from WFI and Liverpool Womens**

Current Performance

A number of concerns regarding the safety and quality of service at the Welsh Fertility Institute (WFI) have been raised through different routes, including the HFEA re-inspection report of January 2023, NWJCC Quality and Assurance meetings, and WFI/IPFR requests. The service are due to be re-inspected by the HFEA in February 2024 (Cardiff site) and March 2024 (Neath Port Talbot site).

What actions are NWJCC taking?

NWJCC have progressively increased the escalation of the WFI service, with it now at level 4 as of October 2023. Regular executive to executive and NWJCC escalation meetings are taking place. NWJCC continue to request MDS and performance management information in line with the SLA requirements. NWJCC continue to review the MDS data to ensure compliance with commissioning, providing feedback to the service.



What are the main areas of risk?

Quality and outcomes of the service in general, along with issues obtaining current activity and wait data.

A requirement of the HFEA licence is the need for a Person Responsible, PR. The current PR has requested to stand down from the position. The service are at risk of not being able to provide HFEA licenced activity if they do not have a PR.

7.9 Neurosurgery

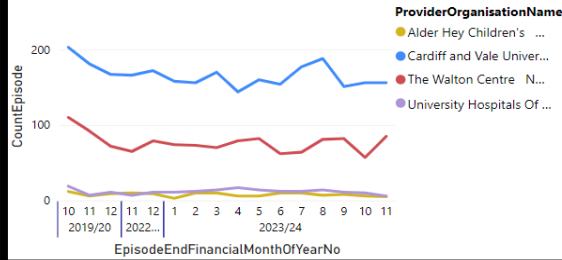
Neurosurgery - Performance data and forecasts **Current Performance**

Neurosurgery current performance:

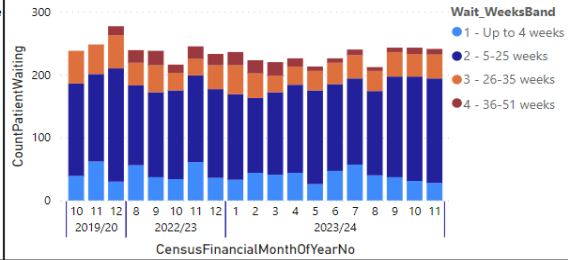
The Neurosurgery services have been stretched over recent years, but total inpatient waiting lists are still comparable to pre-Covid levels at Cardiff, and no patient is waiting over 52 weeks for treatment. Whilst higher than pre-Covid, patient numbers waiting for New outpatient appointments have been progressively decreasing at Cardiff, but no patients are currently waiting longer than 36 weeks. Total patients waiting at the Walton are also comparable to pre-Covid levels, although the data shows this has been increasing steadily over the past few months. Actual IP activity is below elective contract activity. The trajectory for expected non-elective and actual activity are on target.

Neurosurgery - Inpatients

Inpatient episodes (DHCW data incl. ni/Diagnostics episodes) - Top 4 providers

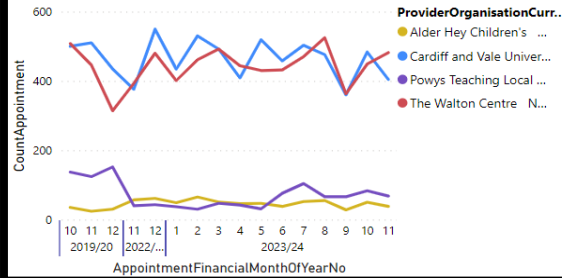


Patients Waiting for Admission (DHCW data) - Welsh providers (see separate page for English provider waits)

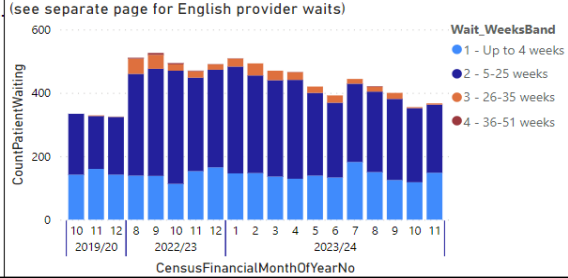


Neurosurgery - Outpatients

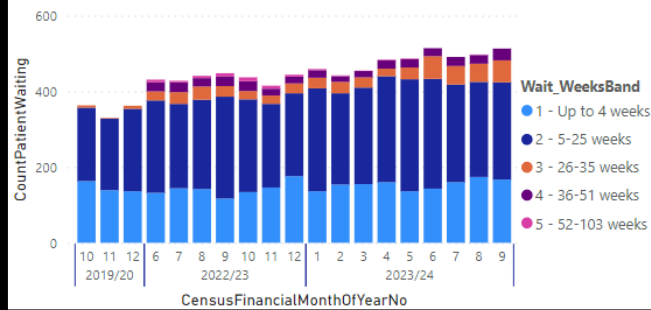
Outpatient appointments attended (DHCW data) - Top 4 providers



Patients Waiting for New Outpatient appts (DHCW data) - Welsh providers (see separate page for English provider waits)



Walton/Neurosurgery - Patients Waiting - PatientCount by FinancialMonthNo and Wait_Weeks - All patients (split not provided by England in DHCW data)



What actions are NWJCC taking?

Cardiff have provided a 2023/24 forecast of their activity and waiting lists. Their projections showed a reducing waiting list during quarter 1, based on over-performing against their contracted elective activity, however the waiting list has increased since then - the evening theatre sessions are no longer being provided. NWJCC is continuing to monitor the situation and will be addressing the issue at the next Performance meeting. This issue may require escalation. The cessation of the extended theatre sessions will be raised at the next Cardiff SLA meeting in January 2024.

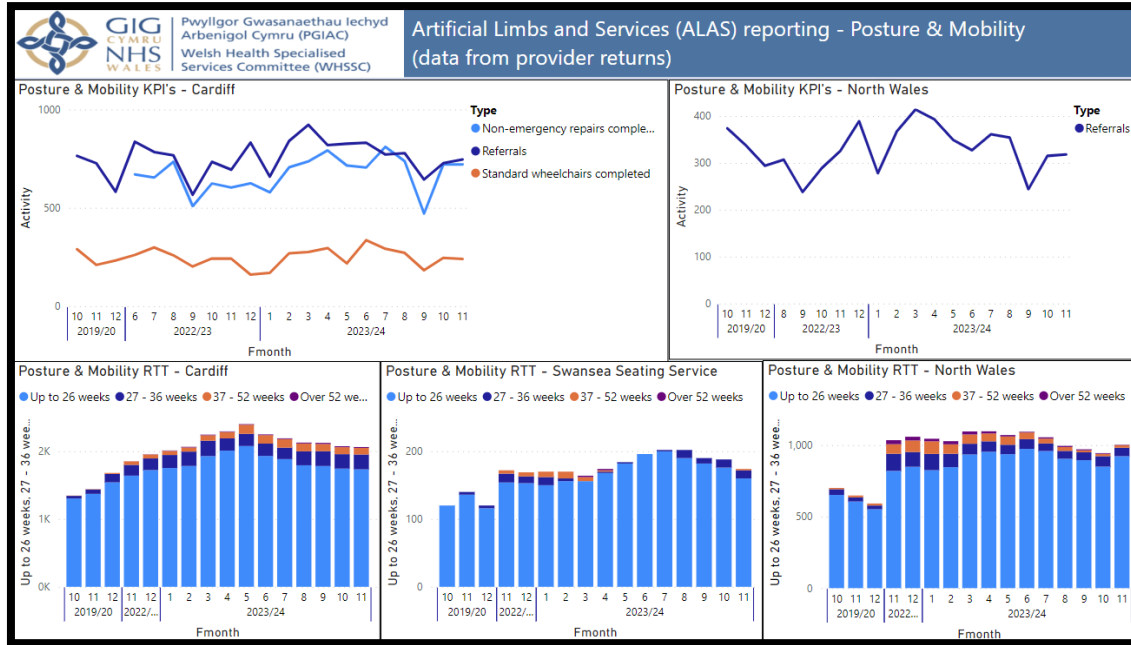
What are the main areas of risk?

At this point, no patients have been waiting over 52 weeks at Cardiff or the Walton. However, with increasing waiting lists for New outpatients, this demand will increasingly put pressure on the waiting lists for admission and treatment.

7.10 ALAS (Artificial Limbs Service)

ALAS - Performance data and forecasts

Posture and Mobility referrals and waiting lists:



Month Area	January 2024				Total waiting	February 2024				Total waiting
	Up to 26 weeks	27 - 36 weeks	37 - 52 weeks	Over 52 weeks		Up to 26 weeks	27 - 36 weeks	37 - 52 weeks	Over 52 weeks	
EAT RRT	203	32	9	0	244	189	37	9	0	235
North Wales - Posture & Mobility RTT	850	73	16	5	944	923	59	18	3	1,003
North Wales - Prosthetics RTT	94				94	87	2			89
South Wales - Posture & Mobility RTT - Cardiff	1,745	213	103	14	2,075	1,734	219	97	13	2,063
South Wales - Posture & Mobility RTT - Swansea	88	6	0	0	94	80	6	1	0	87
South Wales - Prosthetics RTT - Cardiff	368	30	15	1	414	376	30	13	0	419
South Wales - Prosthetics RTT - Swansea	223	8	2		233	223	8	2		233
South Wales - Welsh Artificial Eye Service	290	36	11	3	340	345	34	14	1	394
Total	3,861	398	156	23	4,438	3,957	395	154	17	4,523

Current Performance

Posture and Mobility services have been struggling with rising waiting lists, most patients are not waiting over 36 weeks.

After an initial lull in referrals, these have now increased again. There are <5 patients waiting over 52 weeks for the North Wales Posture and Mobility services and 13 in total for the Cardiff/Swansea services. The teams are meeting weekly to provide assurance and is being actively monitored.

Key challenges have been delays in the supply chain, complexity of clients having increased due to the impact of Covid in accessing services, and lengthier appointments due to complexity needs and staff recruitment challenges.

What actions are NWJCC taking?

Regular performance meetings with the services, which have led to patient level activity data now being received from all 3 centres, along with the data around patients waiting.

There is also a new PROMS system being developed, with data to be received this financial year.

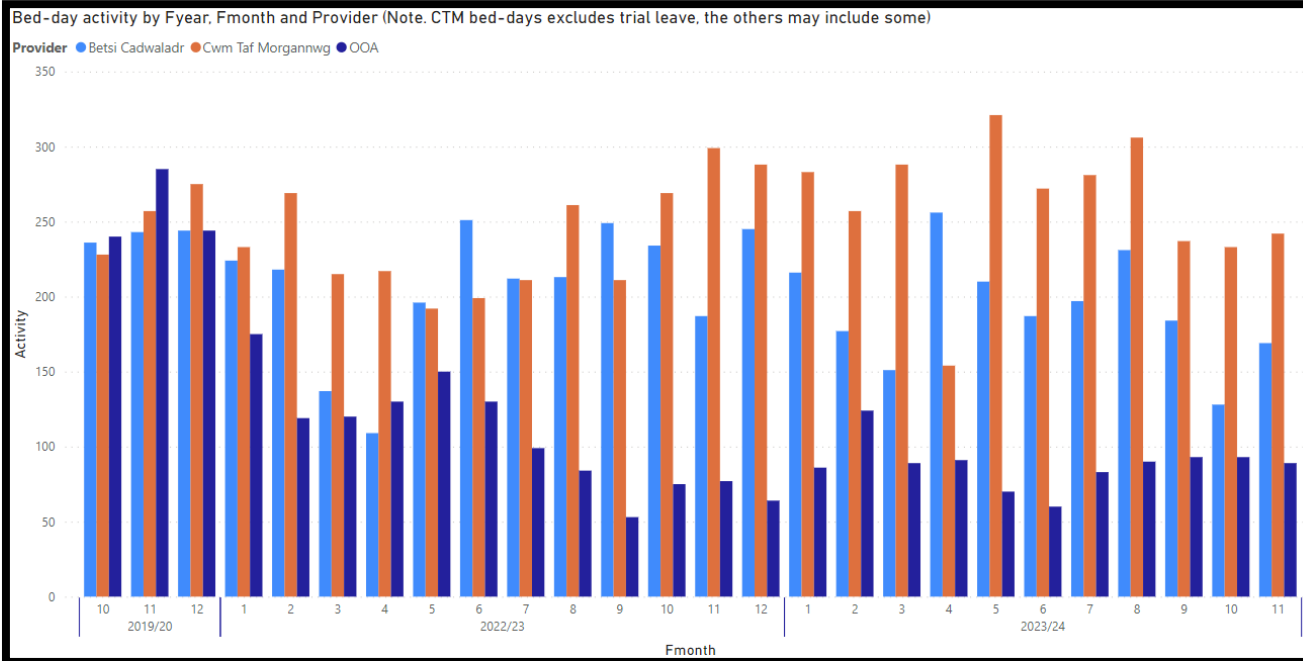
What are the main areas of risk?

Patients waiting a long time can deteriorate in the meantime.

7.11 CAMHS – NHS and Out of Area Placements (OOA)

CAMHS - Performance data

CAMHS current performance:



Current Performance

Whilst the NHS inpatient CAMHS units are close to pre-Covid bed-days, the use of other providers has reduced.

The Ty Lidiard service was de-escalated completely in September 2023.

What actions are NWJCC taking?

Monthly performance meetings have been set up to monitor progress of NWAS.

Ty Lidiard had been discussing performance through the escalation process. Bed Panel occurs weekly and discusses bed state with a significant improvement for bed occupancy at Ty Lidiard.

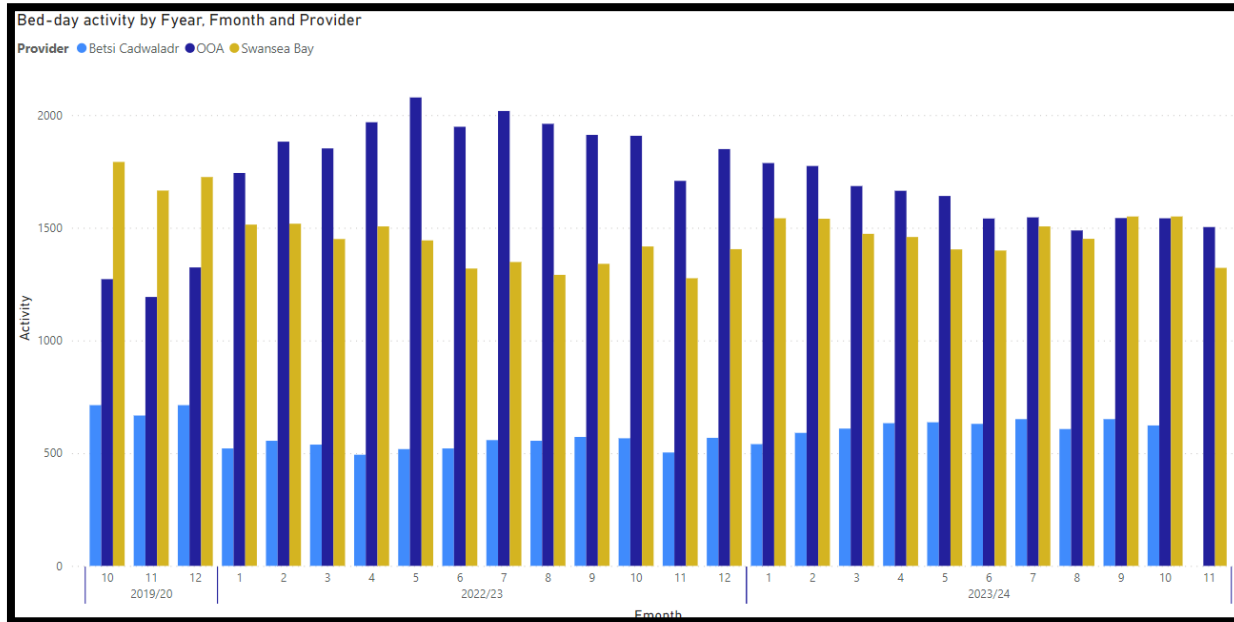
What are the main areas of risk?

Circumstances where units have closed to admissions have seen an increase in out of area placements for that time period. There is a risk that these patients will not be able to be repatriated unless it is safe and appropriate to do so.

7.12 Adult Medium Secure – NHS and Out of Area Placements (OOA)

Adult Medium Secure - Performance data and forecasts

Adult Medium Secure current performance: **No Feb 24 data from Ty Llewellyn**



Current Performance

Whilst both NHS inpatient Medium Secure units are performing with less bed-days than pre-Covid, the use of other providers has increased.

What actions are NWJCC taking?

Regular performance meetings are taking place with both units on a monthly basis.

Repatriation plans are in place for both units and are on profile.

What are the main areas of risk?

Lack of seclusion suites in both units limits the acuity of patients that can be repatriated or admitted. There is a risk that patients remain out of area due to this.

7.13 Welsh Kidney Network activity

Welsh Kidney Network - Performance data and forecasts						Current Performance
Region		LTA baseline	2023-24 YTD	2023-24 proj.	Variance	Variance (%)
North Wales - West	UHD: Bangor & Alltwen (sessions)	13260	9993	10901	-2359	-17.8%
	HHD: Bangor (patients)	7	26	26	19	271.4%
	PD: Bangor (patients)	38	11	11	-27	-71.1%
North Wales - Central	UHD: Glan Clwyd (sessions)	12792	11589	12643	-149	-1.2%
	HHD: Glan Clwyd (patients)	1	13	13	12	1200.0%
	PD: Glan Clwyd (patients)	25	23	23	-2	-8.0%
North Wales - East	UHD: Wrexham (sessions)	17316	18804	20513	3197	18.5%
	HHD: Wrexham (patients)	6	7	7	1	16.7%
	PD: Wrexham (patients)	40	23	23	-17	-42.5%
SE Wales	UHD (sessions)	87025	87288	95223	8198	9.4%
	HHD (sessions)	5920	7123	7771	1851	31.3%
	PD (sessions)	27185	18246	19905	-7280	-26.8%
SW Wales	UHD: Morriston (sessions)	34929	35361	38576	3647	10.4%
	UHD: West Wales (sessions)	26645	25118	27401	756	2.8%
	HHD (patients)	38	33	33	-5	-13.2%
	CAPD (patients)	31	28	28	-3	-9.7%
	APD (patients)	34	27	27	-7	-20.6%
>5% above baseline						
>5% below baseline						

Current Performance

BCUHB region:

Based on Month 11 data, activity at units in the central and west areas of the region is projected to be below the contracted total, units located in the East (Wrexham, Welshpool and Mold) have been consistently over performing since month 2. If the trend seen to date continues, unit haemodialysis activity for the region as a whole is projected to be over the contracted baseline. What is apparent from comparing the figures across all sites, is that the 3 areas are currently at different levels of performance with specific hotspots particularly in unit dialysis, demonstrating that working within 3 sub-structures doesn't align itself to flex and level off demand pan BCU.

C&VUHB region:

Based on Month 11 data, the number of unit haemodialysis sessions is projected to be almost 10% above the contracted baseline at year end. Transplant activity has increased and continues to increase, a testament to the work of the transplant team and the supporting services within C&V.

SBUHB region:

Based on Month 11 data, the number of unit haemodialysis sessions is projected to be 10% above the contracted baseline at year end. Home dialysis continues to be an area for some targeted intervention to increase patient transition.

What actions are NWJCC taking?	What are the main areas of risk?
<p>BCUHB region: Funding agreement has been provided to the BCU Renal team for expanding Welshpool to a 6 day service provision and increasing capacity to a 17 station unit. Work will be ongoing in Qtr 4 of 23/24 with the team in BCU to determine the pan-wide capacity requirements to ensure that the commissioning requirements are defined in the rounds rather than on isolated asks.</p> <p>C&VUHB region: Funding release provided for increasing capacity within 3 sites in C&V region; Merthyr, Pontypool & Cardiff South.</p> <p>SBUHB region: Work is progressing within the regional team and the newly appointed Independent Service Provider on project plan for the new South West Wales contract both equipment replacement programme, refurbishment of existing units and the build of 2 new dialysis units within the Bridgend and Neath Port Talbot area. Recent updates has highlighted potential delays within the original dates for commissioning the new units, the WKN are working closely with the regions to understand the impact on programme and impact on services provided C&V UHB as patients will transfer between regional boundaries.</p> <p>All regions: Work is being undertaken on demand and capacity modelling for all 3 regions, to fully understand the commissioning requirements over the coming years. This will also be supported on the contracting and procurement pipeline for the services.</p> <p>ViHC projects are progressing across all 3 areas, focusing on increasing transplantation and patients choosing a Home Therapy. With staffing appointments concluded, all projects are progressing. Progress being reported into the ViHC national team and WG, and a recent progress meeting was positive and the WKN is awaiting confirmation that the allocated funding will continue into 2024/25.</p>	<p>BCU region: Increased pressure of staff working within a pan-BCU single service against a backdrop of a 3 sub-structured organisation.</p> <p>Insufficient funding mechanism within the existing BCU sub-structure does not provide the level of flexibility to manage the service provision pan BCU, compounded by the fact that BCU are within a block contract, current lack of visibility regarding funding flow.</p> <p>Capacity pressures across BCU footprint with particular hot spot in Welshpool site, due to increase demand for North Powys patients and SaTH.</p> <p>C&VUHB region: Increased pressure on workforce, which will be mitigated by rebasing activity and costings.</p> <p>Increase in cost within Independent Service Providers (ISPs) due to current market conditions and scarcity of labour.</p> <p>SBUHB region: Increase in demand within the Swansea Morrision region, mitigated by recently awarded contract for 2 additional ISP units to be located within the NPT and Bridgend areas, predicted to come on-line by end of 2024.</p>