Comisiwn Bevan Commission





Planned Care Innovation Programme

OVADA

Executive Summary Report

October 2023

Responding to the urgent challenges presented by the Covid-19 pandemic, the Planned Care Innovation

Programme (PCIP) was launched in April 2022 to support people working in the health and care sector to take forward innovative ideas, opportunities, and ways of working to improve planned care services across Wales.

Led by the Bevan Commission, Wales's leading health and social care think tank, in partnership with the Welsh Government and wider stakeholders, the programme aimed to tackle some of the greatest challenges facing the delivery of planned care services in Wales, including reducing waiting times, and improving access to high quality care for patients and their families alike.

Building on the success of the Bevan Commission's Exemplar Programme, the Welsh Government awarded funding to support 17 innovative projects from across health and social care in Wales to deliver their innovative projects and work towards the adoption and spread of these nationally.

The projects focussed on a wide range of specialties related to planned care, including *orthopaedics, ophthalmology, gastroenterology, oncology, urology, surgery, diagnostics, and therapies.* The 17 projects *strongly align and contribute to the seven priority* areas set out in the Welsh Government's strategy 'Transforming and Modernising Planned Care Services and Reducing Waiting Lists' and demonstrate significant value to the healthcare system in Wales through improved patient outcomes, streamlined services and financial efficiency savings.

¹ Outpatient services strategy and action plan 2020 to 2023 | GOV.WALES

Programme level outcomes:

- 17 projects participated in the programme
 having been selected from 74 applications by an
 expert panel.
- All seven NHS Wales Health Boards and two NHS Trusts were represented.
- Clinical specialties included orthopaedics, ophthalmology, gastro- enterology, oncology, urology, surgery, diagnostics and therapies.
- 10 of the 17 projects (60%) have been adopted locally.
- Two have successfully been deployed at an All-Wales level.
- Anticipated positive Return on Investment (programme).

Project level benefits:

The project benefits evidenced included:

- Reductions in waiting lists.
- Improved referral to treatment times.
- Improved patient outcomes.
- Greater service and staff capacity.
- Improved patient and staff experience.
- Financial efficiencies and evidenced cost savings.

Combined Project Impact:

Overall, the projects have evidenced the following combined impact:

 Waiting list reduction: 41% of projects evidenced an impact on waiting lists, with a further 29% demonstrating potential to reduce

- waiting lists in the future. **Total = 70%.**
- **Cost savings/avoidance:** 35% of projects had proven cost savings/avoidance, with a further 29% demonstrating potential to save/avoid cost in the future. **Total = 65%.**
- Increased staff capacity: Finally, 47% of projects evidenced a saving in time/labour hours, leading to increased staff capacity. This can have an impact on waiting lists. A further 29% showed potential for labour hour savings in the future.
 Total = 76%.

Waiting list benefits:

- 15-17% of 'frail' patients >65 years old removed from hernia, cholecystectomy and general surgery lists as a result of comprehensive geriatrician assessments (CGA) in perioperative outpatient clinics in Swansea Bay and Cardiff and Vale.
- 1/3 of patients diverted from gastroenterology waiting list (functional gut disorders) in Betsi Cadwaladr into Advanced Clinical Practitioner (ACP) Gastroenterology Clinics.
- Average CT waits for single cancer pathway reduced from 13 to four days in Cwm Taf Morgannwg as a result of a Radiology Navigator role.
- 553 hospital bed days saved due to Borth
 Integrated Care project with multi agency weekly
 meetings introduced and led by a Clinical Care
 Coordinator to facilitate and optimise patient
 care.
- Speech and Language paediatric waits for social communication delay reduced from 12.8 to 3.3 weeks for technician support, as a result of innovative workshops to upskill parents and

- Early Years Practitioners.
- Paediatric orthopaedic waiting list reduced by 59 weeks in Cardiff and Vale as a result of community cluster ACP physiotherapy clinics.

Financial benefits:

- Four projects alone, with support from Value
 Based Healthcare, demonstrated a cost benefit
 (avoidance) of £681,324.
- In the year one post project period, these four projects alone are predicted to produce a combined cost benefit of £1,110,178.²
- Each of these four projects constitute invest to save opportunities with all expecting recurrent year-on-year net cost benefits.
- Wider cost benefits were evidenced by other projects throughout the programme, demonstrating further financial impact.

Service Benefits/Capacity:

- 996 hours released from radiology staff and managers due to dedicated Navigator role in Cwm Taf Morgannwg.
- 14% increased gastroenterology capacity in
 Betsi Cadwaladr with 300 patient appointments
 being diverted into ACP Dietician Clinics per year.
- Speech and language paediatric clinical caseloads optimised and reduced by 18% in Cwm Taf Morgannwg UHB following the introduction of workshops for parents and early years staff.

- Reduced clinical management/support period from 12 months to 13 weeks and increased staff capacity in proof of concept interfaced remote wearable devices for children and young people, in level 3 weight management service.
- Interventional Radiology Exemplar status awarded to the Grange University Hospital for Genicular Artery Embolisation (GAE) procedures.
- Validation of digital screening tool to screen frail patients on waiting lists in Swansea Bay UHB.
- Reduced need for single specialist referrals as a result of CGAs in Swansea Bay and Cardiff and Vale UHB.
- GP and trainee GP curriculum training introduced to improve knowledge and management of paediatrics with orthopaedic complaints in Cardiff and Vale UHB.
- Information Governance established in four health boards for remote and cross boundary reading of Colon Capsule Endoscopy (CCE) procedures.
- All Wales neurology data dashboard to support future service delivery and design and roll out of an all-Wales Headache toolkit, predicted to reduce referrals to secondary care by 14%.

For full details relating to project outcomes: see <u>project compendium</u>.

² First Contact ACP Dietician led Gastroenterology Clinics, Perioperative Outpatient Clinics (POPS) in Morriston Hospital and Cardiff and Vale & Borth Integrated Care

Patient and Staff Experience:

All patients and staff surveyed reported improved outcomes and experience as a result of the project interventions. With example testimonials:

Feedback from patient and staff

Patient feedback: "I was told straight – didn't go round in circles ... I could make the choice I wanted then."

Staff feedback: "[the clinic] has been very helpful in reducing the waiting time for this group of patients and therefore reduced the time experiencing impaired quality of life."

Additional project outcomes:

- Two projects are in the process of gaining further evidence to support local adoption.
- Two have gathered evidence to support NICE approval (expected in 2024).
- Community mobile X-Ray services proof of concept realised in Betsi Cadwaladr UHB.

Programme Survey findings:

A survey was sent to project leads at the beginning and on completion of the programme. All project members completed the surveys and survey results were compared from beginning to end:

- 95% of project teams considered their project to be a success.
- 90% of project teams believe their innovation is scalable to an all-Wales level.

- 100% of participants felt that they were able to make a meaningful contribution to planned care.
- 95% of participants reported they received sufficient support from the Bevan Commission.
- 85% felt they had increased leadership capabilities, skills and confidence to manage change.
- 85% felt more aligned with Welsh Government goals and targets for improvement relating to planned care.
- 80% reported their motivation to innovate and transform the NHS had increased as a result of their involvement in the programme.
- 95% said they would take part in future
 Bevan Commission programmes and would encourage colleagues to.

Additional achievements:

- Ten projects have successfully presented their innovative work at national conferences.
- Three projects have successfully presented their work at international conferences.
- Nine projects have submitted their work to journals for publishing.

All innovation projects tested throughout the duration of the programme have demonstrated transferability potential, that could be replicated in other health boards to maximise impact and return on the investment to date.

Looking to the Future:

High impact projects with most potential for wide scale adoption, adaptation and spread, have been identified as follows:

- Improving planned care for the frail in Morriston Hospital
- Establishing a Perioperative Care of Older People undergoing Surgery (POPS) service in elective surgery (CAVUHB)
- Radiology Pathway Navigation A New Direction (CTMUHB)
- Introduction of an innovative social communication intervention pathway in paediatric speech and language therapy (CTMUHB)
- Borth Integrated Health and Care (HDUHB)
- First Contact Advanced Clinical Practitioner (ACP)
 Dietitian Led Gastroenterology Clinic (BCUHB)
- Paediatric Orthopaedic Community Cluster Clinics (CAVUHB)

The projects clearly demonstrate positive impact on patient outcomes, waiting times, backlogs and financial efficiency, amongst many other areas. We must now ensure that these are systematically adopted across Wales to realise the full impact and return investment to date.

The Bevan Commission will continue to engage with each health board to determine the opportunity and mechanisms to support wider adoption and spread. The project teams have been encouraged to share their projects with their peers, other service leads and networks across Wales.

"We must support and champion the new services, ensuring they are sustained, ensuring that we reduce waste and increase service efficiencies".

Judith Paget, Director General of Health and Social
Services / Chief Executive NHS Wales

"The next phase of this work is to see these projects adopted and spread across Wales, through the National Planned Care Strategic Programme with its Clinical Implementation Boards, I expect this to be achieved".

Eluned Morgan, Health Minister

Comisiwn Bevan Commission

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