		Gynaecology	Dermatology	OMFS	ENT	Urology	General Surgery	Ophthalmology	Orthopaedics	Cardiology	Gastroenterology	Thoracic Medicine	Haematology	Paediatrics	General Medicine	Endocrinology	Diabetes	Vascular Surgery	Rheumatology	Plastic Surgery	Respiratory	Haematology	Oncology	Mental Illness	Child and Adolescent Psychiat	Radiology	Palliative Care	Medicine for the Elderly
Advice & Guidance																												
MICCG	Live	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	—	—	Yes	Yes: SHIP Site	Yes	Yes	?	Referals sent electronically	Referals sent electronically	N/A MI	Yes: SHIP Site	Yes
	Total Referals Received 2022/23	9986	8373	4061	5719	5092	3387	8025	20036	6659	7238	2758	6639	4512	1823	2336	—	—	6557	5838	1205	1962	2605	—	—	—	—	1340
	Referals Received Electronically	3999	8391	1139	4549	3533	7997	539	13693	3165	5647	1501	2851	2150	268	1518	—	—	2214	1535	475	1569	—	—	—	—	—	346
	% of Referals electronic	40.05%	93.17%	28.05%	79.59%	69.46%	54.87%	6.72%	68.34%	48.87%	78.07%	54.44%	42.93%	47.65%	14.70%	64.94%	—	—	33.77%	26.29%	39.42%	79.96%	0.00%	—	—	—	—	25.82%
	Total Referals Referred 2022/23 (so far date)	291	2021	90	1032	593	873	61	4983	942	2835	492	1175	985	166	501	—	—	1065	248	96	1189	—	—	—	—	—	47
	% Electronic Referals Referred 2022/23	8.15%	23.11%	7.93%	22.92%	15.05%	11.06%	11.32%	36.91%	29.95%	50.12%	32.05%	21.14%	43.95%	51.68%	36.52%	—	—	47.26%	16.16%	20.21%	76.27%	—	—	—	—	—	18.31%
	% of referals that are not progressed after Stage 1 (Inclusive Discharged + SOS) 19-22	41.4%	54.0%	33.0%	38.6%	29.7%	43.5%	31.2%	44.5%	45.7%	30.4%	37.9%	58.0%	46.7%	76.9%	27.8%	—	—	44.8%	14.4%	36.4%	18.2%	76.5%	38.5%	17.6%			39.6%
	Plan/Comments	Low number of referrals returned - Digital Services investigating data High % of referals not progressed after stage 1 - Low number of referrals returned could have been returned/approved/referred earlier? Filter data to: ever on CEC?		Low number of referrals returned - Digital Services investigating data. Need to include referrals from CJS. Low number of referrals returned - Digital Services investigating data Compare with number of referrals not progressed after Stage 1		Low number of referrals returned. Digital Services investigating data. Compare with number of referrals not progressed after Stage 1	Low number of referrals returned. Digital Services investigating data. Need to include referrals from CJS	Low number of referrals returned. Digital Services investigating data. Need to include referrals from pulmonaries/other pathways	Review referral process - MCEU pathway (suggestion that number of referrals returned is low high) digital Services to investigate		Review referral process and endoscopy slide (suggestion that number of referrals returned is low high) digital Services to investigate				Low number of referrals received. Digital Services investigating data. Need to include referrals from CJS High % of referrals returned - Digital Services investigating data													Low number of referrals received. Digital Services to investigate other referral pathways
Consultant Connect	Go Live Date	08/03/2021 08:00-17:00 (MU, WO, Gynae, CTM, HB, Ophthal)	Not Live	Not Live Some dental services live	05/10/2020 (Mon-Fri 09:00-17:00 (BCN weekends)	01/02/2021 (Mon-Fri 09:00-17:00)		BADS: 04/05/20 (Messaging) 30/11/20 (Full) 24/7 Live - for secondary care and optometrists	MCSS - 01/06/21 (Mon-Fri 09:00 - 13:00 13:00-16:00	Not Live	19/03/2020 (Mon-Fri 09:00 - 17:00)	22/04/2021 (Mon-Sun 08:00-20:00 (BCN only for Primary Care)	04/02/2021 (Mon-Fri 09:00-17:00)	08/02/2021 (Mon-Fri 09:00-17:00)	24/04/2020 - JMP v2 + Lines, 1 for admissions, 1 for advice + Discharge	26/04/2020 (Mon-Fri 10:00-16:00)	10/06/2020 (Mon-Fri 09:00-17:00)	Not Live	Not Live	22/04/2021 - BBP (Mon-Fri 09:00-17:00)	Oct-20 24/7 live	01/04/2020 24/7 live	Not Live	15/09/20 - Dental Health SPS - SHTS & SH (Mon-Sun 09:00-17:00)	21/08/21 - CAMHS (Mon-Fri - 09:00-17:00)	Not Live	10/04/2020 (Mon-Fri 09:00-17:00 Sat Sun 08:30-16:30)	01/09/2021 SHTS Mon-Sun 08:00-22:00 Sunrise: Mon-Fri 09:00-
	Availability																											
	Call Data (01/01/20-01/08/21) Total Received	41			74	44		11	65		555	47	43	43	177	126	83			30	79	113			16		77	44
	Total Accepted	34	N/A	N/A	44	42		11	60		554	46	43	43	162	119	73	N/A	N/A	20	55	80			7		60	28
	Acceptance Rate	83%			59%	95%		100%	97%		99%	98%	100%	100%	92%	97%	88%			66%	70%	71%			44%		78%	64%
	Avg Connection Time	00:17 mm:ss			00:45 mm:ss	00:06 mm:ss		00:05 mm:ss Used for Text & Extend	00:03 mm:ss		00:05 mm:ss	00:45 mm:ss	01:15 mm:ss	00:01 mm:ss	00:01 mm:ss	00:23 mm:ss	00:24 mm:ss			*00:03:19 mm:ss	00:28 mm:ss	00:02 mm:ss			00:23 mm:ss	00:21 mm:ss		00:30 mm:ss	03:18 mm:ss
	Photo functionality:	Not in use			Not in use	Not in use			Not in use		Not in use	Not in use	Not in use	Not in use	Not in use	Not in use	Not in use			Not in use	Not in use	Not in use			Not in use	Not in use		Not in use	Not in use
	Referrals Received	34%			71%	93%		73%	75%		40%	69%	25%	33%	24%	41%	46%			21%	17%	39%			19%	0%		11%	14%
	Referrals Accepted	0%	N/A	N/A	2%	8%		—	0%		8%	7%	7%	6%	—	0%	41%			—	6%	7%			0%	—		0%	29%
	Submission Made	0%			0%	0%		—	0%		0%	0%	0%	0%	—	0%	0%			—	0%	0%			0%	—	N/A	0%	29%
	Referral accepted	40%			32%	11%		—	75%		23%	18%	20%	50%	—	47%	14%			50%	41%	40%			6%	—		40%	29%
	Referral made	20%			35%	56%		—	0%		25%	22%	33%	17%	—	41%	29%			50%	22%	20%			81%	—		50%	29%
	Plan/Comments	Low connection rates are attributed to there being only one line for calls and consultants being in theatre, or afternoon clinics. Consultants are "time" additional local lines. Service is working with Primary Care to improve better uptake Request for Menopause Advice line from Primary Care - no capacity currently		Restorative Dentistry plan to go live 05/09/21 (initially to only provide advice to Oral Surgeons, Orthodontists, Cardiology & Oncology) Endodontic referrals - suggestion to add endodontic referrals to treatment (from Tier 2 to Tier 3 and 4 but with the emphasis on sending a bigger cohort to GDP patients) for 2 centres Community Dental Service using 4 Dentist	Advised WCCG drive is working effectively for the service and therefore not looking to implement Consultant Connect (Advised WCCG observed referral rates) National Pathways to be agreed July/Aug. Advice & Guidance to be included in pathways. Suggestion to add Another line (only one line live currently)	Low number of calls - to engage with service	A/W update from Service to be why delay? New go live date to be agreed. Clinic used 22/04/21 to close.	Update from Sam Ashton (Ophthalmology) Progressing issues with DDIs and comms - to provide of being returned + new service manager taking on Mon	11/02/21 - Swansea Bay UHB (Optometrists only) Live 02/03/21 - Cardiff & Vale (Text & Extend (Video) team set up to review images & make) Review other referral methods to understand obscured referral rate. RACC live available to Primary Care in high should channel call	Podiatry engaged 11/02/21 - Go live date TBC Re-engage with Colon Cancer Specialist nurses (urology) and additional services	Emailed 28/07, 25/08 & 03/09 to progress implementation - no response from another Clinical Cabinet - JB discussing with CTU & Ellen Ward - Ellen Ward is setting up secretary to tertiary advice. Next future advice line to be set up on CC Potential for ECG & ECHO sharing via Physiolink?	Local support remained Sep 20 (BCN single entry) 24/25 - Service do not have capacity to support. To revisit	To review process / referral pathway for PAD with view of invoiding CC as referral line Analyse reports of line not being answered. Answer rate and call connection time is not being recorded - this is being forwarded. Drill Up and pulse team to confirm go live date Consider	CC not in forwarded. Multiple referrals received - Answer rate and call connection time is not being recorded. Answer rate and call connection time is not being forwarded. Drill Up and pulse team to confirm go live date Consider	Diabetic Nurse Specialist line went live 03/01/20 but due to unknown reason logs/lists. Diabetic Podiatry line in discussions.	Lack of engagement with various Podiatry, Orthoptics & Prosthetist Pain teams would benefit from accessing Vascular A&G line. Emailed 26/5, 21/6 & 03/09 to progress implementation	Follow up potential for Secondary Secondary use	19 specific Burns & Plastics lines live (data above mentions all lines) To consider use of photo messaging	Process map to identify A&G requirements	Substance misuse line also live Engage with Old Age Psychiatry for additional line	Oct-20 - not in a position to commence. Requests for live by Primary Care Revisit review	Looking to make 24/7 live Issues with live not going to accomplishment. Change implemented by CC to allow accomplishment message to be left.	WAST to have access to Geriatric Line.
Outpatient Activity (August 21)	Live to Date	76.41%	67.25%	84.70%	73.56%	62.96%	66.06%	95.21%	53.22%	66.44%	68.35%	72.41%	62.49%	56.32%	84.95%	61.58%	—	—	57.95%	41.46%	48.40%	26.95%	50.07%	41.52%	15.92%	—	—	60.41%
	Note: Review	5.27%	3.07%	3.11%	23.47%	26.45%	28.29%	4.60%	32.55%	20.53%	8.66%	9.41%	17.21%	5.44%	5.36%	1.79%	—	—	7.45%	11.99%	4.10%	1.11%	0.24%	5.75%	0.00%	—	—	28.98%
	Virtual Appt	38.57%	23.47%	0.00%	0.00%	28.29%	0.00%	0.00%	0.00%	33.69%	39.28%	34.11%	30.53%	38.26%	0.00%	43.88%	34.85%	—	34.85%	26.59%	0.00%	72.53%	28.07%	36.73%	33.08%	—	—	0.00%
	% Virtual for New Assessments	8.60%	10.11%	0.00%	2.99%	20.06%	11.46%	0.00%	23.92%	29.89%	12.17%	31.01%	39.34%	15.46%	6.88%	8.87%	6.11%	—	6.21%	19.06%	0.00%	12.50%	6.75%	36.11%	4.00%	—	—	3.88%
	% Virtual for Fxs	29.88%	29.36%	8.88%	3.80%	31.50%	15.00%	0.00%	0.00%	33.68%	37.41%	11.14%	39.34%	50.28%	0.00%	61.19%	5.83%	—	63.13%	21.28%	0.00%	78.41%	56.83%	53.13%	11.20%	—	—	15.49%
	Plan/ Service Update:	Majority of services are not using Virtual Clinics due to restrictions required. Facility and Site Operational continue with virtual activity where appropriate		Running Virtual Clinics Consultations for acute clinics	Service is not suitable for virtual activity in majority of cases	A/W plan from service manager	A/W plan from service manager	A/W plan from service manager	Service is not suitable for virtual activity in majority of cases	A/W plan from service manager - plan to undertake virtual "joint school" / portrait clinics virtually	A/W plan from service manager	A/W plan from service manager	Unidentified with in much virtual consultations as possible – however, the service is now getting to a point where some patients do require face to face consultations and physical assessments due to their conditions, therefore we are currently exploring options for clinic space	A/W plan from service manager - Over 90% virtual	A/W plan from service manager	To split out data from Endocrinology to see how the clinics are split	No data on this specialty a/w info from Digital Intelligence	Will continue to progress virtual where possible. Booking with SMR Virtual - very to explore initiative	Consultants plan this on a case by case basis with the secretaries support with managing the patients.	Do a monthly basis the Department conducts dipstick 10 Virtual Clinics (MU) and a 25 Telephone Clinics (MU) - Virtual clinics are ad-hoc, combined with either telephone or do clinic depending on our demand. We plan to continue Virtual Clinic. Also is trained on sec-mail since FGY capacity due to the complexity of our patients.	High % of virtual activity - Service to provide details of good practice to share with other specialties	High % of virtual activity - Service to provide details of good practice to share with other specialties	No data	No data	A/W plan from service manager
Virtual Activity Break Down	Telephone:																											
	Video:																											
	Position Nationally?																											
SDS & PIFU (Data from Dec 2020)	SDS (data up to July)	2722	1068	307	577	235	90	116	2813	707	293	428	112	225	56	102	—	—	199	606	100	156	2605	35	353	—	—	20
	PIFU (data up to July)	74	1145	114	193	9	18	27	114	99	196	80	4125	—	37	122	—	—	—	530	5	17	257	—	—	—	—	19
	Total	2796	2213	421	770	241	800	178	4963	806	489	503	3968	625	151	224	—	—	199	1176	105	172	2908	35	361	—	0	59
	%																											
	Plan/ Service Update						Discussion at September's Business Meeting	Oct 21? - Roll out of National Open Syes PPS system will enable soon joint up care with Primary Care Optometrists looking to move discharges rather than F/U. Also Optometrists will refer back to Hospital if and when required					Largest number of patients on PIFU - pathway of all Rep - priority specialties – Gynaecology, Urology, Endocrinology. Review MS WL with plan to move 80% patients to PIFU								Consultants plan this on a case by case basis with the secretaries support with managing the patients.						
RTWL (End of Month Snapshot)	Quick Question/Letter Validation	Complete - 27% removed from PUBB list	Due to start provide 24/07/21	N/A	Complete - 6% removed from PUBB	Partial Cell Sent for Review - 67% outcome is CONSIDER and rest	Process started 15/03 - WL to be removed	A/W letter validation requested	A/W outcomes of 08/MAR response	Not Started - Data TBC	Not Started - Date TBC	N/A	Process Started 01/07/21 - QQ sent to 118 patients	Process started 22/07/21	WL sent for validation 01/07 (anticipated to take some time)	Referral do not want to attend	N/A	N/A	Complete	Started 29/06/21	N/A	WL sent for validation on 07/07	N/A	Referral do not want to attend	N/A	N/A	N/A	N/A
	FU 100% Over Target	857	986	452	951	1178	1372	6366	2276	1775	2609	1	1510	578	1214	503			1027	769	93	1693	616	2153	351			162
	Other	2090	1922	1365	1991	2437	2411	9262	7171	4975	3165		4193	4138	3361	4475			5211	2661	2198	2198	3014	4112	222			833
	Total	2927	2918	1816	2942	3615	4196	15628	9551	6660	5885		5273	4626	4575	4715			7114	3337	2291	4071	3630	6625	573	0	0	995
	Referrals for over 100% (Aug)	1142	1932	1364	1941	2437	2411	9262	7171	4975	3165		3683	4048	3361	4212			4086	2568	2198	2198	3014	4112	222			833
	Difference	130	254	464	258	435	1158	6366	2276	1775	2609	0	1590	578	52	58	0	0	371	168	28	1873	414	2512	351	0	0	162
	Plan/ Service Update				4% discharged	A/W outcomes of 08/MAR and rest response from validation	Best info on 14/06/21 - waiting to have back from service. Update from Sam - QQ is not appropriate for patient groups.	Stage 1 and 52 week validation completed - 51% removed site - 49% remained on PUBB (see RS diverse clinical risk) – 65% of cohort had two, 3 patients asked to be removed. Sept 21? – Closed recovery funds to Mar - 212 Primary care Optometry supposed to removing 3103 PUBB backlog patients waiting for Secondary Care appointment. Once completed Optometrists	Started in Feb 21. Just waiting for how the Gastroenterologists and BSUHB response to complete review. Chased a few times too time was 14th June	Other priorities pertaining itself with. The response from Gastroenterologists and BSUHB response to complete review. Chased a few times too time was 14th June	Struggling to get Gastroenterologists support to assess and review WL before starting PUBB validation process.	Consultants are going to undertake clinical validation of the lists as requested to send letters as they feel this is the safest route to go down.	Started 27/7/21 - Only 1 patient left to review as red not applicable. Service have explained their reasoning, some consultants are doing clinics and others are doing letters. 5/8 TRACK however, small number on WL validation.	Sent info on 5/7/21 – service phoned will take a while to review WL	Not clinically appropriate - Cohort on long term medications, clinicians want to see if they can be managed in primary care by challenging both with consultants and let re-know then also is in process of seeking funding to secure Nurse Practitioner to support the cohort of applicable over patients on the waiting pathway. WL needs changing before PUBB validation process as well													
RTT End of Month snapshot Aug 2021	<25 Weeks	1481	2377	1699	2125	1316	3419	6604	2767	1298	1610	757	1760	759	127	169	—	—	795	953	83	200	—	—	—	—	—	232
	>26 Weeks	490	224	663	510	296	580	720	513	120	628	100	159	20	0	0	—	—	152	136	0	15	—	—	—	—	—	1
	>52 Weeks	539	406	439	727	223	493	1269	904	56	499	167	75	18	0	0	—	—	128	210	0	15	—	—	—	—	—	0
	TCI Weeks	85	85	85	85	85	85	85	85	85	85	85	85	85	85	85	—	—	85	85	85	85	—	—	—	—	—	85
	Total	2594	3092	2836	3370	2420	4493	8593	3918	1418	2737	1181	1993	797	127	169	—	—	1081	1436	85	230	—	—	—	—	—	233
	Plan/ Service Update																											
Hospital Initiated Cancellations (Referrals 2021/22)	Number	7	10	12	49	20	41	41	15	20	17	6	5	4	1	2	—	—	6	6	1	3	14	18	2	—	—	5
	%	0.13%	0.18%	0.49%	1.43%	0.69%	0.45%	0.82%	0.10%	0.73%	0.40%	0.38%	0.16%	0.16%	0.07%	0.15%	—	—	0.22%	0.21%	0.18%	0.09%	1.09%	1.52%	0.51%	—	—	0.39%
Pathway Development Work	Actual	Validation continues with booking office on Stage 1 PUBB - To send consultants one large patient list monthly basis. Work ongoing to provide Neuro Non-clinics in September to target 42 weeks (over a four month period with one follow up clinic appointment - long term basis. Will likely require WU clinics to help close backlog.			21 Pathways to be reviewed by SNT National Planned Care Reset in July		PUBB administrative validation continues	1st - Vital Signs For Care Transformational Fund - NHT 2021 Referral Pathway - Gastroenterology Referrals for Non-critical 2-week appointments reviewed by a combined qualified optometrists, only 60% actually need NHT-DMO appointments, the remaining 40% are critical follow up appointments. WU WRT (Mid Single – 100% Feb 21 - with current WU clinics to help close) 2nd - Transformational Fund - Diabetic Retina Referral Refinement Scheme.					PICB - currently undergoing investigations into the use of PIAB into a number of Neurological Pathways (Ataxia, Myasthenia Gravis, Epilepsy and Parkinson's Disease)	* Internal review - we are currently looking at the diagnostic CAR pathway which shows planned investigations (all dependant on approval and funding) we would like to implement within the Neurophysiology service, which is a branch of Neurology. We have a massive backlog in Neurophysiology and when we do manage to get an on-or Neurology patients and bring these within target, these could then be sent for Diagnostics (i.e. EMGs, NCSs, Nerve Conduction															
	Planned			Restorative Dentistry developing business case (provisional)	Review of WL with Primary Care Surgical Waiting List Prehab pilot		Surgical Waiting List Prehab pilot	Oct 21? - Roll out of National Open Syes PPS system will enable Primary Care Optometrists to electronically ask for advice / guidance and reduce referrals.	Surgical Waiting List Prehab pilot	Review of WL with Primary Care	Review of WL with Primary Care																	
Outpatient Accommodation								Currently running clinics with 30-35% levels for RTL eye services - Would want to safely increase clinics: slot numbers back to pre Covid levels if social distancing requirements allow. Measure routine Cataract clinics capacity in line with HB Cataract recovery plan to be approved by Exec. Outsourcing Cataract referrals for full package of care Revisiting more non-medical positions into GMS, Diabetic Retina and Glaucoma																				