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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	27 July 2021		Agenda Item	4.1
Report Title	Provision of the Cleft Lip and Palate Service during Covid-19 and the impact on patients			
Report Author	Charlotte Le Brocq/Hannah Rix/Helen Extence			
Report Sponsor	Deb Lewis			
Presented by	Deb Lewis			
Freedom of Information	Open			
Purpose of the Report	Prior to the COVID-19 pandemic, demand and capacity for the Cleft, Lip and Palate service were in balance, with sufficient capacity to deliver treatment within the required timescales. Since March 2020, there have been significant constraints placed on theatre capacity at Morriston Hospital to allow the Health Board to treat patients with COVID. This limited capacity resulted in a backlog of patients waiting for treatment. This paper will outline the actions that have been taken so far to alleviate the backlog position for paediatric cleft, as well as describe further plans to support recovery of the adult cleft backlog.			
Key Issues	<ul style="list-style-type: none"> • There has been a significant reduction in theatre capacity for the Cleft service post-COVID. • The pressure for paediatric left has been mitigated by satellite operating in UHW and additional lists in Morriston. • Capacity for adult cleft remains an issue and an expression of interest to fill capacity at SMH is being explored for this. • Achievement of these objectives will support the corporate objective of COVID-19 recovery. 			
Specific Action Required (please choose one only)	Information	Discussion	Assurance	Approval
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Recommendations	Members are asked to: <ul style="list-style-type: none"> • NOTE/RECEIVE/CONSIDER/APPROVE/RECOMMEND/<u>ENDORSE</u> 			

The Cleft, Lip and Palate service and the Impact of Covid-19

INTRODUCTION

Prior to the COVID-19 pandemic, demand and capacity for the Cleft, Lip and Palate service were in balance, with sufficient capacity to deliver treatment within the required timescale. Since March 2020, there have been significant constraints placed on theatre capacity at Morriston Hospital to allow the Health Board to treat patients with COVID. This limited capacity resulted in a backlog of patients waiting for treatment. This paper will outline the actions that have been taken so far to alleviate the backlog position for paediatric cleft, as well as describe further plans to support recovery of the adult cleft backlog.

BACKGROUND

Pre-COVID, the cleft service was utilising six all-day theatre lists a month. This was sufficient to undertake all paediatric cleft surgery. The service did not have a waiting list for paediatric surgery, babies were seen at three months for lip repair and six months for palate repair. Patients requiring speech surgery were seen in a timely fashion following diagnosis of the problem and subsequently received surgery within in 3-4 months.

Paediatric surgery in Morriston Hospital was allocated three lists a week from October 19th 2020. There are eight specialties sharing these lists. The cleft service was receiving on average of two lists a month, a third of their usual surgical capacity. The waiting list that existed for children was entirely due to COVID restrictions and not any other service issues.

The service was managing the cohort of paediatrics who required surgery for Palate involved – primary clefts within the theatre capacity they were allocated however the service was unable to manage the Paediatric Speech Patients, Lip-only affected primary cleft patients and Alveolar bone grafting patients.

As a consequence of the above discussions were undertaken with the Children's Hospital in Cardiff to mitigate the risks associated with delays for paediatrics awaiting cleft surgery. Cardiff and Vale UHB agreed to assist us with the backlog of Paediatric speech and Alveolar bone graft patients. The service was allocated four theatre lists from March 2021 until May 2021, treating eleven patients in total. There were also two weekend theatre lists undertaken in Morriston Hospital in February 2021 to treat six Lip-only affected primary cleft patients. A further weekend theatre list in Morriston Hospital was undertaken in June 2021. This is illustrated below in a tabular form.

Cases waiting and allocated lists

April 2020	June-Dec 2020	Jan – Feb 2021	March- April 2021	May/June /July 2021
No surgery-resumed June No outpatient clinics-resumed August	1-2 list per month 1 Sat list MH (lips) Dec	2 lists per month MH 2 Sat lists MH (lips) Feb	2 lists per month MH 3 Sat lists CHfW	4 lists per month MH 1 Sat list MH 1 Sat list CHfW

	Baby surgery (palate)	Baby and speech surgery	Baby, Speech and ABG surgery	Baby, Speech and ABG surgery
Paeds patients	Dec 2020	Feb	April	July
0 waiting	55	55	50	11 waiting
Adults patients				
10 waiting	29	30	36	39

The impact of the delays to paediatric surgery caused by the covid-19 pandemic can be seen below.

Impact on Timings of Surgery

Cleft Category	Operation	Target age	Age range
Palate-involved	Lip + vomer	3 months	6-7months
	Palate repair	6 months	10-12 months
Speech	All	ASAP	Delayed over 1 year
Lip only clefts	Lip repair	3 months	12 months
Alveolar Bone Grafts	ABG placement	When ready	Delayed over a year

As a result of the additional operating described above for the paediatric patients the service will be in balance with pre-covid levels of waiting list numbers by the end of August 2021, this has been assisted by an increase in paediatric operating being allocated to all specialties at Morriston Hospital from June 2021.

Unfortunately the service still has concerns with regard to the backlog of Adult Cleft patients as there are currently no opportunities to address this backlog within SBUHB.

The Clinical Director for the Cleft, Lip and Palate service (with service management support) is therefore currently liaising with the Planning and Procurement Departments within the Health Board to put out an expression of interest with the intention of securing a 'facility only' contract to allow the Cleft Surgeon to treat 28 of the 39 waiting patients outside of SBUHB (the remaining 11 patients will require surgery on a Hospital site that has access to HDU level care). This has gained approval from Financial colleagues and the Deputy Chief Operating Officer/Planned Care Lead. This process should conclude mid/late July with a plan to commence operating in August/September dependent on Surgeon availability. The 11 patients requiring treatment with HDU level care will most likely need to be treated at Morriston Hospital. The number of patients waiting will require 6 theatre sessions and green pathway bed capacity.

RECOMMENDATION

Members are asked to note the proposal for outsourcing the Adult Cleft patients to ensure safe and timely treatment.

Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input type="checkbox"/>
Quality, Safety and Patient Experience		
<p>The proposal to outsource Adult Cleft patients (Sancta Maria Hospital) will allow the service to provide a safe environment for this cohort of patients to be treated. As the SBUHB employed Cleft Surgeon will undertake these procedures under a 'facility only' contract the patients will receive the same care they would have received if they were treated at one of the Hospital sites within SBUHB. These factors will also ensure the patients the most excellent patient experience possible.</p>		
Financial Implications		
<p><u>Sancta Maria Hospital Costs</u></p> <p>Cost = £800 per hour or £9,600 per day for the hire of theatre space, which includes the cost of theatre space for a period of 12 hrs with two * 5-hour operating sessions, theatre staffing, day bed ward and associated standard consumables.</p> <p>Consultant Costs = WLI rate £630 per session plus on costs 13.8% = £717</p> <p>Each 10 hour operating session would allow 4 patients to be treated. Therefore circa 7 theatre lists would treat the 28 patients currently waiting with a total cost of £72,219.</p> <p>The costs are unbudgeted and the estimated timeframe for this proposal is circa 4-6 months.</p>		
Legal Implications (including equality and diversity assessment)		
No legal implications have been identified.		
Staffing Implications		
The Cleft Surgeon employed by SBUHB will treat the patients outside of his contracted sessions, this work will be undertaken in uncontracted time for additional payment.		

Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)

There are two types of Adult patients waiting for treatment these are:

- **Speech patients** (need to be treated at Morriston Hospital)
These patients are unable to make themselves understood, either they won't leave the house or are severely restricted talking to other people and avoid situations whereby they need to communicate. A number are unable to go out on their own unless they have someone to speak for them and this is having an enormous impact on their daily lives. Some patients also have food and liquids leaking from their noses, causing huge embarrassment and another reason many of these patients do not leave the house. Long term implications - restriction to daily life in terms of speaking, eating and drinking. Unable or restricted ability to work, take their children to activities due to being unable to make themselves understood. Waiting is causing great anxiety for these patients and distress.
- **Nose/lip patients** (to be outsourced as P4)
Many of these patients have been told from a young age that they will receive surgery at a particular age, clearly this is devastating for some patients who have waited for years for their craniofacial defect to be addressed.

Dr Vanessa Hammond, Consultant Clinical Psychologist has written a paper for the CDG (National Cleft development group) on the risks and implications of delayed surgery and the reasons these cases should be treated (paper attached in appendices).

Questionnaires were circulated recently to ascertain patient feedback from the Adult Cleft patients who are currently awaiting treatment, presentation with the results embedded in Appendices.

Report History	The below was presented at the WHSSC Quality and Safety Committee on the 8 th June by Helen Extence Clinical Director for the Cleft, Lip and Palate service (<i>Appendix 4</i>)
Appendices	Supporting information: Cleft Plan – <i>Appendix 1</i> Risks associated with delays – <i>Appendix 2</i> Patient Feedback – <i>Appendix 3</i>