



24 February 2020 Response to Morgannwg LDC

SBUHB Consultation on Proposal for the Relocation of Paediatric Dental General Anaesthesia Services from Parkway Clinic (PWC) to Swansea Bay University Hospital Site (SBUHB)

1. *The transfer must provide a like-for-like service which is based on the Parkway model of service with the same or better capacity for patient numbers.*

The number of theatre session currently allocated to the new service ensures excess capacity based on the anticipated flow and current demand. This means potentially increased and improved access. In addition, the service will align with the hospital's clinical governance frameworks and agreed management pathways for children services; ensuring quality care.

2. *Urgent cases must be catered for, with minimum waits for treatment of 48 hours. The stated case of no sessions on a Monday and Tuesday, meaning that there is a wait of 4 days before an urgent case is dealt with means a diminution of service compared with current service. We presume that other arrangements will be made in this situation. What are these other arrangements?*

Mapping exercises have been undertaken and this objective is deliverable. The Health Board undertook similar mapping to understand the changes in the service prior to their implementation in November 2019. Recent data analysis demonstrates that access continues to be within the agreed historical parameters. However, there is also potential for additional theatre lists to be available and the Task and Finish Group are exploring this possibility. All children will continue, as now, to be seen by the CDS as part of GAT.

3. *Other pressures within the hospital must not result in cancelled sessions, meaning that the sessions must be ring fenced. Is there a guarantee of this?*

The SLT have agreed that this is a priority service as is the case currently with other children's services within the Health Board. New investment will also be made to the workforce to support the new pathway.

4. *Orthodontic surgical cases must be dealt with in the same manner that they are dealt with at present, with no drop of in capacity or high standards of care.*

See reply to Question 1



5. *If Parkway is unable to meet the requirements laid down, it is stated that the service will be delivered by health board staff. We would appreciate being informed of the detail of this proposal and what staff, both dentists and anaesthetists will be responsible for carrying out the service.*

The Health Board are currently recruiting additional paediatric anaesthetic staff: clinical staff will be provided from the Community Dental Service (CDS) which will also provide continuity of care for this patient group. The CDS is currently in the process of recruitment.

6. *One colleague mentioned the car parking situation at Morriston Hospital, mentioning that it is highly unsatisfactory for patients – would further demands generated by this new service worsen an already unsatisfactory situation? In addition to this what is the likelihood of the parking problems causing patients to be late for their appointments, thus disrupting clinics and causing them to overrun, thus taking up even more theatre time?*

The Health Board are currently undertaking initiatives to reduce the car parking pressure on the Morriston Hospital. We would not anticipate the patient flows associated with this service having any significant impact.

7. *What evidence exists to suggest that Parkway Clinic is a safety risk to its patients?*

The Health Board has determined that that PWC does not comply with relevant Welsh Health Circulars which describe the standards expected for GA and sedation services for dental procedures (these were laid out in the consultation document).

At the SLT meeting on the 5th of February 2020, this issue was specifically addressed again. The SLT reconfirmed its decision and that the service should relocate as a priority.

8. *What risk assessments have been carried out by the HB, and what are the results of those assessments?*

Whilst actions have been taken to mitigate the risk, including a new pathway, changes to the contract specification and reduction in the number of GAs, the risk associated with non-compliance with relevant Welsh Health Circulars remains.

9. *Presumably the Health Board has further consulted with other bodies, such as the Royal College of Anaesthetists and BMA (Wales). Have these bodies expressed an opinion?*

The Health Board has formally engaged with the Community Health Council and the LDC as a statutory requirement. The issue has also been raised in a number of other fora including the Health Board's Oral Health Quality Safety Patient Experience Group, which includes external bodies, and more widely through Quality and Safety frameworks. In addition the Health Board's Anaesthetic and Paediatric Departments have discussed the position. The proposal has also been described in relevant contacts with Welsh Government.

