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Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	29 June 2023	Agenda Item	2.1
Report Title	Outcome of <i>Changing Orthopaedic Services for the Future</i> Engagement		
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Report Sponsor	Richard Thomas, Director of Insight, Communications and Engagement		
Presented by	Richard Thomas, Director of Insight, Communications and Engagement		
Freedom of Information	Open		
Purpose of the Report	The 'Changing Orthopaedic Services for the Future' engagement sought the views of patients and public, staff and stakeholders on a proposal to change orthopaedic services. The proposal focused on the release of six theatre sessions at Neath Port Talbot Hospital, currently utilised by Cwm Taf Morgannwg University Health Board (CTMUHB) back to Swansea University Health Board (SBUHB) provided SBUHB took back all Swansea Bay patients currently on the Cwm Taf waiting list and all new referrals would go directly to Swansea Bay. This report summarises the findings of the engagement process and makes recommendations for next steps.		
Key Issues	Over 100 people responded to this engagement by completing a form online or returning a hard copy to share their views on the proposed changes to orthopaedics services. Other contributions were made in other ways including commenting at meetings, writing in with their views and conversations at drop in sessions in the community. At the request of the Community Health Council, all Swansea Bay orthopaedic patients on the CTMUHB list were sent letters about the proposed changes to enable them to share their views and ask questions regarding the impact the proposed changes would have on them and over 80 patients telephoned or shared their views via email.		

	<p>Most respondents supported the proposals but there was a consistent view that further support for patients on the waiting lists is required including:</p> <ul style="list-style-type: none"> - Acknowledgement of the daily pain they are experiencing and the impact on their work and family life - Information and advice around pain relief, how to keep mobile and fit - Communication – regular updates on how long waiting times for appointments / treatment are so that they know they are on the list and don't feel forgotten - Explanation / understanding of where they are on the waiting list, anticipated waiting time for surgery to try and reduce anxiety and help them plan their lives without risking missing appointments / surgery <p>The benefits of the proposal were identified as:</p> <ul style="list-style-type: none"> - Acknowledgement of the benefits of centralisation, easier to staff and having services under one roof - In the longer term contributing to reduced waiting times - Treatment closer to home - A better service for patients - All Swansea Bay patients are treated equitably with access to the same range of support services <p>Concerns regarding the proposals included:</p> <ul style="list-style-type: none"> - Sufficient staffing to run the service - Travel for patients from Swansea to Neath Port Talbot especially on public transport, there are no direct buses / routes - Longer waiting times for SBUHB patients who transfer from the CTMUHB list - Waiting times for operations are too long and even 2 years is unacceptable - Fear of further delays in having their operation, or being put at the bottom of the waiting list - People with lower priority won't languish at the bottom of the list - Changing consultants when they have long standing relationships with patients, particularly where there are complex cases - Availability of wraparound services such as MCAS and post operative physiotherapy - The importance of informing SBUHB patients who are transferred back to the HB on what is happening. - Regular communication and information with patients on the waiting list to keep patients updated
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Specific Action Required	Information	Discussion	Assurance	Approval
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> • Note the findings of the engagement process. • Approve the proposal to proceed with the service change proposal as outlined in the engagement document. • Approve further work on the mitigations to be completed as outlined. 			

OUTCOME OF THE PUBLIC ENGAGEMENT ON CHANGING ORTHOPAEDIC SERVICES FOR THE FUTURE

1. INTRODUCTION

Swansea Bay University Health Board (SBUHB) has recently completed a public engagement exercise on proposals for the future provision of orthopaedic services for people from the Neath Port Talbot and Swansea areas, covered by SBUHB. The engagement took place between 20th February 2023 and the 14th April 2023.

SBUHB undertook public engagement on Changing for the Future between July and October 2021. It proposed making the existing hospitals Centres of Excellence and this was agreed in October 2021. Further work has been undertaken to increase capacity for orthopaedic surgery as waiting times for orthopaedics were too long prior to the pandemic, which further exacerbated the position. The engagement focused on the proposal for Cwm Taf Morgannwg University Health Board (CTMUHB) to reduce its use of 13 theatre sessions a week at Neath Port Talbot Hospital for orthopaedics to 7 on the understanding that Swansea Bay would transfer all Swansea Bay patients on the Cwm Taf waiting list and accept all new referrals onto the SBUHB waiting list. This would result in additional orthopaedic operating capacity being available to SBUHB at Neath Port Talbot Hospital, alongside the building of three additional theatres there, but would mean some patients having to wait longer while this additional capacity becomes fully operational. SBUHB has committed to no patients waiting over 2 years from 1st April 2024 for their operation.

2. BACKGROUND

The engagement exercise Changing for the Future took place during 2021 and it was agreed each of the hospitals would become a centre of excellence, with a specific purpose and function:

- **Morriston Hospital** would be the centre for urgent and emergency care, complex medicine and surgery, specialist and regional surgical services
- **Neath Port Talbot Hospital** would be the centre for orthopaedics and spinal care, diagnostics and rehabilitation, urology and rheumatology
- **Singleton Hospital** would be the centre for planned care, maternity and women's services, cancer care and diagnostics

'Changing Orthopaedic Services for the Future' proposals are in line with the delivery of these intentions. Patients currently access orthopaedic services by going to their GP and where necessary, referrals are made to the orthopaedic service. Most SBUHB patients will attend outpatients at Neath Port Talbot Hospital and if surgery is required will be added to the waiting list. Most surgery for knees and hips will take place at Neath Port Talbot Hospital, while more complicated surgery will take place at Morriston Hospital and hand surgery will take place at the Day Surgical Unit, Singleton

Following the Bridgend boundary change, the historic arrangements for some patients being referred to Cwm Taf Morgannwg Health Board continued. These

patients attend outpatients at Neath Port Talbot Hospital and if surgery is required are added to the Cwm Taf Morgannwg waiting lists. Straightforward cases will have their operation at Neath Port Talbot Hospital, the most complicated ones will go to Princess of Wales Hospital, Bridgend.

The proposals engaged upon concentrated on ensuring all Swansea Bay orthopaedic patients have the same pathway into Neath Port Talbot Hospital or Morriston for complex cases, with the same access to support services for all. Furthermore the proposals continued SBUHB focus on separating trauma and emergency orthopaedic surgery from planned orthopaedic surgery in line with best practice.

Significant work has already taken place to reduce waiting times and this has included the:

- creation of 21 extra outpatient consultation rooms at Neath Port Talbot Hospital
- relocation of fracture clinic back to Morriston Hospital
- ring-fencing of 10 beds at Morriston Hospital for the most complicated orthopaedic operations
- addition of three new modular theatres for Neath Port Talbot Hospital that will be ready for use from June 2023
- development of an Enhanced Care Unit at Neath Port Talbot Hospital so more complicated surgery can take place here
- introduction of orthopaedic prehab to help prepare patients for surgery while on the waiting list so they will recover quicker from their operation

CTMUHB currently utilise 13 theatre sessions a week at Neath Port Talbot Hospital for orthopaedics. CTMUHB have agreed to release 6 sessions back to the SBUHB provided they take back Swansea Bay patients on the CTMUHB orthopaedic waiting lists and all new referrals go directly onto Swansea Bay waiting lists. This means we can provide the same access to services for all our orthopaedic patients, however adding more patients to the waiting list will affect waiting times for some patients but we are taking action to reduce the impact of this.

The proposed changes will mean all residents will wait a maximum of 2 years for orthopaedic treatment by April 2024, residents will wait comparable time based on their need for orthopaedic care and receive access to the same range of services, including orthopaedic prehab. Swansea Bay residents on the CTMUHB waiting lists will have their cases clinically reviewed and be transferred to the SBUHB waiting list in line with their relative need and have their care at Neath Port Talbot Hospital, or Morriston Hospital instead of at the Princess of Wales Hospital at Bridgend.

The additional capacity will help reduce waiting times and achieve Ministerial and Welsh Government targets as well as ensuring we have enough capacity for orthopaedic operations going forward. Neath Port Talbot Hospital will move closer to becoming the Centre of Excellence for Orthopaedic and Spinal Surgery for Swansea Bay.

The disadvantage of the proposed changes is some patients will experience longer waits while the additional capacity planned within Swansea Bay becomes fully operational later in 2023.

It was agreed with Swansea Bay Community Health Council (CHC) that public engagement on these proposed changes should run for 8 weeks from 20th February 2023 to 14th April 2023.

3. ENGAGEMENT FINDINGS

Information on the engagement was circulated electronically, and in hard copy where appropriate, to the Health Board's existing mechanisms such as the Accessibility Reference Group, Stakeholder Reference Group, as well as our broad stakeholder distribution list and networks. Reminders were sent to encourage further responses to the engagement exercise.

Documents were made available for patients attending the Blue Clinic and Fracture Clinic at Neath Port Talbot Hospital

We actively promoted the public engagement through our social media channels.

The comments and issues raised in all responses have been taken into account in the consideration of the feedback received and any subsequent actions to be taken by the Health Board. The full comments are available as **Appendix A**.

During the engagement period, the following responses were received:

- 82 completed response forms although not all respondents completed all questions.
- 5 email submissions
- 4 people at online sessions
- Conversations with 29 people at the Quadrant Shopping Centre, Swansea
- Conversations with 50 people at the Aberafan Shopping Centre, Port Talbot
- Feedback from the Accessibility Reference Group

At the request of Swansea Bay CHC additional targeted work was undertaken specifically with SBUHB patients on the CTMUHB Orthopaedic waiting list between 10th May 2023 and 26th May 2023 and the following responses were received:

- 26 survey responses
- 87 telephone calls / email queries

The engagement plan outlines our engagement intentions and what was delivered. In summary, two online events were stood down due to a lack of attendance and a two week focused patient engagement exercise was added to ensure the views of those most affected were included. The engagement plan is attached as **Appendix B**.

3.1 Feedback from the survey

42 out of 82, or 53%, of respondents were currently on an orthopaedics waiting list. Many respondents commented on the lack of information and communication from the Health Board, exacerbated by the difficulty in contacting the Health Board to find out what is happening, where they are in the process, what happens next, how long they are likely to have to wait. Many respondents provided information on their personal circumstances and explained the impact that being on a long waiting list, with limited information on what happened next had on their lives and their ability to plan their lives and their mental and physical wellbeing.

Some explained the challenges of being in constant pain, the deterioration of their condition and the length of the wait for their operation.

Some respondents commented they had paid to have treatment privately as they could not continue to suffer indefinitely.

36%, or 16 out of 44 respondents, were waiting for a hip operation and 41%, or 18 out of 44, respondents were waiting for a knee operation.

While on a long waiting list, regular communication and information was identified as critical.

'Keep us informed of approximate how long to wait for appointments at regular intervals, as nearly 18 mths went by before follow up on the injection. Feels like we are being forgotten and being left to get on with our daily lives in constant pain.'

Opportunities for check-ups to support pain management, keeping mobile and reviewing potential deterioration was identified as key.

'Provide better pain relief, give advice and assistance with keeping as active as is possible to do. I am really worried that at the moment I am losing fitness and capacity to do things because of having to manage the pain and effects on my nerve functioning'

'I keep as active as possible and go to the gym when my joints allow, I just need an operation date to allow me to continue to lead a healthy life, so I will not need opiates etc'

52 out of 66, or 79%, of respondents agreed or agreed strongly with our proposals. Respondents identified several advantages to the proposal including

'Helping more people get operations in a timely manner.'

'Centralising- patients feel that Centres of Excellence for individual health issues under the same roof are easier to locate and know where to go'

'Less elective cancellations'

'Bridgend too far so Neath better.'

'All people will be treated closer to home, offered appropriate Prehab opportunities and ultimately wait no longer than 2 years for surgery.'

The major disadvantage / concern identified regarding the proposal was travel and transport to Neath Port Talbot Hospital

'access to Neath & Port Talbot is difficult for patients who don't drive and dependency on ambulances at the present time is not acceptable- many are elderly- transport is a problem'

'Having to attend Neath/Port Talbot Hospital. If you can drive or have someone to take you it's fine but public transport from most parts of Swansea is very poor so what provision will be put in place to get patients to Neath/Port Talbot'

Additional queries were raised regarding staffing of the service and the support for patients post operatively, the additional length of time some patients would have to wait and the challenge that a two year wait for an operation was not sufficiently ambitious by the Health Board.

'Staffing being available to run the service properly'

'some CTM W/L patients might be frustrated at having to wait longer. It will be important to ensure that lower priority patients don't get perpetually bumped down the list so that they wait an unreasonably long time for surgery because other higher priority patients jumped the queue.'

'A reduced waiting time of no more than two years for surgery is still far too long. A lot more resources will need to be employed to reduce surgery waiting times to an acceptable level.'

Respondents had the opportunity to provide further comments and matters raised included access to support services, the need to address parking issues at hospitals and the importance of post-op aftercare. The importance of communication and being treated with kindness and dignity was reiterated.

'I have just rung MCAS to see where I am on the list for pain relief injections and have been told there is at least 20 weeks waiting list more likely 6 months, not helpful with pain'

'My biggest complaint is the total isolation of not having contact with anyone who can keep me updated on the waiting list situation.'

'Please can you try and see patients like myself as human beings instead of just numbers on a waiting list as the effects on myself have been catastrophic and life changing.'

From an equalities perspective, consideration needs to be given to the impact these proposals may have on older people, people with disabilities, gender and minority groups.

Additional information regarding the demographic profile of respondents is included as **Appendix C**.

3.2 Feedback received via email

The five written submissions predominantly focused on personal experiences of respondents regarding the current service. Concerns were expressed around

- long waiting times
- the impact the long waiting times have on an individual's physical and mental health and wellbeing
- access to services such as MCAS.
- transport
- how high risk patients who need surgery are managed and what can be done if surgery is not an option
- improving the response form so it is more accessible

3.3 Feedback from online sessions

Two scheduled online events were stood down as no participants had signed up. However, two took place on the 4th April 2023 and 11th April 2023 and four people attended these events.

The proposals were positively received, but some respondents requested clarification around their personal circumstances. Concerns were expressed around the lack of communication and updates from the Health Board, the difficulty of being in pain with no idea of when they will have the operation and the toll this takes on physical and mental wellbeing.

3.4 Feedback from the Quadrant Centre, Swansea

Information was shared with 29 people throughout the day. Concerns were raised about the transport between the hospitals and the lack of a direct route from Swansea to Neath Port Talbot Hospital. Bus route 31 to Morriston via Birchgrove was identified as a non-contracted service, so if there are staff shortages it is stopped at short notice and this has an impact on patients and staff who use the transport.

Most of the people we spoke with didn't understand the term 'orthopaedics' and this had to be simplified into plain English. One patients had to pay for a private operation and commented 'I've given up on the NHS'.

3.5 Feedback from the Aberafan Shopping Centre

Information was shared with 50 people throughout the day. Generally, people were very happy with the development - the use of Neath Port Talbot Hospital was welcomed and feedback was we should get on with making it happen.

Concerns were expressed about the long waiting times and people suffering in agony while waiting. One person explained they paid for a knee replacement in Lithuania last year as the waiting times for the NHS are so long and it has transformed her life. Another commented they had waited 5 years for a knee replacement, and the staff at Neath Port Talbot Hospital were fantastic.

3.6 Feedback from Accessibility Reference Group (ARG)

Members of ARG commented that access to secondary care services is dependent on GP referral, however access to a GP is increasingly difficult and this is not taken into account with the proposed changes.

The introduction of prehab was welcomed and the importance of side rooms for disabled people in the hospital setting was emphasised.

Transport was reiterated as an important issue, particularly those dependent on public transport, and socioeconomic impact for people on low income needs to be considered and addressed

3.7 Feedback from SBUHB Patients on the CTMUHB Waiting List

As part of the mid-point review, the Swansea Bay CHC proposed letters should be sent to SBUHB patients to gather their views as these patients are likely to be the most affected by the proposed changes. A letter was drafted and shared with CTMUHB but unfortunately, the letter was not sent out during the engagement period. The CHC confirmed this was considered a critical part of the engagement process, it was anticipated the letters would be sent out during the w/c 17th April and comments could be shared for a two-week period. A delay in the process meant CTMUHB did not send out letters until the week of 10th May, SBUHB was not advised of this and there were initial challenges for patients as the online form was no longer live but this was resolved as soon as the issue was identified. Some people who rang misunderstood the answerphone message and thought the number was unavailable but 87 individual callers contacted us over the two-week period, some phoning on multiple occasions.

26 patients completed the response form, they told us while on the waiting list they need help to manage their pain, physiotherapy, support groups, and most importantly, communication and being updated as to when they are likely to have their operation

'I have been waiting over three years for my operation, maybe a progress update on the waiting list every three months sent out to patients to give them some idea of how close or how far away a patient is for an operation, at the moment there has been no feedback in three years.'

'Find another hospital willing to take me as there has been no movement in terms of elective surgery happening in Prince of Wales in the 3 years I have been waiting.'

20 out of 26, or 77%, of patients agreed or strongly agreed with the proposals for orthopaedics. The benefits of the proposal included

'I suppose it would make it easier to have orthopaedics in a central place'

'After full implementation all residents of SBHB will get a better service'

'As it would shorten waiting lists it would be good'

'We the public will be made aware of the process'

'Being seen in my local area as opposed to travelling'

'No advantage.'

The concerns expressed about the proposals included fear they would be placed at the bottom of the waiting list and still have to wait for years for their operation, or no longer be with a consultant who has handled their care for many years.

'People being moved who are top of the list in their area will move to the bottom of the list of another area'

'The waiting lists will get even longer'

'Further delays having waited for over three years already'

'had to go to the beginning of the waiting list again'

'Possible change of consultant who I have been under for over 10 years'

While some patients will benefit from the proposed changes,

'I would prefer to have the operation at Neath Port Talbot hospital for obvious reasons ie cost to family for visiting and easier for travelling to and from home'

Most of the patients who responded were frustrated by the long waits for operations, the impact this has on their life and the lack of communication from the Health Board. Quite simply, they wanted a date for their operation.

'You cannot imagine the impact this is having on my emotional wellbeing. My children have to now care for me, they have to do shopping for me, there are times where I do not engage in life and would rather sleep away the days. This hip op is the only thing giving me hope.'

'I was not informed at my recent visit to POW this would be happening. I only found out this by phoning the waiting list line. Nobody can tell me what is happening to me as nothing has been confirmed with the hospital.'

A full list of the responses received is attached as **Appendix D**.

4. Responding to feedback

The overall response to the health board's proposed recommendations – as outlined in the engagement document – would suggest the health board should proceed with the proposals contained in the "Changing Orthopaedic Services for the Future" engagement document subject to appropriate mitigation in certain areas where concerns were raised.

Issue	Proposed mitigation	By	Date
Sufficient staff to run the service	<p>The staffing model for the orthopaedics service will take into account the additional capacity required to manage the transfer of patients and reduce the current waiting lists for orthopaedics.</p> <p>The recruitment has already taken place for the new theatres and these are opening in June,</p>	Craige Wilson, SRO	30th Sept 2023
<p>Patients are concerned about the transport options and access to services. There are significant challenges in getting public transport from Swansea to Neath Port Talbot Hospital which is worrying for patients.</p> <p>There were further concerns regarding the costs of transport and how this may affect patients on low income accessing services</p>	<p>As part of the Changing for the Future implementation, it was agreed further work needs to be undertaken regarding transport options for patients including opportunities with the voluntary sector. This work is ongoing and will need to be accelerated and take into account the needs of orthopaedic patients.</p> <p>The payment of expenses for patients on associated benefits needs to be reiterated to assist some patients on low incomes.</p>	Craige Wilson, SRO	on-going

Longer waiting times for SBUHB patients who transfer from the CTMUHB list	<p>All patients who transfer will be clinically reviewed and slotted into the waiting list based on clinical need and prioritisation.</p> <p>While there may be an increase for individual patients in the short term, by March 2024, no patient should wait more than 2 years for an orthopaedic operation.</p>	Craige Wilson, SRO	31st March 2024
Waiting times for operations are too long and even 2 years is unacceptable	<p>The proposed change to orthopaedic services sought to ensure patients receive a consistent, equitable service and the long waiting times for orthopaedics operations are reduced.</p> <p>The commitment from the Health Minister is that 99% of patients will wait more than 2 years for an orthopaedic operation by 31st March 2024. Whilst this is a challenging target to meet the HB is developing plans to do so. Once we meet this target, we can review again to see if the target can be reduced further.</p>	Chief Operating Officer	31st March 2024
<p>Fear of further delays in having their operation, or being put at the bottom of the waiting list</p> <p>Concern that patients who are identified as</p>	<p>We can reassure all patients transferring over they will not be added to the bottom of waiting list.</p> <p>All patients who transfer will be clinically</p>	Craige Wilson, SRO	September 2023

in a lower category of need won't always sit at the bottom of the waiting list and never be prioritised for an operation	<p>reviewed and slotted into the waiting list based on clinical need and prioritisation along with current waiting time.</p> <p>Patients will receive regular updates and have access to the prehab service. As part of this information, confirmation of patients needing to contact their GP if they experience significant deterioration for escalation with their consultant will be included.</p>		
Some patients have a complicated history of care and have been with their consultant for a number of years and do not want to change consultants and lose that continuity of care.	When patients are being transferred back to SBUHB, where a patient expresses a preference to remain with a consultant for these reasons, every effort will be made to ensure the patient remains with that consultant.	Craige Wilson, SRO	This will be dealt with on a case by case basis based on patient request
Clear access and signposting to prehab and support services such as physiotherapy for patients while on the waiting list	The service will work with patients and the communications team to ensure accessible information is available to inform patients of how to access these services.	Craige Wilson, SRO	September 2023
Patients need to be updated regarding the transfer to SBUHB, the clinical review and their new consultant.	Once the CTMUHB patient list is transferred over to SBUHB, a letter will be sent to all patients on the list specifying that a clinical review will	Craige Wildon, SRO	31st March 2024

	beundertaken and confirmation of the allocation of managing consultant accordingly.		
Patients are on waiting lists for a significant length of time, with no updates on when their operation is likely to be. This makes patients feel forgotten. The lack of information makes it more difficult for patients to manage their care and lives and often causes significant anxiety and stress for patients	<p>Due to the nature of waiting lists and patients being prioritised based on need, it is difficult to accurately predict when patients will have their operation at some points on the waiting list.</p> <p>The service will work with patients to develop regular, useful updates for patients, confirming they are on the waiting list and providing reassurance they have not been forgotten.</p> <p>The Prehab service will provide patients with access to services to make sure patients are as ready as possible for their operation.</p>	Craige Wilson, SRO	September 2023

5. GOVERNANCE AND RISK ISSUES

In conducting this engagement, the Health Board has followed the Welsh Government's guidance on engaging and consulting on service change, in partnership with the Swansea Bay Community Health Council, and subsequently the Regional Team of Neath Port Talbot and Swansea Llais (the successor organisation of CHCs) and ensuring the Strategic Framework for engagement and consultation agreed between the Health Board and the Community Health Council has been applied in relation to this engagement programme.

A Stage 1 Equality Impact Assessment was produced and made available to the public as part of the engagement programme. Feedback from the engagement on equality impacts have been identified and are reflected in the Stage 2 Equality Impact Assessment attached as **Appendix D**.

6. FINANCIAL IMPLICATIONS

The investment for the delivery of the additional theatre capacity and subsequent revenue costs has been factored into the Health Board's revenue plans as part of its annual planning process for 2023-24 and confirmation of this funding is awaited from Welsh Government.

7. RECOMMENDATION

Members are asked to:

- **Note** the findings of the engagement programme.
- **Approve** the proposal to proceed with the service change proposal as outlined in the engagement document.
- **Approve** the mitigations outlined and agree to these being progressed at pace.

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 checked="" type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input checked="" 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 checked="" type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
<p>These engagement proposals for changes in services have been driven by the desire to improve access to high quality care and improve outcomes for patients. The changes proposed will be implemented carefully to ensure these benefits are realised.</p>		
Financial Implications		
<p>The investment for the delivery of the additional theatre capacity and subsequent revenue costs has been factored into the Health Board's revenue plans as part of its annual planning process for 2023-24.</p>		
Legal Implications (including equality and diversity assessment)		
<p>A Stage 1 Equality Impact Assessment was produced and made available to the public as part of the engagement programme. Feedback from the engagement on equality impacts have been identified and are reflected in the Stage 2 Equality Impact Assessment.</p>		
Staffing Implications		
<p>Any staff affected by the changes proposed in this engagement will be subject to the All-Wales Organisational Change Process.</p>		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
<p>The engagement proposals have been developed to take account of the Wellbeing of Future Generations (Wales) Act 2015, including the five ways of working.</p>		
Report History	None	
Appendices	<p>Appendix A – full comments Appendix B – engagement plan Appendix C– demographics of respondents Appendix D – patient feedback Appendix E – stage 2 EQIA</p>	