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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	21 December 2021	Agenda Item	7.1
Report Title	Lymphoedema Network Wales Bi-Annual Report		
Report Author	Dr Melanie Thomas		
Report Sponsor	Christine Morrell		
Presented by	Christine Morrell		
Freedom of Information	Open		
Purpose of the Report	<p>This report confirms that Lymphoedema Wales Clinical Network (LW) are complying with the governance obligations to SBUHB as the host of the service. There are no actions required as the service is compliant with regards to staffing, risk and finance management and clinical programmes of work.</p> <p>This bi-annual report of Lymphoedema Wales Clinical Network (LW) is presented for information and is a requirement of SBUHB as the host of this service.</p> <p>This report presents the activity and accomplishments of the hosted LW for the six-month period between April – September 2021.</p>		
Key Issues	<p>The report highlights:</p> <ul style="list-style-type: none"> • Re-branding of the network • Approval of the Memorandum of Understanding • Governance Audit • Reviewed and updated Evaluation Framework • Service Delivery in the Health Boards • Key Work Programme Developments 		
Specific Action Required (please choose one only)	Information	Discussion	Assurance
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> • Note LW report 		

Lymphoedema Wales Clinical Network Bi-annual Report

1. INTRODUCTION

Lymphoedema Wales is made up of the seven Health Board Lymphoedema Services and a small but growing National Lymphoedema Team. It is this National Team that is hosted by SBUHB on behalf of NHS Wales. An agreed Memorandum of Understanding is in place with all Health Boards. The governance structure requires that the LW National Team deliver an Annual Report to the Management Board for noting and assurance at the end of the financial year and an interim six-monthly report during the year. This report is the six-month update.

2. BACKGROUND

Report highlights:

- During this reporting period, Lymphoedema Clinical Network Wales undertook a governance and branding audit. Pending Strategy Board approval in November 2021 Lymphoedema Network Wales will (in future) be officially known as Lymphoedema Wales Clinical Network, but referred to locally as Lymphoedema Wales (LW). The rationale for the change was the recognition that the network was actually a clinical network. The references to the Network in this report reflect that anticipated change.
- To re-inforce the Value-Based ethos of LW, the Programme Manager has revisited the LW Evaluation Framework, which was originally developed to support the implementation of the Value-Based Lymphoedema Business Case in 2019. The original 2020 Framework had 10 objectives and 16 outcomes but it now has 7 and 14 respectively. It will be ratified by LW Strategy Board in November. Each of these relates to the Programmes of Work and Health Board (HB) Services. The HB six-monthly reports and the structure of the Annual Report have been amended to reflect this.

- **Health Board (HB) Services**

LW receives activity data from the HBs during the first 2 weeks of every month and this is then analysed by project/ programme staff within the LW National Team. Highlight reports are generated for each HB on a six-monthly basis and a combined All Wales version is produced.

As expected due to the current pandemic situation this last reporting period includes elevated staff sickness and accommodation issues which are being managed locally with no immediate concerns nationally. The LW National Team have supported all HB services as much as possible.

However, despite the challenges faced, the pandemic also presented a number of opportunities for adopting virtual ways of working that have demonstrated huge Quality and Safety Committee – Tuesday, 21st December 2021

efficiencies. It has provided teams with the opportunities of joint working with other health care professionals during deployment, boosted team spirit and the opportunity to reflect, audit and assess services, pathways and priorities moving forward. As a result, a new standardised referral pathway will be implemented nationally in the next reporting period.

The following charts paint a picture of activity across the HBs as of end of September 2021. * Please note that some of the data below does not include the July figures for Powys and ABUHB.

Caseloads across Wales (in Sept 2021)

	ABUHB	BCUHB	CTMUHB	CVUHB	HUHB	PTHB	SBUHB	All Wales
New Referrals	487	542	428	420	426	162	814	3279
NR waiting for an appointment	115	0	4	0	8	0	0	127
Discharges	198	421	176	192	252	119	331	1689
Caseload Total	3934	2987	2534	2018	2170	1027	4494	19164

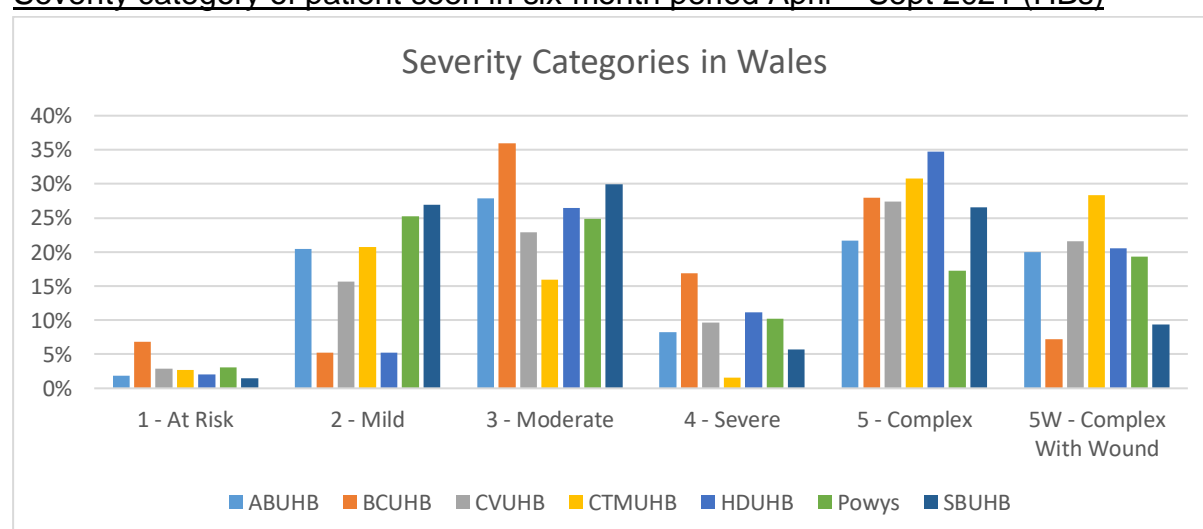
*SBUHB includes Bridgend catchment area.

New Patient Breaches (Sept 2021)

New Patient Breaches	ABUHB	BCUHB	CTMUHB	CVUHB	HUHB	PTHB	SBUHB	All Wales	%
Palliative - 0-2 Weeks	0	30	2	4	13	2	21	72	
Palliative - > 2 Weeks	0	0	0	1	0	0	0	1	1%
Urgent - 0-4 Weeks	55	55	77	84	84	62	197	614	
Urgent - > 4 Weeks	51	1	8	1	0	0	0	61	10%
Routine - 0-12 Weeks	196	440	300	221	246	88	480	1971	
Routine - > 12 Weeks	15	1	0	0	0	0	0	16	1%

There are limited breaches across Wales apart from ABUHB which has experienced significant staff shortages.

Severity category of patient seen in six-month period April – Sept 2021 (HBs)



	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	%
1 - At Risk	108	71	43	68	78	127	4%
2 - Mild	454	421	160	307	502	564	18%
3 - Moderate	820	640	538	641	712	772	25%
4 - Severe	266	145	111	311	302	255	8%
5 - Complex	930	406	539	642	795	880	29%
5W - Complex With Wound	479	367	299	384	466	460	15%
Total	3057	2050	1690	2353	2855	3058	100%

This information suggests that 52% of the work load is Severe/Complex Lymphoedema.

LW Programmes of Work:

• Research

During this last six-months the LW National Team programme includes:

- 9 Conference presentations
- Finalists for the following awards:
 - Royal College Nursing
 - 3 Advancing Healthcare Awards
- Dr Melanie Thomas won the best overall oral presentation at the British Lymphology Society conference and Dr Rhian Noble-Jones won the best overall poster presentation.
- Publications published includes:
 - Education needs of those managing Genital Oedema
 - Education needs of those managing Children and Young People
 - LYMPROM© development
 - Family experience of the CYP Lymphoedema Service
 - Breast Cancer Lymphoedema
 - The Benefits of a Mobile Unit in Lymphoedema Services in Wales

• Development and Innovation

National Cellulitis Improvement Programme (NLCIP)

The NLCIP programme commenced in January 2020 and has to date contacted all people admitted with a cellulitis infection from nine hospitals across Wales. Currently over 7,000 patients have been invited to participate with a 50% uptake. To upscale the programme some HBs have been keen to employ a dedicated Band 7 post. For example, in Hywel Dda University Health Board a Band 7 post has been employed to embed Cellulitis education and managements within the Primary Care Clusters and speed up targeting patients admitted within all their HBs. Other HBs have also expressed their wish in upscaling including Cardiff and Powys HBs.

A new patient and health care professional video film was created and launched along with a new E-learning unit. In conjunction with the All Wales Pharmacy group, a new

Antimicrobial pathway and guidelines has been developed and will be launched after approval in November 2021. The benefits of this Programme are significant and the team are working with the Finance Delivery Unit to evidence the expected financial changes.

National Children and Young People Programme (NLCYP)

Service delivery remains on track with clinical work, education, research and publications. LW created new documentation; established a National CYP Clinical Network with the CYP leads within each HB; published Service Audit Data; participated in an international webinar with Lymphie Strong and created a patient story podcast. The next six months will focus on adapting LYMPROM© & LYMPREM© for CYP and starting the validation as well as embarking on a Shared Decision Making pilot project and convening the inaugural NLCYP Steering Group.

Project B (changing prescribing to procuring compression garments)

Project B was rolled-out in BCUHB during this period and is now BAU in 6 of the 7 HBs, with the exception of ABUHB where it will be implemented in the next six-month period. LW has refined the data collection database to include the numbers of garments ordered, exceptions to the national compression contract and the clinical reasoning for ordering made to measures. There were 37 exceptions reported during this period. Remaining with the contract includes financial efficiencies.

National Clinics

During this period there were:

- 5 x Complex Clinics - 23 patients attended
- Bi-monthly MDT Clinics - 11 patients attended and 5 were referred for surgery
- 3 x ICG Scanning Clinics - 15 patients attended, 6 suitable for Lymphatic Venous anastomosis surgery (LVA)
- No LVA surgery. However, this is scheduled to recommence every two weeks in NPT Hospital from 23rd November 2021.

LYMPROM© and LYMPREM©

This period has seen the automated issuing of LYMPROM© and LYMPREM© via the DrDoctor platform in three of the seven HBs, including Swansea Bay. Local Project Boards, a Steering Group and a Change Request Board – which ensures that a controlled change process is in place have been established. Over 4,500 PROMS have now been returned digitally.

The completion rates (as of Sept 2021) on DrDoctor are as follows:

Health Board	Date range			
	Go-live to end of August 2021 (Start dates were different for each HB due to phased approach to roll-out)		From April 2021-August 2021 (This was when the newest version of the forms went live collectively across 3 HBs)	
	PROMs	PREMs	PROMs	PREMs
Aneurin Bevan University Health Board	58%	42.2%	56.7%	43.2%
Hywel Dda University Health Board	Same as April % as the go live date was April 2021	N/A	38.3%	N/A
Swansea Bay University Health Board	34%	To follow	31%	To follow

Work is ongoing with regards to the development of a data dashboard with DHCW / VIH team and there is ongoing costings work underway with the Finance Delivery Unit (FDU). LW will spend the next six months refining the 'manual' issue and collection process and amending the SOP to reflect this.

• Education Communication Education & Engagement

Education

A formal Competency Framework Document has been developed and was circulated to all LW staff across all the HBs. The inaugural Education Steering Group meeting was held. Currently LW has 21 Accredited Education Units.

- 4 Agored units were delivered via Teams - 22 external, 40 internal
- 4 Agored units were delivered face-to-face – 31 external 18 internal
- 1 other unit was delivered (Breast Master class) - 3 external 10 internal

In the next six months LW will review all Agored units and nominate new delivery leads within the Service. It will also create a competency framework for administrative staff.

On the Ground Clinical Educator Programme (OGEP)

Although OGEP was approved by all CEOs in May 2019, implementation has been delayed due to the pandemic. Yet based on the benefit realisation completed in SBUHB it costs more to not employ than it does to employ.

OGEP is now running in three HBs

- SBUHB since Dec 2020 (Transformation funds- ends March 22)
- BCUHB since June 2021 (Transformation funds- ends March 22)
- HDUHB since June 2021 Permanent posts
- CVUHB since October 2021 Permanent posts

During this period LW has developed common pathways, literature and tools; refined the education units and convened and established an OGEP Steering Group and local Project Board meetings. Local training for new staff on data collection has been provided. Benefit realisation is impressive from both patients and HCP benefits as well as financial efficiencies.

Communication

Work has commenced on the development of the LW Website which will be signed off by the Strategy Board in November with a 'go-live' date to follow.

LW also undertook a re-branding exercise and has introduced a new logo, colour palette and branding guidelines, which will also be approved by the Strategy Board in November.



3. GOVERNANCE AND RISK ISSUES

This report confirms that Lymphoedema Wales Clinical Network (LW) are complying with the governance obligations to SBUHB as the host of the service. There are no actions required as the service is compliant with regards to staffing, risk and finance management and clinical programmes of work.

All Mandatory training for the team are complete as are their Personal Development Plans. Network risks are managed via the LW Strategy and Programme Boards and escalated to Welsh Government NHS Wales Executive Board.

The governance structure is highlighted in Figures 1. Figure 2 has an additional reporting feed into SBUHB as the host organisation.

Figure 1: LNW Governance Structure

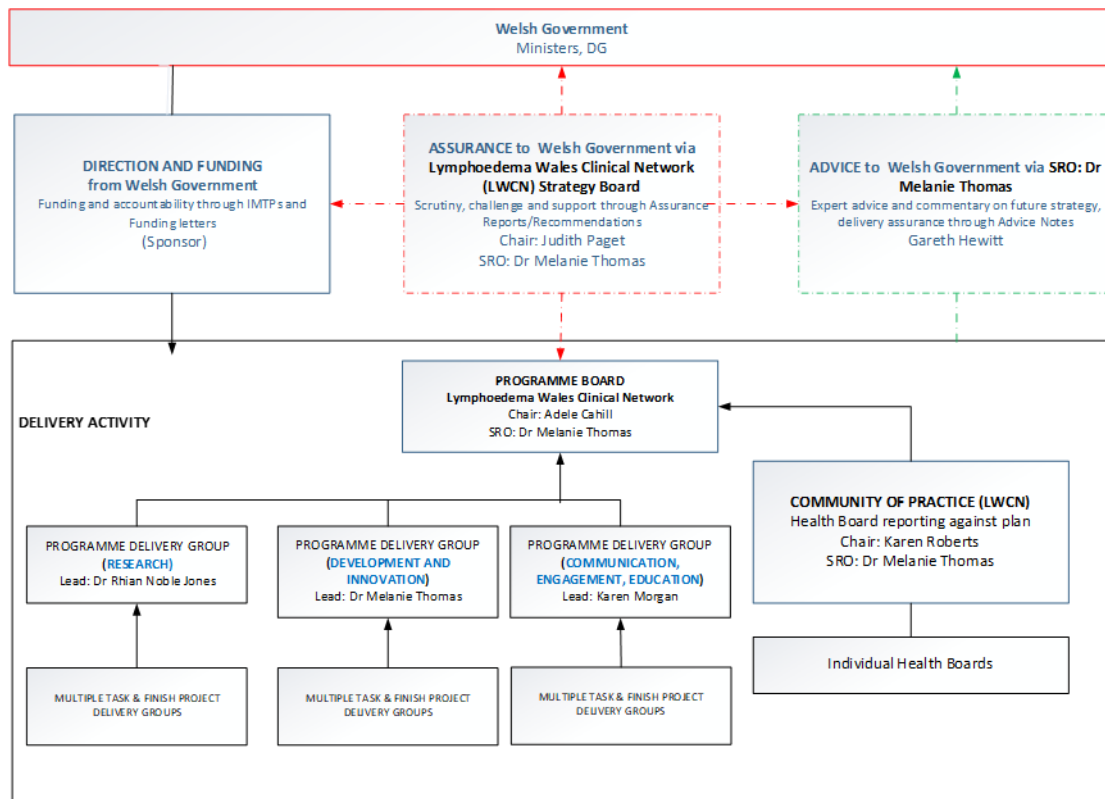
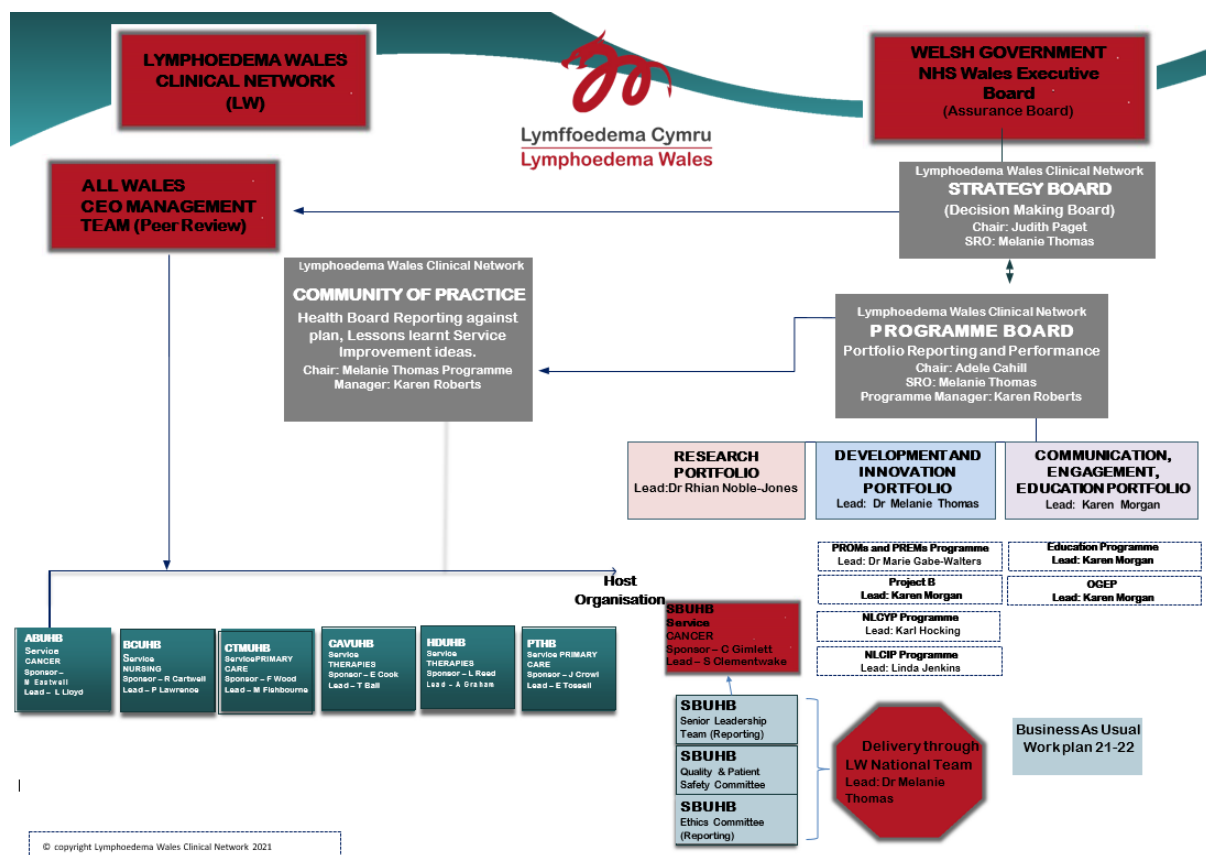


Figure 2: LNW Governance Structure (Host Organisation)



4. FINANCIAL IMPLICATIONS

There are no financial implications with regards to hosting the LW National Team. All funding is received via Welsh Government and the NHS Wales Health Collaborative. The budget at the end of year is zero. Any underspend is released back to SBUHB. During the next six-months funding currently received to the NHS Wales Health Collaborative will be transferred back to WG so that the funding will be available as baseline. Research money and additional funds from HDUHB are invoiced monthly/ as appropriate.

5. RECOMMENDATION

The recommendation is to note the contents of the LW bi-annual Report

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 checked="" 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 checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
The LW report presents evidence that highlights the operation and management of a quality, safe and effective network and Value-Based service that ensures that patients view are captured via PROMs and PREMs. One of the aims of the LNW is to reduce waste, harm and variation.		
Financial Implications		
All expenditure is budgeted and received from external sources. Hosting the national team does not increase financial pressures. Any underspend at year end is absorbed back into SBUHB.		
Legal Implications (including equality and diversity assessment)		
A MoU is in place which supports the hosting of LNW National Team.		

Staffing Implications	
N/A	
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)	
N/A	
Report History	This six-monthly report was presented to the LW Strategy Board in November 2021 and Management Board on 3 rd November 2021.
Appendices	None