

Ensure appropriate provision of services and support for people with Acquired Brain Injury in Wales

Y Pwyllgor Deisebau | 21 March 2022
Petitions Committee | 21 Mawrth 2022

Reference: SR21/1626-04

Petition Number: P-06-1235

Petition title: Ensure appropriate provision of services and support for people with Acquired Brain Injury in Wales.

Text of petition: There is urgent need to review the provision of services and support for people with Acquired Brain Injury (ABI) in Wales.

There are currently no inpatient rehabilitation services for people with ABI in North Wales, and there are just four inpatient beds for children and young people with ABI in Wales.

Services need to be adequate and 'fit for purpose'.

Now is the Time for Change.

In 2018, the All-Party Parliamentary Group on ABI launched the following report

https://cdn.ymaws.com/ukabif.org.uk/resource/resmgr/campaigns/appg-abi_report_time-for-cha.pdf

However, an equivalent report that focussed specifically on Wales and considered its demographics, geography and service provision was needed.

This need has resulted in the 2021 'Acquired Brain Injury and Neurorehabilitation in Wales: Time for Change' report

<https://ukabif.org.uk/page/TFCWales>



Key recommendations are made across five areas - Neurorehabilitation, Education, Criminal Justice, Sport-related Traumatic Brain Injury, and the Welfare Benefits System - with each highlighting the urgent need for the provision of services and support for people with ABI in Wales to be reviewed. ABI is a hidden epidemic affecting many hundreds of thousands of people in Wales, and Services need to be adequate and 'fit for purpose'.
Now is the Time for Change.

1. Background

Acquired Brain Injury (ABI) covers all situations in which brain injury has occurred since birth, and can include a fall, road accident, tumour or stroke. According to the 'Time for Change' report there were 84,374 ABI admissions in Wales between 2012-17; Betsi Cadwalader University Health Board (BCUHB) had the highest number of admissions with 20,187. The total numbers of individuals living with the effects of ABI in Wales is unknown.

1.1. Time to Change Report

In 2018 the All-Party Parliamentary Group (APPG) on Acquired Brain Injury (ABI) and United Kingdom Acquired Brain Injury Forum (UKABIF) launched a report 'Acquired Brain Injury and Neurorehabilitation - Time for Change' to raise awareness of ABI, and to seek improvements in the support available.

In 2021 the report was updated to reflect the Welsh position, noting that:

- It was timely to look at neurorehabilitation given the establishment of a Major Trauma Network (MTN) for South Wales and Powys;
- There are no inpatient beds in North Wales; and
- Appropriate provision of support for people with ABI is necessary for a sustainable and healthy Wales.

The report made a number of recommendations including the need to conduct a review of the incidence of ABI, and whether existing neurorehabilitation services in Wales are adequate and 'fit for purpose'.

1.2. UK Government Action

On 2 December 2021 the UK Government announced its commitment to developing a cross - Government strategy on ABI which will be overseen by a Programme Board co-chaired by the Minister for Care and Mental Health and Chris Bryant, MP and a steering group will be established alongside the Programme Board.

In correspondance to the Committee on 22 February 2022, the Minister for Health and Social Services confirmed that the Welsh Government is liaising with the Department of Health and Social Care to ensure the strategy takes into account that health services are devolved in Wales, as well as consideration of Wales' national clinical framework and developing quality statements. The Minister also confirmed that the Welsh Government would be represented on the Programme Board and Steering Group.

2. Neurorehabilitation Services in Wales

Neurorehabilitation is a process of assessment, treatment and management and is delivered via a specialist multidisciplinary team (MDT), including roles such as Rehabilitation Consultant, Rehabilitation Nurse, Neuropsychologist, Speech and Language Therapist, Physiotherapist, and Occupational Therapist.

2.1. Neurorehabilitation services in south Wales

Major Trauma Networks (MTN) were established in England in 2010 and provide coordinated care pathways for individuals with major trauma. In Wales an MTN covering South and West Wales and South Powys is currently being established. University Hospital Wales (UHW) is a Major Trauma Centre and Morriston Hospital in Swansea is a Trauma Unit (TU) with specialist services. There will be five additional TUs and two rural trauma facilities. Level 1 neurorehabilitation services which provides specialist support to those with complex rehabilitation needs are provided in University Hospital Llandough (UHL) which includes a rehabilitation unit with 22 neurorehabilitation beds and 26 spinal beds. Neath Port Hospital has 13 beds for complex neurological cases.

Referring to the implementation of the South Wales MTN the Minister highlighted the investment in additional rehabilitation provision for patients with major trauma injuries including: additional rehabilitation consultant sessions;

introduction of major trauma rehabilitation practitioners; and implementation of the rehabilitation prescription.

2.2. Neurorehabilitation services in north Wales

Betsi Cadwalader University Health Board (BCUHB) is part of the the North West Midlands and North Wales MTN and has access to the MTC in Royal Stoke University Hospital, North Staffordshire. Residents in North Powys feed into the West Midlands MTN, and the Birmingham, Black County, Hereford and Worcester MTN. The Minister for Health and Social Services explained that all services are spot purchased through the Individual Patient Funding Requests process.

The North Wales Brain Injury Service (NWBIS) provides community-based, multi-disciplinary clinical team which provides outpatient rehabilitation.

Children who meet the criteria for specialist inpatient paediatric neurorehabilitation are referred to Alder Hey Children's Hospital, Liverpool (North Wales) or Noah's Ark Children's Hospital for Wales (NACHfW) in Cardiff. NACHfW provides a specialist inpatient paediatric neurorehabilitation unit with capacity for four children and young people with ABI.

The Minister noted that BCUHB has been trying to address the issue of the lack of inpatient Level 2 Neuro Rehabilitation services in north Wales since 2019/20. The Minister referred to a BCUHB Neuro project team which, in collaboration with clinicians and service users, have been:

working to understand and define what the delivery of a level 2 neuro rehabilitation service would involve. This included identifying potential capacity and demand, relevant service standards, resource requirements and how the current service pathway operates.

A report of the findings was submitted to the Executive Team in April 2021, and following delays due to pressures within the health board the Minister confirmed that in September 2021 it gave the Team approval to further develop potential options and conduct an appraisal to provide a recommended option. Work is currently underway and will be concluded by the Autumn.

The Minister suggested that if any of the petitioners would like to get involved in the development of this new service and have provided contact details.

3. Welsh Government Action

In correspondence to the Committee on 22 February 2022, the Minister for Health and Social Services highlighted the Neurological Conditions Delivery Plan 2017 which sets out the Welsh Government's vision for people living with all neurological conditions in Wales. The Plan is overseen by the Neurological Conditions Implementation Group (NCIG) which for the past two years has prioritised neuro-rehabilitation for people with ABI and other neurological conditions and has been allocated £900k for neuro-rehabilitation services annually. The Plan has been extended to March 2022.

The Minister explained that the NCIG are working with the Value in Health (ViH) team to develop a data dashboard for ABI which will enable NCIG, health boards and other stakeholders to understand the demand for services and the impact on people living with ABI.

The National Clinical Framework (NCF) was published in March 2021 and sets out how clinical services, including neurological conditions, should be provided over the next decade and the ways in which the Welsh Government can better support system planning and quality improvement. The Minister says that the:

NCF will be supported by a range of quality statements that consist of high-level policy intentions that set out the standards and outcomes expected of clinical services. The NCIG is currently working on a specific quality statement for neurological conditions.

A national rehabilitation Framework and population specific guidance was published in May 2020. The Minister said these would help services to better understand the increasing demand for rehabilitation, reablement and recovery throughout health and social care services, and are being used by health boards, local authority and third sector partners to plan for rehabilitation services to respond to the needs of their populations.

Responding to the petitioner, the Minister said :

I expect to see transformation to deliver increased and more consistent provision of rehabilitation, reablement and recovery services, including neuro-rehabilitation to ensure people can maximise their recovery from ill health as close to home as possible and live healthier, happier, longer, independent lives.

4. Welsh Parliament Action

Responding to concerns that the Neurological Conditions Delivery Plan had not resulted in the degree of change that was expected, the fifth Senedd's Cross Party Group on Neurological Conditions undertook an inquiry in 2019 which recommended actions to improve the implementation of the Plan and to deliver a long-term approach to raising the standard in support offered to people with neurological conditions. However, the Welsh Government did not accept all the recommendations outlined in the report.

Every effort is made to ensure that the information contained in this briefing is correct at the time of publication. Readers should be aware that these briefings are not necessarily updated or otherwise amended to reflect subsequent changes.