

Easy Read - The Future of Vascular Services in South East Wales



What are vascular services?

Vascular diseases affect the network of your blood vessels. This network is known as your **vascular** or circulatory system. **Vascular services** rebuild, unblock or bypass (give blood an alternative route to) blood vessels to restore blood flow to organs.

You might have a one-off treatment to reduce risk to your life, help your blood vessels work better, stop strokes happening, or reduce the risk of you needing to have an amputation.

Vascular services also help some people with other problems such as kidney disease.

Vascular disorders can stop some or all of the blood you need getting to your limbs, brain or other organs. This can cause pain when walking or strokes. They can cause sudden blood loss, which can put your life at risk.

Vascular medical staff also work in major trauma, cardiology, diabetic medicine, stroke medicine, kidney dialysis and chemotherapy, and other areas.

Why are we talking about vascular services?

There are lots of challenges for these services, making them hard to run from our current hospitals. These include more people needing the service. Making changes could mean:

- A larger population is helped than is currently the case across our hospitals
- Quality standards are met

- Increased ease in attracting and keeping the workforce needed
- Services no longer spread too thinly across South East Wales
- Patient outcomes improved

We want to join our services up in a better way, to match those already in place in South West Wales and North Wales.

Who is leading this programme?

This engagement programme is being jointly led by the health organisations that need vascular services for their areas. These are:

- Aneurin Bevan University Health Board
- Cardiff and Vale University Health Board
- Cwm Taf Morgannwg University Health Board
- Powys Teaching Health Board

The areas affected are:

- Blaenau Gwent, Caerphilly, Monmouthshire, Newport, and Torfaen
- Cardiff and the Vale of Glamorgan
- Rhondda Cynon Taff and Merthyr (Bridgend is part of the South West Wales Network)
- South Powys (other parts of Powys served by South West/North Wales Networks as well as networks in England)

The focus of this engagement programme

We want to talk to people across South East Wales about how vascular services will be given in the future.

To do this, we will share information about:

- What vascular services are
- Which people may need vascular care
- How vascular services are provided now
- The current challenges for vascular services
- How we hope to deal with these challenges
- The pros and cons of any future plans

Who needs vascular services?

People who need vascular services may have:

- Had a stroke and be at risk of having further strokes
- Blocked blood vessels (arteries) in the legs causing pain, which may get worse and put the leg at risk of needing amputation
- A bulge in the wall of the body's main artery (blood vessel), which needs to be mended
- Untreated or untreatable blocks in arteries, which mean they need an amputation

Around 1300 appointments or operations are carried out every year in the South East Wales area.

How are services provided now?

Services are given from

- University Hospital of Wales, Cardiff

- Royal Glamorgan Hospital, Llantrisant*
- Grange University Hospital, Cwmbran

**At the time of writing, Cwm Taf Morgannwg University Health Board residents are being seen in either Aneurin Bevan University Health Board or Cardiff and Vale University Health Board. This is a short-term plan while a long-term plan is made.*

How do services perform?

How well our services do is reported by the National Vascular Registry. They report against 5 key areas:

- An **abdominal aortic aneurysm** (AAA) is a bulge or swelling in the **aorta**, the main blood vessel that runs from the heart down through the chest and tummy
- A **carotid endarterectomy** is a surgical procedure to unblock a carotid artery
- **Peripheral artery bypass** is surgery to reroute the blood supply around a blocked blood vessel in one of your legs
- **Angioplasty** opens narrowed or blocked blood vessels that supply blood to your legs
- **Major lower limb amputation** is the full or part removal of a damaged leg that cannot be healed

Our doctors have been talking about the services for some time...

“We do ok on the outcomes but think we could do better by changing the way our services are organised.”

“Developing a networked arrangement for vascular services would bring South East Wales into line with other parts of Wales.”

“We don’t have the right number of people to treat to keep the skills we need by working separately.”

“It would be better if we could do all of the operations in one place to make best use of workforce and keep the right level of skill.”

In fact, their discussions go back as far as 2014...

Taking into account national guidance and best practice, they looked at the best way to organise services.

They assessed all of the options against the following:

- Quality & Safety (highest priority)
- Acceptability (how comfortable people will be with changes)
- Strategic Fit (how well it fits with other aims for these hospitals)
- Sustainability (ability for the services to be fit for now and the future)
- Access (how easily people will be able to use these services)
- Achievability (how easily we can make it happen)

They reached an agreement...

The best way to offer vascular services in the future would be via a hub and spoke model.

- This would mean that all major vascular operations are done in one hospital
- People would still go to their local hospitals for any work/advice before an operation or after the operation for recovery and rehabilitation

- It would mean best use of skill and staff
- Most importantly, it would mean better outcomes for patients

Where could the hub may be?

There are lots of things to think about, such as the need for other services to be on the same site (for example, major trauma services).

The best place for a hub is University Hospital Wales, Cardiff.

What about the Spokes?

Spoke hospitals will still be at:

- Royal Gwent Hospital and Grange University Hospital
- Royal Glamorgan Hospital
- University Hospital Llandough and University Hospital Wales

Rehabilitation will still take place in all communities and local hospitals across the region.

Have your say

We want to hear your thoughts. If you want to give feedback, please [click here to fill out the survey](#).

Or, you can fill out the survey form in the summary document and send it to us:

- Scan it, or take a good quality photo, and email the photo to sewalesvascular@wales.nhs.uk
- Or post it to the below address:
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