



## GOLD COMMAND GROUP

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	<b>INSERT</b>
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Update re development of plans capable of being implemented during 2021/22 to achieve Planned Care Recovery.
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Andrew Carruthers, Director of Operations
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Keith Jones, Director of Secondary Care Stephanie Hire, General Manager, Scheduled Care

**Pwrpas yr Adroddiad** (dewiswch fel yn addas)

**Purpose of the Report** (select as appropriate)

Ar Gyfer Trafodaeth/For Discussion

## ADRODDIAD SCAA

### SBR REPORT

#### Sefyllfa / Situation

This paper advises the GOLD Command Group of current progress in the development of plans capable of being implemented during 2021/22 to support planned care recovery and the current assessment of the impact of these plans on planned care waiting times during 2021/22.

#### Cefndir / Background

In February 2021, the Gold Command Group requested the Tactical / Silver group to work with Bronze level operational groups in the development of recovery plans capable of being implemented during 2021/22 to achieve WG targets in relation to RTT, Diagnostics, Therapies, Cancer and Mental Health using measures of likely harm as a way to prioritise initial action in 2021/22. Implementation timescales will be subject to discussion with Welsh Government.

This paper considers progress achieved to date in the development of the planned care recovery plan and the current assessment of the impact of this plan on RTT waiting times during 2021/22.

As reflected in the draft HDUHB Annual Recovery Plan for 2021/22, our focus for the next 12 months is how we recover from the pandemic: how we support our staff to recover after what has been an exhausting year, and how we lay the foundations to recover our services and support our communities.

The process of recovery for planned care services is expected to take several years and timelines for recovery depend on several factors, many of which are not wholly within our control, or our ability to predict. In supporting this work and to inform our revised HDUHB plan to be finalised in the months ahead, we have commissioned detailed modelling work

which will help us better predict the medium and longer term impact of the pandemic on our services. This will support us in planning when and where staff will be deployed over the coming months and years, and our plan to recover our services, especially our planned care services.

Our planning assumptions at the present time therefore reflect our best estimate of how we will support the recovery of staff, our services, and our communities over the planning year 2021/22.

## Planning Assumptions

The current COVID-19 climate has resulted in a reduced capacity within planned care services across the region as resources have been redeployed across HDdUHB and between specialties in response to the emergent situation. This has also exposed limitations of our existing estate regarding challenges in creating protected green pathways. This reduced capacity, across all sites, has especially contributed to the lack of Planned Care procedures conducted. Consequently, the saturation of this capacity and the subsequent addition of new patient referrals has inevitably led to delays in procedures and significantly increased patient waiting times. This report outlines how HDdUHB plans to increase capacity levels and alter patient pathways, subsequently providing a pathway across to address the growing backlog of patients waiting for access to treatment.

A key challenge in planning for 2021/22 is the significant uncertainty about how the COVID pandemic will unfold through the year. In the absence of a national model, the HBUHB modelling cell has been developing scenarios for Hywel Dda that will give some indication of the potential demand trajectories. As reflected in the draft HDUHB Annual Recovery Plan, it is suggested that in order to provide a level of contingency against the potential risk of a variant of concern that is resistant to the current vaccine rollout programme, the University Health Board develops its contingency plans on the basis of **the median of scenario 22 (the worst case scenario)**. This is chosen as it most closely represents the existing non-COVID demand figure in hospital, and the maximum projected COVID position is similar to that which the Health Board has experienced during the second wave. Therefore the University Health Board should develop plans that ensure it can manage:

- A COVID demand of 250 hospitalised patients
- A non COVID demand of 695 hospitalised patients

As a consequence, our Recovery Plan for 2021/22 is based on an expectation that our COVID arrangements remain in operation for the coming 12 months. Coupled with an assumption that for the remainder of the year ahead social distancing measures must remain in place with subsequent impacts on useable capacity, our planned care recovery capacity assumptions for Q1/2 of 2021/22 therefore broadly reflect those set out in our previous 2020/21 Q3/4 plan. These anticipate the continuing challenges we expect to face in managing COVID and non-COVID related demands on our system in the months ahead whilst endeavouring to protect 'green' planned care pathways on each site, all against the backdrop of a significant and sustained staffing challenge. Taking these factors into account, it is expected that available, staffed capacity during 2021/22 will not match that available before March 2020. There is continued work taking place with Workforce regarding recruitment strategies to regain staff lost through the pandemic with regard to natural leavers i.e retirement and career changes, its assuring to note that recent vacancies are now being filled in our Critical Care departments but we will continue to work with colleagues to improve all area fill rate.

## **Asesiad / Assessment**

### **Planned Care Recovery Planning – Q1/2 2021/22**

Plans under development are designed to achieve the maximum staffed capacity available within our site facilities, influenced by:

- What can be generated through our theatre capacity across our four sites
- How is this supported by adequate post-operative critical care pathways
- The supporting bed base available to support patient flows

Capacity will also be supplemented by utilisation of available capacity within the independent sector.

Patient prioritisation will be determined by a risk stratification model, supported by NHS Wales and the Royal College of Surgeons, to assess and prioritise all existing and new patients, taking into account length of wait and clinical urgency, including suitability for virtual or Face-to-Face appointments categorising patients according to five levels of urgency.

Physical capacity and staff availability are the key determinants of our ability to deliver safe, sustainable, accessible and kind elective care. In assessing our four acute sites, it is evident that it is not practical for the Health Board to provide a protected 'Green' Site in the short-medium term, as we face significant geographical challenges in rebalancing emergency flows, and limitations in our ability to provide supporting site-specific critical care capacity.

### **Short / Immediate Term Plans Q1/Q2**

#### **OUTPATIENT SERVICES**

The four main hospital sites consist of the following outpatient rooms :

Withybush Hospital 23 rooms  
Prince Philip Hospital 26 rooms  
Glangwili Hospital 34 rooms  
Bronglais Hospital 8 rooms

#### **Managing Core Services**

During the second wave of the pandemic in winter 2020 all outpatient consultation appointments, with the exception of MDT/USC/Fracture/'do no cancel' and Urgent new /Urgent follow ups were stood down.

Digital innovation has continued to be a key part in the delivery of outpatient services during the second wave of Covid. Working on the current assumption clinicians are undertaking 'face to face' (F2F) consultations for the most urgent cases only and that as the COVID risks decrease the reintroduction of F2F for cases who can only be seen via this method the Health Board continue to endorse new ways of working as set out by WG, the health board continue to rollout digital services, including virtual clinics, SOS and clinical validation. These services are a key element within The WG National outpatient's strategy and have the potential to

transform the way we manage outpatients in HDUHB in the future, as well as supporting patients during the current pandemic.

The outpatient departments have implemented social distancing rules and guidance throughout the footprint of the departments, which resulted in a reduced number of face to face patients that could be accommodated in a clinical session to allow for cleaning of the clinical rooms in between patient consultations. This resulted in clinic slots being reduced from an average of 12-14, down to 7-8 per session.

### Outpatient weekly room allocation as at March 28<sup>th</sup> 2021

ROOM USAGE (AM & PM COMBINED, DOES NOT INCLUDE EVENINGS OR WEEKENDS)	W GH	PP H	GG H	BG H	TO TAL	%
F2F	95	15 7	20 1	39	492	54 %
F2F/VIRTUAL	57	14	4	8	83	9%
VIRTUAL	7	5	14	4	30	3%
VIRTUAL/WITH F2F	1	15	5	26	47	5%
ISOLATION ROOMS	20	10	10	10	50	5%
TEMPORARY HOUSED IN OPD	30	0	80	0	110	12 %
FRACTURE CLINIC PPH	0	30	0	0	30	3%
<b>TOTAL OPD ROOM USAGE</b>	<b>21 0</b>	<b>23 1</b>	<b>31 4</b>	<b>87</b>	<b>842</b>	<b>92 %</b>
OPD ROOM CAPACITY	23 0	26 0	34 0	88	918	
<b>AVAILABLE ROOMS FOR BOOKING</b>	<b>20</b>	<b>29</b>	<b>26</b>	<b>1</b>	<b>76</b>	<b>8%</b>

As you can see from the above table 54% of the clinic rooms are used for F2F consultations, 3% for virtual clinics and 14% is combined clinics of both F2F and Virtual. Whilst we continue to house some services within outpatient rooms that previously were within ward settings, this reduces our weekly overall capacity by 12%. We have also reduced our capacity in PPH by 30 clinic sessions by the closure of the fracture suite for the immediate future the use of virtual clinics has decreased the F2F demand, this situation is regularly reviewed. The above chart also shows that as to date across the four sites there are only 76 clinic sessions (8%) available to book. For a full breakdown of the clinics per site please see appendix 1

### Plan for Quarter 1/2

1. To work with service leads to plan capacity required for new and follow ups, whilst understanding the needs for each service and their capacity to see patients virtually, therefore ensuring that the services who have the highest demand for F2F are accommodated within the outpatient departments. See stage 1, 2 & 3 demand
2. Validation of the stage 1 waiting list through:

- a. Admin validation
- b. Letter/telephone validation (as per WG Guidance)
3. Explore with service teams the potential for office virtual clinics , offsite community based clinics and 'virtual hubs' to allow the utilisation of OPD clinics for the services requiring F2F clinic capacity.

### **Follow up Patients**

1. Continue to work with Service Teams to ensure continued validation of the follow up lists
  - a. Admin validation
  - b. Clinical validation
  - c. Discharge if able
  - d. SOS if able
2. Continue rollout of Consultant Connect regarding sharing information advice.
3. Continue rollout of Attend Anywhere and Microsoft Teams.
4. Encourage the implementation of Virtual Group Consultations/Video Group Clinics.

### **Staffing model**

#### **Q 1**

#### **Current working model**

OPD activity across the 4 sites working at reduced capacity in line with COVID plan. Staff returned to department from deployment to ward areas. OPD nursing teams supporting medical colleagues with clinical activity within the clinical area including non-face to face consultations. Redesign and remodelling of NSW roles to incorporate COVID screening of patients entering the department (and for all other services that sit within the OPD footprint) and also co-ordination of clinical waiting areas; also monitoring of clinical waiting area and patient flow into the departments and waiters in cars.

If a 3 session system operation within OPD services was introduced this would open up the provision of OPD clinics from Monday to Friday 1700-2000 operation, creating clinical activity and physical space that could accommodate extra provision of clinics, that will allow for the urgent 4 categories, and clinical management of the urgent categories and significant improvement could be seen in relieving the current backlog and start movement within this cohort of patients. Also the provision of a virtual centre for non-face to face consultations would allow for OPD clinical areas to be maximised for actual face to face consultations and allow for more patient through put per session.

#### **Q2**

Introduction of virtual village, where medical/surgical staff are accessing virtual clinical activity outside of the OPD clinical area allowing for condensed activity of actual face to face consultations. This will be the clinical disciplines that require actual physical medical /surgical examinations including AGP procedures, minor surgical procedures and interventional investigations to prevent admission to hospital. . It is anticipated that this will be Ophthalmology, ENT, surgical specialities, dermatology, gastroenterology and respiratory medicine. The OPD nursing workforce/establishment will be planned to ensure robust provision is given to each area appropriately and in line with required nurse staffing acts. The pre COVID OPD plan included provision in satellite clinics external to the main DGH footprint, so there will be no additional costs incurred to travelling to virtual village to support colleagues as this is within the OPD finance budget.

## **Stage 4 plans Q1/2**

*\*Please see for reference Appx 2 with regards to planned theatre activity concluding this document\**

## **Medium-terms plans for the potential expansion of Planned Care capacity (Q3/4 2021/22 and beyond)**

It is clear that in order to address the backlog on non-urgent cases which have developed through COVID, a different approach will be required. With this in mind, we are developing proposals for a modular solution at our Prince Philip Hospital site, which is designed to further enhance our ability to provide protected 'green' pathway capacity for planned care patients.

The proposed solution is for two Day Surgical Theatres (with Laminar Flow capability) and a Dual-Endoscopy Suite. The proposal, which is currently in draft stage and is unlikely to be operational before Q3 2021/22, would enable an approximate increase of up to 5,000 patients per annum beyond our current plans. This number would include a return to pre covid and no restrictions and the funding of the second day theatre.

The benefits are threefold:

- All appropriate Orthopaedic day cases can be carried out in a dedicated DSU laminar flow theatre, ultimately freeing space in main theatres and Trauma and Orthopaedics ward to treat a greater number of inpatients. Demand in the facility can be utilised to create revenue for the Health Board and elevate the Orthopaedic department as a go to location in Wales.
- Increased Endoscopy sessions will result in a higher number of patients treated within a facility fit for purpose
- The vacated departments within the main hospital site can be utilised for an array of opportunities, for example, a dedicated Urgent Suspected Cancer ward and/or a relocated Critical Care Unit
- Costs are currently being reviewed but take into account equipment, staffing and rental costs, and would be in the region of £12m over a 3-year period
- This work will be further developed as a result of our current collaboration with Lightfoot, in order to further model our return to a zero wait position

## **Outpatient Care**

We will continue our approach to deliver services differently and maximise the use of digital tools in our recovery planning. Additional resources have been secured in order to support the transformation work at pace with key actions in 2021/22:

- Digital innovation has been a key part in the delivery of outpatient services during COVID. Working on the assumption clinicians are undertaking 'face to face' consultations for the most urgent cases only, and to endorse new ways of working as set out by Welsh Government, we will continue to rollout digital services across the system (e.g. Consultant Connect; Attend Anywhere Patient Knows Best; Microsoft Teams / Booking App), including virtual clinics, Seen On Sight and clinical validation.

- All scheduled care services are encouraged to utilise See on Symptoms and Patient Initiated Follow-Up. Targeted resources have been deployed to those specialities where it is anticipated this option could be more widely utilised.
- Those services that are receiving electronic referrals have been configured to now enable the receiving clinician to indicate the preferred consultation method, enabling services to manage face-2-face and virtual booking processes more effectively and only using face-2-face outpatients' slots where necessary. This also identifies patients suitable for straight to test/one stop from point of referral, e.g. Dermatology, Cardiology, and Respiratory. There are four services that require this update to the system, which is in progress. Those services that are not yet receiving referrals will have this update added during configuration.
- We will maximise the use of Video Group Clinics and through video platforms to support and care for patients, including: Therapies; Pain Management; Dementia care; Diabetes; Children's Speech and Language Therapy; Heart failure care; Dietetics; Neonatal therapies; and patient education programmes
- Work to expand delivery continues and we will review the effectiveness of Consultant led group consultations where these are indicated

### **OPD Staffing model Q3/4**

#### **Q 3**

Planning is already in place for all other services hosted by OPD during the pandemic will have returned to their retrospective (or new) locations to enable more OPD patient activity in areas, such as maddog and branwen settings.

These areas could be turned into OPD centres focusing on specialities such as ENT, Ophthalmology and dermatology, allowing the main OPD centres to focus on the essential service provision as listed in Q2.

Q4 Ongoing review of previous quarters and redesign of pathway management working with primary, community and operational service teams to review and ensure that ongoing plans for astute referral management and RTT is within WG targets and we are doing the right thing at the right time in line with other NHS Wales OPD services.

### **Stage 4 Q3/4**

*\*Please see reference Appx 3 with regards to planned theatre activity concluding this document\**

### **Regional Solutions**

In parallel with the ARCH transformation programme, our recovery planning for 2021/22 and beyond also focuses on the following specialty areas where practical opportunities for joint working and collaboration with Swansea Bay UHB have been identified:

#### **Cataracts: 3 phases:**

- Immediate / Short term – both University Health Boards maximising their own local capacity (within COVID restrictions) plus support from the independent sector
- Medium term – potential demountable option(s) strategically located to aid recovery capacity over 2/3 years although this timeline would be dependent on Welsh Government support .

- Longer Term – options around a regional Cataract centre(s) based on a more permanent build to support sustainability and reduced reliance on independent sector.

**Dermatology:** We will recruit to joint consultant posts, both dermatology and plastic surgery and the links with the GP training programme will be strengthened to maximise General Practitioners with Extended Roles in Dermatology

**Endoscopy:** The 2021/22 work programme will align with the national programme to establish regional facilities and the wider focus on the provision of planned care.

**Orthopaedics :** There is agreement that we would look to jointly develop some services where we have recruitment issues in the region – e.g. hands, spines, paed.

The regional aspect is about workforce opportunities and working across the region rather than physical infrastructure as we need to develop PPH as discussed earlier, and SBUHB need to develop NPTH

### **Outline Assessment of Impact on Waiting Times**

Due to the uncertainties outlined above regarding future patterns of COVID related demand, staffing availability and expected patterns of planned care demand in the months ahead, it is difficult to accurately predict expected waiting times profiles by specialty through the course of 2021/22.

Based on the planning assumptions underpinning our HDUHB Annual Recovery Plan and the capacity plans outlined above, the table below reflects the current assessment (by specialty & stage) of the potential change in waiting lists / times( Ref PTL W/C March 29<sup>th</sup> 2021)during 2021/22 and a prediction of likely timescales to recovery of a zero breach position in respect if the RTT 36 week waiting times target where these are not deemed recoverable by March 2022. Appx 4. models the capacity assumption on reduction of urgent only in Q1 and Q2. We will now need to coordinate the detailed September capacity if COVID-19 restrictions are lifted with lightfoot solutions to ascertain the final recovery timeline. *Please see appx.4*

The above assessment is subject to further review and amendment following:

- Conclusion of the detailed modelling commissioned via Lightfoot Solutions
- Review of the the HDUHB Final Annual Recovery Plan to be approved by the Board in July 2021
- WG approval and related timescales of plans for demountable solutions at Prince Philip Hospital and regional cataract recovery plans.
- Financial support for increased utilisation of independent sector capacity
- Changes to staffing availability to support bed and theatre capacity during 2021/22
- Please see appx 5. Planned Care Pathway Update Critical Care

### **Argymhelliad / Recommendation**

The GOLD Command Group is requested to note current progress in the development of plans capable of being implemented during 2021/22 to support planned care recovery and the current assessment of the impact of these plans on planned care waiting times during 2021/22.

<b>Amcanion: (rhaid cwblhau)</b> <b>Objectives: (must be completed)</b>	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	4.4 Provide assurance to the Board that all plans put forward for the approval of the Health Board for improving the local population's health and developing and delivering high-quality, safe and sustainable services to patients, and the implementation of change, are consistent with the Board's overall strategic direction and any requirements and standards set for NHS bodies in Wales.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s): <a href="#">Hyperlink to NHS Wales Health &amp; Care Standards</a>	5. Timely Care 3.1 Safe and Clinically Effective Care 2.1 Managing Risk and Promoting Health and Safety 7. Staff and Resources
Amcanion Strategol y BIP: UHB Strategic Objectives: <a href="#">Hyperlink to HDdUHB Strategic Objectives</a>	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners. 5. Deliver, as a minimum requirement, outcome and delivery framework work targets and specifically eliminate the need for unnecessary travel & waiting times, as well as return the organisation to a sound financial footing over the lifetime of this plan
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Statement</a>	Support people to live active, happy and healthy lives Improve Population Health through prevention and early intervention Develop a sustainable skilled workforce Improve efficiency and quality of services through collaboration with people, communities and partners

<b>Gwybodaeth Ychwanegol:</b> <b>Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Incorporated within the report
Rhestr Termau: Glossary of Terms:	Incorporated within the report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Cynllunio Pobl a Sicrwydd Perfformiad: Parties / Committees consulted prior to People Planning & Performance Assurance Committee:	Executive Team (24.02.2021)

<b>Effaith: (rhaid cwblhau)</b> <b>Impact: (must be completed)</b>
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<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	
<b>Gweithlu: Workforce:</b>	
<b>Risg: Risk:</b>	
<b>Cyfreithiol: Legal:</b>	
<b>Enw Da: Reputational:</b>	
<b>Gyfrinachedd: Privacy:</b>	
<b>Cydraddoldeb: Equality:</b>	



appx 1.

**WGH OPD ROOM USAGE**

ROOM USAGE	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		WEEKLY	WEEKLY
WGH	AM	PM	TOTAL	%								
F2F	8	10	11	12	8	10	8	10	6	12	95	41
F2F/VIRTUAL	6	4	5	5	7	6	7	6	9	2	57	25
VIRTUAL	2	2	0	1	1	0	1	0	0	0	7	3
VIRTUAL/WITH F2F	0	0	1	0	0	0	0	0	0	0	1	0
PHLEBOTOMY	1	1	1	1	1	1	1	1	1	1	10	4
ISOLATION ROOM	2	2	2	2	2	2	2	2	2	2	20	9
PRE ASSESSMENT	2	2	2	2	2	2	2	2	2	2	20	9
<b>TOTAL OPD ROOM USAGE</b>	<b>21</b>	<b>21</b>	<b>22</b>	<b>23</b>	<b>21</b>	<b>21</b>	<b>21</b>	<b>21</b>	<b>20</b>	<b>19</b>	<b>210</b>	<b>91</b>
OPD ROOM CAPACITY	23	23	23	23	23	23	23	23	23	23	230	
<b>AVAILABLE ROOMS FOR BOOKING</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>20</b>	<b>9</b>

**PPH OPD ROOM USAGE**

ROOM USAGE	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		WEEKLY	WEEKLY
PPH	AM	PM	TOTAL	%								
F2F	19	17	19	17	17	13	13	10	19	13	157	60
F2F/VIRTUAL	1	2	1	2	3	3	1	1	0	0	14	5
VIRTUAL	1	0	1	0	0		1	1	1		5	2
VIRTUAL/WITH F2F	0	2	0	2	0	3	2	2		4	15	6
ISOLATION	1	1	1	1	1	1	1	1	1	1	10	4
FRACTURE- NOT IN USE	3	3	3	3	3	3	3	3	3	3	30	12
<b>TOTAL OPD ROOM USAGE</b>	<b>25</b>	<b>25</b>	<b>25</b>	<b>25</b>	<b>24</b>	<b>23</b>	<b>21</b>	<b>18</b>	<b>24</b>	<b>21</b>	<b>231</b>	<b>89</b>
OPD ROOM CAPACITY	26	26	26	26	26	26	26	26	26	26	260	
<b>AVAILABLE ROOMS FOR BOOKING</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>5</b>	<b>8</b>	<b>2</b>	<b>5</b>	<b>29</b>	<b>11</b>

## GGH OPD ROOM USAGE

ROOM USAGE	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		WEEKLY	WEEKLY
GGH	AM	PM	TOTAL	%								
F2F	21	17	21	20	21	20	21	20	22	18	201	59
F2F/VIRTUAL	0	1	1	0	1	0	1	0		0	4	1
VIRTUAL	2	1	1	1	1	1	1	1	3	2	14	4
VIRTUAL/WITH F2F	0	3	0	0	0	0	0	0		2	5	1
ISOLATION	1	1	1	1	1	1	1	1	1	1	10	3
BRANWEN - RACE	3	3	3	3	3	3	3	3	3	3	30	9
MADOG - TYSUL	4	4	4	4	4	4	4	4	4	4	40	12
EARLY PREGNANCY ASSESS	1	1	1	1	1	1	1	1	1	1	10	3
<b>TOTAL OPD ROOM USAGE</b>	<b>32</b>	<b>31</b>	<b>32</b>	<b>30</b>	<b>32</b>	<b>30</b>	<b>32</b>	<b>30</b>	<b>34</b>	<b>31</b>	<b>314</b>	<b>92</b>
OPD ROOM CAPACITY	34	34	34	34	34	34	34	34	34	34	340	
<b>AVAILABLE ROOMS FOR BOOKING</b>	<b>2</b>	<b>3</b>	<b>2</b>	<b>4</b>	<b>2</b>	<b>4</b>	<b>2</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>26</b>	<b>8</b>

## BGH OPD ROOM USAGE

ROOM UTILISATION	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		WEEKLY	WEEKLY
BGH	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	TOTAL	%
F2F	6	3	3	3	5	1	5	2	4	7	39	43
F2F/VIRTUAL	1	1	2	1	1	0	1		1		8	9
VIRTUAL	0	1	2	0		1					4	4
VIRTUAL/WITH F2F	1	3	1	4	2	6	2	4	2	1	26	29
ISOLATION	1	1	1	1	1	1	1	1	1	1	10	11
<b>TOTAL OPD ROOM USAGE</b>	<b>9</b>	<b>9</b>	<b>9</b>	<b>9</b>	<b>9</b>	<b>9</b>	<b>9</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>87</b>	<b>97</b>
OPD ROOM CAPACITY	9	9	9	9	9	9	9	9	9	9	90	
<b>AVAILABLE ROOMS FOR BOOKING</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>3</b>

# WGH OPD CLINIC TIMETABLE

Room Name	Room Type	F2F	F2f with Virtual	Virtual with F2f	Virtual	Free	Equipment									
		Mon			Tue			Wed			Thu			Fri		
		AM	PM	EVE	AM	PM	EVE	AM	PM	EVE	AM	PM	EVE	AM	PM	EVE
<b>Withybush General Hosp &gt; Outpatients Dept &gt; New</b>																
New 01	Specialty	Plastics (4)	Gen Med		Gen Med	Paeds		Ophthalmology - AMD	Ophthalmology - AMD		Ophthalmology - AMD	Ophthalmology - AMD		Colorectal	Learning Disabilities	
	Consultant		Woodhouse		James	Naravan		Dr Fhafi	Dr Fhafi		Dr Fhafi	Dr Fhafi		Burns		
New 02	Specialty	Gastro	Cardiology		Heamatology (adhoc)	Heamatology		Genetics	Genetics		Diabetic Retinop	Diabetic Retinop		Derm Ops	Derm Ops	
	Consultant	Ali	Lance Forbut		Grubb	Kundu								Anthony Lorton	Anthony Lorton	
New 03	Specialty	Colorectal	Cardiology		CNS Respiratory	Care of the elderly		CNS Respiratory	CNS Respiratory		Dermatology	Dermatology		Derm Ops	Derm Ops	
	Consultant	Mathias	Lance Forbut		Sarah Hicks	Puffet		Sarah Hicks	Sarah Hicks		Anthony Lorton	Anthony Lorton		Anthony Lorton	Anthony Lorton	
New 04	Specialty	CNS Oncology	Gen Med		Gastro CNS (1,3)	Care of the elderly		Gen Med	Cardiology		Colorectal	Cardiology		RALC	Sexual Health	
	Consultant		Woodhouse		Kerri Johns	Puffet		Nagasayi	Lance Forbut		Burns	Anatoliotaxis				
	Specialty				Diet (2,4)											
	Consultant															
New 05	Specialty	CNS Diabetic	Gen Med		Gastro	Parkinsons (1,2)		Gen Surg	Cardiology		Colorectal	Cardiology		RALC	Sexual Health	
	Consultant		James		Ali	Nagasai		Nur	Lance Forbut		Umughele	Anatoliotaxis				
	Specialty					Stroke (3,4)										
	Consultant					Carlos Ag										
New 06	Specialty	CNS Respiratory	CNS Respiratory		Diet (alt)	Gastro		Colorectal	Research nurse		Diabetic nurse			CNS Diabetic	Sexual Health	
	Consultant	Sarah Hicks	Sarah Hicks			Haider		Dr.Aly								
	Specialty				(alt)											
	Consultant															
New 07	Specialty	Podiatry	Podiatry		Podiatry	Podiatry		Gastro CNS	Gastro		Gastro CNS	Pacing tbc		Podiatry	Podiatry	
	Consultant							Kerri Johns	Haider		Kerri Johns					
New 08	Specialty	CMAT	CMAT		Podiatry	Podiatry		CNS Respiratory	CNS Oncology		Diabetic Retinop	Diabetic Retino		CMAT	Isolation Room	
	Consultant															
New 09	Specialty	Isolation Room	Isolation Room		Isolation Room	Isolation room		Isolation Room	Isolation Room		Isolation Room	Isolation Room		Isolation Room	Sexual Health	
	Consultant															
New 10	Store Room	Equipment	Equipment		Equipment	Equipment		Equipment	Equipment		Equipment	Equipment		Equipment	Equipment	
New 11	Consultation	Phlebotomy	Phlebotomy		Phlebotomy	Phlebotomy		Phlebotomy	Phlebotomy		Phlebotomy	Phlebotomy		Phlebotomy	Phlebotomy	
New Eyes 01	Specialty					Ophthalmology										
	Consultant					Dr Rathod										
New Eyes 02	Specialty				OPTOM (1,2,3)	OPTOM										
	Consultant															
New Eyes 03	Specialty	Ophthalmology	LASER		Ophthalmology	Ophthalmology		Ophthalmology - AMD	Ophthalmology - AMD		Ophthalmology - AMD	Ophthalmology - AMD		Optic orbital	Optic orbital	
	Consultant	FUP 1,2,3,5,B4			Shafii	Shafii										

**(WGH CLINIC TIMETABLE CONTINUED)**

Withybush General Hosp > Outpatients Dept > Old															
Old 01	Consultation	Isolation Room	Isolation Room		Isolation Room	Isolation Room		Isolation Room	Isolation Room		Isolation Room	Isolation Room		Isolation Room	Isolation Room
Old 02	Consultation	Pre Assess	Pre Assess		Pre Assess	Pre Assess		Pre Assess	Pre Assess		Pre Assess	Pre Assess		Pre Assess	Pre Assess
Old 03	Consultation	Pre Assess	Pre Assess		Pre Assess	Pre Assess		Pre Assess	Pre Assess		Pre Assess	Pre Assess		Pre Assess	Pre Assess
Old 04	Specialty	ENT	ENT		CMAT	CMAT		Trauma	Urology		ENT	ENT		Trauma	CMAT
	Consultant								Shafii						
Old 05	Specialty	ENT	ENT		CMAT	CMAT		Ortho	Care of the elderly		ENT	ENT			
	Consultant							Desh	Davidson						
Old 06	Specialty	Trauma	Urology		Ortho	Ortho		Ortho	Care of the elderly		Ortho	Ortho		Ortho	Ortho
	Consultant		Saw		Isopescu	Isopescu		Yaqoob #	Davidson		Appan/Salam #	Yaqoob		Yaqoob #	Yaqoob #
Old 07	Specialty	Colorectal	Renal		Ortho	Ortho		Ortho	Ortho		Ortho	Rheumatology		Ortho	Ortho
	Consultant	Burns	Dr Williams		Isopescu	Isopescu		Desh	Yaqoob #		Appan/Salam #	Abdalaleem		Yaqoob #	Yaqoob #
Old 08	Store Room	CNS breast	CNS breast		CNS breast	CNS breast		CNS breast	CNS breast		CNS breast	CNS breast		CNS breast	CNS breast
Old 09	Specialty	Ortho	Ortho		Ortho	Ortho		Ortho	Ortho		Trauma	Ortho		Ortho	
	Consultant	Jewell #	Yaqoob		Desh	Appan/Salam		Yaqoob	Jewell			Appan/Salam		Desh #	
Old 10	Specialty	Ortho	Paeds		Ortho	Ortho		Breast	CNS Respiratory		Breast	Renal TBC		Ortho	Urology
	Consultant	Jewell #	Dr Naravan		Desh	Appan/Salam		Maxwell			Maxwell			Desh #	
Old 11	Specialty	Breast	Haematology		Trauma	Ortho		Breast	Breast		Breast	Ortho		Ortho	Peads (alt)
	Consultant	Maxwell	Grubb			Isopescu #		Maxwell	Maxwell		Maxwell	Salam		Jewell	Harries
	Specialty														(alt)
	Consultant														

# PPH OPD CLINIC TIMETABLE

Room Name	Room Type	F2F	F2f with Virtual	Virtual with F2f	Virtual	Free	Equipment									
		Mon			Tue			Wed			Thu			Fri		
		AM	PM	EVE	AM	PM	EVE	AM	PM	EVE	AM	PM	EVE	AM	PM	EVE
<b>Prince Philip Hospital &gt; Fracture Clinic &gt; Fracture Clinic</b>																
Fracture 01	Specialty	Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD	
	Consultant	Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD	
Fracture 02	Specialty	Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD	
	Consultant	Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD	
Fracture 03	Specialty	Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD	
	Consultant	Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD		Not currently under OPD	Not currently under OPD	
<b>Prince Philip Hospital &gt; Outpatient Dept &gt; Blue Suite</b>																
Blue 01	Specialty	Isolation Room	Isolation Room		Isolation Room	Isolation Room		Isolation Room	Isolation Room		Isolation Room	Isolation Room		RALC (Rapid Access Lung Clinic)	Isolation Room	
	Consultant													Dr Goshal		
Blue 02	Specialty	Ortho	Cariology		Respiratory	Endocrinology		Respiratory	Gastro		Respiratory	Nephrology (2,3)		RALC (Rapid Access Lung Clinic)	Gastro	
	Consultant	Mr Uppala	Avery		Dr Goshal	Dr Rice (occasional)		Dr Andrews	Dr Rees		Prof Lewis	Dr Shrivastava		Dr Goshal	Dr Rees	
	Specialty											(1,4)				
	Consultant															
Blue 03	Specialty	Rheumatology	Gastro		Respiratory	Ortho		Respiratory	Gastro		Respiratory	Gen Med - Care of the Elderly		RALC (Rapid Access Lung)	Gastro	
	Consultant	Dr Evans	Dr Rees		Dr Goshal	Mr Cnudde		Dr Andrews	Dr Rees		Prof Lewis	Dr Sheehan		Dr Goshal	Dr Rees	
Blue 04	Specialty	Rheumatology	Gastro		Rheumatology	Ortho		CNS Liver/BBV	Dietitian (2)		Plural Clinic	Gen Med - Care of the Elderly		Gastro	Respiratory Nurse	
	Consultant	Dr Prathapsingh	Dr Rees		Dr Prathapsingh	Mr Cnudde		Nicola Reeve			Dr Goshal	Dr Sheehan		Dr Rastall	Joe Annandale	
	Specialty															
	Consultant															
Blue 05	Specialty	Neuro	Fertility		Lipids (various weeks)	Rheumatology		Cardiology CNS	Ortho		Cardiology CNS	Othro		Isolation Room	CNS Liver/BBV	
	Consultant	Dr Amin	Dr Premkumar		SBU Drs	Dr Evans		Jenny Mathews	Mr Fanarof		Jenny Mathews	Mr Yate			Nicola Reeve	
Blue 06	Specialty	Cardiology CNS	Cardiology CNS		Rheumatology	Ortho (alt)		Cardiology CNS	Ortho					Dermatology CNS	Dermatology CNS	
	Consultant	Jenny Mathews	Sandra Philips		Dr Ijaz	Mr Nagrani		Jackie Philips	Mr Fanarof					Roz Jones	Roz Jones	
	Specialty					Ortho (alt)										
	Consultant					Mr Williams										

**(PPH OPD CLINIC TIMETABLE CONTINUED)**

Prince Philip Hospital > Outpatient Dept > Green Suite													
Green 01	Specialty		Dermatology	Pain				Haematology	Gastro		Ortho	Gynae	
	Consultant	Midwives		Dr Prasad	Midwives			Dr Fuge	Dr Rastall		Mr Cnudde		Midwives
Green 02	Specialty		Dermatology	Pain	Gynae	Gen Med - Care of the Elderly		Gen Med - Care of the Elderly	Gastro		CNS Liver/BBV	Gynae	
	Consultant	Midwives		Dr Prasad	Mr Abdelrahman	Dr Haden		Dr Morris	Dr Rastall		Nicola Reeve		Midwives
Green 03	Specialty		Ortho			Gen Med - Care of the Elderly		Gen Med - Care of the Elderly	Diabetics		Ortho	Pesary Clinic	
	Consultant	Midwives	Mr Bejada			Dr Haden		Dr Morris	Dr Mallipedhi		Mr Cnudde	Mixed Clinicians	Midwives
Green 04	Specialty	Ultrasound	Ultrasound			Ultrasound		Ultrasound	Ultrasound		Ultrasound	Ultrasound	Ultrasound
	Consultant												
Prince Philip Hospital > Outpatient Dept > Red Suite													
Red 01	Specialty	Dermatology	Rheumatology	Dermatology	Neuro	Dermatology		Neuro	Urology	Dermatology	Urology	Urology	Vascular
	Consultant	Mixed Clinician	Dr Ijaz	Mixed Clinician	Dr Amin	Mixed Clinician		Dr Amin	Mixed Clinician	Mixed Clinician	Mixed Clinician	Mixed Clinician	Mixed Clinician
Red 02	Specialty	Dermatology	Dermatology	Dermatology	Dermatology	Dermatology		Dermatology	Urology	Dermatology	Urology	Urology	Vascular
	Consultant	Mixed Clinician	Mixed Clinician	Mixed Clinician	Mixed Clinician	Mixed Clinician		Mixed Clinician	Mixed Clinician	Mixed Clinician	Mixed Clinician	Mixed Clinician	Mixed Clinician
Red 03	Specialty	Dermatology	Dermatology	Dermatology	Dermatology	Dermatology		Dermatology	Dermatology	Dermatology			Vascular
	Consultant	Mixed Clinician	Mixed Clinician	Mixed Clinician	Mixed Clinician	Mixed Clinician		Mixed Clinician	Mixed Clinician	Mixed Clinician			Mixed Clinician
Red 04	Specialty	Dermatology	Dermatology		Ortho	Ortho		Ortho (alt)				Ortho	Ortho
	Consultant	Mixed Clinician	Mixed Clinician		Mr Evans	Mr Uppla		Mr Bejada				Mr Nagrani	Mr Richards
	Specialty							(alt)					
	Consultant												
Treatment Room	Specialty	Derm Minor Ops	Derm Minor Ops		Derm Minor Ops	Derm Minor Ops		Derm Minor Ops	Derm Minor Ops		Plural Clinic		Vascular
	Consultant	Mixed Clinician	Mixed Clinician		Mixed Clinician	Mixed Clinician		Mixed Clinician	Mixed Clinician		Dr Goshal		Mixed Clinician
Prince Philip Hospital > Outpatient Dept > Yellow Suite													
Yellow 01	Specialty	ENT	ENT		Botox (2)			ENT	ENT		FFA(1,3,5)		Dermatology
	Consultant	Mr Jones	Mr Jones		Mr Jenkins			Mr Jaramillo	Mr Jaramillo		Miss Skiadaresi		Mixed Clinician
	Specialty				(1,3,4,5)						(2,4)		
	Consultant												
Yellow 02	Specialty	ENT	ENT		Visions	Visions		ENT	ENT				Surgical (various)
	Consultant	Mr Jones	Mr Jones		Mr Jenkins	Mr Jenkins		Mr Jaramillo	Mr Jaramillo				Mr Rao
Yellow 03	Specialty	Visions	Visions		Ophthalmology	Contact Lense (2,4)					Visions	Visions	Visions
	Consultant	Mr Doshi	Mr Doshi		Mr Doshi	Mixed Clinician					Miss Skiadaresi	Miss Skiadaresi	Miss Seow
	Specialty					(1,3)							Mr Doshi
	Consultant												
Yellow 04	Specialty	Ophthalmology	Ophthalmology		Ophthalmology	Ophthalmology		Visions	Visions		FFA(1,3,5)	Ophthalmology	Ophthalmology
	Consultant	Mr Doshi	Mr Doshi		Mr Jenkins	Mr Jenkins		Miss Skiadaresi	Miss Skiadaresi		Miss Skiadaresi	Miss Skiadaresi	Miss Seow
	Specialty										Laser (2,4)		
	Consultant										Mixed Clinician		
Yellow 05	Specialty	Ophthalmology	Ophthalmology		Ophthalmology	Ophthalmology		Ophthalmology	Ophthalmology				Ophthalmology
	Consultant	Mr Doshi	Mr Doshi		Mr Jenkins	Mr Jenkins		Miss Skiadaresi	Miss Skiadaresi				Optometrist
Yellow Laser	Specialty				Ophthalmology	Ophthalmology					Laser (2,4)		
	Consultant				Mr Jenkins	Mr Jenkins					Mixed Clinician		
Yellow Microscope	Specialty	ENT	ENT					ENT	ENT				
	Consultant	Mr Jones	Mr Jones					Mr Jaramillo	Mr Jaramillo				
Yellow Orthoptist	Specialty	Orthoptic - Paeds	Orthoptic - Paeds		Ophthalmology	Ophthalmology		Orthoptic - Paeds	Orthoptic - Paeds		Ophthalmology	Ophthalmology	Orthoptic - Paeds
	Consultant	Mr Rathod	Mr Rathod		Orthoptist	Orthoptist		Mr Rathod	Mr Rathod		Orthoptist	Orthoptist	Miss Seow

# GGH OPD CLINIC TIMETABLE

Room Name	Room Type	F2F	F2f with Virtual	Virtual with F2f	Virtual	Free	Equipment									
		Mon			Tue			Wed			Thu			Fri		
		AM	PM	EVE	AM	PM	EVE	AM	PM	EVE	AM	PM	EVE	AM	PM	EVE
<b>Glangwili General Hosp &gt; Branwen Suite &gt; Branwen</b>																
Branwen 01	Specialty	RACE	RACE		RACE	RACE		RACE	RACE		RACE	RACE		RACE	RACE	
	Consultant															
Branwen 02	Specialty	RACE	RACE		RACE	RACE		RACE	RACE		RACE	RACE		RACE	RACE	
	Consultant															
Branwen 03	Specialty	RACE	RACE		RACE	RACE		RACE	RACE		RACE	RACE		RACE	RACE	
	Consultant															
<b>Glangwili General Hosp &gt; Madog Suite &gt; Madog</b>																
Madog 01	Specialty	Tysul	Tysul		Tysul	Tysul		Tysul	Tysul		Tysul	Tysul		Tysul	Tysul	
	Consultant															
Madog 02	Specialty	Tysul	Tysul		Tysul	Tysul		Tysul	Tysul		Tysul	Tysul		Tysul	Tysul	
	Consultant															
Madog 03	Specialty	Tysul	Tysul		Tysul	Tysul		Tysul	Tysul		Tysul	Tysul		Tysul	Tysul	
	Consultant															
Madog 04	Specialty	Tysul	Tysul		Tysul	Tysul		Tysul	Tysul		Tysul	Tysul		Tysul	Tysul	
	Consultant															
<b>Glangwili General Hosp &gt; Outpatient Dept &gt; Blue Suite</b>																
Blue 01	Specialty	Visions	Visions		Visions	Visions		Visions	Gastro		Visions	Visions		Visions	Visions	
	Consultant								Mr Kumar							
Blue 02	Specialty	Ophthalmology	Ophthalmology			Ophthalmology		Ophthalmology	Gastro		Ophthalmology	Ophthalmology		Ophthalmology	Ophthalmology	
	Consultant	Mr Devarajan	Mr Devarajan			Mr Cheema		Mr Jenkins	Mr Kumar		Mr Cheema	Mr Cheema		Mr Cheema	Mr Cheema	
Blue 03	Specialty	Orthoptist	Orthoptist		Orthoptist	Ophthalmology		Ophthalmology	Gastro		Laser Clinic	Laser Clinic		Ophthalmology	Low Visual Aid	
	Consultant					Mr Cheema		Mr Jenkins	Mr Kumar					Mr Cheema		
Blue 04	Specialty	Laser Room	Laser Room		Laser Room	Laser Room		Laser Room	Laser Room		Laser Room	Laser Room		Laser Room	Laser Room	
	Consultant															
Blue 05	Specialty		Dietetics		Ophthalmology	Ophthalmology		Ophthalmology			Ophthalmology	Ophthalmology		Ophthalmology	Ophthalmology	
	Consultant				Mr Rathod	Mr Cheema		Mr Jenkins			Mr Cheema	Mr Cheema		Mr Cheema	Mr Cheema	
Blue Treatment Room	Specialty							B Scan	OPD					Botox (4th)		
	Consultant								Nurses							
OPH Tech	Specialty	OPH Tech	OPH Tech		OPH Tech	OPH Tech		OPH Tech	OPH Tech		OPH Tech	OPH Tech		OPH Tech	OPH Tech	
	Consultant															

**(GGH OPD CLINIC TIMETABLE CONTINUED)**

Glangwili General Hosp > Outpatient Dept > Green Suite														
Green 01	Specialty	CNS (2nd, 4th)	Stroke/ General Medicine		Fracture	Ortho (alt)		Fracture	Ortho		Fracture	Stroke/ General Medicine	Fracture	
	Consultant	Burns	Sridhar			Mr Fanarof			Michelle Gerrard-Wilson			Sridhar		
	Specialty	(1, 3)				(alt)								
Green 02	Specialty	Fracture	Podiatry		Fracture	Neuro		Fracture	Gen Med - Care of the Elderly		Shoulder Post Op	Podiatry	Fracture	Neuro CNS (MS CNS)
	Consultant								A Gupta					
Green 04	Specialty	Podiatry	Podiatry		Fracture			Fracture	TOP		Fracture		Fracture	
	Consultant													
Green 05	Specialty	Urology CNS	Urology CNS		Urology CNS	Gastro		Fracture	Gen Med - Care of the Elderly		TRUS	TRUS	TRUS	TRUS
	Consultant					Dr Bowen			A Gupta					
Green 06	Specialty	Colorectal	Neuro		Fracture	Gastro		Fracture	Orthopaedics		Fracture		Fracture	Plastics (1,3)
	Consultant					Dr Bowen			Mr Williams					Duncan (1) Cubitt (3)
	Specialty													(2,4)
Green 07	Specialty	Colorectal	Neuro		Fracture	Gastro		Fracture	Neuro		Fracture	Dieticians	Fracture	Plastics (1,3)
	Consultant					Dr Bowen								Duncan (1) Cubitt (3)
	Specialty													(2,4)
Glangwili General Hosp > Outpatient Dept > Red Suite														
Red 02	Specialty	AGP	AGP		AGP	AGP		AGP	AGP		AGP	AGP	AGP	AGP
	Consultant	Mr Prabhu	Mr Prabhu		Mr Howarth	Mr Howarth		Mr Jones	Mr Jones		Mr Jara	Mr Jara	Mr Volpini	Mr Volpini
Red 03	Specialty	AGP	AGP		AGP	AGP		AGP	AGP		AGP	AGP	AGP	AGP
	Consultant													
Red 04	Specialty	CONS RM	CONS RM		CONS RM	CONS RM		CONS RM	CONS RM		CONS RM	CONS RM	CONS RM	CONS RM
	Consultant													
Red Microscope Room	Specialty	Microscope	Microscope		Microscope	Microscope		Microscope	Microscope		Microscope	Microscope	Microscope	Microscope
	Consultant													
Prince Philip Hospital > Outpatient Dept > Yellow Suite														
Minor Op Room	Specialty	Urology CNS	Urology CNS		Urology CNS	Urology CNS		Urology CNS	Urology CNS		TRUS Biopsies	TRUS Biopsies	TRUS Biopsies	TRUS Biopsies
	Consultant													
Yellow 01	Specialty	Isolation Room	SALT - AGP		Isolation Room	Isolation Room		Isolation Room	Isolation Room		Isolation Room	Isolation Room	Isolation Room	Isolation Room
	Consultant			Mr Harries										
Yellow 02	Store Room	Vascular			Urology	Urology		Vascular	Urology		Gastro		General Surgery	Fibroscan
		Mixed Clinicians			Mixed Clinicians	Mixed Clinicians		Mixed Clinicians	Mixed Clinicians		Dr Rees		Mr O'Riordan	
Yellow 03	Specialty	Plastics (2,3)			General Surgery	General Surgery		Ortho (alt)	Ortho - Shoulder		CRECT	Colorectal Gen Surgery	Colorectal (alt)	MS CNS
	Consultant	Miss Hemmington-Gorse (2) Mr Salamt (3)			Allie Martin	Mr Dias		Mr Uppala	Andy Morgan		MDT	Mr Mohamed	Mr Rao	
	Specialty	Haematology (1,4,5)						Lipid (alt)						
Yellow 04	Specialty	EPAU	EPAU		EPAU	EPAU		EPAU	EPAU		EPAU	EPAU	EPAU	EPAU
	Consultant													
Yellow 05	Specialty	Urology Scans	Urology Scans		Renal			Ortho - Shoulder	Ortho - Shoulder		CRECT		Dermatology CNS	TRUS TEMP
	Consultant							Andy Morgan/ Owen Enis	Owen Enis		MDT		TRUS TEMP	
Yellow 06	Specialty	Urology	Urology		Renal			Physio - Shoulder	Ortho - Shoulder		CRECT		Continence CNS	Gynae
	Consultant	Mixed Clinicians	Mixed Clinicians						Gareth Jones		MDT			Dr Premkumar
Yellow 07	Specialty	Oncology	Gastro		Plastics	Plastics			Physio - Shoulder		Gyne	Gyne - RAC	(alt)	Gynae
	Consultant	Dr Nicholas	Dr Rastall					Dr Durrant			Dr Goel		Mr Harris	Dr Premkumar
	Specialty												(alt)	
Yellow 08	Specialty	Vascular	Gyne		Ortho (alt)	Urology Tests/ Scans		Vascular	Urology		Pessary Clinic - Gyne		Endocrinology	Gastro
	Consultant	Mixed Clinicians	Mr Shankar		Mr Yate			Mixed Clinicians	Mixed Clinicians		Nurse led		Mr Egan	Mr Kumar
Yellow 09	Specialty	Vascular	Gyne		Urology Scans	Urology		Vascular	Urology Scans		Gastro CNS		Upper GI Specialist	Gastro
	Consultant	SBU Mixed Clinicians	Mr Shankar			Mixed Clinicians		SBU Mixed Clinicians			Dr Rees		Michelle Thompson	Mr Kumar

# BGH OPD CLINIC TIMETABLE

Room Name	Room Type	F2F	F2f with Virtual	Virtual with F2f	Virtual	Free	Equipment									
		AM	PM	EVE	AM	PM	EVE	AM	PM	EVE	AM	PM	EVE	AM	PM	EVE
Bronglais General Hospital > Outpatient Dept > BGH																
Room 01	Specialty	Lymphodema (1)	Respiratory CNS (1, 3)		Endocrinology	Movement Disorder		Oncology	Respiratory		Ortho (injection)	Gastro		Diabetes	Cardiology	
	Consultant	Andrea Graham	Angharad Howels		Dr Zubair	(2,4) Dr Shehan		Dr E Jones / CNS	Dr Hatashi		Mixed Clinician	Dr Narain		Dr Zubair	Gwen Parry (ANP)	
	Specialty	Vascular (2)	Vascular (2)			(1, 3) Movement Disorder										
	Consultant					Tish Bird										
	Specialty	Orthoptics (4)	Orthoptics (4)			(5)										
	Consultant	Howard Whitfield	Howard Whitfield													
	Specialty	(1,2,3,5)	(1,2,3,5)													
	Consultant															
Room 02	Specialty	Cardiology	Cardiology		Cardiology	Gastro		New Born Screening (1,3,5)	Gastro (1)		Cardiology	Cardiology (alt)		Cardiology	Cardiology	
	Consultant	Dr Raisova	Mixed Clinicians		Dr Joseph	Dr Narain			Dr Narain		Gwen Parry (ANP)	Dr Joseph		Mr McKeogh	Mixed Clinicians	
	Specialty							Urology (2,4)	Haematology CNS (2,3,4,5)			(alt)				
	Consultant															
Room 03	Specialty	Isolation Room	Isolation Room		Isolation Room	Isolation Room		Isolation Room	Isolation Room		Isolation Room	Isolation Room		Isolation Room	Isolation Room	
	Consultant															
Room 04	Specialty	Pre Op	RASC		RASC (9-10am)	Gastro		RASC	Bone Health		RASC (9-10am)	Renal (4)		RASC	MS CNS (2)	
	Consultant	Mr Omar	Clare Bryant		Dr Raza	Dr Narain		Dr Raza	Dr Thompson		Dr Raza	Dr Marks		Clare Bryant	Dr Pearson / B Conway (CNS)	
	Specialty				(10 - 1) Movement (1,3) Tish Bird (2,4) Dr Shehan							(1,2,3,5)			(1,3,4,5)	
	Consultant															
	Specialty				Ortho (5)											
	Consultant				Dr Elabadi											
Room 05	Specialty	Lymphodema (1)	Respiratory		Respiratory/ Stroke/ RALC	Respiratory/ Stroke/ RALC		Orthoptics (1,3,4,5)	Orthoptics (1,3,4,5)		Haematology	Diabetic CNS		Podiatry ?	BBV CNS	
	Consultant	Andrea Graham	Dr Hatashe		Dr Hatashe	Dr Hatashe		Howard Whitfield	Howard Whitfield		Gravel CNS	CNS Nurse			Donna Blinston	
	Specialty	Vascular (2)						Renal (2)	(2)							
	Consultant							Dr Marks								
	Specialty	(3, 4, 5)														
	Consultant															
Room 06	Specialty	BBV CNS	Gastro		Gen Surgery	Gynae		Pre Op	Haematology		Haematology	Colorectal		Gen Surgical (alt)	Ortho Pre Op	
	Consultant	Donna Blinston	? Locum		Mr Sallami	Mr Awad		Mr El Abbadi	Dr Cumber		Dr Cumber	Mr Sebastiani		Mr Galil	Mr Sonanis	
	Specialty													Colorectal (alt)		
	Consultant													Mr Sebastiani		
Room 07	Specialty	INR	Fracture		Endocrinology	Fracture		INR	Fracture		Renal (1, 3, 4)	Fracture		Diabetes	Bone Health (alt)	
	Consultant	Wendy Jones	Mr Sonanis		Dr Zubair	Mr El Abbadi		Wendy Jones	Mr Omar		Mr Marks	Mixed Clinicians		Dr Zubair	Dr Thompson	
	Specialty										(2, 5)				(alt)	
	Consultant															
Room 08	Specialty	Ortho	Fracture		Ortho	Fracture		Ortho	Fracture		Ortho (injection)	Fracture		Cardio CNS	Cardio CNS	
	Consultant	Mr Sonanis	Mr Sonanis		Mr El Abbadi	Mr El Abbadi		Mr Omar	Mr Omar		Mixed Clinician	Mixed Clinicians		Claire Marshal	Claire Marshal	
Room 09	Specialty	(9-10) Hot slots 10 athroplasty	Fracture Plaster Room		(9-10) Hot slots 10 athroplasty	Fracture		(9-10) Hot slots 10 athroplasty	Fracture		(9-10) Hot slots 10 athroplasty	Fracture		(9-10) Hot slots	Plaster Tech	
	Consultant	Karen Lucas	Mr Sonanis		Karen Lucas	Mr El Abbadi		Karen Lucas	Mr Omar		Karen Lucas	Mixed Clinicians		MS CNS (2) B Conway		

Theatres all sites  
appx 2.

PRE COVID

		NON ELECTIVE - NCEPOD TRAUMA NOT FUNDED														
			Monday		Tuesday		Wednesday		Thursday		Friday		PRE COVID PATIENT FLOW	Normal funded and assigned sessions	ELECTIVE Sessions - excluding Obstetrics	
Site	Room	Details / Other roles	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM				
GGH	Theatre 1	Urology			Colorectal								Urology: Derwin 26 Beds. (Elective and Emergency)	78	50 + 3 Cardiology	
GGH	Theatre 2	ENT / Head and Neck											ENT: Merlin 14 Beds. (Elective and Emergency)			
GGH	Theatre 3	24/7 Trauma											MIXED locations - specialty dependent			
GGH	Theatre 4	NCEPOD														
GGH	Theatre 6	Gynae AM / Obstetric electives PM	GYN	Obs	GYN	Obs	GYN	Obs	GYN	Obs	GYN	Obs	Gynae: Picton 10 beds (Elective and Emergency)			
GGH	Obstetric Theatre	Single use only - 24/7 Obstetric emergencies	24/7 oncall and STAFFED - sessions not included in count													
GGH	Theatre 5	Ophthalmology											Tysul - day flow			
GGH	Preseli	GenSurg / Colorectal											Colorectal / GenSurg: Preseli 22 beds (Elective and Emergency)			
GGH	DSU theatre	Multi specialty				Cardioversion	Pacing					Pacing	DSU x 6 trolleys			
PPH	Theatre 1	Urology/Breast/ GenSurg											Ward 7 / Peony: ? 20 beds			57
PPH	Theatre 2	Urology/Breast/ GenSurg														
PPH	Theatre 3	Orthopaedic												Ward 6: 22 beds		
PPH	Theatre 4	Orthopaedic												DSU x 5 trolleys		
AV	DSU EYES	Stand alone location - IVT focus												DSU AVH		
WGH	Theatre 1	NCEPOD/Trauma											MIXED locations - specialty dependent - Ward 1 / Ward 4 (SAU)	56.25	46.25	
WGH	Theatre 2	Orthopaedics and TRAUMA		TRAUMA		TRAUMA		TRAUMA				TRAUMA	Ward 1: 24 to 28 beds			
WGH	Theatre 3	Gen Surg / Colorectal / Gynae											Ward 3: 24 to 28 beds			
WGH	Theatre 4	Gen Surg / Colorectal / Gynae											DSU x 11 trolleys			
WGH	DSU 1	GenSurg / Breast / Ortho														
WGH	DSU 2 - LAs only	IVT / Ortho injections / Flexi Cyst														
BGH	Theatre 1	Orthopaedics & Elective LSCS (Fri AM)										Obs	Ceredig 28 beds (Elective and Emergency)	30 + 1 x Cardiology	19 + 1 x Cardiology	
BGH	Theatre 2	NCEPOD/Trauma											Ceredig			
BGH	DSU 1	Gen Surg / Colorectal / Gynae											Day case via DSU / Ceredig 28 beds (Elective and Emergency)			
BGH	DSU 2	Gen Surg / Colorectal / Gynae / Cardiology							Pacing				/ Gynae: Rhiannon 10 beds			
BGH	DSU 3	Elective Ophthalmology											Day flow			

# THEATRE AVAILABILITY TO END APRIL 2021

		ELECTIVE - Staffed and open																			
		CLOSED - ALTERNATE USE - COVID RELATED																			
		CLOSED - CANNOT STAFF																			
		STAFFED and OPEN from W/C 6 APRIL 2021																			
		NON ELECTIVE - NCEPOD TRAUMA / Elective Obstetrics																			
		NOT FUNDED																			
				Monday		Tuesday		Wednesday		Thursday		Friday		PATIENT FLOW	Average Elective patient numbers per week	Normal funded and assigned sessions	ELECTIVE - In use as of 6th April 2021 excluding Obstetrics	Estimated patient numbers per week			
Site	Room	In use	Details / Other roles	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM								
GGH	Theatre 1	Yes	Non clinical - Staff Rest and store room	CLOSED																	
GGH	Theatre 2	Yes	Monday-Friday											Tysul: Up to 10 beds							
GGH	Theatre 3	Yes	24/7 Trauma																		
GGH	Theatre 4	Yes	NCEPOD											MIXED locations - specialty dependent							
GGH	Theatre 6	Yes	Obstetric electives pm AND 2nd Obsteric Emergency Theatre		Obs	Urology	Obs		Obs		Obs		Obs	Maternity / Urology to Tysul	2	78	19				
GGH	Obstetric Theatre	Yes	Single use only - 24/7 Obstetric emergencies	24/7 oncall and STAFFED - sessions not included in count										Maternity							
GGH	Theatre 5	Yes	Ophthalmic - Monday and Thursday		Eyes						Eyes			Madog / Tysul	12						
GGH	Preseli	No	Non Clinical - Currently PADARN - COVID +ve medicine	CLOSED																	
GGH	DSU theatre	Yes	Fridays Lythotripsy			TWOC	Cardiover	Pacing					Pacing	DSU WARD - 4 spaces							
PPH	Theatre 1	No																			
PPH	Theatre 2	Yes	Urology/Breast/ Colorectal - Monday to Friday											Ward 7: Up to 14 beds							
PPH	Theatre 3	No		Orthopaedics										Ward 6: 10 beds							
PPH	Theatre 4	No	Non Clinical - Store room and some time staff room	CLOSED																	
PPH	DSU theatre	Yes	Endoscopy	Endoscopy patient flow																	
AV	DSU EYES	Yes	Stand alone location - IVT focus											Day Surgery Unit Amman Valley							
WGH	Theatre 1	Yes	NCEPOD/Trauma																		
WGH	Theatre 2	Yes	Trauma x 3 afternoons		TRAUMA				TRAUMA					TRAUMA	MIXED locations - specialty dependent						
WGH	Theatre 3	No	Green pathway	USC	USC			USC	USC			USC	USC	Ward 4: 6 beds (2 SR and 1x 4-bed bay)							
WGH	Theatre 4	No	Non Clinical 2nd Staff room and Main 3 Recovery - green pathway	CLOSED																	
WGH	DSU 1	Yes	Flexi Cystcopy USC pathway to end of April											DSU WARD - 7 spaces							
WGH	DSU 2 - LAs only	No	CANNOT OPEN - DSU reduced chair and bed base																		
BGH	Theatre 1	Yes	Elective LSCS										Obs	Maternity							
BGH	Theatre 2	Yes	NCEPOD/Trauma											Ceredig							
BGH	DSU 1	Yes	Elective USC Surgery											Day Surgery: 7 spaces Rhiannon: Up to 8-beds	10	30+1 x Cardiology	12+1 Cardiology				
BGH	DSU 2	Yes	Elective USC Surgery & Cardiology							Cardiology											
BGH	DSU 3	Yes	Non Clinical - Temporary store- Critical Care/Hotel Services/Clinical Engineering							Cataracts	Cataracts			DSU 3	6						
W/Dale	Theatre 1		Elective Orthopaedics / Urology / General Surgery	IN MONTH:		15 urology							Ortho: 23Apr21 only	Werndale bed / chair flow							
	Theatre 2		Elective Cataracts	IN MONTH:		150 Cataracts															

# THEATRE AVAILABILITY TO END MAY 2021

			ELECTIVE - Staffed and open																
			CLOSED - ALTERNATE USE - COVID RELATED																
			CLOSED - CANNOT STAFF																
			Assessing staff for OPENING from W/C 4May21																
			NON ELECTIVE - NCEPOD TRAUMA / Elective Obstetrics																
			NOT FUNDED																
				Monday	Tuesday	Wednesday	Thursday	Friday	PATIENT FLOW				Normal funded and assigned sessions	ELECTIVE - In use as of 4th May 2021 if AMBER staffed excluding Obstetrics	Estimated patient numbers per week if AMBER staffed				
Site	Room	In use	Details / Other roles	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM						
GGH	Theatre 1	Yes	Non clinical - Staff Rest and store room	CLOSED															
GGH	Theatre 2	Yes	Monday-Friday											78	23	ENT/H&N: 4 Colorectal: 3 Urology: 9 (inc Tues AM MG)  Eyes: 16 - 18 - procedure dependent GenSurg: 4 Pain: 6			
GGH	Theatre 3	Yes	24/7 Trauma																
GGH	Theatre 4	Yes	NCEPOD																
GGH	Theatre 6	Yes	Obstetric electives pm AND 2nd Obsteric Emergency Theatre		Obs	Urology	Obs		Obs		Obs		Obs						
GGH	Obstetric Theatre	Yes	Single use only - 24/7 Obstetric emergencies	24/7 oncall and STAFFED - sessions not included in count															
GGH	Theatre 5	Yes	Ophthalmic - Monday and Thursday																
GGH	Preseili	No	Non Clinical - Currently PADARN - COVID +ve medicine	CLOSED															
GGH	DSU theatre	Yes	Fridays Lythotrpsy			TWOC	Cardiover	Pacing	?GenSurg			Pacing	?PAIN	DSU WARD - 4 spaces					
PPH	Theatre 1	No												57	30 inc AV	Colorectal: 4 Urology: 4 Ortho: 10 - 12 - procedure dependent Breast: 6 - 8			
PPH	Theatre 2	Yes	Urology/Breast/ Colorectal - Monday to Friday																
PPH	Theatre 3	No	Orthopaedic																
PPH	Theatre 4	No	Non Clinical - Store room and some time staff room	CLOSED															
PPH	DSU theatre	Yes	Endoscopy	Endoscopy patient flow															
AV	DSU EYES	Yes	Stand alone location - IVT focus											Day Surgery Unit Amman Valley					
WGH	Theatre 1	Yes	NCEPOD/Trauma											56.25	20	Colorectal: 4 Breast: 2  Gynae: 4 - 6 Ortho: TBC Urology: 42 GenSurg: 8			
WGH	Theatre 2	Yes	Orthopaedics and TRAUMA		TRAUMA				TRAUMA				TRAUMA						
WGH	Theatre 3	No	Gen Surg / Colorectal / Gynae / Ortho																
WGH	Theatre 4	No	Non Clinical 2nd Staff room and Main 3 Recovery - green pathway	CLOSED															
WGH	DSU 1	Yes	FlexiCyst and GenSurg																
WGH	DSU 2 - LAs only	No	CANNOT OPEN - DSU reduced chair and bed base																
BGH	Theatre 1	Yes	Orthopaedics & Elective LSCS (Fri AM)										Obs	30 + 1 x Cardiology	14 + 1 x Cardiology	Colorectal: 3 Breast: 2 Gynae: 4 - 6			
BGH	Theatre 2	Yes	NCEPOD/Trauma																
BGH	DSU 1	Yes	Gen Surg / Colorectal / Gynae											Day Surgery: 7 spaces					
BGH	DSU 2	Yes	Unfunded						Cardiology					Rhiannon: Up to 8-beds					
BGH	DSU 3	Yes	Elective Ophthalmology						Cataracts	Cataracts				DSU 3		EYES: 8-10 - procedure dependent			
W/Dale	Theatre 1		Elective Orthopaedics / Urology / General Surgery	IN MONTH: 25 Joints		40 GenSurg						Wemdale bed / chair flow							
	Theatre 2		Elective Cataracts	IN MONTH: 150 Cataracts															

appx 3. – THEATRE AVAILABILITY AT 6 SEP 21 | ASSUMES NO SOCIAL DISTANCING APPLIED WITHIN THEATRES

		ELECTIVE - Staffed and open																
		CLOSED - ALTERNATE USE - COVID RELATED																
		NON ELECTIVE - NCEPOD TRAUMA																
		NOT FUNDED																
			Monday		Tuesday		Wednesday		Thursday		Friday		PATIENT FLOW	Normal funded and assigned sessions	ELECTIVE SESSIONS (excluding Obstetrics) in use as of 6th Sept 2021	Estimated patient numbers per week - assumes all staffed and social distancing rules are relaxed		
Site	Room	Details / Other roles	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM						
GGH	Theatre 1	Urology			Colorectal								Preseli x 22 beds	78	55	Urology: 12		
GGH	Theatre 2	ENT / Head and Neck															ENT/ H&N: 18 - 20 - procedure dependent (inc DSU)	
GGH	Theatre 3	24/7 Trauma															Colorectal: 6	
GGH	Theatre 4	NCEPOD															GenSurg: 16-20 (inc DSU)	
GGH	Theatre 6	Gynae AM / Obstetric electives PM	GYN	Obs	GYN	Obs	GYN	Obs	GYN	Obs	GYN	Obs	Gynae: ?? Preseli x 22 beds					Orthopaedic: 6 (DSU)
GGH	Obstetric Theatre	Single use only - 24/7 Obstetric emergencies	24/7 oncall and STAFFED - sessions not included in count										Maternity					
GGH	Theatre 5	Ophthalmic - Monday and Thursday											Tysul					Eyes: 20-24 - procedure dependent
GGH	Preseli	GenSurg / Colorectal											Preseli x 22 beds					
GGH	DSU theatre	Fridays Lythotripsy					Cardiover	Pacing				Pacing	DSU WARD - 6 spaces					Pain: 12 (DSU)
PPH	Theatre 1	Urology/Breast/ GenSurg											Ward 7: TBC			47 (DSU moved to Demountable*)	47	Breast: 10 - 14
PPH	Theatre 2	Urology/Breast/ GenSurg													Urology: 6			
PPH	Theatre 3	Orthopaedic													Ortho: 15 joints / 20 other - procedure dependent			
PPH	Theatre 4	Orthopaedic													GenSurg: 15 - procedure dependent			
PPH	DSU theatre	Endoscopy	Endoscopy patient flow												Pain: 6			
AV	DSU EYES	Stand alone location - IVT focus											Day Surgery Unit Amman Valley					
PPH	DSU 1	NEW! Demountable - Activity moved from PPH DSU											DSU x 12	10*	10	GenSurg: 14 Gynae: 5 Urol: 5		
PPH	DSU 2	NEW! Demountable											Funding required					Pain: 6 Ortholnj: 12
WGH	Theatre 1	NCEPOD											MIXED locations - specialty dependent	56.25	42.25	Colorectal: 5		
WGH	Theatre 2	Orthopaedics and TRAUMA		TRAUMA		TRAUMA		TRAUMA				TRAUMA	Ward 1: TBC					Breast: 4
WGH	Theatre 3	Gen Surg / Colorectal / Gynae / Ortho											Ward 3: TBC					Gynae: 8 - 10 - procedure dependent
WGH	Theatre 4	Gen Surg / Colorectal / Gynae																Orthopaedics: 18 - 22 - procedure dependent (inc DSU)
WGH	DSU 1	Flexi Cystocpy USC pathway to end of April											DSU WARD - 7 spaces					GenSurg: 12 - 15 procedure dependent (inc DSU)
WGH	DSU 2 - LAs only	IVT / Ortho injections / Flexi Cyst																Urology: 28 Ortholnj: 12 IVT: 14
BGH	Theatre 1	Orthopaedics & Elective LSCS (Fri AM)										Obs	Ceredig: TBC	30 + 1 x Cardiology	20 + 1 Cardiology	Orthopaedics: 9 - procedure dependent		
BGH	Theatre 2	NCEPOD/Trauma											Ceredig					Breast: 2 GenSurg: 6
BGH	DSU 1	Gen Surg / Colorectal / Gynae											Day Surgery: 7 spaces					Gynae: 4-6 Colorectal: 3-4 Urol: 2
BGH	DSU 2	Unfunded							Pacing				Rhiannon: TBC					
BGH	DSU 3	Elective Ophthalmology											DSU 3					EYES: 20 - 22 - procedure dependent
W/Dale	Theatre 1	Elective Orthopaedics / Urology / General Surgery	IN MONTH:		TBC								Wendale bed / chair flow					
	Theatre 2	Elective Cataracts	IN MONTH:		TBC													

## appx.4 Overall Forecast

**( IF RECOVERABLE WITHIN ONE MONTH NO FIGURE NOTED )NB THIS DOES NOT INCLUDE STAGE 1 CONVERSION DEMAND**

	Referral rate %	Stage 1 waits	urgent/routine/ Blanks	Stage 1 capacity (per wk)	Composition of clinics		Diagnostic capacity	Conversion Rate	Stage 4 waits	urgent/routine/ blanks	Stage 4 capacity (per week/No: pts)	Lists required (urgent backlog only)	Projected date to recover urgent backlog ONLY	
		(total)			F2F/Virtual	Stage 2 & 3			(total)					
100 - General Surgery	86 av per week- 26% urgent/USC	2491	459/1878/154		100% virtual	928		28%	1896	459/1263/138		2 lists-16pts	14 lists	7 wks
101 - Urology	72 av per week- 42% urgent/USC	2851	690/2035/126	C a p a c i t y	100% F2F	775	C	40%	2173	1087/777/309	C	2 lists- 13 + 42F Cysts	27 lists	14 wks
103 - Breast	71 av per week- 73% urgent/USC	836	344/456/36		100% F2F	158	c	4%	82	34/20/28	c	3 lists- 12pts	3 lists	
104 - Colorectal	70 av per week- 78% urgent/USC	1628	756/755/117		20% F2F/80% virtual	1308	i t y	39%	351	188/54/109	i t y	4 lists- 14 pts	4 lists	
107 - Vascular	16 av per week- 50% urgent	679	248/418/13	c u r r e n t l y	100% F2F	130	c u r r e n t l y		32		c u r r e n t l y			
110 - Trauma & Orthopaedics	80 av per week- 31% urgent	3302	429/2708/165		70% F2F/30% virtual	713	r e s t r i c t i o n s	15%	4249	877/1964/1408	r e s t r i c t i o n s	2 lists-12 pts	36 lists	18 wks
120 - ENT	134 av per week- 39% urgent/USC	5596	607/4894/95		100% F2F	417	t l y	20%	366	114/133/119	t l y	1 list- 4 pts	28 lists	28 wks
130 - Ophthalmology	153 av per week	4684	4438/1/245		100% F2F	413		20%	2819	668/1615/536		2 lists- 28 pts	12 lists	6 wks
190-Anaesthetics		16	16	u n d e r		5	u n d e r				u n d e r			
191 - Pain Management	26 av per week 34% urgent	1066	74/789/203		40%F2F/60% virtual	149	e r	56%	354	85/229/40	e r	1 list-6 pts	14 lists	14 wks
300 - General Medicine	20 av per week- 8% urgent	365	20/182/163	C O V I D	50/50	236	C O V I D		27		C O V I D			
301 - Gastroenterology	110 av per week- 50% urgent	1722	677/936/109		20% F2F/80%virtual	1415			863	441/330/92/				
302 - Endocrinology	18 av per week- 28% urgent	360	61/144/155	r e s t r i c t i o n s	100% virtual	37	r e s t r i c t i o n s		1		r e s t r i c t i o n s			
303 - Clinical Haematology		272	9/89/174			108			33	1/19/13				
307 - Diabetic Medicine	12 av per week- 33% urgent	167	49/63/55		20 F2F/80 virtual	6								
320 - Cardiology	129 av per week- 10% urgent	2064	378/919/767		40% F2F/60% virtual	2908	c t i o n s		113	29/83/1	c t i o n s			
324 - Anticoagulation Service		4	4			19								
328 - Stroke Medicine	10 av per week- 64% urgent	9	9	U t i l i s i n g	50/50	73	U t i l i s i n g		1		U t i l i s i n g			
329-Transient Ischaemic Attack		12	12			4								
330 - Dermatology	131 av per week- 63% urgent/USC	3916	1981/1725/210		75%F2F/25% virtual	452			44	27//17				
340 - Respiratory Medicine	77 av per week- 40% urgent	803	210/496/97			582			27	17/05/2005				
341 - Respiratory Physiology		1	1			95								
361 - Nephrology	8 av per week- 40% urgent	157	20/78/59	f o r	100%F2F	24	f o r				f o r			
400 - Neurology	50 av per week- 20% urgent	740	210/493/46		100% virtual	189								
401 - Clinical Neurophysiology		103	11/90/2	U S C / u r g e n t		1134	U S C / u r g e n t				U S C / u r g e n t			
410 - Rheumatology	60 av per week- 18% urgent	1085	373/681/31		50%/50%	806			77	1/49/27				
420 - Paediatrics	63 av per week - 5% urgent	785	39/509/237		74%F2F/ 26%virtual	380			15	10/5/				
430 - Geriatric Medicine	28 av per week- 11% urgent	1110	68/861/181		100% F2F	118			2					
502 - Gynaecology	160 av per week- 60% urgent/USC	3417	646/2659/112	O N L Y	100% F2F	849	O N L Y	43%	724	292/206/226	O N L Y	2 lists- 24 pts		12 wks
810-Radiology		1	1						2					
822-Chemical Pathology		45	1/18/26						18					



**appx 5. Critical Care Bed Capacity**

Critical Care Bed Capacity  Deficit Staff

F	<a href="#">Funded@ Level 3</a>		Available Bed Spaces
	Able to Staff @ Level 3		PPH / BGH Maximum patients - 1 x Level 3 and 4 x Level 2
			WGH Maximum patients - 2 x level 3 and 6 x Level 2
			GGH Maximum patients - 4 x Level 3 and 14 x level 2

Site	Total Level 3 Beds	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
PPH	3	F	F	F															
BGH	3	F	F	F															
WGH	5	F	F	F	F	F													
GGH	11	F	F	F	F	F	F	F	F	F	F	F							

