



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Aneurin Bevan  
University Health Board

Our Ref:

Direct Line:

24<sup>th</sup> April 2017

Mike Hedges AM  
Chair of the Petitions Committee  
National Assembly for Wales  
Cardiff Bay  
Cardiff  
CF99 1NA

Dear Mr Hedges

Thank you for your recent correspondence dated 20 March 2017. Please find attached the response from Aneurin Bevan University Health Board (ABUHB) and my apologies that this is outside the 4 week requested response time.

Firstly, may I provide assurance that the Health Board is aware of the need for further development of neuromuscular services in Wales and has been fully engaged in conversation with the Wales Neuromuscular Network (WNMN) in this regard, both directly at Chief Executive Officer level and via the national Neurological Conditions Implementation Group (NCIG), which is chaired by the Health Board's Director of Therapies & Health Science.

Since the development of the WNMN Vision Document in 2013, the WNMN has developed a number of proposals to secure funding for the expansion of this area of service provision across Wales. This response provides detail around neuro-muscular service development on a national basis followed by an update on neurological condition service development specifically within ABUHB.

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**Bwrdd Iechyd Prifysgol Aneurin Bevan**

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Bwrdd Iechyd Prifysgol Aneurin Bevan yw enw gweithredol Bwrdd Iechyd Lleol Prifysgol Aneurin Bevan  
Aneurin Bevan University Health Board is the operational name of Aneurin Bevan University Local Health Board

With the much welcomed Welsh Government announcement in 2015 of an additional £1 million resource annually for neurological conditions, I understand from the Chair of the NCIG that NCIG members debated at length the priority areas for investment across all neurological conditions in Wales as it was recognised that to achieve all areas for development would exceed the resource available. I am advised that the NCIG took the decision to invest the majority of the funding (£900k) specifically in the development of neuro-rehabilitation services as this was deemed to be the area most urgently in need of development.

In addition, the Stroke Implementation Group (SIG) agreed to fund £300k for community neuro-rehabilitation. There was a strong view from both Groups that neuro-rehabilitation services should not 'disease or condition focussed' but should be based on addressing the rehabilitation requirements of patients irrespective of their condition. This was deemed to be both clinically appropriate and a way of ensuring the best return against the available resource. As there was significant variation in the baseline service provision across Wales, both Groups agreed that this funding should be used to improve neuro-rehabilitation services locally in ways that built upon existing levels of service provision in a stepped way to achieving consistent service provision across Wales.

The Chair of NCIG advises me that as a result, organisations were invited to bid against a combined resource of £1.2m for improving neuro-rehabilitation services locally in line with their highest priority areas for specific development. Bids in excess of £4.2m were received, including three separate bids specifically for neuro-muscular services:

- One from WNMN for IT kit for the Family Care Advisors £7.5k
- One from Cardiff & Vale UHB to host psychologists in a hub and spoke model to support training of other Health Board psychologists to deliver local services to neuromuscular patients £93k recurrently
- One from Cardiff & Vale UHB for 1-2 physiotherapists based in Cardiff to train and provide specialist advice to physiotherapists across Wales in neuro muscular conditions and provide clinical input specifically to Cardiff patients £60-110k recurrently

I understand that all bids were thoroughly evaluated against an agreed set of criteria. No organisation received the full amount they requested and where they had more than one bid they were asked to prioritise.

In relation to neuromuscular conditions, the physiotherapy bid was prioritised and supported to the sum of £60k recurrently. In addition, outside the neuro-rehabilitation funding the WNMN was also awarded £60k recurrently to expand the Neuromuscular Family Care Advisors in South Wales.

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In total the WNMN received £120k recurrently, which although did not fully meet their requirements was proportionate to the amounts received by other organisations against their bids. The WNMN was made aware of the funding decision in December 2015 but has only in recent months secured appointments into these roles.

In February 2016 Tracy Cooper as Chair of the WNMN approached the Health Boards' CEOs to fund a second physiotherapist, one psychologist (as per their bids to the NCIG) plus an additional 1.5wte Family Care Advisors and 1.5wte band 3 admin support (not included in their previous bids to NCIG). This request totalled £205k per annum. Whilst this area of further service development for circa 3400 patients across Wales was recognised, it is set against a list of competing service developments across a range of clinical conditions, including but not exclusive to neurological conditions. The CEOs were mindful of the level of investment and robust prioritisation process adopted by the NCIG and Health Boards were unable to commit additional resources to the service at that time.

Whilst this may not be of comfort to the WNMN or individuals championing neuro-muscular service development, I am sure you will appreciate that this is one of many areas of service development recognised within the Health Boards IMTPs within a challenging financial context.

In relation to the two additional areas of priority identified in your letter (additional consultant in neuro-muscular disease and an equipment budget), I am not aware that the WNMN has made any requests for these areas of development over the past 4 years.

To provide a local context, the ABUHB bid submitted to NCIG prioritised the expansion of our existing stroke community neuro-rehabilitation service (CNRS) to enable the team to support patients with acquired brain injury as this group of patients had no access to services within the ABUHB area. The bid was partially successful and the CNRS is now a fully multi-disciplinary service including the provision of physiotherapy and psychology support for stroke patients and those with acquired brain injury. Further expansion of this service for wider neurological condition groups is one of our priorities for the future, in addition to further development of wider neurological condition services including multiple sclerosis, Parkinson's disease and epilepsy.

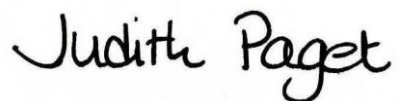
With respect specifically to supporting patients with neuro-muscular conditions, the Health Board provides multi-disciplinary clinics but recognises that further development is required. It is also worth noting that the Health Boards in South Wales are continuing to provide tapered funding to support the South Wales Motor Neurone Disease Care Network to the sum of £30,022 in 2017/18 and £46,062 in 2018/19.

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I trust that this will provide some assurance that Aneurin Bevan University Health Board is committed to improving service provision for all clinical specialities, including neuro-muscular conditions and is working hard to manage a number of competing priorities.

Once again, please accept my apologies for the delay in responding to your request.

Yours sincerely

A handwritten signature in black ink that reads "Judith Paget". The script is cursive and fluid, with the first letters of each word being capitalized and prominent.

**Judith Paget**  
**Chief Executive/ Prif Weithredwr**