



Ein cyf/Our ref: MA-P-VG-1952-19

Mick Antoniw AM  
National Assembly for Wales  
Cardiff  
CF99 1NA

24 May 2019

Dear Mick,

I am writing to provide you with an update on the development of sleep services, following my commitment given during plenary in June 2018 to come back to you in twelve months' time.

The Respiratory Health Delivery Plan for Wales was updated and republished in January 2018. The Implementation Group established more than twenty national work streams aimed at tackling variation and improving value in different areas of respiratory medicine. A lead clinician was appointed to deliver the work stream on sleep services and has been working with health boards over the past year to review how sleep services are delivered and waiting times are measured.

The work stream has produced a national guideline for the delivery of sleep services which has since been recommended as a national priority for local implementation as part of the NHS integrated medium term planning (IMTP) process. My officials are working with health boards to ensure this features in health board plans and following up with those where this is not the case.

The new guideline encourages all health boards to implement a consistent new approach to the investigation and treatment of sleep disorders. Rather than a series of appointments with specialists in sleep medicine, the new patient-centred model is for the clinical team to book people straight in for tests and then on the basis of the results determine if people can go straight to treatment, be discharged or if necessary be seen in clinic. This allows people to be seen and treated more quickly, as well as focusing the finite medical expertise available on more complex cases. It also helps to make the most of the skills of specialist nurses and physiologists in delivering the required interventions.

There has also been focused effort on improving the way sleep services are measured, by encouraging greater consistency and by revising the referral to treatment measure to include the diagnostic testing phase, which was previously excluded from the patient reported wait. This will be piloted in shadow form this summer, with the intention of implementing as part of formal reporting at a future date.

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Access to tertiary sleep services is recognised as an important matter and these efforts will help to release specialist capacity to deliver more specialist sleep care and also to ensure health boards are able to properly measure and compare their waits for more specialist sleep services.

Now that a clinical consensus has been reached and important guidance produced, I expect health boards to focus on implementation as part of the IMTP process.

I hope this update is helpful.

Yours sincerely,

A handwritten signature in black ink that reads "Vaughan Gething". The signature is written in a cursive, flowing style.

**Vaughan Gething AC/AM**

Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol  
Minister for Health and Social Services