

Health and Social care Committee

Access to medical technologies in Wales

MT ToR 20 Royal College of Ophthalmologists

The National Assembly for Wales's Health and Social Care Committee has agreed to undertake work on **access to medical technologies in Wales**. The Committee is eager to hear your views on the scope of this inquiry. Members would like to know what you think the terms of reference should be for this work, and on what aspects of accessing medical technologies they should focus their efforts.

Draft College Response to an enquiry into Access to Medical Technologies in Wales

The cost and constant evolution of medical technology places an ever-increasing financial burden on the NHS. To date assessment of potential benefit has been made on a local level in terms of 5 year planning and equipment bids. Replacement of essential equipment invariably occurs when the old model becomes unusable. Freedom of Health Boards in Wales to select replacements locally leads to fragmented acquisition and diverse protocols for usage.

Assessment of new technology should be comprehensive and include the implications of purchase (or non-purchase) for the short and long term. The indications for use, cost, feasibility and value, as well as safety need to be evaluated. Ideally training of technicians and health care staff in the use of new equipment in Wales should be centralized, making full use of the internet. Wales has a lot to gain from investigating best practice in each field of Medicine in Wales, then extending the terms of reference across the rest of Europe.

There are three levels at which technology needs to be accessed:

1. **State of the art equipment for one or two units** in Wales
eg: a training module for cataract and vitreoretinal surgery based in Cardiff
a central location for corneal endothelial graft preparation
2. **Appropriate training of health staff and new technicians** trained to be expert within a narrow field with courses based in Wales (eg: the eye unit in Camarthen has recently appointed 3 ophthalmic technicians and a training course is in progress in Swansea)
3. Where possible **central agreement on commonly used low cost equipment** with bidding for the most favoured model by NHS staff within Wales on which to base a national 5yr contract. Insurance and maintenance for 5 years beyond possible end of contract (ie: 10yrs) would be necessary. Any equipment purchased on this basis would need to be tried and tested either in Wales or elsewhere in Europe to minimize risk. A 'Focus on' approach may prove useful for this.

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2nd October 2012