

## Briefing for the Petitions Committee

Petition number: [P-05-769](#)

Petition title: **South Wales Major Trauma Centre – Cardiff & Swansea Please**

Text of petition: We call on the Welsh Government to provide major trauma centres at both the University Hospital of Wales, Cardiff, and at Morriston Hospital, Swansea rather than at a sole site.

Work is underway to develop trauma services in Wales. As noted in the Cabinet Secretary for Health, Well-being and Sport's response to the petition, the NHS Wales Health Collaborative has been developing proposals for a major trauma network, including a major trauma centre, to cover the region of south Wales, west Wales and south Powys (patients in north Wales are served by the Major Trauma Centre at Royal Stoke University Hospital).

Swansea's Morriston Hospital and Cardiff's University Hospital of Wales both submitted plans to house a major trauma centre. It has subsequently been [reported](#) that, based on an independent, expert panel's report, the Collaborative has recommended that the major trauma centre should be based in Cardiff, and that Morriston Hospital in Swansea should become a larger trauma unit as part of a wider major trauma network. Health boards will consider the recommendations this autumn. It's understood that the proposals will be subject to public consultation.

### Background

The term 'major trauma' is used to describe serious and often multiple injuries that may be life-threatening.

There is evidence that outcomes for patients with major trauma are significantly improved when treated in a dedicated major trauma centre. These centres are staffed by a multi-disciplinary team of clinicians with access to the range of specialist facilities necessary to manage patients with severe, multiple injuries.

The July 2017 [interim report](#) of the review of health and social care in Wales highlights that centralising facilities for some specialised forms of care – so that expertise and equipment are utilised more effectively – improves quality of care.

The evidence is strongest for stroke, trauma, and heart attack services, even if this means patients travelling further to receive care.

The 2012 report [Best Configuration of Hospital Services for Wales – Quality and Safety](#) (the Longley Report) discusses the evidence re. specialist major trauma centres (see pages 12 – 19), referencing work carried out by the Royal College of Surgeons which highlighted that:

- regionalisation of care to specialist trauma centres reduces mortality by 25% and length of stay by 4 days;
- high volume trauma centres reduce death from major injury by up to 50%;
- time from injury to definitive surgery is the primary determinant of outcome in major trauma (not time to arrival in the nearest emergency department);
- major trauma patients managed initially in local hospitals are 1.5 to 5 times more likely to die than patients transported directly to trauma centres;
- **one centre might typically serve a population of 3–4 million.** [Broadly equivalent to the population of Wales].

In 2012, major trauma services across England were reconfigured into regional trauma networks based around designated major trauma centres. A 2016 [study](#) found that, following the regionalisation of trauma care in England, all indicators of quality of care improved. While there was no apparent difference in mortality, evidence from other countries suggests that further benefits may become apparent after a period of maturing of the trauma system.