**FOI Ref: 6585**

**Category(ies): Clinical - Service Activity**

**Subject: Prehabilitation Services**

**Date Received: 25/08/2022**

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| **Your request:** | **Our response:** |
| 1. Do you currently offer any prehabilitation services to patients undergoing surgery within your trust? | Yes  No  (if no, please go to question 8) |
| 1. If Yes, which specialties currently are offering prehabilitation to patients prior to surgery? | Orthopaedics  Colorectal  Upper Gastrointestinal  Vascular  Cardiothoracic  Other (please state) ………. |
| 1. In what year were these services established? | 2014 |
| 1. If known, how many patients in total have gone through a prehabilitation programme to date? | 2014 – 4  2015 – 11  2016 – 14  2017 – 19  2018 – 2 data incomplete  2019- no data available  2020 – 4 data incomplete  2021 – 21  2022 – 17 (6months) |
| 1. In your trust, In the year prior to covid (Jan – Dec 2019) how many patients participated in a dedicated prehabilitation program prior to surgery? | * 0 – 24 * 25 – 49 * 50 – 74 * 75 – 100 * > 100   As above no data available |
| 1. What components of prehabilitation are currently offered to patients prior to surgery within your trust and how are they delivered? | **Medical/Behavioural Optimisation (e.g., Smoking cessation, alcohol reduction)**  Offered? Yes  No  Provided in Hospital face to face  Hospital remote  Community  Please describe what medical optimisation components are offered.  Physician review  Smoking cessation  Alcohol intake review  Other (please state) ……….  **Physical Exercise**  Offered? Yes  No  Provided in Hospital face to face  Hospital remote  Community  Role of Healthcare professional providing exercise program? (eg. Physio, Nurse, Doctor)  Band 6 Physiotherapist – Telephone assessment prior to group setting, indivualised circuit training prescribed to invidual. Monitored throughout sessions. Outcome measures used pre and post exercise class.  Exercise class x2 week for total of 4 weeks.  Frequency of contact with health care professional?   * Daily, * 2-3 times a week, * Once a week , * Once every 2-3 weeks, * Once a month, * Less than once a month   Please describe type of exercise prescribed.  Circuit- Medium and high intensity upper limb and lower. Including use of exercise bike and treadmill.  **Nutritional Support**  Offered? Yes  No  Provided in Hospital face to face  Hospital remote  Community  Role of Healthcare professional providing exercise program? (e.g. Dietitian, Nurse, Doctor)  ……………………………………………………………………………………………………………………………………………….  Frequency of contact with health care professional?   * Daily, * 2-3 times a week, * Once a week , * Once every 2-3 weeks, * Once a month, * Less than once a month   **Psychological Support**  Offered? Yes  No  Provided in Hospital face to face  Hospital remote  Community  Role of Healthcare professional providing psychological support? (e.g. Dietitian, Nurse, Doctor)  ……………………………………………………………………………………………………………………………………………….  Frequency of contact with health care professional?   * Daily, * 2-3 times a week, * Once a week , * Once every 2-3 weeks, * Once a month, * Less than once a month   **Other**  Please describe any other components of prehabilitation offered by your trust. |
| 1. How long do patients undergo prehabilitation prior to surgery within your trust? | Average \_\_\_\_\_ months \_\_\_4\_\_ weeks \_\_\_\_\_days |
| 1. What outcome measures are collected on the efficacy of the prehabilitation program that your patients undertake prior to surgery? | Repeat CPET testing Pre and Post  6 minute walk test Pre and Post Prehab class |
| 1. Does the prehabilitation program that that your patients undertake prior to surgery involve the use of digital technologies to augment the program? (e.g., Digital apps, wearable fitness trackers)   Please detail digital technologies used. | No |
| 1. What effect has the covid-19 pandemic impacted your service?  * No impact * Services suspended * Adaptation of existing service (eg. Change to remote service from face to face) | Services suspended during 2020  Restarted face to face on a risk assessment basis during 2021. |
| 1. Are there any plans to implement a prehabilitation service prior to surgery within your trust in the next year in any of the following specialities? | Orthopaedics  Colorectal  Upper Gastrointestinal  Vascular  Cardiothoracic  Other (please state) ………. |