Dear **<<CEO of Trust / Health Board>>**

I have been contacted by <<**my constituent/several constituents>>** about Inflammatory Bowel Disease (IBD) services and standards of care at **<<insert name of Trust/Health Board>>.**

My constituent**<<(s)>>** would like to know what your **<<Trust/Health Board>>**, working with primary care services, is doing to ensure that services meet standards of care as defined in [the IBD Standards 2019](https://ibduk.org/ibd-standards) and what plans you have to address the findings and recommendations of both the national and local reports (which can be read [here](https://www.ibduk.org/reports/services-map)) as you reset services.

They have bought to my attention the findings of a [report published by IBD UK](https://www.ibduk.org/reports/crohns-and-colitis-care-in-the-uk-the-hidden-cost-and-a-vision-for-change) on the state of IBD care. [IBD UK](https://ibduk.org/), led by [Crohn’s & Colitis UK](https://www.crohnsandcolitis.org.uk/), is a partnership of 17 professional bodies, royal colleges and patient organisations representing the major stakeholders in Inflammatory Bowel Disease (IBD) care delivery across the UK.

IBD UK’s research has found variation in:

* Diagnostic waiting times and A&E attendances before confirmed diagnosis:
	+ With 26% people waiting more than a year for a formal diagnosis.
	+ 41% visiting A&E more than once.
* Formal personalised care and support planning, in particular treating fatigue, pain and mental well-being:
	+ 89% of people with IBD found it hard cope over the previous year.
	+ 91% did not have a personalised care plan.
* Access to specialist treatment when in relapse (flare), resulting in emergency hospital admissions and potentially avoidable flares and serious complications:
	+ 72% of hospital stays over the previous 12 months were emergency admissions.
	+ 22% waited more than 18 weeks for planned IBD surgery.
* Appropriate provision of IBD nurse specialists, dietetic access and psychological support:
	+ 14% of IBD Services across the UK reported having enough IBD nurse specialists.
	+ 48% of people with Crohn’s & Colitis felt their care was co-ordinated enough.

I hope that you will engage with the recommendations from this report and with IBD UK to improve standards of IBD care.

**<<If there are specific challenges to improving local IBD care that you would like to discuss in more detail please do let me know, and I would be happy to raise them in Parliament and with IBD UK directly.>>**

I look forward to receiving your response.