

Wednesday August 29 2018

Our Big NHS Change – Communities' Voice on Health and Care

We recently undertook a 12-week public consultation 'Hywel Dda – Our Big NHS Change', between 19 April and 12 July 2018, into the future of NHS health and care services. I wish to update you on progress to date and the next steps.

Following the consultation, we have received an independent report, detailing the extent and scope of views received from communities in mid and west Wales. The health board provided many different opportunities for people to voice their views, from completing formal questionnaires and writing in to attending events and face-to-face meetings, as well as debate on social media. This report provides the views of those who chose to respond and highlights some key issues for our Board members to consider as part of their decision-making.

We are publishing that report before it is formally received by the Health Board at an extraordinary meeting, due to be held and webcast from Carmarthenshire County Council's Chambers on Wednesday, 26 September 2018, where a future service model will be discussed. Making the report available now will allow our patients, staff, stakeholders and communities time to read and consider its contents.

What has been heard?

From a population of around 400,000, the consultation received 5,395 questionnaire responses, and reached out face-to-face at more than 160 events, attracting more than 4,000 attendees. Five petitions were received with almost 51,000 signatures and there was significant debate on social media.

There was support for some elements of consultation (*the key elements of the consultation are shown below), including the case for change, strengthening community models, separating planned and urgent care (but most suggesting this should be done on the same site) and provision of a new hospital in the south of the Hywel Dda area.

However, there was considerable disagreement around locations of proposed community hubs and hospitals, with recurring suggestions for hubs to be considered in Milford Haven/Neyland, Fishguard/Goodwick, Crymych, Lampeter and Llandysul, and concern generally over loss of community beds, particularly in regards to Amman Valley Hospital.

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There was high level of disagreement over the proposed location for a new urgent and emergency care hospital. Feedback demonstrated competing arguments for building the new hospital near Carmarthen, due to population density both from town itself and being central between Haverfordwest and Llanelli; and further west given that access from these locations is already an important recognised issue.

Key themes of concern have emerged, including travel and access to services, particularly for the more vulnerable or isolated; the infrastructure of roads and public transport limitations; resourcing requirements including costs and staffing; regional impacts, such as those on other health boards and the Welsh Ambulance Services NHS Trust, and the ability to deliver the community and primary care required for such a model to work, amongst others.

Overall, Proposals A and B carried considerably more support than Proposal C, and there was substantial support for alternative options – the vast majority of alternatives relating to the retention or enhancement of existing services at Withybush Hospital in Haverfordwest and some calling for integration or amalgamation between Hywel Dda and Abertawe Bro Morgannwg University Health Boards.

It was generally recognised that Proposal A was likely to maximise resources available for investment and the delivery of community-based services and many believed the benefits of adopting the most cost-effective option shouldn't be understated given the ongoing financial pressures and increasing needs of an ageing population.

The feedback suggested that the main advantages in support of Proposal B was the ability to deliver services locally within the Health Board area for as many people as possible. Many had concerns that if Prince Philip Hospital did not remain a Local General Hospital, then large numbers of residents from the most populated areas would inevitably choose to receive services in ABMU Health Board.

People in Ceredigion tended to support Proposal A, followed by B; people from Carmarthenshire tended to support Proposal B, followed by C; and people in Pembrokeshire tended to support Proposal A over B and C but with substantial support for an alternative proposal. NHS staff tended to favour Proposal B over Proposal A.

What next?

The Health Board is now going through a period of 'conscientious consideration', where it will consider views and implications heard in consultation and assess any alternative options put forward, before re-evaluating and proposing a future service model.

A series of meetings have been organised with clinical staff and key stakeholders, such as other organisations that provide care, and the Hywel Dda Community Health Council to undertake this work. Two meetings are with broader stakeholders, one with representatives from protected characteristic groups and another wider group, with invitations issued to those who have already been significantly involved in the consultation. A summary of the outcome of these meetings will be published in the Health Board's consultation web resource available at www.hywelddahb.wales.nhs.uk/hddchange under 'Next Steps', to share this more widely.

Any alternative proposals suggested as part of consultation will go through the same process as those explored pre-consultation. The Health Board will review if any of these alternatives were already considered, assessed and discounted prior to consultation. Any new, alternative proposal will be analysed (based on strengths, weaknesses, opportunities and threats (SWOT analysis)) by a range of clinical staff to assess if it is viable and if so, modelling of activity, travel time, affordability etc would be undertaken. A scoring exercise will then be carried out on any proposals that reach this stage. If any alternative proposal scores equivalent to or more than the proposals taken to public consultation, an equalities impact assessment will take place and the proposal will be presented to the Executive Team of the Health Board to determine if it is viable.

If the alternative proposal is broadly the same as one of the proposals already consulted on but with some adjustments that don't have any undue negative impacts, this proposal could be adopted without the need for further consultation. If, however, the alternative proposal is radically different to the proposals already consulted on there may be a requirement for further public consultation by the Health Board.

A recommended way forward, led by clinicians, will be presented to the public Health Board on Wednesday, 26 September in Carmarthenshire County Council's Chambers and webcast for ease of public access to the full discussion and debate.

The consultation will not be determined by numbers alone, or a single aggregated result, as the population will inevitably have different perspectives on proposals and all views are important and valid.

Board members will need to consider the clinical views, all they heard in the discover phase (engagement during summer 2017) and everything they have heard in formal consultation, as well as issues such as safety, quality, sustainability of services and equalities when making any decision.

I wish to thank you for your involvement to date and we look forward to talking to you further as we continue on our journey. Please do not hesitate to contact us if you need more information or wish to discuss any concerns or opportunities.

Yours sincerely

Sarah Jennings
Director of Partnerships & Corporate Services

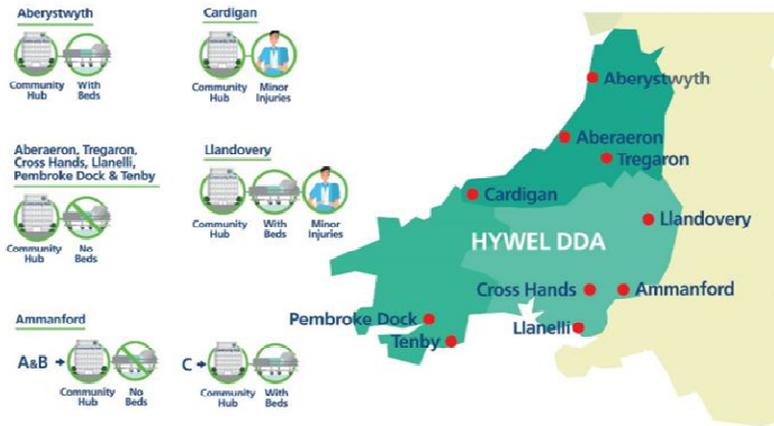
Notes:

Our Big NHS Change Consultation – summary reminders of key elements of consultation – full details can be found in archived resources at www.hywelddahb.wales.nhs.uk/hddchange

Community model hubs:

Community Hubs

Supporting services in our communities, alongside our community and general hospitals.



For more detail on what services are in the hubs, see page 49. Please note Tenby would have a seasonal Minor Injuries Unit.

Hospital proposals:



2 main hospitals: Bronglais & new urgent + planned care hospital
 3 community hospitals: Glangwili, PPH, Withybush
 10 community hubs (no beds at AVH as community beds at Glangwili & PPH)



3 main hospitals: Bronglais & new urgent + planned care hospital, PPH
 2 community hospitals: Glangwili, Withybush
 10 community hubs (no beds at AVH as community beds at Glangwili & PPH)



4 main hospitals: Bronglais & new urgent care hospital, Glangwili as planned care hospital, PPH
 1 community hospitals: Withybush
 10 community hubs (beds at AVH as no community beds at Glangwili & PPH)