



1st October 2025

For the attention of:

The Members of the Senedd Petitions Committee

Dear Member,

Response to the letter of the Cabinet Secretary for Health and Social Services letter (23.09.25) in respect of Petition 246641: Protect Full Stroke Services at Bronglais Hospital

From: Lead Petitioner, Bryony Davies for Protect Bronglais Services (PBS) with Lisa Francis, Chair of PBS

Signatures: Over 17,000 (10,867 online and around 7,500 paper signatures awaiting confirmation).

We note the letter of the Cabinet Secretary for Health and Social Services to the Chair of the Petitions Committee of the 23/09/25, a copy of which we received yesterday. In respect of his comments regarding the above Petition, we express both disappointment and concern.

Whilst Hywel Dda University Health Board (HDdUHB) state that these proposed changes to stroke services are about improved and safer health services, the fact is that if adopted, these services won't be available for stroke patients and their families to access closer to home. Bronglais General Hospital (BGH) Aberystwyth, (*which serves patients from as far away as Tywyn, Caersws, Llanidloes, Rhayadr and Llandrindod Wells*), will see detrimental changes to its excellent Stroke Unit.

Under the proposals:

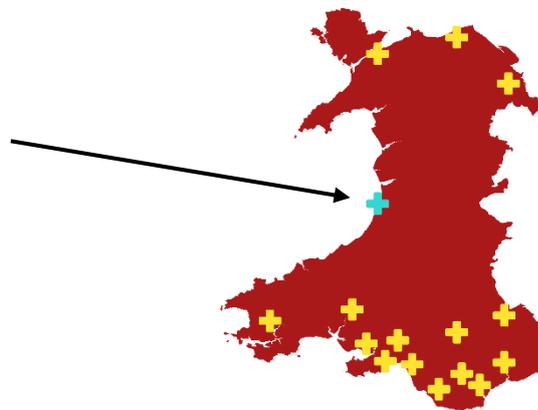
Option A is to send stroke patients presenting at Bronglais onward to either Prince Philip Hospital, Llanelli or to Withybush Hospital, Haverfordwest for their rehabilitation.

Option B is to send stroke patients presenting at Bronglais onward to Prince Philip Hospital Llanelli for 72 hours of inpatient care before being transferred again to Withybush Hospital Haverfordwest.

These plans are extremely lacking in detail.

*Keeping stroke rehabilitation at BGH and building on the excellence which is already there is simply not in any of HDdUHB's plans – it is literally **NOT** an option in the Consultation's questionnaire.*

Bronglais (marked by blue cross) is the ONLY District General Hospital in Mid Wales serving four counties.



‘Treat and Transfer’ of Stroke Patients

- HDdUHB has not provided any evidence to show how a ‘Treat and Transfer’ Unit will work in a rural area with an ageing population and a poor transport infrastructure.
- HDdUHB has not provided any detail at all about how stroke patients from BGH would be transferred onward to Llanelli and then Haverfordwest and then taken home following treatment.
- HDdUHB has provided no real evidence as to how this proposal to transfer stroke patients over one and half hours away by road ambulance to a place some 65 or 70 miles hence will be an improvement to stroke patients, or indeed, will result in a better service than the one offered by BGH at the moment. These road ambulance journeys would take place on mainly rural roads (no dual carriageways), where road closures, diversions and accidents are a regular feature, particularly during the summer tourist season.
- It isn’t known whether an already over-stretched Welsh Ambulance Service will be fully charged with this task. PBS can only assume that the Board will implement these plans without finalising these crucial details.

At an online meeting on Monday evening (16.06.25) held by HDdUHB for members of the public to understand the proposals, in response to the question of: ***Will more ambulances be provided?***

The representative from the Welsh Ambulance Service stated:

‘So all I can probably say to answer that question at the moment is whilst there has been lots of data generated to have an understanding on the impact of some of the options, until we know the final option that’s been decided and determined by the Health Board Executive Team, we are not in a position to say what, or if, the Ambulance Service will need any additional resources and be able to comply with the option that’s chosen.’



- This position was echoed by Health Board officials attending the PBS public meeting at Aberystwyth Arts Centre on 20/06/25, (when the Consultation was already underway), who couldn't offer any significant detail on the transfer element of these proposals.
- It isn't known whether a specialist medical escort will accompany stroke patients on these journeys (as is standard for critical care transfers) or indeed whether the Health Board has sufficient staff in place to do this.
- No consideration is given in any of this to stroke patients who will be taken to Bronglais from across the Mid Wales area: from Southern Meirionnydd, Western and Central Montgomeryshire and Radnorshire.

Successful rehabilitation for stroke patients is largely dependent on the care and motivational support of loved ones. **These proposals mean a round trip of 200 miles for many patients and visitors.**

- There are **no** direct public transport links between Aberystwyth and either of these towns and visiting even occasionally will be very costly for those without access to their own transport. (a return bus trip between Aberystwyth and Llanelli would take nine hours, leaving hardly any time to visit patients).
- Visiting daily or at least on a regular basis, will be nigh on impossible for those without the resources to do so.
- NHS clinicians (current and retired) have described the plan as unsafe, unworkable and against clinical evidence for best practice, yet their concerns have, for the most part, been ignored. According to the Sentinel Stroke National Audit Programme (SSNAP), BGH's Stroke Unit is the best performing of all of the stroke units in the HDdUHB area. If the Stroke Unit at BGH scores top marks, then why shouldn't funds be used to improve it further?

Palliative Care for Stroke Patients: it is a fact that one in seven stroke patients will die in hospital.

- Palliative care for such patients should be delivered by a stroke-experienced team.
- Under the proposals, patients with end-of-life issues might be sent hours away from family to die, or they could receive end-of-life care in a non-stroke unit which is outside guidance.
- Similarly, those stroke patients who deteriorate in either Llanelli or Withybush will die hours away from family.
- Identifying those who will die is very difficult and will lead to someone being thought of as 'likely to die' but surviving and then being in 'the wrong place'.



Stroke Mimics: are conditions that mimic stroke symptoms but are not caused by vascular issues. Common mimics include: seizures, migraines, psychiatric disorders, brain tumours, metabolic conditions like hypoglycemia and functional neurological disorders. ‘Stroke Mimics’ or the plans for dealing with them are not mentioned by the Health Board in these proposals.

- Under these proposals it’s probable that patients presenting at BGH with ‘stroke mimics’ will be taken onwards to Llanelli or Withybush. They would then eventually need to be re-routed to an A&E Unit elsewhere delaying their time to access the appropriate treatment.

Post Stroke Medical Emergency:

- If a patient presenting at BGH with stroke symptoms is then moved onwards to either Llanelli or Withybush and suffers a post stroke medical emergency such as a heart attack, ischaemic bowel or undiagnosed diabetes, under these proposals, they would experience a delay in accessing appropriate treatment.
- Post stroke medical emergencies or the plans for dealing with them are not mentioned by the Health Board in these proposals.

Rehabilitation of Stroke Patients:

- Family and friends play a huge part in the rehabilitation of stroke patients from motivating them and offering encouragement to helping them to bathe and dress, mobilise and improve cognitive skills. In many instances they will be shown by health professionals how to help a stroke patient move from a bed to a chair or how to get to the toilet safely. Their support is essential and they are often the link between getting patients out of hospital and safely back home following treatment. Both Llanelli and Withybush are too far away to allow regular visiting. It is likely that those who do not have access to their own transport or who cannot afford taxis will simply be unable to visit their loved ones.
- HDdHUB has said that it will provide digital tablets for stroke patients undergoing rehab at either Llanelli or Withybush so that they can communicate with loved ones. Many stroke patients suffer a loss of cognitive and motor skills – this idea has clearly not been thought through.
- The Health Board has not stated if they will be providing ipads for family and friends as well so that they can stay in touch.
- In many areas of Mid Wales there is still a wi-fi deficit.
- If family and friends are unable to visit their loved ones in hospital, HDdUHB has failed to address how there would be any effective liaison when it comes to discharging stroke patients following their stay in hospital. There is no mention in the plans of how this would work.



Equality:

At the HDdUHB Meeting of the 29/05/25, there was much discussion about: 'Kindness and the importance of community and equality.'

- It is PBS' opinion that these plans regarding changes to stroke services are certainly not kind and they are not fit for purpose for our communities in Mid Wales. The people of Mid Wales along with everyone else in Wales have a moral, ethical and legal right to a health service which treats everyone equitably. HDdUHB's proposals regarding changes to the Stroke Units within their area do not do this.
- In terms of the effects of these proposals on BGH and healthcare in Mid Wales and how would this affect patient pathways and staff recruitment, there has been no proper impact assessment carried out by HDdUHB on the effects of removing the Stroke Unit rehabilitation from BGH.

There is overwhelming public and political support for retaining the Stroke Unit at BGH as it is and further improving it:

Both Powys County Council (06/03/25) and Ceredigion County Councils (12/06/25) have passed motions of support to this effect as have a number of Community Councils in Mid Wales **including Aberystwyth Town Council.**

At the **public meeting** held at Aberystwyth Arts Centre's Great Hall by Protect Bronglais Services on 20/06/25, **438** people voted in support of the following motion:

'We believe that the stroke unit at Bronglais Hospital should be invested in and improved and should retain full stroke services for patients to include rehabilitation.'

'Rydym yn credu y dylid buddsoddi yn yr uned strôc yn Ysbyty Bronglais a'i gwella a dylai gadw gwasanaethau strôc llawn i gleifion gan gynnwys adsefydlu.'

Currently, over **17,000** people have signed the Senedd Petition: 'Protect full stroke services at BGH; prevent downgrade to Treat and Transfer.'

These signatures represent communities demanding evidence-based healthcare plans that fully recognise the geographic challenges faced by the communities of Mid Wales. The geography cannot be changed; healthcare planning must adapt to it – not ignore it.

Investing in BGH Stroke Unit and improving it is the solution to service provision, not removing services.



The Cabinet Secretary for Health and Social Care's reference to the involvement of Llais:

- Llais state they are an independent body who listen to the people of Wales – a body accountable to the people of Wales. They state they want effective engagement with partnership organisations and recognise the importance of building on this locally.
- At the Senedd's Health and Social Care Committee meeting of 25/06/25 when Llais gave evidence, the SM for Dwyfor Meirionnydd raised the issue of consultation in respect of proposed changes to the Stroke Unit at BGH, (which affects many of his constituents who are served by BGH). In their response, Llais said that they were: '*... taking time to listen and to hold a mirror up*', to review and respond to the proposals.
- On 26/06/25, PBS wrote to Llais to raise concerns regarding the flawed nature of the HDdUHB Consultation. Disappointingly, despite meeting with one of their officers on the 30th June for further discussion, no formal response in writing regarding our concerns has ever been received from them.

Conclusion:

- These proposals from the HDdUHB Consultation which closed on the 31/08/25 lacked sufficient evidence-based detail to enable actual and potential service users within Mid Wales to make an informed choice. The accompanying questionnaire offered only two possible future scenarios for stroke services in Hywel Dda with no option to select neither of the two proposals.
- PBS asked HDdUHB to withdraw its proposal with respect to the Stroke Unit at BGH. They need to go back to the drawing board and run a truly consultative process in which they engage meaningfully with patients, staff and other stakeholders in order to arrive at more acceptable and sustainable proposals for the future of stroke services in Mid Wales.

We apologise for the length of this letter but feel sure you will appreciate that there is a lot of important information herein for you to read. Thank you for your time.

Yours faithfully,

Bryony Davies (Lead Petitioner and Member of PBS)
Lisa Francis (Secunder of Petition and Chair of PBS)



Protect Bronglais Services (PBS) is a community group of over 2,200 members formed in November 2024 to focus on matters of concern relating to Bronglais General Hospital Aberystwyth which serves the communities of Ceredigion and wider Mid Wales.

Role:

- Raise awareness Listen to patients' stories, experiences and those of friends and families
- Provide a listening ear to our often pressured and hard-working NHS hospital staff
- Protect what we have
- Be a critical friend
- Encourage improvements to what we have
- Encourage more people to take part in health board consultations

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Chair: Lisa Francis