

Save A&E: Withybush General Hospital must retain 24 hour, 7 days a week, consultant-led urgent care

Y Pwyllgor Deisebau | 23 Mai 2022
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Petition title: Save A&E. Withybush General Hospital must retain 24 hour, 7 days a week, Consultant Led urgent care

Text of petition:

Moving care out of county puts adults & children at risk of poor outcomes or even death. It wastes crucial time, when time is not on our side.

We have 125,000 residents & millions of tourists. By implementing the downgrades, Hywel Dda University Health Board (HDUHB), will be knowingly putting their lives at risk. We re-iterate, we are a rural, widespread county, with poor roads and public transport network. Refinery, gas plant, ferry ports, firing range, extreme sports, plus one of the most dangerous professions: farming.

HDUHB may infer that the "Golden Hour" is no longer relevant, with better equipped ambulances & higher trained staff, but that is dependent on an ambulance being available to help and give that immediate care. That is increasingly not the case, as ambulances fail to attend, as they are being sent out of county, unable to offload and unable to return to county, to give the help needed.



- It is an awful feeling to know that if our relatives or our children have a life threatening asthma attack, epileptic episode, or other time critical issue, within the new plans, they are unlikely to get to help and survive;
- HDUHB have said they will make no guarantee that Urgent Care would remain in Withybush General Hospital until (and if), a new build is up and running!!! That is unacceptable;
- HDUHB should commit to rigorous recruitment policies, to keep WGH Urgent Care fully staffed;
- We have lost faith & trust in HDUHB and do not believe that they are working in the best interests of Pembrokeshire.

Note: This petition has received over 10,000 signatures.

1. Background

1.1. Current pattern of A&E services in Hywel Dda UHB

A&E services are currently provided 24 hours a day, 7 days a week in three hospitals within the Health Board:

- **Withybush Hospital** in Haverfordwest, which also has a minor injuries unit open from 8.00am-10.30pm, 7 days a week;
- **Glangwili Hospital** in Carmarthen, which also has a minor injuries service open 8.00am-8.00pm, 7 days a week;
- **Bronglais Hospital** in Aberystwyth, which also has minor injuries services from 8.00am-8.00pm, 7 days a week.

Children with illnesses are seen at Glangwili Hospital where there is an Emergency Department and co-located children's hospital services. Minor injuries services are also provided in hospitals in Llanelli, Llandovery, Cardigan and Tenby.

1.2. Proposals for the future shape of A&E services

The proposed future shape of healthcare in Hywel Dda originate from a public consultation in 2018 – Our Big NHS Change. Following on from this consultation,

the Health Board agreed A Healthier Mid and West Wales: Our Future Generations Living Well, at a Board meeting on 29 November 2018.

The key elements of plans set out in 'A Healthier Mid and West Wales' include:

- **A new Urgent and Planned Care Hospital**, somewhere between Narberth and St Clears, providing both planned and urgent care. The Hospital will function as the health board's Trauma Unit and main Emergency Department
- Re-purposing or re-build of Withybush and Glangwili Hospitals, , including GP-led minor injury units, same-day care, and beds for patients who do not need to be in an acute setting but need support;
- Improving and modernising Bronglais Hospital and Prince Philip Hospital. Bronglais Hospital will continue to provide acute emergency and planned care and Prince Philip Hospital will continue to provide GP-led minor injuries as well as acute adult medical care, consultant-led overnight beds and diagnostic support.

The Health Board has published an FAQ on 'A Healthier Mid and West Wales', which sets out the reasoning behind the proposals to move emergency care from Withybush and Glangwili to the new hospital, and how the Health Board intends to address concerns around access and patient safety.

The FAQ also outlines the **current position** on the proposed new Urgent and Planned Care Hospital, including:

- A six-week period of engagement was launched in May 2021, to identify suitable sites within the zone (between St Clears and Narberth). This included identifying the public issues and concerns which needed to be addressed in identifying the preferred site;
- A technical review and workshop in October 2021 enabled shortlisting of five potential sites. No land has been purchased and the process is expected to conclude in summer 2022 with a recommendation to the Hwyl Dda UHB board. The UHB will take further advice on whether this would need to be followed by a public consultation.

1.3. Timescale for delivering the strategy

The Health Board has now agreed and submitted a Programme Business Case to the Welsh Government. This document aims to secure Welsh Government endorsement for the programme, support the funding for more detailed work, and lead eventually to Welsh Government investment in the buildings and infrastructure needed to deliver 'A Healthier Mid and West Wales'.

The Health Board has stated that the new Urgent and Planned Care Hospital will not open till at least the end of 2029, but note in their FAQ that "if funding is available, we want to deliver these developments in advance of the new hospital". The Health Board also notes that:

Our plans do not involve closing any of our current emergency and urgent care services in advance of any new alternatives, such as a new hospital, being agreed and put in place.

At the same time, we are facing unprecedented pressures, including our response to the COVID-19 pandemic and the impact this has on our staffing and how we can deliver care safety. Our clinicians and managers will continue to make operational decisions and react to changing circumstances every day to ensure we can safely treat our patients. In this context absolute guarantees are very hard to make but it is our intention to keep the existing A&Es open ahead of the new hospital.

Every effort is made to ensure that the information contained in this briefing is correct at the time of publication. Readers should be aware that these briefings are not necessarily updated or otherwise amended to reflect subsequent changes.