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NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

New Hospital Site Consultation: Summary Consultation Document



A little about us

We are your local NHS organisation. We plan, organise, and provide health services for almost 400,000 people across Carmarthenshire, Ceredigion and Pembrokeshire, through:

► Four main hospitals

Bronglais Hospital in Aberystwyth, Glangwili Hospital in Carmarthen, Prince Philip Hospital in Llanelli, Withybush Hospital in Haverfordwest

► Five community hospitals

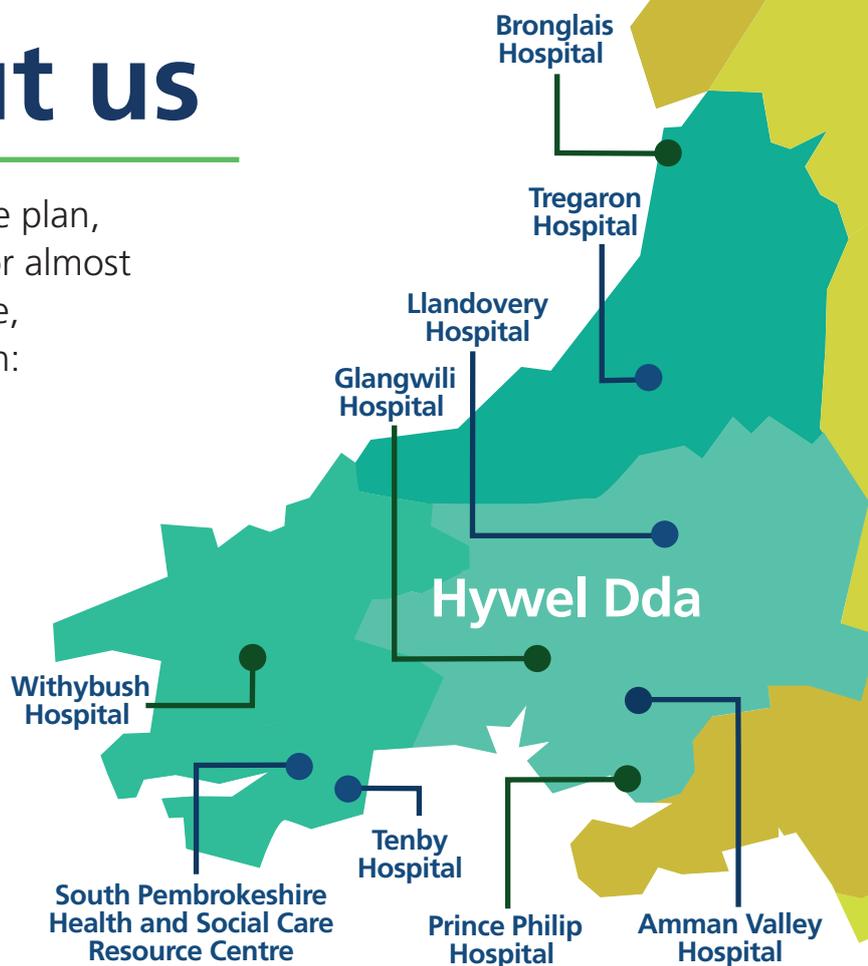
Amman Valley Hospital and Llandovery Hospital in Carmarthenshire, Tregaron Hospital in Ceredigion, Tenby Hospital and South Pembrokeshire Health and Social Care Resource Centre in Pembrokeshire

► Two integrated care centres

Aberaeron and Cardigan, both in Ceredigion

► Community facilities,

including:



48

General Practices
(GP surgeries)



49

Dental Practices



98

Community Pharmacies
(chemists)



44

General Ophthalmic Practices
(including eye health and low vision services)



38

sites providing mental health and learning disability services



Care within your own homes

Highly specialised services, such as some major trauma treatment, cardiac (heart) care, and complex burns, are organised through the national Welsh Health Specialised Services Committee. These services can be provided outside of the boundaries of our area, for example in Swansea or Cardiff.

What is this consultation about?

This consultation sets out three potential sites for a new Urgent and Planned Care Hospital in the south of the Hywel Dda University Health Board area – two near Whitland and one near St Clears. You can read more about the sites from page 12 of this document.

We do not have a preferred site and we have not bought any site or land for this development. Purchasing a site and delivering the new Urgent and Planned Care Hospital is subject to Welsh Government funding, which is not yet confirmed and if successful, would take several years to achieve.

In the meantime, we continue to work with you, our communities, to prepare and deliver the best health and care services that we can.

As part of this, we are consulting with all members of the public who live, work, or have an interest in our area, as well as organisations working in or interested in health and well-being, on the potential sites for the new hospital. You may receive our services, be a carer of someone who does, or work with us as staff, students, and volunteers. Whatever your interest in health and well-being, we want to hear from you.

There is a questionnaire with this document, to collect your views, or you can find one online from our consultation website hduhb.nhs.wales/new-hospital-site or by phoning us on **0300 303 8322** (local call rates).

We are asking you:

- Which of three potential sites you think is the best location for our new hospital and why
- Concerns you may have about any of the three potential sites, so we can be aware of them and avoid, address, or reduce, the impact of them if possible
- Anything else you think we need to consider, we look forward to hearing any new ideas you may have

We have already decided the following:

- The three sites we are consulting on
- The vision for services and structure of the hospital network agreed in our health and care strategy, A Healthier Mid and West Wales, which you can find on our website and summarised as:
 - A network of community health and care facilities supported by more community-based care
 - Three main hospitals:
 - A major new urgent and planned care hospital centrally located somewhere between Narberth and St Clears
 - Bronglais Hospital, Aberystwyth
 - Prince Philip Hospital, Llanelli
 - Two repurposed hospitals – Glangwili Hospital and Withybush Hospital – which will offer a range of community services



Board members will consider all they have heard leading up to, and during, this consultation, including the Equality and Health Impact Assessment, which will consider how people could be impacted and what needs to be done to reduce negative impacts. They will also consider any new information that may come to light as a result of the consultation or ongoing technical and commercial work, before making any decisions on the way forward.

How you can get involved

We aim to hold drop-in events and workshops, in person and on digital platforms, and will share regular updates on our website and our social media pages (see details below). We will also work closely with local media including local radio and press organisations.

Please take the time to read this document, and more information or alternative versions such as other languages, are on our website.

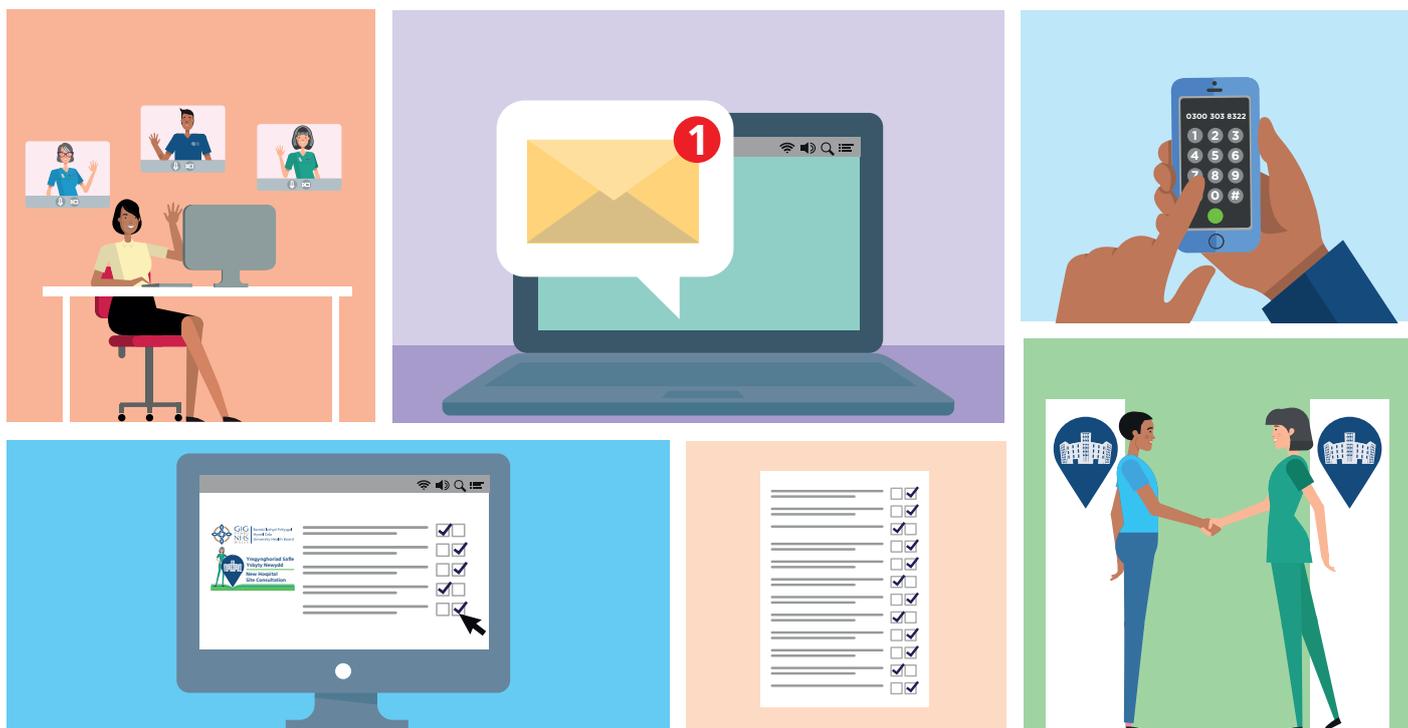
You can tell us what you think by:

- ▶ Completing the questionnaire accompanying this document and posting it to:
Opinion Research Services, FREEPOST SS1018, PO Box 530, Swansea, SA1 1ZL
- ▶ Online at: **hduhb.nhs.wales/new-hospital-site**
- ▶ Emailing us: **hyweldda.engagement@wales.nhs.uk**
- ▶ Speaking to us at one of our events (visit the website above for an event near you or online), or by telephoning **0300 303 8322** (local call rates)
- ▶ Through social media using **#HywelDdaHospitalSite**:

 Twitter **@HywelDdaHB**

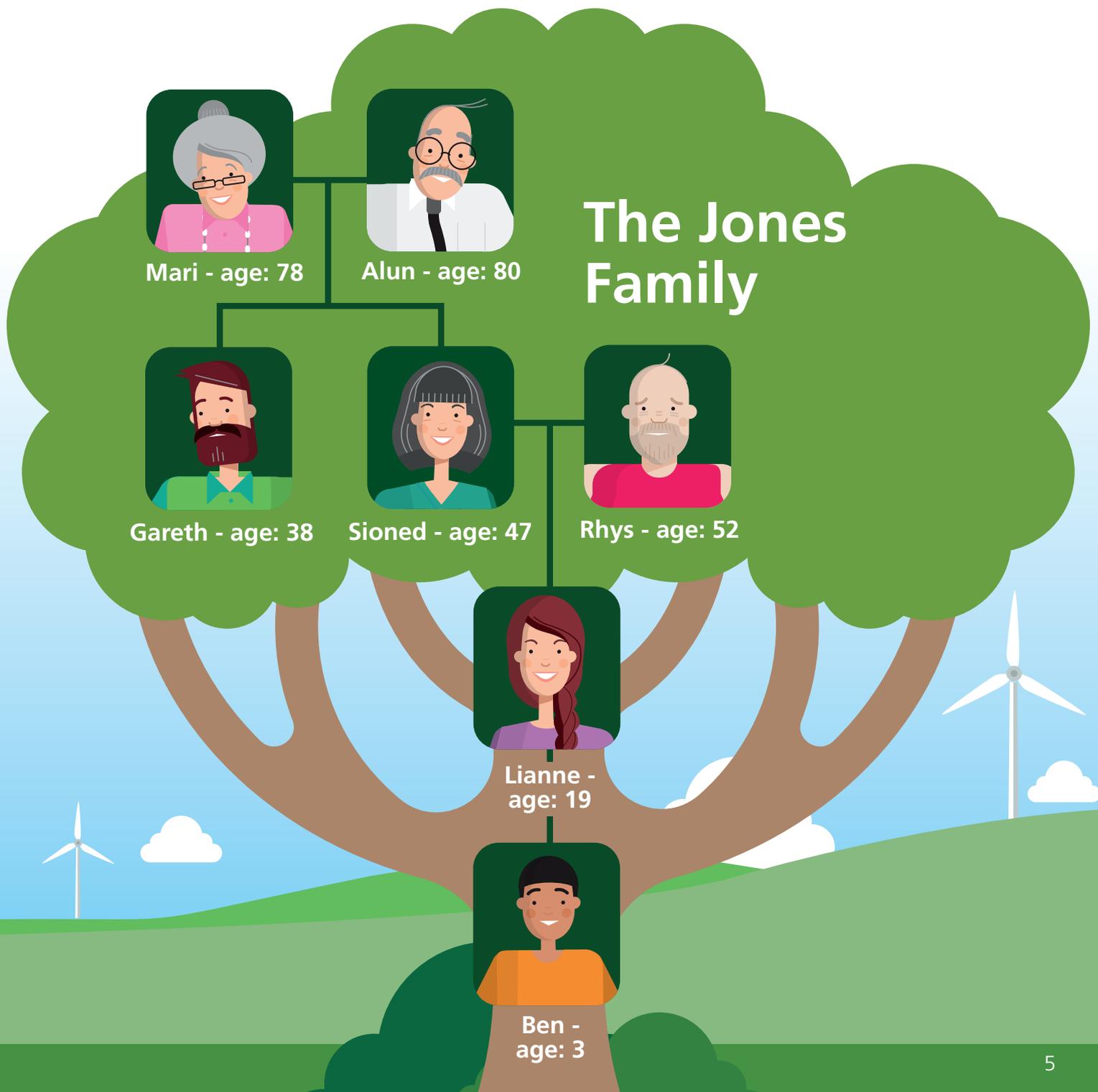
 Facebook **@SafleYsbytyNewyddHywelDdaNewHospitalSite**

The deadline to tell us what you think, so your opinions can be included in the consultation, is Friday 19 May 2023.



Teulu Jones - our illustrative family

We have a family – **Teulu Jones** – who help us test and show how different health services could affect someone like you. They aren't a real family, but they have been designed to be typical of the patients we care for in the Hywel Dda area. You will read in this document how hospital care could look for different members of the Teulu Jones family in the future. We hope these help you to think about how a new Urgent and Planned Care Hospital in one of the locations we are consulting on, could feel like to you.



What are the current challenges?

We have a shared vision with our communities for us to live healthy, joyful lives. We recognise that our health services, as they are currently organised, will not effectively deliver that vision and we describe some of the challenges below.

We have been talking to you with regular engagement about the future of health and care services since 2017 and we consulted with you in 2018. The consultation was called Our Big NHS Change and you can find out more about it by visiting our website hduhb.nhs.wales/new-hospital-site and visiting useful links in the Technical Documents area.

We asked you about community and hospital-based care. We learnt that receiving care and support where you need it is important and this should be as local as possible, although you understand there are times when you have to travel for care. We also heard that you are concerned about travel and transport, and how you will get to and access health services in the future. This is mainly due to our geography and areas of remoteness, but also links to how we use technology.

A summary of our challenges:

► Health of our communities

Our population is growing and people need more support to stay well and independent, especially in older age. Demand on health and care services is growing.



► Fragile services

The way we provide care has changed in 50 years and in our area we are duplicating care across four main hospitals, with differences in how we deliver services, safety, and quality. This means our services are fragile and it is difficult to develop some specialist services in our area, meaning people travel further for them and we want the opportunity to develop more of these locally.



► Workforce

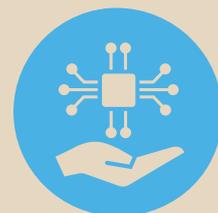
We have fewer staff than needed and our doctors cover more shifts (rotas) than at some other NHS organisations, causing us difficulties in keeping and recruiting staff.

This means we rely too much on expensive agency staff and due to them being unfamiliar with local guidance, procedures, and other team members, this risks poorer quality of care for you, and fragile services that may collapse.



► Digital

We do not currently fully use digital opportunities to best meet the needs of our population, especially for those who must travel to access services. Latest technologies will help you by connecting you with health care professionals and monitoring your conditions, and also help us to attract the best workforce.



► Buildings and facilities

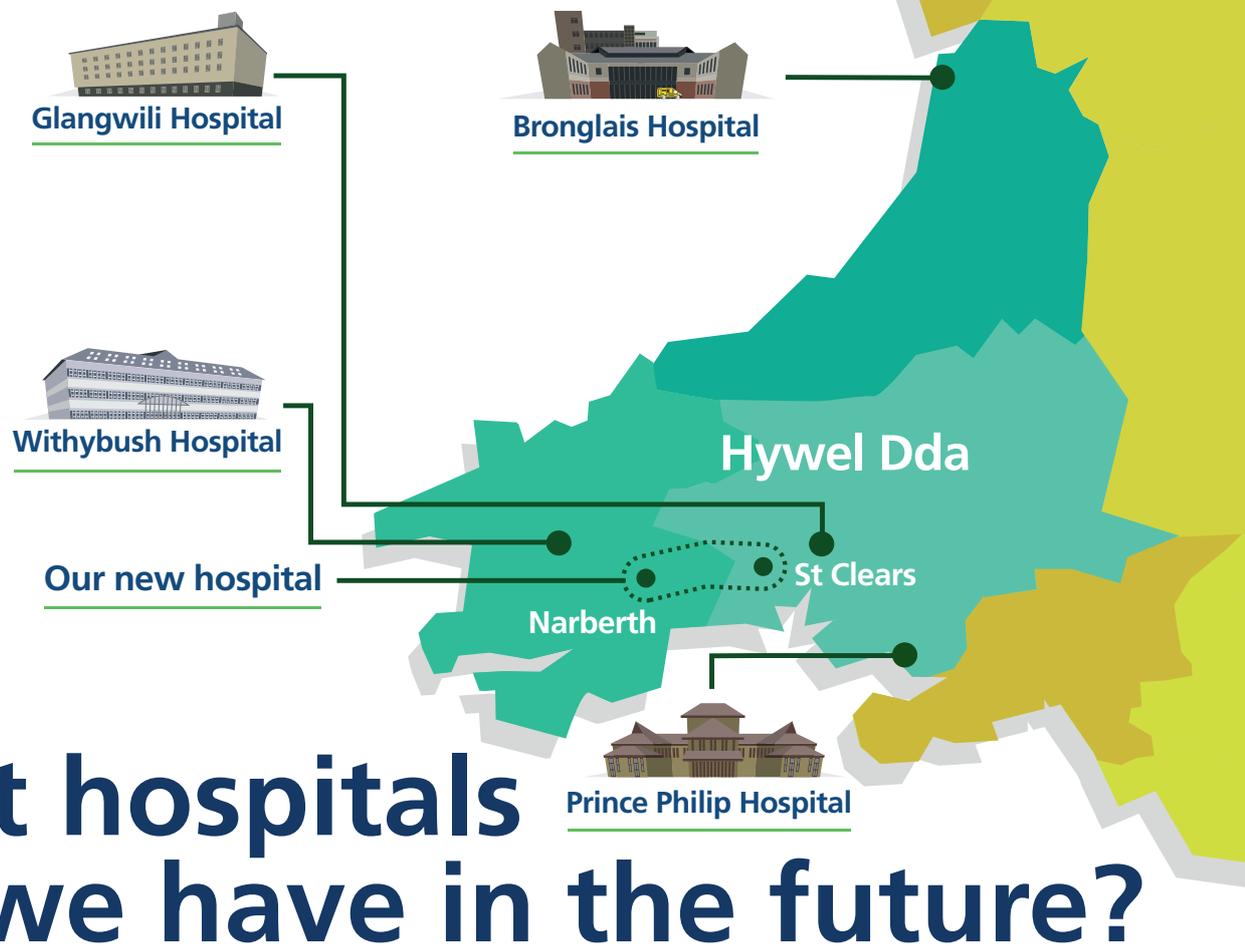
Hospital buildings, including most of Glangwili and some of Worthybush hospitals, are old and need a lot of maintenance to keep them working and safe. Their condition doesn't support delivery of modern healthcare and can mean poorer patient and staff experience.



► Environment

Our older buildings and other issues such as high levels of backlog maintenance, poor insulation and heating systems and using oil as a principal fuel source, mean that we have some of the least energy efficient sites from across Wales.





What hospitals will we have in the future?

We are developing plans to offer community facilities close to your home across Carmarthenshire, Ceredigion, and Pembrokeshire. They will be places where you can receive tests, care and treatment, and appointments. Some of these will have overnight beds, such as in Amman Valley, Cylch Caron (Tregaron), Llandovery, and South Pembrokeshire, and some will not, such as Aberaeron and Cardigan (already delivered), Carmarthen, Cross Hands, Fishguard, Haverfordwest, Lampeter, Llanelli, Llandysul, Milford Haven, Narberth, Neyland, Pentre Awel and Tenby.

To become a wellness system, we also need our main hospitals to provide quality specialist care that cannot be provided elsewhere in our communities.

Currently all four of our main hospitals provide medical services. They also all provide emergency departments, except Prince Philip Hospital, which has a GP-led Minor Injury Unit and Acute Medical Admissions Unit.

We agreed in our 2018 consultation that there will not be much change to the following hospitals:

- Bronglais Hospital will continue to provide urgent, emergency, and planned care services, with more specialist cases transferred to the new Urgent and Planned Care Hospital, as well as regional sites for more critical care, as happens now.
- Prince Philip Hospital will continue to provide GP-led minor injury care, as well as acute adult medical care with diagnostic support. This will include consultant-led overnight inpatient beds for patients to be cared for locally.

Both hospitals will also transfer more specialist cases to the new Urgent and Planned Care Hospital, as well as other regional sites for more critical care, as happens now.

The main changes to hospitals will be:

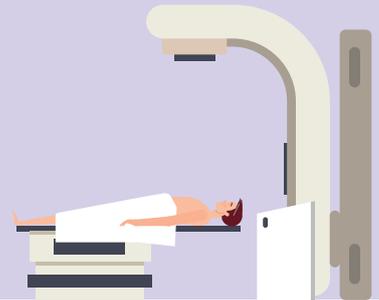
- Glangwili and Wwithybush hospitals will be re-purposed as community hospitals. Both will provide 24/7 GP-led urgent care centres. They will have facilities for day case procedures, as well as therapy and nurse-led beds for less critical needs and rehabilitation. Diagnostic support (x-ray, ultrasound etc.) will continue, as well as outpatient and other clinics.
- Our new Urgent and Planned Care Hospital will be the main hospital site for both urgent and planned care in our region (Carmarthenshire, Ceredigion, and Pembrokeshire). It will provide specialist children, adult, and mental health services in a more centralised way. It will function as our Trauma Unit and main Emergency Department.

Benefits of having a new Urgent and Planned Care Hospital

A new purpose-built environment will allow us to meet standards for modern healthcare and improve the patient and staff experience



There are more services we could offer from a new hospital, within the boundaries of Hywel Dda, which we are not able to now (we are exploring options for providing some specialist services such as radiotherapy, neurology services, and cardiac catheterisation services)



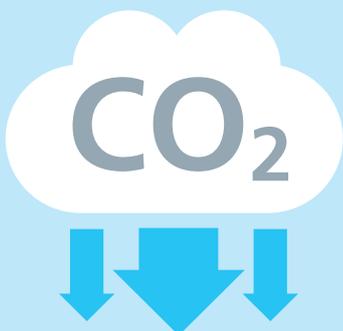
A reduction in the duplication of some services across sites will allow us the scale to provide better care, for example access to senior clinical decision makers quickly (i.e. 24/7)



The experience we have seen in other places is that staff want to work in new hospitals as they have the latest facilities and technologies and can provide for employee well-being



It would also allow us to offer more attractive rotas (for example fewer unsociable hours) to medical staff and trainees, and to provide health education, academic, research and innovation facilities on the site, for all clinical staff, including nurses and therapists



Planning and delivering care differently, and having modern and efficient buildings, would support us to reduce our carbon footprint and help us meet our target of 34% carbon reduction by 2030

Re-purposing Glangwili and Withybush as community hospitals with facilities for step-up or step-down beds and care, and strengthened community services, will help us reach our ambition to discharge most patients from the Urgent and Planned Care Hospital to their own homes or more local hospitals within 72 hours



By separating planned and emergency care at the new hospital, we will avoid the risk of emergency activity negatively affecting planned care through cancelled operations



► Teulu Jones

Gareth Jones

Gareth is 38 years old and lives in Talybont, Ceredigion. On his Saturday cycle ride with the 'Whealers', Gareth has a serious collision with a car, near Aberaeron. Doctors from the Emergency Medical Retrieval and Transfer Service (EMRTS Cymru) arrive at the scene.

Currently they would take Gareth to Glangwili Hospital, which is 31 miles away, as it is the temporary local trauma unit whilst we await a new Urgent and Planned Care Hospital.

In the future, if we had an Urgent and Planned Care Hospital, Gareth would be taken directly to this hospital. The journey to the two site options in Whitland would be approximately 36 miles from the scene of the accident in Aberaeron, or 37 miles to the site in St Clears. The difference in journey time between the three sites is negligible and unlikely to result in any impact on the timeliness to access care for Gareth.



What happens if we don't change?

If we do nothing, we will not be able to deal with the growing demand for health services, or address our problems in keeping and recruiting staff and making our services more stable. This is likely to lead to:

- longer waiting times at Emergency Departments
- more operations in hospitals being postponed
- insufficient hospital beds
- missed opportunities to prevent illness or avoid deterioration
- worsening infrastructure and technological capability
- greater problems being able to recruit and keep appropriate qualified doctors, nurses, and healthcare professionals to care for you
- fragile services, meaning higher risk of unplanned service change or cuts with the stopping of some services or medical procedures and may mean patients travelling further, even to neighbouring health boards.

Most importantly, doing nothing would likely mean:

- lower safety standards
- worsening impact on health
- reduced survival rates

We do not want to see this happen and our strategy seeks to change our services to meet the needs of future generations.

What has happened so far

In February 2022, we sent a Programme Business Case (PBC) to Welsh Government.

A PBC is a high-level document, which sets out to secure Welsh Government support for a programme of investment. You can read the full PBC document by visiting hduhb.nhs.wales/new-hospital-site and viewing useful links under the Technical Documents section.

The development of our new hospital is subject to this Welsh Government support, and, if funding was not agreed, we would not be able to purchase the site for the new hospital.

Our PBC seeks the greatest investment into health and well-being that west Wales will have ever seen, in the region of £1.3billion. It builds on our promise to bring as much care as possible close to you, including building or developing lots of community facilities (listed on page 7), repurposing of Withybush and Glangwili Hospitals, refurbishment of Bronglais Hospital and Prince Philip Hospital, as well as building a new Urgent and Planned Care Hospital.

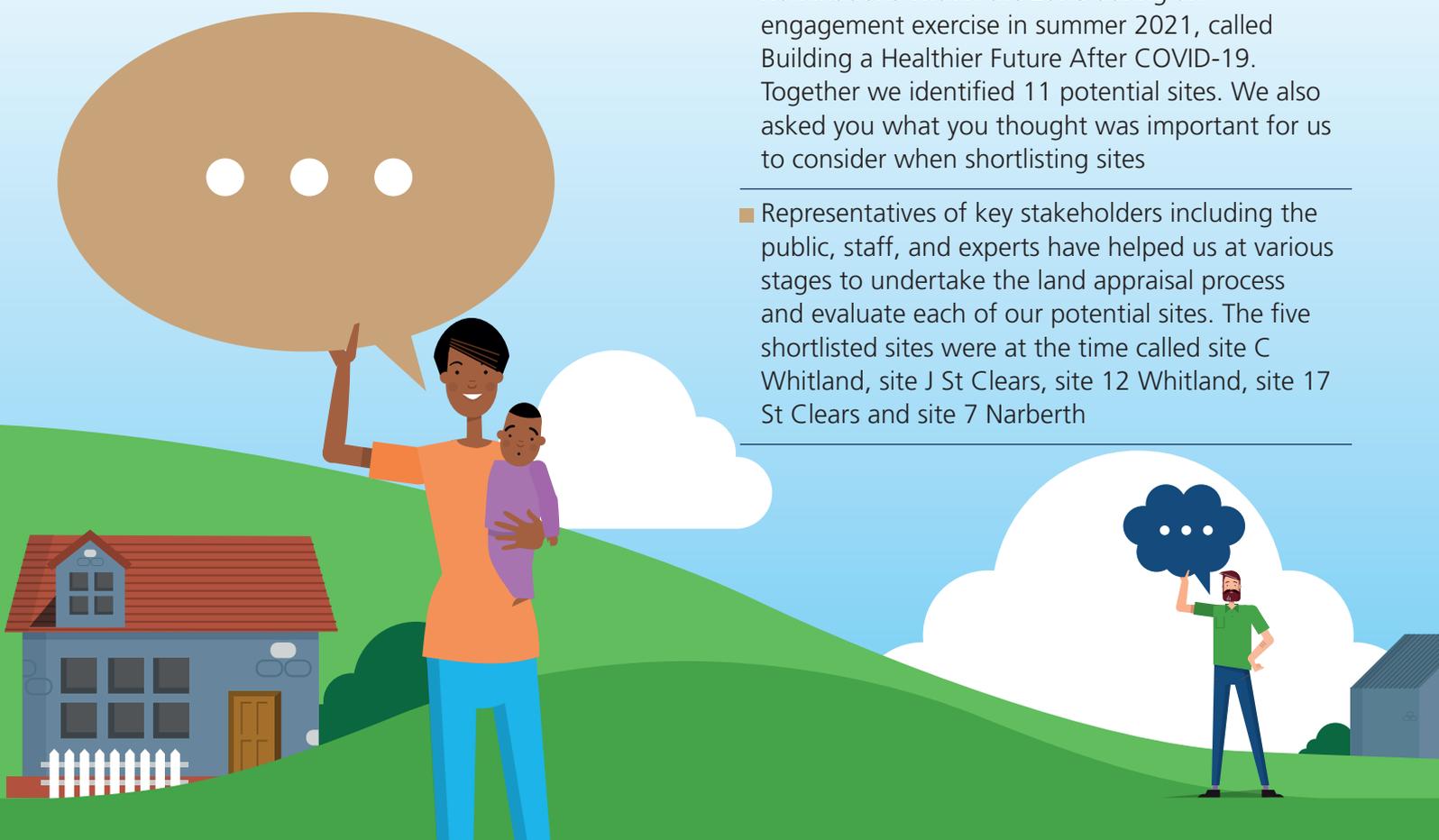
If successful in this first stage, there are then three further stages, which could take several years, to secure the ultimate investment needed to deliver the facilities listed on page 7. We have decided to consult with you on the potential site for a new Urgent and Planned Care Hospital now, prior to receiving investment, because we have committed to continuous engagement with you and because our services are fragile, and we cannot lose time in delivering our vision.

Exploring possible new hospital sites - what we learnt and did

The overall geographical zone for the new hospital - between Narberth and St Clears – was agreed because it is the area that would mean most of our population is within an hour of an emergency department (either this hospital, Bronglais Hospital, in Aberystwyth or Morryston Hospital, in Swansea).

We have done a lot of work to narrow down options for specific locations:

- We looked for sites and asked you for site nominations within the zone during an engagement exercise in summer 2021, called Building a Healthier Future After COVID-19. Together we identified 11 potential sites. We also asked you what you thought was important for us to consider when shortlisting sites
- Representatives of key stakeholders including the public, staff, and experts have helped us at various stages to undertake the land appraisal process and evaluate each of our potential sites. The five shortlisted sites were at the time called site C Whitland, site J St Clears, site 12 Whitland, site 17 St Clears and site 7 Narberth



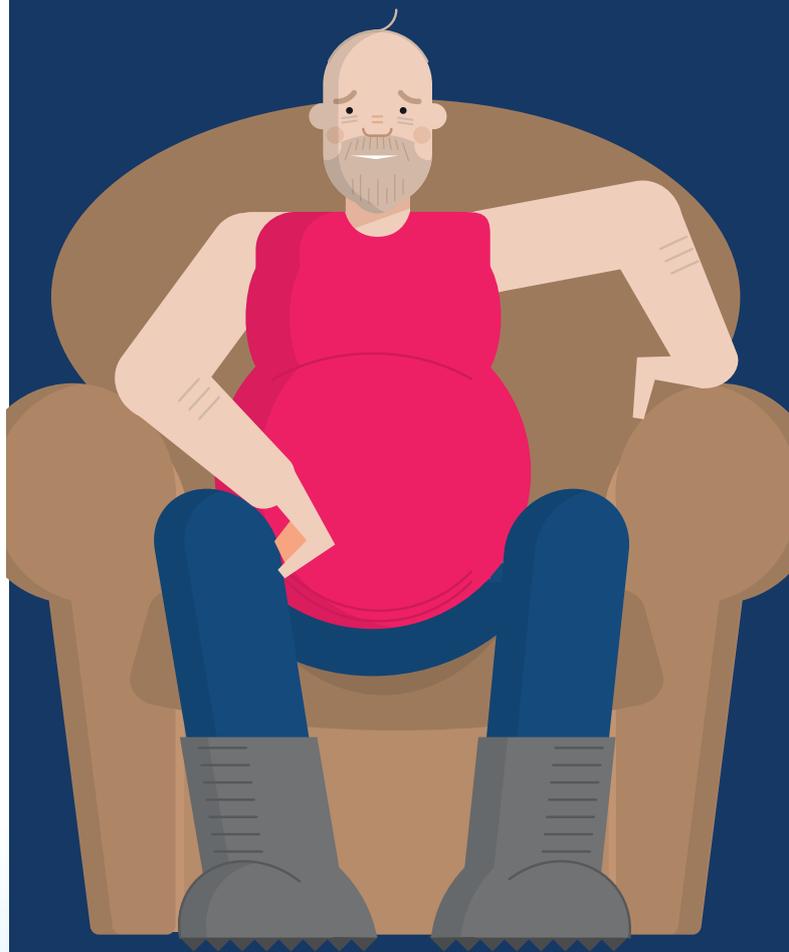
- Four 'land appraisal groups' looked at the five sites from the viewpoint of clinical considerations, financial and economic considerations, workforce considerations and technical considerations, including what was important to the public. You can read more detailed reports from each of them by visiting our new hospital site consultation web pages in the Technical Documents section (they are called Technical Appraisal Output Reports).

In a Public Board Meeting on 4 August 2022, Health Board members heard all the outputs from the land appraisal groups. The Board said the two sites in Whitland (sites 12 and C) and one of the sites in St Clears (site 17) should remain under consideration and unanimously agreed to consult with the public on these sites.

The sites eliminated and the reasons why were:

- St. Clears (site J) - This site had the highest risk score based on the characteristics of the site such as difficulties with emergency access to the site and being more remote from a town centre. It also scored quite a bit lower than the other sites in the technical appraisal process with the public.
- Narberth (site 7) – The clinical appraisal groups had concerns about this site, due to it being further west. They were concerned that this site may lead to a reduction in the number of people choosing to have their babies in Hywel Dda, as opposed to further east, which could also affect neonatal and paediatric care. This could pose a risk to the critical amount of activity needed to keep services safe and sustainable. It could also have a negative impact on bed numbers and keeping trainee status, which is our ability to train doctors, nurses, and midwives.

► Teulu Jones



Rhys Jones

Rhys, is 52 years old, a long-distance lorry driver, who lives in Tumble, near Llanelli. Rhys needs orthopaedic surgery to help his knee, which has been giving him lots of trouble. Currently his operation would be at Prince Philip Hospital, Llanelli. The operation may be postponed a couple of times due to emergencies and staffing problems, but he receives it after an 18 month wait. He finds it difficult to attend follow-up physiotherapy at the Llanelli hospital in the weeks following the operation, as he struggles to find family to drive him.

When the new Urgent and Planned Care Hospital is open, Rhys would have his operation there. His operation would be less likely to be postponed as they have designed the hospital so that emergency and planned care are provided in different areas. Following the surgery, Rhys would be able to have physiotherapy in a community health facility near Tumble and he doesn't have to go back to the main hospital as his follow-up with the consultant is on the computer online.

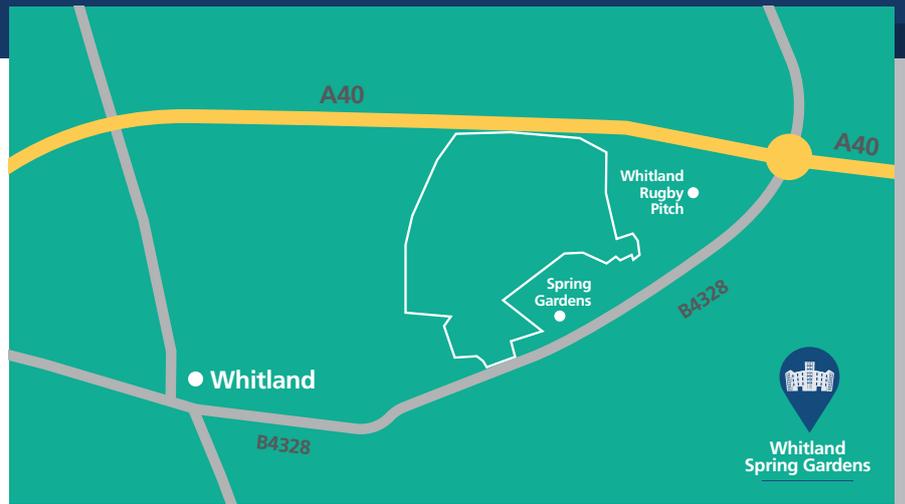


Site options in this consultation

The three potential sites are within a small geographical area in the south of the Hywel Dda area, within the county of Carmarthenshire and close to the border with Pembrokeshire:

► Whitland Spring Gardens

(formerly site 12) is a short distance north-east of the centre of Whitland. It is between the A40 to the north, Whitland Rugby Pitch to the east, and Spring Garden Homes to the south.

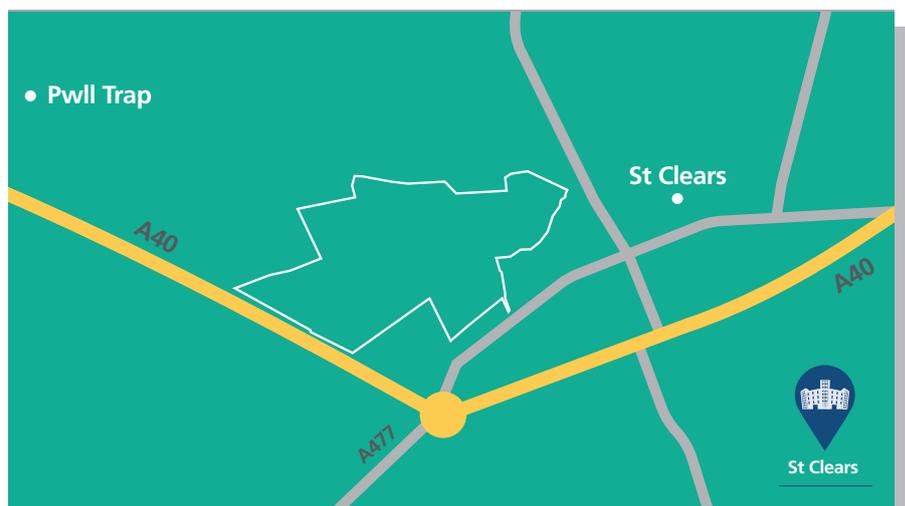


► Whitland Tŷ Newydd

(formerly site C) is part of Tŷ Newydd Farm. The site is to the east of the old Whitland creamery site. The town centre and the A40 road are less than one mile to the north of the site.



► **St Clears** (formerly site 17) is land at old Bryncaerau fields, next to the junction of the A40) and A477 in St Clears. The A4066 Tenby Road is to the south, the village of Pwll Trap to the north, and the A40 to the west.



The three sites are similar in many ways:

- They are all big enough for the new hospital and on agricultural land
- They are all considered greenfield, which means they have not been developed and evaluation has found they are all suitable for development
- Detailed town planning processes will have to be followed for any site chosen, but feedback so far has not identified any significant planning issues
- They are all close to small towns with similar local amenities such as shops, schools, housing etc.
- The local towns and areas would see economic benefit by having a nearby hospital, but it has not been possible to decide if this would be different per site given how close they are
- They are all within the original zone for the new hospital, between and including Narberth and St Clears
- It is acknowledged that traffic flow to hospitals in our communities is heavier in the summer months. Due to how close the sites are to each other, this is a common consideration for all our sites
- Whitland and St Clears (and therefore the three sites) are served by bus routes connecting to Haverfordwest and Carmarthen. All sites would require more bus services to connect communities. They would need more frequent services, running over longer periods of the day, to suit the needs of shift workers and visitors
- All sites have gas, electricity, and water available, but there would be a need for significant upgrades
- Improvement to local roads and traffic management would also be needed on all sites, but they all have potential for more than one access point
- The cost of building the new hospital is expected to be the same on all sites (estimate £736.9m) but there are some additional costs to securing or adapting each site (see table on page 14). You can see more detail about this by visiting our website [hduhb.nhs.wales/new-hospital-site](https://www.hduhb.nhs.wales/new-hospital-site) in the Technical Document area and the report is called the Site Cost Summary
- For all sites we could design the buildings to make the most of sunlight and the natural environment, not only in the outdoor spaces but within the buildings themselves (biophilic design, which is discussed further on page 18)
- There is an aspiration for all sites to be supported by 'place-making' which is a process of creating quality places that people want to live, work, play and learn in
- The sites do not lie within a Special Area of Conservation and do not require added work associated with prevention of phosphate pollution
- A historic and desktop-based review of all sites showed no significant sources of contamination
- Potential environment effects cannot be ruled out on any of the sites at this stage and so all of them would likely need a statutory Environmental Impact Assessment to support a planning application

Due to the similarities between the sites, groups of people who considered them from certain viewpoints (see earlier chapter on 'What has happened so far') found the differences between them were often too small to have an impact on site recommendations:

- The group looking at technical information about the sites, on their characteristics and what our public thought were important things to consider. Whitland Spring Gardens scored 373, Whitland Tŷ Newydd scored 366 and St Clears scored 372.
- Similarly, scores given by technical experts for the risks associated with different sites, were not materially different, with a score of 145 for Whitland Spring Gardens, 145 for St Clears, and 144 for Whitland Tŷ Newydd.
- The workforce group found little difference between the sites in terms of recruitment or effects on sustaining a workforce.

- The finance and economic group found whilst there were differences in capital costs (outlined in the table page 14), there was less than 2% difference in the overall estimated costs of the development.

Through the land selection process for our new Urgent and Planned Care Hospital, we undertook engagement with our clinical teams. This work included a process to identify which clinical and support services may have their viability for providing services impacted by the specific siting of the new hospital within an area of the agreed zone between and including Narberth and St Clears (i.e. either further east, central, or west). This exercise, combined with a previous commitment from our Health Board to further explore the impact of a new hospital on women and children's services, resulted in two clinical appraisals. They were:

- Stroke services
- Paediatric, obstetric, and neonatal care services

The clinical expert group for stroke services found any of the areas within the zone would be suitable for a new Urgent and Planned Care Hospital due to the focus on how patients are treated beyond their admission.

The expert group for obstetrics, neonatal services and paediatrics had the viewpoint that there was a difference for the services in the positioning of the

hospital within different areas of the zone.

Below, we provide the different characteristics between the sites, including this clinical viewpoint.

You can read more detailed reports about each site by visiting our website:

hduhb.nhs.wales/new-hospital-site

and viewing the Technical Document called Public Board Reports 04 August 2022.

| Criteria | Whitland: Spring Gardens (formerly site 12) | Whitland: Tŷ Newydd (formerly site C) | St Clears (formerly site 17) |
|---|---|--|--|
| Clinical viewpoint neonates, obstetrics, paediatrics | Some risk that national guidelines on minimum patients treated may not be met, which could affect quality and safety, and staff recruitment and retention | | Least risk to guidelines on minimum patients treated |
| A&E/Emergency Department travel time (average compared against now) | 9 minutes longer (on average) 7% population would have faster 999 access to an Emergency Department | 9 minutes longer (on average) 7% population would have faster 999 access to an Emergency Department | 6 minutes longer (on average) 6% population would have faster 999 access to an Emergency Department |
| Car travel: instead of Glangwili (for settlements with 1,000+ residents) | 13 minutes longer (on average) | 13 minutes longer (on average) | 7 minutes longer (on average) |
| Car travel: instead of Withybush (for settlements with 1,000+ residents) | 12 minutes longer (on average) | 12 minutes longer (on average) | 14 minutes longer (on average) |
| Access by road | Direct access from A40 | Currently, no direct access, requires improvements to local roads or would need new highway link directly to the A40 | Direct from A40 and A477 |
| Distance from train station | 750m | 250m | 1000m (once station reinstated) |
| Land ownership | Multiple private landowners | Public ownership | Single private landowner |
| Flood risk | Low | Yes, on small part – would not build on affected areas | No |
| Scope for future expansion | Limited scope | Some scope | Limited scope |
| Scope for renewable energy (not costed) | Potential for offsite | Potential onsite | Potential for offsite |
| Potential additional costs (subject to inflation) | £19.9m | £28.2m | £20.7m |

Travel and transport

We want to bring care closer to home and reduce travel for unnecessary hospital admissions or long lengths of stay. We are planning significant investment in community facilities close to where you live. This will ensure that you can continue to receive your care mostly in your own home and communities, or from more local hospitals.

We are developing a Transport and Accessibility Strategy. This will set out our vision for transport to the hospital and our community services and will cover issues such as emergency and non-emergency patient transport, public and community transport, staff travel, decarbonisation, car parking and taxi or courier provision.



Timely access in an emergency

We know some of you are worried about prompt access to care in an emergency. Ninety-three percent of you are within a one-hour travel time by car to an emergency department, if the new hospital is within the zone between and including Narberth and St Clears, and considering Bronglais Hospital in Aberystwyth, and Morriston Hospital in Swansea.

Some emergencies, such as serious road traffic accidents, are responded to by clinicians coming to the scene by road vehicle or Air Ambulance, this is called the Emergency Medical Retrieval and Transfer Service (EMRTS Cymru). Care at the scene reduces the risk associated with travelling to a treatment centre. We are pleased to have seen the improvements in access to Wales Air Ambulance, which has increased to a 24/7 service since July 2020.

Through the new Urgent and Planned Care Hospital, we will also have more senior, specialist doctors available at the front door so you have quick access to them, and all the support services needed for your care.

You can read more information about travel times to the sites by visiting our website [hduhb.nhs.uk](https://www.hduhb.nhs.uk) in the Technical Document section. The report is called the WAST Site Selection Technical Analysis and it is part of a several reports included in the Public Board Reports of 04 August 2022. It includes analysis of existing travel times by different transport, including bus and rail routes, as well as car and emergency transport.



Non-emergency transport and travel

The Welsh Government's Wales Transport Strategy 2021 aims to encourage people to change their travel behaviour to make greater use of low-carbon, sustainable travel. This includes making alternatives to car travel, such as walking and cycling, and public transport more attractive, easier to use and more affordable.

We know this will be difficult for people living further away from the hospital, or when someone needs emergency care, or is not able to for other reasons. However, in line with national policy, we are developing our new Urgent and Planned Care Hospital with a prioritisation for active travel.

This means we want to make it as easy as possible, and encourage all those who can, to walk or cycle to the hospital. We also want to support public transport over transport by car,

so will work with other people to improve the public transport to the final hospital site. We acknowledge transport by car will be necessary for some people, and that enough parking is needed for those patients, staff, and visitors who need to travel by car.

Our Transport and Accessibility Strategy will agree a vision for transport system opportunities across the Hywel Dda area, as well as a transport model to serve the new hospital.

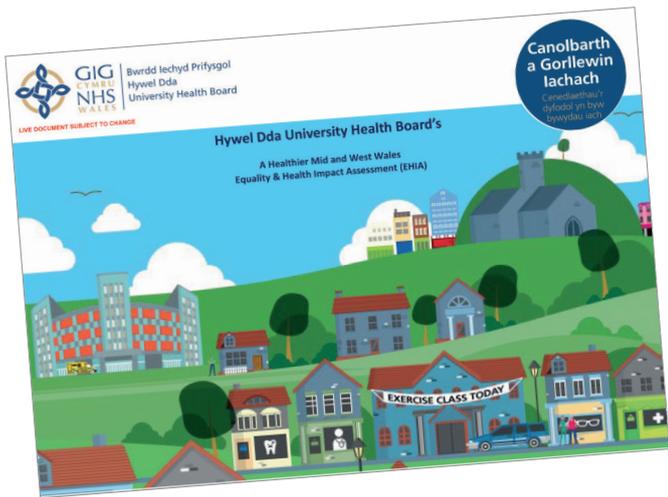


Ben

Ben is three years old and lives with his mum Lianne, and Mamgu and Tadcu, in Tumble, near Llanelli. Ben is on holiday in Goodwick, Pembrokeshire, when he slips on the steps whilst crabbing. He has a little bump to his head and a cut above his eye.

Currently, for a minor injury, Ben would go to Withybush Hospital, Haverfordwest. If he needed to stay overnight, he would be transferred to Glangwili Hospital. Doctors may decide to keep him in overnight in case he deteriorates. He may be discharged the next day and any follow-up outpatient appointments would be in Glangwili Hospital, in Carmarthen, which is a 20 minute or so drive away.

When a new Urgent and Planned Care Hospital is in place, Ben would go to Withybush Community Hospital for treatment. If doctors felt he needed an overnight stay in case of deterioration, they would transfer him to the new hospital. He may be discharged the next day. A follow-up outpatient appointment would be in a community health and care facility close to where he lives in Llanelli, saving on time, travel, and cost.



Equalities and health impacts

Changing health and care services will affect all of us living in the Hywel Dda area regardless of age, sex, disability (physical, mental health and learning disabilities), race, religion, sexual orientation, gender reassignment, marriage or civil partnership, or pregnancy and maternity status.

We must ensure that our proposals are fair to all and take particular care to consider people who are vulnerable. We have already engaged with groups representing vulnerable people and will continue to do so to ensure they are involved throughout our consultation.

We have produced what is called an Equality & Health Impact Assessment (EHIA) for the whole of our programme business case, which includes delivery of our new Urgent and Planned Care Hospital.

The EHIA, includes an overview of the potential positive and negative impacts on people, and how we will mitigate them and address our equality duties. The document is used to help decision makers when considering future developments.

The document will be continually updated as we learn more and is available in full by visiting our site consultation web pages under Technical Documents. If you would like further detailed information, this can be obtained by contacting: hyweldda.engagement@wales.nhs.uk

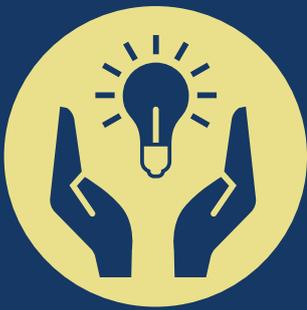
How will this contribute to well-being and future generations?

Our transformation, including delivery of our new Urgent and Planned Care Hospital is part of our response to the Well-being of Future Generations (Wales) Act 2015.

At all stages, we are considering the long-term impact of our decisions aimed at working better with people, communities, and each other, and to prevent persistent problems such as poverty, health inequalities and climate change.

One example, is our Decarbonisation Delivery Plan, which will contribute to the Welsh Government's ambition for NHS Wales to contribute towards a public sector wide net zero target by 2030. Our aim is to reduce our carbon footprint by 34% by 2030.

We will also design our new Urgent and Planned Care Hospital and other community facilities following the principles of biophilic design. This means that our buildings and surrounding areas reflect our natural environment – not only in the gardens, but within the wards, offices, and corridors. Benefits can include a calmer environment for staff, patients and their families, increased creativity, productivity, reduced stress, reduced post-operation recovery times, and reduced use of medication.



**A prosperous
Wales**



**A resilient
Wales**



**A globally
responsible Wales**



**A Wales of vibrant
culture and thriving
Welsh language**



A healthier Wales



**A more equal
Wales**



**A Wales of
cohesive
communities**

Next steps

The consultation runs from 23 February 2023 to 19 May 2023, so you need to tell us what you think by the 19 May so your opinions can be included. You can read on page 4 of this document how to get involved.



Your feedback and privacy statement

We have contracted an independent research organisation, Opinion Research Services, to collect and analyse all the feedback received as part of this consultation. Together with them, we are collecting your feedback so we can use your views to help us with our decision making about a site for a new Urgent and Planned Care Hospital. You can read our full privacy statement on our website, visit: hduhb.nhs.wales/new-hospital-site and search 'consultation privacy notice'.

We are listening

We know it is important to keep you updated, especially when you have taken the time to share your thoughts and views with us.

The output report will be published, fully considered, and discussed as part of a dedicated Health Board meeting likely held towards the end of the summer 2023.

Please join our membership database Siarad Iechyd Talking Health by emailing Hyweldda.Engagement@wales.nhs.uk, calling **0300 303 8322** (local call rates), or writing to us at: **Opinion Research Services, FREEPOST SS1018, PO Box 530, Swansea, SA1 1ZL** if you would like to be kept up-to-date on what is happening and decided.





Thank you | Diolch yn fawr
