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# Prince Philip Hospital Minor Injury Unit

Stakeholder Reference  
Group  
1 May 2025

# Background



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The Board of Hywel Dda University Health Board (Hywel Dda) approved a temporary change to the opening hours of the Minor Injury Unit (MIU) in Prince Phillip Hospital (PPH) for a six-month period at the Public Board meeting in September 2024. The unit is currently open between 8am – 8pm, seven days per week, rather than the previous 24 hours / 7 days.

This change was proposed by the Carmarthenshire Unscheduled Care Management team due to a significant and continued lack of medical cover, leading to clinical concerns in relation to patient safety. Additionally, it has been shown that a significant number of people attending the MIU had a higher acuity than the MIU was intended to deliver a service for. This position was reinforced by recommendations following a Health Inspectorate Wales (HIW) Inspection visit and further correspondence from HIW requesting reassurance on patient safety issues.

Following this decision, the temporary reduced opening hours of the MIU came into effect from the 1<sup>st</sup> November 2024.

# Key issues for consideration



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In the update to Board in November 2024, an Issues Paper was provided, which sets out the issues currently facing the Minor Injuries Unit and would need to be addressed by any options developed. The issues were

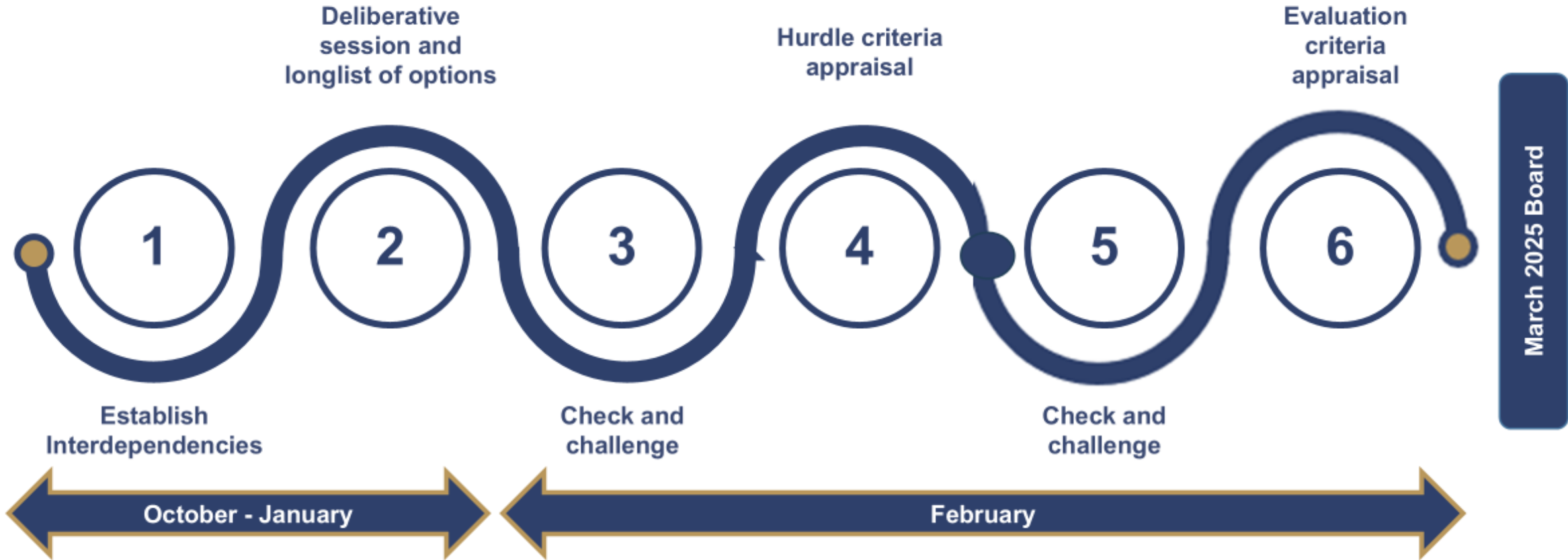
- Workforce fragility and clinical risks
- The acuity of patients attending the Unit (Majors versus Minors)
- Workforce working outside (and/or under) their scope of practice
- Inappropriate attendance of Mental Health patients
- Concerns over the safety of the Unit – HIW inspection June 2023
  - HIW was not assured that all aspects of care were being delivered in a timely and effective manner within the Minor Injury Unit (MIU) to medical and surgical patients in ‘surge’ beds.
  - The environment was not an appropriate environment for medical or surgical ‘surge’ patients who are admitted beyond the lengths of stay associated with an MIU.
  - HIW could not be assured that there was sufficient and robust support for Emergency Nurse Practitioners (ENPs) at times when there is an unexpected lack of medical cover on the Unit, e.g., overnight. This creates a high-risk situation for nursing staff and patients due to the issues raised above. Consequently, levels of anxiety and stress among the ENPs has increased. This has been expressed in meetings with the Senior Management Team.

# What has happened so far



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# What has the data told us?



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- Winter is usually the busiest time of the year, but the overall demand is similar between November/ December 2023 and November/ December 2024
- Attendance levels in PPH MIU have reduced but is reflective of the overnight closure
- The levels of PPH AMAU attendance are consistent
- The number and proportion of majors attending MIU have decreased
- Waiting times in PPH MIU have decreased slightly and there has been no increase in waiting times in GGH for Llanelli patients
- 4 hour and 12-hour breaches in the PPH MIU have reduced
- 111 data shows a slight increase in total calls since the temporary change.
  - Slight decrease in 111 calls being transferred to PPH MIU, reflective of the overnight closure
  - Increase in 111 calls being transferred to 999 or emergency department, reflective of the majors who used to attend PPH MIU overnight
- There has been no increase in Llanelli patients attending Morriston

# Themes from our engagement



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- **Transport and travel concerns:** Lack of car ownership, no transport to Glangwili or Morriston overnight, longer travel times, increased time commitment, and high taxi costs
- **Impact on A&E and MIUs:** Increased waiting times at Glangwili, overcrowding at MIUs due to inability to get GP appointments, and long waiting times at alternative A&Es
- **Anxiety and worry:** Concerns for elderly and vulnerable patients, especially overnight medical issues
- **Staffing and service provision:** Worries about non-clinical staff, community care provision, workforce availability, retention, recruitment, and training needs
- **Communication and information:** Need for clear messaging about MIU ailments/injuries, service scope, and changes. Better utilisation of existing facilities
- **Mixed experiences and desired changes:** Positive experiences at PPH MIU but difficulty accessing Morriston or Swansea A&Es. Requests for longer opening hours, more services, and suggestions for a full A&E or 24-hour MIU service in Llanelli
- **Appointment challenges:** Inability to get GP appointments, leading to reliance on MIU. Frustration with long phone queues and lack of available appointments
- **Operational, risk and safety concerns:** Clarifying the operating model, managing pathways, planning for Out Of Hours service, and emergency plans. Assessing the current model's impact, addressing night access concerns, conducting assessments, managing anxiety, ensuring compliance, and mitigating risks by reducing hours initially. Ensuring a safe, re-assessable option with stable goals
- **Evolution, collaboration and feasibility:** Modernising operations, improving resource use, exploring collaboration, cross-skilling staff, using new technology, emphasising teamwork and community focus. Addressing doubts about 24-hour service, stabilising the current model, and managing the impact on weekends, bookings, and walk-ins



## Public Board Meeting - 27 March 2025

- Agreed to go out to formal 12-week consultation on the shortlisted options
- Agreed that the current temporary overnight closure continue until the implementation of a new model following the consultation / Board decision
- That the consultation report and outcome be presented to Board for approval in September 2025\*, with an interim update report in July 2025

*\*It is important to note that while the timeline proposes September Board for final consideration and decision, this will be determined by the level of responses received and may need to go to the next planned Board in November 2025 unless an extraordinary Board meeting is scheduled to take place in between.*

# Shortlisted options



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Stakeholders, as part of the options development process, shortlisted four potential options.

The four options being consulted on are:

➤ **Option 1 - Doctor-led service available every day for 12**

This is how the service is currently being delivered and is open to the public from 8am-8pm, with a further two hours staffing to allow patients in the unit to be treated.

➤ **Option 2 - Doctor-led service available every day for 14 hours**

This option would mean the service is open to the public from 7am-9pm, with a further two hours staffing to allow patients in the unit to be treated.

➤ **Option 3 - Doctor-led phased service, available every day initially for 12 hours, increasing to 14 hours, and then 24**

This would initially be open to the public for the current 12 hours, plus two hours staffing, moving to 14 hours plus two hours staffing, and ultimately 24 hours overall, returning the service to pre-November 2024 operating hours.

➤ **Option 4 - Urgent care centre (Same Day Urgent Care\* type model) available every day for 14 hours a day**

This option would be a new way to deliver the service and would see the Minor Injury Unit and the Same Day Emergency Care (SDEC)\* services come together. This would be open to the public from 7am-9pm, with a further two hours to allow patients in the unit to be treated.

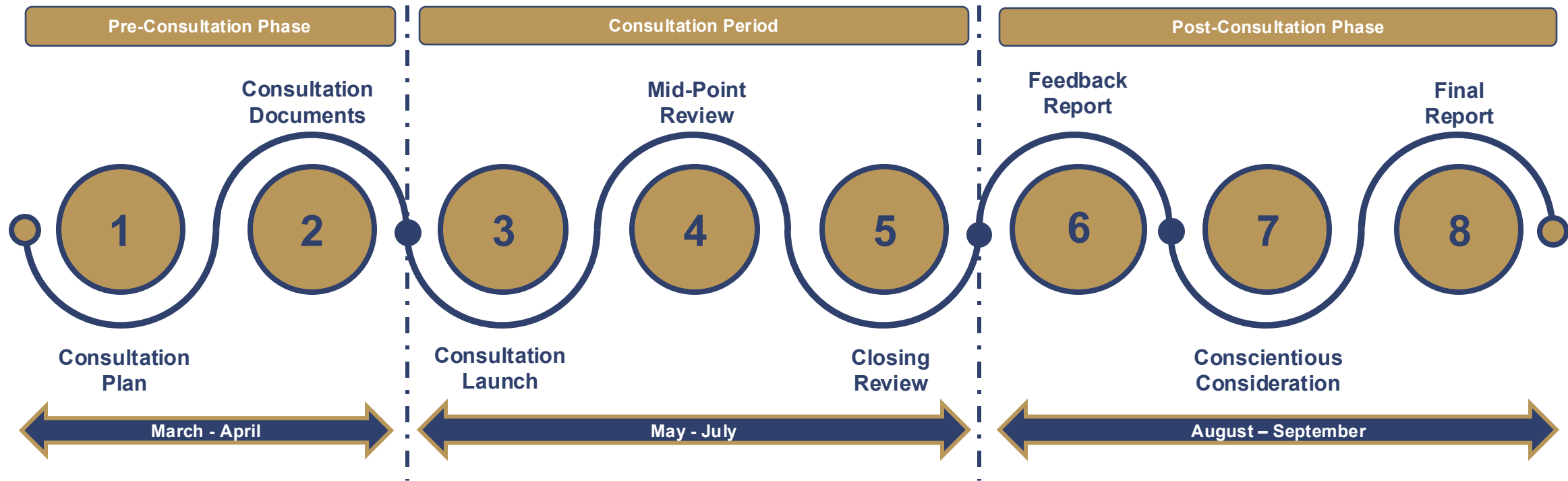
**As part of the consultation the public are also being asked for alternate options for delivering the service, that haven't yet been considered, as part of the options development process.**

# Proposed timeline consultation



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# Scope of the consultation



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- The Health Board will engage all key stakeholders identified through stakeholder analysis on both a qualitative and quantitative basis, to understand the views on the following issue:
  - which proposed option you think best addresses the challenges the Minor Injury Unit at Prince Philip Hospital face; will improve patient and staff safety, help with staff shortages and address the concerns from Health Inspectorate Wales
  - concerns you may have about any of the options, or impacts you think they may have
  - anything else you think we need to consider, including alternative options or ideas you may have
- The following matters have not yet been decided and are open to influence in the consultation, so we want to gather views on:
  - The suitability of each of the options proposed through the options development process
  - The positive and negative impacts associated with each of the options
  - Any alternative options which may not have previously been considered or ruled out
- The elements previously noted and outlined in the consultation document as being out of scope as part of the options appraisal process remain out of scope

# Consultation Review Stages



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## Mid Point Review

The mid-point review will be undertaken between week 4 and week 6 of the consultation period, as discussed with Llais, in order to review how the consultation has met the project plan to date and any new and emerging issues, including:

Evaluating what has been learned to date, through:

- Effective monitoring of the debate and the reactions and activities of interested parties, including challenges and opposition
- Considering the need for the plan to be amended as a reaction to what is being learned
- Considering whether new information is needed or needs sharing
- How contingency will be managed if changes to the plan are needed
- Confirm sufficient media and social media awareness of the consultation or any gaps that need addressing
- Evaluating stakeholder participation and identifying gaps in reach, and in particular from seldom heard voices
- Review and updating of the EqIAs.

## Closing Review

The closing review will be undertaken one week before the consultation period formally closes, in order to review how the consultation has met the project plan, including:

- Evaluating what has been learned to date through effective monitoring of the debate and the reactions and activities of interested parties, including challenges and opposition
- Considering the possible need for the consultation to be extended in response to what transpires
- Considering the possible need for extra pieces of work, such as surveys and studies, in the event that what is learned leaves important questions to be answered or investigated
- Reviewing what should happen post consultation and what the timeline will be for response, evaluation and analysis, sharing the outputs and feedback, and making decisions
- Review and updating of the EqIAs.



**Q & A**



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**Diolch / Thank you**