

Consultation on the Urgent and Emergency Paediatric Service at Withybush and Glangwili Hospitals

Stakeholder Reference Group – 05 May 2023



Purpose of update

To provide the Stakeholder Reference Group with an update on progress to date, with a focus on:

- Options development and appraisal process undertaken
- Consultation project plan

Matters for inclusion in the consultation

Based on the scope of the consultation 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 three options in delivering the urgent and emergency paediatric services at Withybush and Glangwili Hospitals between now and the establishment of the proposed new hospital network
- The positive and negative impacts associated with each of the three options in delivering the urgent and emergency paediatric services at Withybush and Glangwili Hospitals between now and the establishment of the new hospital network to enable due consideration around avoiding, or reducing, negative impacts

Matters excluded from the consultation

- Children's hospital services (paediatric) at Prince Philip Hospital (PPH) (minor injuries provision) and Bronglais General Hospital (BGH) (24-hour inpatient unit)
- Paediatric planned care and services within the community for paediatric care across Hywel Dda University Health Board area

Consultation mandate

- Hywel Dda University Health Board needs to understand the views of all relevant stakeholders about how the urgent and emergency children's services are delivered and accessed at Withybush Hospital and Glangwili Hospital
- Hywel Dda University Health Board wishes to assess the suitability of each of the three proposed options by November 2023 to decide on the most appropriate urgent and emergency paediatric service at Withybush and Glangwili Hospitals between now and the establishment of the proposed new hospital network

Options development and appraisal process undertaken

Deliberative session:	Working group	Appraise the long list of options using hurdle criteria	Working group	Appraise the options still being considered (short list)
<p>Date & Venue: all day Friday 16 September 2022 at Plas Hyfryd, Narberth</p>	<p>Achieve the outlined output through a series of meetings between 24th September – 3rd October</p>	<p>Date & Venue: 6th October MS Teams</p>	<p>Achieve the outlined output through a series of meetings between 7th October – 19th October</p>	<p>Date & Venue: all day Thursday 20th October 2022 at Plas Hyfryd, Narberth</p>
<p>Scope: Using the Issues Paper as a basis for discussion around, with an appraisal group to:</p> <ul style="list-style-type: none"> • Ascertain what should be considered for a good interim Paediatric service • What is essential • What needs improvement • Whether the permanent change in 2014 satisfies current needs • Whether temporary change 1 model satisfies current needs • Whether temporary change 2 model satisfies current needs • Whether temporary change 3 model satisfies current needs • Agree what ‘hurdle’ and ‘evaluation’ criteria are needed for later stages of appraisal process 	<p>Scope/output: To consider:</p> <ul style="list-style-type: none"> • Whether the permanent change in 2014 should be returned to • Whether temporary change 1 model should be returned to • Whether temporary change 2 model should be returned to • Whether temporary change 3 model should be retained. • Whether one of the above is the best option, subject to enhancement • Whether there are potentially better options than the above, and what those options might look like (high level overview to support hurdle appraisal.) 	<p>Scope: Utilising a consensus approach agree what options should go forward (short list) to be ‘worked up’.</p>	<p>Scope/output : To ‘work up’ the high level detail for the options still being considered (short list)</p>	<p>Scope: Appraise the options utilising a weighted scoring approach</p> <p>Stages:</p> <ul style="list-style-type: none"> • Confirm criteria • Weight the criteria • Score the options
<p>Membership: Appraisal group</p>	<p>Membership: Working group</p>	<p>Membership: Appraisal group</p>	<p>Membership: Working group</p>	<p>Membership: Appraisal group</p>

Option C

Builds on the 2021 model (the suspension of the PACU at WH, also known as Puffin Ward) through the expansion of non-emergency services retained in WH, 9am – 5pm service.

What is unique or new:

- Formalising/locally defining rapid access clinics
- Improving advice & support to Primary Care, and local patient access for specialist review (non-emergency)
- Ability to schedule follow up appointments directly for patients from WH who have attended GH for emergency treatment - or follow up from GH Paeds. for Pembrokeshire residents

Opportunities to:

- The ability to house the entire multidisciplinary team (MDT) under one roof - “Hub Integrated approach”
- Incorporating outpatient activity/Day Care provision for Children’s Services - with potential to extend to tertiary clinics etc. (improved environment)
- Enhanced workforce opportunity e.g. Community Nursing – Outreach Team; play specialists, etc.
- Revise the PACU model at GH and invest in substantive staffing to permanently support WH flow

Option B - Overview and description

Builds on the 2016 model, PACU 10am – 6pm model (Mon – Fri) staffed 10am – 8pm (no referrals from Primary care after 6pm) and Outpatient 9am – 5pm (Mon – Fri) co-located with DAV supporting

What is unique or new:

- Planned **and** same day urgent paediatric day case reviews (any potential admissions would still go to GH) - No overnight or weekend activity
- Some new restrictions on admission criteria, to mitigate some of the risks identified in the 2016 model
- Look to maximise the building footprint (Puffin Ward)
- The model would look to incorporate Option C (non-emergency activity) into the model with Day Care provision – but potential to be restricted by PACU requirements

Opportunities to:

- Development of Advanced Paediatric Nurse Practitioners and PA's – non-medical staffing supplementary workforce
- Revise the PACU model at GH and invest in substantive staffing to permanently support WH flow
- Upgrade current Child Health centre to support admin/office and base requirements for clinical staff MDT

Option B2 - Overview and description

Same model as Option B, with the following differences:

- All non-emergency treatment identified would be repatriated
- Emergency Department would offer an enhanced service, better point of entry, e.g. triage for Children and Young People
- Robust emergency pathways at Glangwili Hospital

Weighting the criteria – for scoring

The criteria used for weighting the options was collated by canvassing the views of internal and external stakeholders

The criteria used were:

1. Clinical viability
2. Workforce viability
3. Safe inter-hospital transport system
4. Deliverability
5. Accessibility
6. Facilities (incl. interior suitability)
7. Inter-service accessibility
8. Impacts on people

Summary of the Strength, Weakness, Opportunity, Threat (SWOT) analysis

A summary of the Strength, Weakness, Opportunity, Threat (SWOT) analysis was carried out for each of the options by the working group.

Green indicates positive, red is negative, and amber is neither good nor negative. Where the boxes are blank (white), the working group were unable to find evidence that the model produced any impact on which to make a scoring decision.

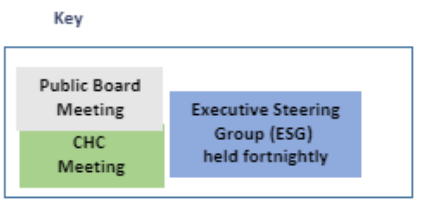
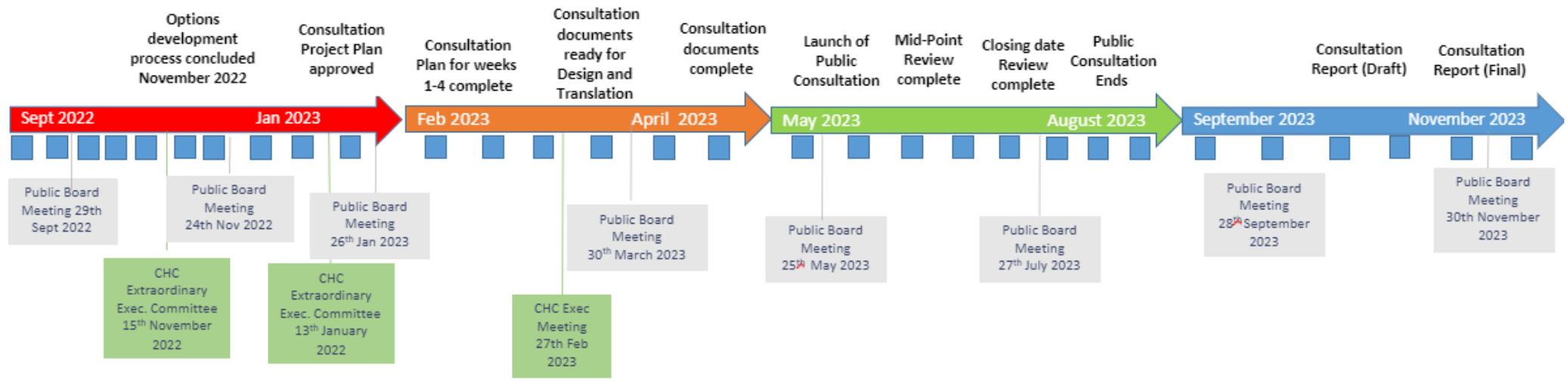
Criteria	Option C				Option B				Option B2				
	S	W	O	T	S	W	O	T	S	W	O	T	
Clinical Viability	Positive					Negative	Neutral			Negative	Neutral		
Workforce Viability	Positive						Neutral	Neutral			Neutral	Neutral	
Accessibility	Positive	Negative			Positive				Positive				
Deliverability	Positive		Neutral			Negative		Neutral		Negative		Neutral	
Facilities	Positive		Neutral		Positive	Negative			Positive	Negative			
Accessing other health services	Positive		Neutral				Neutral				Neutral		
Moving between hospitals when unwell	Positive	Negative			Positive	Negative	Neutral		Positive	Negative	Neutral	Neutral	
Impacts on protected characteristic groups	Positive	Negative	Positive	Neutral	Positive	Neutral	Positive	Neutral	Positive	Neutral	Positive	Neutral	Neutral

Scoring the options

Participants at the ‘public appraisal’ workshop following a review of SWOT for each of the options, scored the options through the YourScoreUK facility online. 25 submissions for scoring were received – the total scores for each option were as follows:

Criteria	Option C	Option B	Option B2
Clinical viability	213	166	166
Workforce viability	214	143	146
Safe inter-hospital transport system	171	140	144
Deliverability	213	145	134
Accessibility	175	188	191
Facilities (incl. interior suitability)	181	181	177
Inter-service accessibility	154	159	159
Impacts on people	157	162	162
Totals	1478	1284	1279

Consultation Timeline



Future CHC and Dates to be added when available
 Public Board Meeting dates from May 2023 onwards are DRAFT at this stage

Next steps

- The Board in November 2022 approved the recommendation to formally consult on all 3 options
- The Board in January 2023 approved the Consultation Project plan which will include proposed timeline for the consultation
- The Consultation is planned to launch at the end of May 2023, and will last for 12 weeks

Diolch / Thank you

