

# **Clinical Services Plan**

## **A Phased Assessment Indicative Workforce and Finance Estimate of the alternative options**

**V3.0 As at 6th January 2026**

Summaries

Table 1: Implementation Phase (0-2years) (Within existing resource)	Options														
	A	A1	A2	A3	B	B1	B2	C	C1	D	D1	E	E1	E2	M1
	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£
Critical Care 246(E)	(273,938)				(434,989)			0		0		(167,910)			
Emergency General Surgery 155(A1), 222(E)	(265,000)	0			(265,000)			(265,000)		(265,000)		1,149,077			
Stroke 106(A1), 210(B1)	(1,058,981)	(792,670)			1,092,662	(3,563)		(1,058,981)		(1,058,981)					
Dermatology	(359,996)				(359,996)			(359,996)		(359,996)					
Ophthalmology 95(A1), 99(A2), 227(A3), 263(B1), 173(C1), 167 (E)	0	(32,830)	(64,186)	(64,186)	0	0		0	87,464	0		(33,856)			
Orthopaedics 178(B1),179(D1), 129 (E1), 268 (E2), 52/113(M1)	0				0	0		0		0	0		0	0	0
Urology 194,197 (M1)	0				0			0		0					0
Endoscopy 228(B1)	0				0	0		0		0					
Radiology 103(A1), 24(B1), 25(B2), 122 (E)	(30,110)	(30,110)			(30,110)	(30,110)	(30,110)	(121,100)		(30,110)		123,844			

  

Table 2: Improvement Phase Ambition to Improve Standards / Activity (Identification of funds needed)	A	A1	A2	A3	B	B1	B2	C	C1	D	D1	E	E1	E2	M1
	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£
Critical Care 246(E)	0				180,000			552,555		552,555		0			
Emergency General Surgery 155(A1), 222(E)	531,274	1,682,818			531,274			531,274		531,274		0			
Stroke 106(A1), 210(B1)	1,938,576	1,880,429			1,517,685	2,015,959		1,938,576		1,938,576					
Dermatology	585,289				646,339			646,339		534,739					
Ophthalmology 95(A1), 99(A2), 227(A3), 263(B1), 173(C1), 167 (E)	155,320	219,506	219,506	532,462	0	31,356		155,320	201,904	155,320		353,554			
Orthopaedics 178(B1),179(D1), 129 (E1), 268 (E2), 52/113(M1)	173,293				173,293	584,909		173,293		10,483	742,794		872,244	337,885	404,909
Urology 194,197 (M1)	119,466				119,466			0		119,466					305,232
Endoscopy 228(B1)	1,320,420				1,320,420	1,865,765		1,742,944		1,984,124					
Radiology 103(A1), 24(B1), 25(B2), 122 (E)	566,690	556,050			429,675	505,500	505,500	501,100		924,751		0			

  

Table 3: Longer Term (4+ years) (Identification of funds needed)	A	A1	A2	A3	B	B1	B2	C	C1	D	D1	E	E1	E2	M1
	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£
Critical Care 246(E)	0				0			0		0		201,072			
Emergency General Surgery 155(A1), 222(E)	0	0			0			0		0		270,000			
Stroke 106(A1), 210(B1)	1,849,749	1,713,651			1,658,182	1,189,167		1,849,749		1,849,749					
Dermatology	0				0			0		0					
Ophthalmology 95(A1), 99(A2), 227(A3), 263(B1), 173(C1), 167 (E)	0	934,935	0	71,450	0	1,196,017		0	0	0		0			
Orthopaedics 178(B1),179(D1), 129 (E1), 268 (E2), 52/113(M1)	0				0	0		947,899		701,293	0		0	0	0
Urology 194,197 (M1)	0				0			0		0					0
Endoscopy 228(B1)	0				0	0		0		0					
Radiology 103(A1), 24(B1), 25(B2), 122 (E)	0	1,249,178			1,319,455	1,163,986	1,243,630	0		144,735		0			

Total CSP Programme Summary	A	A1	A2	A3	B	B1	B2	C	C1	D	D1	E	E1	E2	M1
	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£
Critical Care 246(E)	(273,938)				(254,989)			552,555		552,555		(213,162)			
Emergency General Surgery 155(A1), 222(E)	266,274	1,682,818			266,274			266,274		266,274		1,419,077			
Stroke 106(A1), 210(B1)	2,729,344	2,816,124			4,268,529	3,258,925		2,729,344		2,729,344					
Dermatology	225,292				286,342			286,342		174,742					
Ophthalmology 95(A1), 99(A2), 227(A3), 263(B1), 173(C1), 167 (E)	155,320	1,121,611	730,255	539,726	0	1,227,373		155,320	392,174	155,320		464,148			
Orthopaedics 178(B1), 179(D1), 129 (E1), 268 (E2), 52/113(M1)	173,293				173,293	584,909		1,121,192		711,776	742,794		872,244	337,885	404,909
Urology 194, 197 (M1)	119,466				119,466			0		119,466					305,232
Endoscopy 228(B1)	1,320,420				1,320,420	1,865,765		1,742,944		1,984,124					
Radiology 103(A1), 24(B1), 25(B2), 122 (E)	536,580	1,775,118			1,719,020	1,639,376	1,719,020	380,000		1,039,376		123,844			
Inter hospital transfer	2,000,000														

**Assumptions**

Costing has been done predominantly on workforce changes identified. Service changes that may affect LTAs both as a purchaser and provider have not been able to be quantified at this point.

Only posts that have been specifically identified have been costed at this point

All admin staff costed at mid point plus on costs

All clinical/ward based staff costed at mid point plus 26.9% headroom plus enhancements where these have been specified (there may be posts where enhancements apply but haven't been called out at this time.)

All medical staff estimated based on current average budget as not sufficiently detailed

No provision made for interdependent services e.g. HSDU, Pathology, Hotel Services, Pharmacy (unless explicitly noted)

Some provision for Therapies -25% towards standard in Critical Care, Stroke and Orthopaedics (PPH only)

Some provision for 'out of scope' services if essential for model delivery e.g. ECU for Critical Care NB ECU and RSU for GGH not included.

Inter hospital travel is based on a broad estimate provided from Adult Critical Care Transfer Service (ACCTS) and assumed the same for each option. This would only be for patients who are suitable for transfer by ACCTS. When ACCTS is not available and transfer time is critical EMRTS would have to be used.

No provision to change in WAST including Emergency Medical Retrieval and Transfer Service (EMRTS) costs have been included at this time.

No general provision for non-pay as not sufficiently detailed

No general provision for non-recurrent costs such as excess travel, pay protection etc that will be time limited and dependent on specific staff affected

Some elements have been deemed 'nice to have' - these have not been costed at this stage

RCCS does not include decant costs, costs for services being displaced or any additional costs for services being relocated

Doesn't include 2024/25 wage award

**Approach**

Options Template in detail was populated through the Options Development Group in Phase 2.

This template was taken back to Task and Finish Groups with support of workforce and finance as to understand needs - progress was managed through the Programme Activity modelling Subgroup

A first draft was produced to support the ODG Shortlist scoring process on the 05/06SEP2024.

Following review of these figures and by request of the CSP Sub Group (Chair and SRO) request were made to further revise and test the assumptions on a 'Do Minimum' and 'Essential Interdependency' consideration

Revised Estimates were received and shared with Task and Finish Groups, CSP PG and Programme Chair and SRO in early November2024 - With a request to decouple as to what could be delivered within the existing resource as at day 1, What was required to improve standards and activity (though notable funding would need to be identified to support any cost additionality) and what may be considered longer term.

An MDT session with leads from the Planned Care Triumvirate, Clinical, AHPs and Corporate Support services as well as service representation supported 2 sessions (Tuesday 12NOV2024 and Thursday 14NOV2024)

The outcome of this process was tested with members of CRG on 15NOV2024 and shared will all members for feedback.

The outcome of the process was also shared with Task and Finish Group colleagues so that it was fully transparent within the programme governance structure.

The feedback of the above intends to support conversations at CSP SG on 19NOV2024 with the outcomes intended to support the programme going forward of what can be delivered within its existing resources.

**Alternative Options Approach**

The Alternative Options Log has been used to identify any additional cost factors or offset factors.

This template has been updated to reflect these changes

Service Development Options Templates were completed in October 2025.

Service Workforce & Finance Estimate was updated in November/ December 2025

Revised estimate was tested with FET in December 2025.

**KEY:**

Implementation Phase (<2Years)	Service consolidation / reconfiguration can be delivered from existing resources
Improvement Phase (Ambition 2-4 Years)	Services have identified areas that can improve activity / standards but may require additional funds to be identified in order to improve. This includes workforce pipelines and may include the time needed to recruit the posts.
Longer Term (4> Years)	Service configurations have identified aspirational items that may take longer to deliver/ be considered strategic and may require additional funds to be identified. This also includes workforce pipelines and may reflect the time needed to recruit posts. This may also factor in training requirements to the workforce plan also.

**References: Information Pyramid**

CSP Finance Indicative Estimate	
CSP Workforce Assessment	Information Suitable for sharing
CSP Finance Configurations (this document)	
Draft Options Comparisons Following September Workshops	
Options Template Document	Raw data and information
Workforce data	

**Supporting information**

The purpose of the document is to support the Board in decision on the options which have been developed. As the options stand, none of them are viable from an affordability perspective.

This workbook explores the costed elements of the options with a view to accept costs which are agreed and would be required to implement the option on day 1, may need further checks to assess whether the costs could be reduced or delayed (Amber/ Check) or delayed for later consideration as part of a phased delivery of the option (beyond 4 years).

It is generally assumed that the options as developed by the Options Development Group are valid configurations unless determined otherwise through the QIA/ Hurdle/ Evaluation process, the implementation of the option however may be phased in its delivery to consider day 1 operation (the minimum financial investment to place the services on sites as identified), service enhancements to be delivered as resources become available (such as increasing therapies provision to attain standards, or resource to support activity through Waiting List Initiative funding) and aspirational change (service changes that the Board would aspire to deliver in the future through this option, but with no clear route to funding identified).

Workforce Assessment	<p><b>Critical Care</b></p> <ul style="list-style-type: none"> <li>&gt; Option 246 - For Bronglais Hospital, the current workforce baseline is 30.82 WTE. To deliver the proposed model, there is a requirement for a significant uplift, including 19.5 WTE Band 5 Registered Nurses, 6.1 WTE Band 6 Registered Nurses, and 3.7 WTE Allied Health Professional (AHP) roles across Bands 4–7. This represents a substantial increase and carries a high workforce pipeline risk, particularly for nursing roles, given current recruitment patterns and market constraints.</li> <li>At Glangwili Hospital, the current workforce requirement is 84.9 WTE, with an additional need for 39.7 WTE Band 5 Registered Nurses, 18.3 WTE Band 6 Registered Nurses, one additional Consultant-level post, and 7.7 WTE AHP roles across Bands 4–7. While these increases will strengthen critical care capacity, they will also require a strategic approach to mitigate recruitment risks.</li> <li>For Worthybush General Hospital (WGH), the workforce requirement is 41.8 WTE, including 24.1 WTE Band 5 Registered Nurses, 6.7 WTE Band 6 Registered Nurses, and 2.3 WTE AHP roles.</li> </ul> <p>Across all sites, the total additional workforce requirement is 148.84 WTE, including the offset by a reduction of 8.7 WTE in PPH workforce requirements. Recruitment risks remain significant, as nursing recruitment typically occurs twice annually, with major cohorts in September and a more limited cohort in March, limiting flexibility and responsiveness.</p> <p>A strategic workforce plan is essential to address these challenges, including expanding international recruitment, strengthening local training pipelines, and exploring flexible staffing models to ensure sustainability. The workforce assessments presented do not include any consideration of interdependencies between services either within or external to the Clinical Service Plan (CSP). External services such as estates, therapies, diagnostics and other supporting functions are unknown in certain options that reference them, and these are likely to increase the overall WTE required to deliver the proposed changes, along with introducing additional financial risks.</p> <p>The staffing ratios used within these assessments are based on best estimates informed by feedback from services through the SDOT forms. It is therefore recommended that any option selected for progression is supported by a fully developed workforce plan. This plan should cover not only the operational requirements but also the strategic elements, ensuring workforce pipeline needs are addressed over a number of years to secure sustainability.</p> <p><b>Strategic Recommendations</b></p> <ul style="list-style-type: none"> <li>&gt; Develop a multi-year recruitment plan for nursing and AHP roles, including international recruitment and local training pipelines.</li> <li>&gt; Explore rotational posts and flexible staffing models to improve retention.</li> <li>&gt; Engage with higher education institutions to secure future supply.</li> <li>&gt; Consider advanced practice roles to reduce dependency on hard-to-fill consultant posts.</li> </ul> <p><b>Risk Mitigation</b></p> <ul style="list-style-type: none"> <li>&gt; Implement targeted recruitment campaigns aligned with intake cycles.</li> <li>&gt; Create contingency plans for consultant and specialist roles, including locum arrangements.</li> <li>&gt; Monitor workforce pipeline risks quarterly and adjust plans accordingly.</li> <li>&gt; Secure financial planning for additional workforce costs and potential agency reliance.</li> </ul>
Finance Assessment	<ul style="list-style-type: none"> <li>• Financial sustainability of the majority of options remains to be determined as they require additional financial resource to the current service configuration</li> <li>• Enhancements have not been applied in the costings at this point as rotas have yet to be worked up for the options</li> <li>• Costs are calculated at 2023/24 rates, the same calculation methodology as the costings at consultation, to ensure comparability</li> <li>• Offsets included, which are brought forward from options consulted upon where appropriate, assume cash releasing cost reduction, through for example delivering a reduction in our bed base and reductions in staffing rotas</li> <li>• Therapies requirements are yet to be fully determined in some options and need to be identified</li> <li>• The options as currently configured have not determined the cost of all support services (i.e. pharmacy, pathology etc) and these need to be identified</li> <li>• The options have not yet identified their estates and facilities requirements and these need to be determined</li> <li>• Headroom application has been replicated from options 1-4, there remain inconsistencies to be resolved in application across staff groups</li> <li>• Staff costings are at mid point of scale, as per the costing for options at the point of consultation</li> <li>• All options do not yet include an assessment of their impact on non-pay costs</li> </ul> <p>Key risk is identification of funding to enable successful implementation of options as the majority of options require additional funding</p> <p>There is now a requirement to prioritise options, to enable further in-depth work to be completed identifying their requirements from a financial and workforce perspective.</p>

Check and Challenge

Critical Care	OPTION 1					CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH Rural ICU	GGH ICU	PPH ECU (4)	WGH ECU (4)	TOTAL		
<b>NEW COSTS</b>							
2 Additional L3 beds		£ 953,345.00			£ 953,345.00	Accept	Implementation Phase (up to 2Years)
ECU Staffing Costs PPH			£ 901,180.00		£ 901,180.00	Accept	Implementation Phase (up to 2Years)
ECU Staffing Costs GGH		£ 599,910.00			£ 599,910.00	Accept	Implementation Phase (up to 2Years)
ECU Staffing Costs WGH				£ 901,180.00	£ 901,180.00	Accept	Implementation Phase (up to 2Years)
1 WTE Consultant	£ 180,000.00				£ 180,000.00	Accept	Implementation Phase (up to 2Years)
Therapies staff required @25%	£ 91,313.00	£ 163,076.00	£ 11,128.00	£ 46,560.00	£ 312,077.00	Accept	Implementation Phase (up to 2Years)
Removal beds on in year OFFSET FACTORS		£ 317,781.67		£ 635,563.33	£ 953,345.00	Accept	Implementation Phase (up to 2Years)
<b>Total New Costs</b>	<b>£ 91,313.00</b>	<b>£ 2,214,112.67</b>	<b>£ 912,308.00</b>	<b>£ 1,583,303.33</b>	<b>£ 4,801,037.00</b>		
<b>OFFSET FACTORS</b>							
PPH ICU Budget (0080)			£ 1,686,385.00		£ 1,686,385.00	Accept	Implementation Phase (up to 2Years)
WGH ICU Budget (0701)				£ 2,896,005.00	£ 2,896,005.00	Accept	Implementation Phase (up to 2Years)
Potential Rota OFFSET FACTORS				£ 492,585.00	£ 492,585.00	Accept	Implementation Phase (up to 2Years)
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ 1,686,385.00</b>	<b>£ 3,388,590.00</b>	<b>£ 5,074,975.00</b>		
					£ -		
<b>Total Cost/Saving</b>	<b>£ 91,313.00</b>	<b>£ 2,214,112.67</b>	<b>£ 774,077.00</b>	<b>£ 1,805,286.67</b>	<b>£ 273,938.00</b>		

Critical Care	OPTION 2					CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH Rural ICU	GGH ICU	PPH ECU (4)	WGH Rural ICU	TOTAL		
<b>NEW COSTS</b>							
Additional Therapies @25%	£ 91,313.00	£ 158,539.00	£ 11,128.00	£ 89,236.00	£ 350,216.00	Accept	Implementation Phase (up to 2Years)
1 WTE Consultant		£ 180,000.00			£ 180,000.00	Accept	Improvement Phase (2-4 Years)
Enhanced Care Unit (4 Beds)			£ 901,180.00		£ 901,180.00	Accept	Implementation Phase (up to 2Years)
<b>Total New Costs</b>	<b>£ 91,313.00</b>	<b>£ 338,539.00</b>	<b>£ 912,308.00</b>	<b>£ 89,236.00</b>	<b>£ 1,431,396.00</b>		
<b>OFFSET FACTORS</b>							
PPH ICU Budget			£ 1,686,385.00		£ 1,686,385.00	Accept	Implementation Phase (up to 2Years)
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ 1,686,385.00</b>	<b>£ -</b>	<b>£ 1,686,385.00</b>		
					£ -		
<b>Total Cost/Saving</b>	<b>£ 91,313.00</b>	<b>£ 338,539.00</b>	<b>£ 774,077.00</b>	<b>£ 89,236.00</b>	<b>£ 254,989.00</b>		

Critical Care	OPTION 3   4					CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH L3	GGH L3	PPH L2 (L3 Transfers)	WGH L2 (L3 Transfers)	TOTAL		
<b>NEW COSTS</b>							
Additional Therapies @25%	£ 91,313.00	£ 158,539.00	£ 33,467.00	£ 89,236.00	£ 372,555.00	Accept	Improvement Phase (2-4 Years)
1 WTE Consultant		£ 180,000.00			£ 180,000.00	Accept	Improvement Phase (2-4 Years)
<b>Total New Costs</b>	<b>£ 91,313.00</b>	<b>£ 338,539.00</b>	<b>£ 33,467.00</b>	<b>£ 89,236.00</b>	<b>£ 552,555.00</b>		
<b>OFFSET FACTORS</b>							
					£ -		
					£ -		
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>		
					£ -		
<b>Total Cost/Saving</b>	<b>£ 91,313.00</b>	<b>£ 338,539.00</b>	<b>£ 33,467.00</b>	<b>£ 89,236.00</b>	<b>£ 552,555.00</b>		

	OPTION 246 (Option B)				TOTAL		
	BGH	GGH	PPH	WGH			
<b>NEW COSTS</b>							
Additional Therapies @25%	£ 91,313	£ 158,539	£ 33,467	£ 89,236	£ 372,555	Accept	Implementation Phase (up to 2Years)
1 WTE Consultant Anaesthetist GGH		£ 180,000			£ 180,000	Challenge	Improvement Phase (2-4 Years)
1.2 WTE Consultant Anaesthetist PPH ECU			£ 216,000		£ 216,000	Accept	Implementation Phase (up to 2Years)
Enhanced Care Unit (4 Beds)			£ 901,180		£ 901,180	Accept	Implementation Phase (up to 2Years)
GGH 1 WTE BAND 2		£ 28,740			£ 28,740	Accept	Implementation Phase (up to 2Years)
ACCPs 3 WTE (Band 8a) (longer term) GGH,BGH and PPH	£ 67,024	£ 67,024		£ 67,024	£ 201,072	Accept	Longer Term (+4 Years)
ICCA Licence costs BGH, WGH and PPH	?		?	?		Check	Improvement Phase (2-4 Years)
<b>Total New Costs</b>	£ 158,337	£ 434,303	£ 1,150,647	£ 156,260	£ 1,899,547		
<b>OFFSET FACTORS</b>							
PPH ICU Budget			£ 1,686,385		£ 1,686,385	Accept	Implementation Phase (up to 2Years)
					£ -		
					£ -		
<b>Total Potential OFFSET FACTORS</b>	£ -	£ -	£ 1,686,385	£ -	£ 1,686,385		
					£ -		
<b>Total Cost/Saving</b>	£ 158,337	£ 434,303	£ 535,738	£ 156,260	£ 213,162		

# Critical Care

Below is a summary of the Workforce requirement for the options based on NSLA & GPICS requirements

Summary of additional Workforce requirement (All Staff)	NSLA Requirement	Medical Requirement	Therapies Requirement	Total
Option 1	13.9	0	5.25	19.15
Option 2	5.7	1	5.93	12.63
Option 3	15.6	1	6.09	22.69
Option 4	15.6	1	6.09	22.69

Summary of additional NSLA Workforce requirement*	BGH	GGH	PPH	WGH	TOTAL
Option 1	0	31.1	-9.9	-7.3	13.9
Option 2	0	15.6	-9.9	0	5.7
Option 3	0	15.6	0	0	15.6
Option 4	0	15.6	0	0	15.6

Plus Additional Consultant Anaesthetist  
 Plus Additional Consultant Anaesthetist  
 Plus Additional Consultant Anaesthetist

\*Predominantly Band 5 & 6 nurses required in addition at GGH. Where noted workforce surplus from other sites has been taken from the overall requirement. An OCP would be required to implement these changes which could result in additional recruitment being required.

# Alternative Options

Workforce WTE as of September 2024				OPTION 1	OPTION 2	OPTION 3	OPTION 4
Nurse Staffing Requirement Workfor	Budget	Actual	Vacancy	Remain as is	Remain as is	Remain as is	Remain as is
0457 BGH - ITU							
<b>ADDITIONAL CLINICAL SERVICES</b>	<b>5.6</b>	<b>4.5</b>	<b>1.1</b>	<b>5.6</b>	<b>5.6</b>	<b>5.6</b>	<b>5.6</b>
Nursing HCA/HCSW Band 2	4.6	4.5	0.1	4.6	4.6	4.6	4.6
Nursing HCA/HCSW Band 4	1.0		1.0	1.0	1.0	1.0	1.0
<b>ADMINISTRATIVE &amp; CLERICAL</b>	<b>1.0</b>	<b>1.0</b>	<b>0.0</b>	<b>1.0</b>	<b>1.0</b>	<b>1.0</b>	<b>1.0</b>
Admin & Clerical Band 2	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Admin & Clerical Band 3	1.0	1.0	0.0	1.0	1.0	1.0	1.0
Admin & Clerical Band 4	1.0	1.0	0.0	1.0	1.0	1.0	1.0
<b>NURSING AND MIDWIFERY REGISTERED</b>	<b>18.5</b>	<b>19.2</b>	<b>(0.7)</b>	<b>18.5</b>	<b>18.5</b>	<b>18.5</b>	<b>18.5</b>
Registered Nurse Band 5	11.4	12.3	(0.9)	11.4	11.4	11.4	11.4
Registered Nurse Band 6	6.1	5.9	0.2	6.1	6.1	6.1	6.1
Registered Nurse Band 7	1.0	1.0	0.0	1.0	1.0	1.0	1.0
Advanced Clinical Care Prac 8a							
<b>Physiotherapy</b>							
Physio Band 7							
Physio Band 6							
Physio Band 4							
<b>Grand Total</b>	<b>25.1</b>	<b>24.7</b>	<b>0.4</b>	<b>25.1</b>	<b>25.1</b>	<b>25.1</b>	<b>25.1</b>

OPTION 246	Need sum to add together
5.6	GPIC Standards Met BGH (Physio Only - Nursing Staffing Level Review needs to be undertaken to ensure ratio correct additional cost unknown)
4.6	Headroom check 26.9%
1.0	Headroom check 26.9%
2.0	
0.0	Headroom check 26.9%
1.0	Headroom check 26.9%
1.0	Headroom check 26.9%
19.5	
11.4	Headroom check 26.9%
6.1	Headroom check 26.9%
1.0	Headroom check 26.9%
3.7	
0.2	GPIC Standards Met BGH
1.2	GPIC Standards Met BGH
2.3	GPIC Standards Met BGH
30.82	

Workforce WTE as of September 2024				OPTION 1	OPTION 2	OPTION 3	OPTION 4				
	Budget	Actual	Vacancy	Remain as is	Plus 3 BED Medical ECU Requirement	Remain as is	Plus 3 BED Medical ECU Requirement	Remain as is	Plus 3 BED Medical ECU Requirement	Remain as is	Plus 3 BED Medical ECU Requirement
0053 GGH - Critical Care Unit											
<b>ADDITIONAL CLINICAL SERVICES</b>	<b>7.6</b>	<b>5.4</b>	<b>2.2</b>	<b>13.8</b>	<b>6.3</b>	<b>7.6</b>	<b>3.1</b>	<b>7.6</b>	<b>3.1</b>	<b>7.6</b>	<b>3.1</b>
Nursing HCA/HCSW Band 2	5.6	4.4	1.2	11.83	6.28	5.6	3.1	5.6	3.1	5.6	3.1
Nursing HCA/HCSW Band 4	2.0	1.0	1.0	2.0	0.0	2.0	0.0	2.0	0.0	2.0	0.0
<b>ADMINISTRATIVE &amp; CLERICAL</b>	<b>4.6</b>	<b>4.1</b>	<b>0.5</b>	<b>6.6</b>	<b>2.0</b>	<b>4.6</b>	<b>1.0</b>	<b>4.6</b>	<b>1.0</b>	<b>4.6</b>	<b>1.0</b>
Admin & Clerical Band 2	2.0	2.5	(0.5)	2.0	0.0	2.0	0.0	2.0	0.0	2.0	0.0
Admin & Clerical Band 3	2.0	1.0	1.0	3.0	1.0	2.0	0.5	2.0	0.5	2.0	0.5
Admin & Clerical Band 4	0.6	0.6	0.0	1.6	1.0	0.6	0.5	0.6	0.5	0.6	0.5
<b>NURSING AND MIDWIFERY REGISTERED</b>	<b>61.9</b>	<b>54.8</b>	<b>7.2</b>	<b>84.8</b>	<b>22.8</b>	<b>61.9</b>	<b>11.4</b>	<b>61.9</b>	<b>11.4</b>	<b>61.9</b>	<b>11.4</b>
Registered Nurse Band 5	39.7	36.1	3.6	56.02	16.34	39.7	8.2	39.7	8.2	39.7	8.2
Registered Nurse Band 6	18.3	15.0	3.3	23.75	5.49	18.3	2.7	18.3	2.7	18.3	2.7
Registered Nurse Band 7	4.0	3.7	0.3	4.99	1	4.0	0.5	4.0	0.5	4.0	0.5
Advanced Clinical Care Prac 8a											
<b>Physiotherapy</b>											
Physio Band 7											
Physio Band 6											
Physio Band 4											
<b>Consultant</b>											
10th Consultant											
<b>Admin and Clerical</b>											
Band 2 admin											
<b>Grand Total</b>	<b>74.1</b>	<b>64.2</b>	<b>9.8</b>	<b>105.2</b>	<b>31.1</b>	<b>74.1</b>	<b>15.6</b>	<b>74.1</b>	<b>15.6</b>	<b>74.1</b>	<b>15.6</b>

OPTION 246	GPIC Standards Met GGH (Physio Only - Nursing Staffing Level Review needs to be undertaken to ensure ratio correct additional cost unknown)
7.6	
5.6	Headroom check 26.9%
2.0	Headroom check 26.9%
4.6	
2.0	Headroom check 26.9%
2.0	Headroom check 26.9%
0.6	Headroom check 26.9%
63.0	
39.7	Headroom check 26.9%
18.3	Headroom check 26.9%
4.0	Headroom check 26.9%
1.0	
7.7	
0.1	GPIC Standards Met GGH
2.3	GPIC Standards Met GGH
5.3	GPIC Standards Met GGH
1.0	
1.0	Recruitment Challenge no pipeline in place 5+ years unless external recruitment reduces this
1.0	
1.0	
84.90	

Workforce WTE as of September 2024	OPTION 1	OPTION 2	OPTION 3	OPTION 4
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OPTION 246
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	Budget	Actual	Vacancy	3 BED Medical ECU Requirement	Difference from current	3 BED Medical ECU Requirement	Difference from current	Remain as is	Remain as is
<b>0060 PPH - ITU</b>									
<b>ADDITIONAL CLINICAL SERVICES</b>	1.7	1.0	0.7	3.1	1.5	3.1	1.5	1.7	1.7
Nursing HCA/HCSW Band 2	1.7	1.0	0.7	3.1	1.5	3.1	1.5	1.7	1.7
Nursing HCA/HCSW Band 4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
<b>ADMINISTRATIVE &amp; CLERICAL</b>	0.5	0.5	(0.0)	1.0	0.5	1.0	0.5	0.5	0.5
Admin & Clerical Band 2	0.5	0.5	(0.0)	0.0	(0.5)	0.0	(0.5)	0.5	0.5
Admin & Clerical Band 3	0.0	0.0	0.0	0.5	0.5	0.5	0.5	0.0	0.0
Admin & Clerical Band 4	0.0	0.0	(0.0)	0.5	0.5	0.5	0.5	0.0	0.0
<b>NURSING AND MIDWIFERY REGISTERED</b>	23.3	20.0	3.3	11.4	(11.8)	11.4	(11.8)	23.3	23.3
Registered Nurse Band 5	18.1	14.8	3.2	8.2	(9.9)	8.2	(9.9)	18.1	18.1
Registered Nurse Band 6	4.0	4.0	0.0	2.7	(1.3)	2.7	(1.3)	4.0	4.0
Registered Nurse Band 7	1.2	1.1	0.1	0.5	(0.7)	0.5	(0.7)	1.2	1.2
<b>Consultant</b>									
Consultant ECU									
<b>Grand Total</b>	<b>25.4</b>	<b>21.5</b>	<b>3.9</b>	<b>15.6</b>	<b>(9.9)</b>	<b>15.6</b>	<b>(9.9)</b>	<b>25.4</b>	<b>25.4</b>

1.5
1.5
0.0
0.5
(0.5)
0.5
0.5
(11.8)
(9.9)
(1.3)
(0.7)
1.2
1.2
(8.7)

Workforce WTE as of September 2024				OPTION 1	OPTION 2	OPTION 3	OPTION 4	
	Budget	Actual	Vacancy	6 BED ECU Requirement	Difference from current	Remain as is	Remain as is	Remain as is
<b>0701 WGH - ITU</b>								
<b>ADDITIONAL CLINICAL SERVICES</b>	4.1	3.4	0.6	6.3	2.2	4.1	4.1	4.1
Nursing HCA/HCSW Band 2	3.1	2.4	0.6	6.28	3.2	3.1	3.1	3.1
Nursing HCA/HCSW Band 4	1.0	1.0	0.0	0.0	(1.0)	1.0	1.0	1.0
<b>ADMINISTRATIVE &amp; CLERICAL</b>	1.6	1.5	0.1	2.0	0.4	1.6	1.6	1.6
Admin & Clerical Band 2	0.7	0.5	0.1	0.0	(0.7)	0.7	0.7	0.7
Admin & Clerical Band 3	0.9	1.0	(0.1)	1.0	0.1	0.9	0.9	0.9
Admin & Clerical Band 4	0.0	0.0	0.0	1.0	1.0	0.0	0.0	0.0
<b>NURSING AND MIDWIFERY REGISTERED</b>	32.8	32.2	0.6	22.8	(10.0)	32.8	32.8	32.8
Registered Nurse Band 5	24.1	24.7	(0.6)	16.34	(7.8)	24.1	24.1	24.1
Registered Nurse Band 6	6.7	5.4	1.2	5.49	(1.2)	6.7	6.7	6.7
Registered Nurse Band 7	2.0	2.0	0.0	1	(1.0)	2.0	2.0	2.0
Advanced Clinical Care Prac 8a								
<b>Physiotherapy</b>								
Physio Band 7								
Physio Band 6								
Physio Band 4								
<b>Grand Total</b>	<b>38.5</b>	<b>37.1</b>	<b>1.4</b>	<b>31.1</b>	<b>(7.3)</b>	<b>38.5</b>	<b>38.5</b>	<b>38.5</b>

OPTION 246
4.1
3.1
1.0
1.6
0.7
0.9
0.0
33.8
24.1
6.7
2.0
1.0
2.3
0.2
2.1
4.1
41.8

GPIC Standards Met WGH  
GPIC Standards Met WGH  
GPIC Standards Met WGH

**In addition therapy workforce requirement based on GPICS Standards**

Summary of additional Therapies Workforce Required*	BGH	GGH	PPH	WGH	TOTAL
Option 1	1.45	2.65	0.4	0.75	5.25
Option 2	1.45	2.55	0.4	1.53	5.93
Option 3	1.45	2.55	0.56	1.53	6.09
Option 4	1.45	2.55	0.56	1.53	6.09

\*Based on the premise of improving current standards therefore a calculation of 25% of the workforce required to meet standards has been used.

BGH Workforce requirement	Current in CC	Option 1	Option 2	Option 3	Option 4	To Meet standards - 100% Additional Required	Proportional additionality		
							25%	50%	75%
Acute hospital clinical lead (Band 7)	0.4	0.4	0.4	0.4	0.4	0	0	0	0
Specialist respiratory physiotherapist - Band 7		1	1	1	1	1	0.25	0.5	0.75
Physiotherapy assistant practitioner		1	1	1	1	1	0.25	0.5	0.75
Lead OT (Band 7) HB Cover based in BGH		1	1	1	1	1	0.25	0.5	0.75
Senior OT (Band 6)		1	1	1	1	1	0.25	0.5	0.75
SALT - Band 6		0.5	0.5	0.5	0.5	0.5	0.125	0.25	0.375
Clinical Psychology (Band 5)		1	1	1	1	1	0.25	0.5	0.75
Dietetics Band 7		0.3	0.3	0.3	0.3	0.3	0.075	0.15	0.225
<b>TOTAL</b>	<b>0.4</b>	<b>6.2</b>	<b>6.2</b>	<b>6.2</b>	<b>6.2</b>	<b>5.8</b>	<b>1.45</b>	<b>2.9</b>	<b>4.35</b>

GGH Workforce requirement	Current in CC	Option 1	Option 2	Option 3	Option 4	To Meet standards - 100% Additional Required	Proportional additionality		
							25%	50%	75%
Critical care Clinical lead (Band 7)	0.5	1	1	1	1	0.5	0.13	0.25	0.38
Specialist respiratory physiotherapist - Band 7	0.5	1	1	1	1	0.5	0.13	0.25	0.38
Physiotherapy assistant practitioner	1.5	3.2	2.8	2.8	2.8	1.3	0.33	0.65	0.98
Senior OT (Band 6)		2	2	2	2	2	0.50	1.00	1.50
OT Band 5		1	1	1	1	1	0.25	0.50	0.75
OT Band 4		1	1	1	1	1	0.25	0.50	0.75
SALT - Band 7		1	1	1	1	1	0.25	0.50	0.75
SALT (Band 6)						0	0.00	0.00	0.00
Clinical Psychology (Band 8C) HB Wide		1	1	1	1	1	0.25	0.50	0.75
Clinical Psychology (Band 3)		1	1	1	1	1	0.25	0.50	0.75
Dietetics Band 7		0.9	0.9	0.9	0.9	0.9	0.23	0.45	0.68
<b>TOTAL</b>	<b>2.5</b>	<b>13.1</b>	<b>12.7</b>	<b>12.7</b>	<b>12.7</b>	<b>10.2</b>	<b>2.55</b>	<b>5.10</b>	<b>7.65</b>

PPH Workforce requirement	Current in CC	Option 1	Option 2	Option 3	Option 4	To Meet standards - 100% Additional Required	Proportional additionality		
							25%	50%	75%
Clinical lead acute respiratory - Band 7	0.4	0.2	0.2	0.4	0.4	0	0.00	0.00	0.00
Specialist respiratory physiotherapist - Band 7		0.5	0.5	0.5	0.5	0.5	0.13	0.25	0.38
Physiotherapy assistant practitioner	0.5	0.2	0.2	0.5	0.5	0	0.00	0.00	0.00
OT (Band 4)		0.5	0.5	1	1	1	0.25	0.50	0.75
SALT - Band 6		0.2	0.2	0.5	0.5	0.5	0.13	0.25	0.38
Dietetics Band 7				0.25	0.25	0.25	0.06	0.13	0.19
<b>TOTAL</b>	<b>0.9</b>	<b>1.6</b>	<b>1.6</b>	<b>3.15</b>	<b>3.15</b>	<b>2.25</b>	<b>0.56</b>	<b>1.13</b>	<b>1.69</b>

Clinical Psychology accessed from GGH

WGH Workforce requirement	Current in CC	Option 1	Option 2	Option 3	Option 4	To Meet standards - 100% Additional Required	Proportional additionality		
							25%	50%	75%
Clinical lead acute respiratory - Band 7	0.4	1	1	1	1	0.6	0.15	0.30	0.45
Specialist respiratory physiotherapist - Band 7		0.5	0.5	0.5	0.5	0.5	0.13	0.25	0.38
Physiotherapy assistant practitioner	0.2	1	1	1	1	1	0.25	0.50	0.75
Senior OT (Band 6)		0.5	1	1	1	1	0.25	0.50	0.75
OT (Band 4)		0.5	1	1	1	1	0.25	0.50	0.75
SALT - Band 6		0.1	0.5	0.5	0.5	0.5	0.13	0.25	0.38
Clinical Psychology (Band5)		0.5	1	1	1	1	0.25	0.50	0.75
Dietetics Band 7		0.1	0.5	0.5	0.5	0.13	0.25	0.38	
<b>TOTAL</b>	<b>0.4</b>	<b>3.4</b>	<b>6.5</b>	<b>6.5</b>	<b>6.5</b>	<b>4.98</b>	<b>1.53</b>	<b>3.05</b>	<b>4.58</b>

TOTAL Requirements				
Option 3 & 4	To Meet standards - 100% Additional Required	25%	50%	75%
BGH	5.8	1.45	2.90	4.35
GGH	10.2	2.55	5.10	7.65
PPH	2.25	0.56	1.13	1.69
WGH	6.1	1.53	3.05	4.58
<b>TOTALS</b>	<b>24.35</b>	<b>6.09</b>	<b>12.18</b>	<b>18.26</b>

GGH	PPH	WGH	TOTAL

To Meet standards - 100% Additional Required	Proportional additionality		
	25%	50%	75%

To Meet standards - 100% Additional Required	Proportional additionality		
	25%	50%	75%

To Meet standards - 100% Additional Required	Proportional additionality		
	25%	50%	75%

To Meet standards - 100% Additional Required	Proportional additionality		
	25%	50%	75%

Option 1	To Meet standards -100%			
	Additionality Required	25%	50%	75%
BGH	5.8	1.45	2.90	4.35
GGH	10.6	2.65	5.30	7.95
PPH	1.6	0.40	0.80	1.20
WGH	3	0.75	1.50	2.25
<b>TOTALS</b>	<b>21</b>	<b>5.25</b>	<b>10.50</b>	<b>15.75</b>

Option 2	To Meet standards -100%			
	Additionality Required	25%	50%	75%
BGH	5.8	1.45	2.90	4.35
GGH	10.2	2.55	5.10	7.65
PPH	1.6	0.40	0.80	1.20
WGH	6.1	1.53	3.05	4.58
<b>TOTALS</b>	<b>23.7</b>	<b>5.93</b>	<b>11.85</b>	<b>17.78</b>



<b>Workforce Assessment</b>	For Dermatology services, there is no alternative option to be considered.
<b>Finance Assessment</b>	For Dermatology services, there is no alternative option to be considered.

Check and Challenge

Dermatology		OPTION 1						CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH	GGH	PPH	WGH	Community	TOTAL			
<b>NEW COSTS</b>									
Medical Photographer uplift to B6			£ 8,993.00			£ 8,993.00	Accept	Improvement Phase (2-4 Years)	
2 WTE Consultant (Medical/Nursing)			£ 300,000.00			£ 300,000.00	Accept	Improvement Phase (2-4 Years)	
1 WTE Consultant (Medical/Nursing)			£ 150,000.00			£ 150,000.00	Accept	Improvement Phase (2-4 Years)	
1WTE B4 and 0.5 B3 admin			£ 51,403.00			£ 51,403.00	Accept	Improvement Phase (2-4 Years)	
Potential Additional Nursing/Clinics			£ 140,921.00			£ 140,921.00	Accept	Improvement Phase (2-4 Years)	
Additional Staff for Procedure rooms			£ 101,100.00			£ 101,100.00	Accept	Improvement Phase (2-4 Years)	
Amman Valley Clinical 1WTE B5					£ 50,550.00	£ 50,550.00	Accept	Improvement Phase (2-4 Years)	
<b>Total New Costs</b>	£ -	£ -	£ 752,417.00	£ -	£ 50,550.00	£ 802,967.00			
<b>OFFSET FACTORS</b>									
Insourcing savings			£ 359,996.40			£ 359,996.40	Accept	Implementation Phase (up to 2Years)	
Insourcing savings (2-4)			£ 179,998.20			£ 179,998.20	Accept	Improvement Phase (2-4 Years)	
Outsourcing savings (telederm)			£ 37,680.00			£ 37,680.00	Accept	Improvement Phase (2-4 Years)	
<b>Total Potential OFFSET FACTORS</b>	£ -	£ -	£ 577,674.60	£ -	£ -	£ 577,674.60			
<b>Total Cost/Saving</b>	£ -	£ -	£ 174,742.40	£ -	£ 50,550.00	£ 225,292.40			

		OPTION 2   3						CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH	GGH	PPH	WGH	Community	TOTAL			
<b>NEW COSTS</b>									
Medical Photographer uplift to B6			£ 8,993.00			£ 8,993.00	Accept	Improvement Phase (2-4 Years)	
2 WTE Consultant (Medical/Nursing)			£ 300,000.00			£ 300,000.00	Accept	Improvement Phase (2-4 Years)	
1 WTE Consultant (Medical/Nursing)			£ 150,000.00			£ 150,000.00	Accept	Improvement Phase (2-4 Years)	
1WTE B4 and 0.5 B3 admin			£ 51,403.00			£ 51,403.00	Accept	Improvement Phase (2-4 Years)	
Potential Additional Nursing/Clinics			£ 140,921.00			£ 140,921.00	Accept	Improvement Phase (2-4 Years)	
Additional Staff for Procedure rooms			£ 101,100.00			£ 101,100.00	Accept	Improvement Phase (2-4 Years)	
GP Minor Surgery					£ 111,600.00	£ 111,600.00	Accept	Improvement Phase (2-4 Years)	
<b>Total New Costs</b>	£ -	£ -	£ 752,417.00	£ -	£ 111,600.00	£ 864,017.00			
<b>OFFSET FACTORS</b>									
Insourcing savings			£ 359,996.40			£ 359,996.40	Accept	Implementation Phase (up to 2Years)	
Insourcing savings (2-4)			£ 179,998.20			£ 179,998.20	Accept	Improvement Phase (2-4 Years)	
Outsourcing savings (telederm)			£ 37,680.00			£ 37,680.00	Accept	Improvement Phase (2-4 Years)	
<b>Total Potential OFFSET FACTORS</b>	£ -	£ -	£ 577,674.60	£ -	£ -	£ 577,674.60			
<b>Total Cost/Saving</b>	£ -	£ -	£ 174,742.40	£ -	£ 111,600.00	£ 286,342.40			

		OPTION 4						CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH	GGH	PPH	WGH	Community	TOTAL			
<b>NEW COSTS</b>									
Medical Photographer uplift to B6			£ 8,993.00			£ 8,993.00	Accept	Improvement Phase (2-4 Years)	
2 WTE Consultant (Medical/Nursing)			£ 300,000.00			£ 300,000.00	Accept	Improvement Phase (2-4 Years)	
1 WTE Consultant (Medical/Nursing)			£ 150,000.00			£ 150,000.00	Accept	Improvement Phase (2-4 Years)	
1WTE B4 and 0.5 B3 admin			£ 51,403.00			£ 51,403.00	Accept	Improvement Phase (2-4 Years)	
Potential Additional Nursing/Clinics			£ 140,921.00			£ 140,921.00	Accept	Improvement Phase (2-4 Years)	
Additional Staff for Procedure rooms			£ 101,100.00			£ 101,100.00	Accept	Improvement Phase (2-4 Years)	
<b>Total New Costs</b>	£ -	£ -	£ 752,417.00	£ -	£ -	£ 752,417.00			

OFFSET FACTORS										
Insourcing savings			£	359,996.40			£	359,996.40	Accept	Implementation Phase (up to 2Years)
Insourcing savings (2-4)			£	179,998.20			£	179,998.20	Accept	Improvement Phase (2-4 Years)
Outsourcing savings (telederm)			£	37,680.00			£	37,680.00	Accept	Improvement Phase (2-4 Years)
<b>Total Potential OFFSET FACTORS</b>	£	-	£	-	£	577,674.60	£	-	£	-
<b>Total Cost/Saving</b>	£	-	£	-	£	174,742.40	£	-	£	174,742.40

## Dermatology

Below is a summary of the Workforce additionality identified for each option

3WTE Medical Consultant required to fill current vacancies offset by current insourcing costs. Nurse consultant role could be developed as an opportunity to grow our own workforce and partly replace medical consultant vacancies. These have not been included as will be within current budget costs.

Current Workforce based in GGH would move to PPH - OCP may be required

Additional administrative staff required to cover increase in medical recruitment and additional workload.

Additional 2 x RNs required for increased procedure rooms

Additional RN required in Amman Valley within Option 1 - this would be a new site

Additional Outpatient workforce required for increase in sessions to be delivered from PPH, current OPD staff could be utilised if there is capacity however additional training

If it were to become a standalone outpatient service within a dermatology department then further additional OPD workforce would be required c.9WTE

Additional investment in training would be required to increase GP provision within the community

	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>TOTAL ADDITIONAL WORKFORCE REQUIREMENT</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
BGH	0	0	0	0
GGH	0	0	0	0
PPH	6.5	6.5	6.5	6.5
WGH	0	0	0	0
Community	1	0	0	0
<b>TOTAL</b>	<b>7.5</b>	<b>6.5</b>	<b>6.5</b>	<b>6.5</b>

### Workforce Requirement by Site and Role

<b>BGH</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
NO REQUIREMENTS				
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>GGH</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
NO REQUIREMENTS				
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>PPH</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
Band 4 Admin assistant	1	1	1	1
Band 3 Admin Assistant	0.5	0.5	0.5	0.5
Band 5 RN (Add. Procedure rooms)	2	2	2	2
Band 5 RN (Add. OPD clinics)	2	2	2	2
Band 3 HCSW (Add. OPD clinics)	1	1	1	1
<b>TOTAL</b>	<b>6.5</b>	<b>6.5</b>	<b>6.5</b>	<b>6.5</b>

<b>WGH</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
NO REQUIREMENTS				
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>Community</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
Band 5 RN - Amman Valley	1			
<b>TOTAL</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>Workforce Assessment</b>	<p><b>Emergency General Surgery</b></p> <p>&gt; Emergency Surgery Option 155 (A) requires a total workforce of 40.1 WTE. At Bronglais, there is complexity due to the need for a stand-alone unit, which requires 7 WTE across senior nursing roles. Glangwili General Hospital (GGH) requires 19.8 WTE, with a significant workforce pipeline risk associated with 3.5 WTE consultant posts and 10 WTE registered nursing posts across Bands 3 to 8a. Withybush General Hospital (WGH) requires an additional 13.3 WTE, with particular <b>risk around nursing posts</b>. There are challenges in understanding the interdependencies between Emergency General Surgery (EGS) and theatre staffing, and it is likely that workforce demand will increase further within this option.</p> <p>&gt; Emergency Surgery Option 222 (E) requires a total workforce of 29.8 WTE. At Glangwili General Hospital, 19.8 WTE is required, including 3.5 WTE consultant posts and 10 WTE nursing posts across Bands 3 to 8a. WGH requires 10 WTE, including 8 nursing posts at Bands 3 and 5. These requirements present similar <b>workforce pipeline risks</b> to Option 155 (A), particularly in relation to consultant and nursing recruitment.</p> <p>The workforce assessments presented do not include any consideration of interdependencies between services either within or external to the Clinical Service Plan (CSP). External services such as estates, therapies, diagnostics and other supporting functions are unknown in certain options that reference them, and these are likely to increase the overall WTE required to deliver the proposed changes, along with introducing additional financial risks.</p> <p>The staffing ratios used within these assessments are based on best estimates informed by feedback from services through the SDOT forms. It is therefore recommended that any option selected for progression is supported by a fully developed workforce plan. This plan should cover not only the operational requirements but also the strategic elements, ensuring workforce pipeline needs are addressed over a number of years to secure sustainability.</p> <p><b>Strategic Recommendations</b></p> <ul style="list-style-type: none"> <li>&gt; Develop a multi-year recruitment plan for roles, including international recruitment and local training pipelines.</li> <li>&gt; Explore rotational posts and flexible staffing models to improve retention.</li> <li>&gt; Engage with higher education institutions to secure future supply.</li> <li>&gt; Consider advanced practice roles to reduce dependency on hard-to-fill consultant posts.</li> </ul> <p><b>Risk Mitigation</b></p> <ul style="list-style-type: none"> <li>&gt; Implement targeted recruitment campaigns aligned with intake cycles.</li> <li>&gt; Create contingency plans for consultant and specialist roles, including locum arrangements.</li> <li>&gt; Monitor workforce pipeline risks quarterly and adjust plans accordingly.</li> <li>&gt; Secure financial planning for additional workforce costs and potential agency reliance.</li> </ul>
<b>Finance Assessment</b>	<ul style="list-style-type: none"> <li>• Financial sustainability of the majority of options remains to be determined as they require additional financial resource to the current service configuration</li> <li>• Enhancements have not been applied in the costings at this point as rotas have yet to be worked up for the options</li> <li>• Costs are calculated at 2023/24 rates, the same calculation methodology as the costings at consultation, to ensure comparability</li> <li>• Offsets included, which are brought forward from options consulted upon where appropriate, assume cash releasing cost reduction, through for example delivering a reduction in our bed base and reductions in staffing rotas</li> <li>• Therapies requirements are yet to be fully determined in some options and need to be identified</li> <li>• The options as currently configured have not determined the cost of all support services (i.e. pharmacy, pathology etc) and these need to be identified</li> <li>• The options have not yet identified their estates and facilities requirements and these need to be determined</li> <li>• Headroom application has been replicated from options 1-4, there remain inconsistencies to be resolved in application across staff groups</li> <li>• Staff costings are at mid point of scale, as per the costing for options at the point of consultation</li> <li>• All options do not yet include an assessment of their impact on non-pay costs</li> </ul> <p>Key risk is identification of funding to enable successful implementation of options as the majority of options require additional funding</p> <p>There is now a requirement to prioritise options, to enable further in-depth work to be completed identifying their requirements from a financial and workforce perspective.</p>

Emergency General Surgery						Check and Challenge	
OPTION 1   2   3   4						CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
BGH	GGH	PPH	WGH	TOTAL			
<b>NEW COSTS</b>							
0.3 B7 WTE (tbc)	£	23,006.00		£ 23,006.00	£ 46,012.00	Accept	Improvement Phase (2-4 Years)
1WTE B2 Ward Clerk	£	36,500.00		£ 36,500.00	£ 73,000.00	Accept	Improvement Phase (2-4 Years)
GGH SDEC (2WTE ACP, 4 XB5RN, 1xB3 HCSW)	£	412,262.00			£ 412,262.00	Accept	Improvement Phase (2-4 Years)
<b>Total New Costs</b>	£	<b>471,768.00</b>	£	<b>59,506.00</b>	£ 531,274.00		
<b>OFFSET FACTORS</b>							
Remove high cost locum				£ 225,000.00	£ 225,000.00	Accept	Implementation Phase (up to 2Years)
Replace MEDACS with NHS SAS Doctor				£ 40,000.00	£ 40,000.00	Accept	Implementation Phase (up to 2Years)
<b>Total Potential OFFSET FACTORS</b>	£	<b>-</b>	£	<b>-</b>	£ 265,000.00		
					£ -		
<b>Total Cost/Saving</b>	£	<b>471,768.00</b>	£	<b>-</b>	£ 205,494.00		£ 266,274.00



OPTION 155 (A)						CL to UPDATE THIS SECTION	
BGH	GGH	PPH	WGH	TOTAL	CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)	
<b>NEW COSTS</b>							
1 Senior Nurse 8a (If stand alone unit)	£	67,024			£ 67,024	Accept	Improvement Phase (2-4 Years)
1 Band 6 (If stand alone unit)	£	48,796			£ 48,796	Accept	Improvement Phase (2-4 Years)
2 Band 5	£	101,100			£ 101,100	Accept	Improvement Phase (2-4 Years)
1 Band 2/3?	£	37,207			£ 37,207	Accept	Improvement Phase (2-4 Years)
1 Ward Clerk Band 4 (If stand alone unit)	£	45,335			£ 45,335	Accept	Improvement Phase (2-4 Years)
1 Pharmacy Tech	£	35,725			£ 35,725	Accept	Improvement Phase (2-4 Years)
0.3 Band 7 Pharmacist	£	23,006			£ 23,006	Accept	Improvement Phase (2-4 Years)
1 Band 2 Ward Clerk	£	36,500			£ 36,500	Accept	Improvement Phase (2-4 Years)
2 ACP Band 8a (SDEC)	£	134,048			£ 134,048	Accept	Improvement Phase (2-4 Years)
4 Band 5 RN (SDEC)	£	159,212			£ 159,212	Accept	Improvement Phase (2-4 Years)
4 Band 3 HCSW (SDEC)	£	125,424			£ 125,424	Accept	Improvement Phase (2-4 Years)
1.5 Consultant	£	270,000			£ 270,000	Accept	Improvement Phase (2-4 Years)
2 ACP Band 7	£	120,764			£ 120,764	Accept	Improvement Phase (2-4 Years)
1 Physio band 5	£	39,803			£ 39,803	Accept	Improvement Phase (2-4 Years)
1 Pharmacy Tech Band 4	£	35,725			£ 35,725	Accept	Improvement Phase (2-4 Years)
1 Ward Clerk Band 4	£	45,335			£ 45,335	Accept	Improvement Phase (2-4 Years)
Hotel Services Band 2					£ -	Accept	Improvement Phase (2-4 Years)
0.3 Band 7 Pharmacist				£ 23,006	£ 23,006	Accept	Improvement Phase (2-4 Years)
1 Band 2 Ward Clerk				£ 36,500	£ 36,500	Accept	Improvement Phase (2-4 Years)
4 Band 5 RN				£ 202,200	£ 202,200	Accept	Improvement Phase (2-4 Years)
4 Band 3 HCSW				£ 146,000	£ 146,000	Accept	Improvement Phase (2-4 Years)
2 ACP Band 7 or 8a?				£ 134,048	£ 134,048	Accept	Improvement Phase (2-4 Years)
1 Pharmacy Tech Band 4				£ 35,725	£ 35,725	Accept	Improvement Phase (2-4 Years)
1 Ward Clerk Band 4				£ 45,335	£ 45,335	Accept	Improvement Phase (2-4 Years)
					£ -		
<b>Total New Costs</b>	£	<b>335,187</b>	£	<b>989,817</b>	£ 622,814		£ 1,947,818
<b>OFFSET FACTORS</b>							
Remove high cost locum				£ 225,000	£ 225,000	Accept	Improvement Phase (2-4 Years)
Replace MEDACS with NHS SAS Doctor				£ 40,000	£ 40,000	Accept	Improvement Phase (2-4 Years)
					£ -		
<b>Total Potential OFFSET FACTORS</b>	£	<b>-</b>	£	<b>-</b>	£ 265,000		£ 265,000
					£ -		
<b>Total Cost/Saving</b>	£	<b>335,187</b>	£	<b>989,817</b>	£ 357,814		£ 1,682,818

OPTION 222						
	BGH	GGH	PPH	WGH	TOTAL	
<b>NEW COSTS</b>						
0.3 Band 7 Pharmacist		£ 23,006			£ 23,006	Accept Implementation Phase (up to 2Years)
1 Band 2 Ward Clerk		£ 36,500			£ 36,500	Accept Implementation Phase (up to 2Years)
2 ACP Band 8a (SDEC)		£ 134,048			£ 134,048	Accept Implementation Phase (up to 2Years)
4 Band 5 RN (SDEC)		£ 159,212			£ 159,212	Accept Implementation Phase (up to 2Years)
4 Band 3 HCSW (SDEC)		£ 125,424			£ 125,424	Accept Implementation Phase (up to 2Years)
1.5 Consultant		£ 270,000			£ 270,000	Accept Longer Term (+4 Years)
2 ACP Band 7		£ 120,764			£ 120,764	Accept Implementation Phase (up to 2Years)
1 Physio band 5		£ 39,803			£ 39,803	Accept Implementation Phase (up to 2Years)
1 Pharmacy Tech Band 4		£ 35,725			£ 35,725	Accept Implementation Phase (up to 2Years)
1 Ward Clerk Band 4		£ 45,335			£ 45,335	Accept Implementation Phase (up to 2Years)
4 Hotel Services Band 2					£ -	Accept Implementation Phase (up to 2Years)
4 Band 5 RN				£ 202,200	£ 202,200	Accept Implementation Phase (up to 2Years)
4 Band 2 HCSW				£ 146,000	£ 146,000	Accept Implementation Phase (up to 2Years)
1 Pharmacy Tech Band 4				£ 35,725	£ 35,725	Accept Implementation Phase (up to 2Years)
1 Ward Clerk Band 4				£ 45,335	£ 45,335	Accept Implementation Phase (up to 2Years)
4 Hotel Services Band 2				?	£ -	Accept Implementation Phase (up to 2Years)
<b>Total New Costs</b>	£ -	£ 989,817	£ -	£ 429,260	£ 1,419,077	
<b>OFFSET FACTORS</b>					£ -	
					£ -	
					£ -	
<b>Total Potential OFFSET FACTORS</b>	£ -	£ -	£ -	£ -	£ -	
					£ -	
<b>Total Cost/Saving</b>	£ -	£ 989,817	£ -	£ 429,260	£ 1,419,077	

### Emergency General Surgery

Below is a summary of the Workforce additionality identified for each option

Requirement for a Surgical ECU have been noted within the Critical Care workforce requirement  
 There would also be a requirement to fill current Consultant vacancies to enable the options  
 1 x Middle Grade Role (as per Care of Elderly role in WGH) has been noted as desirable but has not been included within the workforce numbers below  
 SDEC Requirement for GGH and WGH to facilitate options  
 Therapies workforce for EGS are currently covered by site teams with no dedicated EGS workforce. Additional modelling is needed to determine if there is any additional requirement for

	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>TOTAL WORKFORCE REQUIREMENT</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
BGH	0	0	0	0
GGH	8.3	8.3	8.3	8.3
PPH	0	0	0	0
WGH	1.3	1.3	1.3	1.3
<b>TOTAL</b>	<b>9.6</b>	<b>9.6</b>	<b>9.6</b>	<b>9.6</b>

OPTION 155 (A)	OPTION 222 (E)
<b>WTE</b>	<b>WTE</b>
7	0
19.8	19.8
0	0
13.3	10
<b>40.1</b>	<b>29.8</b>

Finance - workforce requirements significantly above that of options 1-4 consulted upon therefore there is a need to demonstrate financial sustainability

**Workforce Requirement by Site and Role**

BGH	OPTION 1	OPTION 2	OPTION 3	OPTION 4
Workforce Requirement	WTE	WTE	WTE	WTE
NO REQUIREMENTS				
Senior Nurse 8a (if stand alone unit)				
Band 6 (if stand alone unit)				
Band 5				
Band 2/3?				
Ward Clerk Band 4 (if stand alone unit)				
Pharmacy Tech				
Hotel Services Band 2 (if stand alone unit)				
<b>TOTAL</b>	0	0	0	0

GGH	OPTION 1	OPTION 2	OPTION 3	OPTION 4
Workforce Requirement	WTE	WTE	WTE	WTE
Band 7 Pharmacist	0.3	0.3	0.3	0.3
Band 2 Ward Clerk	1	1	1	1
ACP Band 8a (SDEC)	2	2	2	2
Band 5 RN (SDEC)	4	4	4	4
Band 3 HCSW (SDEC)	1	1	1	1
Consultant				
ACP Band 7				
Physio band 5				
Pharmacy Tech Band 4				
Ward Clerk Band 4				
Hotel Services Band 2				
<b>TOTAL</b>	8.3	8.3	8.3	8.3

PPH	OPTION 1	OPTION 2	OPTION 3	OPTION 4
Workforce Requirement	WTE	WTE	WTE	WTE
NO REQUIREMENTS				
<b>TOTAL</b>	0	0	0	0

WGH	OPTION 1	OPTION 2	OPTION 3	OPTION 4
Workforce Requirement	WTE	WTE	WTE	WTE
Band 7 Pharmacist	0.3	0.3	0.3	0.3
Band 2 Ward Clerk	1	1	1	1
Band 5 RN				
Band 2 HCSW				
ACP				
Pharmacy Tech Band 4				
Ward Clerk Band 4				
Hotel Services Band 2				
<b>TOTAL</b>	1.3	1.3	1.3	1.3

**RJ SUM OF THE ABOVE**

Band 7 Pharmacist	0.6	0.3
Band 2 Ward Clerk	2	1
Band 2 HCSW	5	4
ACP Band 8a (SDEC) & Snr Nurse	3	2
Band 6 RN	1	0
Band 5 RN (SDEC)	10	8
Band 3 HCSW (SDEC)	4	4
Consultant	3.5	3.5
ACP Band 7	4	2
Physio band 5	1	1
Pharmacy Tech Band 4	3	2
Ward Clerk Band 4	3	2
Hotel Services Band 2	0	0
<b>Total</b>	40.1	29.8
Check	40.1	29.8

OPTION 155 (A)	OPTION 222 (E)
WTE	WTE
1	
1	
2	
1	
1	
1	
7	0

STANDALONE UNIT  
STANDALONE UNIT  
Headroom Check 26.9%  
Headroom Check 26.9%  
STANDALONE UNIT  
2 cleans a day along with full clean - detail for portering , waste and other

OPTION 155 (A)	OPTION 222 (E)
WTE	WTE
0.3	0.3
1	1
2	2
4	4
4	4
3.5	3.5
2	2
1	1
1	1
19.8	19.8

Headroom Check 26.9%  
Headroom Check 26.9%  
Required for 1:12 rota - not funded currently? Richard can you check  
Pipeline doesn't exist 4+ years (speciality needed?)  
Not called out 5 admissions a day. STANDALONE UNIT  
Headroom Check 26.9%  
2 cleans a day along with full clean - detail for portering , waste and other

OPTION 155 (A)	OPTION 222 (E)
WTE	WTE
0	0

OPTION 155 (A)	OPTION 222 (E)
WTE	WTE
0.3	
1	
4	4
4	4
2	
1	1
1	1
13.3	10

Headroom Check 26.9%  
Headroom Check 26.9%  
Pipeline doesn't exist 4+ years (speciality needed?)  
Headroom Check 26.9%  
2 cleans a day along with full clean - detail for portering , waste and other  
RJ corrected option 222 sum

<b>Workforce Assessment</b>	<p><b>Endoscopy</b></p> <ul style="list-style-type: none"> <li>&gt; Option 228 (B) requires a total workforce of 26.5 WTE. At Bronglais Hospital, there is a requirement for an additional Band 5 Registered Nurse. Glangwili General Hospital requires an additional 2.5 WTE Registered Nurses and one WTE Healthcare Support Worker. Prince Philip Hospital requires two WTE clinical endoscopists. This <b>workforce requirement will be challenging</b> and will need a significant workforce plan to achieve. Withybush General Hospital requires 0.6 WTE Band 5 Registered Nurses. The majority of the staffing requirement, 19.4 WTE, is within the community, including eight WTE additional Band 5 Registered Nurses.</li> </ul> <p>The workforce assessments presented do not include any consideration of interdependencies between services either within or external to the Clinical Service Plan (CSP). External services such as estates, therapies, diagnostics and other supporting functions are unknown in certain options that reference them, and these are likely to increase the overall WTE required to deliver the proposed changes, along with introducing additional financial risks.</p> <p>The staffing ratios used within these assessments are based on best estimates informed by feedback from services through the SDOT forms. It is therefore recommended that any option selected for progression is supported by a fully developed workforce plan. This plan should cover not only the operational requirements but also the strategic elements, ensuring workforce pipeline needs are addressed over a number of years to secure sustainability.</p> <p><b>Strategic Recommendations</b></p> <ul style="list-style-type: none"> <li>&gt; Develop a multi-year recruitment plan for nursing and AHP roles, including international recruitment and local training pipelines.</li> <li>&gt; Explore rotational posts and flexible staffing models to improve retention.</li> <li>&gt; Engage with higher education institutions to secure future supply.</li> <li>&gt; Consider advanced practice roles to reduce dependency on hard-to-fill consultant posts.</li> </ul> <p><b>Risk Mitigation</b></p> <ul style="list-style-type: none"> <li>&gt; Implement targeted recruitment campaigns aligned with intake cycles.</li> <li>&gt; Create contingency plans for consultant and specialist roles, including locum arrangements.</li> <li>&gt; Monitor workforce pipeline risks quarterly and adjust plans accordingly.</li> <li>&gt; Secure financial planning for additional workforce costs and potential agency reliance.</li> </ul>
<b>Finance Assessment</b>	<ul style="list-style-type: none"> <li>• Financial sustainability of the majority of options remains to be determined as they require additional financial resource to the current service configuration</li> <li>• Enhancements have not been applied in the costings at this point as rotas have yet to be worked up for the options</li> <li>• Costs are calculated at 2023/24 rates, the same calculation methodology as the costings at consultation, to ensure comparability</li> <li>• Offsets included, which are brought forward from options consulted upon where appropriate, assume cash releasing cost reduction, through for example delivering a reduction in our bed base and reductions in staffing rotas</li> <li>• Therapies requirements are yet to be fully determined in some options and need to be identified</li> <li>• The options as currently configured have not determined the cost of all support services (i.e. pharmacy, pathology etc) and these need to be identified</li> <li>• The options have not yet identified their estates and facilities requirements and these need to be determined</li> <li>• Headroom application has been replicated from options 1-4, there remain inconsistencies to be resolved in application across staff groups</li> <li>• Staff costings are at mid point of scale, as per the costing for options at the point of consultation</li> <li>• All options do not yet include an assessment of their impact on non-pay costs</li> </ul> <p>Key risk is identification of funding to enable successful implementation of options as the majority of options require additional funding</p> <p>There is now a requirement to prioritise options, to enable further in-depth work to be completed identifying their requirements from a financial and workforce perspective.</p>

Endoscopy	OPTION 1						CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH	GGH	PPH	WGH	Community	TOTAL		
<b>NEW COSTS</b>								
1 Band 5 WTE	£ 39,803.00					£ 39,803.00	Accept	Improvement Phase (2-4 Years)
2.5 Band 5 RN & 1 wte Band 3 HCSW		£ 130,864.00				£ 130,864.00	Accept	Improvement Phase (2-4 Years)
2 WTE Clinical Endoscopist to allow delivery of 10 additional sessions.			£ 134,046.00			£ 134,046.00	Accept	Improvement Phase (2-4 Years)
Professional Development Team required to support expanded workforce - across sites			£ 324,570.00			£ 324,570.00	Accept	Improvement Phase (2-4 Years)
6 WTE Band 5 RN						£ 301,530.00	Accept	Improvement Phase (2-4 Years)
2 WTE Band 3 HCSW			£ 301,530.00			£ -	Accept	Improvement Phase (2-4 Years)
1 WTE Band 4 waiting list coordinator			£ 35,725.00			£ 35,725.00	Accept	Improvement Phase (2-4 Years)
0.6WTE x Band 5 RN				£ 23,882.00		£ 23,882.00	Accept	Improvement Phase (2-4 Years)
Non pay						£ 330,000.00	Accept	Improvement Phase (2-4 Years)
<b>Total New Costs</b>	<b>£ 39,803.00</b>	<b>£ 130,864.00</b>	<b>£ 795,871.00</b>	<b>£ 23,882.00</b>	<b>£ -</b>	<b>£ 1,320,420.00</b>		
<b>OFFSET FACTORS</b>						£ -		
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>		
<b>Total Cost/Saving</b>	<b>£ 39,803.00</b>	<b>£ 130,864.00</b>	<b>£ 795,871.00</b>	<b>£ 23,882.00</b>	<b>£ -</b>	<b>£ 1,320,420.00</b>		

Endoscopy	OPTION 2						CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH	GGH	PPH	WGH	Community	TOTAL		
<b>NEW COSTS</b>								
1 Band 5 WTE	£ 39,803.00					£ 39,803.00	Accept	Improvement Phase (2-4 Years)
2.5 Band 5 RN & 1 wte Band 3 HCSW		£ 130,864.00				£ 130,864.00	Accept	Improvement Phase (2-4 Years)
2 WTE Clinical Endoscopist to allow delivery of 10 additional sessions.			£ 134,046.00			£ 134,046.00	Accept	Improvement Phase (2-4 Years)
Professional Development Team required to support expanded workforce - across sites			£ 324,570.00			£ 324,570.00	Accept	Improvement Phase (2-4 Years)
6 WTE Band 5 RN						£ 301,530.00	Accept	Improvement Phase (2-4 Years)
2 WTE Band 3 HCSW			£ 301,530.00			£ -	Accept	Improvement Phase (2-4 Years)
1 WTE Band 4 waiting list coordinator			£ 35,725.00			£ 35,725.00	Accept	Improvement Phase (2-4 Years)
0.6WTE x Band 5 RN				£ 23,882.00		£ 23,882.00	Accept	Improvement Phase (2-4 Years)
Non pay						£ 330,000.00	Accept	Improvement Phase (2-4 Years)
<b>Total New Costs</b>	<b>£ 39,803.00</b>	<b>£ 130,864.00</b>	<b>£ 795,871.00</b>	<b>£ 23,882.00</b>	<b>£ -</b>	<b>£ 1,320,420.00</b>		
<b>OFFSET FACTORS</b>						£ -		
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>		
<b>Total Cost/Saving</b>	<b>£ 39,803.00</b>	<b>£ 130,864.00</b>	<b>£ 795,871.00</b>	<b>£ 23,882.00</b>	<b>£ -</b>	<b>£ 1,320,420.00</b>		

Endoscopy	OPTION 3						CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH	GGH	PPH	WGH	Community	TOTAL		
<b>NEW COSTS</b>								
1 Band 5 WTE	£ 39,803.00					£ 39,803.00	Accept	Improvement Phase (2-4 Years)
2.5 Band 5 RN & 1 wte Band 3 HCSW		£ 130,864.00				£ 130,864.00	Accept	Improvement Phase (2-4 Years)
Professional Development Team required to support expanded workforce - across sites			£ 324,570.00			£ 324,570.00	Accept	Improvement Phase (2-4 Years)
2 WTE Band 3 HCSW						£ -	Accept	Improvement Phase (2-4 Years)
0.6WTE x Band 5 RN				£ 23,882.00		£ 23,882.00	Accept	Improvement Phase (2-4 Years)
Consultant Endoscopist to allow delivery of 10 additional sessions.					£ 300,000.00	£ 300,000.00	Accept	Improvement Phase (2-4 Years)
1 WTE Band 7 RN					£ 521,600.00	£ 521,600.00	Accept	Improvement Phase (2-4 Years)
1 WTE Band 6 RN						£ -	Accept	Improvement Phase (2-4 Years)
6 WTE Band 5 RN						£ -	Accept	Improvement Phase (2-4 Years)
2 WTE Band 3 HCSW						£ -	Accept	Improvement Phase (2-4 Years)
1 WTE Receptionist Band 2					£ 36,500.00	£ 36,500.00	Accept	Improvement Phase (2-4 Years)
1 WTE Band 4 waiting list coordinator					£ 35,725.00	£ 35,725.00	Accept	Improvement Phase (2-4 Years)
Non pay						£ 330,000.00	Accept	Improvement Phase (2-4 Years)
<b>Total New Costs</b>	<b>£ 39,803.00</b>	<b>£ 130,864.00</b>	<b>£ 324,570.00</b>	<b>£ 23,882.00</b>	<b>£ 893,825.00</b>	<b>£ 1,742,944.00</b>		
<b>OFFSET FACTORS</b>						£ -		
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>		
<b>Total Cost/Saving</b>	<b>£ 39,803.00</b>	<b>£ 130,864.00</b>	<b>£ 324,570.00</b>	<b>£ 23,882.00</b>	<b>£ 893,825.00</b>	<b>£ 1,742,944.00</b>		

Endoscopy	OPTION 4 3rd room only						CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH	GGH	PPH	WGH	Community	TOTAL		
<b>NEW COSTS</b>								
1 Band 5 WTE	£ 39,803.00					£ 39,803.00	Accept	Improvement Phase (2-4 Years)
2.5 Band 5 RN & 1 wte Band 3 HCSW		£ 130,864.00				£ 130,864.00	Accept	Improvement Phase (2-4 Years)
2 WTE Clinical Endoscopist to allow delivery of 10 additional sessions.			£ 134,046.00			£ 134,046.00	Accept	Improvement Phase (2-4 Years)
Professional Development Team required to support expanded workforce - across sites			£ 324,570.00			£ 324,570.00	Accept	Improvement Phase (2-4 Years)
6 WTE Band 5 RN						£ 301,530.00	Accept	Improvement Phase (2-4 Years)
2 WTE Band 3 HCSW			£ 301,530.00			£ -	Accept	Improvement Phase (2-4 Years)
2 WTE Band 3 HCSW						£ -	Accept	Improvement Phase (2-4 Years)

0.6WTE x Band 5 RN				£	23,882.00		£	23,882.00	Accept	Improvement Phase (2-4 Years)		
Non pay							£	330,000.00	Accept	Improvement Phase (2-4 Years)		
<b>Total New Costs</b>	£	39,803.00	£	130,864.00	£	760,146.00	£	23,882.00	£	-	£	1,284,695.00
<b>OFFSET FACTORS</b>												
<b>Total Potential OFFSET FACTORS</b>	£	-	£	-	£	-	£	-	£	-	£	-
<b>Total Cost/Saving</b>	£	39,803.00	£	130,864.00	£	760,146.00	£	23,882.00	£	-	£	1,284,695.00

	OPTION 4 (Evenings & Weekends & 3rd room)						TOTAL					
	BGH	GGH	PPH	WGH	Community							
<b>NEW COSTS</b>												
2 WTE Clinical Endoscopist or Consultant Endoscopist to allow delivery of 10 additional sessions.			£	134,046.00			£	134,046.00	Accept	Improvement Phase (2-4 Years)		
2 WTE Clinical Endoscopist to allow delivery of further 10 additional sessions for extended hours across sites.			£	134,046.00			£	134,046.00	Accept	Improvement Phase (2-4 Years)		
Professional Development Team required to support expanded workforce - across sites			£	324,570.00			£	324,570.00	Accept	Improvement Phase (2-4 Years)		
6 WTE Band 5 RN2 WTE Band 3 HCSW			£	301,530.00			£	301,530.00	Accept	Improvement Phase (2-4 Years)		
10.25 WTE Band 53.8WTE Band 3			£	655,834.00			£	655,834.00	Accept	Improvement Phase (2-4 Years)		
1.29 WTE x Band 2			£	50,510.00			£	50,510.00	Accept	Improvement Phase (2-4 Years)		
1.5WTE Band 4 waiting list coordinator (cross site)			£	53,587.50			£	53,587.50	Accept	Improvement Phase (2-4 Years)		
Non pay							£	330,000.00	Accept	Improvement Phase (2-4 Years)		
<b>Total New Costs</b>	£	-	£	-	£	1,654,123.50	£	-	£	-	£	1,984,123.50
<b>OFFSET FACTORS</b>												
<b>Total Potential OFFSET FACTORS</b>	£	-	£	-	£	-	£	-	£	-	£	-
<b>Total Cost/Saving</b>	£	-	£	-	£	1,654,123.50	£	-	£	-	£	1,984,123.50

OPTION 4 ALTERNATIVES AS FEEDBACK

	OPTION 4 Week day evenings							
	BGH	GGH	PPH	WGH	Community	TOTAL		
<b>NEW COSTS</b>								
2.8WTE x Band 5	£ 149,876.00					£ 149,876.00	Accept	Improvement Phase (2-4 Years)
1WTE x Band 3						£ -	Accept	Improvement Phase (2-4 Years)
0.68 WTE x Band 2	£ 21,634.00					£ 21,634.00	Accept	Improvement Phase (2-4 Years)
5.6 WTE Band 5		£ 297,871.00				£ 297,871.00	Accept	Improvement Phase (2-4 Years)
2WTE Band 3						£ -	Accept	Improvement Phase (2-4 Years)
0.68 WTE x Band 2		£ 21,634.00				£ 21,634.00	Accept	Improvement Phase (2-4 Years)
2 WTE Clinical Endoscopist to allow delivery of further 10 additional sessions for extended hours across sites.			£ 134,046.00			£ 134,046.00	Accept	Improvement Phase (2-4 Years)
5.6 WTE Band 5				£ 297,871.00		£ 297,871.00	Accept	Improvement Phase (2-4 Years)
2WTE Band 3						£ -	Accept	Improvement Phase (2-4 Years)
0.68 WTE x Band 2				£ 21,634.00		£ 21,634.00	Accept	Improvement Phase (2-4 Years)
5.6 WTE Band 5					£ 297,871.00	£ 297,871.00	Accept	Improvement Phase (2-4 Years)
2WTE Band 3						£ -	Accept	Improvement Phase (2-4 Years)
0.68 WTE x Band 2					£ 21,634.00	£ 21,634.00	Accept	Improvement Phase (2-4 Years)
Non pay						£ 330,000.00	Accept	Improvement Phase (2-4 Years)
<b>Total New Costs</b>	<b>£ 171,510.00</b>	<b>£ 319,505.00</b>	<b>£ 134,046.00</b>	<b>£ 319,505.00</b>	<b>£ 319,505.00</b>	<b>£ 1,594,071.00</b>		
<b>OFFSET FACTORS</b>								
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>		
<b>Total Cost/Saving</b>	<b>£ 171,510.00</b>	<b>£ 319,505.00</b>	<b>£ 134,046.00</b>	<b>£ 319,505.00</b>	<b>£ 319,505.00</b>	<b>£ 1,594,071.00</b>		

OPTION 4 Week end								
	BGH	GGH	PPH	WGH	Community	TOTAL		
<b>NEW COSTS</b>								
2.2WTE x Band 5	£ 176,531.00					£ 176,531.00	Accept	Improvement Phase (2-4 Years)
1WTE x Band 3						£ -	Accept	Improvement Phase (2-4 Years)
0.61 WTE x Band 2	£ 28,876.00					£ 28,876.00	Accept	Improvement Phase (2-4 Years)
4.65 WTE Band 5		£ 357,963.00				£ 357,963.00	Accept	Improvement Phase (2-4 Years)
1.8WTE Band 3						£ -	Accept	Improvement Phase (2-4 Years)
0.61 WTE x Band 2	£ 28,876.00					£ 28,876.00	Accept	Improvement Phase (2-4 Years)
2 WTE Clinical Endoscopist to allow delivery of further 10 additional sessions for extended hours across sites			£ 134,046.00			£ 134,046.00	Accept	Improvement Phase (2-4 Years)
4.65 WTE Band 5				£ 357,963.00		£ 357,963.00	Accept	Improvement Phase (2-4 Years)
1.8 WTE Band 3						£ -	Accept	Improvement Phase (2-4 Years)
0.61 WTE x Band 2				£ 28,876.00		£ 28,876.00	Accept	Improvement Phase (2-4 Years)
4.65 WTE Band 5					£ 357,963.00	£ 357,963.00	Accept	Improvement Phase (2-4 Years)
1.8 WTE Band 3						£ -	Accept	Improvement Phase (2-4 Years)
0.61 WTE x Band 2					£ 28,876.00	£ 28,876.00	Accept	Improvement Phase (2-4 Years)
Non pay						£ 330,000.00	Accept	Improvement Phase (2-4 Years)
<b>Total New Costs</b>	<b>£ 205,407.00</b>	<b>£ 386,839.00</b>	<b>£ 134,046.00</b>	<b>£ 386,839.00</b>	<b>£ 386,839.00</b>	<b>£ 1,829,970.00</b>		
<b>OFFSET FACTORS</b>								
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>		
<b>Total Cost/Saving</b>	<b>£ 205,407.00</b>	<b>£ 386,839.00</b>	<b>£ 134,046.00</b>	<b>£ 386,839.00</b>	<b>£ 386,839.00</b>	<b>£ 1,829,970.00</b>		

OPTION 228 (B)								
	BGH	GGH	PPH	WGH	Community	TOTAL		
<b>NEW COSTS</b>								
1 Band 5 WTE	£ 39,803					£ 39,803	Accept	Improvement Phase (2-4 Years)
2.5 Band 5 RN & 1 wte Band 3 HCSW		£ 130,864				£ 130,864	Accept	Improvement Phase (2-4 Years)
2 WTE Clinical Endoscopist to allow delivery of 10 additional sessions.			£ 134,046			£ 134,046	Accept	Improvement Phase (2-4 Years)
Professional Development Team required to support expanded workforce - across sites			£ 324,570			£ 324,570	Accept	Improvement Phase (2-4 Years)
6 WTE Band 5 RN						£ 301,530	Accept	Improvement Phase (2-4 Years)
2 WTE Band 3 HCSW			£ 301,530			£ -	Accept	Improvement Phase (2-4 Years)
1WTE Band 4 waiting list coordinator			£ 35,725			£ 35,725	Accept	Improvement Phase (2-4 Years)
0.6WTE x Band 5 RN				£ 23,882		£ 23,882	Accept	Improvement Phase (2-4 Years)
Consultant Clinical Endoscopist 8a					£ 67,024	£ 67,024	Accept	Improvement Phase (2-4 Years)
Site Manager 8a/8b					£ 75,596	£ 75,596	Accept	Improvement Phase (2-4 Years)
Clinical Endoscopists 8a					£ 134,048	£ 134,048	Accept	Improvement Phase (2-4 Years)
Band 7 RN					£ 60,382	£ 60,382	Accept	Improvement Phase (2-4 Years)
Band 6 RN					£ 48,796	£ 48,796	Accept	Improvement Phase (2-4 Years)
Band 5 RN					£ 318,424	£ 318,424	Accept	Improvement Phase (2-4 Years)
Band 3 HCSW					£ 106,610	£ 106,610	Accept	Improvement Phase (2-4 Years)
Band 4 Waiting List Coordinator					£ 35,725	£ 35,725	Accept	Improvement Phase (2-4 Years)
Band 2 Receptionist					£ 28,740	£ 28,740	Accept	Improvement Phase (2-4 Years)
Non pay						£ -	Check	
<b>Total New Costs</b>	<b>£ 39,803</b>	<b>£ 130,864</b>	<b>£ 795,871</b>	<b>£ 23,882</b>	<b>£ 875,345</b>	<b>£ 1,865,765</b>		
<b>OFFSET FACTORS</b>								
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>		
<b>Total Cost/Saving</b>	<b>£ 39,803</b>	<b>£ 130,864</b>	<b>£ 795,871</b>	<b>£ 23,882</b>	<b>£ 875,345</b>	<b>£ 1,865,765</b>		

**Endoscopy**

Below is a summary of the Workforce additionality identified for each option

**Options 1 & 2**

To address future Consultant retirements, potential for role of Clinical Endoscopists to be developed. Additional workforce required for expansion of service.

Risk of recruiting and training this number of additional staff. Professional development team would be needed to support expansion (5WTE across HB) Additional workforce may be required for Pathology and HSDU to enable expansion of the service

**Option 3**

As above however no additional provision in PPH, this will be sited within a Community Hub therefore would require additional 3WTE

**Option 4**

As noted above in Option 1 & 2 with the following additionality:

This option includes the provision of a 3rd room in PPH with additional week day and weekend extended hours for an enhanced 7 day service. The option has been broken Professional Development Team would be required and has been included within PPH with a Band 6 proposed for each site 7 day model – OCP would be required to look at new working patterns – may be deemed unfavourable by current staff

TOTAL ADDITIONAL WORKFORCE REQUIREMENT	OPTION 4						
	OPTION 1	OPTION 2	OPTION 3	3rd Room, Evenings & Weekends	3rd Room Only	Week day Evenings Only	Weekends Only
	WTE	WTE	WTE	WTE	WTE	WTE	WTE
BGH	1	1	1	---	---	---	---
GGH	3.5	3.5	3.5	---	---	---	---
PPH	11	11	0	33.84	11	10.78	7.06
WGH	0.6	0.6	0.6	---	---	---	---
Community	0	0	13	---	---	---	---
<b>TOTAL</b>	<b>16.1</b>	<b>16.1</b>	<b>18.1</b>	<b>33.84</b>	<b>11</b>	<b>10.78</b>	<b>7.06</b>

**Workforce Requirement by Site and Role**

BGH	OPTION 4						
	OPTION 1	OPTION 2	OPTION 3	3rd Room, Evenings & Weekends	3rd Room Only	Week day Evenings Only	Weekends Only
Workforce Requirement	WTE	WTE	WTE	WTE	WTE	WTE	WTE
Band 5 RN	1	1	1	6	1	2.8	2.2
Band 3 HCSW				2		1	1
Band 2 Admin				1.29		0.68	0.61
<b>TOTAL</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>9.29</b>	<b>1</b>	<b>4.48</b>	<b>3.81</b>

GGH	OPTION 4						
	OPTION 1	OPTION 2	OPTION 3	3rd Room, Evenings & Weekends	3rd Room Only	Week day Evenings Only	Weekends Only
Workforce Requirement	WTE	WTE	WTE	WTE	WTE	WTE	WTE
Band 5 RN	2.5	2.5	2.5	12.75	2.5	5.6	4.65
Band 3 HCSW	1	1	1	4.8	1	2	1.8
Band 2 Admin				1.29		0.68	0.61
Band 4 Waiting List coordinator (cross site)				1.5			
<b>TOTAL</b>	<b>3.5</b>	<b>3.5</b>	<b>3.5</b>	<b>20.34</b>	<b>3.5</b>	<b>8.28</b>	<b>7.06</b>

PPH	OPTION 4						
	OPTION 1	OPTION 2	OPTION 3	3rd Room, Evenings & Weekends	3rd Room Only	Week day Evenings Only	Weekends Only
Workforce Requirement	WTE	WTE	WTE	WTE	WTE	WTE	WTE
Clinical Endoscopist	2	2		4	2	2	
Band 5 RN	6	6		16.25	6	5.6	4.65
Band 3 HCSW	2	2		5.8	2	2	1.8
Band 4 waiting list coordinator				1.5		0.5	
Band 2 Admin	1	1		1.29		0.68	0.61
Band 7 Team Leader (Professional Development Team)				1			
Band 6 Professional Development - 1 for each site				4			
<b>TOTAL</b>	<b>11</b>	<b>11</b>	<b>0</b>	<b>33.84</b>	<b>11</b>	<b>10.78</b>	<b>7.06</b>

WGH	OPTION 4						
	OPTION 1	OPTION 2	OPTION 3	3rd Room, Evenings & Weekends	3rd Room Only	Week day Evenings Only	Weekends Only
Workforce Requirement	WTE	WTE	WTE	WTE	WTE	WTE	WTE
Band 5 RN	0.6	0.6	0.6	10.85	0.6	5.6	4.65
Band 3 HCSW				3.8		2	1.8
Band 2 Admin				1.29		0.68	0.61
<b>TOTAL</b>	<b>0.6</b>	<b>0.6</b>	<b>0.6</b>	<b>15.94</b>	<b>0.6</b>	<b>8.28</b>	<b>7.06</b>

Community	OPTION 4						
	OPTION 1	OPTION 2	OPTION 3	3rd Room, Evenings & Weekends	3rd Room Only	Week day Evenings Only	Weekends Only
Workforce Requirement	WTE	WTE	WTE	WTE	WTE	WTE	WTE
Consultant Clinical Endoscopist			1				
Site Manager 8a/8b							
Clinical Endoscopists 8a			1				
Band 7 RN			1				
Band 6 RN			1				
Band 5 RN			6				
Band 3 HCSW			2				
Band 4 Waiting List Coordinator			1				

Option 4 Note - PPH has been used to baseline the workforce data for additional sessions as to illustrate the potential costs. In reality these will / maybe spread across the Health board as needed to meet the 10 session additionality requirement

Note: Option 4 - Detailed breakdowns for each site have been kept as to assess how each site may look if additional sessions/ extended hours were implemented at that particular site.

OPTION 228 (B)
WTE
1
3.5
2
0.6
19.4
26.5

Finance - significantly higher workforce requirements than options 1-3 and all but one of the Option 4 versions therefore financial sustainability is

OPTION 228 (B)
WTE
1
1

Headroom check 26.9%

OPTION 228 (B)
WTE
2.5
1
3.5

Headroom check 26.9%

Headroom check 26.9%

OPTION 228 (B)
WTE
2
2

OPTION 228 (B)
WTE
0.6
0.6

Headroom check 26.9%

OPTION 228 (B)
WTE
1
1
2
1
1
8
3.4
1

Delivery only for 1 room - 4+ years needs workforce planning likely to increase costs

No current Pipeline for staff likely to take 4+ years

Headroom check 26.9%

Headroom check 26.9%

Band 2 Receptionist				1					
<b>TOTAL</b>	0	0	13	0	0	0	0	0	0



1
<b>19.4</b>

TOTAL OPTION 2228	
Consultant Clinical Endoscopist	1
Clinical Endoscopist (Grade?)	2
Site Manager 8a/8b	1
Clinical Endoscopists 8a	2
Band 7 RN	1
Band 6 RN	1
Band 5 RN	12.1
Band 3 HCSW	4.4
Band 4 Waiting List Coordinator	1
Band 2 Receptionist	1
<b>TOTAL</b>	<b>26.5</b>
<b>Check</b>	<b>26.5</b>

**Ophthalmology**

**Workforce Assessment**

- > Option 95 (A) requires an additional workforce of 14.9 WTE, with the majority of the resource at Glangwili General Hospital (14.5 WTE). There is a **significant risk associated with the requirement for 3.5 WTE consultant posts** to deliver 20 sessions and weekend working.
- > Option 99 (A) requires an additional 12.9 WTE, with 12.5 WTE at Glangwili. This option carries a **reduced risk**, with only 1.5 WTE additional consultants required, which may be achievable through existing workforce pipelines.
- > Option 227 (A) requires an additional 10.2 WTE, with 8.8 WTE at Glangwili.
- > Option 263 (B) requires 19.3 WTE in total. This includes 4.2 WTE at Bronglais across consultant-level roles to support additional 12-hour working, and 1.8 WTE Band 5 Registered Nurses. Glangwili requires 5 WTE, including 3 WTE Band 5 Registered Nurses. Prince Philip Hospital requires 3 WTE, Wwithyush requires 4.3 WTE, and there is an additional 2.8 WTE required in the community.
- > Option 167 requires an additional 11 WTE. Glangwili requires 6 WTE, including 3 additional Band 5 Registered Nurses. Wwithyush requires an additional 1 WTE pharmacy technician, and the community requires 4 WTE. There is a **workforce risk around Band 8a optometrists**, with two required.
- > Option 173 requires an additional 9 WTE, including 3 WTE at Glangwili, an additional pharmacy technician at Wwithyush, and a community requirement increase of 4 WTE, along with 2 WTE optometrists at Band 8a level.

The workforce assessments presented do not include any consideration of interdependencies between services either within or external to the Clinical Service Plan (CSP). External services such as estates, therapies, diagnostics and other supporting functions are unknown in certain options that reference them, and these are likely to increase the overall WTE required to deliver the proposed changes, along with introducing additional financial risks.

The staffing ratios used within these assessments are based on best estimates informed by feedback from services through the SDOT forms. It is therefore recommended that any option selected for progression is supported by a fully developed workforce plan. This plan should cover not only the operational requirements but also the strategic elements, ensuring workforce pipeline needs are addressed over a number of years to secure sustainability.

**Strategic Recommendations**

- > Develop a multi-year recruitment plan for nursing and AHP roles, including international recruitment and local training pipelines.
- > Explore rotational posts and flexible staffing models to improve retention.
- > Engage with higher education institutions to secure future supply.
- > Consider advanced practice roles to reduce dependency on hard-to-fill consultant posts.

**Risk Mitigation**

- > Implement targeted recruitment campaigns aligned with intake cycles.
- > Create contingency plans for consultant and specialist roles, including locum arrangements.
- > Monitor workforce pipeline risks quarterly and adjust plans accordingly.
- > Secure financial planning for additional workforce costs and potential agency reliance.

**Finance Assessment**

- Financial sustainability of the majority of options remains to be determined as they require additional financial resource to the current service configuration
- Enhancements have not been applied in the costings at this point as rotas have yet to be worked up for the options
- Costs are calculated at 2023/24 rates, the same calculation methodology as the costings at consultation, to ensure comparability
- Offsets included, which are brought forward from options consulted upon where appropriate, assume cash releasing cost reduction, through for example delivering a reduction in our bed base and reductions in staffing rotas
- Therapies requirements are yet to be fully determined in some options and need to be identified
- The options as currently configured have not determined the cost of all support services (i.e. pharmacy, pathology etc) and these need to be identified
- The options have not yet identified their estates and facilities requirements and these need to be determined
- Headroom application has been replicated from options 1-4, there remain inconsistencies to be resolved in application across staff groups
- Staff costings are at mid point of scale, as per the costing for options at the point of consultation
- All options do not yet include an assessment of their impact on non-pay costs

Key risk is identification of funding to enable successful implementation of options as the majority of options require additional funding

There is now a requirement to prioritise options, to enable further in-depth work to be completed identifying their requirements from a financial and workforce perspective.

Ophthalmology		OPTION 1, 3 & 4						Check and Challenge	
	BGH	GGH	PPH	WGH	Community	TOTAL	CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)	
<b>NEW COSTS</b>									
3 x Band 5 RN (2.4WTE potential if offset by release of AV 0.6WTE) - 2 for OPD and 1 for Tysul Ward		£ 151,650.00				£ 151,650.00	Accept	Improvement Phase (2-4 Years)	
1 x Band 2 Receptionist		£ 36,500.00				£ 36,500.00	Accept	Improvement Phase (2-4 Years)	
1WTE x Band 3 Medical secretary		£ 31,356.00				£ 31,356.00	Accept	Improvement Phase (2-4 Years)	
						£ -			
						£ -			
<b>Total New Costs</b>	£ -	£ 219,506.00	£ -	£ -	£ -	£ 219,506.00			
<b>OFFSET FACTORS</b>									
Potential 10-20% saving on travel times/cost (unknown cost)							Accept	Improvement Phase (2-4 Years)	
1WTE x Band 3 Medical secretary			£ 31,356.00			£ 31,356.00	Accept	Improvement Phase (2-4 Years)	
0.6WTE RN released from AV could offset part need in GGH					£ 30,330.00	£ 30,330.00	Accept	Improvement Phase (2-4 Years)	
Saving from reduction in pay to Just Wales to transport drugs (£50 a day from ClIC) once a week					£ 2,500.00	£ 2,500.00	Accept	Improvement Phase (2-4 Years)	
<b>Total Potential OFFSET FACTORS</b>	£ -	£ -	£ 31,356.00	£ -	£ 32,830.00	£ 64,186.00			
<b>Total Cost/Saving</b>	£ -	£ 219,506.00	£ 31,356.00	£ -	£ 32,830.00	£ 155,320.00			

		OPTION 2							
	BGH	GGH	PPH	WGH	Community	TOTAL			
<b>NEW COSTS</b>									
<b>Total New Costs</b>	£ -	£ -	£ -	£ -	£ -	£ -			
<b>OFFSET FACTORS</b>									
<b>Total Potential OFFSET FACTORS</b>	£ -	£ -	£ -	£ -	£ -	£ -			
<b>Total Cost/Saving</b>	£ -	£ -	£ -	£ -	£ -	£ -			

		OPTION 95 (A)							
	BGH	GGH	PPH	WGH	Community	TOTAL			
<b>NEW COSTS</b>									
2 Band 5 RN (Add. OPD clinics)		£ 101,100				£ 101,100	Accept	Improvement Phase (2-4 Years)	
Band 5 RN (Tysul Ward)		£ 50,550				£ 50,550	Accept	Improvement Phase (2-4 Years)	
Band 3 Medical Secretary		£ 31,356				£ 31,356	Accept	Improvement Phase (2-4 Years)	
1wte Band 2 Receptionist		£ 36,500				£ 36,500	Accept	Improvement Phase (2-4 Years)	
3.5wte Consultant (20 sessions inc weekend cover)		£ 630,000				£ 630,000	Accept	Longer Term (+4 Years)	
Additional Band 5 RN x2WTE		£ 101,100				£ 101,100	Accept	Longer Term (+4 Years)	
Additional Band 5 ODP x1WTE		£ 50,550				£ 50,550	Accept	Longer Term (+4 Years)	
1x Pharmacy Tech Band 4		£ 35,725		£ 35,725		£ 71,450	Accept	Longer Term (+4 Years)	
Ward Clerk Band 4		£ 45,335				£ 45,335	Accept	Longer Term (+4 Years)	
Receptionist Band 2		£ 36,500				£ 36,500	Accept	Longer Term (+4 Years)	
<b>Total New Costs</b>	£ -	£ 1,118,716	£ -	£ 35,725	£ -	£ 1,154,441			
<b>OFFSET FACTORS</b>									
Potential 10-20% saving on travel times/cost (unknown cost)						£ -	Accept	Implementation Phase (up to 2Years)	
0.6WTE RN released from AV could offset part need in GGH					£ 30,330	£ 30,330	Accept	Implementation Phase (up to 2Years)	
Saving from reduction in pay to Just Wales to transport drugs (£50 a day from ClIC) once a week					£ 2,500	£ 2,500	Accept	Implementation Phase (up to 2Years)	
						£ -			
<b>Total Potential OFFSET FACTORS</b>	£ -	£ -	£ -	£ -	£ 32,830	£ 32,830			
						£ -			
<b>Total Cost/Saving</b>	£ -	£ 1,118,716	£ -	£ 35,725		£ 1,121,611			

OPTION 99 [A]						
	BGH	GGH	PPH	WGH	Community	TOTAL
<b>NEW COSTS</b>						
2 Band 5 RN (Add. OPD clinics)		£ 101,100				£ 101,100
Band 5 RN (Tysul Ward)		£ 50,550				£ 50,550
Band 3 Medical Secretary		£ 31,356				£ 31,356
Band 2 Receptionist		£ 36,500				£ 36,500
1.5 Consultants		£ 270,000				£ 270,000
Additional Band 5 RN		£ 101,100				£ 101,100
Additional Band 5 ODP		£ 50,550				£ 50,550
Pharmacy Tech Band 4		£ 35,725		£ 35,725		£ 71,450
Ward Clerk Band 4		£ 45,335				£ 45,335
Receptionist Band 2		£ 36,500				£ 36,500
<b>Total New Costs</b>	£ -	£ 758,716	£ -	£ 35,725	£ -	£ 794,441
<b>OFFSET FACTORS</b>						
Potential 10-20% saving on travel times/cost (unknown cost)						£ -
1WTE x Band 3 Medical secretary			£ 31,356			£ 31,356
0.6WTE RN released from AV could offset part need in GGH					£ 30,330	£ 30,330
Saving from reduction in pay to Just Wales to transport drugs (£50 a day from CIIC) once a week					£ 2,500	£ 2,500
<b>Total Potential OFFSET FACTORS</b>	£ -	£ -	£ 31,356	£ -	£ 32,830	£ 64,186
						£ -
<b>Total Cost/Saving</b>	£ -	£ 758,716	£ 31,356	£ 35,725	£ 32,830	£ 730,255

Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Challenge	Improvement Phase (2-4 Years)
Challenge	Improvement Phase (2-4 Years)
Challenge	Improvement Phase (2-4 Years)
Challenge	Improvement Phase (2-4 Years)
Challenge	Improvement Phase (2-4 Years)
Challenge	Implementation Phase (up to 2Years)

Accept	Implementation Phase (up to 2Years)
Accept	Implementation Phase (up to 2Years)
Accept	Implementation Phase (up to 2Years)
Accept	Implementation Phase (up to 2Years)

OPTION 167 [A]						
	BGH	GGH	PPH	WGH	Community	TOTAL
<b>NEW COSTS</b>						
Band 2 Receptionist		£ 36,500				£ 36,500
Additional 3 x Band 5 RN		£ 151,650				£ 151,650
Band 4 A&C Co-ordinator		£ 35,725				£ 35,725
Receptionist Band 2		£ 36,500				£ 36,500
Pharmacy Tech Band 4				£ 35,725		£ 35,725
Ophthalmology Technician Band 3					£ 31,356	£ 31,356
Optometrists 8a x2					£ 134,048	£ 134,048
Receptionist - Coordinator Band 2					£ 36,500	£ 36,500
<b>Total New Costs</b>	£ -	£ 260,375	£ -	£ 35,725	£ 201,904	£ 498,004
<b>OFFSET FACTORS</b>						
Potential 10-20% saving on travel times/cost (unknown cost)						£ -
1WTE x Band 3 Medical secretary			£ 31,356			£ 31,356
Saving from reduction in pay to Just Wales to transport drugs (£50 a day from CIIC) once a week					£ 2,500	£ 2,500
<b>Total Potential OFFSET FACTORS</b>	£ -	£ -	£ 31,356	£ -	£ 2,500	£ 33,856
						£ -
<b>Total Cost/Saving</b>	£ -	£ 260,375	£ 31,356	£ 35,725	£ 199,404	£ 464,148

Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Check	Improvement Phase (2-4 Years)
Challenge	Improvement Phase (2-4 Years)
Challenge	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Challenge	Longer Term (+4 Years)

Accept	Implementation Phase (up to 2Years)
Accept	Implementation Phase (up to 2Years)
Accept	Implementation Phase (up to 2Years)



<i>Total New Costs</i>	£ 395,156	£ 218,731	£ 201,550	£ 290,066	£ 121,870	£ 1,227,373		
OFFSET FACTORS						£ -		
						£ -		
						£ -		
<i>Total Potential OFFSET FACTORS</i>	£ -	£ -	£ -	£ -	£ -	£ -		
						£ -		
<i>Total Cost/Saving</i>	£ 395,156	£ 218,731	£ 201,550	£ 290,066	£ 121,870	£ 1,227,373		

## Ophthalmology

Below is a summary of the Workforce additionality identified for each option

### Options 1, 3 & 4

Recruitment into Vacant consultant posts would alleviate locum and agency usage.  
 Centralising workforce to GGH could improve MDT working and allow for additional training opportunities  
 OPD service would have additional capacity in PPH  
 Potential reduction in travel between sites

### Option 2

No additionality required  
 OCP required to move staff from GGH to PPH  
 Centralising workforce to PPH could improve MDT working and allow for additional training opportunities  
 Could improve retention and recruitment opportunities due to location near M4 corridor.

Potential additional theatre and HSDU workforce required - further detailed workforce plan would be required to identify and additional requirements

	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>TOTAL ADDITIONAL WORKFORCE REQUIREMENT</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
BGH	0	0	0	0
GGH	5	0	5	5
PPH	0	0	0	0
WGH	0	0	0	0
Community	-0.6	0	-0.6	-0.6
<b>TOTAL</b>	<b>4.4</b>	<b>0</b>	<b>4.4</b>	<b>4.4</b>

### Workforce Requirement by Site and Role

	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>BGH</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
<b>Workforce Requirement</b>				
NO REQUIREMENTS				
Consultant (12hr working)				
Nursing Band 5				
HCSW Band 2				
HCSW Band 3				
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>GGH</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
<b>Workforce Requirement</b>				
Band 5 RN (Add. OPD clinics)	2		2	2
Band 5 RN (Tysul Ward)	1		1	1
Band 3 Medical Secretary	1		1	1
Band 2 Receptionist	1		1	1
Consultant (20 sessions inc weekend cover)				
Additional Band 5 RN				
Additional Band 5 ODP				
Pharmacy Tech Band 4				
Ward Clerk Band 4				
Receptionist Band 2				
<b>TOTAL</b>	<b>5</b>	<b>0</b>	<b>5</b>	<b>5</b>

	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>PPH</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
<b>Workforce Requirement</b>				
NO REQUIREMENTS				
Consultant (12hr working)				
Nursing Band 5				
Pharmacy Tech Band 4				
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>WGH</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
<b>Workforce Requirement</b>				
NO REQUIREMENTS				
Pharmacy Tech Band 4				
Nursing HCA/HCSW Band 2				
Registered Nurse Band 5				
Registered Nurse Band 6				
Associate Specialist (M&D)				
Speciality Doctor (M&D)				
Band 3 Technician				
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Community</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
<b>Workforce Requirement</b>				
Band 5 RN - Amman Valley	-0.6		-0.6	-0.6
Ophthalmology Technician Band 3				
Optometrists 8a				
Receptionist - Coordinator Band 2				
Band 5 RN				
Band 2 HCSW				
<b>TOTAL</b>	<b>-0.6</b>	<b>0</b>	<b>-0.6</b>	<b>-0.6</b>

## Alternative Options

	OPTION 95(A)	OPTION 99(A)	OPTION 227(A)	OPTION 263(B)	OPTION 167	OPTION 173
<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
0	0	0	4.2	0	0	
14.5	12.5	8.8	5	6	3	
0	0	0	3	0	0	
1	1	1	4.3	1	2	
-0.6	-0.6	0.4	2.8	4	4	
<b>14.9</b>	<b>12.9</b>	<b>10.2</b>	<b>19.3</b>	<b>11</b>	<b>9</b>	

Richard J comment

Finance - Where wte is above Options 1-4, financial sustainability is

	OPTION 95(A)	OPTION 99(A)	OPTION 227(A)	OPTION 263(B)	OPTION 167	OPTION 173
<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
				1.5		
				1.8		
				0.5		
				0.4		
<b>0</b>	<b>0</b>	<b>0</b>	<b>4.2</b>	<b>0</b>	<b>0</b>	

	OPTION 95(A)	OPTION 99(A)	OPTION 227(A)	OPTION 263(B)	OPTION 167	OPTION 173
<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
2	2	2				
1	1	1				
1	1	1	1			
1	1	1		1		
3.5	1.5	0.8				
2	2	2	3	3	2	
1	1					
1	1		1		1	
1	1			1		
1	1	1				
<b>14.5</b>	<b>12.5</b>	<b>8.8</b>	<b>5</b>	<b>6</b>	<b>3</b>	

	OPTION 95(A)	OPTION 99(A)	OPTION 227(A)	OPTION 263(B)	OPTION 167	OPTION 173
<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
				0.5		
				1.5		
				1		
<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>0</b>	

	OPTION 95(A)	OPTION 99(A)	OPTION 227(A)	OPTION 263(B)	OPTION 167	OPTION 173
<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
1	1	1				
			0.8	1	1	
			1.5			
			0.5			
			0.5			
			1			
					1	
<b>1</b>	<b>1</b>	<b>1</b>	<b>4.3</b>	<b>1</b>	<b>2</b>	

Clarity on the 0.8 wte required

	OPTION 95(A)	OPTION 99(A)	OPTION 227(A)	OPTION 263(B)	OPTION 167	OPTION 173
<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
-0.6	-0.6	-0.6				
		1		1	1	
				2	2	
				1	1	
			1.4			
			1.4			
<b>-0.6</b>	<b>-0.6</b>	<b>0.4</b>	<b>2.8</b>	<b>4</b>	<b>4</b>	

Total  
 Spec Dr  
 Assoc Spec  
 Ophthalmology Tech Band 3  
 Band 6 RN  
 Band 5 RN /ODP

5.4

5.4

4.4

9.2

Band 3 Medical Secretary	1	1	1	1
Band 2 Receptionist	1	1	1	
Consultant	3.5	1.5	0.8	2
Pharmacy Tech Band 4	2	2	1	1
Ward Clerk Band 4	1	1	0	
Receptionist Band 2	1	1	1	
Band 2 HCSW				2.7
Band 3 HCSW				0.4
Total wte	14.9	12.9	10.2	19.1
Check	14.9	12.9	10.2	19.3

CHECK

<p style="text-align: center;">Workforce Assessment</p>	<p><b>Orthopaedics</b></p> <ul style="list-style-type: none"> <li>&gt; Option 178 (B) requires an additional workforce of 22 WTE, with an additional requirement for therapy roles across all groups that is not included in this assessment. An additional consultant would be required at Withybush General Hospital, creating a workforce pipeline risk.</li> <li>&gt; Option 179 (D) requires an additional 24 WTE, including an additional consultant at Bronglais (possibly funded) and another consultant at Prince Philip Hospital due to travel time.</li> <li>&gt; Option 129 requires an additional 8 WTE, with an additional consultant at Bronglais (possibly funded) and an unfunded consultant required at Prince Philip Hospital due to travel time.</li> <li>&gt; Option 268 requires an additional 7 WTE, including one consultant at Bronglais (possibly funded) and an additional consultant at Prince Philip Hospital due to travel time.</li> <li>&gt; Option 113 (C) requires an additional 21 WTE, including one consultant at Prince Philip Hospital due to travel time.</li> </ul> <p>The workforce assessments presented do not include any consideration of interdependencies between services either within or external to the Clinical Service Plan (CSP). External services such as estates, therapies, diagnostics and other supporting functions are unknown in certain options that reference them, and these are likely to increase the overall WTE required to deliver the proposed changes, along with introducing additional financial risks.</p> <p>The staffing ratios used within these assessments are based on best estimates informed by feedback from services through the SDOT forms. It is therefore recommended that any option selected for progression is supported by a fully developed workforce plan. This plan should cover not only the operational requirements but also the strategic elements, ensuring workforce pipeline needs are addressed over a number of years to secure sustainability.</p> <p><b>Strategic Recommendations</b></p> <ul style="list-style-type: none"> <li>&gt; Develop a multi-year recruitment plan for nursing and AHP roles, including international recruitment and local training pipelines.</li> <li>&gt; Explore rotational posts and flexible staffing models to improve retention.</li> <li>&gt; Engage with higher education institutions to secure future supply.</li> <li>&gt; Consider advanced practice roles to reduce dependency on hard-to-fill consultant posts.</li> </ul> <p><b>Risk Mitigation</b></p> <ul style="list-style-type: none"> <li>&gt; Implement targeted recruitment campaigns aligned with intake cycles.</li> <li>&gt; Create contingency plans for consultant and specialist roles, including locum arrangements.</li> <li>&gt; Monitor workforce pipeline risks quarterly and adjust plans accordingly.</li> <li>&gt; Secure financial planning for additional workforce costs and potential agency reliance.</li> </ul>
<p style="text-align: center;">Finance Assessment</p>	<ul style="list-style-type: none"> <li>• Financial sustainability of the majority of options remains to be determined as they require additional financial resource to the current service configuration</li> <li>• Enhancements have not been applied in the costings at this point as rotas have yet to be worked up for the options</li> <li>• Costs are calculated at 2023/24 rates, the same calculation methodology as the costings at consultation, to ensure comparability</li> <li>• Offsets included, which are brought forward from options consulted upon where appropriate, assume cash releasing cost reduction, through for example delivering a reduction in our bed base and reductions in staffing rotas</li> <li>• Therapies requirements are yet to be fully determined in some options and need to be identified</li> <li>• The options as currently configured have not determined the cost of all support services (i.e. pharmacy, pathology etc) and these need to be identified</li> <li>• The options have not yet identified their estates and facilities requirements and these need to be determined</li> <li>• Headroom application has been replicated from options 1-4, there remain inconsistencies to be resolved in application across staff groups</li> <li>• Staff costings are at mid point of scale, as per the costing for options at the point of consultation</li> <li>• All options do not yet include an assessment of their impact on non-pay costs</li> </ul> <p>Key risk is identification of funding to enable successful implementation of options as the majority of options require additional funding</p> <p>There is now a requirement to prioritise options, to enable further in-depth work to be completed identifying their requirements from a financial and workforce perspective.</p>

Check and Challenge

Orthopaedics	OPTION A & B (1 & 2)					CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH	GGH	PPH	WGH	TOTAL		
<b>NEW COSTS</b>							
1WTE B5 RN	£ 50,550.00				£ 50,550.00	Challenge	Improvement Phase (2-4 Years)
1WTE B2 Ward Clerk	£ 36,500.00				£ 36,500.00	Challenge	Improvement Phase (2-4 Years)
Therapies Additional @25%			£ 173,293.00		£ 173,293.00	Accept	Improvement Phase (2-4 Years)
<b>Total New Costs</b>	<b>£ 87,050.00</b>	<b>£ -</b>	<b>£ 173,293.00</b>	<b>£ -</b>	<b>£ 260,343.00</b>		
<b>OFFSET FACTORS</b>							
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>		
<b>Total Cost/Saving</b>	<b>£ 87,050.00</b>	<b>£ -</b>	<b>£ 173,293.00</b>	<b>£ -</b>	<b>£ 260,343.00</b>		

Orthopaedics	OPTION C (3)					CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH	GGH	PPH	WGH	TOTAL		
<b>NEW COSTS</b>							
1WTE B5 RN	£ 50,550.00				£ 50,550.00	Challenge	Longer Term (+4 Years)
1WTE B2 Ward Clerk	£ 36,500.00				£ 36,500.00	Challenge	Longer Term (+4 Years)
Therapies Additional @25%			£ 173,293.00		£ 173,293.00	Accept	Improvement Phase (2-4 Years)
7 Ringfenced beds			£ 947,899.00		£ 947,899.00	Accept	Longer Term (+4 Years)
<b>Total New Costs</b>	<b>£ 87,050.00</b>	<b>£ -</b>	<b>£ 1,121,192.00</b>	<b>£ -</b>	<b>£ 1,208,242.00</b>		
<b>OFFSET FACTORS</b>							
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>		
<b>Total Cost/Saving</b>	<b>£ 87,050.00</b>	<b>£ -</b>	<b>£ 1,121,192.00</b>	<b>£ -</b>	<b>£ 1,208,242.00</b>		

Orthopaedics	OPTION D (4)					CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH	GGH	PPH	WGH	TOTAL		
<b>NEW COSTS</b>							
1WTE B5 RN	£ 50,550.00				£ 50,550.00	Challenge	Longer Term (+4 Years)
1WTE B2 Ward Clerk	£ 36,500.00				£ 36,500.00	Challenge	Longer Term (+4 Years)
Theatre Costs (E4k*3PW*44)	£ 528,000.00				£ 528,000.00	Accept	Longer Term (+4 Years)
Therapies Additional @25%			£ 173,293.00		£ 173,293.00	Accept	Longer Term (+4 Years)
Additional staff for 6th day			£ 10,483.00		£ 10,483.00	Accept	Improvement Phase (2-4 Years)
<b>Total New Costs</b>	<b>£ 615,050.00</b>	<b>£ -</b>	<b>£ 183,776.00</b>	<b>£ -</b>	<b>£ 798,826.00</b>		
<b>OFFSET FACTORS</b>							
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>		
<b>Total Cost/Saving</b>	<b>£ 615,050.00</b>	<b>£ -</b>	<b>£ 183,776.00</b>	<b>£ -</b>	<b>£ 798,826.00</b>		

NEW COSTS	OPTION 129 (A,B,C,D)					CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH	GGH	PPH	WGH	Community		
1 WTE Ward Clerk band 4	£ 45,335		£ 45,335			Accept	Improvement Phase (2-4 Years)
1 WTE Band 5 RN	£ 50,550					Accept	Improvement Phase (2-4 Years)
1 WTE Consultant	£ 180,000		£ 180,000	£ 180,000		Accept	Improvement Phase (2-4 Years)
1 WTE Junior Doctor	£ 62,000			£ 62,000		Accept	Improvement Phase (2-4 Years)
Hotel Service staff - TBC						Check	
Add. HDSU Staff - TBC						Check	
Add. Therapies Support						Check	
Joint replacement Follow Up Post (8a)	£ 67,024					Accept	Improvement Phase (2-4 Years)
<b>Total New Costs</b>	<b>£ 404,909</b>	<b>£ -</b>	<b>£ 225,335</b>	<b>£ 242,000</b>	<b>£ -</b>		
<b>OFFSET FACTORS</b>						Check	
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	Check	
<b>Total Cost/Saving</b>	<b>£ 404,909.03</b>	<b>£ -</b>	<b>£ 225,335.03</b>	<b>£ 242,000.00</b>	<b>£ -</b>		

	OPTION 178 (B)						
	BGH	GGH	PPH	WGH	Community		
<b>NEW COSTS</b>							
1 WTE Ward Clerk			£ 45,335			Accept	Improvement Phase (2-4 Years)
Band 5 RN			£ 50,550			Accept	Improvement Phase (2-4 Years)
Junior Doctor			£ 62,000			Accept	Improvement Phase (2-4 Years)
Consultant			£ 180,000	£ 180,000		Accept	Improvement Phase (2-4 Years)
Add. HDSU Staff - TBC						Check	
Add. Therapies Support						Check	
Joint replacement Follow Up Post (8a)			£ 67,024			Accept	Improvement Phase (2-4 Years)
<b>Total New Costs</b>	£ -	£ -	£ 404,909.03	£ 180,000.00	£ -		
<b>OFFSET FACTORS</b>							
<b>Total Potential OFFSET FACTORS</b>	£ -	£ -	£ -	£ -	£ -		
<b>Total Cost/Saving</b>	£ -	£ -	£ 404,909.03	£ 180,000.00	£ -		

OPTION 179 (D)						
	BGH	GGH	PPH	WGH	Community	
<b>NEW COSTS</b>						
1 WTE Ward Clerk Band 4	£ 45,335			£ 45,335		Accept Improvement Phase (2-4 Years)
1 WTE Band 5 RN	£ 50,550			£ 50,550		Accept Improvement Phase (2-4 Years)
1 WTE Consultant	£ 180,000			£ 180,000		Accept Improvement Phase (2-4 Years)
1 WTE Junior Doctor	£ 62,000		£ -	£ 62,000		Accept Improvement Phase (2-4 Years)
Hotel Service staff - TBC						Check
Add. HDSU Staff - TBC						Check
Add. Therapies Support			£ -			Check
Joint replacement Follow Up Post (8a)	£ 67,024					Accept Improvement Phase (2-4 Years)
<b>Total New Costs</b>	<b>£ 404,909</b>	<b>£ -</b>	<b>£ -</b>	<b>£ 337,885</b>	<b>£ -</b>	
<b>OFFSET FACTORS</b>						
						Check
						Check
						Check
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	
<b>Total Cost/Saving</b>	<b>£ 404,909</b>	<b>£ -</b>	<b>£ -</b>	<b>£ 337,885</b>	<b>£ -</b>	

OPTION 268 (D,C)						
	BGH	GGH	PPH	WGH	Community	
<b>NEW COSTS</b>						
1 WTE Ward Clerk Band 4	£ 45,335					Accept Improvement Phase (2-4 Years)
1 WTE Band 5 RN	£ 50,550					Accept Improvement Phase (2-4 Years)
1 WTE Consultant	£ 180,000					Accept Improvement Phase (2-4 Years)
1 WTE Junior Doctor	£ 62,000					Accept Improvement Phase (2-4 Years)
Hotel Service staff - TBC						Check
Add. HDSU Staff - TBC						Check
Add. Therapies Support						Check
<b>Total New Costs</b>	<b>£ 337,885</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	
<b>OFFSET FACTORS</b>						
						Check
						Check
						Check
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	
<b>Total Cost/Saving</b>	<b>£ 337,885.03</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	

OPTION 52/ 113 (C)						
	BGH	GGH	PPH	WGH	Community	
<b>NEW COSTS</b>						
1 WTE Ward Clerk Band 4				£ 45,335		Accept Improvement Phase (2-4 Years)
1 WTE Band 5 RN				£ 50,550		Accept Improvement Phase (2-4 Years)
1 WTE Junior Doctor			£ -	£ 62,000		Accept Improvement Phase (2-4 Years)
1 WTE Consultant			£ -	£ 180,000		Accept Improvement Phase (2-4 Years)
Hotel Service staff - TBC						Check
Add. HDSU Staff - TBC						Check
Add. Therapies Support			£ -			Check
Joint replacement Follow Up Post (8a)				£ 67,024		Accept Improvement Phase (2-4 Years)
<b>Total New Costs</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ 404,909</b>	<b>£ -</b>	
<b>OFFSET FACTORS</b>						

<i>Total Potential OFFSET FACTORS</i>	£	-	£	-	£	-	£	-	£	-
<b>Total Cost/Saving</b>	£	-	£	-	£	-	£	404,909	£	-

## Orthopaedics

Below is a summary of the Workforce additionality identified for each option

### Options 1 & 2

2WTE additional workforce required in BGH

Additional Junior Doctors required - cost negated from current ADH

Additional Therapies workforce identified for PPH to improve current standards by 25% (see breakdown from cell B57)

Further Therapies workforce may be required across other sites - workforce plan required to identify need

Interdependency on Anaesthetics additionality required to support the pathway

Potential to meet recruitment from within current budget

### Option 3

As above in Options 1 & 2

Potential additional workforce for Pre-Assessment service 'out of scope'

Additional 7 ringfenced beds required across Ward 6 - Possible additional 20.7WTE Nursing workforce required (see breakdown from cell B71)

### Option 4

As above in Options 1 & 2

Potential additional Admin staff required for 6th Day

	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>TOTAL ADDITIONAL WORKFORCE REQUIREMENT</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
BGH	2	2	2	2
GGH	0	0	0	0
PPH	3.35	3.35	3.35	3.35
WGH	0	0	0	0
<b>TOTAL</b>	<b>5.35</b>	<b>5.35</b>	<b>5.35</b>	<b>5.35</b>

### Workforce Requirement by Site and Role

<b>BGH</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
Band 5 RN	1	1	1	1
Band 2 Ward Clerk	1	1	1	1
Therapies Ask?				
Ward Clerk Band 4				
Consultant				
<b>TOTAL</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>

<b>GGH</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
NO IDENTIFIED REQUIREMENTS				
Junior Doctor Rotation				
Therapies Ask?				
Anaesthetic Support? Consultant/Special Grade?				
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>PPH</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
Therapies workforce (see breakdown below)	3.35	3.35	3.35	3.35
B4 OT/PT technician				
B7 clinical lead surgical pathways				
B6 Physiotherapist				
B5 Physiotherapist				
B4 Physiotherapy assistant practitioner				
Junior Doctor				
Therapies Ask?				
Ward Clerk Band 4				
Radiology Ask?				
Consultant				
<b>TOTAL</b>	<b>3.35</b>	<b>3.35</b>	<b>3.35</b>	<b>3.35</b>

<b>WGH</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
NO IDENTIFIED REQUIREMENTS				
Junior Doctor				
Radiology Ask?				
Therapies Ask?				
Consultant				
Anaesthetic				
Ward Clerk Band 4				
Cleaners/Porters/Waste				
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## Alternative Options

OPTION 178(B)	OPTION 179(D)	OPTION 129	OPTION 268	OPTION 52/113(C)
WTE	WTE	WTE	WTE	WTE
2	3	3	3	2
1	0	0	0	0
17	19	3	2	18
2	2	2	2	1
22	24	8	7	21

OPTION 178(B)	OPTION 179(D)	OPTION 129	OPTION 268	OPTION 113(C)
WTE	WTE	WTE	WTE	WTE
1	1	1	1	1
0	0			
1	1	1	1	1
2	3	3	3	2

OPTION 178(B)	OPTION 179(D)	OPTION 129	OPTION 268	OPTION 113(C)
WTE	WTE	WTE	WTE	WTE
0	0			0
1				
1	0	0	0	0

OPTION 178(B)	OPTION 179(D)	OPTION 129	OPTION 268	OPTION 113(C)
WTE	WTE	WTE	WTE	WTE
0	0			
6	6			6
1.8	1.8			1.8
3	3			3
2	2			2
3.2	3.2			3.2
	1	1	1	1
	1	1		
1	1	1	1	1
17	19	3	2	18

OPTION 178(B)	OPTION 179(D)	OPTION 129	OPTION 268	OPTION 113(C)
WTE	WTE	WTE	WTE	WTE
1.00	1	1	1	
1.00	1	1	1	
				1
2.00	2	2	2	1

OPTION 178(B)	OPTION 179(D)	OPTION 129	OPTION 268	OPTION 113(C)
6	6			6
1.8	1.8			1.8
3	3			3
2	2			2

### Breakdown of therapy workforce requirement for PPH based on GPICS Standards & SBAR June 2024 for 28 Bed ward

#### PPH

PPH Therapies Workforce	WTE	Current	Option 1	Option 2	Option 3	Option 4	Additionality Required	25%	50%	75%
B4 OT/PT technician	2		6	6	6	6	6	1.5	3	4.5
B7 clinical lead surgical pathways	1	1	1.8	1.8	1.8	1.8	0.8	0.2	0.4	0.6
B6 Physiotherapist			3	3	3	3	3	0.75	1.5	2.25
B5 Physiotherapist			2	2	2	2	2	0.5	1	1.5

to meet standards - 25% Proportional additionality

B4 Physiotherapy assistant practitioner	1.6	1.6	3.2	3.2	3.2	3.2	1.6	0.4	0.8	1.2	3.2	3.2	3.2
<b>TOTAL</b>	<b>2.6</b>	<b>16</b>	<b>16</b>	<b>16</b>	<b>16</b>	<b>13.4</b>	<b>3.35</b>	<b>6.7</b>	<b>10.05</b>		<b>16</b>	<b>16</b>	<b>0</b>

Elective orthopaedics is covered by site teams as part of overall workload and community teams for preadmission/discharge.

**Option 3 - Breakdown of additional Nursing workforce required for Ward 6 PPH to extend to 28 bed model**

Ward 6 PPH 0043 (SEPTEMBER 2024)	Budget	Actual	Vacancy	28 Bed NSLA Model	Additionality Required against current budget
<b>ADDITIONAL CLINICAL SERVICES</b>	<b>15.0</b>	<b>13.1</b>	<b>1.9</b>		
Nursing HCA/HCSW Band 2	13.7	12.3	1.4	28.7	14.94
Nursing HCA/HCSW Band 4	1.3	0.8	0.5	1.3	0.00
<b>ADMINISTRATIVE &amp; CLERICAL</b>	<b>2.0</b>	<b>1.8</b>	<b>0.4</b>		
Admin & Clerical Band 2	2.0	1.6	0.4	1.0	-1.00
<b>NURSING AND MIDWIFERY REGISTERED</b>	<b>16.6</b>	<b>13.9</b>	<b>2.7</b>		
Registered Nurse Band 5	13.6	10.9	2.7	20.4	6.77
Registered Nurse Band 6	2.0	2.0	0.0	2.0	0.00
Registered Nurse Band 7	1.0	1.0	0.0	1.0	0.00
<b>Grand Total</b>	<b>33.6</b>	<b>28.6</b>	<b>5.0</b>	<b>54.3</b>	<b>20.71</b>

Workforce Assessment	<p><b>Radiology:</b></p> <ul style="list-style-type: none"> <li>&gt; Option 103 (A, B) requires an additional workforce of 34.4 WTE, split across sites. This includes five Band 5 radiographers and two interventional consultant radiologists. <b>There is a significant workforce pipeline risk to the delivery of these posts.</b></li> <li>&gt; Option 24 (B) requires an additional 31.4 WTE, including 13 Band 5 radiographers and two interventional consultant radiologists. <b>Workforce pipeline risks remain significant for these roles.</b></li> <li>&gt; Option 25 (B) requires an additional 32.4 WTE, including 13 Band 5 radiographers and two interventional consultant radiologists, with similar <b>workforce pipeline risks to delivery.</b></li> <li>&gt; Option 122 requires an additional two WTE Band 6 radiographers within the community. A workforce pipeline plan will be needed to deliver these roles.</li> </ul> <p>The workforce assessments presented do not include any consideration of interdependencies between services either within or external to the Clinical Service Plan (CSP). External services such as estates, therapies, diagnostics and other supporting functions are unknown in certain options that reference them, and these are likely to increase the overall WTE required to deliver the proposed changes, along with introducing <b>additional financial risks.</b></p> <p>The staffing ratios used within these assessments are based on best estimates informed by feedback from services through the SDOT forms. It is therefore recommended that any option selected for progression is supported by a fully developed workforce plan. This plan should cover not only the operational requirements but also the strategic elements, ensuring workforce pipeline needs are addressed over a number of years to secure sustainability.</p> <p><b>Strategic Recommendations</b></p> <ul style="list-style-type: none"> <li>&gt; Develop a multi-year recruitment plan for nursing and AHP roles, including international recruitment and local training pipelines.</li> <li>&gt; Explore rotational posts and flexible staffing models to improve retention.</li> <li>&gt; Engage with higher education institutions to secure future supply.</li> <li>&gt; Consider advanced practice roles to reduce dependency on hard-to-fill consultant posts.</li> </ul> <p><b>Risk Mitigation</b></p> <ul style="list-style-type: none"> <li>&gt; Implement targeted recruitment campaigns aligned with intake cycles.</li> <li>&gt; Create contingency plans for consultant and specialist roles, including locum arrangements.</li> <li>&gt; Monitor workforce pipeline risks quarterly and adjust plans accordingly.</li> <li>&gt; Secure financial planning for additional workforce costs and potential agency reliance.</li> </ul>
Finance Assessment	<ul style="list-style-type: none"> <li>• Financial sustainability of the majority of options remains to be determined as they require additional financial resource to the current service configuration</li> <li>• Enhancements have not been applied in the costings at this point as rotas have yet to be worked up for the options</li> <li>• Costs are calculated at 2023/24 rates, the same calculation methodology as the costings at consultation, to ensure comparability</li> <li>• Offsets included, which are brought forward from options consulted upon where appropriate, assume cash releasing cost reduction, through for example delivering a reduction in our bed base and reductions in staffing rotas</li> <li>• Therapies requirements are yet to be fully determined in some options and need to be identified</li> <li>• The options as currently configured have not determined the cost of all support services (i.e. pharmacy, pathology etc) and these need to be identified</li> <li>• The options have not yet identified their estates and facilities requirements and these need to be determined</li> <li>• Headroom application has been replicated from options 1-4, there remain inconsistencies to be resolved in application across staff groups</li> <li>• Staff costings are at mid point of scale, as per the costing for options at the point of consultation</li> <li>• All options do not yet include an assessment of their impact on non-pay costs</li> </ul> <p>Key risk is identification of funding to enable successful implementation of options as the majority of options require additional funding</p> <p>There is now a requirement to prioritise options, to enable further in-depth work to be completed identifying their requirements from a financial and workforce perspective.</p>

Radiology		OPTION 1					
	BGH	GGH	PPH	WGH	Community	TOTAL	
<b>NEW COSTS</b>							
2 WTE Interventional Consultants	£ 400,000					£ 400,000	
1 WTE Band SRN	£ 50,550					£ 50,550	
1 WTE Band 4 HCSW	£ 45,370					£ 45,370	
1 WTE Band SRN			£ 50,550			£ 50,550	
0.4 WTE Band SRN				£ 20,220		£ 20,220	
<b>Total New Costs</b>	<b>£ 495,920</b>	<b>£ -</b>	<b>£ 50,550</b>	<b>£ 20,220</b>	<b>£ -</b>	<b>£ 566,690</b>	
<b>OFFSET FACTORS</b>							
0.2 WTE Band 5 Radiographer Llandoverly					£ 10,110	£ 10,110	
Release of accommodation - South Pems and Llandoverly					£ 20,000	£ 20,000	
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ 30,110</b>	<b>£ 30,110</b>	
<b>Total Cost/Saving</b>	<b>£ 495,920</b>	<b>£ -</b>	<b>£ 50,550</b>	<b>£ 20,220</b>	<b>£ 30,110</b>	<b>£ 536,580</b>	

Check and Challenge	
CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Implementation Phase (up to 2Years)
Accept	Implementation Phase (up to 2Years)

		OPTION 2					
	BGH	GGH	PPH	WGH	Community	TOTAL	
<b>NEW COSTS</b>							
2 WTE Interventional Consultants	£ 400,000					£ 400,000	
1 WTE Band SRN	£ 50,550					£ 50,550	
5 WTE Band 5 Radiographer	£ 164,288			£ 164,288		£ 328,575	
5 WTE Band 5 Radiographer		£ 164,288				£ 164,288	
3 WTE Band 5 Radiographer			£ 164,288			£ 164,288	
1.5WTE x Band 2 Admin	£ 43,110					£ 43,110	
2WTE x Band 3 Radiology Assistant	£ 79,644					£ 79,644	
1.5WTE x Band 2 Admin		£ 43,110				£ 43,110	
2WTE x Band 3 Radiology Assistant		£ 79,644				£ 79,644	
1 WTE Band SRN			£ 50,550			£ 50,550	
1.5WTE x Band 2 Admin			£ 43,110			£ 43,110	
2 WTE Band 3 Radiology Assistant			£ 79,644			£ 79,644	
0.4WTE Band 5 RN				£ 20,220		£ 20,220	
1.5WTE x Band 2 Admin				£ 43,110		£ 43,110	
2WTE x Band 3 Radiology Assistant				£ 79,644		£ 79,644	
2WTE x Band 3 Radiology Assistant					£ 79,644	£ 79,644	
<b>Total New Costs</b>	<b>£ 737,592</b>	<b>£ 287,042</b>	<b>£ 337,592</b>	<b>£ 307,262</b>	<b>£ 79,644</b>	<b>£ 1,749,130</b>	
<b>OFFSET FACTORS</b>							
0.2 WTE Band 5 Radiographer Llandoverly					£ 10,110	£ 10,110	
Release of accommodation - South Pems and Llandoverly					£ 20,000	£ 20,000	
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ 30,110</b>	<b>£ 30,110</b>	
<b>Total Cost/Saving</b>	<b>£ 737,592</b>	<b>£ 287,042</b>	<b>£ 337,592</b>	<b>£ 307,262</b>	<b>£ 49,534</b>	<b>£ 1,719,020</b>	

Accept	Longer Term (+4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Longer Term (+4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Longer Term (+4 Years)
Accept	Longer Term (+4 Years)
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Accept	Longer Term (+4 Years)
Accept	Longer Term (+4 Years)
Accept	Longer Term (+4 Years)

		OPTION 3					
	BGH	GGH	PPH	WGH	Community	TOTAL	
<b>NEW COSTS</b>							
2 WTE Interventional Consultants	£ 400,000					£ 400,000	
1 WTE Band SRN - WAST			£ 50,550			£ 50,550	
1 WTE Band SRN - WAST				£ 50,550		£ 50,550	
<b>Total New Costs</b>	<b>£ 400,000</b>	<b>£ -</b>	<b>£ 50,550</b>	<b>£ 50,550</b>	<b>£ -</b>	<b>£ 501,100</b>	
<b>OFFSET FACTORS</b>							
0.2WTE RN released to work on other site			£ 10,110			£ 10,110	
1.6WTE RN released to BGH or GGH				£ 80,880		£ 80,880	
Reduction of 0.2WTE Band 5 radiographer from Llandoverly (1 day a week)					£ 10,110	£ 10,110	
Release of accommodation - South Pems and Llandoverly					£ 20,000	£ 20,000	
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ 10,110</b>	<b>£ 80,880</b>	<b>£ 30,110</b>	<b>£ 121,100</b>	
<b>Total Cost/Saving</b>	<b>£ 400,000</b>	<b>£ -</b>	<b>£ 40,440</b>	<b>£ 30,330</b>	<b>£ 30,110</b>	<b>£ 380,000</b>	

Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Implementation Phase (up to 2Years)
Accept	Implementation Phase (up to 2Years)
Accept	Implementation Phase (up to 2Years)

		OPTION 4					
	BGH	GGH	PPH	WGH	Community	TOTAL	
<b>NEW COSTS</b>							
2 WTE Interventional Consultants	£ 400,000					£ 400,000	
1 WTE Band SRN	£ 50,550					£ 50,550	
5 WTE Band 5 Radiographer	£ 252,750					£ 252,750	
5 WTE Band 5 Radiographer		£ 252,750				£ 252,750	
3 WTE Band 5 Radiographer				£ 151,650		£ 151,650	
1.5WTE x Band 2 Admin	£ 43,110					£ 43,110	
2WTE x Band 3 Radiology Assistant	£ 79,644					£ 79,644	
1.5WTE x Band 2 Admin		£ 43,110				£ 43,110	
2WTE x Band 3 Radiology Assistant		£ 79,644				£ 79,644	

Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Longer Term (+4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Longer Term (+4 Years)
Accept	Longer Term (+4 Years)
Accept	Improvement Phase (2-4 Years)
Accept	Improvement Phase (2-4 Years)

1 WTE Band 5RN			£	50,550			£	50,550	Accept	Improvement Phase (2-4 Years)		
1.5WTE x Band 2 Admin			£	43,110			£	43,110	Accept	Improvement Phase (2-4 Years)		
2 WTE Band 3 Radiology Assistant			£	79,644			£	79,644	Accept	Improvement Phase (2-4 Years)		
0.4WTE Band 5 RN					£	20,220		£	20,220	Accept	Improvement Phase (2-4 Years)	
1.5WTE x Band 2 Admin					£	43,110		£	43,110	Accept	Improvement Phase (2-4 Years)	
2WTE x Band 3 Radiology Assistant					£	79,644		£	79,644	Accept	Improvement Phase (2-4 Years)	
<b>Total New Costs</b>	<b>£</b>	<b>826,054</b>	<b>£</b>	<b>375,504</b>	<b>£</b>	<b>173,304</b>	<b>£</b>	<b>294,624</b>	<b>£</b>	<b>-</b>	<b>£</b>	<b>1,669,486</b>
<b>OFFSET FACTORS</b>												
Reduction in variable pay	£	230,769						£	230,769	Accept	Longer Term (+4 Years)	
Reduction in variable pay			£	230,769				£	230,769	Accept	Improvement Phase (2-4 Years)	
Reduction in variable pay					£	138,462		£	138,462	Accept	Improvement Phase (2-4 Years)	
0.2 WTE Band 5 Radiographer Llandoverly							£	10,110	£	10,110	Accept	Implementation Phase (up to 2Years)
Release of accommodation - South Pembs and Llandoverly							£	20,000	£	20,000	Accept	Implementation Phase (up to 2Years)
<b>Total Potential OFFSET FACTORS</b>	<b>£</b>	<b>230,769</b>	<b>£</b>	<b>230,769</b>	<b>£</b>	<b>-</b>	<b>£</b>	<b>138,462</b>	<b>£</b>	<b>30,110</b>	<b>£</b>	<b>630,110</b>
<b>Total Cost/Saving</b>	<b>£</b>	<b>595,285</b>	<b>£</b>	<b>144,735</b>	<b>£</b>	<b>173,304</b>	<b>£</b>	<b>156,162</b>	<b>-£</b>	<b>30,110</b>	<b>£</b>	<b>1,039,376</b>

	OPTION 24 (B)							
	BGH	GGH	PPH	WGH	Community	TOTAL		
<b>NEW COSTS</b>								
2 WTE Interventional Consultants	£ 400,000.00					£ 400,000.00	Accept	Longer Term (+4 Years)
1 WTE Band 5RN	£ 50,550.00					£ 50,550.00	Accept	Improvement Phase (2-4 Years)
5 WTE Band 5 Radiographer	£ 252,750.00					£ 252,750.00	Accept	Longer Term (+4 Years)
5 WTE Band 5 Radiographer		£ 252,750.00				£ 252,750.00	Accept	Improvement Phase (2-4 Years)
3 WTE Band 5 Radiographer				£ 151,650.00		£ 151,650.00	Accept	Improvement Phase (2-4 Years)
1.5WTE x Band 2 Admin	£ 43,110.00					£ 43,110.00	Accept	Longer Term (+4 Years)
2WTE x Band 3 Radiology Assistant	£ 79,644.00					£ 79,644.00	Accept	Longer Term (+4 Years)
2WTE x Band 2 Admin						£ -	Accept	Longer Term (+4 Years)
2WTE x Band 3 Radiology Assistant		£ 79,644.00				£ 79,644.00	Accept	Longer Term (+4 Years)
1.0WTE Band 5RN			£ 50,550.00			£ 50,550.00	Accept	Improvement Phase (2-4 Years)
1.5WTE x Band 2 Admin		£ 43,110.00				£ 43,110.00	Accept	Longer Term (+4 Years)
2 WTE Band 3 Radiology Assistant			£ 79,644.00			£ 79,644.00	Accept	Longer Term (+4 Years)
0.4WTE Band 5 RN				£ 20,220.00		£ 20,220.00	Accept	Longer Term (+4 Years)
1.5WTE x Band 2 Admin			£ 43,110.00	£ 43,110.00		£ 86,220.00	Accept	Longer Term (+4 Years)
2WTE x Band 3 Radiology Assistant				£ 79,644.00		£ 79,644.00	Accept	Longer Term (+4 Years)
<b>Total New Costs</b>	<b>£ 826,054.00</b>	<b>£ 375,504.00</b>	<b>£ 173,304.00</b>	<b>£ 294,624.00</b>	<b>£ -</b>	<b>£ 1,669,486.00</b>		
<b>OFFSET FACTORS</b>								
0.2 WTE Band 5 Radiographer Llandoverly					£ 10,110.00	£ 10,110.00	Accept	Implementation Phase (up to 2Years)
Release of accomodation - South Pems and Llandoverly					£ 20,000.00	£ 20,000.00	Accept	Implementation Phase (up to 2Years)
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ 30,110.00</b>	<b>£ 30,110.00</b>		
<b>Total Cost/Saving</b>	<b>£ 826,054.00</b>	<b>£ 375,504.00</b>	<b>£ 173,304.00</b>	<b>£ 294,624.00</b>	<b>£ -</b>	<b>£ 1,639,376.00</b>		

	OPTION 25 (B)					TOTAL		
	BGH	GGH	PPH	WGH	Community			
<b>NEW COSTS</b>								
2 WTE Interventional Consultants	£ 400,000.00					£ 400,000.00	Accept	Longer Term (+4 Years)
1 WTE Band 5 SRN	£ 50,550.00					£ 50,550.00	Accept	Improvement Phase (2-4 Years)
5 WTE Band 5 Radiographer	£ 252,750.00					£ 252,750.00	Accept	Longer Term (+4 Years)
5 WTE Band 5 Radiographer		£ 252,750.00				£ 252,750.00	Accept	Improvement Phase (2-4 Years)
3 WTE Band 5 Radiographer				£ 151,650.00		£ 151,650.00	Accept	Improvement Phase (2-4 Years)
1.5WTE x Band 2 Admin	£ 43,110.00					£ 43,110.00	Accept	Longer Term (+4 Years)
2WTE x Band 3 Radiology Assistant	£ 79,644.00					£ 79,644.00	Accept	Longer Term (+4 Years)
2WTE x Band 2 Admin						£ -	Accept	Longer Term (+4 Years)
2WTE x Band 3 Radiology Assistant		£ 79,644.00				£ 79,644.00	Accept	Longer Term (+4 Years)
1.0WTE Band 5 SRN			£ 50,550.00			£ 50,550.00	Accept	Improvement Phase (2-4 Years)
1.5WTE x Band 2 Admin		£ 43,110.00				£ 43,110.00	Accept	Longer Term (+4 Years)
2 WTE Band 3 Radiology Assistant			£ 79,644.00			£ 79,644.00	Accept	Longer Term (+4 Years)
0.4WTE Band 5 RN				£ 20,220.00		£ 20,220.00	Accept	Longer Term (+4 Years)
1.5WTE x Band 2 Admin			£ 43,110.00	£ 43,110.00		£ 86,220.00	Accept	Longer Term (+4 Years)
2WTE x Band 3 Radiology Assistant					£ 79,644.00	£ 79,644.00	Accept	Longer Term (+4 Years)
2WTE x Band 3 Radiology Assistant				£ 79,644.00	£ -	£ 79,644.00	Accept	Longer Term (+4 Years)
<b>Total New Costs</b>	<b>£ 826,054.00</b>	<b>£ 375,504.00</b>	<b>£ 173,304.00</b>	<b>£ 294,624.00</b>	<b>£ 79,644.00</b>	<b>£ 1,749,130.00</b>		
<b>OFFSET FACTORS</b>								
0.2 WTE Band 5 Radiographer Llandoverly					£ 10,110.00	£ 10,110.00	Accept	Implementation Phase (up to 2Years)
Release of accomodation - South Pems and Llandoverly					£ 20,000.00	£ 20,000.00	Accept	Implementation Phase (up to 2Years)
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ 30,110.00</b>	<b>£ 30,110.00</b>		
<b>Total Cost/Saving</b>	<b>£ 826,054.00</b>	<b>£ 375,504.00</b>	<b>£ 173,304.00</b>	<b>£ 294,624.00</b>	<b>£ 49,534.00</b>	<b>£ 1,719,020.00</b>		

	OPTION 103 (A,B)					TOTAL		
	BGH	GGH	PPH	WGH	Community			
<b>NEW COSTS</b>								
2 WTE Interventional Consultants	£ 400,000					£ 400,000	Accept	Longer Term (+4 Years)
2WTE Band 5 SRN	£ 101,100					£ 101,100	Accept	Improvement Phase (2-4 Years)
5 WTE Band 5 Radiographer	£ 252,750					£ 252,750	Accept	Longer Term (+4 Years)
5 WTE Band 5 Radiographer		£ 252,750				£ 252,750	Accept	Improvement Phase (2-4 Years)
3 WTE Band 5 Radiographer				£ 151,650		£ 151,650	Accept	Improvement Phase (2-4 Years)
1.5WTE x Band 2 Admin	£ 43,110					£ 43,110	Accept	Longer Term (+4 Years)
2WTE x Band 3 Radiology Assistant	£ 79,644					£ 79,644	Accept	Longer Term (+4 Years)
1.5WTE x Band 2 Admin		£ 43,110				£ 43,110	Accept	Longer Term (+4 Years)
2WTE x Band 3 Radiology Assistant				£ 79,644		£ 79,644	Accept	Longer Term (+4 Years)
1 WTE Band 5 SRN			£ 50,550			£ 50,550	Accept	Improvement Phase (2-4 Years)
1.5WTE x Band 2 Admin			£ 43,110			£ 43,110	Accept	Longer Term (+4 Years)
2 WTE Band 3 Radiology Assistant			£ 79,644			£ 79,644	Accept	Longer Term (+4 Years)
0.4WTE Band 5 RN				£ 20,220		£ 20,220	Accept	Longer Term (+4 Years)
1.5WTE x Band 2 Admin				£ 43,110		£ 43,110	Accept	Longer Term (+4 Years)
2WTE x Band 3 Radiology Assistant					£ 79,644	£ 79,644	Accept	Longer Term (+4 Years)
1WTE x Band 3 Radiology Assistant		£ 39,822				£ 39,822	Accept	Longer Term (+4 Years)
Band 4 HCSW (Assistant Pract)	£ 45,370					£ 45,370	Accept	Longer Term (+4 Years)
<b>Total New Costs</b>	<b>£ 921,974</b>	<b>£ 335,682</b>	<b>£ 173,304</b>	<b>£ 294,624</b>	<b>£ 79,644</b>	<b>£ 1,805,228</b>		
<b>OFFSET FACTORS</b>								
0.2 WTE Band 5 Radiographer Llandoverly					£ 10,110	£ 10,110	Accept	Implementation Phase (up to 2Years)
Release of accomodation - South Pems and Llandoverly					£ 20,000	£ 20,000	Accept	Implementation Phase (up to 2Years)
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ 30,110</b>	<b>£ 30,110</b>		
<b>Total Cost/Saving</b>	<b>£ 921,974</b>	<b>£ 335,682</b>	<b>£ 173,304</b>	<b>£ 294,624</b>	<b>£ -</b>	<b>£ 1,775,118</b>		

	OPTION 122					TOTAL		
	BGH	GGH	PPH	WGH	Community			
<b>NEW COSTS</b>								
2 WTE Band 6 Radiographer					£ 123,844	£ 123,844	Accept	Implementation Phase (up to 2Years)
						£ -		
						£ -		
<b>Total New Costs</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ 123,844</b>	<b>£ 123,844</b>		
<b>OFFSET FACTORS</b>								
						£ -		
						£ -		
						£ -		
<b>Total Potential OFFSET FACTORS</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>		
<b>Total Cost/Saving</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ -</b>	<b>£ 123,844</b>	<b>£ 123,844</b>		

Alternative Options

**Radiology**

Below is a summary of the Workforce additionality identified for each option

Consultant Radiologists would cover across all 4 sites (noted within BGH to avoid duplication)  
Increase in Interventional Radiology may attract new workforce

To support this work additional registered nurses are also required. Known current shortage of workforce in this area. Investment would be needed to grow this workforce to achieve sustainability.

**Option 2 & 4**

Additional Radiographer workforce would give improved training opportunities and aid in work life balance  
Potential 20 graduates year on year, restructure may aid in retention

	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 103(A,B)	OPTION 24 (B)	OPTION 25 (B)	OPTION 122
TOTAL ADDITIONAL WORKFORCE REQUIREMENT	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE
BGH	4	19.5	2	19.5	21.5	19.5	19.5	0
GGH	0	3.5	0	2.5	2.5	3.5	3.5	0
PPH	1	4.5	1	4.5	4.5	4.5	4.5	0
WGH	0.4	3.9	1	3.9	3.9	3.9	3.9	0
Community	0	1	0	0	2	0	1	2
<b>TOTAL</b>	<b>5.4</b>	<b>32.4</b>	<b>4</b>	<b>30.4</b>	<b>34.4</b>	<b>31.4</b>	<b>32.4</b>	<b>2</b>

Finance - Aligns with Option 4 and therefore within the

**Workforce Requirement by Site and Role**

BGH	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 103(A,B)	OPTION 24 (B)	OPTION 25 (B)	OPTION 122
Workforce Requirement	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE
Interventional Consultant Radiologist*	2	2	2	2	2	2	2	0
Band 5 RN	1	1		1	2	1	1	0
Band 4 HCSW (Assistant Pract)	1			1	1			0
Band 5 Radiographer		13		13	13	13	13	0
Band 2 Admin		1.5		1.5	1.5	1.5	1.5	0
Band 3 Radiology Assistant		2		2	2	2	2	0
<b>TOTAL</b>	<b>4</b>	<b>19.5</b>	<b>2</b>	<b>19.5</b>	<b>21.5</b>	<b>19.5</b>	<b>19.5</b>	<b>0</b>

\*2WTE to cover all 4 sites

GGH	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 103(A,B)	OPTION 24 (B)	OPTION 25 (B)	OPTION 122
Workforce Requirement	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE
Band 2 Admin		1.5		1.5		1.5	1.5	0
Band 3 Radiology Assistant		2		1	1	2	2	0
Band 5 Radiographer					Covered Above BGH			0
Interventional Consultant Radiologist*					Covered Above BGH			0
Band 5 RN Uplift					Covered Above BGH			0
Band 2 Admin					1.5			0
<b>TOTAL</b>	<b>0</b>	<b>3.5</b>	<b>0</b>	<b>2.5</b>	<b>2.5</b>	<b>3.5</b>	<b>3.5</b>	<b>0</b>

PPH	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 103(A,B)	OPTION 24 (B)	OPTION 25 (B)	OPTION 122
Workforce Requirement	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE
Band SRN	1	1	1	1	1	1	1	0
Band 2 Admin		1.5		1.5	1.5	1.5	1.5	0
Band 3 Radiology Assistant		2		2	2	2	2	0
Band 5 Radiographer					Covered Above BGH			0
Interventional Consultant Radiologist*					Covered Above BGH			0
<b>TOTAL</b>	<b>1</b>	<b>4.5</b>	<b>1</b>	<b>4.5</b>	<b>4.5</b>	<b>4.5</b>	<b>4.5</b>	<b>0</b>

WGH	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 103(A,B)	OPTION 24 (B)	OPTION 25 (B)	OPTION 122
Workforce Requirement	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE
Band SRN	0.4	0.4	1	0.4	0.4	0.4	0.4	0
Band 2 Admin		1.5		1.5	1.5	1.5	1.5	0
Band 3 Radiology assistant		2		2	2	2	2	0
Interventional Consultant Radiologist*					Covered Above BGH			0
Band 5 Radiographer					Covered Above BGH			0
<b>TOTAL</b>	<b>0.4</b>	<b>3.9</b>	<b>1</b>	<b>3.9</b>	<b>3.9</b>	<b>3.9</b>	<b>3.9</b>	<b>0</b>

Community	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 103(A,B)	OPTION 24 (B)	OPTION 25 (B)	OPTION 122
Workforce Requirement	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE
Band 3 Radiology assistant		1			2	0	1	0
Band 6 Radiographer								2
<b>TOTAL</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>

<p style="text-align: center;">Workforce Assessment</p>	<p><b>Stroke</b></p> <ul style="list-style-type: none"> <li>&gt; Option 105 (A) requires reductions in workforce at Bronglais Hospital (16.1 WTE) and Glangwili General Hospital (44.8 WTE), while Prince Philip Hospital requires an additional 4.67 WTE and Witybush General Hospital requires an additional 2.7 WTE.</li> <li>&gt; Option 210 requires an additional 10.3 WTE at Bronglais and 39.8 WTE at Glangwili, including three consultants, two middle-grade doctors, CNS requirements, and physiotherapy and occupational therapy roles, all of which present <b>significant workforce risks</b>. Witybush requires an additional one WTE associate specialist.</li> </ul> <p>The workforce assessments presented do not include any consideration of interdependencies between services either within or external to the Clinical Service Plan (CSP). External services such as estates, therapies, diagnostics and other supporting functions are unknown in certain options that reference them, and these are likely to increase the overall WTE required to deliver the proposed changes, along with introducing additional financial risks.</p> <p>The staffing ratios used within these assessments are based on best estimates informed by feedback from services through the SDOT forms. It is therefore recommended that any option selected for progression is supported by a fully developed workforce plan. This plan should cover not only the operational requirements but also the strategic elements, ensuring workforce pipeline needs are addressed over a number of years to secure sustainability.</p> <p><b>Strategic Recommendations</b></p> <ul style="list-style-type: none"> <li>&gt; Develop a multi-year recruitment plan for nursing and AHP roles, including international recruitment and local training pipelines.</li> <li>&gt; Explore rotational posts and flexible staffing models to improve retention.</li> <li>&gt; Engage with higher education institutions to secure future supply.</li> <li>&gt; Consider advanced practice roles to reduce dependency on hard-to-fill consultant posts.</li> </ul> <p><b>Risk Mitigation</b></p> <ul style="list-style-type: none"> <li>&gt; Implement targeted recruitment campaigns aligned with intake cycles.</li> <li>&gt; Create contingency plans for consultant and specialist roles, including locum arrangements.</li> <li>&gt; Monitor workforce pipeline risks quarterly and adjust plans accordingly.</li> <li>&gt; Secure financial planning for additional workforce costs and potential agency reliance.</li> </ul>
<p style="text-align: center;">Finance Assessment</p>	<ul style="list-style-type: none"> <li>• Financial sustainability of the majority of options remains to be determined as they require additional financial resource to the current service configuration</li> <li>• Enhancements have not been applied in the costings at this point as rotas have yet to be worked up for the options</li> <li>• Costs are calculated at 2023/24 rates, the same calculation methodology as the costings at consultation, to ensure comparability</li> <li>• Offsets included, which are brought forward from options consulted upon where appropriate, assume cash releasing cost reduction, through for example delivering a reduction in our bed base and reductions in staffing rotas</li> <li>• Therapies requirements are yet to be fully determined in some options and need to be identified</li> <li>• The options as currently configured have not determined the cost of all support services (i.e. pharmacy, pathology etc) and these need to be identified</li> <li>• The options have not yet identified their estates and facilities requirements and these need to be determined</li> <li>• Headroom application has been replicated from options 1-4, there remain inconsistencies to be resolved in application across staff groups</li> <li>• Staff costings are at mid point of scale, as per the costing for options at the point of consultation</li> <li>• All options do not yet include an assessment of their impact on non-pay costs</li> </ul> <p>Key risk is identification of funding to enable successful implementation of options as the majority of options require additional funding</p> <p>There is now a requirement to prioritise options, to enable further in-depth work to be completed identifying their requirements from a financial and workforce perspective.</p>

Check and Challenge

Stroke		OPTION 1   3   4 (A)					CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH TT	GGH TT	PPH (29) ASU	WGH (20) ASU	TOTAL (49)			
<b>NEW COSTS</b>								
CNS to remain (1,27 required)	£ 61,971.00				£ 61,971.00	Accept	Implementation Phase (up to 2Years)	
Regrade CNS to Band 7	£ 14,714.00				£ 14,714.00	Accept	Improvement Phase (2-4 Years)	
CNS cover 5 days per week Band 6 (9-5/day)			£ 61,971.00	£ 104,109.00	£ 166,080.00	Accept	Implementation Phase (up to 2Years)	
CNS cover 5 days per week Band 7 (8-8/day)			£ 55,773.00	£ 56,734.00	£ 112,507.00	Accept	Improvement Phase (2-4 Years)	
CNS cover 7 days per week Band 7 (8-8/day)			£ 68,049.00	£ 68,049.00	£ 136,098.00	Accept	Longer Term (+4 Years)	
7 ASU & 22 rehab (PPH)			£ 2,371,347.00		£ 2,371,347.00	Accept	Implementation Phase (up to 2Years)	
7 ASU & 22 rehab beds to meet standards			£ 293,107.00		£ 293,107.00	Accept	Improvement Phase (2-4 Years)	
1WTE B2 Admin			£ 36,500.00		£ 36,500.00	Accept	Implementation Phase (up to 2Years)	
1WTE B2 Admin				£ 36,500.00	£ 36,500.00	Accept	Implementation Phase (up to 2Years)	
4 ASU & 16 Rehab beds using current staffing ratios (WGH)				£ 1,943,375.00	£ 1,943,375.00	Accept	Implementation Phase (up to 2Years)	
4 ASU & 16 Rehab beds to meet standards (WGH)				£ 251,668.00	£ 251,668.00	Accept	Improvement Phase (2-4 Years)	
1 WTE Speciality Doctor				£ 100,000.00	£ 100,000.00	Accept	Implementation Phase (up to 2Years)	
Pharmacist Band 8a (mid point + on costs)			£ 67,024.00		£ 67,024.00	Accept	Improvement Phase (2-4 Years)	
Therapies @100% of requirement (additional to 50%)			£ 1,159,097.00	£ 554,554.00	£ 1,713,651.00	Accept	Longer Term (+4 Years)	
Therapies @50% of requirement (additional to 15%)			£ 811,368.00	£ 388,188.00	£ 1,199,556.00	Accept	Improvement Phase (2-4 Years)	
Therapies uplift 15% of requirement			£ 347,729.00	£ 166,366.00	£ 514,095.00	Accept	Implementation Phase (up to 2Years)	
<b>Total New Costs</b>	<b>£ 76,685.00</b>	<b>£ -</b>	<b>£ 5,271,965.00</b>	<b>£ 3,669,543.00</b>	<b>£ 9,018,193.00</b>			
<b>OFFSET FACTORS</b>								
Budget for Ystwyth is £2.123m for 18 beds. 23/24 SSNAP utilisation 10 beds	£ 1,179,444.44				£ 1,179,444.44	Accept	Implementation Phase (up to 2Years)	
Budget for Gwenllian Ward 20 beds is £2.027m. 23/24 SSNAP Utilisation 19		£ 1,925,650.00			£ 1,925,650.00	Accept	Implementation Phase (up to 2Years)	
CNS 1 Budget WTE Offset (BGH)	£ 48,796.00				£ 48,796.00	Accept	Implementation Phase (up to 2Years)	
CNS 1 Budget WTE Offset (PPH)			£ 48,796.00		£ 48,796.00	Accept	Implementation Phase (up to 2Years)	
CNS 2 Budget WTE Offset (WGH)				£ 109,178.00	£ 109,178.00	Accept	Implementation Phase (up to 2Years)	
Ward 9 - budget £2.45m for 29 beds (£2.293m pay). 23/24 SSNAP utilisation 17 beds			£ 1,436,206.90		£ 1,436,206.90	Accept	Implementation Phase (up to 2Years)	
Current Ward 11 - budget £1.981m (£1.879m pay) for 18 beds. 23/24 SSNAP utilisation 14.				£ 1,540,777.78	£ 1,540,777.78	Accept	Implementation Phase (up to 2Years)	
<b>Total Potential OFFSET FACTORS</b>	<b>£ 1,228,240.44</b>	<b>£ 1,925,650.00</b>	<b>£ 1,485,002.90</b>	<b>£ 1,649,955.78</b>	<b>£ 6,288,849.12</b>			
<b>Total Cost/Offset Factors</b>	<b>-£ 1,151,555.44</b>	<b>-£ 1,925,650.00</b>	<b>£ 3,786,962.10</b>	<b>£ 2,019,587.22</b>	<b>£ 2,729,343.88</b>			

Stroke		OPTION 2 [B]					CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
	BGH TT	GGH TT	PPH (29) CSC	WGH (20) ASU	TOTAL (49)			
<b>NEW COSTS</b>								
CNS to remain (1,27 required)	£ 61,971.00				£ 61,971.00	Accept	Implementation Phase (up to 2Years)	
Regrade CNS to Band 7	£ 14,714.00				£ 14,714.00	Accept	Improvement Phase (2-4 Years)	
CNS 7 day cover 24/7 Band 7			£ 408,262.00		£ 408,262.00	Accept	Implementation Phase (up to 2Years)	
6 HASU, 3 ASU & 20 rehab (PPH)			£ 3,266,708.00		£ 3,266,708.00	Accept	Implementation Phase (up to 2Years)	
1WTE B2 Admin			£ 36,500.00	£ 36,500.00	£ 73,000.00	Accept	Implementation Phase (up to 2Years)	
4 ASU & 16 Rehab beds using current staffing ratios				£ 1,943,375.00	£ 1,943,375.00	Accept	Implementation Phase (up to 2Years)	
4 ASU & 16 Rehab beds to meet standards				£ 251,668.00	£ 251,668.00	Accept	Improvement Phase (2-4 Years)	
2WTE B4 Medsecs			£ 71,450.00		£ 71,450.00	Accept	Implementation Phase (up to 2Years)	
3 WTE Consultants			£ 522,000.00		£ 522,000.00	Accept	Implementation Phase (up to 2Years)	
4WTE Middle Grades			£ 400,000.00		£ 400,000.00	Accept	Implementation Phase (up to 2Years)	
Pharmacist Band 8a (mid point + on costs)			£ 67,024.00		£ 67,024.00	Accept	Improvement Phase (2-4 Years)	
CNS cover 5 days per week Band 6 (8-8/day) + Supervisor Band 7				£ 137,291.00	£ 137,291.00	Accept	Implementation Phase (up to 2Years)	
CNS cover 5 days per week Band 7 (8-8/day) + Supervisor Band 8a				£ 23,552.00	£ 23,552.00	Accept	Improvement Phase (2-4 Years)	
Therapies @100% of requirement (additional to 50%)			£ 1,103,628.00	£ 554,554.00	£ 1,658,182.00	Accept	Longer Term (+4 Years)	
Therapies @50% of requirement (additional to 15%)			£ 772,539.00	£ 388,188.00	£ 1,160,727.00	Accept	Improvement Phase (2-4 Years)	
Therapies @15% of requirement			£ 331,088.00	£ 166,366.00	£ 497,454.00	Accept	Implementation Phase (up to 2Years)	
<b>Total New Costs</b>	<b>£ 76,685.00</b>	<b>£ -</b>	<b>£ 6,979,199.00</b>	<b>£ 3,501,494.00</b>	<b>£ 10,557,378.00</b>			
<b>OFFSET FACTORS</b>								
Budget for Ystwyth is £2.123m for 18 beds. 23/24 SSNAP utilisation 10 beds	£ 1,179,444.44				£ 1,179,444.44	Accept	Implementation Phase (up to 2Years)	
Budget for Gwenllian Ward 20 beds is £2.027m. 23/24 SSNAP Utilisation 19		£ 1,925,650.00			£ 1,925,650.00	Accept	Implementation Phase (up to 2Years)	
CNS 1 Budget WTE Offset (BGH)	£ 48,796.00				£ 48,796.00	Accept	Implementation Phase (up to 2Years)	
CNS 1 Budget WTE Offset (PPH)			£ 48,796.00		£ 48,796.00	Accept	Implementation Phase (up to 2Years)	
CNS 2 Budget WTE Offset (WGH)				£ 109,178.00	£ 109,178.00	Accept	Implementation Phase (up to 2Years)	
Ward 9 - budget £2.45m for 29 beds (£2.293m pay). 23/24 SSNAP utilisation 17 beds			£ 1,436,206.90		£ 1,436,206.90	Accept	Implementation Phase (up to 2Years)	
Current Ward 11 - budget £1.981m (£1.879m pay) for 18 beds. 23/24 SSNAP utilisation 14.				£ 1,540,777.78	£ 1,540,777.78	Accept	Implementation Phase (up to 2Years)	
<b>Total Potential OFFSET FACTORS</b>	<b>£ 1,228,240.44</b>	<b>£ 1,925,650.00</b>	<b>£ 1,485,002.90</b>	<b>£ 1,649,955.78</b>	<b>£ 6,288,849.12</b>			
<b>Total Cost/Offset Factors</b>	<b>-£ 1,151,555.44</b>	<b>-£ 1,925,650.00</b>	<b>£ 5,494,196.10</b>	<b>£ 1,851,538.22</b>	<b>£ 4,268,528.88</b>			

NEW COSTS	OPTION 106 (A)					Accept	Implementation Phase (up to 2Years)
	BGH (6)	GGH (0)	PPH (29)	WGH (14)	TOTAL(49)		
CNS to remain (1.27 required)	£ 61,971.00				£ 61,971.00	Accept	Implementation Phase (up to 2Years)
Regrade CNS to Band 7	£ 14,714.00				£ 14,714.00	Challenge	Improvement Phase (2-4 Years)
CNS cover 5 days per week Band 6 (9-5/day)			£ 61,971.00	£ 104,109.00	£ 166,080.00	Accept	Implementation Phase (up to 2Years)
CNS cover 5 days per week Band 7 (8-8/day)			£ 55,773.00	£ 56,734.00	£ 112,507.00	Accept	Implementation Phase (up to 2Years)
CNS cover 7 days per week Band 7 (8-8/day)			£ 68,049.00	£ 68,049.00	£ 136,098.00	Accept	Improvement Phase (2-4 Years)
7 ASU & 22 rehab (PPH)			£ 2,371,347.00		£ 2,371,347.00	Accept	Implementation Phase (up to 2Years)
7 ASU & 22 rehab beds to meet standards			£ 293,107.00		£ 293,107.00	Accept	Improvement Phase (2-4 Years)
4 ASU & 10 Rehab beds using current staffing ratios (WGH)				£ 1,360,362.50	£ 1,360,362.50	Accept	Implementation Phase (up to 2Years)
4 ASU & 10 Rehab beds to meet standards (WGH)				£ 176,167.60	£ 176,167.60	Accept	Improvement Phase (2-4 Years)
1 WTE Speciality Doctor				£ 100,000.00	£ 100,000.00	Accept	Implementation Phase (up to 2Years)
Pharmacist Band 8a (mid point + on costs)			£ 67,024.00		£ 67,024.00	Accept	Implementation Phase (up to 2Years)
Therapies @100% of requirement (additional to 50%)	£ 166,366.20		£ 1,159,097.00	£ 388,187.80	£ 1,713,651.00	Accept	Longer Term (+4 Years)
Therapies @50% of requirement (additional to 15%)	£ 116,456.40		£ 811,368.00	£ 271,731.60	£ 1,199,556.00	Accept	Improvement Phase (2-4 Years)
Therapies uplift 15% of requirement	£ 49,909.80		£ 347,729.00	£ 116,456.20	£ 514,095.00	Accept	Implementation Phase (up to 2Years)
6 rehab beds	£ 583,012.50				£ 583,012.50	Accept	Implementation Phase (up to 2Years)
6 rehab beds to meet standards	£ 75,500.40				£ 75,500.40	Accept	Improvement Phase (2-4 Years)
1.7 WTE Admin & Clerical Band 2			£ 62,050.00		£ 62,050.00	Accept	Implementation Phase (up to 2Years)
1 WTE Admin & Clerical Band 4			£ 35,725.00		£ 35,725.00	Accept	Implementation Phase (up to 2Years)
0.72 WTE Admin & Clerical Band 2				£ 26,280.00	£ 26,280.00	Accept	Implementation Phase (up to 2Years)
1.0 Admin & Clerical Band 4				£ 35,725.00	£ 35,725.00	Accept	Implementation Phase (up to 2Years)
<b>Total New Costs</b>	<b>£ 1,067,930.30</b>	<b>£ -</b>	<b>£ 5,333,240.00</b>	<b>£ 2,703,802.70</b>	<b>£ 9,104,973.00</b>		
<b>OFFSET FACTORS</b>							
Ystwyth Budget is £2.123m for 18 beds. 23/24 SSNAP utilisation 10 beds	£ 1,179,444.44				£ 1,179,444.44	Accept	Implementation Phase (up to 2Years)
Gwenllian Budget £2.027m for 20 beds. 23/24 SSNAP Utilisation 19		£ 1,925,650.00			£ 1,925,650.00	Accept	Implementation Phase (up to 2Years)
CNS 1 Budget WTE Offset (BGH)	£ 48,796.00				£ 48,796.00	Accept	Implementation Phase (up to 2Years)
CNS 1 Budget WTE Offset (PPH)			£ 48,796.00		£ 48,796.00	Accept	Implementation Phase (up to 2Years)
CNS 2 Budget WTE Offset (WGH)				£ 109,178.00	£ 109,178.00	Accept	Implementation Phase (up to 2Years)
Ward 9 - budget £2.45m for 29 beds (£2.293m pay). 23/24 SSNAP utilisation 17 beds			£ 1,436,206.90		£ 1,436,206.90	Accept	Implementation Phase (up to 2Years)
Ward 11 - budget £1.981m (£1.879m pay) for 18 beds. 23/24 SSNAP utilisation 14.				£ 1,540,777.78	£ 1,540,777.78	Accept	Implementation Phase (up to 2Years)
					£ -		
					£ -		
					£ -		
<b>Total Potential OFFSET FACTORS</b>	<b>£ 1,228,240.44</b>	<b>£ 1,925,650.00</b>	<b>£ 1,485,002.90</b>	<b>£ 1,649,955.78</b>	<b>£ 6,288,849.12</b>		
					£ -		
<b>Total Cost/Saving</b>	<b>-£ 160,310.14</b>	<b>-£ 1,925,650.00</b>	<b>£ 3,848,237.10</b>	<b>£ 1,053,846.92</b>	<b>£ 2,816,124</b>		

NEW COSTS	OPTION 210 (B)					Accept	Implementation Phase (up to 2Years)
	BGH (7)	GGH (42)	PPH (0)	WGH (0)	TOTAL (49)		
CNS to remain (1.27 required)	£ 61,971				£ 61,971	Accept	Implementation Phase (up to 2Years)
Regrade CNS to Band 7	£ 14,714				£ 14,714	Accept	Improvement Phase (2-4 Years)
CNS 7 day cover 24/7 Band 7		£ 408,262			£ 408,262	Accept	Improvement Phase (2-4 Years)
4 HASU, 10 ASU & 29 rehab (GGH)		£ 3,266,708			£ 3,266,708	Accept	Implementation Phase (up to 2Years)
To meet standards		£ 251,668			£ 251,668	Accept	Improvement Phase (2-4 Years)
2 WTE B2 Admin		£ 73,000			£ 73,000	Accept	Implementation Phase (up to 2Years)
Ward 11 WGH moves over to GGH current staff ratios		£ 1,263,194			£ 1,263,194	Accept	Improvement Phase (2-4 Years)
7 ASU/Rehab Using current ratios	£ 680,181				£ 680,181	Accept	Implementation Phase (up to 2Years)
7 ASU/Rehab beds to meet standards	£ 88,084				£ 88,084	Accept	Longer Term (+4 Years)
Pharmacist Band 8a (mid point + on costs)		£ 67,024			£ 67,024	Accept	Implementation Phase (up to 2Years)
CNS cover 5 days per week Band 6 (8-8/day) + Supervisor Band 7		£ 137,291			£ 137,291	Accept	Implementation Phase (up to 2Years)
CNS cover 5 days per week Band 7 (8-8/day) + Supervisor Band 8a		£ 23,552			£ 23,552	Accept	Implementation Phase (up to 2Years)

1 Consultant	£	180,000				£	180,000	Accept	Longer Term (+4 Years)		
1 WTE CNS Band 6/7?	£	57,361				£	57,361	Challenge	Longer Term (+4 Years)		
0.96 WTE B7 Clinical Lead OT	£	57,967				£	57,967	Accept	Longer Term (+4 Years)		
0.9 WTE B6 OT	£	44,078				£	44,078	Accept	Longer Term (+4 Years)		
1 WTE B5 OT	£	39,803				£	39,803	Accept	Longer Term (+4 Years)		
1WTE B4 OT Assistant Practitioner	£	35,725				£	35,725	Accept	Longer Term (+4 Years)		
1 WTE B4 TAP	£	35,725				£	35,725	Accept	Longer Term (+4 Years)		
0.8 WTE B7 Clinical lead physiotherapist	£	48,306				£	48,306	Accept	Longer Term (+4 Years)		
1 WTE B6 specialist Physiotherapist	£	48,976				£	48,976	Accept	Longer Term (+4 Years)		
0.4 WTE B4 Physiotherapy assistant practitioner	£	14,290				£	14,290	Accept	Longer Term (+4 Years)		
0.4 WTE Band 7 SALT	£	24,153				£	24,153	Accept	Longer Term (+4 Years)		
0.4 WTE Band 6 SALT	£	19,518				£	19,518	Accept	Longer Term (+4 Years)		
0.4 WTE Band 3 SALT	£	12,542				£	12,542	Accept	Longer Term (+4 Years)		
3 WTE Consultant			£	540,000		£	540,000	Accept	Longer Term (+4 Years)		
4 WTE Middle Grade - Medical			£	368,016		£	368,016	Accept	Improvement Phase (2-4 Years)		
2.7 WTE B7 Clinical Lead OT			£	163,031		£	163,031	Accept	Improvement Phase (2-4 Years)		
4.8 WTE B6 OT			£	234,221		£	234,221	Accept	Improvement Phase (2-4 Years)		
2 WTE B4 OT Assistant Practitioner			£	71,450		£	71,450	Accept	Improvement Phase (2-4 Years)		
2.8 WTE B7 Clinical lead physiotherapist			£	169,070		£	169,070	Accept	Improvement Phase (2-4 Years)		
5.8 WTE B6 specialist Physiotherapist			£	283,017		£	283,017	Accept	Improvement Phase (2-4 Years)		
1 WTE B5 Physiotherapist ( rotational)			£	39,803		£	39,803	Accept	Implementation Phase (up to 2Years)		
1 WTE B4 Physiotherapy assistant practitioner			£	35,725		£	35,725	Accept	Implementation Phase (up to 2Years)		
1.2 WTE Band 7 SALT Clinical Lead across 2 sites			£	72,458		£	72,458	Accept	Improvement Phase (2-4 Years)		
2.4 WTE Band 6 SALT			£	117,110		£	117,110	Accept	Improvement Phase (2-4 Years)		
0.5 WTE Band 5 SALT			£	19,902		£	19,902	Accept	Improvement Phase (2-4 Years)		
1.3 WTE Band 3 SALT			£	40,763		£	40,763	Accept	Improvement Phase (2-4 Years)		
1 WTE B5 OT (Rotational post)			£	39,803		£	39,803	Accept	Improvement Phase (2-4 Years)		
0.8 WTE B3 OT support			£	9,407		£	9,407	Accept	Improvement Phase (2-4 Years)		
6 WTE B4 TAP			£	214,350		£	214,350	Accept	Implementation Phase (up to 2Years)		
0.5 WTE B3 Physiotherapy HCSW			£	15,678		£	15,678	Accept	Improvement Phase (2-4 Years)		
1 WTE Medical Secretaries Band 4			£	35,725		£	35,725	Accept	Implementation Phase (up to 2Years)		
1 WTE Associate Specialist					£	124,152	£	124,152	Accept	Improvement Phase (2-4 Years)	
	£	1,463,394	£	7,960,227	£	-	£	124,152	£	9,547,774	
	£	-									
<b>OFFSET FACTORS</b>											
Budget for Ystwyth is £2.123m for 18 beds. 23/24 SSNAP utilisation 10 beds	£	1,179,444.44					£	1,179,444	Accept	Implementation Phase (up to 2Years)	
Budget for Gwenllian Ward 20 beds is £2.027m. 23/24 SSNAP Utilisation 19			£	1,925,650.00			£	1,925,650	Accept	Implementation Phase (up to 2Years)	
CNS 1 Budget WTE Offset (BGH)	£	48,796.00					£	48,796	Accept	Implementation Phase (up to 2Years)	
CNS 1 Budget WTE Offset (PPH)				£	48,796.00		£	48,796	Accept	Implementation Phase (up to 2Years)	
CNS 2 Budget WTE Offset (WGH)						£	109,178.00	£	109,178	Accept	Improvement Phase (2-4 Years)
Ward 9 - budget £2.45m for 29 beds (£2.293m pay). 23/24 SSNAP utilisation 17 beds				£	1,436,206.90		£	1,436,207	Accept	Implementation Phase (up to 2Years)	
Current Ward 11 - budget £1.981m (£1.879m pay) for 18 beds. 23/24 SSNAP utilisation 14.						£	1,540,777.78	£	1,540,778	Accept	Improvement Phase (2-4 Years)
							£	-			
							£	-			
							£	-			
							£	-			
<b>Total Potential OFFSET FACTORS</b>	£	1,228,240	£	1,925,650	£	1,485,003	£	1,649,956	£	6,288,849.12	
							£	-			
<b>Total Cost/Saving</b>	£	235,154	£	6,034,577	-£	1,485,003	-£	1,525,804	£	3,258,925	

**Stroke**

Below is a summary of the Workforce requirement for the options based on Stroke Guidance for HASU & ASU

Summary of additional Workforce requirement (All Staff)	Medical Requirement	NSLA Requirement	CNS Requirement	Therapies Requirement	Total
Option 1	21.1	14.2	18.28	53.58	
Option 2	9	31.26	12.6	13.27	66.12
Option 3	21.1	14.2	18.28	53.58	
Option 4	21.1	14.2	18.28	53.58	

Summary of additional NSLA Workforce requirement*	BGH	GGH - staff transferred to PPH in model	PPH	WGH	TOTAL
Option 1	-16.1	-40.1	2.7	-2.7	-53.5
Option 2	-16.1	-16.5	2.7	-2.7	-29.9
Option 3	-16.1	-40.1	2.7	-2.7	-53.5
Option 4	-16.1	-40.1	2.7	-2.7	-53.5

\*Predominantly Band 5 & 6 nurses required in addition at PPH. Where noted workforce surplus from other sites has been taken from the overall requirement. An OCP would be required to implement base changes which could result to additional recruitment being required.

- Option 1: Shortage of 5WTE x Band 5 & 14.2WTE Band 6, 4WTE ABC, surplus of 5.3 WTE HC5W
- Option 2: Shortage of 23wte x Band 5 & 14.50WTE Band 6 & 6.5WTE ABC, surplus of 2.7 WTE HC5W
- Option 3: Shortage of 5WTE x Band 5 & 14.2WTE Band 6, 4WTE ABC, surplus of 5.3 WTE HC5W
- Option 4: Shortage of 5WTE x Band 5 & 14.2WTE Band 6, 4WTE ABC, surplus of 5.3 WTE HC5W

**Medical Workforce Requirement**

For Option 2 additional workforce required for HASU & ASU unit:  
 3WTE Consultants  
 4WTE Middle Grades  
 2WTE Medical Secretaries

**Nursing Workforce Requirement based on NSLA against Stroke guidance**

BGH - Ysyrth Stroke (0523)	CURRENT Workforce (as of 30/09/2024)			Requirement for 8 bed model	
	Budget	Actual	Vacancy	Based on removal of 8 beds	Requirement for 8 beds in total
Nursing HCANC5W Band 2	4.4	12.6	1.9	7.2	-6.3
Nursing HCANC5W Band 3	4.4	4.6	(0.2)	2.2	-2.3
Nursing HCANC5W Band 4	4.0	14.0	0.0	4.0	-2.0
HCS Support Band 3	3.0	3.0	0.0	3.0	0.0
Admin & Clerical Band 2	1.4	1.2	0.2	0.7	0.0
Admin & Clerical Band 4	1.0	0.9	0.1	0.5	0.0
Domestic Band 2	1.0	1.0	0.0	0.5	0.0
Other Estates/leisure staff band 2	1.0	1.0	0.0	0.5	0.0
Registered Nurse Band 5	18.6	8.4	10.2	9.3	-4.1
Registered Nurse Band 6	2.0	1.8	0.2	1.0	-0.9
Registered Nurse Band 7	1.0	1.0	0.0	0.5	0.0
Locum Consultant to Substantive					
<b>CNS Band 6???</b>					
B7 Clinical Lead OT					
B6 OT					
B5 OT					
B4 OT Assistant Practitioner					
B4 TAP					
B7 Clinical lead physiotherapist					
B6 specialist Physiotherapist					
B4 Physiotherapy assistant practitioner					
Band 7 SALT					
Band 6 SALT					
Band 3 SALT					
Dietetics					
Clinical Psychology /Neuro-psychology					
<b>Grand Total</b>	<b>46.9</b>	<b>34.6</b>	<b>12.4</b>	<b>23.4</b>	<b>(16.1)</b>

**Option 1, 3 & 4**

Workforce surplus from the removal of 8 beds in total

Workforce surplus from the removal of 8 beds in total

(16.1)

CNS Model requirement 1.0

CNS Difference 0.0

**Option 2**

Workforce surplus from the removal of 8 beds in total

(14.9)

CNS Model requirement 1.0

CNS Difference 0.0

ASU & HASU Workforce Model	28 bed ASU Model	10 Bed HASU Model	Total Requirement for PPH Option 2
	14.45	6.28	20.73
	2.72	2.3	2.72
	2.72	1.78	4.5
	1	0.50	1.5
	25.24	21.79	47.03
	2	5.45	7.45
	1	1.00	2
<b>Grand Total</b>	<b>48.1</b>	<b>36.8</b>	<b>84.9</b>

Option 106(A)	Option 210
Workforce surplus from the removal of 8 beds in BGH	
-6.3	
-2.3	
-2.0	
0.0	
0.0	
0.0	
0.0	
0.0	
0.0	
0.0	
-4.1	
-0.5	
1.0	
0.96	is this the therapy ask?
0.9	
1	
1	
1	
0.8	
1	
0.4	
0.4	
0.4	
0.0	
0.0	
<b>(16.1)</b>	<b>16.3</b>

GGH - Greenlawn Ward Acute Stroke Rehab (0129)	CURRENT Workforce (as of 30/09/2024)			Requirement for 8 bed model	
	Budget	Actual	Vacancy	Based on removal of 8 beds	Requirement for 8 beds in total
Nursing HCANC5W Band 2	19.9	18.4	1.5	19.9	-19.9
Nursing HCANC5W Band 3	3.0	4.0	(1.0)	3.0	-3.0
Nursing HCANC5W Band 4	2.7	2.0	0.7	2.7	-2.7
Admin & Clerical Band 2	1.0	0.8	0.2	1.0	-1.0
Registered Nurse Band 5	16.2	16.1	0.0	16.2	-16.2
Registered Nurse Band 6	2.0	2.0	0.0	2.0	-2.0
Registered Nurse Band 7	1.0	1.0	0.0	1.0	-1.0
<b>CNS Band 6???</b>					
Consultant					
Middle Grade - Medical					
B7 Clinical Lead OT					
B6 OT					
B4 OT Assistant Practitioner					
B7 Clinical lead physiotherapist					
B6 specialist Physiotherapist					
B5 Physiotherapist ( rotational)					
B4 Physiotherapy assistant practitioner					
Band 7 SALT Clinical Lead across 2 sites					
Band 6 SALT					
Band 5 SALT					
Band 3 SALT					
B5 OT (Rotational post)					
B3 OT support					
B4 TAP					
B3 Physiotherapy HC5W Medical Secretaries Band 4					
<b>Grand Total</b>	<b>44.8</b>	<b>43.9</b>	<b>0.9</b>	<b>(44.8)</b>	<b>(44.8)</b>

**Option 1, 3 & 4**

Workforce surplus from the removal of 8 beds

(44.8)

CNS Model requirement 1.0

CNS Difference -1.0

**Option 2**

Workforce surplus from the removal of 8 beds

(44.8)

CNS Model requirement 1.0

CNS Difference -1.0

Option 106(A)	Option 210
Workforce surplus from the removal of GGH Beds	
-19.9	
-3.0	
-2.7	
-1.0	
-16.2	
-2.0	
-1.0	
3.0	
2.0	
2.0	Check
4.8	
2.8	
1.8	
1.0	
1.2	
2.4	
0.5	
1.3	
1.0	
0.8	
0.0	
0.5	
1.0	
<b>(44.8)</b>	<b>39.8</b>

Current CNS workforce	Option 106(A)	Option 210
Registered Nurse Band 6 - CNS	21.1	18.28
	53.58	

PPH - Ward 9 Stroke / Rehab (0156)	CURRENT Workforce (as of 30/09/2024)			Requirement for 8 bed model	
	Budget	Actual	Vacancy	Based on removal of 8 beds	Requirement for 8 beds in total
Nursing HCANC5W Band 2	26.2	24.4	1.8	46.07	20.7
Nursing HCANC5W Band 3	3.0	1.0	2.0	6.00	6.0
Nursing HCANC5W Band 4	2.7	2.0	(0.7)	5.44	5.4
Admin & Clerical Band 2	1.0	1.0	0.0	2.00	2.7
Admin & Clerical Band 4	1.0	1.0	0.0	1.00	1.5
Registered Nurse Band 5	18.7	15.6	3.1	33.91	28.9
Registered Nurse Band 6	2.0	1.0	1.0	4.00	5.5
Registered Nurse Band 7	1.0	2.0	(1.0)	2.00	1.0
<b>CNS Band 6???</b>					
B7 Clinical Lead OT					

**Option 1, 3 & 4**

Workforce surplus / additionality with GGH Workforce

29 bed ASU - difference to current PPH workforce

5.5 28.3

3.0 6.0

2.7 5.4

1.7 (0.7)

0.5 (0.9)

18.7 33.91

1.5 (1.8)

0.0 1.0

**Option 2**

Workforce surplus / additionality with GGH Workforce

29 bed ASU - difference to current PPH workforce

20.73 25.34

2.72 3.28

5.4 5.44

4.50 -2.50

1.50 -0.50

47.03 -13.12

7.45 -3.45

2.00 0.00

**Without GGH staff transfer**

Option 2

5.5

2.7

5.4

(2.5)

(0.9)

(28.3)

(5.9)

(1.9)

Option 106(A)	Option 210
29 bed ASU - difference to current PPH workforce	
-5.5	25.3
-3.0	6.0
-2.7	5.4
1.7	-0.7
1.0	-0.5
5.0	10.2
3.5	1.5
0.0	0.0

B6 OT									
B4 OT Assistant Practitioner									
B7 Clinical lead physiotherapist									
B6 specialist Physiotherapist									
B5 Physiotherapist (rotational)									
B4 Physiotherapy assistant practitioner									
Band 7 SALT Clinical Lead across 2 sites									
Band 6 SALT									
Band 5 SALT									
Band 3 SALT									
B5 OT (rotational post)									
B3 OT support									
B4 TAP									
B3 Physiotherapy HC/SW									
<b>Grand Total</b>	<b>55.6</b>	<b>48.1</b>	<b>7.6</b>	<b>100.4</b>	<b>60.3</b>	<b>4.7</b>	<b>40.1</b>	<b>59.9</b>	<b>14.5</b>

(50.3)

<b>4.67</b>	<b>0.0</b>	<b>40.1</b>
<b>4.67</b>	<b>0.0</b>	<b>40.12</b>

<b>Current CNS workforce</b>						<b>Current model</b>	<b>requirement</b>	<b>CNS Difference</b>			
Registered Nurse Band 7 - CNS	0.0	0.0	0.0	0.0	0.0	1.0	1.0	1.0	1.0		
Registered Nurse Band 6 - CNS	1.0	1.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0		
Admin & Clerical Band 2	0.0	0.0	0.0	0.0	1.3	1.3	1.3	1.3	1.3		
<b>Grand Total</b>	<b>1</b>	<b>10.4</b>	<b>1.3</b>	<b>8.4</b>	<b>10.4</b>	<b>8.4</b>	<b>10.4</b>	<b>8.4</b>	<b>10.4</b>		

<b>WGH Ward 11 Stroke &amp; Rehabilitation (FSC)</b>	<b>Budget</b>	<b>Actual</b>	<b>Vacancy</b>	<b>20 Bed ASU Model</b>
Nursing HC/ANCSW Band 2	21.2	15.0	5.4	14.5
Nursing HC/ANCSW Band 3	3.0	2.8	0.2	2.7
Nursing HC/ANCSW Band 4	1.0	1.0	0.0	-1.00
Admin & Clerical Band 2	2.0	1.6	0.4	2.7
Admin & Clerical Band 4	1.0	1.0	0.0	1.0
Registered Nurse Band 5	15.2	16.4	(1.3)	20.2
Registered Nurse Band 6	2.0	0.8	1.2	2.0
Registered Nurse Band 7	1.0	1.0	0.0	1.0
Associate Specialist				
CNS Band 7				
B7 Clinical Lead OT				
B5 OT (rotational post)				
B6 OT				
B3 OT support				
B4 TAP				
B7 Clinical Lead physiotherapist				
B6 specialist Physiotherapist				
B6 specialist Physiotherapist Rotational				
B3 Physiotherapy HC/SW				
Band 7 SALT - additional ban 7 clinical lead across sites				
Band 6 SALT				
Band 5 SALT				
Band 3 SALT				
Band 6 Dietetics				
Clinical Psychology /Neuro-psychology				
<b>Grand Total</b>	<b>46.4</b>	<b>41.4</b>	<b>6.0</b>	<b>48.1</b>

**Option 1, 3 & 4**

<b>20 Bed ASU Difference to current</b>	<b>2.7</b>
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**Option 2**

<b>20 Bed ASU Difference to current</b>	<b>2.7</b>
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**Option 10E(A)**

<b>20 Bed ASU Difference to current</b>	<b>2.7</b>
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**Option 210**

<b>20 Bed ASU Difference to current</b>	<b>1.0</b>
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<b>Current CNS workforce</b>						<b>CNS Model</b>	<b>requirement</b>	<b>CNS Difference</b>			
Registered Nurse Band 7 - CNS	1.0	1.0	0.0	0.0	0.0	(1.0)	(1.0)	(1.0)	(1.0)		
Registered Nurse Band 6 - CNS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0		
Admin & Clerical Band 2	0.0	0.0	0.0	1.3	1.3	1.3	1.3	1.3	1.3		
<b>Grand Total</b>	<b>1.0</b>	<b>1.0</b>	<b>0.0</b>	<b>1.3</b>	<b>1.3</b>	<b>0.3</b>	<b>0.3</b>	<b>0.3</b>	<b>0.3</b>		

<b>CNS Model requirement</b>	<b>0.0</b>	<b>(1.0)</b>
<b>CNS Difference</b>	<b>0.0</b>	<b>(1.0)</b>
<b>Grand Total</b>	<b>0.0</b>	<b>(1.0)</b>

<b>CNS Model requirement</b>	<b>0.0</b>	<b>(1.0)</b>
<b>CNS Difference</b>	<b>0.0</b>	<b>(1.0)</b>
<b>Grand Total</b>	<b>0.0</b>	<b>(1.0)</b>

**In addition therapy workforce requirement based on Guidance**

**BGH**  
No stroke beds in any options - therapies staffing to remain as is for site requirements

Workforce	Location	WTE	Current in Stroke	Option 1	Option 2	Option 3	Option 4
B7 Clinical Lead OT	BGH	0.96	0.5				
B6 OT	BGH	0.9	0.5				
B5 OT	BGH	1	0.5				
B4 OT Assistant Practitioner	BGH	1	0.5				
B4 TAP	BGH	1	1				
B7 Clinical lead physiotherapist	BGH	0.8	0.8				No Stroke Beds
B6 specialist Physiotherapist	BGH	1	1				
B4 Physiotherapy assistant practitioner	BGH	0.4	0.4				
Band 7 SALT	BGH	0.4	0.4				
Band 6 SALT	BGH	0.4	0.4				
Band 5 SALT	BGH	0.4	0.4				
Dietetics	No dedicated staff - part of site						
Clinical Psychology /Neuro-psychology	18 beds across						
<b>TOTAL</b>		<b>8.26</b>	<b>6.4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

**GGH**  
No stroke beds in any options - therapies staffing to remain as is for site requirements

Workforce	Location	WTE	Current in Stroke	Option 1	Option 2	Option 3	Option 4
B7 Clinical Lead OT	GGH	0.9	0.9				
B6 OT	GGH	1	1				
B5 OT (Rotational post)	Carmantheshir	1	1				
B6 OT	Carmantheshir	1	1				
B5 OT	Carmantheshir	1	1				
B4 OT Assistant Practitioner	GGH	1	0.75				
B4 TAP	Carmantheshir	1	1				
B4 TAP	Carmantheshir	1	1				
B4 TAP	Carmantheshir	1	1				
B7 Clinical lead physiotherapist	GGH / Carman	1	1				No Stroke Beds
B6 specialist Physiotherapist	Carmantheshir	1	1				
B6 specialist Physiotherapist	Carmantheshir	1	1				
B6 specialist Physiotherapist	GGH	1	1				
B6 specialist Physiotherapist	GGH	0.6	0.6				
B5 Physiotherapist (rotational)	GGH	1	1				
B4 Physiotherapy assistant practitioner	GGH	1	1				
Band 7 SALT	GGH	0.8	0.8				
Band 6 SALT	GGH	0.8	0.8				
Band 5 SALT	GGH	0.5	0.5				
Band 3 SALT	GGH	0.5	0.5				
Dietetics							
Clinical Psychology /Neuro-psychology							
<b>TOTAL</b>		<b>18.3</b>	<b>15.75</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

PPH	Workforce	Location	WTE	Current in Stroke	20 ASU Beds - 10 HASU Beds - 10 ASU Beds				20 ASU Beds - 10 HASU Beds - 10 ASU Beds			20 ASU Beds - 10 HASU Beds - 10 ASU Beds			20 ASU Beds	
					Option 1, 3 & 4	Option 2	Option 2 Total	Option 3	Option 4	Additionaly Required 1 & 4	25%	50%	75%	Additionaly Required Op 2		25%
B7 Clinical Lead OT	PPH	0.8	0.8	0.8	1	1	1	1	1	0.05	0.10	0.15	0.20	0.05	0.10	0.15
B6 OT	PPH	1	1	1	1	1	1	1	1	0.05	0.10	0.15	0.20	0.05	0.10	0.15
B4 OT Assistant Practitioner	PPH	1	1	1	1	1	1	1	1	0.05	0.10	0.15	0.20	0.05	0.10	0.15
B7 Clinical lead physiotherapist	PPH /Llanelli	1	1	1	1	1	1	1	1	0.05	0.10	0.15	0.20	0.05	0.10	0.15
B6 specialist Physiotherapist	PPH	1	1	1	1	1	1	1	1	0.05	0.10	0.15	0.20	0.05	0.10	0.15
<b>TOTAL</b>					<b>7.08</b>	<b>7.08</b>	<b>7.08</b>	<b>7.08</b>	<b>7.08</b>	<b>0.35</b>	<b>0.70</b>	<b>1.05</b>	<b>1.40</b>	<b>0.35</b>	<b>0.70</b>	<b>1.05</b>

ES Physiotherapist (rotational)	PPH	1	0.5	7.08	2.04	2.24	4.28	7.08	7.08	6.58	1.65	3.29	4.94	3.78	0.95	1.89	2.84	7.08	
ES Physiotherapy assistant practitioners	PPH	2	1.4	7.08	2.04	2.24	4.28	7.08	7.08	6.58	1.65	3.29	4.94	2.88	0.72	1.44	2.16	7.08	
Band 7 SALT Clinical Lead across 2 sites	Accounted for in WGH																		
Band 6 SALT	PPH	0.58		1	0.98	0.84	1.8	3.36	3.36	3.36	0.84	1.68	2.52	1.8	0.45	0.90	1.35	1	
Band 5 SALT	PPH			1	0.98	0.84	1.8	1	1	1	0.25	0.50	0.75						
Band 3 SALT	PPH	0.3	0.3	3.36	0.96	0.84	1.8	3.36	3.36	3.00	0.72	1.44	2.16	1.5	0.38	0.75	1.13	3.36	
Band 2 Dietetics	PPH			1.28	0.42	0.84	1.28	1.28	1.28	1.28	0.42	0.84	1.28	0.32	0.63	0.95	1.28	1.28	
Clinical Psychology/Neuro psychology Band 8b	PPH			1.12	0.56	1.12	1.12	1.12	1.12	1.05	0.42	0.84	1.26	1.05	0.42	0.84	1.26	1.12	
<b>TOTAL</b>		<b>8.68</b>	<b>6.75</b>	<b>45.1</b>	<b>13.78</b>	<b>15.64</b>	<b>29.22</b>	<b>47.46</b>	<b>47.46</b>	<b>49.71</b>	<b>10.18</b>	<b>20.36</b>	<b>30.53</b>	<b>20.67</b>	<b>5.17</b>	<b>10.34</b>	<b>15.50</b>	<b>45.1</b>	

Regimented to meet standards													20 ASU beds		
WGH	20 ASU Beds		20 ASU Beds		20 ASU Beds		20 ASU Beds		20 ASU Beds		20 ASU Beds		20 ASU Beds		
	WTE	Current in Break	Option 1	Option 2	Option 3	Option 4	Option 1	Option 2	Option 3	Option 4	Proportional	25%	50%	75%	
ES OT Clinical Lead OT	WGH	0.85	0.85	1	1	1	1	1	1	1	0.11	0.24	0.36	0.48	
ES OT (Rotational post)	WGH	1	1	4.52	4.52	4.52	4.52	4.52	4.52	4.52	1.13	2.26	3.39	4.52	
ES OT	Pembrokeshire	0.8	0.8	4.52	4.52	4.52	4.52	4.52	4.52	4.52	1.13	2.26	3.39	4.52	
ES OT support	WGH	0.8	0.8	4.52	4.52	4.52	4.52	4.52	4.52	4.52	1.13	2.26	3.39	4.52	
ES TAP	Pembrokeshire	3	3	4.52	4.52	4.52	4.52	4.52	4.52	4.52	1.13	2.26	3.39	4.52	
ES Clinical Lead physiotherapist	WGH	0.8	0.8	1	1	1	1	1	1	1	0.11	0.24	0.36	0.48	
ES specialist Physiotherapist	Pembrokeshire	1	1	4.72	4.72	4.72	4.72	4.72	4.72	4.72	1.18	2.36	3.54	4.72	
ES specialist Physiotherapist Rotational	Pembrokeshire	1	1	4.72	4.72	4.72	4.72	4.72	4.72	4.72	1.18	2.36	3.54	4.72	
ES Physiotherapy HCW	WGH	0.53	0.53	4.72	4.72	4.72	4.72	4.72	4.72	4.72	1.18	2.36	3.54	4.72	
Band 7 SALT - additional ban 7 clinical lead across	WGH	0.4	0.4	1	1	1	1	1	1	1	0.3	0.6	0.9	1.2	
Band 5 SALT	WGH	1	1	2.24	2.24	2.24	2.24	2.24	2.24	2.24	0.56	1.12	1.68	2.24	
Band 5 SALT	WGH	0	0	1	1	1	1	1	1	1	0.3	0.6	0.9	1.2	
Band 5 SALT	WGH	0.5	0.5	2.24	2.24	2.24	2.24	2.24	2.24	2.24	0.56	1.12	1.68	2.24	
Band 5 Dietetics	WGH	0.84	0.84	0.84	0.84	0.84	0.84	0.84	0.84	0.84	0.21	0.42	0.63	0.84	
Clinical Psychology/Neuro psychology	WGH	1.12	1.12	1.12	1.12	1.12	1.12	1.12	1.12	1.12	0.3	0.6	0.9	1.2	
<b>TOTAL</b>		<b>11.68</b>	<b>10.28</b>	<b>52.68</b>	<b>52.68</b>	<b>52.68</b>	<b>52.68</b>	<b>52.68</b>	<b>52.68</b>	<b>52.68</b>	<b>9.4</b>	<b>8.1</b>	<b>16.2</b>	<b>24.3</b>	

Total Additionality per Option	Option 1	Option 2	Option 3	Option 4
Additionality at 25%	18.28	13.27	18.28	18.28
Additionality at 50%	36.56	26.54	36.56	36.56
Additionality at 75%	54.84	39.81	54.84	54.84

**Recommendations**

- A** People with stroke should be treated in a specialist stroke unit throughout their hospital stay unless their stroke is not the predominant clinical problem. [2016]
- B** A hyperacute, acute and rehabilitation stroke service should provide specialist medical, nursing, and rehabilitation staffing levels matching the recommendations in Table 2.5 below.

Table 2.5 Recommended levels of staffing for hyperacute, acute and rehabilitation units

	Physio-therapy	Occupational therapy	Speech and language therapy	Clinical psychology/ neuro- psychology	Dietetics	Nursing	Consultant stroke physician	Consultant-level practitioner-led ward rounds
<b>Hyper-acute stroke unit</b>	1.02	0.95	0.48	0.28	0.21	2.9 (80-20 WTE per bed registered-unregistered)	24/7 availability; minimum 6.0 thrombolysis-trained physicians on rota	Twice daily ward round
<b>Acute stroke unit &amp; stroke rehabilitation unit</b>	1.18	1.13	0.56	0.28	0.21	1.35 (65-35 registered-unregistered)	Acute stroke unit: 7 day cover with adequate out of hours arrangements**	Acute stroke unit: daily ward round**Stroke rehabilitation unit: twice-weekly ward round**

	PPH	WGH
opt 1,2,3	29	20
Physio	6.84	4.72
OT	6.55	4.52
SALT	3.25	2.24
Physiotherapy	1.82	1.12
Dietetics	1.22	0.84
Nursing (65:35 registered/ unregistered)	39.15	27.00

(n.b. augmentation has not been considered)

<p style="text-align: center;">Workforce Assessment</p>	<p><b>Urology</b></p> <ul style="list-style-type: none"> <li>&gt; Options 194 and 197 require an additional three WTE Band 6 Registered Nurses within Glangwili General Hospital.</li> </ul> <p>A workforce pipeline plan will be needed to deliver these roles. The workforce assessments presented do not include any consideration of interdependencies between services either within or external to the Clinical Service Plan (CSP). External services such as estates, therapies, diagnostics and other supporting functions are unknown in certain options that reference them, and these are likely to increase the overall WTE required to deliver the proposed changes, along with introducing additional financial risks.</p> <p>The staffing ratios used within these assessments are based on best estimates informed by feedback from services through the SDOT forms. It is therefore recommended that any option selected for progression is supported by a fully developed workforce plan. This plan should cover not only the operational requirements but also the strategic elements, ensuring workforce pipeline needs are addressed over a number of years to secure sustainability.</p> <p><b>Strategic Recommendations</b></p> <ul style="list-style-type: none"> <li>&gt; Develop a multi-year recruitment plan for nursing and AHP roles, including international recruitment and local training pipelines.</li> <li>&gt; Explore rotational posts and flexible staffing models to improve retention.</li> <li>&gt; Engage with higher education institutions to secure future supply.</li> <li>&gt; Consider advanced practice roles to reduce dependency on hard-to-fill consultant posts.</li> </ul> <p><b>Risk Mitigation</b></p> <ul style="list-style-type: none"> <li>&gt; Implement targeted recruitment campaigns aligned with intake cycles.</li> <li>&gt; Create contingency plans for consultant and specialist roles, including locum arrangements.</li> <li>&gt; Monitor workforce pipeline risks quarterly and adjust plans accordingly.</li> <li>&gt; Secure financial planning for additional workforce costs and potential agency reliance.</li> </ul>
<p style="text-align: center;">Finance Assessment</p>	<ul style="list-style-type: none"> <li>• Financial sustainability of the majority of options remains to be determined as they require additional financial resource to the current service configuration</li> <li>• Enhancements have not been applied in the costings at this point as rotas have yet to be worked up for the options</li> <li>• Costs are calculated at 2023/24 rates, the same calculation methodology as the costings at consultation, to ensure comparability</li> <li>• Offsets included, which are brought forward from options consulted upon where appropriate, assume cash releasing cost reduction, through for example delivering a reduction in our bed base and reductions in staffing rotas</li> <li>• Therapies requirements are yet to be fully determined in some options and need to be identified</li> <li>• The options as currently configured have not determined the cost of all support services (i.e. pharmacy, pathology etc) and these need to be identified</li> <li>• The options have not yet identified their estates and facilities requirements and these need to be determined</li> <li>• Headroom application has been replicated from options 1-4, there remain inconsistencies to be resolved in application across staff groups</li> <li>• Staff costings are at mid point of scale, as per the costing for options at the point of consultation</li> <li>• All options do not yet include an assessment of their impact on non-pay costs</li> </ul> <p>Key risk is identification of funding to enable successful implementation of options as the majority of options require additional funding</p> <p>There is now a requirement to prioritise options, to enable further in-depth work to be completed identifying their requirements from a financial and workforce perspective.</p>

Urology						Check and Challenge	
OPTION 1, 2 & 4						CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
BGH	GGH	PPH	WGH	TOTAL			
<b>NEW COSTS</b>							
If space taken up by Endoscopy 3rd Room stand alone unit would require additional staffing.							
3wte Band 3							
		£ 119,466.00		£ 119,466.00	Accept	Improvement Phase (2-4 Years)	
<b>Total New Costs</b>						£ -	£ 119,466.00
<b>OFFSET FACTORS</b>							
						£ -	
<b>Total Potential OFFSET FACTORS</b>						£ -	£ -
						£ -	
<b>Total Cost/Saving</b>						£ -	£ 119,466.00

Urology patients are treated on Derwen Ward in GGH - 15 GS 10 Urology beds (as per IRIS) but capacity consistently above 100% and Ward 7 PPH

Urology						Check and Challenge	
OPTION 3						CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)
BGH	GGH	PPH	WGH	TOTAL			
<b>NEW COSTS</b>							
<b>Total New Costs</b>						£ -	£ -
<b>OFFSET FACTORS</b>							
						£ -	
<b>Total Potential OFFSET FACTORS</b>						£ -	£ -
						£ -	
<b>Total Cost/Saving</b>						£ -	£ -

OPTION 194/197						Check and Challenge	
BGH	GGH	PPH	WGH	TOTAL	CHECK / CHALLENGE / ACCEPT	TIMESCALES (subject to funding being available)	
<b>NEW COSTS</b>							
3 RN Band6							
	£ 185,766			£ 185,766	Accept	Improvement Phase (2-4 Years)	
If space taken up by Endoscopy 3rd Room stand alone unit would require additional staffing.							
3wte Band 3							
		£ 119,466		£ 119,466	Accept	Improvement Phase (2-4 Years)	
<b>Total New Costs</b>						£ -	£ 305,232
<b>OFFSET FACTORS</b>							
						£ -	
						£ -	
<b>Total Potential OFFSET FACTORS</b>						£ -	£ -
						£ -	
<b>Total Cost/Saving</b>						£ -	£ 185,766

## Urology

Below is a summary of the Workforce additionality identified for each option

### Options 1, 2 & 4

Additional 3WTE HCSW required only if 3rd room utilised by Endoscopy as Urology would be unable to utilise endoscopy HCSW  
 OCP required to relocate staff to PPH

Centralising workforce to PPH could improve MDT working and allow for additional training opportunities

Could improve retention and recruitment opportunities due to location near M4 corridor.

OPD services would have additional capacity in GGH

Possible additional District Nursing staff required within the community to deliver TWOC

### Option 3

As above however no requirement for additional workforce as 3rd room in Endoscopy option 3 is within the community

	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>TOTAL ADDITIONAL WORKFORCE REQUIREMENT</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
BGH	0	0	0	0
GGH	0	0	0	0
PPH	3	3	0	3
WGH	0	0	0	0
Community	0	0	0	0
<b>TOTAL</b>	<b>3</b>	<b>3</b>	<b>0</b>	<b>3</b>

### Workforce Requirement by Site and Role

<b>BGH</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
NO REQUIREMENTS				
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>GGH</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
NO REQUIREMENTS				
RN Band6				
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>PPH</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
Band 3 HCSW (Add. OPD clinics)	3	3		3
<b>TOTAL</b>	<b>3</b>	<b>3</b>	<b>0</b>	<b>3</b>

<b>WGH</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
NO REQUIREMENTS				
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>Community</b>	OPTION 1	OPTION 2	OPTION 3	OPTION 4
<b>Workforce Requirement</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>	<b>WTE</b>
Potential DN requirement				
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## Alternative Options

### OPTION 194/197

WTE

0

3

3

0

0

6

### OPTION 3

WTE

0

### OPTION 3

WTE

3

3

Headroom 26.9%?

### OPTION 3

WTE

3

3

### OPTION 3

WTE

0

### OPTION 3

WTE

0