

Deep Dive Planning Objective 6: Clinical Services Plan

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Planning Objective Aim

The Scope and Impact of Planning Objective 6:

To provide a set of plans for key clinical services to address critical sustainability risks up to the proposed new hospital network through the production of an issues paper.

- Stroke
- Planned care (Orthopaedics, Ophthalmology, Dermatology, Urology, Emergency General Surgery, Critical Care)
- Diagnostics (Radiology, Diagnostics)

Urgent and Emergency Paediatrics was also included within the broader Clinical Services Plan as it was an example of service change brought about to address sustainability issues, however that project was further established having already developed an issues paper, produced options and was preparing for consultation at the time of the Clinical Services Plan establishment.

Planning Objective Drivers

The drivers of the Clinical Services Plan:

In March 2023, Board approved the establishment of a programme approach to develop a **Clinical Services Plan** in response to service fragilities, based on the principles of care that is safe, sustainable, accessible, and kind. The development of a Clinical Services Plan is also an action within the Targeted Intervention requirements of Welsh Government.

Service	Driver	Executive Lead
Critical Care	Response to service fragility, <u>in particular at Prince Philip Hospital (PPH)</u>	Chief Operating Officer
Urgent and Emergency Paediatrics	As per the outcome of the consultation. Currently at Implementation phase as updated in Board in January 2024	Chief Operating Officer
Planned Care (Dermatology, Elective Orthopaedics, Ophthalmology, and Urology)	To support the return to pre-COVID activity levels (as a minimum), as part of improving access and reducing waiting times for patients	Chief Operating Officer
Emergency General Surgery	To respond to service fragility, particularly at Wwithybush Hospital (WGH), as referenced in the March 2023 operational update	Chief Operating Officer
Stroke	To meet standards and respond to service fragility	Executive Director of Allied Health Professions and Health Science
Diagnostics (Endoscopy and Radiology)	To support the return to pre-COVID activity levels (as a minimum), as part of improving access and reducing waiting times for patients	Chief Operating Officer

Achievements

- **Phase 1 – Issues Paper | CSP SBAR and appendices** Phase 1 included a clinically led assessment of the ten service areas included within the Clinical Services Plan programme across all sites within the Health Board. For the Primary Care issues paper, the assessment was led by the senior management team which oversees contracted services. This concluded with the Board endorsing the programme to move into phase 2.

<https://hduhb.nhs.wales/about-us/your-health-board/board-meetings-2024/board-agenda-and-papers-28-march-2024/>

- **Phase 2 – Options Development Process | CSP SBAR and Phase 2 Closing report** - Phase 2 – Options Development stage focused on the development of a series of deliverable options. This stage also brought in interdependencies such as Therapies, WAST, Trade Union representatives and Swansea Bay to name but a few.

hduhb.nhs.wales/about-us/your-health-board/board-meetings-2024/board-agenda-and-papers-28-november-2024/board-agenda-and-papers-28-november-2024/3-7-update-on-a-healthier-mid-and-west-wales-strategy-pdf/

- **Phase 3 – Public Consultation | CSP SBAR and endorsement of the Consultation Project Plan and Consultation Mandate** – To seek views on the service options and potential alternatives noting any impacts. Within this also consider the thematic findings with the role of the 4 main acute hospital sites.

hduhb.nhs.wales/about-us/your-health-board/board-meetings-2025/board-agenda-and-papers-30-january-2025/board-agenda-and-papers-30-january-2025/3-7-1-clinical-services-plan-pdf/

Achievements Outputs

Changes to our nine clinical service areas as a result of the consultation may impact on how they are organised at our four main hospitals

The configurations at a higher level can be seen in the table to the right:

CSP SBAR and Phase 2 Closing report highlighting the progress of the programme to date can be found here - hduhb.nhs.wales/about-us/your-health-board/board-meetings-2024/board-agenda-and-papers-28-november-2024/board-agenda-and-papers-28-november-2024/3-7-update-on-a-healthier-mid-and-west-wales-strategy-pdf/

Service	Current Service	Commonality	Option A's	Option B's	Option C's	Option D's
Emergency General Surgery	EGS service at GGH, WGH and BGH, no EGS service at PPH	EGS service at BGH, no service at PPH. EGS SDECs in WGH and GGH.	WGH EGS operations transferred to GGH	EGS operations alternate weekly between WGH and GGH		
Stroke	Acute Stroke Unit at GGH, PPH, WGH and BGH	BGH and GGH Treat and Transfer	PPH and WGH are Acute Stroke Units	WGH offers Treat and Transfer & ASU, PPH is Comprehensive Stroke Centre		
Dermatology	Medical Photography and Phototherapy at GGH, HB service (Temporary) at PPH, no service at WGH or BGH	Service at PPH only	AVH & CICC community delivery	SPH community delivery with community spokes through GP practices	Cross Hands paediatric clinics only, CICC and SPH community delivery with community spokes through GP practices	Cross Hands paediatric clinics only, CICC and SPH community delivery
Ophthalmology	HB service at GGH and BGH, outpatient service at PPH and WGH	WGH provides outpatients, no longer using SPH for community, clinics remain in NRC and AVH	HB service centralised in GGH, no longer using AICC for community	HB service provided in BGH and PPH, review community sites.	HB service in BGH and centralised to GGH. No AICC for Community	
Urology	HB service at GGH and PPH, Outpatients and day case at WGH and BGH	Emergency pathway in GGH, outpatients and day cases in WGH and BGH, diagnostic hub in PPH. TWOC in community.				
Elective Orthopaedics	Local and regional arthroplasty pathway at PPH, local arthroplasty pathway at BGH, day case and short stay pathways at PPH, WGH & BGH (temporary changes)	Local arthroplasty, day case and short stay pathways at BGH	Regional arthroplasty pathway at PPH, day case and short stay pathways at WGH	Regional arthroplasty pathway at PPH, extended day case and short stay pathways at WGH	Local arthroplasty pathway at PPH, day case and short stay pathways at WGH	Regional arthroplasty pathway at PPH, day case and short stay pathways at WGH, increased service at BGH
Endoscopy	HB service at GGH, PPH, WGH and BGH	HB service at GGH, WGH and BGH	Diagnostic hub at PPH	HB service at PPH. Community sites for Bowel Screening Wales	HB service with extended working hours at PPH	
Radiology*	HB service at GGH, PPH, WGH and BGH. X-ray only at TCH, CICC, SPH, LH	No X-ray service at LH or SPH, X-ray services remain at CICC and TCH	HB general service day time only at all sites.	7 day general HB service and 5 day interventional service at all sites. Cancer focus at PPH and WBH. Regional Diagnostic hub	HB Interventional service at GGH and BGH, HB service without interventional at PPH and WGH.	HB general service at PPH and WGH, 7 day HB general service with at BGH, 7 day HB general service with 24/7 interventional at GGH.
Critical Care**	Level 3 ICU in GGH, WGH and BGH, Level 2 ICU with level 3 Transfers (Temporary) at PPH	Level 3 ICU at GGH and BGH	Enhanced Care Unit at GGH, PPH and WGH	Level 3 ICU at WGH, Enhanced Care Unit at PPH	Level 3 ICU at WGH, Level 2 ICU with Level 3 Transfers at PPH	

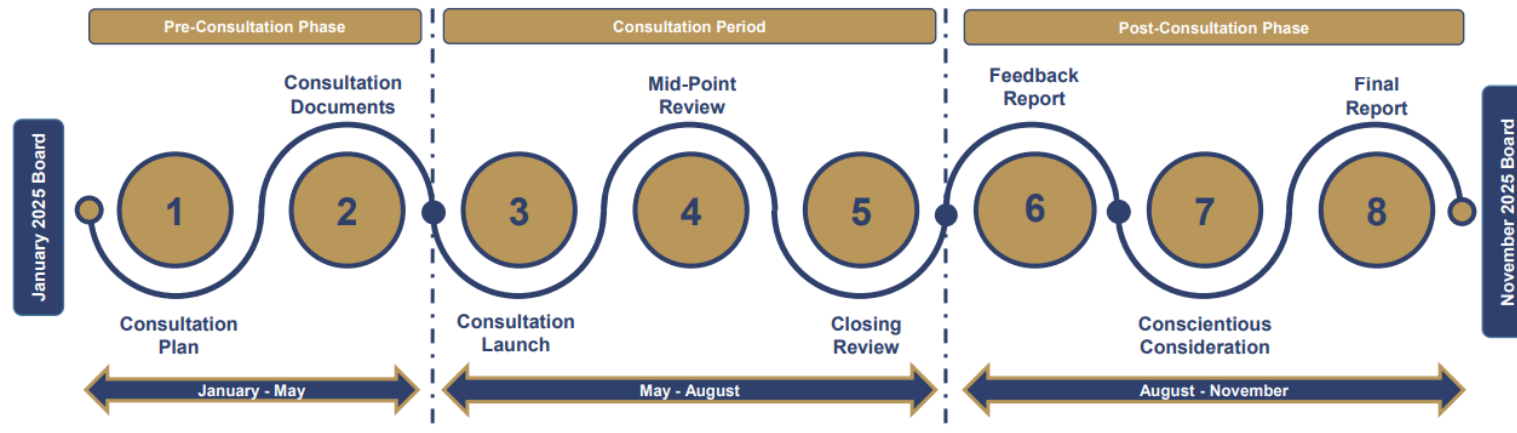
Key:	All Options	Option A	Option B	Option C	Option D
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*Interventional Radiology: refers to more complex diagnostic procedures including biopsies. Day time and general service refer to routine diagnostics. Currently CT and X-ray are offered 24 hours a day at Bronglais, Glangwili, Prince Philip and Withybush hospitals

**ICU – Intensive Care Unit | Levels of care ([Intensive Care Society | Levels of care](#))

GGH – Glangwili Hospital | BGH – Bronglais Hospital | PPH – Prince Philip Hospital | WGH – Withybush Hospital | AVH – Amman Valley Hospital | SPH – South Pembrokeshire Hospital | AICC – Aberaeron Integrated Care Centre | CICC – Cardigan Integrated Care Centre | NRC – North Road Clinic, Aberystwyth | TCH – Tenby Cottage Hospital | LH – Llandoverly Hospital

Next Steps



Matters for inclusion within the Public Consultation and views to be gathered:

- The suitability of each of the service change options for the nine services in scope of the Clinical Services Plan
- The positive and negative impacts associated with each of the service change options for the nine services in scope of the Clinical Services Plan
- Any alternative options which should be considered for the nine services in scope of the Clinical Services Plan
- The future roles of the acute hospital sites (Bronglais, Glangwili, Prince Philip, and Withybush hospitals)

CSP SBAR and Appendices: hduhb.nhs.wales/about-us/your-health-board/board-meetings-2025/board-agenda-and-papers-30-january-2025/board-agenda-and-papers-30-january-2025/3-7-1-clinical-services-plan-pdf/

Key Messages

Updates to the committee:

- **Board decision** - As described within the Consultation Mandate, the Board will make a formal decision on the Clinical Services Plan service change options in Winter 2025. Additionally, the Board will consider the feedback on the future roles of the four acute hospital sites based on the developed options.
- **Political and Public Scrutiny:** The 2025 consultation phase, occurring in a pre-election year, may attract significant political scrutiny and public contention due to the impacts on hospital services and operations.
- **Capacity and Funding Constraints:** Implementing the phased approach may face delays without clear funding streams for short-term (2-4 years) and long-term (4+ years) periods. Additionally, multiple upcoming engagements and consultations may strain organizational capacity, especially without a developed and agreed phasing plan

Planning Objective: 6 – Clinical Services Plan

Executive Lead: Lee Davies/ Mark Henwood

Reporting Period: 19NOV2024 – 03APR2025

Overall status: On-track

- Rationale for overall status: PACE project plan for Phase 3 – Public Consultation is on track overall.

Progress against planned outcomes / trajectories / milestones:

- **November 2024:** The Board approved the Clinical Services Plan and the four options submitted to progress to Phase 3 – Public Consultation. This included simplifying the view of the options by service and considering phased assessments based on existing resources. The Board also approved the procurement process and the utilization of HICO for quality assurance of Phase 3. Opinion Research Services were approved to support the independent analysis of questionnaire feedback.
- **December 2024:** A phased assessment was conducted for the nine services within the scope of the CSP, evaluating their varied options.
- **January 2025:** The Board approved the CSP Consultation Mandate.
- **February 2025:** Pre-consultation planning activities commenced, including the development and testing of the questionnaire with a readers panel. The main consultation documents were drafted and progressed to design. The CSP Sub Group agreed on the alternative options process for the public consultation phase, utilizing the current Hurdle and Evaluation Criteria process from Phase 2.
- **March 2025:** Development of the summary document, animation, and detailed consultation planning activities progressed. Regional Impact Assessments were shared with PTHB, BCUHB, and SBUHB for feedback following the QIA panel checks in February 2025.

Activities planned for next milestone and reporting period

- Production of detailed Consultation Plan for Board in May 2025 with request for Board approval to go live with a CSP Public Consultation on that day.
- Production and implementation of all related planning in relation to Public Consultation for the CSP for the planned period between 29MAY2025-31AUG2025.
- Refreshed impact assessments EqIA's, Regional Impact Assessment and HIA's with support and feedback from EDI and Public Health.
- Refined Support Document Suite (a directory of links in relation to all technical information accessed and utilised throughout Phase 1 – Issues Paper and Phase 2 – Options Development process).
- Public Consultation quality assurance through HICO

Any other Comments

Matters for information:

- There is potential that the CSP Public Consultation will overlap with the proposals for a PPH MIU engagement. There could be aspects contained within the CSP consultation that could further cause concern for services users in within the PPH catchment area.
- Further engagement sessions have taken place with Stroke colleagues in BGH as to listen to concerns and share the information used within the programme to date. This has also included sharing information with neighbouring Health Boards on the CSP programme.