

PWYLLGOR STRATEGAETH A CHYNLLUNIO STRATEGY AND PLANNING COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	26 February 2026
TEITL YR ADRODDIAD: TITLE OF REPORT:	Prince Philip Hospital (PPH) Urgent Care Centre Implementation Plan
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Andrew Carruthers, Chief Operating Officer
SWYDDOG ADRODD: REPORTING OFFICER:	Anna Thomas, Assistant General Manager PPH

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Gwybodaeth/For Information

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

The Committee is asked to receive a brief progress update on development of the Minor Injuries Unit (MIU) at Prince Philip Hospital following the Board's decision to proceed with Option 4a — a 12-hour urgent care treatment model (08:00–20:00).

This programme of work aims to transition from the current Minor Injuries Unit in Prince Philip Hospital to an Urgent Care Centre model. This will be referred to going forward as the “Prince Philip Hospital Urgent Care Centre”.

This update summarises delivery progress, key risks, expected outcomes, and the essential timescales for readiness.

Cefndir / Background

- Due to safety concerns, the Board was “*requested to SUPPORT the proposal for the short-term closure of the Minor Injuries Unit (MIU) in Prince Phillip Hospital (PPH) overnight (8pm to 8am) for a period of six months from 1 November 2024*” [[Board and Agenda Papers 26 September 2024](#)]
- A formal 12-week consultation (Apr–Jul 2025) explored four future options. Option 4a was identified as the most suitable, aligning with demand patterns and enabling more timely urgent care. [[Board agenda and papers 25 September 2025](#)]
- A decision was made by the Board in September 2025 to proceed with this project [[Press release](#)]
- The Strategy and Planning Committee (SPC) specifically requested a short update focused on risk, outcomes and timescales.

Asesiad / Assessment

Current Position

- Clinical model agreed and core pathways drafted.

- Workforce plan largely defined with remaining confirmation required for clinical supervision and rota cover.
- Estates adjustments being identified; minor enabling works required but no major capital dependency expected.
- Operational processes (triage, escalation, documentation) are drafted and currently being refined.
- Alignment with broader Urgent and Emergency Care (UEC) redesign underway but does not prevent progress.

Workforce

- Workforce and Clinical Streaming Task and Finish Groups met on 26 January 2026.
- Workforce model review underway; medical rota for 7-day Same Day Emergency Care (SDEC) being drafted.
- Consultant post out to advert to support SDEC/ Front Door rota.

Clinical Streaming

- Standard Operating Procedure (SOP) for clinical pathways agreed by the implementation group
- Pathway criteria and early metrics being scoped (flow, weekend activity, SDEC utilisation).

Estates

- Estates Task and Finish group membership being finalised; initial walk-through undertaken to map reconfiguration and identify any potential capital requirements.

Governance

- Implementation Programme Group is established and overseeing progress.
- This group reports into the Prince Philip Urgency Care Centre Steering Group (chaired by the medical director)
- Regular updates will be provided to the Quality, Safety and Experience Committee as required

Key Risks

- Delay in recruitment
- Shortage of trained Advanced Clinical Practitioner (ACP) and Advanced Nurse Practitioner (ANP) workforce
- Workforce fatigue. We need to recruit staff to substantive/permanent positions, bank cover is not sustainable over a long period of time
- Digital infrastructure gaps. Investment in virtual technology and coordination tools
- Benefits realisation. The benefits of the service may take some months to fully realise. New staff will need time to be trained and possess relevant skill mix

Expected Outcomes

- Improved access to appropriate care.
- Strengthened alignment to national UEC expectations.
- More resilient and consistent urgent care model
- Enhanced patient flow through strengthened clinical streaming
- Improved patient and staff experience building on the previous twelve months' service provision
- Improved recruitment and retention, leading to a more sustainable service

Key Timescales

- Mid–late February 2026: Workforce rota modelling, estates specification confirmation.
- March 2026: Early implementation phase - recruitment opens and flow modelling starts, digital scoping starts
- April – June 2026: Training frameworks developed, Information Technology Infrastructure confirmed
- July – October 2026: Workforce onboarding and training, communications rollout, operational readiness
- November 2026: Go-Live of 12-hour Prince Philip Hospital Urgent Care Centre

Argymhelliad / Recommendation

The Committee is asked to:

- **NOTE** the progress to date on the implementation of an Urgent Care Centre in Prince Philip.
- **RECOGNISE** the indicative timeline and **REQUEST** a brief assurance update when workforce and governance items are finalised.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.1.2. Receive assurance on the development of the Health Board’s Annual Plan/Integrated Medium Term Plan (IMTP), based on robust business intelligence and modelling, and assure the development of delivery plans within the scope of the Committee, their alignment to the Health Board’s Annual Plan/IMTP and the Health Board’s strategy and priorities.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	1293(25.11.24)-Risk of avoidable harm to patients at MIU due to inappropriate patients presenting resulting in safety, care and treatment delayed and compromising. 1980 (1.11.24)- Risk of patients attempting to access MIU outside core hours due to overnight closure-managing communication to public.
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply Domains of Quality Domains of Quality Domains of Quality
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable

Amcanion Cynllunio Planning Objectives	7 Primary and community strategic plan 3 Transforming Urgent and Emergency Care programme 1 Workforce Stabilisation
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS 4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives 7. Plan and deliver services to enable people to participate in social and green solutions for health 8. Transform our communities through collaboration with people, communities and partners

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Six Goals for Urgent and Emergency Care National Programme- Delivery Plan 2026/27 (See Appendix 1)
Rhestr Termau: Glossary of Terms:	Covered
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Strategaeth a Chynllunio Parties / Committees consulted prior to Strategy and Planning Committee:	12-week public consultation options appraisal process began-28/04/25 in line with HIW report. Steering Group produced a formal 3As (Alert, Advise, Assure) report submitted to Board and included Llais, Save Our Services Prince Philip Action Network (SOSPPAN), SBUHB & WAST. Questionnaire survey

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Attached for all (see Appendix 1)
Ansawdd / Gofal Claf: Quality / Patient Care:	Attached above
Gweithlu: Workforce:	Attached above

Risg: Risk:	Attached above
Cyfreithiol: Legal:	N/A
Enw Da: Reputational:	Attached above
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Please see Appendix 2