

**CYFARFOD BWRDD PRIFYSGOL IECHYD**  
**UNIVERSITY HEALTH BOARD MEETING**

<b>DYDDIAD Y CYFARFOD:</b> <b>DATE OF MEETING:</b>	04 August 2022
<b>TEITL YR ADRODDIAD:</b> <b>TITLE OF REPORT:</b>	Implementing the Healthier Mid and West Wales Strategy – Land Appraisal
<b>CYFARWYDDWR ARWEINIOL:</b> <b>LEAD DIRECTOR:</b>	Lee Davies, Director of Strategic Development & Operational Planning
<b>SWYDDOG ADRODD:</b> <b>REPORTING OFFICER:</b>	Paul Williams, Assistant Director of Strategic Planning (Programme Manager)

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA**  
**SBAR REPORT**

**Sefyllfa / Situation**

Key to the delivery of our future hospitals model is the development of a new urgent and planned care hospital in the defined zone between Narberth and St Clears, as set out in our Health and Care Strategy: A Healthier Mid and West Wales - our Future Generations Living Well.

This report provides information on the conclusion of the four land appraisal workstreams as follows:

- Technical Appraisal
- Clinical Appraisal
- Workforce Appraisal
- Financial and Economic Appraisal

The report is supported by the appraisal workstream reports, relevant, more detailed appendices and a presentation slide pack (to follow) which will be utilised to help navigate through the very considerable supporting information provided for Board consideration.

The Board is asked to consider the following:

- The sites to take forward for further consideration
- The need to undertake public consultation in relation to the site selection for the new urgent and planned care hospital
- To note the continuing development of the Equality and Health Impact Assessment (EHIA)

The Board is also asked to note the need to work closely with Welsh Government colleagues in relation to the land selection process and decision making.

## Cefndir / Background

Following comprehensive public engagement and consultation concluding in 2018, the UHB agreed a Health and Care Strategy: A Healthier Mid and West Wales - our Future Generations Living Well. The Health Board has made a long-term commitment to transform itself to meet the requirements of a social model for health and wellbeing.

The consultation engaged the public and our stakeholders in relation to the future provision of a new urgent and planned care hospital in the South of the Health Board area, in an identified zone between Narberth and St Clears. This consultation did not identify any specific potential locations within the identified zone.

The Hywel Dda Community Health Council (CHC) made a set of recommendations following the consultation in 2018, including an expectation that the Board will engage and consult further as the delivery of the strategy progressed, see below:

CHC Recommendation 3: - "We expect the Health Board to engage and where necessary consult further with the public on specific changes as a clearer picture of how new services would run emerges"

The Health and Care Strategy was the subject of a Programme Business Case (PBC) endorsed by the Board at its meeting in January, 2022 which was subsequently submitted to Welsh Government for scrutiny. The UHB chair and officers presented the PBC to the WG Infrastructure Investment Board on 27<sup>th</sup> May 2022 and await endorsement in support of the next stage of the programme development.

The Board has discussed and endorsed the recommended shortlist of five sites for the new hospital, the appraisal process and methodology through regular reporting to Public and In Committee Board meetings throughout the duration of the land identification process. The work undertaken has been managed through the 'A Healthier Mid and West Wales' Programme Group for which the Senior Responsible Officer is the Chief Executive.

The approved shortlist of sites, as previously reported, includes one site in Narberth, and two sites in each of Whitland and St Clears.

Four appraisal workstreams have been established as follows under Executive leadership:

- Technical Appraisal
- Clinical Appraisal
- Workforce Appraisal
- Financial and Economic Appraisal

The Programme has a developing overarching Equality and Health Impact Assessment (EHIA) which was submitted as part of the Programme Business Case to Welsh Government.

## Asesiad / Assessment

The appraisals associated with the shortlist of five sites for the new Urgent & Planned Care Hospital have been conducted with the purpose of providing evidence which might allow the Board to eliminate a site or sites from the next stages of work. The number of sites retained will have significant cost consequences. To minimise programme timeline impact there will be external costs relating to Planning fees and commercial fees which are likely to increase in direct proportion to the number of sites retained. External Fees relating to the development of

an Outline Business Case are likely to see some economies; however, a significant proportion of these costs would also increase in proportion to the number of retained sites. In house management fees will also increase but not to the same extent as external fees. There will be a point during the Outline Business Case process when the preferred site will need to be identified and parallel site development costs can cease. This is likely to need to be agreed with WG.

Therefore, the Board will need to keep in mind that the retention of sites at this stage will have cost consequences and will need to be weighed with the appraisal outcomes in deciding the way forward.

The assessment is structured as follows:

- The headline outcomes from the four appraisal workstreams and technical risk assessment
- Consideration of outcomes through the lens of the strategic objective to provide services which are ‘safe, sustainable, accessible and kind’
- Summary of the Technical Appraisal
- Summary of the Clinical Appraisal
- Summary of the Workforce Appraisal
- Summary of the Finance and Economic Appraisal
- Summary of the development of the Equality and Health Impact Assessment (EHIA)
- Quality assurance assessment of process undertaken by the Consultation Institute
- A statement on risk assessment
- The consideration of the need for public consultation

### The headline outcomes from the four appraisal workstreams and technical risk assessment

Table 1:

	Site 7 – Narberth	Site 12 – Whitland	Site C - Whitland	Site J – St Clears	Site 17 – St Clears
<b>Technical Appraisal</b>	365	373	366	334	372
<b>Clinical Appraisal (Neonates, Obstetrics &amp; Paediatrics)</b>	Concern that the zone would present a clinical risk to the delivery of services due to reduction in birth numbers, neonatal admissions (including days of respiratory care provided), and acute paediatric admissions			Of the zone, the East presented the least clinical risk to services. The attendees of the clinical appraisal workshop were of the opinion that a site further east to the proposed zone would be preferable	
<b>Clinical Appraisal (Stroke)</b>	Any area of the zone would be suitable due to the focus on how patients are treated beyond their initial admission A Central or East site would be more preferable due to access to workforce				
<b>Workforce Appraisal</b>	All evidence shows that there is very little difference across all acute sites in terms of recruitment. The workforce appraisal has found it inconclusive to say that a site further East in the zone will have a greater impact to secure a sustainable workforce				
<b>Finance &amp; Economic Appraisal (cost &amp; % differential from Site 12)</b>	£26.9m 35%	£19.9m 0%	£28.2m 42%	£24.5m 23%	£20.7m 4%
<b>Technical Risk Score</b>	164	145	144	171	145

### Consideration of outcomes through the lens of the strategic objective to provide services which are ‘safe, sustainable, accessible and kind’.

The UHB continues to seek to consider the evidence within the strategic framework, safe, sustainable, accessible and kind. The presentation for Board will include a number of slides which illustrate the appraisal outcomes through this lens. It’s considered that for this purpose

the 'safe/sustainable' categories are combined for illustration and that there is no differential impact in relation to 'kind'.

This illustrates the fact that there are differential impacts associated with sites to the west, centre and east of the zone identified for the new hospital between Narberth and St Clears. Evidence does not all point in the same direction and there is a balance of judgement rather than entirely empirically based decision making.

### Summary of the Technical Appraisal

A Technical Land Team was established to:

- Lead the process for site identification, identifying site options
- Facilitate the short-listing process
- Manage the public and stakeholder communication and engagement
- Assess the technical and legal requirements

The full appraisal process followed to date is shown below

Table 2:



The team reviewed the process and lessons learnt from NHS Lanarkshire in the identification of a site for a new hospital. This experience and the lessons learnt from other NHS organisations helped frame the approach adopted by the UHB to ensure a robust and transparent process.

Each key stage of the technical appraisal process has been subject to reports to Board which have endorsed the workshop outcomes and agreed the next steps and methodology.

On 9<sup>th</sup> June 2022, the Board endorsed the weighted criteria which were established through a workstream which included 52% public representation. This reflected an earlier Board commitment that there is a reasonable expectation that the public voice should be the majority voice in the technical appraisal process. This methodology was carried forward into the final workshop on 28<sup>th</sup> June 2022 to score the shortlist of sites against the weighted technical appraisal criteria.

The remaining 48% were UHB staff and other stakeholders. In addition, there were stakeholders who attended but did not participate in scoring. An important example of this were the Hywel Dda Community Health Council (CHC) representatives whose role was primarily to witness the process. Consideration for staff representation was sought from a range of grades in Clinical, Corporate and Facilities departments based from across Hywel Dda.

The outcome of the workshop held on 28<sup>th</sup> June 2022 to score the shortlist of sites against the weighted technical appraisal criteria is shown below:

Table 3:

Site 7 Narberth	Site 12 Whitland	Site C Whitland	Site J St Clears	Site 17 St Clears
365	373	366	334	372

### Summary of the Clinical Appraisal Workstream

A comprehensive clinical engagement process was established to undertake the clinical appraisal in support of the site identification. This was led by a Project Group with oversight from an Executive Steering Group.

The clinical appraisal undertook an objective assessment of the clinical implications of siting the new hospital at the east, west and central locations of the agreed zone for the following:

- Paediatric, obstetric, and neonatal care services
- Stroke services

A range of engagement activities took place with supporting evidence and information.

The general findings for neonatal services, obstetrics and paediatrics are:

- The attendees of the workshop on 28<sup>th</sup> April 2022 were concerned that the zone would potentially present a clinical risk to the delivery of services due to impacts on birth numbers, neonatal admissions (including days of respiratory care provided), and acute paediatric admissions, with reducing critical mass for a safe and sustainable service
- Of the three geographical areas appraised, these being the east, central and west areas of the zone between Narberth and St Clears, the east presented a lower clinical risk to services.

The general findings for stroke services are:

- Any of the areas would be suitable, with pathways (in particular how patients are treated beyond their initial admission) being more important than location
- A central or east site was thought to be more preferable due to access to workforce

The Clinical Land Appraisal Project Discussion Report Neonatal Services, Obstetrics & Paediatrics and the Clinical Land Appraisal Project Discussion Report for Stroke Services are provided in Annex B1 and Annex B2. These reports have not been previously shared with Board Members' due to timings.

### Summary of Workforce Appraisal

A comprehensive workplan was developed to undertake the workforce appraisal. This included:

- travel time analysis
- Alignment to other streams of work and defining boundaries
- Stakeholder mapping
- Clear identification of risks, assumptions and issues relating to impact on staff
- Development of a clear methodology to use robust data and analysis
- Identifying areas of further work / exploration as the programme matures

The output report provides information on the assessment of implications on workforce for the geographic locations of the shortlist of sites and for the categories of workforce explored.

The general findings are that evidence shows that there is very little difference between the identified zones in terms of recruitment.

Impact on staff has been noted based on those who traditionally are able to work locally to their homes and those who reasonably expect to travel linked to their professions. Different strategies to mitigate 'ask' would be adopted as work progresses.

The workforce appraisal has found it inconclusive to say that a site further east in the zone will have a greater impact to secure a sustainable workforce.

### **Summary of Financial/Economic Appraisal**

The work of the group has primarily been in relation to the assessment of the following key issues:

- Comparison of the differential capital cost assessments for the development of each site including any known site abnormal costs
- Identification of any significant additional revenue costs that differentiate between sites
- To assess at a high level if there are differential economic benefits/disbenefits of each site option

The findings are shown below:

#### *Capital Costs (assessed by cost advisor)*

From the costing undertaken there is little to distinguish between the two least cost sites (site 12 and 17) with a range of £19.9m to £28.2m between the least and most expensive of the five sites.

This could be considered significant when considered in isolation, however as a percentage of the overall estimated cost the range is £495.0m - £503.2m or less than 2%.

#### *Revenue Costs*

The revenue costs associated with the ongoing running costs of the new hospital have been assessed to be the same regardless of site as at present there is no evidence to suggest that the clinical model delivered from the sites would be materially different.

Potential non-recurring staff travel costs have been identified that could be different dependent on site chosen. These are highly likely to change as there is no detail currently available over numbers/grades/speciality to be located at the new hospital and is estimated on where our current staff live.

#### *Economic Appraisal*

Contact was made with experts to ascertain whether it was possible to calculate a differential economic benefit. Whilst it was acknowledged that siting a hospital in the zone would have an economic benefit in the area, it was not possible to determine if this would be different dependent on site, given their proximity.

The commercial and cost risks of any individual site are significant relative to the economic differential assessment between the sites. The assessment is the current best estimate of the capital cost differential based on the professional judgement of our cost advisers.

### **Summary of the development of the Equality and Health Impact Assessment (EHIA)**

The Equality and Health Impact (EHIA) was produced for submission with the Programme Business Case and is a live document being updated as part of the ongoing programme. The Equality and Health Impact Assessment (EHIA) has been reviewed and updated as appropriate to reflect feedback from:

- An online focus group independently facilitated by the Consultation Institute held on 14<sup>th</sup> June 2022. The participants were a mix of public representatives from Pembrokeshire (6) Carmarthenshire (4) and Ceredigion (1). Participants were asked to consider actual or potential equality impacts.
- A questionnaire “Help us to understand how the location of the new urgent and planned care hospital may affect you” conducted between 1<sup>st</sup> June 2022 – 14<sup>th</sup> June 2022. The questionnaire was sent to groups that represent people with protected characteristics and members of the Health Board’s involvement and engagement scheme, Siarad Iechyd / Talking Health. 775 responses were received. The link to the questionnaire was also picked up by the ‘Save Withybush Campaign’ group and shared on their Facebook page which has resulted in more feedback received from Pembrokeshire residents, representing 89% of respondents.

Key themes from the focus group and questionnaire responses are noted below. These are similar to those identified during the public consultation in 2018 and engagement exercise ‘Building a Healthier Future after COVID-19’ during from 10<sup>th</sup> May to 21<sup>st</sup> June 2021.

- Concerns about travel and transport
  - Poor road infrastructure including roads with siting of new hospital
  - Poor transport networks, public transport inadequate, road infrastructure very poor, summer traffic.
  - People in the east of the area (Llanelli) concerned about distance to new hospital
  - People in Pembrokeshire concerned about the hospital moving further away
  - Wider transport concerns: community transport; access for people living in rural areas
  - Effects of poverty or reduced income on being able to travel to the new hospital
- Concern about ambulance services and their capacity
- Appetite for more detail about which services will be delivered at the new hospital in order to be able to identify any negative or positive impacts

Each land appraisal workstream has also considered the EHIA as part of their work. This has been reflected in the revised EHIA provided as an appendix to this report.

Important future action will include the continued development of robust baseline data and the development of mitigation action plans for any negative impacts identified.

### **Quality assurance assessment of process undertaken by the Consultation Institute**

The Consultation Institute has been commissioned to undertake a Quality Assurance Certification of the land appraisal process which is an assessment against the criteria and principles set out in the Consultation Institute’s Consultation Charter. An interim letter was received on 8<sup>th</sup> July 2022 advising that at that stage of the assessment they found good evidence against each of the assessment criteria. Overall, this indicated an open and transparent process which had been conducted to a high standard. The Consultation Institute has also reviewed the documentation being provided in support of this Public Board meeting and a final certification letter was received on 25<sup>th</sup> July 2022. This has been included as appendix A11 and concludes that the site identification process for the proposed new Urgent and Planned Care Hospital has been assessed against the Consultation Institute’s quality assurance criteria and awarded best practice recognition.

### **Risk Assessment**

Each land appraisal workstream has identified risks, which are included in the respective appraisal reports. In addition, the commissioned technical team have produced a comparative risk assessment associated with each shortlisted site, which is attached at Appendix A10 and

summarised as part of Table 1 above. These highlight higher risks assessed in relation to site J St Clears and site 7 Narberth.

There is an additional process risk in relation to compliance with Welsh Government guidance which stipulates that a preferred site should be secured only at the point of completion and approval of the outline business case. The UHB will continue to work closely with Welsh Government colleagues on the land identification process and timings for future actions.

### **The consideration of the need for public consultation**

Following the Hywel Dda UHB/Hywel Dda Community Health Council Extraordinary Executive Committee on 22<sup>nd</sup> July 2022, the CHC subsequently confirmed that from their perspective there needs to be a consultation with the public and stakeholders in relation to site selection.

The Board is therefore asked to concur with the CHC recommendation, in accordance with the Welsh Government Guidance for Engagement and Consultation on Changes to Health Service, 2011 (the Guidance), as the proposals for the site options would be a substantial change to services as detailed in the Health and Care Strategy resulting from the consultation in 2018. The proposed consultation will be specific to the land selection for the new Urgent and Planned Care Hospital, and not concerned with any change to the agreed vision set out in our Health and Care Strategy resulting from the previous consultation in 2018. In these circumstances, the Board has a statutory responsibility to undertake consultation under section 183 of the National Health Services (Wales) Act 2006.

### **Argymhelliad / Recommendation**

The Board is asked to:

- **CONSIDER** the evidence provided through the appraisal workstreams in relation to the five shortlisted sites to determine which sites should be taken forward for further consideration.
- **NOTE** the continuing development of the Equality and Health Impact Assessment (EHIA).
- **NOTE** the 'best practice' certification for the land appraisal process from the Consultation Institute.
- **APPROVE** the recommendation relating to the need to commence a public consultation process. This recommendation concurs with that of the Community Health Council (CHC) and follows the UHB duty under section 183 of the National Health Services (Wales) Act 2006. The consultation scope and questions will be determined following Board decisions and discussion with the Hywel Dda CHC.
- **NOTE** the risks identified through the appraisal workstreams and the technical risk assessment and the need to work closely with Welsh Government colleagues in relation to the land selection process and decision making.

### **Amcanion: (rhaid cwblhau)**

#### **Objectives: (must be completed)**

Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Risk 1196 - Insufficient investment in facilities/equipment/digital infrastructure (risk score 16)
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	1.1 Health Promotion, Protection and Improvement

Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019</a>	9. All HDdUHB Well-being Objectives apply

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Contained in the body of the report.
Rhestr Termau: Glossary of Terms:	Contained in the body of the report.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Since the 2018 consultation there has not been further consultation but there has been significant public and stakeholder engagement including with the Hywel Dda Community Health Council.

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	The PBC sets out both the revenue and capital funding assumptions for the programme including a detailed Financial Case section in the PBC.
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	Implicit within the PBC. This is an integral part of the PBC case for change.
<b>Gweithlu: Workforce:</b>	Implicit within the PBC. This is an integral part of the PBC case for change and is the subject of Workforce Appendix which is being finalised for submission to WG in support of the PBC.
<b>Risg: Risk:</b>	Risk 1196 Insufficient investment in facilities/equipment/digital infrastructure
<b>Cyfreithiol: Legal:</b>	Implicit within the PBC
<b>Enw Da: Reputational:</b>	Implicit within the PBC
<b>Gyfrinachedd: Privacy:</b>	Implicit within the PBC
<b>Cydraddoldeb: Equality:</b>	Included within the PBC is Equality & Health Impact Assessment which will remain 'live' through the duration of the programme