



# Canolbarth a Gorllewin Cymry Iachach A Healthier Mid & West Wales

Ystyried adroddiad canfyddiadau'r ymgynghoriad tir a lleihau ymhellach nifer y safleoedd ar y rhestr fer ar gyfer yr ysbyty gofal brys a chynlluniedig Newydd - 14eg Fedi, 2023

Consideration of the land consultation findings report and further reducing the number of shortlisted sites for the new urgent and planned care hospital - 14<sup>th</sup> September, 2023







### **Presentation Structure**

- Summary
- Part 1 Outcome of Land Consultation
  - Process
  - Conscientious Consideration
- Part 2 Technical Appraisal Work including Technical Risk Assessment
- Part 3 Commercial Appraisal
- Part 4 Financial Appraisal
- Part 5 Clinical and Workforce Appraisal
- Part 6 Equalities and Health Impact Assessment





# **Summary**



The Board will be considering the Output Report from the Land Consultation alongside the additional information and evidence from the:

- Technical Appraisal Work including Technical Risk Assessment and Biophilic Assessment
- Commercial Appraisal
- Financial Appraisal
- Clinical and Workforce Appraisal
- Equalities and Health Impact Assessment

The next 2 slides provide a summary of the information collated







### Land appraisal matrix Tŷ Newydd (Site C) St Clears (Site 17) Spring Gardens (Site 12) Whitland Whitland **Clinical Appraisal** Of the zone, the East presented the Concern that the zone would present a clinical risk to the delivery (Neonates, Obstetrics & Paediatrics) least clinical risk to services. The of services due to reduction in birth numbers, neonatal attendees of the clinical appraisal admissions (including days of respiratory care provided), and workshop were of the opinion that acute paediatric admissions a site further east to the proposed zone would be preferable Any area of the zone would be suitable due to the focus on how patients are treated beyond their initial **Clinical Appraisal** admission (Stroke) A Central or East site would be more preferable due to access to workforce All evidence shows that there is very little difference across all acute sites in terms of recruitment. The workforce **Workforce Appraisal** 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 **Finance & Economic Appraisal** £23.9m £32.3m £25.5m (cost & % differential from Spring Gardens) 0% 35% 7% **Technical Risk Score SOC** 213 191 230 **Commercial Risk** 57% red 0% red 29% red





# Land appraisal matrix

	Spring Gardens (Site 12) Whitland	Tŷ Newydd (Site C) Whitland	St Clears (Site 17)
Biophilic Appraisal – least impact on existing site		$\checkmark$	
Biophilic Appraisal – greatest opportunity to improve biodiversity		$\checkmark$	
Biophilic Appraisal – best site into which biophilic designed development might fit		$\checkmark$	





# Part 1 - Outcome of Land Consultation



Date	Process
4 <sup>th</sup> August 2022	Extraordinary Board agreed a shortlist of 3 sites and that the UHB should consult with stakeholders on these 3 sites
23 <sup>rd</sup> February 2023	Consultation launch for 12 weeks
19 <sup>th</sup> May 2023	Consultation Close
Early August 2023	Receipt of Consultation Output Report
August 2023	Conscientious Consideration including Board Seminar 24 <sup>th</sup> August 2023 and stakeholder feedback
14 <sup>th</sup> September 2023	Extraordinary Board to review the Consultation Report and other information with a view to reducing the site shortlist from 3 to 2

Llais were involved in the stakeholder meetings to ensure that the answers provided by the UHB were of a standard and consistent quality





### **Purpose of the Consultation**

### The consultation sought to answer three questions:

- Which of three potential sites is the best location for the new hospital and why
- Concerns about any of the three potential sites and their impacts, so they can be avoided, addressed, or reduced if possible
- Anything else that needs to be considered within the scope of the consultation

### The following matters were not open to influence:

- Any additional sites beyond the three identified as part of the appraisal process prior to consultation
- The vision for services and structure of our hospital network, agreed in our health and care strategy, A Healthier Mid and West Wales: Our Future Generations Living Well

### **Relevant issues and considerations**

An example of a relevant consideration may include design suggestions, services that may be available as part of the new community health care centre network, etc. as these things have yet to be decided.

An example of a consideration that would not be relevant would include retaining Withybush and Glangwili as they currently are, which is not part of our strategy that has previously been agreed through consultation.





### **Purpose of Conscientious Consideration**

Public Consultations are developed and carried out in line with Gunning Principles, 4 rules which can support consulters in developing a fair, worthwhile and accessible consultation.

Should a consultation be brought to Judicial Review (the process for challenging decisions made by public bodies) Gunning Principles are one of the tools used to determine whether consultation is fit for purpose.

The first 3 principles are satisfied during consultation planning and delivery, the 4<sup>th</sup> principle is met after the consultation closes and states:

'that the product of consultation is conscientiously taken into account when finalising the decision'

The conscientious consideration processes allows the Board to demonstrate that it has:

- Properly considered the material produced by the consultation
- Not made up its mind or came to its own decision
- Taken into account relevant issues and matters that the public feel the Board should be aware of

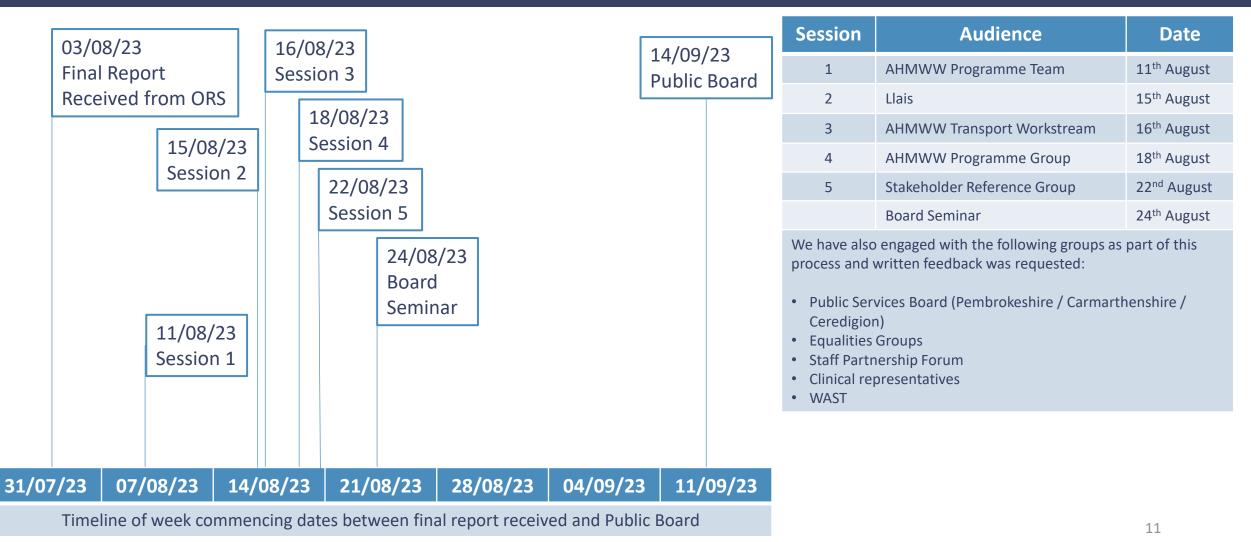
In order to ensure consistency and robustness of approach, those taking part will be asked to consider the findings (individually or in groups) by answering the same questions.

- Does the report in general reflect what was heard during the consultation?
- Initial reactions/observations to the findings analysis
- Are there any further mitigations that should be considered?
- re there any final points or other considerations to be raised?





### **Conscientious Consideration Timeline to Board**







### **Quality Assurance Certification**



### Certificate of Best Practice

Extract from the Consultation Institute letter:

'to confirm that New Hospital Site consultation has successfully completed the Institute's Quality Assurance process, and a certificate confirming the award of Best Practice is enclosed' This is to certify that

### Hywel Dda University Health Board's

consultation on

### **New Hospital Site**

was subject to the Institute's formal Quality Assurance process and satisfied its requirements as being compliant with required standards.

Kathy Graham (Assessor)

Klycler

Brian Parry (Verifier)

on behalf of The Consultation Institute | August 2023





### Key Themes from Output Report

- As well as capturing the views about the 3 shortlisted sites the following additional considerations were raised during the consultation
  - Travel and accessibility
  - Recruitment and retention of staff
  - Futureproofing and site design
  - Infrastructure issues
  - The future of Bronglais Hospital
  - Timetable and Costs
- The detailed output report is available as Appendix 2 to the Board papers and a separate presentation of the Output Report findings, prepared by ORS, is also available in Appendix 3

Themes discussed from Output Report included		
Recruitment and Retention of staff	The need for accommodation on site e.g., Hotel	
Transport and accessibility in particular public transport	Equality themes	
Biophilic concept	Communication on our strategy - continuous engagement	
Future flexibility – site size implications	Consideration of the future state	
Housing needs	Promotion of health and wellbeing centres	
Opportunities for carbon reduction schemes / renewable energy	Engagement with young people and working with partners	

Important to note that the public raised a lot of other health and care issues at the public drop in events in addition to discussions on land selection. These included issues such as long waiting times and GP access

Following identification of the 'preferred' new hospital site, may need detailed modelling to understand the impact on both the EMS & NEPTs services to identify any 'additional capacity' that may be required

### **Discussion Points 24th August 2023 Board Seminar – Conscientious Consideration**

### Themes discussed from Output Report included

Workforce Implications	Further work required on Equalities Impact	
Travel and access and the need to work with other agencies to progress and resolve issues	Feedback relating to the individual sites	4
'Green' considerations and biophilic design opportunities	Noting the alternative sites proposed	7.
Future flexibility – site size implications	Feedback from other stakeholders and other conscientious consideration events including statutory consultees.	4
Housing needs and possible 'hotel' requirements	Communities impact and the need for continuous engagement	
Renewable energy	Engagement with young people who will be our future workforce	

ORS also highlighted a range of 'other' important issues raised in the consultation feedback such as the need to 'ring fence' elective capacity, impact on paediatric services

It was noted that several themes are already part of the work programme but that there are others raised in the consultation which will require further work at the Outline Business Case stage such as housing and hotel requirements, and engagement programmes with the directly impacted community.





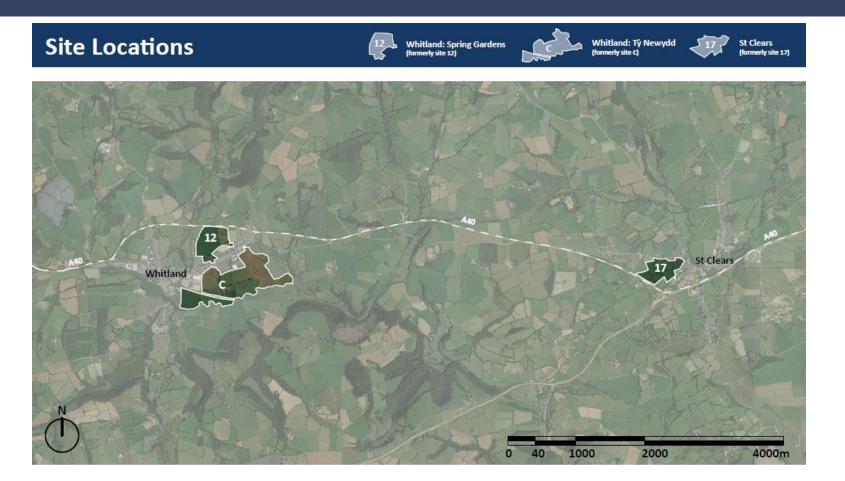
# **Part 2 - Technical Appraisal**







### **Shortlisted Sites**





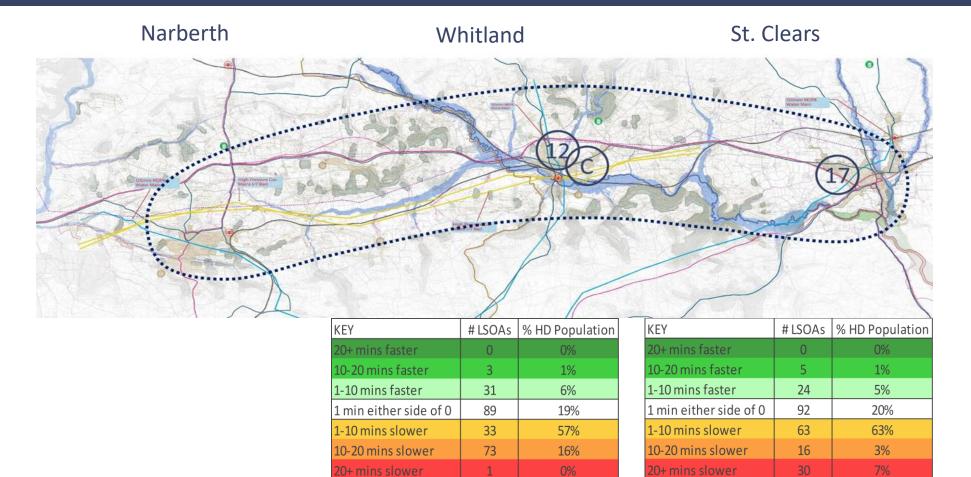


### Accessibility

Variation in **blue-light** travel time by Lower Super Output Area to the closest hospital with an Emergency Department

The tables also indicate a % of the Hywel Dda population that fall within each time banding.

The Lower Super Output Areas are all coloured in the supporting maps as part of the WAST analysis pack.



The line below demonstrates the % of HD population with the greatest additional travel time (20+ mins plus)







## Whitland, Spring Gardens (formerly Site 12)

Acreage: 47

# <figure>

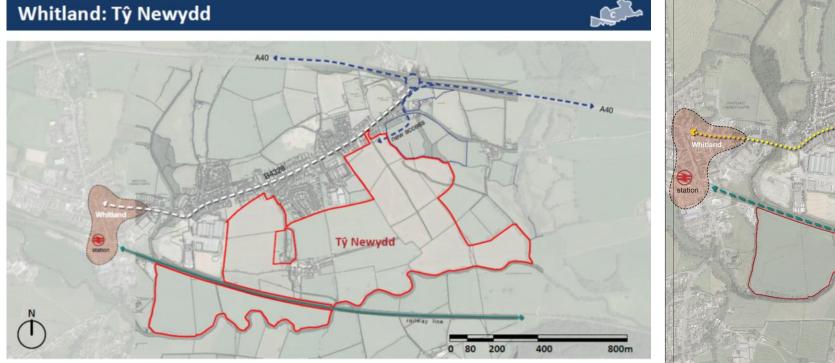






# Whitland, Tŷ Newydd (formerly Site C)

### Acreage: 157



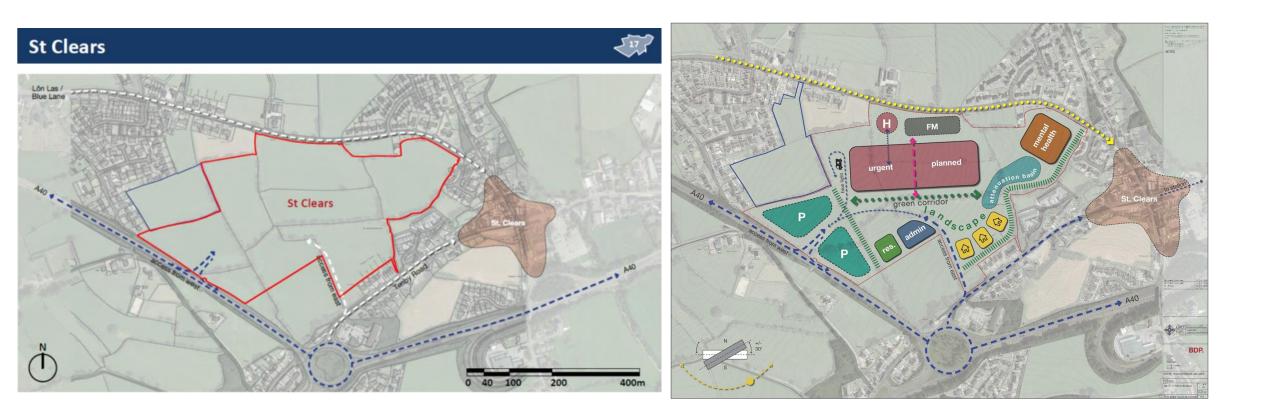






# St Clears (formerly Site 17)

### Acreage: 40







### **Technical Work Undertaken**

- In order to assess the key environmental and engineering risks associated each site, the following technical areas were considered in more detail for each of the sites:
  - Transport Modelling
  - Highway & Active Travel Infrastructure
  - Drainage
  - Utilities/Energy Strategy
  - Topographical Surveys
- A summary report is included as an Appendix to the Board papers and the detailed technical information is available on request
- Work has been undertaken on the development of a Planning Strategy for the New Urgent and Planned Care Hospital. This can be seen in Appendix 11





### **Technical Team Evaluation of Risks**

The technical team has identified risks, which have been summarised in the following slides.

As part of the Technical Appraisal, site development comparative risks have been captured and are reported as Appendix 8

The key differentiating risks by site in order to support the collective appraisals is illustrated in Slide 23

	Spring Gardens (Site 12) – Whitland		St Clears (Site 17)
Risk score SOC	213	191	230

No issues have been highlighted that would prevent the development on any of the 3 sites





### **Risk Summaries**

### From a technical perspective the key differentiating risk between sites are

Risk	Spring Gardens	Tŷ Newydd	St Clears
Impact on new development of archaeological remains	$\checkmark$		
Requirement for land outside red line boundary for drainage attenuation	$\checkmark$		$\checkmark$
Capability of site to accommodate future expansion	$\checkmark$		$\checkmark$
Existence of 'ransom' strips	V		
Diversions of existing utilities supplies – delays to programme	$\checkmark$	$\checkmark$	
St Clears train station not reopened			$\checkmark$
St Clears train station location			V
Mineral right risk			$\checkmark$





### **Biophilic Assessment**

### **Greatest impact on the existing site**

Each of the three sites are agricultural; however, Tŷ Newydd Farm, is highly managed for grass production: as a result there is very little grassland biodiversity. The other two sites have areas of unimproved and wet grassland which are correspondingly more botanical diverse.

Similarly, Tŷ Newydd has very few hedgerows or mature tree cover; whereas both the other sites have significant section of diverse hedgerows with understorey development and mature trees.

Any development at **Tŷ Newydd** would therefore have the **least impact upon the existing biodiversity** of the site.

### **Greatest opportunity to improve Biodiversity.**

All agricultural sites could in general benefit from active biodiversity management, but a highly managed site such as **Tŷ Newydd** Farm would benefit from this far more. This site is almost a blank (green) sheet, and active biodiversity management on this site as a part of any development would be far more significant than mitigation work at either of the other two sites.





### **Biophilic Assessment**

### Best site into which a biophilic designed development might fit / what the site can add.

One of the first considerations re: any development that intends to follow a biophilic design is to consider how the development sits within the landscape: whether it is a sensitive fit, how might it enhance its surroundings, and what can the site add to the overall development?

There is a significant body of research that points to the fact that patients and staff who have sight of and/or access to nature during their period in hospital have demonstrable improved outcomes, and staff are also better served by access to the same environment.

A planted biodiverse landscape around a hospital and access to an existing natural landscape, directly or visually, should form one of the underpinning initial considerations of any proposed site.

Of the three sites, **Tŷ Newydd** Farm would be the best choice. The impact of any development on the existing biodiversity of the site would be negligible, as it is heavily managed with little biodiversity interest. The distant views across the valley of the Taf and the possibility of access to the river would all recommend this site. The landform with the initial flat fields eventually falling down to the river may well support and add to a biophilic design, but this is clearly a design consideration for later. Additionally, the Tŷ Newydd site is much less easily looked over by existing housing, and so may have less of an impact its neighbours.





# Part 3 – Commercial Appraisal







### **Commercial Evaluation of Risks**

The work undertaken by the Commercial Team has identified risks, which have been RAG scored and summarised in the following table. Information which is commercially sensitive has been shared with the Board In Committee.

Areas of Risk	Spring Gardens (Site 12) – Whitland	Ty Newydd (Site C) - Whitland	St Clears (Site 17)
Landowners willingness to treat			
Risk of losing site due to UHB timings			
Ability to agree terms and price by negotiation on appropriate terms			
Extent of legal title issues			
Extent of 3 <sup>rd</sup> party land requirements			
Perceived difficulties in acquiring 3 <sup>rd</sup> party rights			
Extent of suitable expansion land available			
% red	57%	0%	29%





# **Part 4 – Financial and Economic Appraisal**







### **Finance and Economic Appraisal Process**

The Finance and Economic Appraisal update has aimed to establish the relative costs and whether it is possible to differentiate economic benefits between sites.

### The work has

- Compared the Capital costs of development of each site including any known site abnormal costs
- Identified any significant additional revenue costs that differentiate between sites
- Quantify, if possible, the wider environmental and ecology costs of each site
- Calculate the decarbonisation impact for each site if information is available to do so
- Where appropriate capture the differential economic benefits/disbenefits of each site option





Finance and Economic Executive Summary				
	Capital Costs (assessed by cost advisor)	Revenue Costs	Economic Appraisal	
	Only differential costs between sites have been considered	00	Contact was made with experts to ascertain whether it was possible to calculate a differential	
	A consistent methodology has been used for each site taking into consideration costs associated with - Land Purchase; Site Conditions; Site Topography; Site Drainage; In-coming Services and Off-site Highway Works	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.	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.	
	From the costing undertaken there is a range of £24.0m to £32.3m between the least and most expensive of the three sites.	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/specialty to be located at the new hospital and is estimated on where our current staff live.		
	This could be considered significant when considered in isolation, however as a percentage of the overall estimated works costs the range is £580.0m - £588.3m or less than 1.5%			

### **Finance and Economic Executive Summary**





# Part 5 – Clinical and Workforce Appraisal







### **Clinical and Workforce Appraisal**

The following slides are reminders of the position reached in support of decision making at the 4<sup>th</sup> August 2022 Board which reduced the shortlist of sites from five to three. This covers the clinical and workforce considerations which remain unchanged from that time, but which are still relevant to decision making at this Public Board.





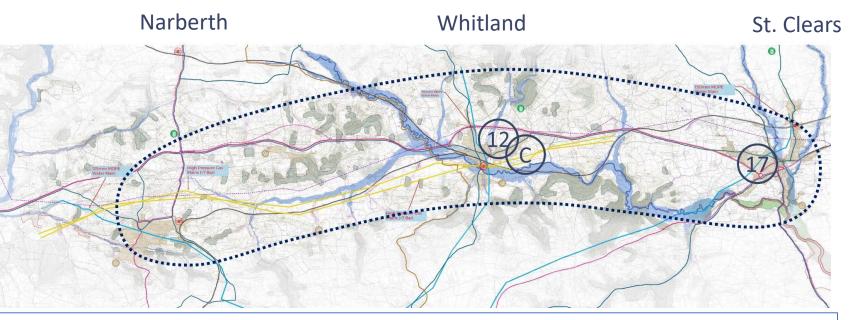
### Clinical

# Neonatal, obstetrics and Paediatric services:

- 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, with reducing critical mass for a safe and sustainable service
- Of the three geographical areas appraised, the area in the East presented the least clinical risk to services
- A site further East to the proposed zone would be preferable

\*No. of estimated births at locations based on shortest drive time

\*\*No. of estimated births withsensitivity analysis applied (additional10 mins travel time)



The line below demonstrates the estimated impact on service sustainability across the zone

ons	1604	1679	1941
onal	1973	2198	2539

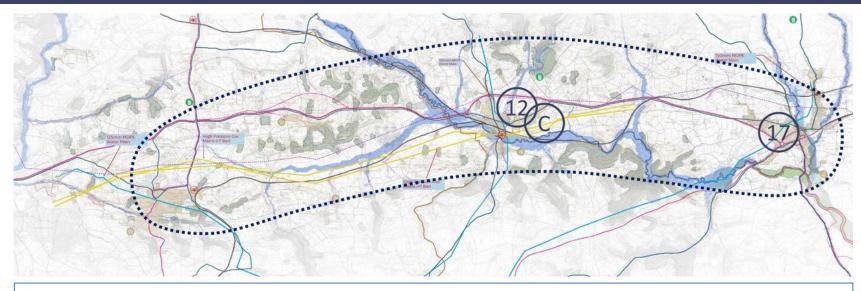
\*The figures above represent the estimated differential impact on total births in Hywel Dda and are presented as part of highlevel modelling to provide an estimate of the scale of impact

\*\*There is evidence to suggest people might drive an additional 10 minutes to travel to a hospital within Hywel Dda as part of a birthing choice, there is an adjustment for those patients who would be within an additional 10-minute drive time from each of the proposed areas although this is not certain.





### Clinical



The line below demonstrates the estimated impact on service sustainability across the zone

### Stroke

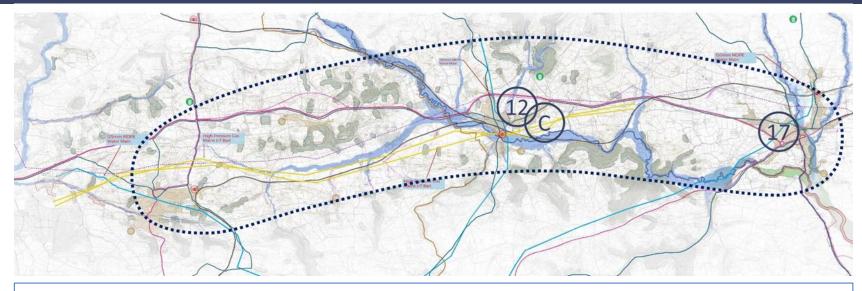
### **Stroke services:**

- Any of the areas would be suitable with pathways (in particular how patients are treated beyond their initial admission) being more important than location
- The clinical assessment is that a Central or East site would be more preferable due to access to workforce





### Workforce



The line below demonstrates the estimated impact on service sustainability across the zone

### Workforce

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





# Part 6 - Equalities and Health Impact Assessment







### **EHIA** – Key themes from the Land Consultation

Most equalities concerns centred on travel and access generally, and the ease with which patients/visitors/staff would be able to travel to the new hospital. Several groups were highlighted as being particularly vulnerable to impacts, including:

- Vulnerable and older people
- People with disabilities
- People on lower incomes and/or without access to private transport
- Expectant parents (e.g., mothers with conditions such as diabetes requiring monitoring and having to give birth at the new hospital) and parents of babies requiring neonatal care
- People with additional/complex needs (like neurodivergence and learning disabilities)

Also concerns about the impact of the proposals on outcomes for people in different geographies Particular access concerns for

- residents of west Pembrokeshire, east Carmarthenshire, and some parts of Ceredigion
- people in rural isolation (especially if reliant on public transport)
- those living in areas with poor internet connections (unable to access telemedicine and other digital healthcare opportunities)
- Welsh speakers (if displaced to Swansea  $\rightarrow$  less likely to access services where Welsh is spoken)





### **Equality and Health Impact Assessment (EHIA)**

The EHIA has been reviewed and updated to reflect feedback from the land consultation.

As noted in the previous slide key themes from the land consultation are similar to those identified during the public consultation in 2018 and engagement exercise 'Building a Healthier Future after COVID-19' during from 10th May to 21st 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.
- 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

The EHIA will remain a live document and will be further updated following Board discussion.





# The End

