



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

# New Hospital Site Consultation

## Feedback report

**Opinion Research Services**  
**August 2023**



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

## New Hospital Site Consultation Feedback report

### Opinion Research Services

The Strand • Swansea • SA1 1AF

01792 535300 | [www.ors.org.uk](http://www.ors.org.uk) | [info@ors.org.uk](mailto:info@ors.org.uk)

As with all our studies, findings from this report are subject to Opinion Research Services' Standard Terms and Conditions of Contract.

Any press release or publication of the findings of this report requires the advance approval of ORS. Such approval will only be refused on the grounds of inaccuracy or misrepresentation.

This study was conducted in accordance with ISO 20252:2019, ISO 9001:2015, and ISO 27001:2013.

© Copyright August 2023

# The ORS project team

## Project design and management

Kester Holmes

Kelly Lock

## Qualitative facilitation

Kelly Lock

Angharad Davies

Daisy Evans

Bryony Wilson

## Quantitative data analysis

Richard Harris

Sheng Yang

## Data capture and verification

Ellen Fitzpatrick

Michael King

## Analysis and reporting

Kelly Lock

Karen Jenkins

Angharad Davies

Bryony Wilson

Vicki James

# Contents

<b>1. Executive summary .....</b>	<b>8</b>
The consultation.....	8
Background context .....	8
Consultation scope.....	8
The consultation process .....	9
The nature of public consultation .....	11
Summary of views from consultation feedback.....	11
Views on the site options for the new hospital .....	11
Additional considerations .....	12
Alternative suggestions .....	14
Views on consultation process.....	14
Equalities impacts .....	15
<b>2. Consultation overview.....</b>	<b>16</b>
Introduction.....	16
The journey so far .....	16
Consultation scope.....	18
The consultation process .....	21
The nature of public consultation .....	21
Consultation methodology and response .....	22
‘Open’ consultation questionnaire .....	23
HDdUHB-led consultation activity.....	24
ORS-led activity .....	25
Written submissions.....	26
Social media feedback.....	26
The consultation report.....	26
<b>3. Consultation questionnaire .....</b>	<b>28</b>
Introduction.....	28
Summary of main findings.....	28
Methodology and questionnaire response .....	29
Response type .....	29
Demographic profile of respondents .....	30
Interpretation of the data .....	37

Questionnaire feedback .....	38
Whitland: Spring Gardens (formerly site 12) as a location for the new Hospital .....	38
Whitland: Tŷ Newydd (formerly site C) as a location for the new Hospital.....	48
St Clears (formerly site 17) as a location for the new Hospital.....	60
Views on all three sites .....	71
Additional considerations .....	71
Respondents' views on potential equalities impacts and mitigations.....	76
Questionnaire feedback from organisations.....	82
<b>4. Staff engagement .....</b>	<b>88</b>
Staff drop-in events and meetings .....	88
Introduction .....	88
Key findings from staff drop-in events and meetings .....	89
Staff interviews.....	102
Introduction .....	102
Attendance and representation .....	102
Discussion agenda .....	103
Main findings.....	103
Views on the proposed location of the new hospital .....	103
Additional considerations .....	106
Views on equality and health inequality impacts .....	108
<b>5. Stakeholder engagement .....</b>	<b>109</b>
Key findings from stakeholder engagement .....	110
Views on the proposed location of the new hospital .....	110
Additional considerations .....	112
Views on equality and health inequality impacts .....	118
<b>6. Public engagement: drop-in events .....</b>	<b>119</b>
Introduction.....	119
Key findings from public drop-in events .....	120
Views on the proposed location of the new hospital .....	120
General questions and comments relating to all three sites .....	123
Additional considerations .....	128
The consultation and decision-making process .....	131
Equalities issues .....	133

<b>7. Other community events/ meetings.....</b>	<b>135</b>
Key findings from other community events and meetings.....	139
Views on the proposed location of the new hospital .....	139
Additional considerations .....	142
Views on equality and health inequality impacts .....	144
<b>8. Public engagement: focus groups with residents .....</b>	<b>146</b>
Introduction.....	146
Attendance and representation .....	146
Discussion agenda .....	147
Main findings.....	148
Views on the proposed location of the new hospital .....	148
Additional considerations .....	153
Views on equality and health inequality impacts .....	158
<b>9. Written submissions .....</b>	<b>160</b>
Introduction.....	160
Summary tables of themes from individual written submissions.....	160
Summaries of detailed submissions .....	165
Llais.....	165
Aberystwyth Town Council .....	167
Individual Member of the Senedd .....	167
Llanelli Town Council.....	168
Ceredigion Public Service Board Respondent .....	168
Individual respondent 1 .....	168
Individual respondent 2 .....	169
Individual respondent 3 .....	170
<b>10. Social media feedback.....</b>	<b>171</b>
Introduction.....	171
Main findings.....	171
Views on the proposed location of the new hospital .....	171
Additional considerations .....	172
<b>Appendix I: Table of figures .....</b>	<b>177</b>

<b>Appendix II: Tables of coded questionnaire text comments .....</b>	<b>179</b>
Views on Whitland: Spring Gardens – Explanations Why .....	179
Views on Whitland: Tŷ Newydd – Explanations Why .....	182
Views on St Clears – Explanations Why .....	186
Additional considerations .....	190
Groups of people who might be positively or negatively affected by any of the sites being considered.....	193
 <b>Appendix III: Demographics of attendees at HDdUHB-run events .....</b>	 <b>196</b>
Demographic profile of event participants (667 responses, English and Welsh) .....	196
 <b>Appendix IV: Focus group topic guide .....</b>	 <b>201</b>
 <b>Appendix IV: Social media reach .....</b>	 <b>212</b>
Consultation Post Overview / Analytics – Facebook.....	212
Twitter – @HywelDdaUHB .....	228
Twitter – @HywelDdaUHB .....	231

# 1. Executive summary

## The consultation

### Background context

- 1.1 Hywel Dda University Health Board (HDdUHB) has undertaken regular engagement about the future of health and care services since 2017; and in 2018 undertook its 'Our Big NHS Change' consultation. Following this, the 'A Healthier Mid and West Wales' health and care strategy was developed, in which the following vision for service provision was outlined:
- » A network of community health and care facilities supported by more community-based care;
  - » Three main hospitals: a major new urgent and planned care hospital centrally located somewhere between Narberth and St Clears; Bronglais Hospital in Aberystwyth; and Prince Philip Hospital in Llanelli; and
  - » Two repurposed hospitals – Glangwili Hospital and Withybush Hospital – which will offer a range of community services.
- 1.2 In February 2022, HDdUHB sent a Programme Business Case (PBC)<sup>1</sup> to Welsh Government seeking the greatest investment into health and well-being that west Wales will have ever seen, in the region of £1.3billion. If successful in this first stage, there are then three further stages, which could take several years, to secure the ultimate investment needed to deliver the facilities above.

### Consultation scope

- 1.3 The overall geographical zone for a new Urgent and Planned Care Hospital in the south of the HDdUHB area - between Narberth and St Clears – has been chosen because it is the area that would mean most of the Hywel Dda population is within an hour of an emergency department (either this hospital, Bronglais Hospital, or Morriston Hospital, in Swansea).
- 1.4 The Health Board has undertaken a great deal of work to identify options for specific locations using a methodical appraisal process, involving a range of stakeholders including public, staff, and experts. There were 11 sites originally in scope, which were then narrowed down to five and taken to the Board in August 2022. At that month's Board meeting, it was decided to narrow down the options further, resulting in this consultation on three potential sites: two near Whitland and one near St Clears. The three sites are:
- » **Whitland: Spring Gardens:** a short distance north-east of the centre of Whitland. It is between the A40 to the north and Whitland Rugby Pitch to the east, and Spring Gardens homes to the south.
  - » **Whitland: Tŷ Newydd:** part of Tŷ Newydd Farm to the east of the old Whitland creamery site. The town centre and the A40 road are less than one mile to the north; and

---

<sup>1</sup>A PBC is a high-level document, which sets out to secure Welsh Government support for a programme of investment.



- » **St Clears:** land at old Bryncaerau fields, next to the junction of the A40 and A477 in St Clears. The A4066 Tenby Road is to the south, the village of Pwll Trap to the north, and the A40 to the west.

1.5 The Health Board does not have a preferred site and has not bought any site or land for this development. Purchasing a site and delivering the new hospital is subject to Welsh Government funding, which is not yet confirmed and if successful, will take several years to achieve. In this consultation people were asked for their feedback on:

- » Which of three potential sites is the best location for a new hospital and why.
- » Concerns they may have about any of the three potential sites.
- » Anything else you think it should consider.

1.6 Consultees were informed that their views, as well as other evidence and considerations, could influence future decisions about the location of the new hospital, and that a dedicated Health Board meeting will take place later in 2023 to consider this feedback (as well as other information and evidence) to discount sites or choose a preferred site. In that meeting, Board members will consider all they have heard leading up to, and during, this consultation, including the Equality and Health Impact Assessment and any new information that may come to light as a result of the consultation or ongoing technical and commercial work.

1.7 Consultees were also told that the following points are decided, meaning they are not open to influence in the consultation:

- » The three sites being consulted on.
- » The vision for services and structure of the hospital network (as described above in paragraph 1.1).

## The consultation process

1.8 The 12-week public consultation period began on 23 February 2023 and ended on 19 May 2023, during which time members of the public, HDdUHB staff members, organisations, and other stakeholders were invited to give feedback on the three site options and anything else they felt the Health Board should consider in relation to any of the sites. Opinion Research Services (ORS) was appointed to advise on and independently manage some aspects of the consultation programme, as outlined below.

1.9 Throughout the consultation, stakeholders were provided with paper documentation and/or signposted by direct email or communication activities, such as press releases and social media advertising, to the dedicated consultation website. A range of information and resources was available, including the full consultation document, a separate summary document, an easy read version, a youth friendly document, a BSL video, and audio version. There were also technical documents available including the programme business case (PBC), reports from the site appraisal process, a transport analysis, and the equality impact assessment (EIA).

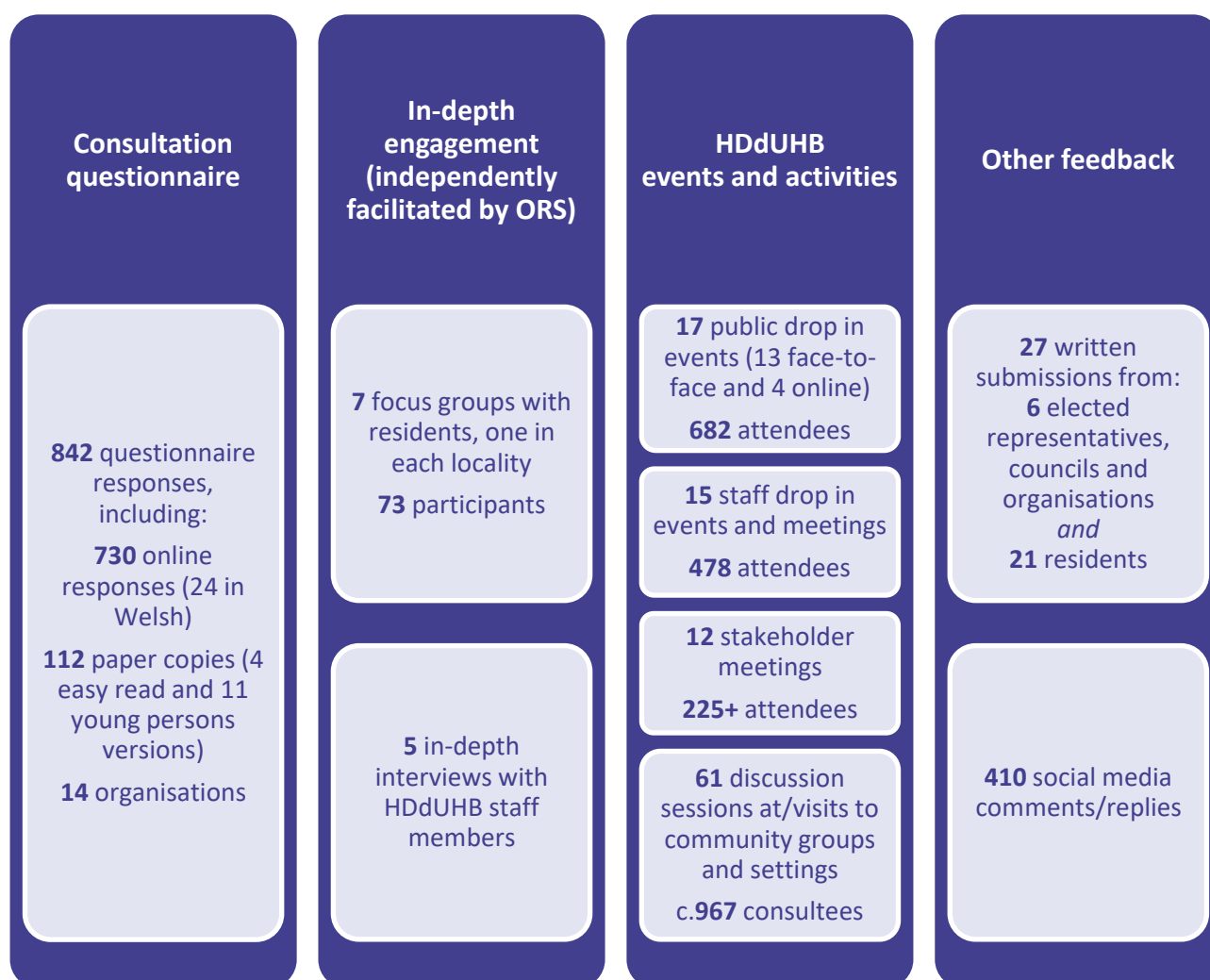
1.10 Paper copies of documentation and the consultation questionnaire were also available, including accessible versions (easy read and youth friendly) and other languages versions (Arabic, Polish, Russian and Ukrainian). Documents were distributed at face-to-face meetings, engagement events, and visits to a range of settings, as well as being available on request via post, telephone or email. In all, over 1,742 stakeholders received 2,045 summary documents and 1,766 paper copies of consultation documents, each with a paper copy of the consultation questionnaire (3,811 copies). In addition, 3,000 stakeholders received direct emails from

the Health Board promoting the consultation. The consultation was well promoted in the local media and via social media channels.

1.11 Residents, staff, and other stakeholders were invited to provide feedback through a wide range of methods, including all of the following:

- » A consultation questionnaire which was available online (hosted by ORS) and via paper copies that were circulated widely and available on request.
- » Independently facilitated in-depth engagement designed and conducted by ORS (described below).
- » Engagement activities undertaken by HDdUHB, including:
  - Online and face-to-face public drop-in events
  - Staff drop-in events and meetings
  - Meetings with statutory and non-statutory stakeholders/partners
  - Attendance at/visits to existing community groups and settings
- » Written and email submissions; and
- » Social media.

1.12 The consultation response from the different research strands is summarised in the figure below.



- 1.13 This executive summary brings together the feedback received through each of the different feedback channels above and concisely reviews the full range of views received, bringing together the common themes that have emerged. The full report covers public, professional and stakeholder opinions and feelings in considerable detail to achieve a more comprehensive understanding. This can at times be repetitive given that similar issues emerged across the different methods – but it is important that an accurate reflection of all of the feedback received is available.
- 1.14 With this in mind, ORS strongly recommends that this executive summary and the full report be read together. It is the journey, as well as the destination, that will matter to those wishing to understand stakeholders' views, assumptions, arguments, and conclusions around the site options. We trust that both this executive summary and full report will be helpful to all concerned.

## The nature of public consultation

- 1.15 Public consultation promotes accountability and assists decision making; public bodies give an account of their plans or proposals and listen to feedback. Consultation has, therefore, been described as a dialogue, based on a genuine and purposeful exchange of views.
- 1.16 It should be noted, however, that consultations are not referenda or 'votes' in which the loudest voices or the greatest numbers automatically determine the outcome. The feedback received often reflects widely varied and sometimes polarised views, and it is important to report these concerns and contrary views robustly, in order for decision-makers to be able to conscientiously take into account the issues raised.

## Summary of views from consultation feedback

### Views on the site options for the new hospital

#### Whitland: Spring Gardens

- 1.17 Just over a quarter (27%) of individual respondents to the questionnaire thought that Whitland: Spring Gardens is either a very or fairly good location for the new hospital. 57% considered it either a fairly or very poor option.
- 1.18 Across the other consultation methods and in the questionnaire open text comments, consultees liked the fact that Whitland: Spring Gardens has direct access from the A40, has a train station nearby, and is the cheapest of the three options. Its equidistance from Glangwili and Withybush, and the potential for offsite renewable energy, were also appreciated.
- 1.19 As for concerns, the fact that the site is in multiple private ownership and may involve a costly and complicated sale was a key worry. People also highlighted the clinical and recruitment risks of siting a hospital further west, that the site has some flood risk, and that the limited scope for future expansion is near-sighted in terms of futureproofing. There were mixed views around the potential impact of a new hospital on the local area: some felt that siting a large hospital in Whitland would destroy the character of the town, whereas others said it would benefit the local economy.

#### Whitland: Tŷ Newydd

- 1.20 Just under a quarter (24%) of individual respondents to the questionnaire thought that Whitland: Tŷ Newydd is either a very or fairly good location for the new hospital. 59% considered it either a fairly or very poor option.

- 1.21 Those who preferred Whitland: Tŷ Newydd did so because the site is in public ownership, it is the largest site for futureproofing, the train station is near the site, and there is potential for on-site renewable energy. However, there was concern about the potential flood risk and the lack of direct access to the site currently; and similar to Whitland: Spring Gardens, there were worries about the clinical and recruitment risks of siting a hospital further west.
- 1.22 Once again, it was said that siting a large hospital in Whitland would destroy the character of the town, but there was also some sense that a new hospital could be beneficial to Whitland's economy.

## St Clears

- 1.23 Two fifths (40%) of individual respondents to the questionnaire thought that St Clears is a very or fairly good location for the new hospital. 43% considered it a fairly or very poor option.
- 1.24 Across the other consultation methods, those who supported the St Clears site did so because the site is geographically central and the most accessible by road, is owned by one single landowner, and poses no flood and less clinical risk. Indeed, it was considered very important that enough patients would use the new hospital (rather than access healthcare in Swansea) to meet national guidelines, and it was acknowledged that St Clears poses less risk in this regard.
- 1.25 The fact the site is closer to populated areas, and linked to those areas by a dual carriageway, was seen as beneficial by many, and the town's existing infrastructure and amenities were considered positive.
- 1.26 There was concern that there is limited scope for expansion on the site, and the lack of a nearby train station was generally seen as a negative. The importance of ensuring the train station is re-opened if this site is chosen was frequently stressed. St Clears was also said to be already too congested to cope with increased traffic to and from the site, should a hospital be built there. Other concerns were around the site's topography (several people said that there is a slope on the site), and its proximity to residential areas of St Clears.

## Additional considerations

### Travel and access issues

- 1.27 Widespread concerns remain about the plans for a new urgent and planned care hospital for the south of the HDdUHB area, primarily in relation to geography and access, especially for those living in west Pembrokeshire, east Carmarthenshire and Ceredigion. Specific worries related to accessibility to the proposed sites due to the area's poor road infrastructure, poor public transport links, and traffic congestion, especially in the summer months. Related to this, there were real concerns over whether Welsh Government would invest in road network improvements given its moratorium on road building.
- 1.28 People also worried about ambulance response times, and that ambulances could be called out more often because of people's inability to transport themselves to an A&E, placing extra burdens on an already stretched service.
- 1.29 The need to ensure adequate parking provision at a new hospital was raised across all consultation methods, especially in light of public transport difficulties meaning travel by car will be the only viable option for many.

## Recruitment and retention of staff

- 1.30 Regardless of how people felt about the prospect of a new urgent and planned care hospital for the south of Hywel Dda, there was significant doubt around HDdUHB's ability to recruit enough staff (specialist staff in particular) to a relatively rural and geographically remote site. Concerns were also raised that existing staff might leave their current roles rather than relocate to the new hospital owing to longer commutes.
- 1.31 Recruiting and retaining ancillary staff like porters, caterers, and cleaners could also, it was felt, be problematic; although some public focus group participants described the need to fill these roles as a "*massive opportunity*" for local residents.
- 1.32 The proposed network of community hubs was generally viewed positively (as discussed further below), but there was some scepticism that they could be staffed in addition to the new hospital. There was also considerable concern about the potential impact of the new hospital on existing facilities; for example, in some of the community events there was worry that staff and clinicians could be drawn from existing and proposed community hospitals in the Hywel Dda area, thereby depleting their capacity and services.
- 1.33 Some felt that a modern, state-of-the-art, specialist teaching hospital would attract more specialists and staff, particularly if infrastructure improvements (housing and schools in particular) and more local amenities were to be delivered alongside.

## Futureproofing and site design

- 1.34 People questioned the futureproofing potential of all three sites, seeking reassurance that the hospital would not, in future, have the same problems as existing facilities: too few parking spaces; inadequate bed capacity; and a lack of space for new technology.
- 1.35 In terms of factors to consider in site design, car parking, green space, the environment, and the Health Board's carbon footprint were highlighted, and some suggestions were made around the facilities and amenities that should be sited alongside it. In the public drop-in events, these included staff housing, visitor accommodation (i.e., a reasonably priced hotel), amenities like shops, cafes or a hairdresser, and a helipad.

## Infrastructure issues

- 1.36 The ability of Whitland or St Clears to sustain the infrastructure requirements needed for a new hospital was questioned. The provision of affordable housing (or key worker housing) was cited as the biggest need, as well as larger schools, improved public transport, and better roads. As previously noted, some consultees worried that this would damage the character of whichever of the towns is chosen.

## The future of Bronglais Hospital

- 1.37 There was some concern that the development of a new urgent and planned care for the south of Hywel Dda would have a detrimental effect on Bronglais Hospital through a loss of specialist staff and services. Consultees across several consultation methods sought reassurance that this would not be the case, and that the promised improvements there would be realised.

## Timetable and costs

- 1.38 Participants in most of the resident focus groups and some other events expected significant cost inflation and timetable slippage as time passes. In the context of timetable, the safety and sustainability of services in the interim period was a concern for focus group participants, with several people questioning whether plans

would be in place to ensure residents are able to access good quality healthcare while the new hospital is being built.

### Some positivity

- 1.39 There was some positivity about the prospect of a new urgent and planned care hospital across all consultation methods. Those in favour of it argued that it would:
- » Be beneficial for the area, both economically and in terms of improving health and wellbeing outcomes;
  - » Help overcome HDdUHB's staffing challenges (a new hospital with specialisms and up-to-date technology would, it was felt, be attractive to prospective staff, particularly the younger generations);
  - » Provide modern, fit-for-purpose environments for both patients and staff (the prospect of biophilic design at the new hospital was particularly welcomed);
  - » Enable the repatriation of some services to the area; and
  - » Be a catalyst for infrastructure improvements in the area, especially in terms of roads, public transport, and schools.
- 1.40 The proposed network of community hospital and hubs was also welcomed. Indeed, there was some suggestion in the focus groups that this aspect of the transformation programme should be better promoted to mitigate residents' travel and access concerns (at least to some extent).

### Alternative suggestions

- 1.41 Many consultees across all consultation methods remain opposed to the principle of a new hospital for the south of the Hywel Dda area, instead supporting the refurbishment of the existing Glangwili and Withybush sites. There was, though, some recognition that providing a modern, fit-for-purpose hospital of sufficient size would not be possible on either of those two sites.
- 1.42 Pembrokeshire residents felt particularly strongly that none of the proposed sites would be easily accessible. There was also strong concern from some in east Carmarthenshire and Ceredigion. In light of this many consultees objected to all three sites, suggesting others either further west or more towards Carmarthen.

### Views on consultation process

- 1.43 Several drop-in attendees and written submissions criticised the consultation process, particularly with respect to decisions having already been made and the public not feeling listened to (a feeling that has evidently arisen following previous consultations), and a lack of promotion and thus awareness of the consultation and site options.
- 1.44 Comments were also made on the 'tick-box' nature of the consultation process, and the lack of advertising and promotion of the HDdUHB public drop-in sessions. There was, though, praise for the openness of the staff at the drop-in events and their willingness to engage with attendees.
- 1.45 Specifically, there was scepticism about the accuracy of the 'additional' travel time estimates by ambulance and car, with many consultees highlighting the area's road infrastructure issues and traffic congestion, especially in the summer.

## Equalities impacts

- 1.46 Most concerns around equalities impacts did not centre on any of the particular site options, but around travel and access more generally, focusing on the ease with which patients and visitors would be able to travel to the new hospital.
- 1.47 Several groups were highlighted as being particularly vulnerable to these impacts, including:
- » Vulnerable and older people;
  - » People with disabilities;
  - » People on lower incomes and/or without access to private transport;
  - » Expectant parents (especially mothers with conditions such as diabetes, who will likely require monitoring and have to give birth at the new hospital) and parents of babies requiring neonatal care; and
  - » People with additional/complex needs (like neurodivergence and learning disabilities).
- 1.48 Indeed, the specific challenges faced by the latter were highlighted: they can struggle to adapt to change and may thus disengage with services unless their needs are taken into consideration in the design process. It was said that clear, easy to read information, apps, and signs would be needed to aid access to and around the building for everyone, but particularly for people with learning disabilities and/or neurodiversity.
- 1.49 There were also concerns about the impact of the proposed changes for people in different geographies. It was acknowledged that the speed of care, and outcomes, would be different depending on where people live, and there were particular access concerns for those living in west Pembrokeshire, east Carmarthenshire and some parts of Ceredigion. Residents in rural isolation were said to be especially disadvantaged, especially those who are reliant on public transport, or with no support network.
- 1.50 Other groups mentioned were staff members having to commute further; prospective homeowners wishing to live close to the chosen site; and those living in areas with poor internet connections who would be unable to access telemedicine and other digital healthcare opportunities.

## 2. Consultation overview

### Introduction

2.1 Hywel Dda University Health Board (henceforth HDdUHB or the Health Board) has a shared vision with its communities for all its residents to live healthy, joyful lives. It recognises that its health services, as they are currently organised, will not effectively deliver that vision due to the following challenges:

- » Health of communities: the area's population is growing, and people need more support to stay well and independent, especially in older age. Demand on health and care services is growing.
- » Fragile services: the way care is provided has changed in 50 years and HDdUHB is duplicating care across four main hospitals, with differences in how it delivers services, safety, and quality. This means its services are fragile and it is difficult to develop some specialist services, meaning people travel further for them. The Health Board wants the opportunity to develop more of these locally.
- » Workforce: HDdUHB has fewer staff than needed and its doctors cover more shifts (rotas) than at some other NHS organisations, causing difficulties in keeping and recruiting staff. This means the Health Board relies too much on expensive agency staff and due to them being unfamiliar with local guidance, procedures, and other team members, risks poorer quality of care, and fragile services that may collapse.
- » Digital: HDdUHB does not currently fully use digital opportunities to best meet the needs of its population, especially for those who must travel to access services.
- » Buildings and facilities: hospital buildings, including most of Glangwili and some of Wthybush hospitals, are old and need a lot of maintenance to keep them working and safe. Their condition does not support delivery of modern healthcare and can mean a poorer patient and staff experience.
- » Environment: older buildings and other issues such as high levels of backlog maintenance, poor insulation and heating systems and using oil as a principal fuel source, mean that the Health Board has some of the least energy efficient sites from across Wales.

### The journey so far

2.2 HDdUHB has undertaken regular engagement about the future of health and care services since 2017; and in 2018 undertook its 'Our Big NHS Change' consultation. Following this, the 'A Healthier Mid and West Wales' health and care strategy was developed, in which the following vision for service provision was outlined:

- » A network of community health and care facilities supported by more community-based care. These will be places where you can receive tests, care and treatment, and appointments. Some will have overnight beds (such as in Amman Valley, Cylch Caron [Tregaron], Llandovery, and South Pembrokeshire) and some will not (such as Aberaeron and Cardigan [already



delivered], Carmarthen, Cross Hands, Fishguard, Haverfordwest, Lampeter, Llanelli, Llandysul, Milford Haven, Narberth, Neyland, Pentre Awel and Tenby).

- » Three main hospitals: a major new urgent and planned care hospital centrally located somewhere between Narberth and St Clears; Bronglais Hospital in Aberystwyth; and Prince Philip Hospital in Llanelli.
- » Two repurposed hospitals – Glangwili and Withybush – which will offer a range of community services including 24/7 GP-led urgent care centres; facilities for day case procedures; and therapy and nurse-led beds for less critical needs and rehabilitation. Diagnostic support (x-ray, ultrasound etc.) will continue, as well as outpatient and other clinics.

- 2.3 In February 2022, HDdUHB sent a Programme Business Case (PBC)<sup>2</sup> to Welsh Government seeking the greatest investment into health and well-being that west Wales will have ever seen, in the region of £1.3billion. If successful in this first stage, there are then three further stages, which could take several years, to secure the ultimate investment needed to deliver the facilities above.

## Exploring possible new hospital sites

- 2.4 The overall geographical zone for the new hospital - between Narberth and St Clears – has been chosen because it is the area that would mean most of the Hywel Dda population is within an hour of an emergency department (either this hospital, Bronglais Hospital, or Morriston Hospital, in Swansea).
- 2.5 The Health Board has done a lot of work to narrow down options for specific locations, firstly by looking for sites and asking for site nominations within the zone during an engagement exercise in summer 2021, called ‘Building a Healthier Future After COVID-19’. 11 potential sites were identified at this stage.
- 2.6 Representatives of key stakeholders including the public, staff, and experts helped undertake a land appraisal process and evaluate each potential site. This resulted in five shortlisted sites, which were at the time called site C Whitland, site J St Clears, site 12 Whitland, site 17 St Clears, and site 7 Narberth<sup>3</sup>. Following this, four ‘land appraisal groups’ looked at the five sites from the viewpoint of clinical considerations, financial and economic considerations, workforce considerations, and technical considerations, including what was important to the public.
- 2.7 At a Public Board Meeting on 4 August 2022, Health Board members heard all the outputs from the land appraisal groups. The Board said the two sites in Whitland (sites 12 and C) and one of the sites in St Clears (site 17) should remain under consideration and unanimously agreed to consult with the public on these sites. The sites eliminated and the reasons why were:
- » St. Clears (site J): this site had the highest risk score based on its characteristics, such as difficulties with emergency access to the site and being more remote from a town centre. It also scored lower than the other sites in the technical appraisal process with the public.
  - » Narberth (site 7): the clinical appraisal groups had concerns about this site, due to it being further west. They were concerned that this site may lead to a reduction in the number of people choosing to have their babies in Hywel Dda, as opposed to further east, which could also affect neonatal and paediatric care. This could pose a risk to the critical amount of

<sup>2</sup> A PBC is a high-level document, which sets out to secure Welsh Government support for a programme of investment.

<sup>3</sup> Sites were identified through more than one mechanism: private land nominations were identified with a letter reference; and sites identified through the work of the HDdUHB technical team are identified with a number reference.

activity needed to keep services safe and sustainable and have a negative impact on bed numbers and keeping trainee status (the Health Board's ability to train doctors, nurses, and midwives).

## Consultation scope

- 2.8 This consultation sets out three potential sites for a new Urgent and Planned Care Hospital in the south of the HDDUHB area – two near Whitland and one near St Clears. This will be the main hospital site for both urgent and planned care in the region (Carmarthenshire, Ceredigion, and Pembrokeshire) and will provide specialist children, adult, and mental health services in a more centralised way. It will also function as the Health Board's Trauma Unit and main Emergency Department. The three sites are as follows.

### Whitland: Spring Gardens



Whitland: Spring Gardens (formerly site 12) is a short distance north-east of the centre of Whitland. It is between the A40 to the north and Whitland Rugby Pitch to the east, and Spring Garden Homes to the south.

### Whitland: Tŷ Newydd



Whitland: Tŷ Newydd (formerly site C) is part of Tŷ Newydd Farm. The site is to the east of the old Whitland creamery site. The town centre and the A40 road are less than one mile to the north of the site.

### St Clears



St Clears (formerly site 17) is land at old Bryncaerau fields, next to the junction of the A40 and A477 in St Clears. The A4066 Tenby Road is to the south, the village of Pwll Trap to the north, and the A40 to the west.

2.9 The three sites are all within the selected geographical zone and are similar in many ways, as below.

- » They are all big enough for the new hospital and are all on agricultural land.
- » They are all considered greenfield, which means they have not been developed and evaluation has found they are all suitable for development.
- » Detailed town planning processes will have to be followed for any site chosen, but feedback so far has not identified any significant planning issues.
- » They are all close to small towns with similar local amenities such as shops, schools, housing etc.
- » The local towns and areas would see economic benefit by having a nearby hospital, but it has not been possible to decide if this would be different per site given how close they are.
- » They are all within the original zone for the new hospital, between and including Narberth and St Clears.
- » It is acknowledged that traffic flow to hospitals is heavier in the summer months. Due to how close the sites are to each other; this is a common consideration for all sites.
- » Whitland and St Clears (and therefore the three sites) are served by bus routes connecting to Haverfordwest and Carmarthen. All sites would require more bus services to connect communities. They would need more frequent services, running over longer periods of the day, to suit the needs of shift workers and visitors.
- » All sites have gas, electricity, and water available to the site, but there would be a need for significant upgrades.
- » Improvement to local roads and traffic management would also be needed on all sites, but they all have potential for more than one access point.
- » The cost of building the new hospital is estimated to be the same on all sites (estimate £736.9m) but there are some additional costs to securing or adapting each site.
- » For all sites the buildings could be designed to make the most of sunlight and the natural environment, not only in the outdoor spaces but within the buildings themselves (biophilic design).
- » There is an aspiration for all sites to be supported by 'place-making' which is a process of creating quality places that people want to live, work, play and learn in.
- » The sites do not lie within a Special Area of Conservation and do not require added work associated with prevention of phosphate pollution.
- » A historic and desktop-based review of all sites showed no significant sources of contamination.
- » Potential environment effects cannot be ruled out on any of the sites at this stage and so all of them would likely need a statutory Environmental Impact Assessment to support a planning application.

2.10 The table overleaf, which was included in the consultation document and questionnaire, shows the differences between the three sites.

Issue	Whitland: Spring Gardens (formerly site 12)	Whitland: Tŷ Newydd (formerly site C)	St Clears (formerly site 17)
<b>Clinical viewpoint</b> neonates, obstetrics, paediatrics	Some risk that national guidelines on minimum number of patients treated may not be met, which could affect quality and safety, and staff recruitment and retention		Least risk to guidelines on minimum numbers of patients treated
<b>A&amp;E/Emergency Dept. travel time</b> (average compared against now)	9 minutes longer (on average)  7% population would have faster 999 access to an Emergency Dept	9 minutes longer (on average)  7% population would have faster 999 access to an Emergency Dept	6 minutes longer (on average)  6% population would have faster 999 access to an Emergency Dept
<b>Car travel: instead of Glangwili</b> (for settlements with 1,000+ residents)	13 minutes longer (on average)	13 minutes longer (on average)	7 minutes longer (on average)
<b>Car travel: instead of Withybush</b> (for settlements with 1,000+ residents)	12 minutes longer (on average)	12 minutes longer (on average)	14 minutes longer (on average)
<b>Access by road</b>	Direct access from A40	Currently, no direct access, requires improvements to local roads or would need new highway link directly to the A40	Direct from A40 and A477
<b>Distance from train station</b>	750m	250m	1000m (once station reinstated)
<b>Land ownership</b>	Multiple private landowners	Public ownership	Single private landowner
<b>Flood risk</b>	Low	Yes, on small part – would not build on affected areas	No
<b>Scope for future expansion</b>	Limited scope	Some scope	Limited scope
<b>Scope for renewable energy (not costed)</b>	Potential for offsite	Potential onsite	Potential for offsite
<b>Potential additional costs</b> (subject to inflation)	£19.9m	£28.2m	£20.7m

2.11 The Health Board does not have a preferred site and has not bought any site or land for this development. Purchasing a site and delivering the new hospital is subject to Welsh Government funding, which is not yet confirmed and if successful, will take several years to achieve. In this consultation people were asked for their feedback on:

» Which of three potential sites is the best location for a new hospital and why.

- » Concerns they may have about any of the three potential sites.
- » Anything else you think it should consider.

2.12 Consultees were informed that their views, as well as other evidence and considerations, could influence future decisions about the location of the new hospital, and that a dedicated Health Board meeting will take place later in 2023 to consider this feedback (as well as other information and evidence) to discount sites or choose a preferred site. In that meeting, Board members will consider all they have heard leading up to, and during, this consultation, including the Equality and Health Impact Assessment and any new information that may come to light as a result of the consultation or ongoing technical and commercial work.

2.13 Consultees were also told that the following points are decided, meaning they are not open to influence in the consultation:

- » The three sites being consulted on.
- » The vision for services and structure of the hospital network (as described above in paragraph 2.2).

## The consultation process

2.14 The 12-week public consultation period began on 23 February 2023 and ended on 19 May 2023, during which time members of the public, HDdUHB staff members, organisations, and other stakeholders were invited to give feedback on the three site options and anything else they felt the Health Board should consider in relation to any of the sites. Opinion Research Services (ORS) was appointed to advise on and independently manage some aspects of the consultation programme, as outlined below.

2.15 Throughout the consultation, stakeholders were provided with paper documentation and/or signposted by direct email or communication activities, such as press releases and social media advertising, to the dedicated consultation website. A range of information and resources was available, including the full consultation document, a separate summary document, an easy read version, a youth friendly document, a BSL video, and audio version. There were also technical documents available including the programme business case (PBC), reports from the site appraisal process, a transport analysis, and the equality impact assessment (EIA).

2.16 Paper copies of documentation and the consultation questionnaire were also available, including accessible versions (easy read and youth friendly) and other languages versions (Arabic, Polish, Russian and Ukrainian). Documents were distributed at face-to-face meetings, engagement events, and visits to a range of settings, as well as being available on request via post, telephone or email. In all, over 1,742 stakeholders received 2,045 summary documents and 1,766 paper copies of consultation documents, each with a paper copy of the consultation questionnaire (3,811 copies). In addition, 3,000 stakeholders received direct emails from the Health Board promoting the consultation. The consultation was well promoted in the local media and via social media channels.

## The nature of public consultation

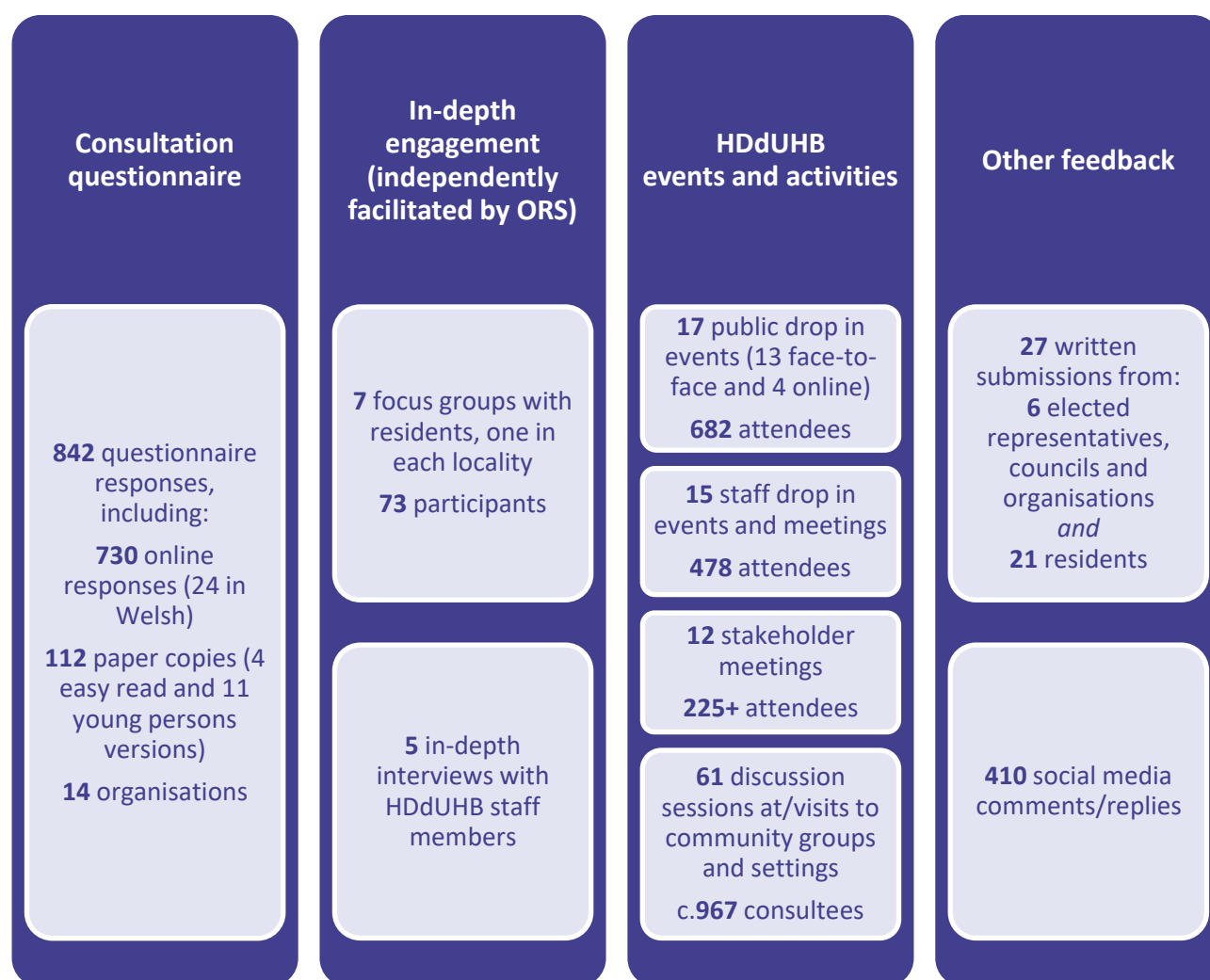
2.17 Public consultation promotes accountability and assists decision making; public bodies give an account of their plans or proposals and listen to feedback. Consultation has therefore been described as a dialogue, based on a genuine and purposeful exchange of views.

2.18 It should be noted, however, that consultations are not referenda or 'votes' in which the loudest voices or the greatest numbers automatically determine the outcome. The feedback received often reflects widely

varied and sometimes polarised views, and it is important to report these concerns and contrary views robustly, in order for decision-makers to be able to conscientiously take into account the issues raised.

## Consultation methodology and response

- 2.19 Each chapter in this report provides detailed information about the consultation activities from which feedback has been reported; the following section provides a brief overview.
- 2.20 To provide relevant information that might inform respondents' views, information about the site options was included in a consultation document (including in summary and easy read form) and in the detailed documents outlined above. After being encouraged to familiarise themselves with the background information, residents, staff, and other stakeholders were invited to provide feedback through a wide range of methods, including all of the following:
- » A consultation questionnaire which was available online (hosted by ORS) and via paper copies that were circulated widely and available on request.
  - » Independently facilitated in-depth engagement designed and conducted by ORS (described below).
  - » Engagement activities undertaken by HDdUHB, including:
    - Online and face-to-face public drop-in events
    - Staff drop-in events and meetings
    - Meetings with statutory and non-statutory stakeholders/partners
    - Attendance at/visits to existing community groups and settings.
  - » Written and email submissions.
  - » Social media.
- 2.21 The consultation response from the different consultation strands is summarised overleaf.



## ‘Open’ consultation questionnaire

- 2.22 An open consultation questionnaire was available for anyone to complete either via the dedicated consultation website or by completing a paper version. The questionnaire was designed to be completed based on the information presented in the consultation document, with questions about the extent to which each site is a good or poor location for a new hospital, and potential equalities and health inequalities issues. Respondents were also given the opportunity to make further comments about the sites, transport and access, environmental impacts and opportunities, local facilities to support patients, visitors, staff and the wider community, or the future design of the hospital and its facilities.
- 2.23 Open questionnaires are important, being inclusive and giving opportunity to express and explain views, including disagreement with proposals. They are not random sample surveys of a given population, however, and cannot necessarily be expected to be representative of the general balance of opinion. Furthermore, respondents from groups or geographic areas which feel most affected by change are more likely to respond. For example, the number of respondents living near to Glangwili and Withybush Hospitals were proportionally greater than those from other areas.

## HDdUHB-led consultation activity

- 2.24 During the consultation period, HDdUHB undertook many engagement activities for members of the public, staff, and stakeholders, as outlined below. The profiles of those who attended these events and meetings and completed equality monitoring forms are presented in Appendix III.
- 2.25 ORS attended 12 of the public drop-in events as independent observers but were not present at any of the other sessions/meetings outlined below. Where discussion were had, notes were provided by HDdUHB for reporting purposes using a structured feedback template.

### Public drop-in events

- 2.26 HDdUHB hosted 17 public drop-in events (13 face-to-face and four online) throughout its area during March, April, and May 2023. These were attended by 682 people in total.
- 2.27 Several members of HDdUHB staff were available at each face-to-face drop-in session to answer people's questions, capture feedback, and distribute consultation materials. Information about the three sites was also displayed on information boards and via a video-based animation. At the online events, attendees were given a presentation in advance of being asked to give their views on the consultation issues and, again, HDdUHB staff were available throughout the sessions to answer questions and offer clarification.

### Staff drop-in events

- 2.28 HDdUHB hosted 11 staff drop-in events (one at each of its hospitals and Integrated Care Centres) and eight meetings for specific staff groups between March and May 2023. These groups comprised the HDdUHB Finance Team, Mental Health Team, and Capital Sub-Committee; the Senior Pharmacy Leadership Team; the Partnership Forum; the Local Medical Committee; the Therapies and Health Sciences Forum; and the Withybush Medical Staff Committee.
- 2.29 The drop-in events were all held in-person, while the staff meetings were all online except for the Senior Pharmacy Leadership Team meeting. The former were attended by 297 staff members, and the latter by 181 staff members.

### Stakeholder engagement

- 2.30 HDdUHB hosted or attended 12 meetings with stakeholders between February and May 2023. These included online Q&A sessions with County, Town and Community Councils across Carmarthenshire, Ceredigion, and Pembrokeshire, and Llanelli Town Council; meetings with the Carmarthenshire, Ceredigion, and Pembrokeshire Public Service Boards, and Mid and West Wales Fire and Rescue Authority; a meeting with the Stakeholder Reference Group (comprising local authorities, local councillors, the third sector, and Llais); and a town hall style public meeting at Ysgol Tregroes School in Ceredigion.

### Other community events/meetings

- 2.31 HDdUHB either attended or visited 61 community events, meetings or settings to discuss the consultation issues with attendees and/or distribute consultation documents and questionnaires to be completed by those engaged at a later date. Approximately 967 people were engaged in this way, including:
- » Black and Minority Ethnic residents.
  - » Carers.



- » Homeless and vulnerably housed people.
- » Gypsies, Roma, and Travellers.
- » LGBTQ+ residents.
- » Migrant workers.
- » Neurodiverse residents.
- » Older and younger residents.
- » Physically and learning-disabled residents.
- » Refugees (Afghan, Polish, Syrian and Ukrainian).
- » Veterans.
- » Vulnerable and socio-economically disadvantaged resident.

## ORS-led activity

### Focus groups with residents

- 2.32 To explore the consultation issues in more depth and gather informed feedback, ORS conducted seven two-hour focus groups, one in each of HDdUHB's seven locality areas. Overall, 73 people took part.
- 2.33 These sessions are best understood as 'deliberative'<sup>4</sup> meetings in which the site options for a new urgent and planned care hospital in the south of the Hywel Dda area were tested against residents' opinions. This provided an opportunity to explore the extent to which each of the sites are acceptable or otherwise, and to understand in more detail the issues and arguments relating to them and other aspects of the Health Board's transformation programme.
- 2.34 To ensure a properly deliberative approach, ORS used HDdUHB's consultation material to develop a suitable agenda and informative stimulus material for the meeting, which covered the following themes: a recap of the need for change; the options development process; the three site options (including the similarities and differences between the sites); and travel and transport issues. The topic guide has been included as Appendix IV.
- 2.35 Participants were independently recruited to the sessions via ORS and its recruitment partner Acumen Field, using quota-controlled recruitment to ensure they were broadly representative of the wider community. In recruitment, care was taken to ensure that no potential participants were disqualified or disadvantaged by disabilities or cost of travel. As standard good practice, an incentive payment of £50 was paid to participants as a token of thanks and to cover childcare or travel costs. All focus group venues were accessible, and any special accessibility needs were considered during the recruitment and facilitation stages.

### Interviews with staff

- 2.36 To complement the staff drop-in events outlined above, and explore the consultation issues in more depth, the original intention was to hold eight staff focus groups: two in each of the main hospitals (Bronglais, Glangwili, Prince Philip, and Withybush). However, despite HDdUHB's extensive internal promotion of the sessions, take up was low and so the decision was taken to cancel the focus group sessions and undertake

---

<sup>4</sup> Deliberative research gathers people's views after they have been presented with the opportunity to 'deliberate' the issues under consideration. Moderators present a range of information and encourage differing points of view to be debated, before considered final decisions are sought.

in-depth interviews with those who had expressed an interest in attending, either by telephone or videoconference.

- 2.37 ORS conducted five interviews with staff, two from Glangwili Hospital, two from Withybush Hospital, and one from the Pembrokeshire Community Team. Three participants were from staff bands 1 – 5, and two were from bands 6+.
- 2.38 The interviews, which were undertaken either on Microsoft Teams or by telephone, provided an opportunity to explore the extent to which each of the sites are acceptable or otherwise, and to understand in more detail the issues and arguments relating to them and other aspects of the Health Board's transformation programme.

## Written submissions

- 2.39 During the formal consultation process, 27 written submissions were received, all of which have been read and summarised by ORS. These included six submissions from representatives or members of organisations, and 21 from individual respondents. No petitions were submitted as part of this consultation<sup>5</sup>.

## Social media feedback

- 2.40 HDdUHB collated all the comments made on its official Facebook and Twitter pages during the consultation period. In total, the 157 Facebook posts and 50 Tweets received 410 comments or replies; the vast majority were responses to Facebook posts (400).
- 2.41 It is important to note that social media discussion is nowadays an important aspect of any consultation, particularly in terms of answering enquiries and directing people to resources to read and by which to become involved. While social media comments are not formal submissions, and it is not clear whether comments are a person's final views (that they would want included in the analysis/decision making) or interim thoughts and discussions that inevitably develop as people debate the issues in an online forum, they do offer a good benchmark for concerns, sentiment, issues and comments.

## The consultation report

- 2.42 In contrast to the more thematic approach in the executive summary, the full report considers the feedback from each element of the consultation in turn because it is important that the overall report provides a full evidence-base for those considering the consultation and its findings.
- 2.43 All types of consultation responses are important, and this report presents an independent analysis so that all of them may be taken into account. The report also identifies where strength of feeling may be particularly intense, either in relation to specific themes or possible outcomes, or coming from specific groups of consultees. Those with strong concerns or objections are more likely to provide these views robustly and in detail. Furthermore, ORS has an obligation to comprehensively report these concerns and contrary views, in order for decision-makers to be able to conscientiously consider the issues raised (Gunning Principle 4). It should be noted, however, that this can mean that the feedback can appear more 'negative' than was actually the case.

---

<sup>5</sup> We are aware of a petition undertaken by the Carmarthenshire Residents Action Group to keep general hospital services at Glangwili, but this was not submitted to HDdUHB or ORS.

- <sup>2.44</sup> Finally, it is not ORS' role to 'make a case' for or against the proposals, nor to make any recommendations as to how decision makers should use the reported results. It is for the appropriate bodies to take decisions based on all of the evidence available, of which consultation feedback is one part. To this end, ORS trusts that both the executive summary and full report will be helpful to all concerned.

## 3. Consultation questionnaire

### Introduction

- 3.1 Throughout the 12-week public consultation (which began on 23 February 2023 and ended on 19 May 2023), stakeholders were signposted to the Hywel Dda University Health Board website or provided with paper documentation. A range of information and resources were available, including the full consultation document, a separate summary document, an easy read version, a youth friendly document, a BSL video, and an audio version. The summary document was available in other languages (Arabic, Polish, Russian and Ukrainian). The questionnaire was available bilingually in English and Welsh, and there were easy read and youth friendly versions available, as well as copies in Arabic, Polish, Russian and Ukrainian.
- 3.2 A structured consultation questionnaire was designed to allow stakeholders to provide feedback in a consistent format. Appropriate summary information was included for each question, with additional signposting to more detailed information; feedback was invited around views on each site, any concerns and potential equalities impacts. Finally, a profiling section gathered response type and demographics.

### Summary of main findings

#### Location for the new hospital

- 3.3 Around a quarter of those responding as individuals thought that both Whitland: Spring Gardens (formerly site 12) and Whitland: Tŷ Newydd (formerly site C) were good locations for the new hospital (either fairly or very good). A greater proportion of individuals thought that St Clears (formerly site 17) was a good location for the new hospital with two-fifths saying this location was good.
- » St Clears (good location) – 40%
  - » Whitland: Spring Gardens (good location) – 27%
  - » Whitland: Tŷ Newydd (good location) – 24%
- 3.4 Nearly six-in-ten of those responding as individuals thought that both Whitland: Spring Gardens and Whitland: Tŷ Newydd were poor locations for the new hospital (either fairly or very poor). In contrast, just over two-fifths thought that St Clears was a poor location.
- » Whitland: Tŷ Newydd (poor location) – 59%
  - » Whitland: Spring Gardens (poor location) – 57%
  - » St Clears (poor location) – 43%
- 3.5 217 respondents felt that all sites are either a fairly or very poor choice for the new hospital, whereas 52 respondents felt that all sites are either a fairly or very good choice for the new hospital.

## Views on location by area

- 3.6 There is a clear indication that views among questionnaire respondents vary considerably by geography. Those questionnaire respondents living nearest to Withybush Hospital were more positive about both Whitland: Spring Gardens and Whitland: Tŷ Newydd as a location for the new hospital compared to those living closer to other hospitals, with 42% thinking that Whitland: Spring Gardens was a good location and 38% thinking that Whitland: Tŷ Newydd was a good location.
- 3.7 This compares to just over a quarter (26%) of those living closest to Glangwili Hospital thinking Whitland: Spring Gardens was a good location, just 13% of those living nearest to Bronglais Hospital and just 7% of those living nearest to Prince Philip Hospital.
- 3.8 Just over a fifth (21%) of those living closest to Glangwili Hospital thought Whitland: Tŷ Newydd was a good location, 13% of those living nearest to Bronglais Hospital and just 8% of those living nearest to Prince Philip Hospital.
- 3.9 Questionnaire respondents living nearest to Glangwili Hospital and Prince Philip Hospital were most positive about St Clears as a location for the new hospital with almost half (49%) thinking this was a good location in both areas. A slightly smaller proportion (45%) of those living closest to Bronglais Hospital and just over three-in-ten (31%) of those living nearest to Withybush Hospital thought St Clears was a good location.

## Methodology and questionnaire response

- 3.10 The questionnaire was available online (hosted by ORS), and paper questionnaires were distributed at various locations, and available on request (including an easy read version, young person's version and in different languages). All questionnaire responses submitted by the closing date, and subsequently received by ORS or the Hywel Dda University Health Board, in which at least one of the consultation questions was answered, were included in the analysis, regardless of whether or not any profile questions were answered. A total of 842 questionnaires were completed, which included 730 online responses (including 24 in Welsh) and 112 paper copies (including 4 easy-read and 11 young person's versions).
- 3.11 ORS routinely monitors cookies and IP addresses to ensure that multiple completions by a small number of individuals are not submitted in an attempt to deliberately affect the outcomes. After detailed analysis of the raw dataset, ORS identified three instances of duplicated entries; one copy of each was included in the final dataset.
- 3.12 It is important to reiterate that while open questionnaires are inclusive and give people an opportunity to express and explain any views, the results are not generally expected to be representative of the general balance of opinion in the wider population. The results in this chapter should be interpreted in this context.

## Response type

- 3.13 The profile section sought to identify the basis on which respondents completed the questionnaire. Those respondents who said that they were completing the questionnaire on behalf of organisations were asked to provide further details about the group or in which capacity they were responding. Fourteen responses from respondents identifying as representatives of named organisations were submitted (Table 1).

Table 1: Named organisations responding via the consultation questionnaire

Lynnefield Care home, Haverfordwest
Whitland Rugby Football Club Ltd. Views collated at committee meeting
Llanstadwell Community Council. Proposals have been discussed at council meetings
St Ishmael Community Council
Railfuture Cymru-Wales: Welsh branch of Railfuture. These views were collected from committee members in the Southwest Wales and West Wales area
Llanelli Rural Council
Llanerchindda Farm Guesthouse
Pembrokeshire Friends of the Earth. Discussed this consultation at one of their regular meetings.
Preseli Rural Transport Association - AKA Green Dragon Bus. Community transport provider in Pembrokeshire and South Ceredigion
Llanllwni Community Council
HDdUHB Mental Health and Learning Disabilities Directorate
CRAiG Sir Gar - Carmarthenshire Residents Action Group and numerous members of the public who have signed their petition to keep general hospital services at Glangwili
Cyngor Cymuned Lledrod – The matter was discussed in a monthly meeting
Cyngor Cymuned Llangeler – The matter was discussed in a monthly meeting

3.14 Of the remaining respondents to the questionnaire, 742 identified themselves as completing as individuals by answering at least one of the demographic questions. A further 86 respondents did not identify how they were completing.

Organisational response	14 responses
Personal response	742 responses
Not answered	86 responses

3.15 It is likely that the 86 respondents not identifying how they completed the questionnaire were providing a personal response and, therefore, have been included with the personal responses in the following results.

Demographic profile of respondents

3.16 All individuals providing a personal response were asked to provide some basic demographic information.

3.17 Table 2 summarises the key demographic information for those who provided this information, e.g., age, gender, ethnicity, disability. Census 2021 data of Carmarthenshire, Ceredigion and Pembrokeshire counties is used as a comparator where available, to give some general indication of how well the response profile from the questionnaire results matches the wider population that might be affected by the proposed changes.

3.18 An asterisk has been used to denote percentages greater than zero, but less than half of one percent. There was a very small proportion (2%) of questionnaire responses received from people who identified themselves as living outside Carmarthenshire, Ceredigion and Pembrokeshire counties; nonetheless, those responses have also been included in the demographic profile tables below for completeness.

**Table 2: Key demographic response profile to the consultation questionnaire for those who were asked to provide this information:– compared with the population aged 18+ of Carmarthenshire, Ceredigion and Pembrokeshire counties**

Characteristic		Questionnaire Responses		Population aged 18+
		Number of Respondents	%	
BY AGE	Under 25	22	3%	9%
	25 to 34	62	9%	13%
	35 to 44	99	14%	13%
	45 to 54	146	21%	16%
	55 to 64	158	23%	18%
	65 to 74	136	20%	17%
	75 or over	61	9%	14%
	<b>Total valid responses</b>	<b>684</b>	<b>100%</b>	<b>100%</b>
	<i>Not known</i>	<i>144</i>	-	-
BY GENDER	Male	201	29%	48%
	Female	482	70%	52%
	Non-binary	2	*%	-
	<b>Total valid responses</b>	<b>685</b>	<b>100%</b>	<b>100%</b>
	<i>Not known</i>	<i>143</i>	-	-
BY ETHNIC GROUP	White British	608	95%	94%
	White other (inc. travellers)	30	5%	3%
	Other ethnic group	4	1%	2%
	<b>Total valid responses</b>	<b>642</b>	<b>100%</b>	<b>100%</b>
	<i>Not known</i>	<i>186</i>	-	-
BY WHETHER RESPONDENT PROVIDES HELP / SUPPORT TO OTHERS <sup>6</sup>	Yes	144	22%	13%
	No	499	78%	87%
	<b>Total valid responses</b>	<b>643</b>	<b>100%</b>	<b>100%</b>
	<i>Not known</i>	<i>185</i>	-	-

<sup>6</sup> Defined as providing unpaid care by looking after someone (a family member, friend or neighbour) who is older, disabled or seriously ill

Characteristic		Questionnaire Responses		Population aged 18+
		Number of Respondents	%	
BY WHETHER GENDER IS THE SAME AS ASSIGNED AT BIRTH	Yes	665	100%	100%
	No	3	*%	*%
	<b>Total valid responses</b>	<b>668</b>	<b>100%</b>	<b>100%</b>
	<i>Not known</i>	<i>160</i>	-	-
BY DISABILITY	Has a disability	121	19%	25%
	No disability	527	81%	75%
	<b>Total valid responses</b>	<b>648</b>	<b>100%</b>	<b>100%</b>
	<i>Not known</i>	<i>180</i>	-	-

- 3.19 Respondents who stated that they consider themselves to have a disability were asked to state the type of disability or disabilities. Respondents were able to choose more than one option and Table 3 indicates the numbers and proportions of each.

**Table 3: Respondents to the consultation questionnaire with disabilities, by type of disability, for those who were asked to provide this information. (Note that respondents could choose more than one option and, therefore, the percentages may sum to greater than 100%)**

Characteristic		Questionnaire Responses with Disabilities	
		Number of Responses	%
BY TYPE OF DISABILITY	Long-standing illness or health condition e.g., cancer, HIV, diabetes, chronic heart disease, epilepsy	59	52%
	A mental health difficulty	28	25%
	A physical impairment or mobility issues	57	50%
	A social/communication impairment e.g. a speech and language impairment or Asperger's syndrome/other autistic spectrum disorder	7	6%
	A specific learning difficulty e.g. dyslexia, dyspraxia or AD(H)D	9	8%
	Blind or have a visual impairment uncorrected by glasses	12	11%
	Deaf or have a hearing impairment	23	20%
	Other impairment, health condition or learning difference that is not listed above	16	14%
	<b>Total valid responses</b>	<b>114</b>	-
	<i>Not known</i>	<i>7</i>	-
	<i>Not asked</i>	<i>707</i>	-

- 3.20 Respondents who stated that they provided unpaid care were asked for whom they provide care. Respondents were able to choose more than one option and Table 4 indicates the numbers and proportions of each.



**Table 4: Respondents to the consultation questionnaire who provide unpaid care, by who they care for, for those who were asked to provide this information. (Note that respondents could choose more than one option and therefore the percentages may sum to greater than 100%)**

Characteristic		Questionnaire Responses who Provide Unpaid Care	
		Number of Responses	%
BY WHO CARE IS PROVIDED FOR	Primary Carer of a disabled child or children	17	13%
	Primary Carer or assistant for a disabled adult or adults (aged 18+)	31	23%
	Primary Carer or assistant for an older person/people (aged 65+)	74	54%
	Secondary Carer (another person carries out main caring role)	28	21%
	<b>Total valid responses</b>	<b>136</b>	-
	<i>Not known</i>	8	-
	<i>Not asked</i>	684	-

3.21 Table 5 summarises other demographic information including sexual orientation, marital status, religion, household income and main language used.

**Table 5: Other demographic response profile to the consultation questionnaire for those who were asked to provide this information.**

Characteristic		Questionnaire Responses	
		Number of Respondents	%
BY SEXUAL ORIENTATION	Asexual	23	4%
	Bisexual	11	2%
	Gay man	11	2%
	Gay woman or lesbian	4	1%
	Heterosexual or straight	543	91%
	Other	5	1%
	<b>Total valid responses</b>	<b>597</b>	<b>100%</b>
	<i>Not known</i>	231	-
BY MARITAL STATUS	Married or in a Civil Partnership	439	72%
	Not Married or in a Civil Partnership	167	28%
	<b>Total valid responses</b>	<b>606</b>	<b>100%</b>
	<i>Not known</i>	222	-
BY PREGNANT/GIVEN BIRTH WITHIN LAST YEAR	Yes	24	4%
	No	613	96%
	<b>Total valid responses</b>	<b>637</b>	<b>100%</b>
	<i>Not known</i>	191	-
BY RELIGION	Buddhist	4	1%

Characteristic		Questionnaire Responses	
		Number of Respondents	%
	Christian	373	61%
	Hindu	1	*%
	Jewish	1	*%
	Muslim	2	*%
	No religion	212	35%
	Any other religion	16	3%
	<b>Total valid responses</b>	<b>609</b>	<b>100%</b>
	<i>Not known</i>	<i>219</i>	<i>-</i>
BY HOUSEHOLD INCOME	Below £10,000	26	5%
	£10,001 - £20,000	76	16%
	£20,001 - £30,000	98	21%
	£30,001 - £40,000	91	19%
	Over £40,000	185	39%
	<b>Total valid responses</b>	<b>476</b>	<b>100%</b>
	<i>Not known</i>	<i>352</i>	<i>-</i>
BY MAIN LANGUAGE SPOKEN/USED AT HOME	English	546	84%
	Welsh	93	14%
	Other	14	2%
	<b>Total valid responses</b>	<b>653</b>	<b>100%</b>
	<i>Not known</i>	<i>175</i>	<i>-</i>

3.22 Table 6 summarises the number of responses received by relative levels of deprivation (based on postcodes, where this information was provided as part of the questionnaire response) for those living in the counties of Carmarthenshire, Ceredigion and Pembrokeshire only. The postcodes of around a quarter of respondents (197) are unknown or outside the area, but it is reasonable to assume that the distribution of those responses is similar to those where postcodes are provided.

**Table 6: Distribution of questionnaire responses received, by deprivation (calculated using Indices of Multiple Deprivation (IMD)) for those who provided postcodes and are living in the counties of Carmarthenshire, Ceredigion and Pembrokeshire only – compared with the population aged 18+ of Carmarthenshire, Ceredigion and Pembrokeshire counties**

Characteristic		Questionnaire Responses		Population aged 18+
		Number of Responses	%	
BY DEPRIVATION (IMD QUINTILE)	1 – most deprived	64	10%	18%
	2	123	19%	19%
	3	143	23%	20%
	4	178	28%	21%
	5 – least deprived	123	19%	21%
	<b>Total valid responses</b>	<b>631</b>	<b>100%</b>	<b>100%</b>

	Not known	197	-	-
--	-----------	-----	---	---

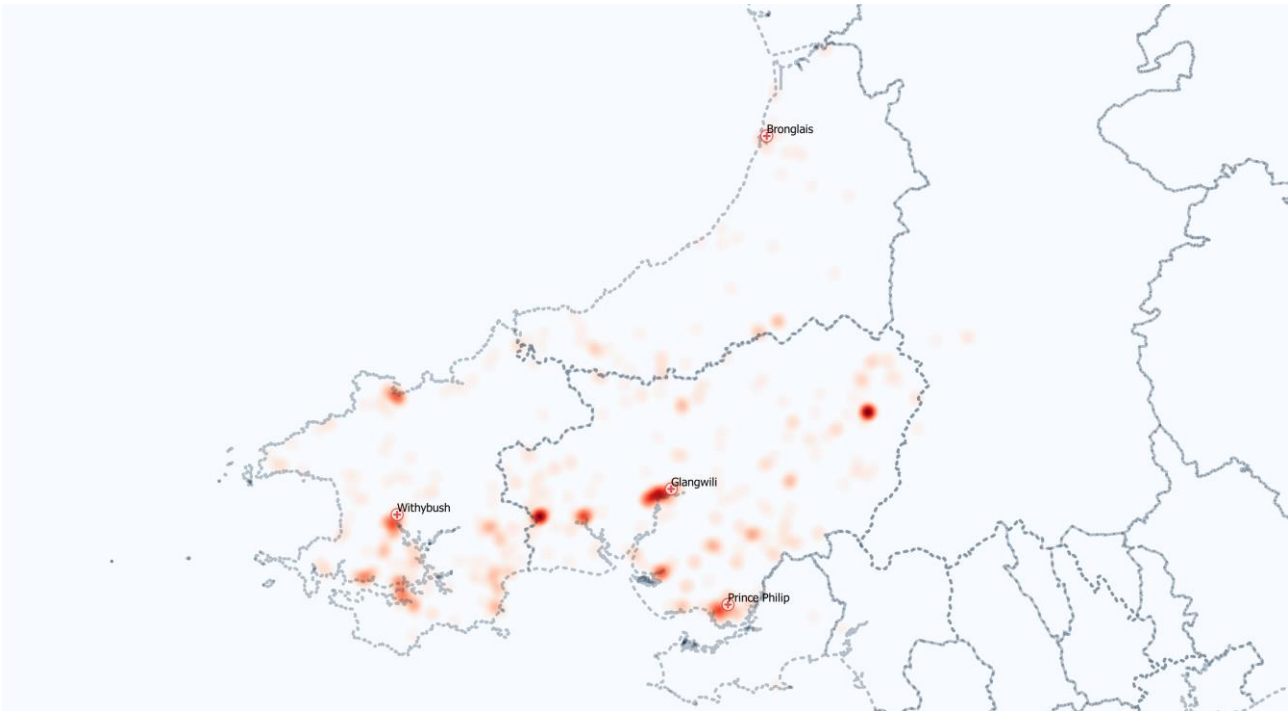
- 3.23 Table 7 summarises the number of responses received by county lived in, nearest affected hospital and nearest general hospital (based on the survey questions, 'Which county do you live in?' and postcodes, where this information was provided as part of the questionnaire response). The postcodes of around a quarter of respondents (188) are unknown, but it is reasonable to assume that the distribution of those responses is similar to those where postcodes are provided.

**Table 7: Distribution of questionnaire responses received, by county lived in, nearest affected hospital and nearest general hospital for those who provided postcodes – compared with the population aged 18+ of Carmarthenshire, Ceredigion and Pembrokeshire counties**

Characteristic		Questionnaire Responses		Population aged 18+
		Number of Responses	%	
BY COUNTY	Carmarthenshire	393	56%	49%
	Ceredigion	66	9%	19%
	Pembrokeshire	243	35%	32%
	<b>Total valid responses</b>	<b>702</b>	<b>100%</b>	<b>100%</b>
	<i>Other areas</i>	<i>12</i>	-	-
	<i>Not known</i>	<i>114</i>	-	-
BY NEAREST AFFECTED HOSPITAL	Glangwili	297	46%	39%
	Prince Philip	116	18%	30%
	Withybush	227	35%	31%
	<b>Total valid responses</b>	<b>640</b>	<b>100%</b>	<b>100%</b>
	<i>Not known</i>	<i>188</i>	-	-
BY NEAREST GENERAL HOSPITAL	Bronglais	36	6%	13%
	Glangwili	262	41%	25%
	Prince Philip	115	18%	30%
	Withybush	227	35%	31%
	<b>Total valid responses</b>	<b>640</b>	<b>100%</b>	<b>100%</b>
	<i>Not known</i>	<i>188</i>	-	-

- 3.24 As indicated in the table above and Figure 1 (below), when examining by nearest affected hospital the open questionnaire response was highest from areas nearest to Glangwili and Withybush hospitals (46% and 36% respectively Table 7) compared to just under a fifth (18%) from respondents living nearest to Prince Philip Hospital.

Figure 1: Map showing distribution of responses (for questionnaire responses where a postcode was provided) (darker red colours indicate a higher number of respondents)



## Interpretation of the data

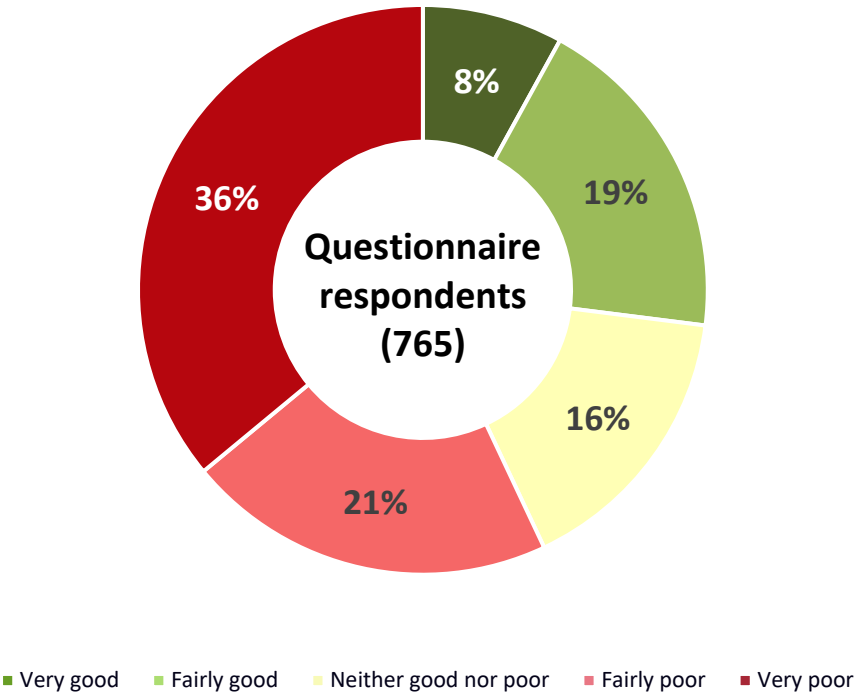
- 3.25 For simplicity and ease of access, the results of the consultation questionnaire are presented in a largely graphical format. Where possible, the colours used on the charts have been standardised with a 'traffic light' system in which:
- » Green shades represent positive responses;
  - » Yellow shades represent neutral responses;
  - » Red shades represent negative responses; and
  - » Bolder shades highlight responses at the 'extremes', for example, very good or very poor.
- 3.26 The numbers on pie charts are percentages indicating the proportions of respondents giving a particular view. It should be noted that, when reporting combined percentages of poor and very poor, or good and very good, responses in the text commentary, the figure may sum differently (+/- 1%) to the figures shown on stacked bar charts due to rounding of decimal places.
- 3.27 The number of valid responses recorded for each question (base size) are reported throughout. As not all respondents answered every question, the valid responses vary between questions. Every response to every question has been taken into consideration.
- 3.28 Where percentages do not sum to 100, this may be due to computer rounding, the exclusion of "don't know" categories, or multiple answers. Throughout the report an asterisk (\*) denotes any value greater than zero, but less than half of one per cent. In some cases, figures of 2% or below have been excluded from graphs for presentational reasons. Quotes are edited using ellipses and square brackets [...] to ensure anonymity.
- 3.29 Finally, feedback from organisations is reported separately at the end of the chapter.

## Questionnaire feedback

### Whitland: Spring Gardens (formerly site 12) as a location for the new Hospital

3.30 Over a quarter (27%) of those responding as individuals thought that Whitland: Spring Gardens was a good location for the new hospital (either fairly or very good). Around one-in-six (16%) thought Whitland: Spring Gardens was neither a good nor poor location. Nearly six-in-ten (57%) thought that Whitland: Spring Gardens was a poor location for the new hospital (either fairly or very poor) (Figure 2).

Figure 2: To what extent is Whitland: Spring Gardens (formerly site 12) a good or poor location for the new Hospital? (individual questionnaire respondents only)

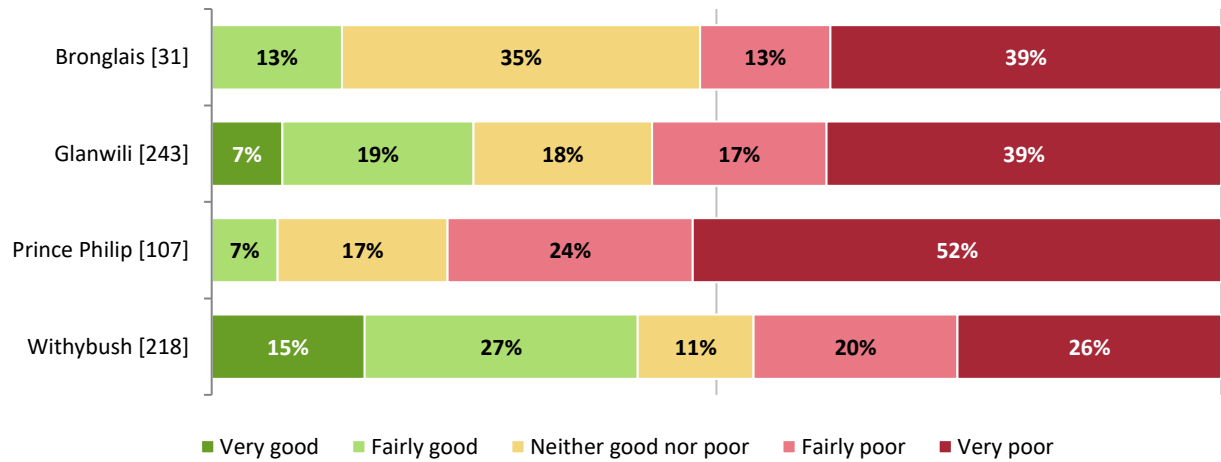


Base: Number of respondents shown in brackets (excludes ‘don’t know’ responses)

### Views on Whitland: Spring Gardens by area

- 3.31 Views among questionnaire respondents vary considerably by geography; those who provided postcodes and live closest to Withybush Hospital were more positive about Whitland: Spring Gardens with over two-fifths (42%) rating this location as good for the new hospital. This compares to just over a quarter (26%) of those living closest to Glangwili Hospital rating Whitland: Spring Gardens as a good location, around one-in-eight (13%) of those living nearest to Bronglais Hospital, and 7% of those living nearest to Prince Philip Hospital.
- 3.32 Over three-quarters (77%) of respondents living nearest to Prince Philip Hospital thought Whitland: Spring Gardens was a poor location for the new hospital, with just over half of those living closest to Bronglais Hospital and Glangwili Hospital thinking this (52% and 56% respectively). Less than half (46%) of those living closest to Withybush Hospital thought Whitland: Spring Gardens was a poor location (Figure 3 overleaf).

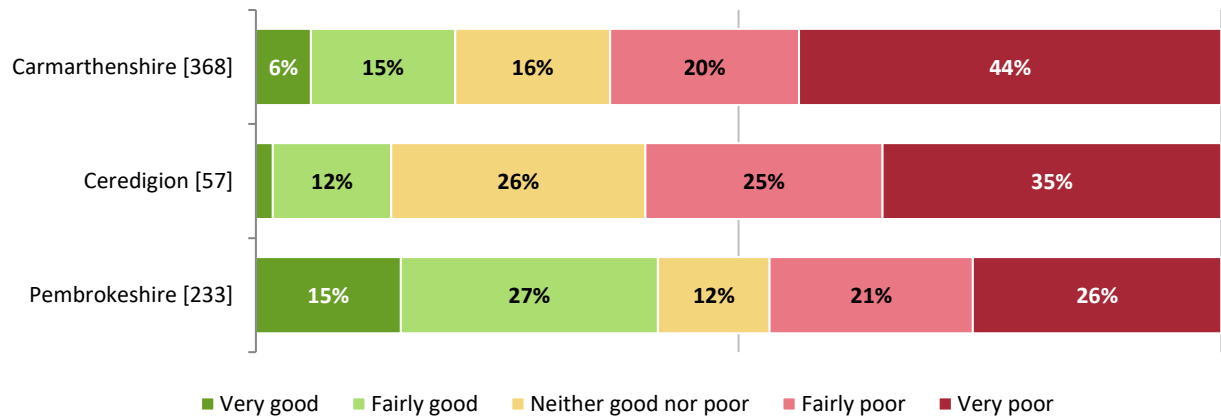
Figure 3: To what extent is Whitland: Spring Gardens (formerly site 12) a good or poor location for the new Hospital? BY NEAREST GENERAL HOSPITAL (individual respondents only, where postcodes were provided)



Base: Number of respondents shown in brackets (excludes ‘don’t know’ responses)

- 3.33
- Similarly, those living in the county of Pembrokeshire were more positive about Whitland: Spring Gardens as with over two-fifths (42%) thinking this was a good location for the new hospital compared with just over a fifth (21%) of those living in Carmarthenshire and around one-in-seven (14%) living in Ceredigion.
- 3.34
- Around six-in-ten of those living in Carmarthenshire and Ceredigion thought it was a poor location (63% and 60% respectively) compared with just under half of those living in Pembrokeshire (47%) (Figure 4).

Figure 4: To what extent is Whitland: Spring Gardens (formerly site 12) a good or poor location for the new Hospital? BY COUNTY (individual questionnaire respondents only)



Base: Number of respondents shown in brackets (excludes ‘don’t know’ responses)

Views on Whitland: Spring Gardens by deprivation

- 3.35 When broken down by deprivation (IMD quintiles), those living in the least deprived areas are more likely to think that Whitland: Spring Gardens would be a good location for the new hospital (41% in the fourth quintile and 32% in the fifth quintile). This compares to around one-in-five in the first, second and third quintiles (22%, 20% and 19% respectively).
- 3.36 Respondents in the more deprived areas are more likely to think that Whitland: Spring Gardens would be a poor location for the new hospital (64% in the first quintile, 70% in the second quintile, 64% in the third quintile), compared with over two-fifths in the least deprived areas (46% in the fourth quintile and 44% in the fifth quintile). (Figure 5).

Figure 5: To what extent is Whitland: Spring Gardens (formerly site 12) a good or poor location for the new Hospital? BY INDICES OF MULTIPLE DEPRIVATION (IMD) (individual respondents living in Carmarthenshire, Ceredigion and Pembrokeshire only, where postcodes are provided)



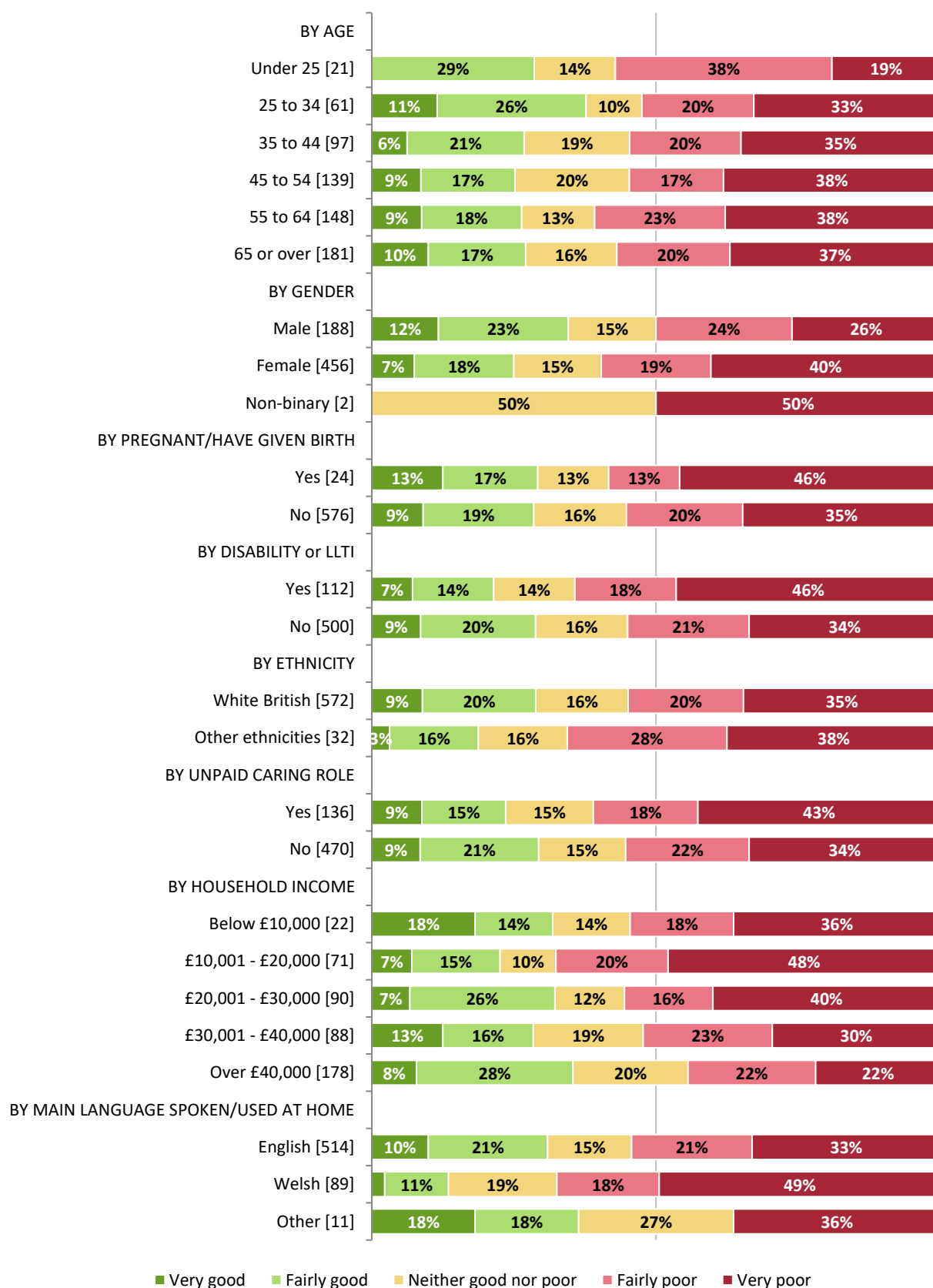
Base: Number of respondents shown in brackets (excludes ‘don’t know’ responses)

Views on Whitland: Spring Gardens by other demographics

- 3.37 Across other demographic groups (Figure 6 overleaf), there was some variation in opinion as to how good or poor Whitland: Spring Gardens would be as a location for the new hospital but definite patterns amongst sub-groups are not clear.
- 3.38 It should be noted that in the following figure those who stated they were of a non-binary gender is only based on two respondents and those whose main language spoken or used at home was ‘other’ is based on 11 respondents. As such the results for these should be interpreted with caution.



**Figure 6: To what extent is Whitland: Spring Gardens (formerly site 12) a good or poor location for the new Hospital? BY KEY DEMOGRAPHICS (individual questionnaire respondents only)**

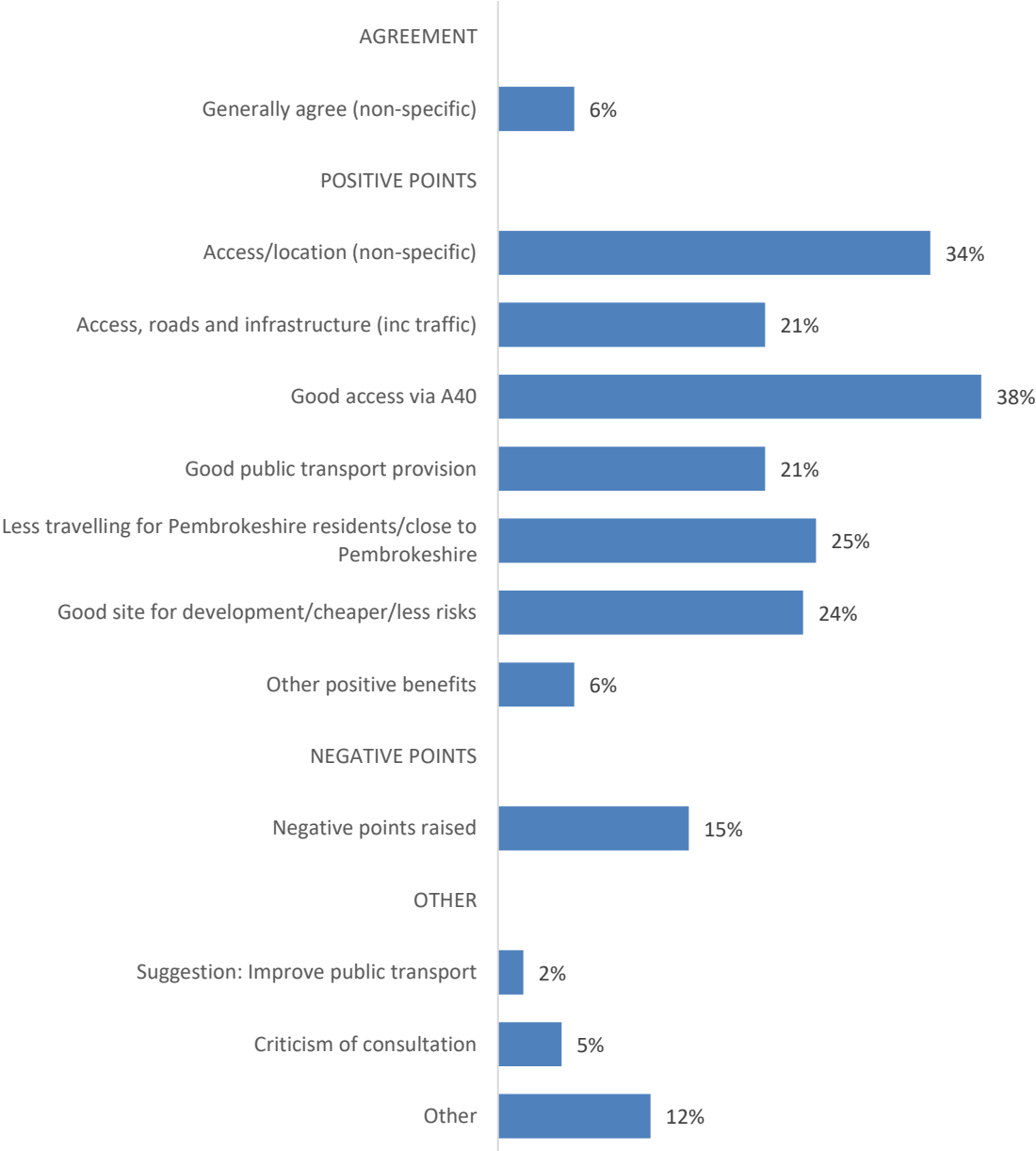


Base: Number of respondents shown in brackets (excludes 'don't know' responses)

Views on Whitland: Spring Gardens – Explanations Why

3.40 Respondents who thought that Whitland: Spring Gardens was a good choice for the new hospital were asked to explain why in an open text box. A summary of responses from those responding as individuals is provided in Figure 7. Because respondents could provide detailed feedback, some comments cover more than one point and, therefore, the total percentages may sum to greater than 100%. In addition to this summary chart, detailed tables of coded text comments can be found in Appendix II of this report for reference.

Figure 7: If you think Whitland: Spring Gardens (formerly site 12) is a good choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)



Base: Individual respondents thinking Whitland: Spring Gardens (formerly site 12) is a good choice for the new hospital (142), Points raised (297)

3.41 Most of those who provided comments raised points that were positive relating to access to the site or its location. Nearly two-fifths (38%) noted good access via the A40, a slightly smaller proportion (34%)

raised points around access or location that were non-specific and just over a fifth (21%) mentioned access, roads and infrastructure and (21%) good public transport provision. A quarter (25%) thought it was a good choice due its proximity to Pembrokeshire with just under a quarter (24%) stating that Whitland: Spring Gardens was a good site for development.

- 3.42 It is also worth noting that whilst these are comments from those who thought that Whitland: Spring Gardens is a good choice for the new hospital, 15% raised a negative point about this location covering points such as this site having multiple landowners and it being too small, along with concerns around traffic, transport and parking (as detailed in Appendix II).
- 3.43 Whilst the figure on the previous page covers the majority of points made by individual respondents who thought Whitland: Spring Gardens was a good choice for the new hospital, a few comments raised more specific points. These include good access from the A40; a flat site that would offer relatively easy access for people with disabilities; a site more likely to be acceptable to people objecting to changes at Withybush Hospital; closer to the industrial sites in Pembrokeshire; a site able to provide easier access for larger vehicles and one where the surrounding road infrastructure would require less upgrading. The proximity of the fire, ambulance, and railways stations in Whitland were also raised as site advantages. Notwithstanding these advantages, respondents highlighted the need to upgrade public transport access to the site and ensure that traffic is kept away from the town centre.

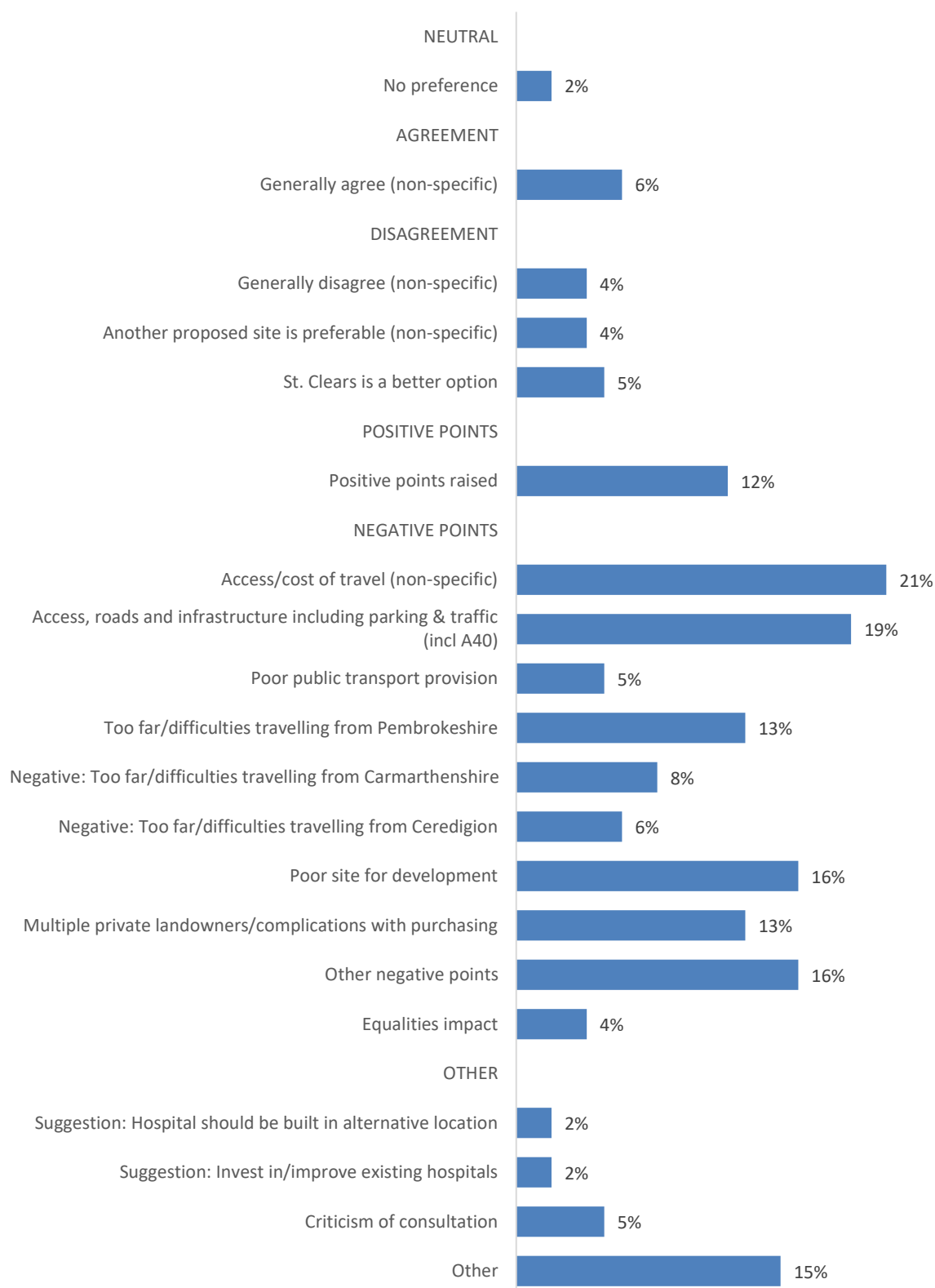
*Access from the A40 is excellent. It's a flat site, so it'll be easier for frail or disabled people to get around. It's closer to Haverfordwest so likely to sit better with those objecting to changes to Withybush hospital. It's closer to major industry in Pembrokeshire in case of major incident e.g., at oil refinery.*

*The site would allow a lot easier access to the new hospital for larger vehicles arriving and leaving the site. Also, it's less disruptive than the other two sites as possibly the road infrastructure would need upgrading at the other two sites and would entail a lot more road modifications and disruptions. The introduction of a roundabout on the A40 Whitland bypass would naturally slow down the traffic in both directions, making the A40 bypass a safer road to travel on. Another advantage would be that two accesses could be created somewhat like the site in GGH Carmarthen, keeping the Accident and Emergency access separate to the day to day running accesses. We also have the advantage that there is already an ambulance station and fire station located in West Street, Whitland and we still have a railway station not far from the site. An additional rear foot path access could be created from the Spring Gardens Road enabling people walking access onto the site. The other site in Whitland would need a lot more alteration and having large vehicles coming in and out of Whitland might also create a friction with the public living in Whitland itself ...*

*This could be a fairly good location, but only if traffic for the hospital is not directed through Whitland town centre. Staff and patients would need to be able to access the site direct from the A40 - and additional public transport would need to be considered.*

- 3.44 Respondents who thought that Whitland: Spring Gardens was neither a good nor poor choice for the new hospital were also asked to explain why. A summary of responses from those responding as individuals is provided in Figure 8 (overleaf). Because respondents could provide detailed feedback, some comments cover more than one point and, therefore, the total percentages may sum to greater than 100%.

**Figure 8: If you think Whitland: Spring Gardens (formerly site 12) is neither a good nor poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**



**Base: Individual respondents thinking Whitland: Spring Gardens (formerly site 12) is neither a good nor poor choice for the new hospital (85), Points raised (151)**

- 3.45 Just over a fifth (21%) had concerns around access or cost of travel that were non-specific and just under a fifth (19%) had concerns about access, roads, and infrastructure. Around one-in-six (16%) thought it was a poor site for development with around one-in-eight (13%) raising it is too far or that there would be difficulties travelling from Pembrokeshire and (13%) thought that as this site had multiple private landowners it could cause complications.
- 3.46 Whilst the figure on the previous page covers the majority of points made by individual respondents who thought Whitland: Spring Gardens is neither a good nor poor choice for the new hospital, a few comments raised more specific points including the use of agricultural land instead of brown field land at all of the sites; the risk of flooding; the site having multiple owners and the clinical risk that national guidelines will not be met over the minimum number of patients treated.

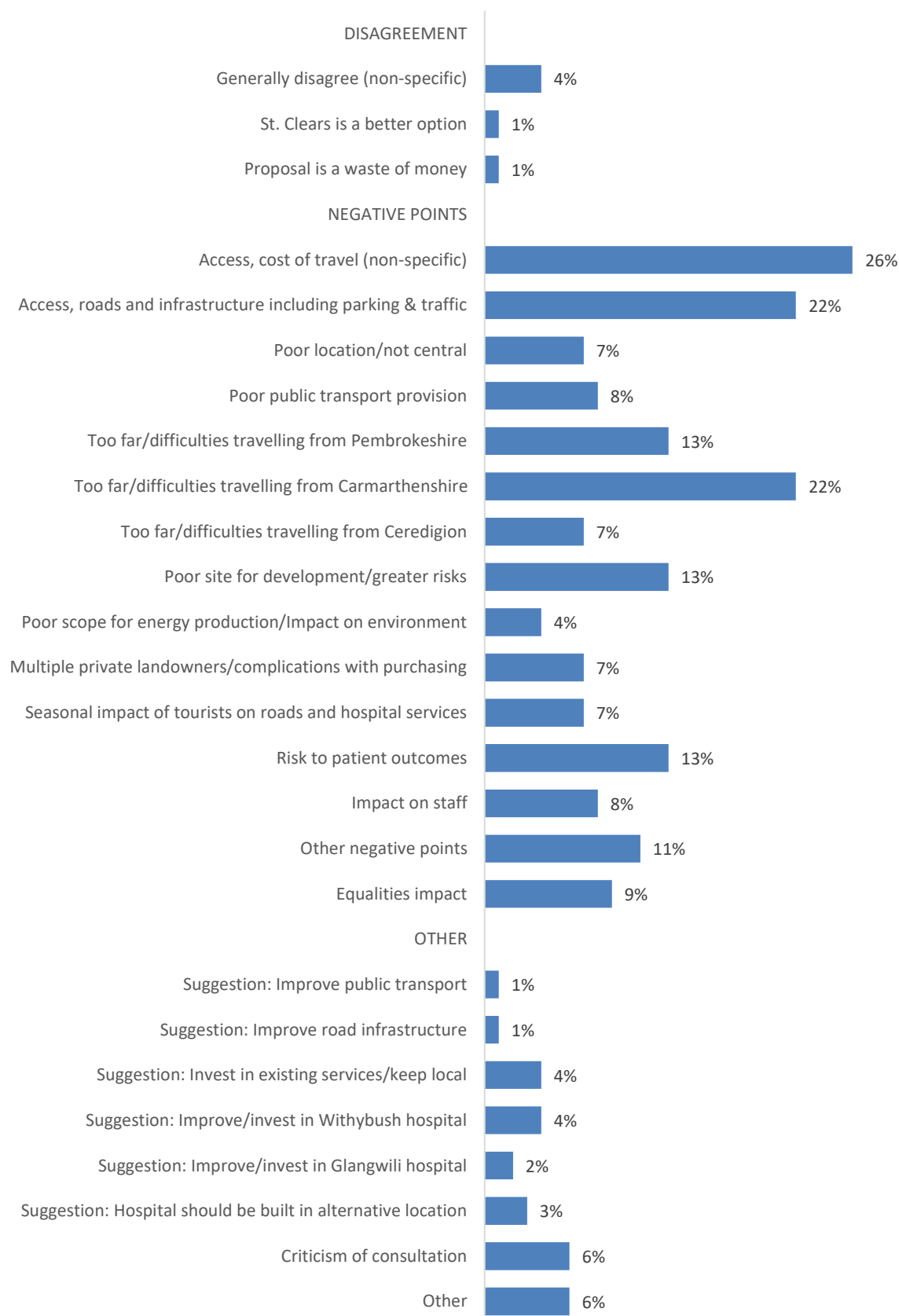
*I don't know the site. It's a shame that all sites considered are on agricultural land rather than reusing a brown field site.*

*There are certainly positive things about the site, but I am concerned about the low risk of flooding. The fact that the land is owned by multiple landowners could cause complications and delays. There is direct access only from the A40. There is also a risk that national guidelines on minimum numbers of patients treated will not be met which could compromise the standard of patient care delivered and the opportunities for developing staff expertise.*

*Too many compromises.*

- 3.47 Respondents who thought that Whitland: Spring Gardens is a poor choice for the new hospital were asked to explain why in an open text box. A summary of responses from those responding as individuals is provided in Figure 9 (overleaf). Because respondents could provide detailed feedback, some comments cover more than one point and therefore the total percentages may sum to greater than 100%.

**Figure 9: If you think Whitland: Spring Gardens (formerly site 12) is a poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**



**Base: Individual respondents thinking Whitland: Spring Gardens (formerly site 12) is a poor choice for the new hospital (378), Points raised (791)**

- 3.48 Just over a quarter (26%) had concerns around access or cost of travel that were non-specific and just over a fifth (22%) had concerns about access, roads and infrastructure and (22%) difficulties travelling from Carmarthenshire. Around one-in-eight (13%) had concerns about difficulties travelling from Pembrokeshire, (13%) thought it was a poor site for development and (13%) had concerns about the risk to patient outcomes.
- 3.49 Whilst the figure on the previous page covers the majority of points made by individual respondents who thought Whitland: Spring Gardens is a poor choice for the new hospital, a few comments raised more specific points. Respondents were concerned about the site causing nuisance to local residents; that the only access via the A40 is risky because it is often closed and that the 'Golden Hour' would be compromised for people living in the west. The disadvantages of these proposed changes for residents of Pembrokeshire and Llanelli were highlighted along with the advantages of upgrading all of the existing hospitals as an alternative to building a new hospital.

*It is in a residential area so would be a nuisance to local residents. Also, it is reliant on the A40 being open. It is regularly closed. For people living on the far western coast, it would be outside the "Golden Hour" that the NHS says is so important to save lives. In Pembrokeshire, we have the army training area at Castlemartin, the LNG plant in Milford Haven, the refinery and power station at Pembroke, a large elderly population and a badly paid population who do not have personal transport and cannot afford public transport and 500,000+ holidaymakers and rising. We need Withybush to be upgraded and maybe a second site built at Fishguard Road, Slade or the old BMW site at Slebech. Withybush is central for everyone in the county, Whitland isn't. Also, given that there's no scope for further expansion and renewable energy on the site, I believe it's a bad choice.*

*Mostly benefits Carmarthenshire residents and disadvantages Pembrokeshire residents. Best option would be to bring back services to Withybush and build a new hospital between Carmarthen and Llanelli to serve Carmarthenshire, instead of having two hospitals in close proximity!*

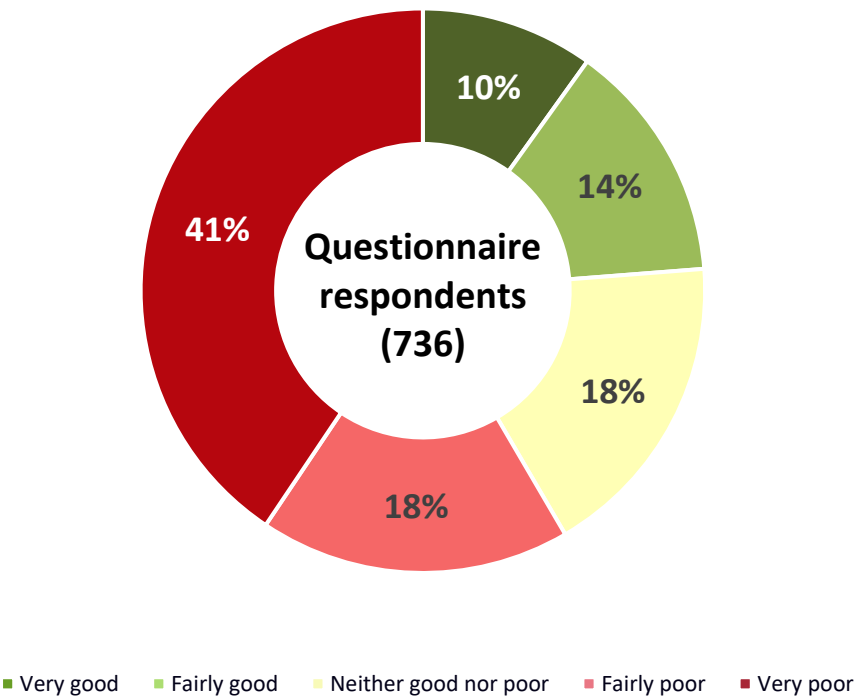
*This is ridiculous, all three sites are for people living in Llanelli. Each of the hospitals already existing should be upgraded instead of being downgraded. We in Llanelli find it difficult to go to Glangwili, let alone going further West, especially older people and young families who may have young children at home to look after as well as attending a hospital further west for another member of family. We don't all have relatives living near us to assist ...*

*Poor road access from South Pembrokeshire. Back road access through Tavernspite and level crossing or travel via St Clears/Narberth. Location further west is likely to reduce numbers of paediatric and obstetric cases making ongoing services less viable in the medium to long term.*

### Whitland: Tŷ Newydd (formerly site C) as a location for the new Hospital

3.50 Nearly a quarter (24%) of those responding as individuals thought that Whitland: Tŷ Newydd was a good location for the new hospital (either fairly or very good). Nearly one-fifth (18%) thought Whitland: Tŷ Newydd was neither a good nor poor location. Nearly six-in-ten (59%) thought that Whitland: Tŷ Newydd was a poor location for the new hospital (either fairly or very poor) (Figure 10).

Figure 10: To what extent is Whitland: Tŷ Newydd (formerly site C) a good or poor location for the new Hospital? (individual questionnaire respondents only)



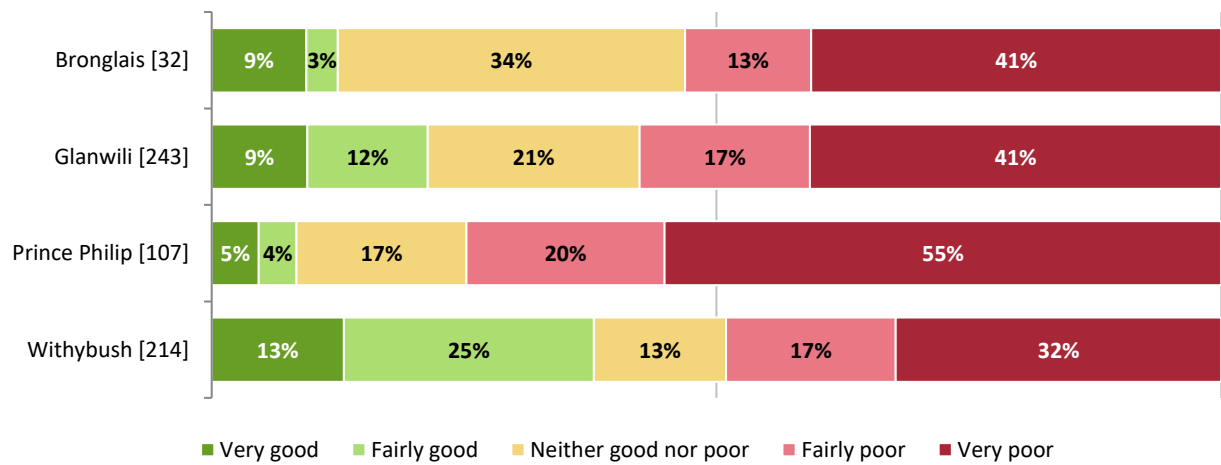
Base: Number of respondents shown in brackets (excludes ‘don’t know’ responses)

### Views on Whitland: Tŷ Newydd by area

- 3.51 Again, there is a clear indication that views among questionnaire respondents vary considerably by geography; those questionnaire respondents who provided postcodes and live closest to Withybush Hospital were more positive about Whitland: Tŷ Newydd as a location for the new hospital with nearly two-fifths (38%) thinking this was a good location. This compares with just over a fifth (21%) of those living closest to Glangwili Hospital who thought Whitland: Tŷ Newydd was a good location, around one-in-eight (13%) of those living nearest to Bronglais Hospital, and 8% of those living nearest to Prince Philip Hospital.
- 3.52 Three-quarters (75%) of those living nearest to Prince Philip Hospital thought Whitland: Tŷ Newydd was a poor location for the new hospital, with just over half over those living closest to Bronglais Hospital and Glangwili Hospital thinking this (53% and 58% respectively). Far fewer - less than half (49%) - of those living closest to Withybush Hospital thought Whitland: Tŷ Newydd was a poor location (Figure 11 overleaf).



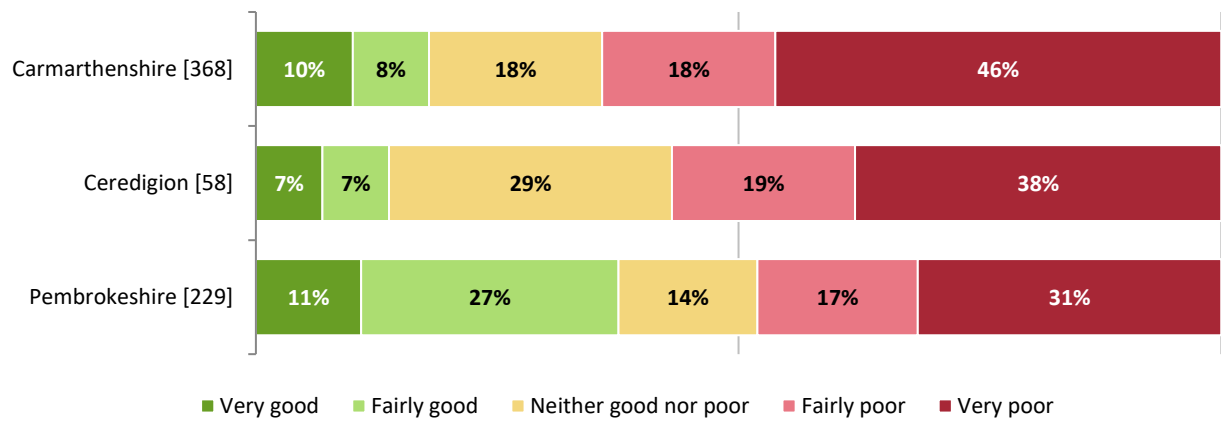
Figure 11: To what extent is Whitland: Tŷ Newydd (formerly site C) a good or poor location for the new Hospital? BY NEAREST GENERAL HOSPITAL (individual respondents only, where postcodes were provided)



Base: Number of respondents shown in brackets (excludes ‘don’t know’ responses)

- 3.53
- Similarly, those living in the county of Pembrokeshire were more positive about Whitland: Tŷ Newydd as a location for the new hospital with nearly two-fifths (38%) thinking this was a good location compared to just under a fifth (18%) living in Carmarthenshire and around one-in-seven (14%) living in Ceredigion.
- 3.54
- Around six-in-ten of those living in Carmarthenshire and Ceredigion thought it was a poor location (64% and 57% respectively) and just under half of those living in Pembrokeshire (48%) (Figure 12).

Figure 12: To what extent is Whitland: Tŷ Newydd (formerly site C) a good or poor location for the new Hospital? BY COUNTY (individual questionnaire respondents only)



Base: Number of respondents shown in brackets (excludes ‘don’t know’ responses)

Views on Whitland: Tŷ Newydd by deprivation

- 3.55
- When broken down by deprivation (IMD quintiles), those living in the least deprived areas are more likely to think that Whitland: Tŷ Newydd would be a good location for the new hospital (33% in the fourth quintile and 30% in the fifth quintile). This compares to around one-in-five in the first, second and third quintiles (18%, 20% and 17% respectively).
- 3.56
- Whereas those in the more deprived areas are more likely to think that Whitland: Tŷ Newydd would be a poor location for the new hospital (65% in the first quintile, 72% in the second quintile, 60% in the third quintile), around half in the least deprived areas (49% in the fourth quintile and 50% in the fifth quintile) thought it would be a poor location. (Figure 13).

Figure 13: To what extent is Whitland: Tŷ Newydd (formerly site C) a good or poor location for the new Hospital? BY INDICES OF MULTIPLE DEPRIVATION (IMD) (individual respondents living in Carmarthenshire, Ceredigion and Pembrokeshire only, where postcodes are provided)

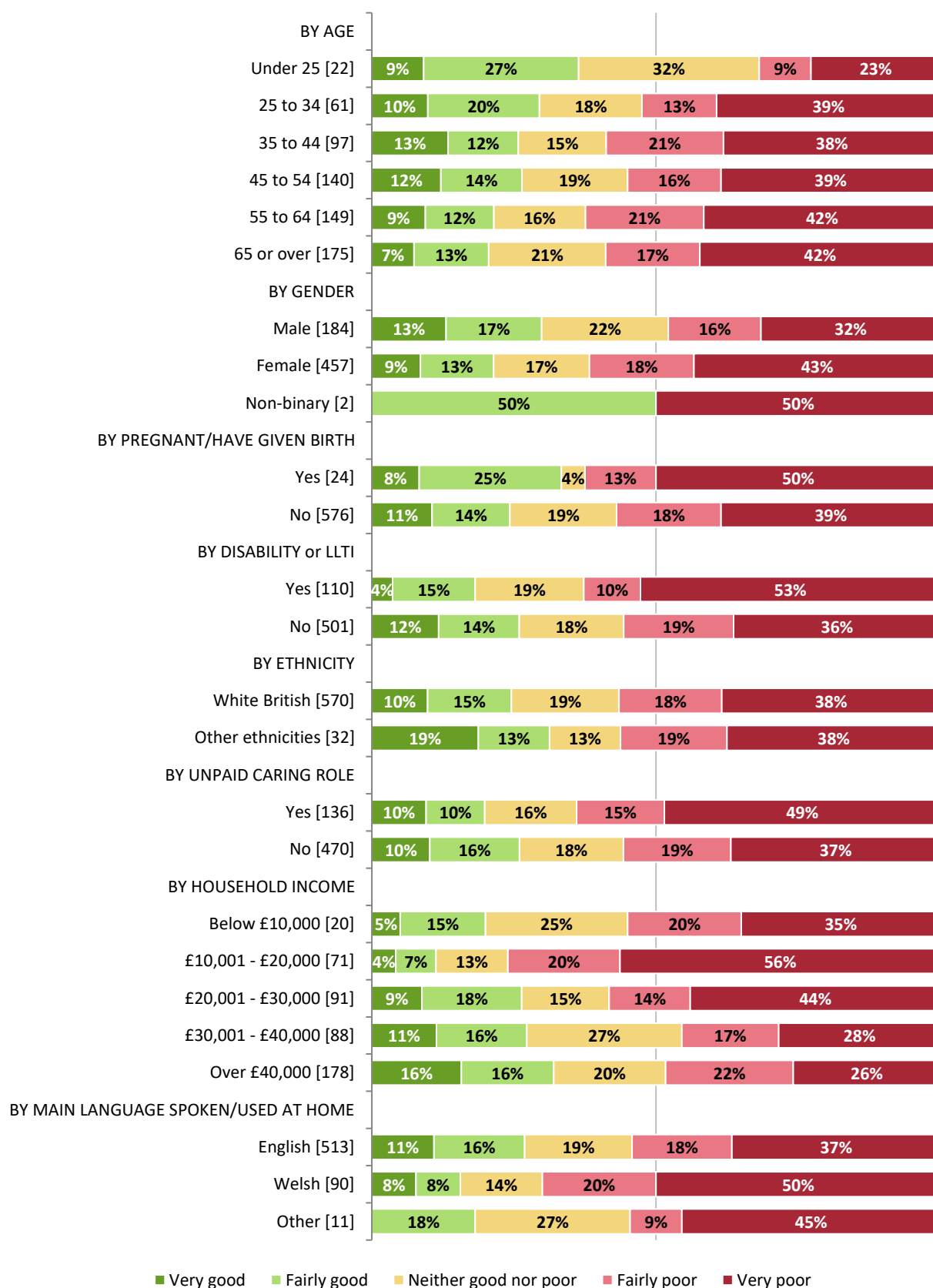


Base: Number of respondents shown in brackets (excludes ‘don’t know’ responses)

Views on Whitland: Tŷ Newydd by other demographics

- 3.57
- The following Figure 14 (overleaf), shows the key demographic breakdown of opinions by individual respondents to the extent Whitland: Tŷ Newydd is a good or poor location for the new Hospital.
- 3.58
- It should be noted that in the following figure those who stated they were a non-binary gender is only based on 2 respondents and those whose main language spoken or used at home was ‘other’ based on 11 respondents, as such the results for these should be interpreted with caution.

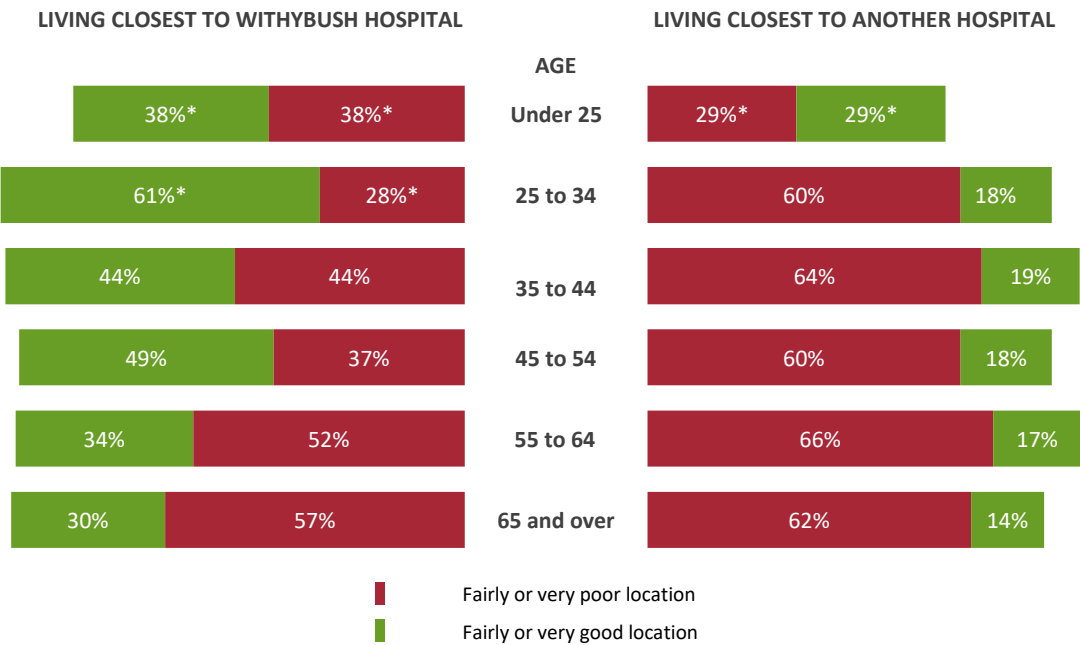
**Figure 14: To what extent is Whitland: Tŷ Newydd (formerly site C) a good or poor location for the new Hospital? BY KEY DEMOGRAPHICS (individual questionnaire respondents only)**



Base: Number of respondents shown in brackets (excludes 'don't know' responses)

- 3.60 The figure on the previous page shows some variation in opinion as to how good or poor Whitland: Tŷ Newydd would be as a location for the new hospital, including an apparent trend by age.
- 3.61 However, when breaking down the views of different age groups by areas of residence, the pattern becomes less clear (Figure 15). The previous overall chart could potentially be interpreted as indicating that Whitland: Tŷ Newydd is more likely to be perceived as poor by older age groups. However, is this due to age, or is it related to the fact that more older people live nearer other hospitals and favour another site? The main difference in views is east/west (that is, whether respondents live in Pembrokeshire [i.e., nearer Withybush] or nearer St Clears/east Carmarthenshire). Figure 15 attempts to present results by age having first taken account of the east/west hospital proximity.
- 3.62 The findings are not conclusive, but it certainly demonstrates that among those NOT living near Withybush there is no age-related trend. Among those who DO live nearer to Withybush, excepting the small sample size of those under 35, it is hard to judge whether or not there is any age effect (given that statistical tests are not applicable, since this is not a controlled population survey). Hence, we feel the most appropriate thing to do is include this analysis for transparency but allow readers to consider whether or not there is any conclusion to be drawn.

Figure 15: To what extent is Whitland: Tŷ Newydd (formerly site C) a good or poor location for the new Hospital? BY AGE AND BY PROXIMITY TO WITHYBUSH HOSPITAL (individual respondents only, where postcodes were provided)

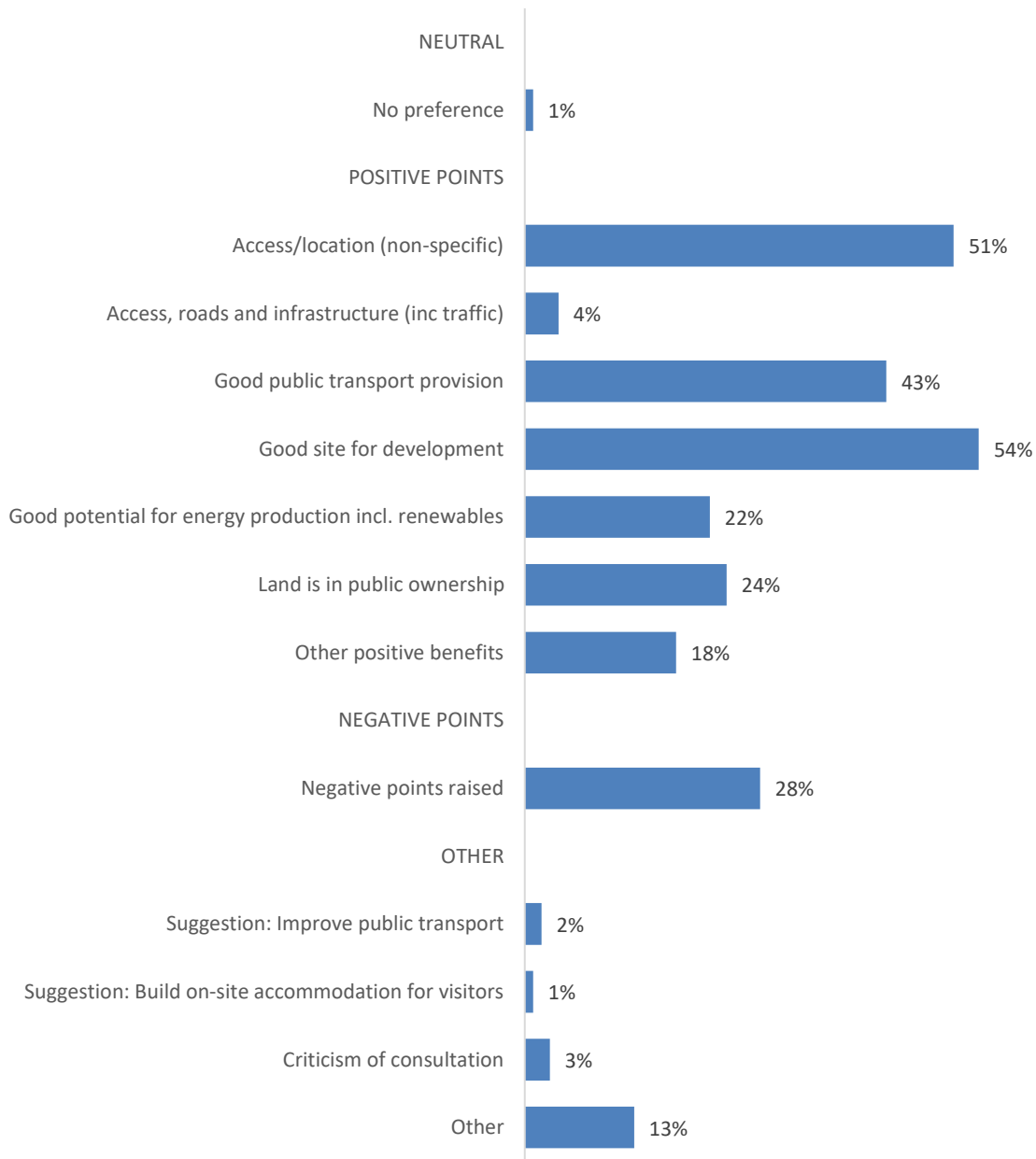


Base: \*NB results are marked with an asterisk (\*) are based on low case numbers (<20)

Views on Whitland: Tŷ Newydd – Explanations Why

3.63 Respondents who thought that Whitland: Tŷ Newydd was a good choice for the new hospital were asked to explain why in an open text box. A summary of responses from those responding as individuals is provided in Figure 16. Because respondents could provide detailed feedback, some comments cover more than one point and, therefore, the total percentages may sum to greater than 100%.

Figure 16: If you think Whitland: Tŷ Newydd (formerly site C) is a good choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)



Base: Individual respondents thinking Whitland: Tŷ Newydd (formerly site C) is a good choice for the new hospital (134), Points raised (355)

3.64 Most of those who provided comments raised points that were positive relating to access to the site or its location. Just over half (51%) raised points around access or location that were non-specific and over two-fifths (43%) mentioned good public transport provision. Over half (54%) thought it was a good site

for development with just under a quarter (24%) mentioning the land being in public ownership as positive and over a fifth (22%) mentioning that it had good potential for energy production.

- 3.65 It is also worth noting whilst these are comments from those who thought that Whitland: Tŷ Newydd is a good choice for the new hospital, nearly three-in-ten (28%) raised a negative point about this location covering points such as poor accessibility, poor road links and infrastructure, the risk of flooding and it being more expensive to develop, along with the site being too small, risk to patient outcomes and the impact on the local area and residents (as detailed in Appendix II).
- 3.66 Whilst the figure on the previous page covers the majority of points made by individual respondents who thought Whitland: Tŷ Newydd is a good choice for the new hospital, a few comments raised different or more specific points. According to these respondents, additional advantages of the site are its size and potential for sufficient car parking and to allow for future expansion; its open views; good access by rail; proximity to local amenities in Whitland; centrality to the whole Hywel Dda area and proximity and potential benefits to the community of Whitland. Concerns were raised about the potential for flood risk and questions were asked about the higher costs associated with the site and whether the approved new housing development in Haverfordwest had been taken into consideration. Suggestions by respondents were for overnight accommodation for relatives; a designated railway station at the hospital and a new link to the A40.

*Size has potential to accommodate future changes in provision of care. Space for car parking for patients, visitors, and staff. Easy parking will assist retention of all sorts of staff. Close to train station. Scope for renewable energy on site. The site should include subsidised accommodation for relatives to be near very ill patients - such accommodation should have access to mini kitchens so they can come and go when life is at the edge. Not enough information given about the extent of flooding or area at risk. Would access be at risk when there is flooding? More open space views potentially help people recover.*

*Good links for the train, parking is always an issue, and you will have hospital staff commuting on the train rather than driving as it is so close to the station. Maybe have a designated hospital station, that really would be good. It's got an option for renewables onsite. Room for expansion. Close to shops and businesses in Whitland, which would be good for jobs. Closer to Haverfordwest, so less travel time than St. Clears. It would, however, need a new highway link to the A40. Whitland is under used, this would be very good for the town and people living there. The hospital would be part of the community rather than stuck out on a limb like the other Whitland site.*

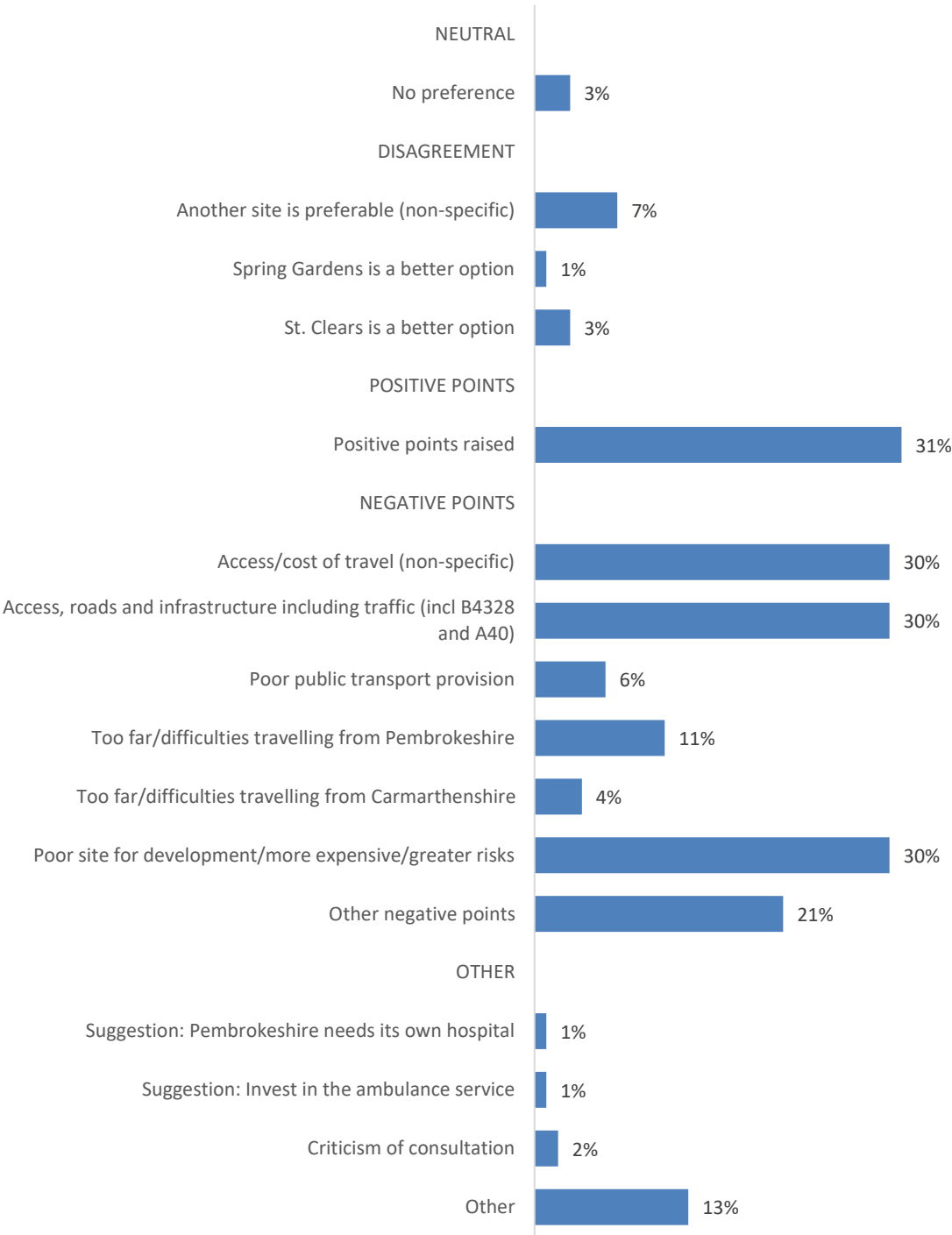
*I do not believe the planning consent for 729 additional dwellings on a recently released site in Haverfordwest has been taken into account in assessing population numbers and patient travel miles. [...] Already in public ownership so compensation for vested interests of property owners will not be a consideration. Costs are putatively higher, but as building costs are a fluid and moveable estimate, the proposed higher costings are likely to be peanuts in the grand scheme of things.*

*... According to the WAST modelling, the Whitland sites are fairest to the whole Hywel Dda population with the greatest percentage of people within one hour travel time [...], and lowest number of incidents 60 minutes away ...*

*I am a chartered valuation surveyor and I am baffled by your estimated site purchase cost as this site would surely be the cheapest as the other two sites are marked with development value in the LDP.*

3.67 Respondents who thought that Whitland: Tŷ Newydd was neither a good nor poor choice for the new hospital were also asked to explain why. A summary of responses from those responding as individuals is provided in Figure 17. Because respondents could provide detailed feedback, some comments cover more than one point and, therefore, the total percentages may sum to greater than 100%.

**Figure 17: If you think Whitland: Tŷ Newydd (formerly site C) is neither a good nor poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**



**Base: Individual respondents thinking Whitland: Tŷ Newydd (formerly site C) is neither a good nor poor choice for the new hospital (89), Points raised (176)**

- 3.68 Three-in-ten (30%) had concerns around access or cost of travel that were non-specific, (30%) concerns about access, roads and infrastructure and (30%) concerns that it was a poor site for development. Just over a fifth (21%) raised other negative points such as the impact on the local area and residents, impact on staff and risk to patient outcomes.
- 3.69 Just over three-in-ten (31%) raised a positive point about the site including points around location, ease of access, good public transport and that it was close to shops and amenities, also points around the site being good as it was large, had good potential for energy production and was in public ownership (as detailed in Appendix II).
- 3.70 Whilst the figure on the previous page covers the majority of points made by individual respondents who thought Whitland: Tŷ Newydd was neither a good nor poor choice for the new hospital, a few comments raised more specific points, some of which are included below for consideration:

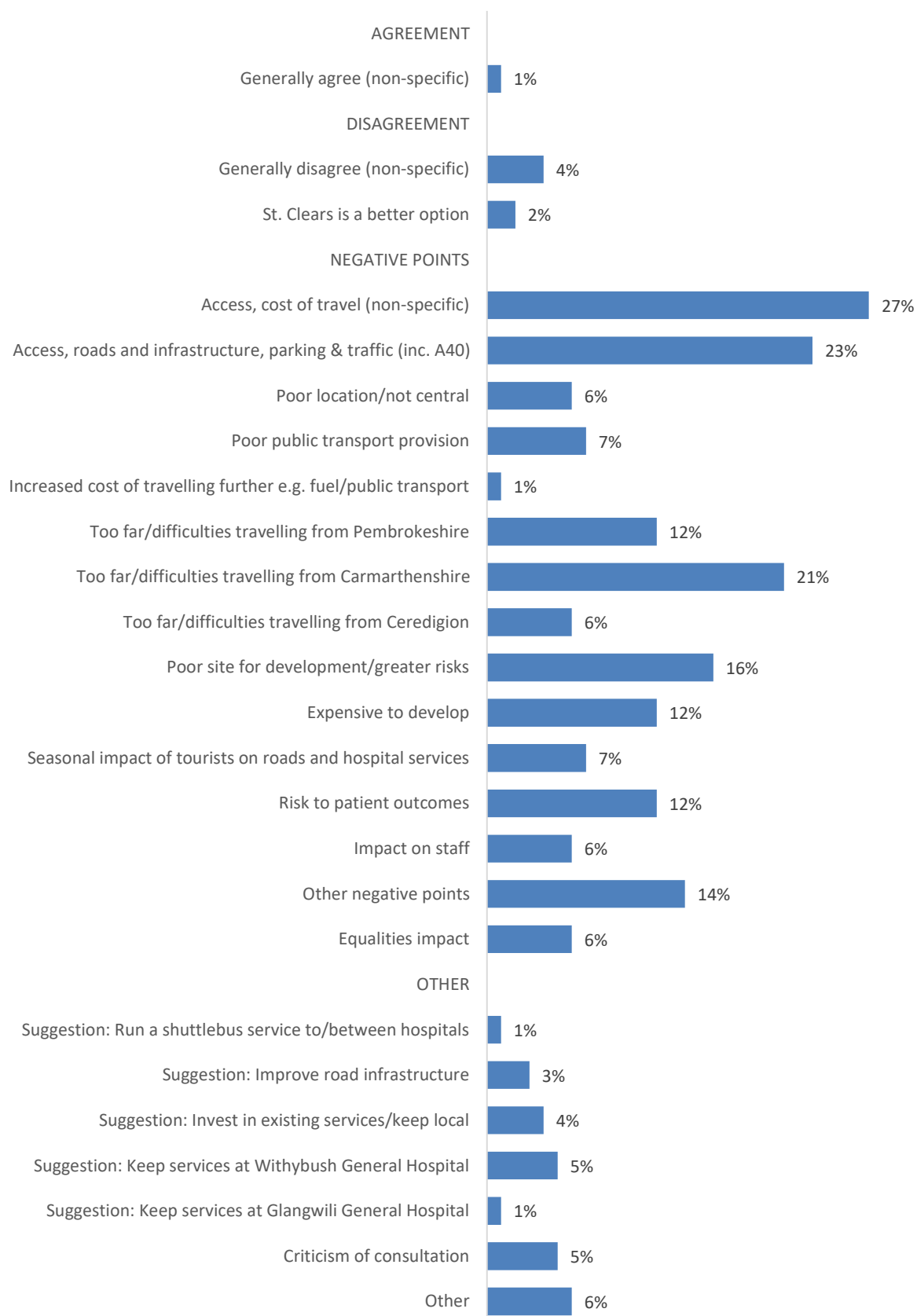
*Increased transport times. No ability for expansion. You should identify a site that can be future proofed. Why can't car parks use solar? ...*

*... No accounts taken of nearly 1,000 new houses going up in Haverfordwest and increase in importance of Milford Haven as energy hub, due to Ukraine war and offshore power generation. This applies to all four sites. This site is the best of a bad bunch. Almost as close to Pembrokeshire as Spring Gardens but still too far on poor roads. Less pollution from busy main roads (noise, traffic fumes). Less likely that flustered drivers driving straight off busy A road will cause accidents. Bigger site. More room for expansion ... More room for car parking, [...] Already in public ownership [...] Close to existing train station although services poor [...] Less disruption to traffic on single carriageway roads during construction. Separate access road makes construction marginally more costly but will be a huge benefit in ease of access for those unfamiliar with site. Marginally more expensive to build but construction costs always rise anyway. Less disruption to traffic during construction. Site wet in parts [...] Too far from western seaboard. Whitland too small to provide staff for major hospital ...*

- 3.71 Respondents who thought that Whitland: Tŷ Newydd is a poor choice for the new hospital were asked to explain why in an open text box. A summary of responses from those responding as individuals is provided in Figure 18 (overleaf). Because respondents could provide detailed feedback, some comments cover more than one point and therefore the total percentages may sum to greater than 100%.



**Figure 18: If you think Whitland: Tŷ Newydd (formerly site C) is a poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**



**Base: Individual respondents thinking Whitland: Tŷ Newydd (formerly site C) is a poor choice for the new hospital (369), Points raised (766)**

- 3.72 Over a quarter (27%) had concerns around access or cost of travel that were non-specific and over a fifth (23%) had concerns about access, roads and infrastructure and (21%) difficulties travelling from Carmarthenshire. Around one-in-six (16%) thought it was a poor site for development.
- 3.73 Whilst the figure on the previous page covers the majority of points made by individual respondents who thought Whitland: Tŷ Newydd is a poor choice for the new hospital, a few comments raised more specific points. Respondents argued in favour of upgrading Withybush Hospital; raised concerns over the access to a new site by older people and suggested a regular shuttle bus; queried the costs of a new access road to the site and suggested that elevated road access and car parking would be required above the flood plain. They also recommended that facilities for visitors would be needed nearby including shops and hotels. Also, a concern over clinical risk was raised: that national guidelines would not be met and that this should be considered fully and communicated to the public before they can make an informed decision on this option. The distance from Ceredigion was raised as another concern and the consultation document was criticised for underestimating travel times within the health board area and not accounting for the future imposition of 20mph speed limits later this year which will further impact travel times. Additional disadvantages were identified as location at Tŷ Newydd having a detrimental impact on staff retention and recruitment owing to increased commuting distances and creating additional demands on the Air Ambulance service and on voluntary car schemes.

*... Withybush hospital must remain and be invested in or rebuilt. With the Freeport coming to Pembrokeshire adding the further possible increase of working people in Pembrokeshire, we must retain and improve our services at Withybush. As a regular patient of Withybush, Glangwili, Prince Philip and Morriston, the travelling is challenging. On many occasions due to volumes of traffic, tractors, lorries and roadworks, it can often take over 1.5 hours to reach Glangwili! Morriston has invested and modernised on site and the same should be done to Withybush.*

*... unless there is a regular shuttle bus 250 yards is too far for elderly people to walk. Nobody has been told how often trains/buses will run to the new build. Percentages used are unacceptable. Settlement numbers are unacceptable for a rural area. It should be 95% of the population to get faster access to A&E, not 7%. The journey is too onerous for our large population of elderly ...*

*No direct route into hospital. You would have to put in a new road I would presume to make accessibility easier? Extra cost.*

*Road access which is above the flood plain is needed. Raised car parking is needed and also patients and their carers need shops and hotels near at hand when loved ones are dying or when parents or spouses have to travel e.g., from London etc. when there are boating, paddle board, surfing, rock climbing, road accidents, and loved ones with heart failure etc. Things need to be bought; food needs to be bought. None of this infrastructure has been considered as far as I can see. Withybush has all this set up already.*

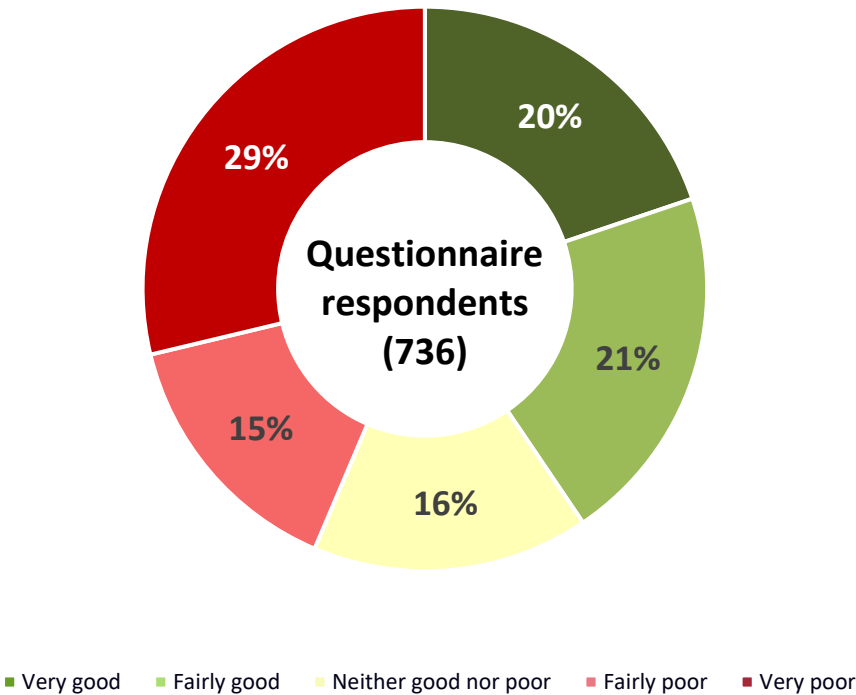
*Option appraisal states there is a risk some national guidelines will not be met so the implications of this needs to be fully understood and communicated to the public before they can make an informed decision on this option. No direct access to the site means more roadworks and more ripping up of green space/land. The site is a flood risk which needs to be taken seriously ... the future risk needs to be understood and communicated to the public before they can make an informed decision on this option. This option will increase travel requirements for residents of Ceredigion. The travel times are understated as travel from Carmarthen to Lampeter requires at least one hour travel and this is without taking into consideration the 20mph speed limits due to be introduced in September 23. Lampeter to Whitland is one hour 20 minutes and that's on a quiet travel day. The distance to the new hospital will be the same as to the Swansea based hospitals so of no benefit to the residents of Ceredigion.*

*Staff retention will reduce even further because staff can't afford to travel extra or have the increased journey at the beginning and end of shifts. Pembrokeshire population trebles in the summer so a hospital is vital to stay in Pembrokeshire. For child emergencies - it's too far to Whitland. Again, this would reduce staff recruitment and retention as it would have a detrimental impact on work life balance and being able to get to children when needed. It would create increased demand on voluntary air ambulance which is already stretched thin. Also, there will be increased demand on voluntary car services and a reduction in journeys they will be able to make with increased fuel costs and travel times. Rural roads to Whitland are unsuitable. What may be a 12-minute journey on a map is at least double that in reality ...*

### St Clears (formerly site 17) as a location for the new Hospital

3.74 A greater proportion of individuals responding thought that St Clears was a good location for the new hospital compared to the other locations, with two-fifths (40%) saying St Clears was good (either fairly or very good). Around one-in-six (16%) thought St Clears was neither a good nor poor location. Over two-fifths (43%) thought that St Clears was a poor location for the new hospital (either fairly or very poor) (Figure 19).

Figure 19: To what extent is St Clears (formerly site 17) a good or poor location for the new Hospital? (individual questionnaire respondents only)



Base: Number of respondents shown in brackets (excludes ‘don’t know’ responses)

### Views on St Clears by area

- 3.75 Again, there is indication that views among questionnaire respondents vary by geography. However, unlike the other locations those questionnaire respondents who provided postcodes and live closest to Glangwili Hospital and Prince Philip Hospital were most positive about St Clears as a location for the new hospital with almost half (49%) thinking this was a good location from both areas. A slightly smaller proportion (45%) of those living closest to Bronglais Hospital thought St Clears was a good location and just over three-in-ten (31%) of those living nearest to Withybush Hospital.
- 3.76 Nearly six-in-ten (58%) of those living nearest to Withybush Hospital thought St Clears was a poor location for the new hospital. Nearly four-in-ten (38%) of those living closest to Prince Philip Hospital thought it was a poor location, and 35% of those who live closest to Glangwili Hospital. Less than a quarter (24%) of those living closest to Bronglais Hospital thought St Clears was a poor location (Figure 20 overleaf).

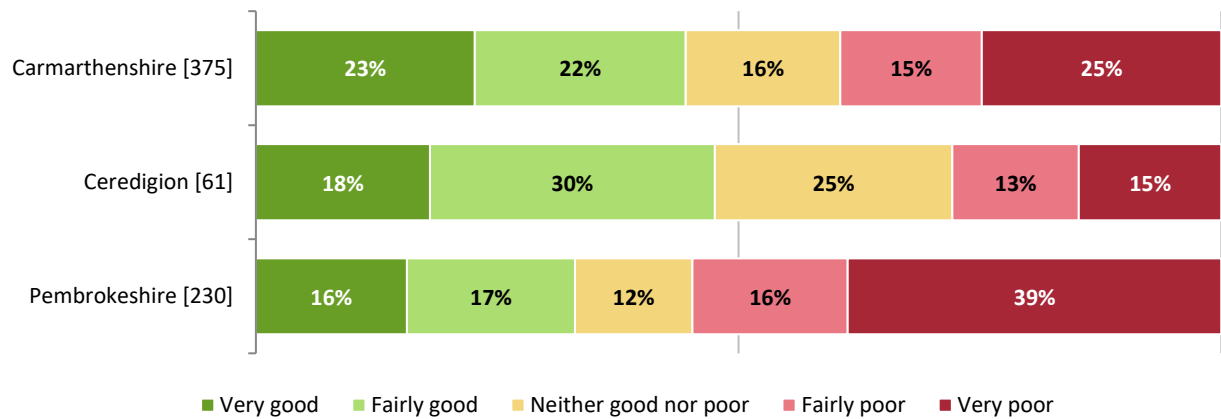
Figure 20: To what extent is St Clears (formerly site 17) a good or poor location for the new Hospital? BY NEAREST GENERAL HOSPITAL (individual respondents only, where postcodes were provided)



Base: Number of respondents shown in brackets (excludes ‘don’t know’ responses)

- 3.77
- Those living in the county of Ceredigion were more positive about St Clears as a location for the new hospital with nearly half (48%) thinking this was a good location compared to 45% living in Carmarthenshire and a third (33%) living in Pembrokeshire.
- 3.78
- Over half (55%) of those living in Pembrokeshire thought it was a poor location, with nearly four-in-ten (39%) of those living in Carmarthenshire thinking it was a poor location and just under three-in-ten (28%) of those living in Ceredigion (Figure 21).

Figure 21: To what extent is St Clears (formerly site 17) a good or poor location for the new Hospital? BY COUNTY (individual questionnaire respondents only)

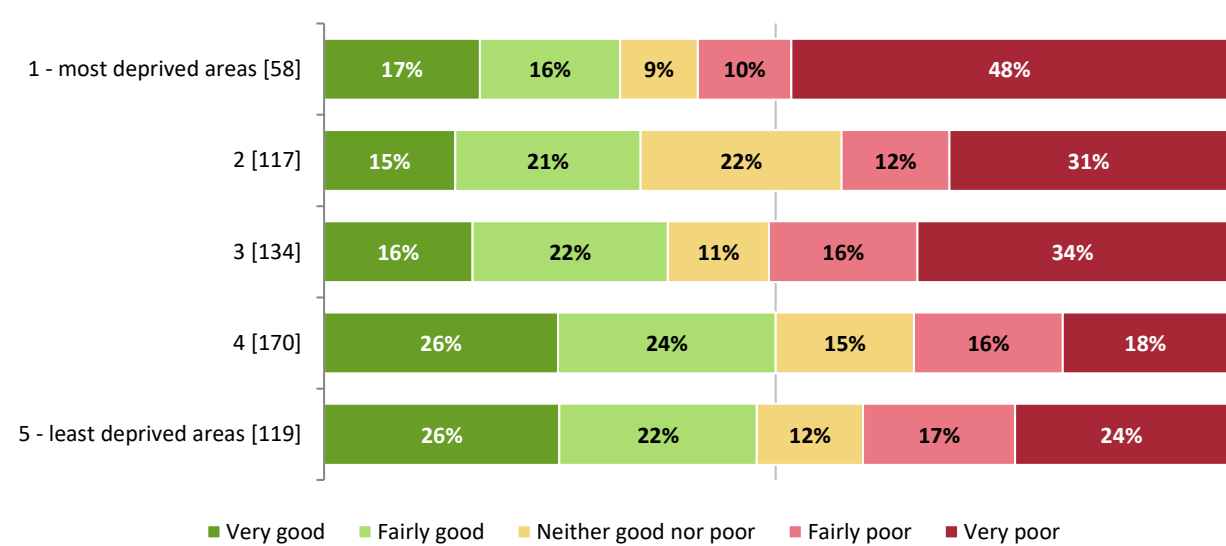


Base: Number of respondents shown in brackets (excludes ‘don’t know’ responses)

Views on St Clears by deprivation

- 3.79 When broken down by deprivation (IMD quintiles), those living in the least deprived areas are more likely to think that St Clears would be a good location for the new hospital (50% in the fourth quintile and 48% in the fifth quintile). This compares to between three and four-in-ten in the first, second and third quintiles (33%, 35% and 38% respectively).
- 3.80 Those in the more deprived areas are more likely to think that St Clears would be a poor location for the new hospital (59% in the first quintile, 43% in the second quintile, 51% in the third quintile), compared to 35% in the fourth quintile and 40% in the fifth quintile. (Figure 22).

Figure 22: To what extent is St Clears (formerly site 17) a good or poor location for the new Hospital? BY INDICES OF MULTIPLE DEPRIVATION (IMD) (individual respondents living in Carmarthenshire, Ceredigion and Pembrokeshire only, where postcodes are provided)



Base: Number of respondents shown in brackets (excludes ‘don’t know’ responses)

Views on St Clears by other demographics

- 3.81 The following Figure 23 (overleaf), shows the key demographic breakdown of opinions by individual respondents to the extent that St Clears (formerly site 17) is a good or poor location for the new Hospital.
- 3.82 It should be noted that in the following figure those who stated they were a non-binary gender is only based on 2 respondents and those whose main language spoken or used at home was ‘other’ based on 11 respondents. As such the results for these should be interpreted with caution.

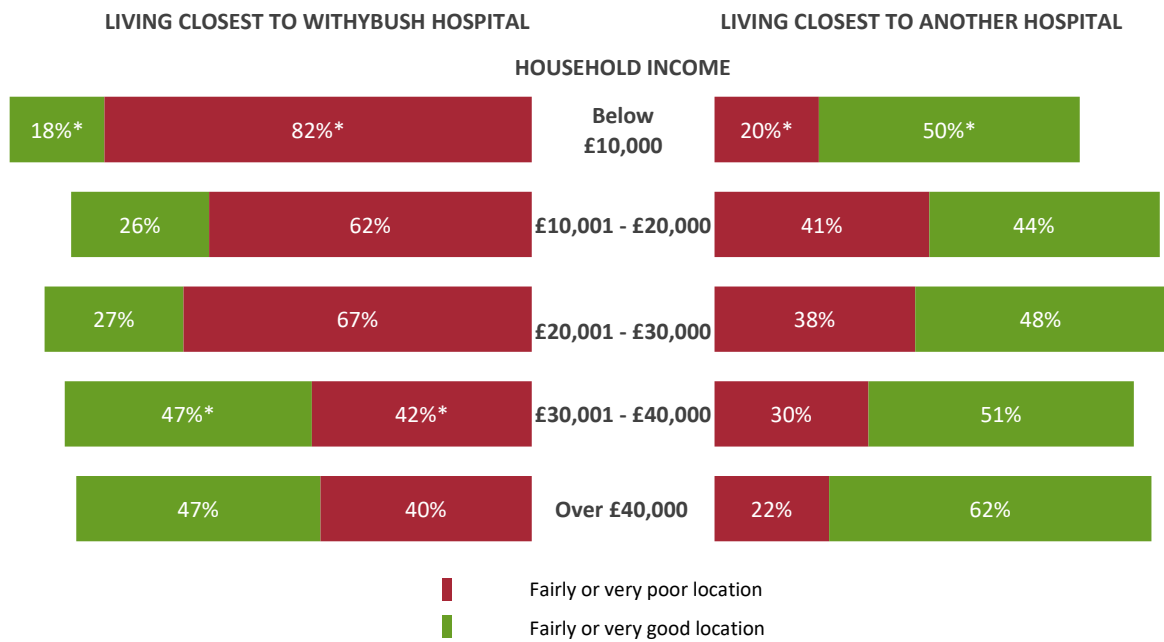
**Figure 23: To what extent is St Clears (formerly site 17) a good or poor location for the new Hospital? BY KEY DEMOGRAPHICS (individual questionnaire respondents only)**



Base: Number of respondents shown in brackets (excludes 'don't know' responses)

- 3.83
- The figure on the previous page shows some variation in opinion as to how good or poor St Clears would be as a location for the new hospital, including an apparent trend by household income.
- 3.84
- However, when breaking down the views of different bands of household income by areas of residence, the pattern becomes less clear (Figure 24).

Figure 24: To what extent is St Clears (formerly site 17) a good or poor location for the new Hospital? BY HOUSEHOLD INCOME AND BY PROXIMITY TO WITHYBUSH HOSPITAL (individual respondents only, where postcodes were provided)



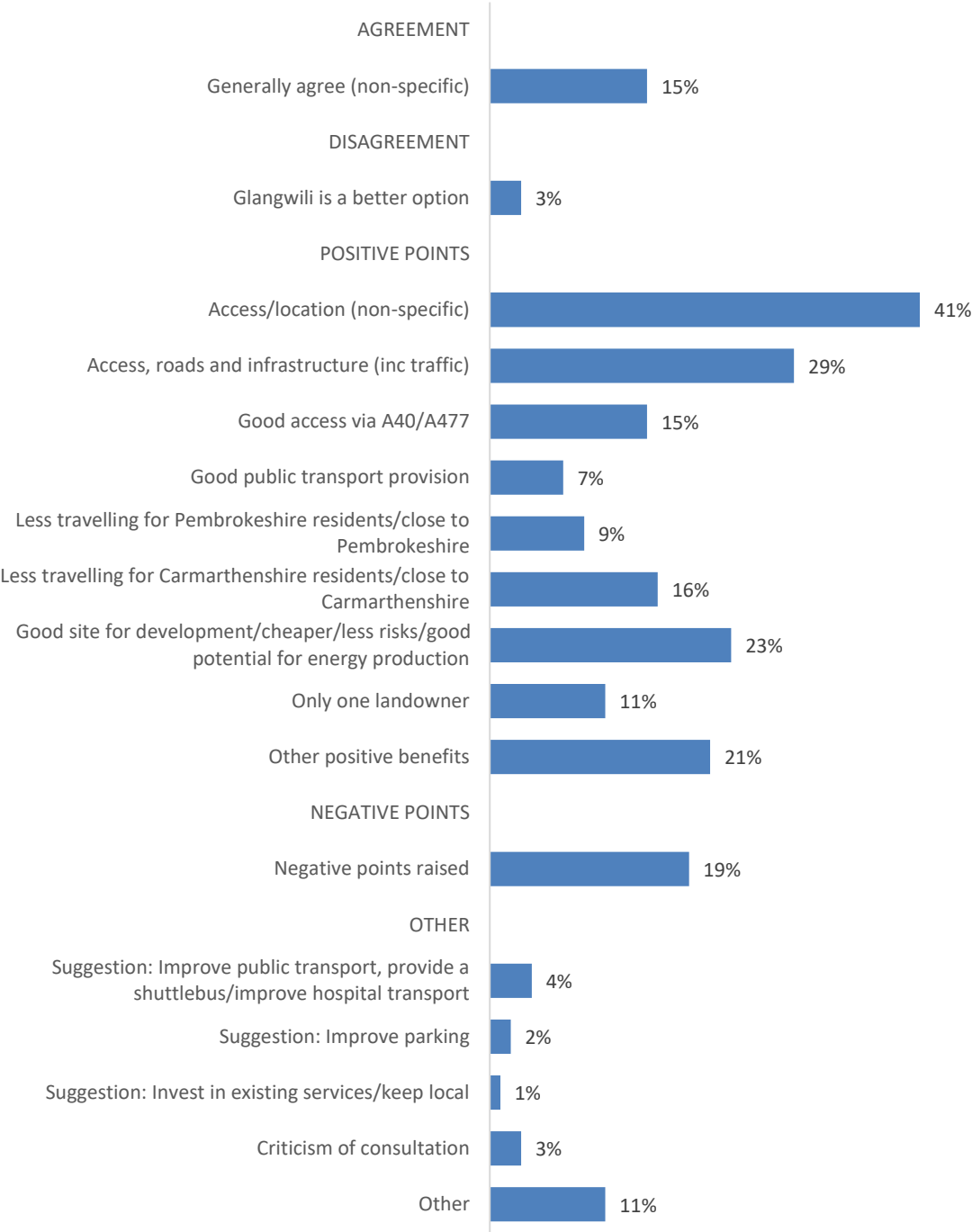
Base: \*NB results are marked with an asterisk (\*%) are based on low case numbers (<20)



Views on St Clears – Explanations Why

3.85 Respondents who thought that St Clears is a good choice for the new hospital were asked to explain why in an open text box. A summary of responses from those responding as individuals are provided in Figure 25. Because respondents could provide detailed feedback, some comments cover more than one point and therefore the total percentages may sum to greater than 100%.

Figure 25: If you think St Clears (formerly site 17) is a good choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)



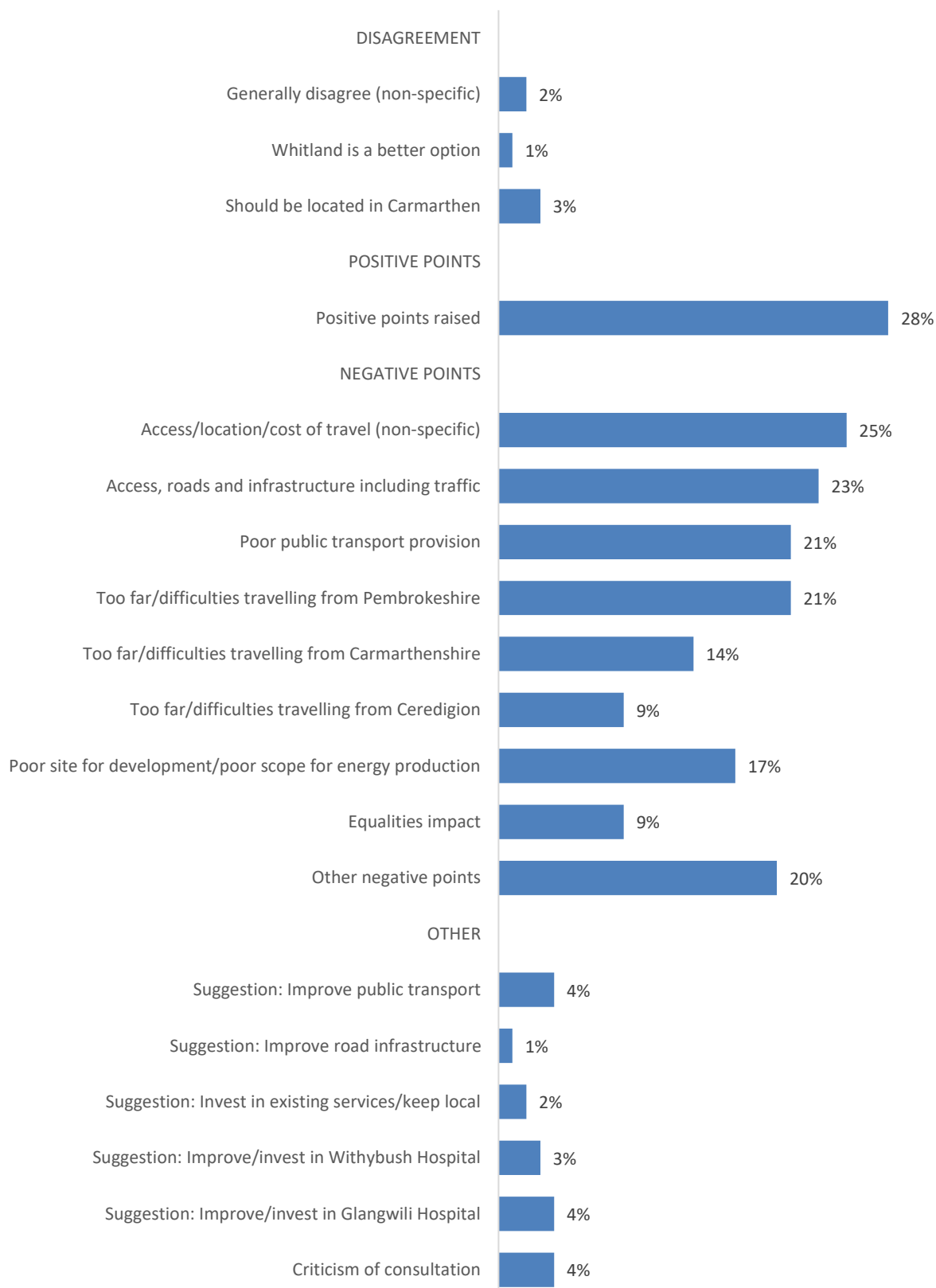
Base: Individual respondents thinking St Clears (formerly site 17) is a good choice for the new hospital (246), Points raised (561)

- 3.86 Of those who provided comments and raised points that were positive, just over two-fifths (41%) were related to location or access that were non-specific, just under three-in-ten (29%) related to access, roads and infrastructure, over one-fifth (23%) mentioned it was a good site for development and around one-in-six (16%) said it was closer to Carmarthenshire. 15% said there was good access via A40/A477 and the same proportion (15%) were in general agreement with the site as a good location.
- 3.87 However, over two-fifths (43%) of individual respondents who thought St Clears was a good choice for the new hospital commented that, nevertheless, Glangwili is a better option.
- 3.88 It is also worth noting nearly a fifth (19%) raised a negative point about this location, covering poor accessibility, poor public transport provision, it being too far from Pembrokeshire/rural areas, it being more expensive to develop, poor scope for energy production along with the site being too small, risk to patient outcomes and the increased traffic and road accidents during summer months (see Appendix II).
- 3.89 Whilst the figure on the previous page covers the majority of points made by individual respondents who thought St Clears was a good choice for the new hospital, a few comments raised more specific points including that there are good local amenities including hotel accommodation; that local roads are equipped to deal with the increased volumes of traffic, and that new housing under construction currently would be attractive to staff.
- 3.90 On the other hand, distance from the station was raised as a negative but this could be overcome by use of a courtesy bus. Also, the need for significant changes to the road layout to avoid congestion particularly during peak times was raised along with difficulties in recruitment of staff.

*Direct access, easy to access from major A road. Good local amenities for patients and visitors, including a hotel very local if any visitors i.e., family and friends of patients wished to stay close by. Surrounding area more readily equipped to deal with increased volume of traffic. New estate of houses being built in St Clears could be beneficial as staff members looking to move to the area to work within new site would be able to buy or potentially rent a home very close by. This one offers a more centralised option. It covers more of a variety of options and less fuss with only one owner. Double road options for access. No flood risk etc. All positive as long as the community hub concept is honoured ... I am very supportive of the county community hubs. Due to not being as far west for recruitment. We are a team that already struggles with recruitment. Recruitment is less of a problem. One landowner only to negotiate. Drawback - is the station reinstatement at St. Clears a given at this point in time or might not happen? There are three points of access - the A477, the A40 from Whitland and the A40 from Carmarthen. This will spread the traffic for staff and for patients. The road layout will need significant attention with underpasses or bridges to allow smooth access to the hospital site during peak times, to avoid the situation that occurs in Carmarthen traffic lights ... The station at Whitland is in the centre of the town, whereas St. Clears Station is more decentralised and a courtesy bus running between the railway station and the hospital to link with train times ... would encourage both staff and patients to utilise public transport ...*

- 3.91 Respondents who thought that St Clears is neither a good nor poor choice for the new hospital were also asked to explain why. A summary of responses from those responding as individuals is provided in Figure 26 (overleaf). Because respondents could provide detailed feedback, some comments cover more than one point and, therefore, the total percentages may sum to greater than 100%.

**Figure 26: If you think St Clears (formerly site 17) is neither a good nor poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**



**Base: Individual respondents thinking St Clears (formerly site 17) is neither a good nor poor choice for the new hospital (92), Points raised (208)**

- 3.92 A quarter (25%) had concerns around access, location or cost of travel that were non-specific, just under a quarter (23%) had concerns about access, roads and infrastructure and just over one-fifth (21%) had concerns about poor public transport provision and (21%) that it was too far from Pembrokeshire. Around one-in-six (17%) thought that it was a poor site for development.
- 3.93 A fifth (20%) raised other negative points such as the impact on the local area and residents, impact on staff, risk to patient outcomes, increased strain on emergency services and that the land was privately owned (as detailed in Appendix II).
- 3.94 Just under three-in-ten (28%) raised a positive point about the site including points around location, ease of access, good road links and infrastructure and that it was close to shops and amenities, also points around the site being good as it was large and improved patient outcomes (as detailed in Appendix II).
- 3.95 Whilst the figure on the previous page covers the majority of points made by individual respondents who thought St Clears is neither a good nor poor choice for the new hospital, a few comments raised more specific points including that St Clears is the most accessible site for people travelling the longest distances; good road access from Carmarthen; proximity to facilities in St Clears; potentially simple purchase arrangements and no flood risk. On the other hand, the negative impact of holiday traffic upon patients travelling from the eastern most areas was raised along with the congestion on the A40 between Carmarthen and St Clears.

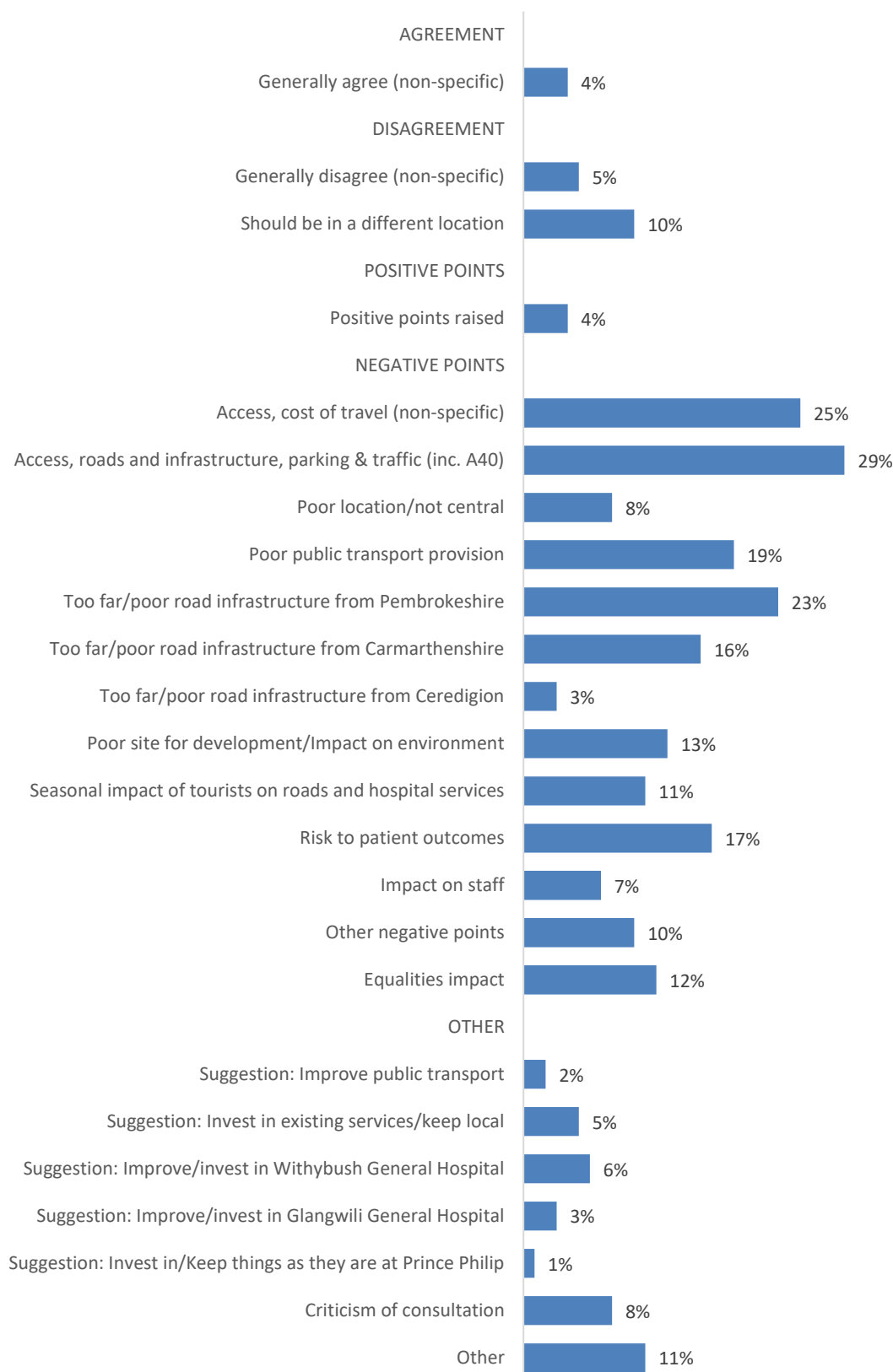
*... the distance and the holiday traffic are an issue, especially for patients travelling all the way from Llandysul/Llandovery and Llanelli etc. Also, GGH/PPH has an established staff, a lot of whom do not drive and live in the centre of Carmarthen, which could be an issue if they have to relocate. If the station is reinstated, this may help with this issue. This is the better of the three sites as it is the nearest and easiest for those being made to travel a long way.*

*Best of a bad lot. Still a considerable distance from the populous. Opening the rail station must be a central pillar of this development in terms of transport.*

*Reasonable road access from Carmarthen, the purchase of the site from one Landowner should be simpler and faster than from multiple landowners, and no flood risk. But there are often significant traffic delays on the A40, especially between Carmarthen and St Clears. Closer to facilities in Carmarthen for staff, making it more attractive for medical and support staff moving to the area.*

- 3.96 Respondents who thought that St Clears is a poor choice for the new hospital were asked to explain why in an open text box. A summary of responses from those responding as individuals is in Figure 27 (overleaf). Because respondents could provide detailed feedback, some comments cover more than one point and, therefore, the total percentages may sum to greater than 100%.

**Figure 27: If you think St Clears (formerly site 17) is a poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**



**Base: Individual respondents thinking St Clears (formerly site 17) is a poor choice for the new hospital (290), Points raised (734)**

- 3.97 Just under three-in-ten (29%) had concerns about access, roads and infrastructure and a quarter (25%) had concerns around access or cost of travel that were non-specific. Under a quarter (23%) thought it was too far or that there was poor road infrastructure from Pembrokeshire and just under a fifth (19%) mentioned poor public transport provision. Around one-in-six (17%) had concerns over the risk to patient outcomes and (16%) had concerns that it was too far or that there was poor road infrastructure from Carmarthenshire.
- 3.98 Whilst the figure on the previous page covers the majority of points made by individual respondents who thought St Clears (formerly site 17) is a poor choice for the new hospital, a few comments raised more specific points. Respondents criticised the 'cramped site', with no room for adequate car parking or future expansion and which is located next to the often congested and polluting A40 and, thereby, goes against biophilic principles. Also, there are questions over whether the rail station would reopen; the site is not in public ownership; there are concerns over the site increasing phosphate levels in the Afon Cynin; concerns over the improvements needed to the water and drainage infrastructure; concerns over nuisance and risk for local residents and lack of housing provision in the area for staff. The lack of onsite potential for renewable energy is considered to be an additional negative factor.

*This would be an appalling choice and I would have placed it lower than "very poor" if I had been able to. [...] This is a very cramped site crammed onto a triangle of land close to the exhaust and noise polluting A40 dual carriageway, contrary to biophilic principles [...] There is no room for expansion of the hospital itself [...] so this hospital would probably need replacing in the relatively short term, as there is no scope for futureproofing. No room for adequate, let alone plentiful car parking. Do not replicate the mistakes of Morriston Hospital, where parking for patients and visitors is a nightmare, despite the building of a multi-storey carpark. [...] There are very few buses after mid-afternoon leaving Haverfordwest and none on a Sunday. Train provision is dependent on the reopening of a rail station in St Clears which is putative, and has certainly not been costed in [...] Not in public ownership ...*

*Funding for a new train station has been agreed for St. Clears. However, recent reporting [...] calls this into question [...] The proposed site sits adjacent to the A40, close to the confluence with the A477 ... often traffic builds up causing delays, especially eastbound. Delays caused by traffic congestion would be detrimental, especially in emergency situations. The proposed site is the smallest and most 'landlocked', in that the potential for further development is constrained. The stated aims of providing a site with added future value, e.g., housing for workers or for diverse community use, would be the most limited of the options. Development of the site has the potential to increase phosphate levels in the Afon Cynin. This would be contrary to the focus from Natural Resource Wales on reducing levels in Carmarthenshire. The impact of a large hospital, including a heliport, in such close proximity to a residential area would be detrimental to the quality of life of residents in terms of noise pollution of a 24-hour facility. Increased volume of traffic from hospital patients and service providers in a residential area would pose a safety risk to residents, including many children. The water and drainage infrastructure would appear inadequate for such a sizeable development, requiring significant investment. There is inadequate housing provision in St. Clears for hospital staff. No onsite scope for renewable energy.*

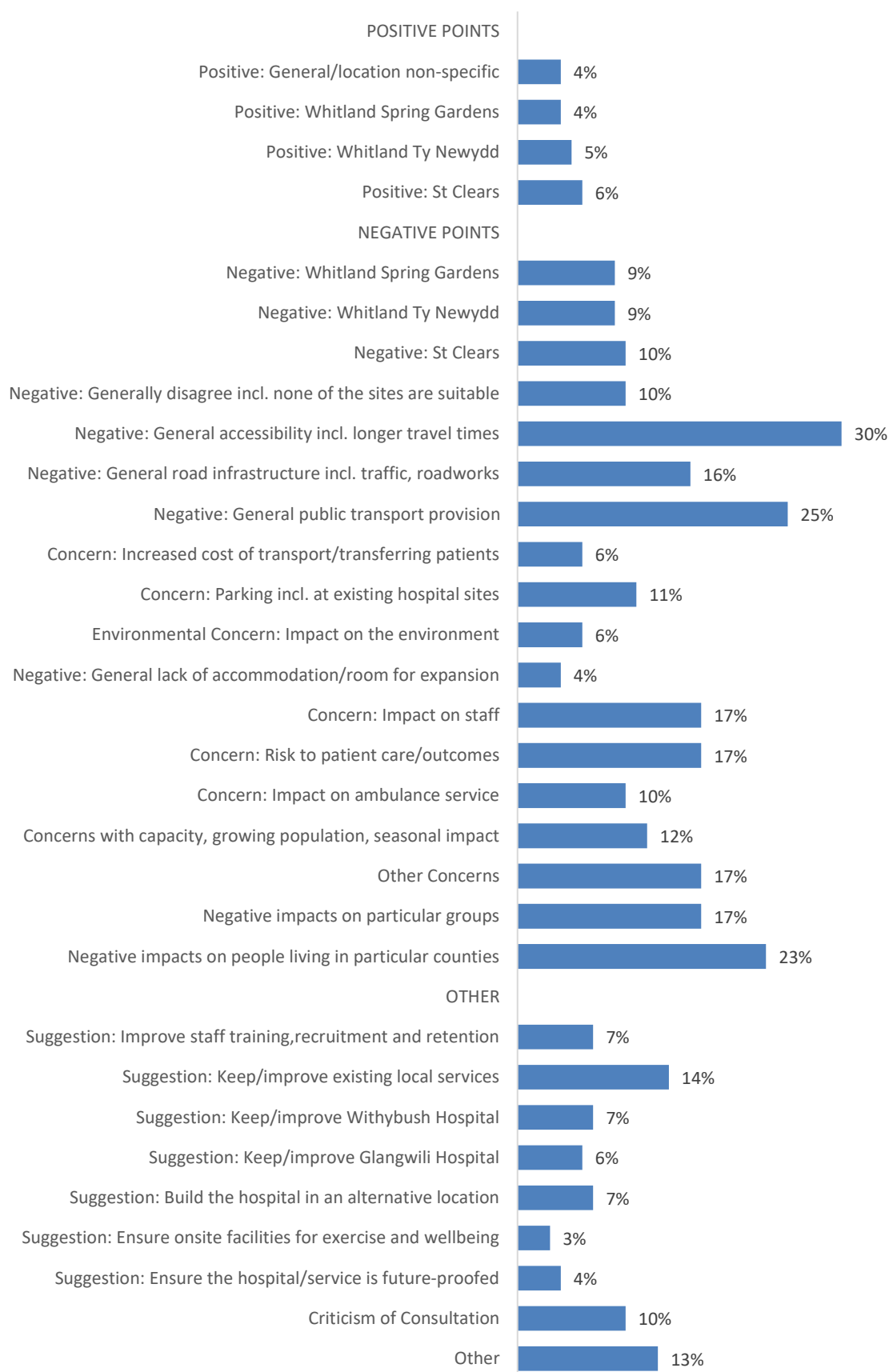
## Views on all three sites

- 3.99 217 respondents felt that all sites are either a fairly or very poor choice for the new hospital, mainly citing concerns around travel and access and staff recruitment and suggesting that retaining existing hospitals would be preferable. There was also some criticism of the fact that all three sites are in Carmarthenshire.
- 3.100 52 respondents felt that all sites are either a fairly or very good choice for the new hospital, citing the negligible differences between them in terms of their central location, easy access from the A40, and expansion potential.

## Additional considerations

- 3.101 Respondents were given the opportunity to provide further comments about any of the sites. A summary of responses from those responding as individuals is provided in Figure 28 (overleaf). Because respondents could provide detailed feedback, some comments cover more than one point and therefore the total percentages may sum to greater than 100%. In addition to this summary chart, detailed tables of coded text comments can be found in Appendix II of this report for reference.

**Figure 28: If you have any further comments about any of the sites, please explain (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**



Base: Individual respondents (503), Points raised (1,704)



- 3.102 The majority of those who provided comments took the opportunity to raise further concerns. Three-in-ten (30%) raised concerns about general accessibility including longer travelling times, with a quarter (25%) raising concerns about public transport provision in general. Just under a quarter (23%) mentioned negative impacts on people living in particular counties.
- 3.103 A tenth (10%) noted specific concerns relating to the St Clears location, 9% specific concerns relating to the Whitland Spring Gardens location and 9% noting specific concerns relating to the Whitland Tŷ Newydd location. These included points regarding accessibility to the sites, lack of accommodation and ability to expand, facilities and amenities, the impact on local residents. Also flood risk in relation to the Whitland Tŷ Newydd site (as detailed in Appendix II).
- 3.104 Respondents made a number of suggestions. Around one-in-seven (14%) suggested that services should be kept local, 7% suggested staff training should be improved or that there should be a focus on recruitment and retention, 7% suggested keeping or improving Withybush Hospital and 6% suggested keeping or improving Glangwili Hospital. 7% suggested that the hospital should be built in an alternative location.
- 3.105 Whilst the figure on the previous page covers the majority of points made by individual respondents for additional considerations, a few comments raised more specific points. Respondents suggested that there should be staff housing to rent or buy as a recruitment incentive and to increase patient accessibility in a number of ways: flexible public transport solutions, subsidised transport and accessibility to waiting time information for patients. They also called for a consideration to the needs of vulnerable people when planning access to the site.

*All hospitals are currently finding it hard to attract staff. I'm not sure if it's still a scheme but there used to be a discount scheme for hospital staff to buy property. I think the infrastructure should include the provision of housing for staff - be that renting, buying or Shared Ownership - to attract staff ...*

*For patient accessibility - we really need to see improvement in smaller, more frequent and cost-efficient transport that is flexible for patients. We also need to see improved directories of local taxis, community care etc. And for more vulnerable patients, we need to understand what further support may be available to access care services, such as paying for travel etc. For out of hours services - if the Healthier Mid and West Wales strategy is really going to have a positive impact, then we really need to see clear and transparent care pathways that are publicly accessible to view. We should take every effort to consider applications such as NHS Quicker (Cornwall NHS trust - transparency on waiting times in A&E and MIU so patients see live wait times and choose where best to go that supports the health system too) ...*

*I work with vulnerable families in Pembrokeshire, and I seriously worry about how relocation of services will affect them, both parents and children ... I worry that these families will be seen as not bothering or being unwilling to access services when there are barriers in place for them. [...] I just ask the health board to continue to seek the views of vulnerable people through joint work with agencies and individuals and break down any barriers that may arise as much as possible.*

3.106 Other concerns and suggestions were made by respondents, and these are presented below.

**Arguments in favour of retaining specialist services in existing hospitals; alternatively a site further east of St Clears; concerns over negatively impacting the future training status of the area; concerns over increasing travel times and impacts on the environment**

*A site further east of St. Clears would be better. [...] This site does not take into account data and evidence for the expert management for children and young people. [...] Withybush PACU does not just provide an acute assessment facility, but also provides for the day to day planned medical and nursing care of local children and young people. This site is moving the inpatient unit further west. Part of the reason for placing the inpatient unit in Glangwili was that for increasingly unwell children, they are moving closer to tertiary care. [...] moving the inpatient unit further west will increase the amount of travel by the vast majority of children requiring inpatient care, especially from our most deprived area in Llanelli. [...] We are currently fortunate to have visiting tertiary clinics from our colleagues in Swansea and Cardiff, and a move further west for tertiary clinics would make them even less efficient and potentially closing them [...] Recruitment to the paediatric team in Bronglais remains difficult, and these proposals do not address this. [...] Ongoing paediatric care in Bronglais is essential to support the Emergency Department there in its isolated position. [...] Glangwili was agreed between maternity, obstetric and paediatric colleagues as the best site for the Obstetric Unit and Special Care Baby Unit due to the flow of patients from various areas and where our greatest number of pregnant women lived (including some of the most deprived women). [...] Futureproofing has not been considered for maternity services in Bronglais, as in the future, Bronglais may become a midwifery led unit which would mean more women have to deliver in an Obstetric Unit, or potentially needing transfer to an Obstetric Unit, so placing it in a difficult to access area from the north of Ceredigion makes no sense. This site will negatively impact the future training status of our area. [...] I am also concerned about the environmental impact that changing the location of the hospital to this site will have. The number of families having to travel further west will escalate, as will the number of staff having to travel west with all of the concurrent increase in pollution that this will entail ...*

**Advantages of Ty Newydd for emergency expansion**

*... This site [Ty Newydd] gives option of space for a temporary emergency expansion when e.g., we have another pandemic, that allows isolation units or added treatment or office space to be near the acute hospital with e.g. modular porta cabins ...*

**Importance of including Welsh language provision in new hospital**

*... From the outset, plans for the new hospital need to ensure that the Welsh language is visible (above the English language) and used at the new site and that the Health Board provides opportunities for staff who would like to improve their Welsh language skills ...*

**Build in provision for orthopaedic services based on NCSOS recommendations**

*... The NCSOS 'Blueprint Report' regarding the future of orthopaedic services in Wales recommended the development of three regional surgical hubs for inpatient elective orthopaedic services, one in North Wales, one in Southeast Wales and one in Southwest Wales. The development of plans for the new hospital, regardless of the site selected, should give full consideration to the NCSOS report's recommendations and how resources and facilities for elective inpatient orthopaedics could be shared between Hywel Dda University Health Board and Swansea Bay UHB to maximise the effectiveness of resources, facilities and workforce across the two Health Board regions. This report also underlined the importance of ringfencing elective orthopaedic services to protect them from future winter/Covid/pandemic/other external pressures to ensure services are not paused due to such pressures in future. Plans for the new hospital, regardless of the site selected, must ensure the elective orthopaedic services are properly ringfenced and protected.*

**Clearer explanations/justifications are needed concerning the travel implications for Pembrokeshire**

*Questions were never fully answered by Hywel Dda [...] Why are you planning to leave the five largest areas in Wales with no major hospital at all? In 2011 the Census split showed 25% of Pembrokeshire residents being aged 65 and over - West Wales Care Partnership have released figures showing this has increased in 2021 to 26.7% If this new Hospital is built only approx. 7% of the Pembrokeshire population will be near to it. What about the other 93%, where are we being left? Why have the distance charts not been redone and updated? ...*

**Withybush hospital has the advantages of the nearby airfield**

*... The hospital at Withybush should not be downgraded. It should be updated. It has the advantage of the nearby airfield to fly in locum doctors and to fly out organs for transplant to the transplant centres ...*

**Preferred site: brown field site with infrastructure and services already in place in central Carmarthen**

*... None of these sites are acceptable ... There is a brown field site directly next to the current hospital at Carmarthen. This is now in use, but it could be compulsory purchased for far less than the current proposals, as this has mains water, electricity and drainage already in place. This would enable efficient use of services such as blood testing, x rays etc. as they could be shared with the existing site. Staffing would be less of a problem. There is a current bus service to the site. The station is not far away. None of these are available to the sites proposed.*

**Suggestion to reduce on call team requirements**

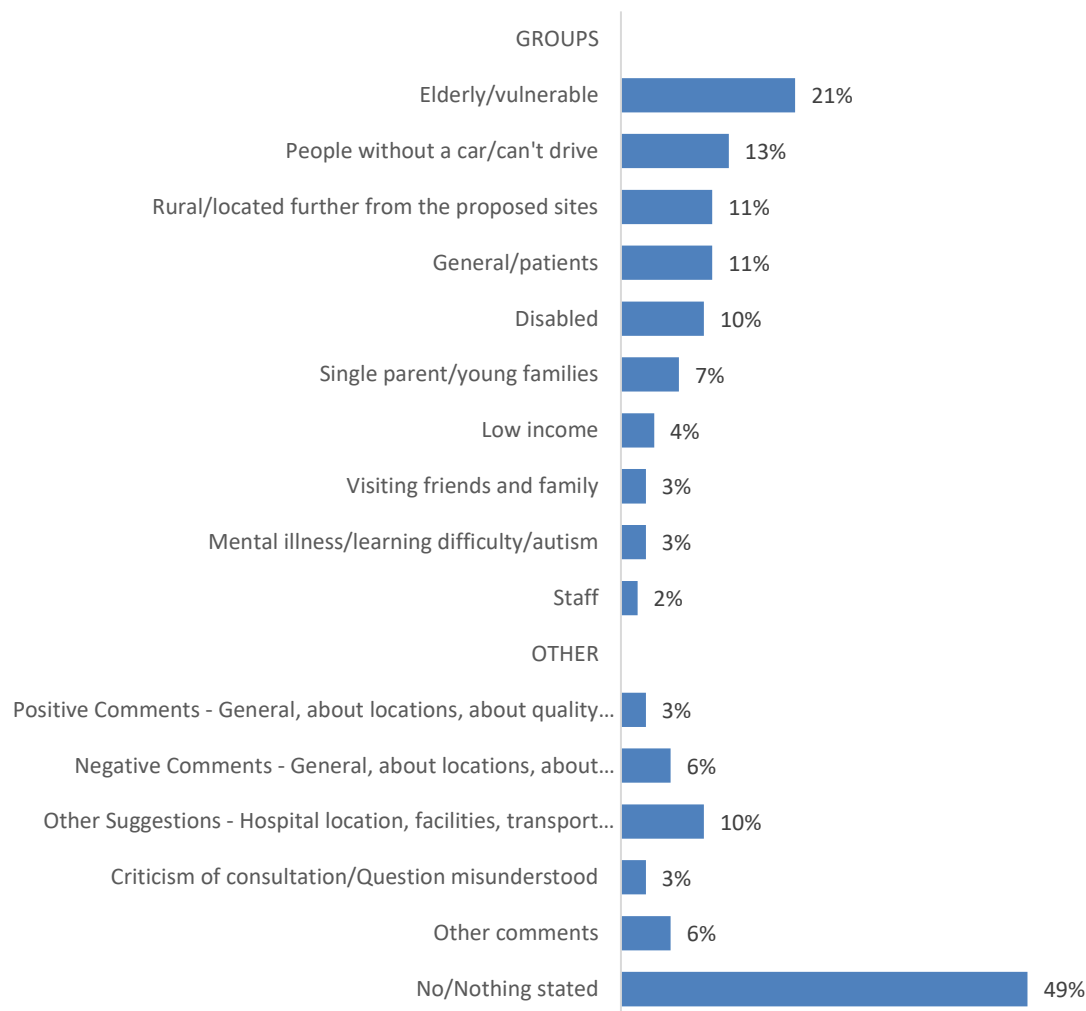
*... If the new hospital is built with X elective orthopaedic ring-fenced beds 10 miles away so they cannot be accessed, they could also have those X ring fenced beds onsite but with an absolute exclusion of non-elective patients. This provides for urgent and planned medical opinions and a greatly reduced level of on-call team requirements for T&O, medics and anaesthetists.*

## Respondents' views on potential equalities impacts and mitigations

<sup>3.107</sup> All questionnaire respondents were invited to identify any groups of people that they believed might be positively or negatively affected by any of the sites being considered and to explain how any positive impacts might be enhanced or negative impacts reduced. Figure 29 summarises the groups/people identified while

3.108 Figure 30 highlights the types of positive/negative impacts that were stated in the same comments, and how they might be mitigated, from those responding as individuals.

**Figure 29: Are there any particular groups of people that you believe might be positively or negatively affected by any of the sites being considered? If so, what groups are these? (individual questionnaire respondents only) (Because respondents could provide detailed feedback, some comments cover more than one point/group and, therefore, the total percentages may sum to greater than 100%) (Percentages are of all individual respondents excluding don't know)**



**Base: Individual respondents (826), Points made (1,344)**

3.109 Just over a fifth (21%) of individual respondents identified elderly/vulnerable people as a group they believed might be positively or negatively affected by the proposed changes. Around one-in-eight (13%) identified impacts on people without a car or who can't drive. Just over a tenth (11%) identified impacts on those living in rural locations or further from the proposed site and a tenth (10%) identified impacts on people with a disability.

3.110 Just over a tenth (11%) identified that all patients would be affected or there would be a positive or negative impact in general.

3.111 Nearly half (49%) of individual respondents either did not think that any groups would be positively or negatively affected by any of the sites being considered or did not provide a comment.

- 3.112 Some respondents gave comments that were more generic to the consultation itself including a tenth (10%) of individual respondents raising other suggestions regarding hospital location, facilities, transport and infrastructure, staff related issues and visitors.
- 3.113 A few respondents raised more specific points about the groups/people they believed might be positively or negatively affected by the sites being considered. Access to the sites especially by public transport was raised as a concern owing to increasing risks for particular groups including those accessing maternity care and treatment, older people, those living with disabilities, ethnic minority people, young people, young families anxious about not having easy access to emergency health care and paediatrics, low waged staff members and people more generally who are disadvantaged by living in rural areas. Significantly, many of these people, it is argued, are Welsh speakers. Respondents suggested that residents of Pembrokeshire will be particularly disadvantaged by the proposals owing to the potential risks inherent in the tourism and heavy industries of the county, and emergency healthcare services being located at some distance. Areas, like Lampeter, with high proportions of older people and people with health vulnerabilities and disabilities would be a particular concern and respondents suggested that distance from emergency care may cause residents to leave such areas, thus negatively impacting Welsh speaking in these traditionally Welsh communities.

*Age - negative impact for those travelling further to proposed sites, and uncertainty about accessibility and public transport. As far as I am aware bus services between Pembrokeshire and Whitland / St Clears are non-existent. Pregnancy / maternity - negative impact where increased travel times and risks to health where there are complications. Disability - negative. Again, access to new sites. We need proposals on how additional bus services would be funded. Welsh language - potential for negative impact.*

*... For disabled residents in the region (and there are many disabled residents in Lampeter and the surrounding villages), having emergency healthcare taken even further away means that it will be difficult and dangerous to continue living in this area. Unfortunately, it may mean that we may have to move away. This would be a shame for each family affected, and for each community that will lose residents [...] It is also worrying for the future of local communities to see young residents, local Welsh speaking graduates now discussing how it would be better to move away and build careers / have families in areas where there will still be access to emergency healthcare for themselves, future children etc.*

*Only in so much that people from ethnic backgrounds quite often are the poorest in society so accessing the site without decent transport links could be an issue.*

*Paediatrics - staffing will be more difficult. Carmarthen is already far enough for many people to travel with an unwell child ...*

*People without a car on low incomes. A lot of Glangwili staff in the laundry and housekeeping jobs walk or have a short journey to work. Carmarthen has a pool of people for these jobs. A lot of these staff are unlikely to travel to Whitland. There is a much smaller pool of people to do these vital yet lower paid jobs.*

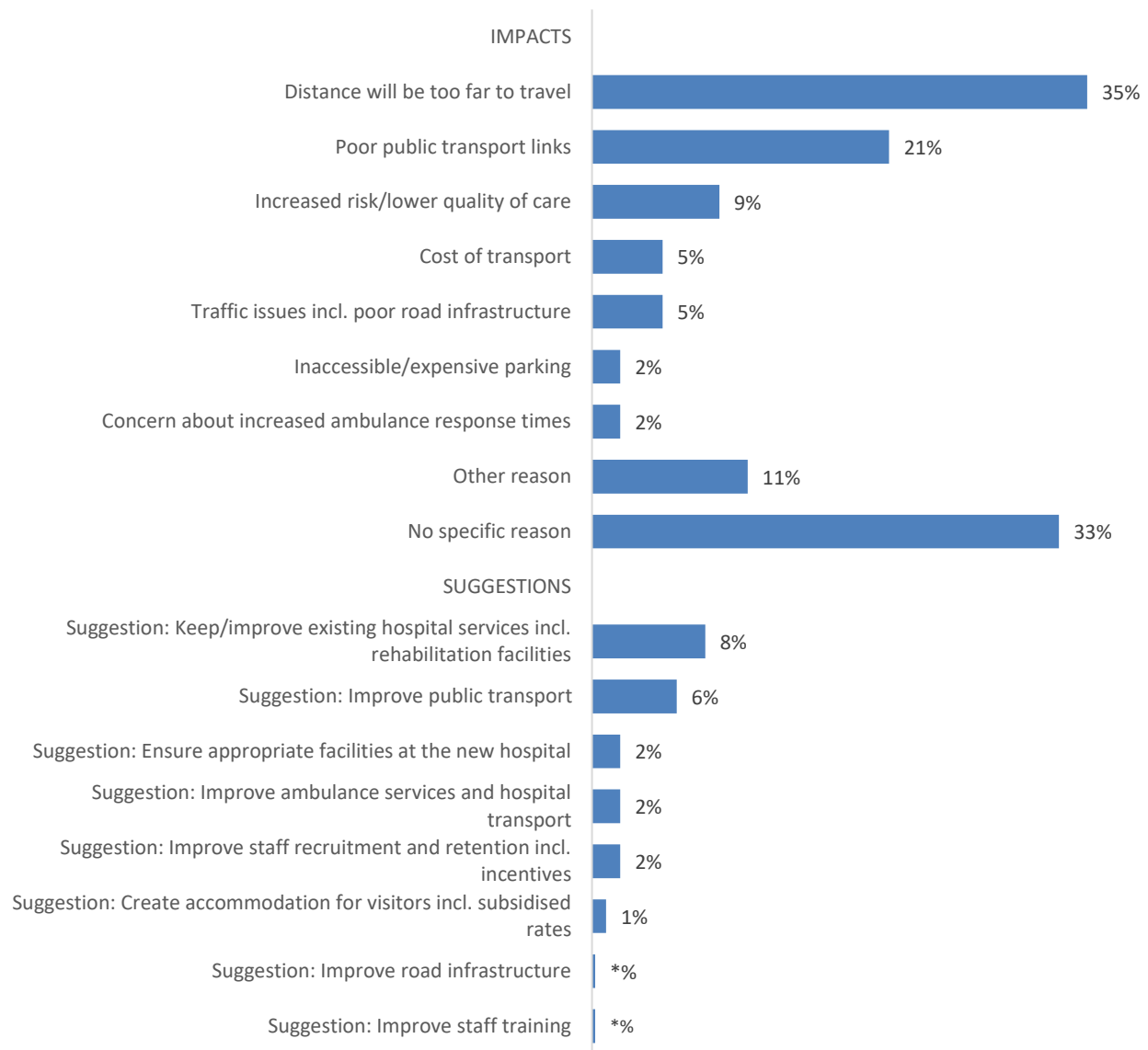
*... We would hope that you are working with people from protected characteristic groups to have a clear understanding of the impact. Due to cost of living, people including young persons will need support to access services.*

*The small rural populations of Pembrokeshire are disproportionately disadvantaged by the use of population weighted average measures of the impact of increased travel time, as settlements of <1000 people are completely disregarded. This ignores the much longer and less safe travel time for people who don't live in large areas of population, many of which, by definition are already further away from the proposed hospital sites and are often Welsh speaking rural areas and are already disproportionately affected by the lack of facilities and infrastructure in these areas. The consultation talks about the Hywel Dda health board area currently having more sites per head of population than the rest of Wales, without taking into account the distribution of those populations, the geography and transport issues in the area, the vast increase in the population during the summer months, and the presence of oil refineries, MOD ranges, power stations, ports, and LNG terminals in the area - all of which have the potential for major incidents to occur. These factors combine to disadvantage the population of Pembrokeshire by taking urgent care facilities further away, and this should be mitigated by using the furthest west feasible site for the new hospital.*

*The Lampeter region has a considerable proportion of residents with disabilities and health vulnerabilities, as well as many elderly residents. Disabled residents from this region will be particularly affected by the increased distance from emergency care. Them and their carers will also be negatively impacted by the increased distance to all hospital care at the new sites. However, it is clearly the reduced level of access to emergency treatment that is the most dangerous. Many residents, including my own family, have concerns to the extent that they are considering that it may not be safe for disabled people, the elderly, or those with health vulnerabilities to remain living in this particular region. This then poses a risk to the local community itself - the region has a settled Welsh speaking community which will be at risk if residents feel compelled to relocate nearer to healthcare provision. ...The long-term future of the Welsh speaking community will also be affected if young people, for example those in my own family, feel that the reduced access to emergency care means that it is safest to move away from the area rather than remain here to build careers and raise future families. Overall, it is a very worrying time for the Lampeter area and will impact particularly negatively upon those with disabilities and health vulnerabilities.*



**Figure 30: Types of impacts suggested by respondents in response to the same question (individual questionnaire respondents only)** (Because respondents could provide detailed feedback, some comments cover more than one point and therefore the total percentages may sum to greater than 100%) (Percentages are of those providing a comment to this question, excluding those saying no groups would be impacted)



**Base: Individual respondents (423), Positive/Negative Impacts raised (754)**

- 3.114
- Of those individual respondents who provided a comment to this question (excluding those stating no groups would be impacted), just over a third (35%) identified that distance being too far was a potential impact and just over a fifth (21%) mentioned poor public transport links. Just under one-in-ten (9%) had concerns about increased risk or lower quality of care being provided. A third (33%) gave no specific reason.
- 3.115
- Some respondents gave suggestions for how to enhance any positive impacts or mitigate any negative impacts, including 8% suggesting that existing hospital services should be kept or improved and 6% suggesting that public transport should be improved.
- 3.116
- Individual respondents made suggestions to alleviate any potential negative impacts arising from the proposals for particular identified groups. These suggestions were for: expanding the Pembrokeshire



flexi-bus; ensuring that public transport caters to shift patterns of staff, visitors and patients and that 'delivery and collection hubs' be provided; locating specialist treatment clinics in the new hospital so that older people do not need to travel to Morriston or Prince Phillip hospitals; providing subsidised on-site accommodation for hospital visitors; involving people with protected characteristics and disadvantaged groups in the design and delivery of services; ensuring speedy transfers for emergency treatment, and providing information to residents about appropriate access to services; improving the local infrastructure to encourage skilled professionals to the area; early support for older people and appropriate rehabilitation through multidisciplinary teams to limit hospital stays and ensuring that the new hospital structure does not result in a loss of beds overall.

*Age related issues regarding transport. There is a flexi-bus in Pembrokeshire which could be expanded. More specialised treatment clinics at the new hospital would be beneficial as the current system to travel to Morriston and Prince Phillip is undesirable when ageing.*

*Distance affects those visiting the dying, people with disabilities, older people, people with learning difficulties and mental health issues, also babies and children. Subsidised accommodation on site could mitigate some of this.*

*Effective communication about these very significant changes is essential with particular efforts needed to reach people with protected characteristics and other disadvantaged groups.*

*Consulting with these groups to ensure they are not only able to participate in the consultation but also in the design and delivery of services is essential to ensure needs are met.*

*I feel that centralising specialist care for individual needs does have advantages, but it has to be done in connection with providing adequate support to the public to know which services to access appropriately. There should also be a means of transferring patients to appropriate areas in a timely manner for emergency treatment when they attend inappropriate service areas.*

*Whilst developing this new hospital, the community models in health and social care need revising to reduce current and future risks.*

*Positive impact could be for bringing skilled workers/young professionals to Whitland. Negative impact would be on local residents, but the local infrastructure would need to be enhanced e.g., new homes, new shops, GPs and local schooling.*

*There should be available public transportation which needs to cater to the shift patterns of the staff, as well as visitors and those attending consultations/procedures. Using taxis will be very expensive if one is coming from Fishguard, St Davids or further away.*

*In my experience, support for the elderly at an earlier stage will prevent long hospital stays and help with bed management and blocking. Please make sure that appropriate rehabilitation support with multidisciplinary teams is available. I have been involved in this process many years ago in NHS Forth Valley where two hospitals were replaced by one. The new hospital had fewer beds than the two previous hospitals, and no primary care services were put in place to manage the changes. It caused chaos for many years and affected mostly the elderly.*

*Those without any transport. Delivery and collection hubs need to be provided.*

## Questionnaire feedback from organisations

3.117 Three organisations thought that Whitland: Spring Gardens (formerly site 12) was a good location for the new hospital (two fairly and one very good). Three thought Whitland: Spring Gardens was neither a good nor poor location and seven thought that Whitland: Spring Gardens was a poor location for the new hospital (two fairly and five very poor).

3.118 Organisations that believed that Whitland: Spring Gardens (formerly site 12) was a good location for the new hospital, explained that access via the A40, public transport and the railway station are good, and the site is well located on the edge of the town with potential for future expansion. Although close to the town centre, it is, nonetheless, on the edge of the built-up area and is unlikely to cause significant congestion.

*Railway Station, access to A40, green field site, on edge of village, less congestion, potential for more land adjacent to site could be resourced [Whitland RFC Ltd]*

*Plenty of space. Fairly accessible to A40. Close to town centre and public transport [Llanstadwell Community Council]*

*Close to A40 and fairly close to train station [HDdUHB Mental Health and Learning Disabilities Directorate]*

3.119 An organisation that believed that Whitland: Spring Gardens is a poor location cited the distance to the railway station and the walk from there to the site.

*The distance from the nearest railway station [...] walk dependant on where on the land parcel [Railfuture Cymru-Wales]*

3.120 Six organisations thought that Whitland: Tŷ Newydd (formerly site C) was a good location for the new hospital (two fairly and four very good). One thought Whitland: Tŷ Newydd was neither a good nor poor location and six thought that Whitland: Tŷ Newydd was a poor location for the new hospital (one fairly and five very poor).

3.121 Organisations that thought that Whitland: Tŷ Newydd (formerly site C) was a good location for the new hospital explained their reasons. Proximity to the rail station with a potential flat walk to the site was mentioned by one of them. Other reasons were that the site is publicly owned, is accessible from the west of the Hywel Dda area and is the only site that has potential for on-site renewable energy.

*It is near Haverfordwest, before Whitlands roundabout. It is on public land and building can start quicker. [Lynnefield Care home]*

*How close it is to the railway station. Only 200m walk to the nearest part of the site and no rise, with the bulk of the land parcel under 1000m from the station [Railfuture Cymru]*

*... We [...] feel that any hospitals being built from scratch should be investing in technology which enables them to be at least carbon neutral going forward. This site is flagged as the only site with potential for on-site renewable energy [Pembrokeshire Friends of the Earth]*

3.122 An organisation that thought that Whitland: Tŷ Newydd was a poor location cited its unsuitability for areas to the north.

*Whitland is not suitable for patients living on the upper part of the County bordering Ceredigion [Llanllwni Community Council]*

- 3.123 Five organisations thought that St Clears (formerly site 17) was a good location for the new hospital (one fairly and four very good). Two thought St Clears was neither a good nor poor location and six thought that St Clears was a poor location for the new hospital (two fairly and four very poor).
- 3.124 Organisations that thought St Clears (formerly site 17) was a good location for the new hospital explained that it offers easy access via the A40 and A478 from South Pembrokeshire and is near to the main centres of population in Carmarthenshire. They did, however, express some concerns over accessibility to all of the proposed sites via Carmarthen particularly during summer and a need for a link to the proposed railway station.

*Best access to A40 and A 478 therefore easiest access for South Pembrokeshire. Nearest to main centres of population in Carmarthenshire. Least risk of patients opting to travel to Swansea [Llanstadwell Community Council]*

*We are only in favour of this site due to its proximity to St Ishmaels, Carmarthenshire. We would be far more in favour of the hospital remaining in Carmarthen. We have concerns regarding accessing the A48 and getting through Carmarthen towards ALL of the sites. The journey would be far longer in summer months when Carmarthen is regularly gridlocked with traffic for hours at a time [St Ishmael Community Council]*

*Roads to here are better particularly with regard to population masses. A link with the new to be opened/built soon railway station would be really useful. Better access from south Pembrokeshire, the west and further north [Preseli Rural Transport Association]*

- 3.125 Organisations that thought that St Clears was a poor location cited the distance from the nearest rail station, the lack of potential for on-site renewable energy and the lower than target reduction in emissions implicit in the initial plans for the site as presented in the consultation document.

*The distance from the nearest railway station (once built) ... [Railfuture Cymru-Wales]*

*This is farther from train links, and again has no potential for on-site renewables. It is not clear from the consultation why not. The consultation refers to reductions of emissions by 30% - this is well below the required targets for a building which won't even be in existence before the 2030 deadline. Improving the health of the population is of little value if we fail to tackle the greatest threat to the long-term health and well-being of our population which is the impact of the climate emergency [Pembrokeshire Friends of the Earth]*

- 3.126 Organisations were given an opportunity to provide further comments about any of the sites in their responses to the questionnaire, including aspects that they thought had not been considered. Concerns over the viability of services at the new site were raised since all sites are to the west of Carmarthen and would potentially lead to patients seeking health services elsewhere. For instance, Llanelli patients might choose to access services in Morriston Hospital. Also, questions were raised over the willingness or ability of staff, including non-skilled staff, to travel the extra distance, and for consultants to locate away from main urban areas and the amenities available there. The impact of Welsh Government's proposals to reduce subsidies for public transport and reduce motorway speed limits from 70 to 50 mph from Pont

Abraham to the west were also raised as concerns over access to the proposed site. Also, respondents questioned whether the potentially negative impact on air ambulance services, particularly during summer months, was considered in development of the model.

*All three sites are basically acceptable. The risk is that the further west the site is the less total number of patients will use it which may render some services potentially non-viable. Non-skilled staff are essential, and they are unlikely to travel long distances to work so the new facility needs to be closest to larger centres of population [Llanstadwell Community Council]*

*... it would not take too much of a tilt in patient numbers and staffing to render whole swathes of services currently provided at Glangwili un-viable at the new sites ... serious questions around transport and access to the new hospital site remain unresolved. [...] More worrying yet were staff comments at the Zoom session on the 16 April where medical staff raised concerns over the movement of the service west of Carmarthen. This in their opinion would reduce accessibility to staff and interest at working at this out-of-town location. Coupled with the potential loss of Llanelli patients to Morriston ... There is danger of rendering a swathe of services at the new site unviable before it has even opened. [...] The change in availability and location of health services is likely to massively increase the pressure on the Air Ambulance yet little effort seems to have been made to model this change with realistic transport timings during the summer tourist peak [CRAiG Sir Gar]*

*All these sites are over one hour from where I live and run my business in Cyngordy, North of Llandovery. Due to the nature of the business that we operate (outdoor pursuits) we have to visit Glangwili regularly. Moving the A&E from Carmarthen will leave us an unacceptable distance from critical care facilities [Llanerchindda Farm Guesthouse]*

*Councillors for Llanelli Rural Council opined that Llanelli residents would not use the new hospital irrespective of where the preferred site turned out to be. This was because of the greater travel distance involved compared to currently having to travel to Glangwili Hospital, Carmarthen which in itself was not ideal. Given the choice, they felt the general public would opt to use Morriston Hospital which was much closer ... There were concerns expressed about the sustainability of public transport in West Wales given the ongoing reductions in government funded subsidy payments across all areas of Wales and this was compounded by a limited timetable for bus and train services for those people who relied on public transport. [...] Members also remarked that the health board was likely to struggle to recruit sufficient number of skilled clinicians because relocating to rural parts of West Wales was not appealing from a professional standpoint and this would detrimentally impact the health board with it likely having little choice but to pay higher salaries to attract the right calibre of person. ... It was felt the majority of doctors and nurses would not wish to commute on a daily basis over longer than average travel distances from major towns/cities and many would prefer to live near urban areas to gain full and timely access to services, shops and entertainment venues. [...] When this item was recently debated in the council chamber it was mentioned that Welsh Government was contemplating reducing the speed limit from 70mph to 50mph along the main dual carriageway from Pont Abraham Service Station at the end of the M4 motorway down to Tenby and the west. [...] If this was indeed to be the case, reducing speed limits would increase travel times to the new hospital site. [...] While it was noted that none of the three site proposals favoured Llanelli residents it was remarked that retaining services at Prince Philip Hospital was paramount and so the further endorsement of SOSPPAN's (the local pressure group) 'B+ proposal' for the hospital was advocated [Llanelli Rural Council]*

- 3.127 Suggestions for overcoming the issue of staff and patient access to the site, reducing reliance on access by car and ensuring sound environmental practice were made by one organisation which suggested a 'rapid, reliable and effective transport link' as central to the choice of site and solar energy driven electric car charging points:

*The success of this project will depend on its ability to attract staff. Staff will therefore have to travel to the site from all over West Wales. A rapid, reliable and effective public transport link is vital for this project and must be front and centre to decisions about the siting of the hospital. This is clearly seen at Glangwili where parking is such a major problem and there is no alternative to the use of a car. There are a growing number of elderly patients who can no longer drive due to health issues and these people must be catered for. There will also be a need for electric car charging points which are much more efficient if they are combined with on-site solar energy. If the trust are serious about improving the health of the population of West Wales, they must take these environmental issues much more seriously. The future for our children and grandchildren depend on this [Pembrokeshire Friends of the Earth]*

- 3.128 The risk of flooding at Tŷ Newydd was raised as a concern but suggestions for overcoming footpath access over the flood plain area from the railway station to the site were made by one organisation. These included constructing elevated walkways which would provide the added potential for geothermal piles to supply a heat pump central heating and cooling system.

*The parts of Tŷ Newydd (formerly site C) closest to the railway station (those south of the railway line) fall in the medium-risk flood zone, and so one would have normally assumed they would not be used. This would be a mistake, as it would increase the walking distance between the hospital and the station. This could be overcome in a minimally invasive and 'working with nature' manner by using the slab-on-stilts / plinth-on-piles construction method in that area to raise the base of the structures (and the access footpaths) above the flood level. [...] Additionally, such a method would allow the use of geothermal piles to supply a heat pump central heating + cooling system [Railfuture Cymru-Wales]*

- 3.129 Organisations were given an opportunity in their responses to the questionnaire to identify any groups of people they believed might be positively or negatively affected by any of the sites being considered and to explain how any positive impacts might be enhanced or negative impacts reduced. Again, challenges were raised in regard to access to the new site from western most areas, the increased distance of emergency healthcare services from the industrial and tourism areas of west Pembrokeshire and the need for involvement with Welsh Government and transport agencies to overcome these issues. Other suggestions were for an on-site hotel and conference facility for visiting relatives which would double as a facility for NHS events.



*Residents of South Pembrokeshire will find access easiest to St Clears. Users of public transport will find it easier than current access to Glangwili. People driving there should find parking easier than at either Withybush or Glangwili. People living to the west of Haverfordwest - Dale and St David's peninsulas and Fishguard/Newport areas will find travel times significantly greater. Transport links from Ceredigion are not as good as those to Carmarthen. Discussions need to be held with Welsh Government and transport agencies to consider how best to address this issue. Development of a hotel/conference facility on site (similar to that at the Golden Jubilee Hospital Clydebank would mean relatives (and outpatients) could stay at a subsidised rate if they wanted. The facilities can be used by the NHS for conferences and training events and the facilities can be available to the general public and other organisations at commercial rates. Concern has been expressed regarding the potential lack of A&E facilities at Withybush because of the heavy industry located in Pembrokeshire (Oil/Gas/Maritime) should there be a major incident. Equally, there is concern regarding the high number of tourists being able to access A&E should they need to. Robust plans to mitigate these risks need to be produced and publicised [Llanstadwell Community Council]*

- 3.130 Design of the site to maximise the potential for pedestrian access from the rail station was again suggested including orienting the public side of the building in that direction; clear signposting, and a well-lit covered walkway; and car parking located on the opposite side from the station and away from the front of the building.

*Choosing the site with the least distance from a railway station on the West Wales Lines – i.e., Tŷ Newydd (formerly site C) – would make it most accessible in terms of people with mobility difficulties (e.g., disability and pregnancy categories), as well as for people with low incomes (not having a car, combined with less public transport costs from needing to use a bus between the station and hospital) and those with small children. Secondly, such benefits could be maximised by orientating as much as reasonably possible, the public side of the site (inpatient check in, outpatient clinic spaces, etc, towards the side of the site closest to the railway station, with a clearly signposted and lit walking route between. Said route needs to be elevated when crossing any floodplain and could be enhanced with contrast pavement colouring / a wayfinding paint line on the pavement. Consideration should be given to making it a 'covered walkway' from station to hospital, given the reality of how rainy our climate is here, this would also reduce the burden of anti-ice/snow work. To this end services and back-office buildings should be situated away from the station, and car parks (aside from possible blue badge spaces) should not occupy any land between the public side and station, ideally being placed on the opposite side of the site to the station. Placing car parks at the front of the hospital has been an all-too-common mistake in past new sites / site reconstruction. Walking through car parks can also be off-putting and dangerous for patients and visitors (someone was killed by a car beside a car park at Ysbyty Glan Clwyd not long ago) [Railfuture Cymru-Wales]*

- 3.131 Particular groups that should be considered were highlighted by one organisation. These include older patients and others who depend on public transport. Welsh speaking patients, if displaced to Swansea would be less likely to access services where Welsh is spoken as in Carmarthenshire.

*Elderly patients and those dependent on public transport will be particularly badly affected by the move to a more rural location as the new site is poorly connected to public transport and many will need to travel long distances to access urgent and planned care. Moreover, the likely displacement of patients and services such as maternity and obstetrics to Swansea will undermine access to Welsh Language based healthcare given the lower levels of Welsh spoken outside Carmarthenshire. This is likely to produce further dislocation and disadvantage for Welsh speaking Carmarthenshire and Ceredigion residents [CRAiG Sir Gar]*

# 4. Staff engagement

## Staff drop-in events and meetings

### Introduction

- 4.1 HDdUHB hosted 11 staff drop-in events and eight meetings for specific staff groups between March and May 2023. The former were all held in-person, while the latter were all online with the exception of the Senior Pharmacy Leadership Team meeting.
- 4.2 The drop-in events were attended by 297 staff members, and the meetings by 181 staff members. The distribution of events, the dates on which they were held, and the number of people engaged are presented in the table below.

Table 8: HDdUHB staff drop-in events/meetings

Event	Date (2023)	Number of people engaged
STAFF DROP-IN EVENTS		
South Pembrokeshire Hospital drop-in event	Monday 27 February	26
Bronglais Hospital drop-in event	Tuesday 28 February	15
Llandovery Hospital drop-in event	Tuesday 28 February	17
Aberaeron Integrated Care Centre drop-in event	Wednesday 1 March	9
Tenby Hospital staff drop-in event	Wednesday 1 March	4
Amman Valley Hospital drop-in event	Thursday 2 March	8
Cardigan Integrated Care Centre drop-in event	Friday 3 March	27
Prince Philip Hospital drop-in event	Friday 3 March	34 (including targeting wards)
Glangwili Hospital staff drop-in event	Monday 6 March	97 (including targeting wards and offices)
Withybush Hospital staff drop-in event	Monday 6 March	51 (including targeting wards)
Tregaron Hospital drop-in event	Thursday 27 April	9
STAFF MEETINGS		
Senior Pharmacy Leadership Team meeting	Wednesday 8 March	20
Monthly Finance Team meeting	Wednesday 15 March	73



Event	Date (2023)	Number of people engaged
Mental Health Team BPPAG meeting	Thursday 23 March	23
HDdUHB Capital Sub Committee meeting	Friday 24 March	12
Withybush Medical Staff Committee meeting	Monday 3 April	13
Partnership Forum meeting	Tuesday 4 April	17
Local Medical Committee meeting	Thursday 11 May	13
Therapies and Health Sciences Forum Meeting	Monday 15 May	10

4.3 The key questions and themes arising from these events are reported in this chapter.

Key findings from staff drop-in events and meetings

Views on the proposed location of the new hospital

Whitland: Spring Gardens

4.4 Staff attendees in support of Spring Gardens highlighted its access from the main road; its accessibility from specific geographical areas (Pembrokeshire and south Ceredigion in particular); and the fact that there are housing developments close by which might accommodate staff.

Table 9: Why is Whitland: Spring Gardens a ‘good’ choice for a new hospital?

Sub-Theme	Example Comments
Good access by road and rail	<i>Spring Gardens has the best access from the A40 (Tenby Hospital)</i> <i>Spring Gardens is a top choice – Whitland bypass is very good (Glangwili Hospital)</i> <i>With Whitland accessible by train ... Whitland is a better option (Prince Phillip Hospital)</i> <i>Spring Gardens is on the A40 (Withybush Hospital)</i>
Accessibility for Pembrokeshire and south Ceredigion residents	<i>Whitland makes more sense for Pembrokeshire patients (Cardigan Integrated Care Centre)</i> <i>Good for Cardigan people as most will drive down from Cardigan (Cardigan Integrated Care Centre)</i>
Housing developments nearby	<i>There is a development of 72 new houses in Whitland on building land near Spring Gardens site (South Pembrokeshire Hospital)</i>

- 4.5 Other attendees expressed concerns over access to the site; the fact it is in multiple private ownership; the lack of local infrastructure; and the lack of space available for future expansion.

**Table 10: Why is Whitland: Spring Gardens a 'poor' choice for a new hospital?**

Sub-Theme	Example Comments
<b>Site access</b>	<p><i>There is a problem with traffic around plan 1 (Whitland: Spring Gardens) – in summer it's going to be horrific (Amman Valley Hospital)</i></p> <p><i>The A40 isn't too bad, but the bypass is a fast road and access could be dangerous (South Pembrokeshire Hospital)</i></p> <p><i>Issue with Whitland from south Pems is the poor road network (Glangwili Hospital)</i></p>
<b>Multiple private landowners</b>	<i>Multiple private owners – really complicated (Llandovery Hospital)</i>
<b>Lack of infrastructure locally</b>	<i>No infrastructure in Whitland to support a new hospital (Glangwili Hospital)</i>
<b>Limited room for expansion</b>	<i>Spring Gardens is quite small (Withybush Hospital)</i>

### Whitland: Tŷ Newydd

- 4.6 Attendees liked the Whitland, Tŷ Newydd site mainly for its size (which, it was felt, would allow for the 'greenest' site), potential for future expansion, access by rail, and the fact it is in public ownership.

**Table 11: Why is Whitland: Tŷ Newydd a 'good' choice for a new hospital?**

Sub-Theme	Example Comments
<b>Largest site for future expansion</b>	<p><i>Whitland: Tŷ Newydd seems the right site. It's got the scope for expansion (Bronglais Hospital)</i></p> <p><i>Tŷ Newydd site is considerably bigger than the others (Cardigan Integrated Care Centre)</i></p> <p><i>Will larger site enable more car park spaces? (Prince Phillip Hospital)</i></p>
<b>Largest site for 'green' development</b>	<i>Tŷ Newydd could have potential to be a nice green site (Withybush Hospital)</i>
<b>Good access by road and rail</b>	<p><i>Tŷ Newydd could have a rail stop through the site (Glangwili Hospital)</i></p> <p><i>With Whitland accessible by train ... Whitland is a better option (Prince Phillip Hospital)</i></p>
<b>In public ownership</b>	<p><i>Will it be easier to buy the land that's already in public ownership? (Bronglais Hospital)</i></p> <p><i>Tŷ Newydd feels a better option ... owned by the local authority (Therapies and Health Services Forum)</i></p> <p><i>Feel if not in public ownership there would need to be a really good reason not to choose it (Withybush Hospital)</i></p>

Sub-Theme	Example Comments
	<i>... To consider other two sites when you have perfect site in public ownership which can be expanded considerably is a no brainer (Withybush Hospital Medical Committee)</i>

- 4.7 Staff attendees' concerns about this site mainly focused on the flood risk and lack of existing road infrastructure. One Withybush Hospital staff member also noted the presence of a level crossing close to the site as a potential barrier to access.

**Table 12: Why is Whitland: Tŷ Newydd a 'poor' choice for a new hospital?**

Sub-Theme	Example Comments
<b>Flood risk</b>	<i>There is a flood risk at Tŷ Newydd? That's a concern (South Pembrokeshire Hospital)</i> <i>The road is prone to flooding (South Pembrokeshire Hospital)</i> <i>Very rare but the old creamery site does flood and gets waterlogged (Withybush Hospital)</i>
<b>General site access</b>	<i>Issue with Whitland from south Pembs is the poor road network (Glangwili Hospital)</i>
<b>Level crossing as a potential access barrier</b>	<i>Level crossing on Ty Newydd not highlighted on the map – how will it be accessed in the future? (Withybush Hospital)</i>
<b>No direct access to site, which will be costly and disruptive to provide</b>	<i>For Tŷ Newydd site, there may be extra infrastructure needs to build a new road to access the site – so not with green agenda. Other sites have existing road infrastructure (Aberaeron Integrated Care Centre)</i>
<b>Lack of infrastructure locally</b>	<i>No infrastructure in Whitland to support a new hospital (Glangwili Hospital)</i>

## St Clears

- 4.8 More staff from different areas of HDDUHB appeared to favour the St Clears site over both sites in Whitland. The main reasons given were its relative geographical centrality; its accessibility by road; the area's existing and potential infrastructure; and the fact it presents less clinical risk due to its more easterly location. In relation to the latter point, one Withybush staff member said they "hadn't appreciated before that being sited further west would affect the numbers using the services".

**Table 13: Why is St Clears a 'good' choice for a new hospital?**

Sub-Theme	Example Comments
<b>Geographical location and accessibility</b>	<i>Preference would be St Clears – better roads (Glangwili Hospital)</i> <i>St Clears will be more accessible, better public transport. There are a lot of people who can't drive (South Pembrokeshire Hospital)</i> <i>Road is better by St Clears site (Withybush Hospital)</i>
<b>Existing infrastructure and facilities in St Clears</b>	<i>St Clears would be the best option – good road network, and other infrastructure (South Pembrokeshire Hospital)</i>

Sub-Theme	Example Comments
	<p><i>St Clears site is close to existing services, Greggs etc (Cardigan Integrated Care Centre)</i></p> <p><i>All three sites are quite rural. Whitland is less attractive than St Clears due to local amenities (Therapies and Health Services Forum)</i></p> <p><i>There is quite a lot in St Clears now (Glangwili Hospital)</i></p>
<b>Less clinical risk</b>	<p><i>Danger is the further you go West; the more likely patients will be to go to Swansea ... (Glangwili Hospital)</i></p>

- 4.9 On the other hand, attendees expressed concerns about access to the site in terms of traffic congestion; the lack of public transport options; possible limitations on future expansion; the site's topography and possible environmental restrictions.

**Table 14: Why is St Clears a 'poor' choice for a new hospital?**

Sub-Theme	Example Comments
<b>Access to site by road/public transport</b>	<p><i>What about the golden hour for St Clears? If that site is chosen people in St David's will miss that 60-minute window – that's really crucial (Glangwili Hospital)</i></p> <p><i>Whitland is better. St Clears roundabout will be too congested in the summer (Glangwili Hospital)</i></p> <p><i>Bus and train stations? Would there be transport from St Clears station to the hospital or a park and ride? What if the train isn't running? (South Pembrokeshire Hospital)</i></p>
<b>Limited room for expansion</b>	<p><i>Is there enough scope to expand at St Clears? (Cardigan Integrated Care Centre)</i></p> <p><i>Growth potential is limited at St Clears, isn't it? Sites need to have growth potential (Glangwili Hospital)</i></p>
<b>Distance to train station, which may not reopen</b>	<p><i>St Clears – bit of a distance for the railway station (Glangwili Hospital)</i></p> <p><i>Will the station be opening in St Clears? (Glangwili Hospital)</i></p> <p><i>St Clears railway needs to be put in place. No point bolting doors (Withybush Hospital)</i></p>
<b>Site topography</b>	<p><i>Must make sure additional cost of a sloping site is taken into account (Glangwili Hospital)</i></p>
<b>Environmental considerations</b>	<p><i>St Clears - Environmental impacts – have these been considered? (Bronglais Hospital)</i></p>

## General questions and comments relating to all three sites

### Travel and access issues

- 4.10 Attendees raised many concerns over patient and visitor accessibility to all sites by road, bus/train, and ambulance as a result of poor road infrastructure and public transport provision across the area, traffic congestion (especially during the summer months when the population of the area increases significantly as a result of tourism), and rurality. Indeed, those who live in more rural and 'remote' areas were

especially concerned about accessibility. Sufficient air ambulance availability was also considered critical for seriously injured/ill patients in more rural areas.

**Table 15: Issues raised around travel and access**

Sub-Theme	Example Comments
<b>General accessibility of the sites</b>	<i>Transport and access for all sites is a concern (Cardigan Integrated Care Centre)</i>
<b>Accessibility of the sites by road</b>	<p><i>Are there going to be better road links? Living in north Pembrokeshire and Ceredigion rely on roads to access (Cardigan Integrated Care Centre)</i></p> <p><i>There are a lot of accidents on the A40. It can get very busy during bank holiday weekends (Glangwili Hospital)</i></p> <p><i>Are there plans to have a dual carriageway all the way to the new hospital from Glangwili? There is curtailment of roads but there needs to be a dual carriageway (Bronglais Hospital)</i></p> <p><i>... All the three sites are situated west. Need to look at traffic flow especially by Pensarn and B&amp;Q roundabouts. Queues come into the west with tourism increasing the traffic entering Carmarthen. It's a bit of a funnel in that area ... (Therapies and Health Services Forum)</i></p> <p><i>Biggest concern for everybody is the road and the time to get there – roadworks, tractors (Withybush Hospital)</i></p>
<b>Accessibility of the sites by public transport</b>	<p><i>The fact that the sites have train routes is irrelevant because we cannot access the sites on train from Ceredigion (Tregaron Hospital)</i></p> <p><i>Train system in this neck of the woods is not good (Tenby Hospital)</i></p> <p><i>Saying that there are transport links, such as train stations, located near the hospital does not consider the logistical problems of patients having to get to the train station or be able to afford to travel using this method (Local Medical Committee)</i></p>
<b>Accessibility of the sites by ambulance</b>	<p><i>You've got insufficient ambulances as it is, unless you can increase WAST services, you'll be putting lives at risk (Tregaron Hospital)</i></p> <p><i>Would there be more ambulances? (Withybush Hospital)</i></p>
<b>Accessibility of the sites during the 'tourist season'</b>	<p><i>My concern about the three site locations is, have you been down these areas during the summer period? The tailbacks and congestion are a huge concern (Tregaron Hospital)</i></p> <p><i>In the summer, there is gridlocks on the roads at times – what will be the effect on accessing A&amp;E ...? (Aberaeron Integrated Care Centre)</i></p>
<b>Accessibility of the sites from east Carmarthenshire</b>	<p><i>Travelling further west will be difficult for our east population (Glangwili Hospital)</i></p> <p><i>Some people think, 'Why is the new hospital all the way over there? Why not in Carmarthen? Closer to us in these rural areas' (Llandovery hospital)</i></p>

Sub-Theme	Example Comments
	<i>Big worries about access/travel times from Llandovery (e.g., travel times from Rhandirmwyn) (Llandovery hospital)</i>
<b>Accessibility of the sites from Pembrokeshire</b>	<i>You're looking at a lot of risk to life due to distance and travel (Withybush Hospital)</i> <i>Travel is a massive concern for people living in Pembrokeshire ... (Withybush Hospital)</i> <i>Concern if something is wrong it will be a long way to travel, especially if we lose A&amp;E as well (Withybush Hospital)</i>
<b>Accessibility of the sites from Ceredigion/Powys</b>	<i>I can see issues with distance for patients coming from Powys and north Ceredigion (Cardigan Integrated Care Centre)</i> <i>If you consider the road from Tregaron to Carmarthen, they are not fit for purpose. No bus service, no train service (Tregaron Hospital)</i>

- 4.11 The need for good rail links for patients, visitors, and staff was explicitly stressed (perhaps with a shuttle bus and walkway between train station and hospital), as was the need to be mindful of active travel opportunities for those able to walk or cycle to the hospital.

*... Green agenda is so important. To have a railway station with a covered walkway into the hospital would be ideal (Withybush Hospital Medical Staff)*

*Any of us who have worked in University Hospital Wales knows it is a pain when its 20-minute walk from a railway station. To have a train station running through similar to Birmingham is brilliant (Withybush Hospital Medical Staff)*

*Need to make the environment cordial for active travel such as pavements, bikes to rent (like London) – for visitors at least if not for patients (Aberaeron Integrated Care Centre)*

*Car parking will be an issue - but need nice walkways to encourage people to walk (Aberaeron Integrated Care Centre)*

*Encourage staff cycling from the rail station (Withybush Hospital)*

### Futureproofing and site design

- 4.12 Attendees questioned the futureproofing potential of all three sites, seeking reassurance that the chosen site will be large enough for necessary expansion in future.
- 4.13 The need to consider car parking, green space, the environment, and the Health Board's carbon footprint when designing the hospital was stressed, and some suggestions were made around the facilities and amenities that should be sited alongside it. These included staff housing, accommodation (i.e., a reasonably priced hotel) for visitors, amenities like shops, cafes or a hairdresser, and a helipad for the air ambulance.
- 4.14 Other issues and questions raised in relation to site design were around the height of the hospital buildings, and the need to include artwork, which can prove beneficial to the wellbeing of patients, staff and visitors.

Table 16: Issues raised around futureproofing and building design

Sub-Theme	Example Comments
<b>Size of site: potential for expansion</b>	<p><i>Is this hospital future proofed? Does it have the capability to expand? Is the health board over-purchasing and will it buy land for expansion, as the land around it will become more expensive? (Bronglais Hospital)</i></p> <p><i>You need to future proof - what's the land available? (Aberaeron Integrated Care Centre)</i></p> <p><i>We have to be ambitious with a view of 50 years lifespan with room for expansion of the population (Bronglais Hospital)</i></p>
<b>Size of site: parking provision</b>	<p><i>Adequate parking needs to be considered (Aberaeron Integrated Care Centre)</i></p> <p><i>Car parking will be important in new hospital at wherever site (Prince Phillip Hospital)</i></p> <p><i>How many car parking spaces will there be and how will accessibility be dealt with? (HDdUHB Finance Team)</i></p>
<b>Environmental considerations</b>	<p><i>Net zero carbon - how are we approaching this for the new hospital? (Finance Team)</i></p> <p><i>With the new hospital, are you going to make it carbon friendly and environmentally friendly? (Tregaron Hospital)</i></p> <p><i>Green space views from the new hospital will be important for well-being ... (Aberaeron Integrated Care Centre)</i></p>
<b>Additional facilities/amenities needed</b>	<p><i>Better accommodation to support recruitment (Glangwili Hospital)</i></p> <p><i>Three quarters of a billion is a mind-boggling amount. Also need to build community infrastructure around it (Partnership Forum)</i></p> <p><i>If we do manage to build the new hospital, house builders may potentially build new homes in the area which will help with accommodation (Partnership Forum)</i></p> <p><i>... Do need to make sure we build a canteen, a decent area for staff and visitors. I guess when the site gets chosen and built eatery establishments will soon pop up (Therapies and Health Services Forum)</i></p>

- <sup>4.15</sup> A few staff members referred to the need to learn lessons from experiences at the Grange University Hospital in Cwmbran. There was particular “concern that clinical staff will ‘tear up’ the design as per the Grange hospital” (Cardigan Integrated Care Centre)

### Staffing issues

- <sup>4.16</sup> Staffing concerns centred around recruitment. In particular, attendees questioned how feasible it would be to recruit the necessary staff to work in a hospital in a relatively remote area with few facilities and amenities. In this context, the need for plentiful and suitable staff accommodation was stressed. There was also some worry about the impact of the planned changes on existing job roles.
- <sup>4.17</sup> Retention was also a worry, with some suggestion that staff may leave for other health boards or leave the NHS entirely. The cost-of-living crisis was also frequently mentioned in the context of additional



commuting costs, as was the potentially detrimental impact of longer journey times on work-life balance (though some staff members said they would live closer to the new hospital and would benefit from a shorter commute). In this context, staff discounts for public transport and a 'break service' (i.e., "a bus to pick up nurses to go to work for different shifts, instead of 10 cars") were suggested.

**Table 17: Issues raised around staffing**

Sub-Theme	Example Comments
<b>General staffing concerns</b>	<p><i>Are you taking into account staff recruitment and retention? Need to be more attractive as a health board (South Pembrokeshire Hospital)</i></p> <p><i>Where are staff going to come from to work in the new hospital? (Bronglais Hospital)</i></p> <p><i>We have too many hospitals and cannot staff them. Could do away with Withybush and Glangwili (Glangwili Hospital)</i></p> <p><i>Where is the staff coming from? How can we staff a new hospital with existing vacancy rates? (Glangwili Hospital)</i></p>
<b>Difficult to attract new and existing staff to remote sites</b>	<p><i>Considering the rurality of the area are you confident you can get the staff to work in the area? (Partnership Forum)</i></p> <p><i>Moving to a more rural area, will that attract more staff? (HDdUHB Finance Team)</i></p>
<b>Retention issues due to longer and more costly commutes</b>	<p><i>What plans are there in terms of workforce? Would it have an impact on our recruitment and retaining of our staff? (Tregaron Hospital)</i></p> <p><i>We don't want to travel that far after a 12-hour shift. That will lose a lot of staff due to travel (Glangwili Hospital)</i></p> <p><i>Cost of living - staff are finding it hard now to come to work - additional travel costs (Glangwili Hospital)</i></p> <p><i>It's also limiting for staff to consider working at the new hospital because of travel distance, GGH is just about doable as it is from Ceredigion (Tregaron Hospital)</i></p> <p><i>... More work needs to be done especially with health board staff who work outside the health board boundary. Traffic at Pensarn can be passed if going to Glangwili but there is no other option for St Clears/Whitland. Significant risk staff will be looking for alternative sources of employment at Powys or Swansea Bay (Therapies and Health Services Forum)</i></p>
<b>Lack of infrastructure in St Clears/Whitland to cater for staff (including affordable housing)</b>	<p><i>There are limited options for staff to live close by any of the sites (Glangwili Hospital)</i></p> <p><i>Where are you going to house all your staff? You haven't got proper housing as part of your project ... (Tregaron Hospital)</i></p> <p><i>Biggest concern is accommodation for people to work in the area. It is about affordability for people to buy or rent. Really big issue especially when we are recruiting overseas nurses in Withybush (Partnership Forum)</i></p>
<b>Concerns around impact on jobs/roles of existing staff</b>	<p><i>Would staff have to reapply for their jobs? What about changes to job role? Would other people be able to apply for my job role?</i></p>



Sub-Theme	Example Comments
	<i>What would happen if my job was re-banded? (South Pembrokeshire Hospital)</i> <i>What is going to happen to staff jobs? Will there be job cuts? (South Pembrokeshire Hospital)</i>

4.18 In terms of making the new hospital as attractive as possible to potential recruits, attendees stressed the need for education and research facilities and increased opportunities in areas like genomics and robotics.

<i>Science and technology need to be included in the design (Bronglais Hospital)</i> <i>We are losing staff because of lack of tech opportunities (Bronglais Hospital)</i>
---

Additional considerations

Positive comments relating to the new hospital

4.19 Many positive comments were made about a new urgent and planned hospital for the south of the Hywel Dda area. Attendees were positive about the prospect of improved care and patient outcomes and modern, state-of-the-art facilities (including at the refurbished Glangwili and Withybush sites). There was also some feeling that a new, modern facility would help overcome at least some of the Health Board’s current recruitment challenges; and that it would enable some specialities to be provided closer to home.

<i>Better staff retention and better doctors at a new hospital (Withybush Hospital)</i>
---

4.20 Several attendees said that they would be happy to travel for the best and more seamless care, and used the example of breast cancer care at Prince Phillip Hospital as a service for which people are prepared to journey some distance due to its reputation. It was hoped that residents would eventually view the new hospital in the same way, but also acknowledged that people are nervous of change and that ongoing dialogue will be important in winning hearts and minds.

<i>I feel twelve miles further is a price worth paying if you have all the services on the site (Withybush)</i> <i>Only going an extra twelve minutes but I could be seen a lot quicker than sitting in Withybush A&amp;E (Withybush Hospital)</i> <i>There will be a backlash, but the challenge will be to communicate that we cannot carry on how we are (Aberaeron Integrated Care Centre)</i>
--

Table 18: Positive comments about the new hospital

Sub-Theme	Example Comments
General positivity	<i>We do want a brand-new hospital (Glangwili Hospital)</i> <i>It will be lovely to have a new hospital (South Pembrokeshire Hospital)</i>

Sub-Theme	Example Comments
	<p><i>Very exciting, new site can't come quick enough (Withybush Hospital)</i></p> <p><i>Positive to have a bigger, better hospital closer than Glangwili or Morriston (Withybush Hospital)</i></p>
<b>Better care and outcomes</b>	<p><i>Personally, I would be happy to travel to see a specialist (South Pembrokeshire Hospital)</i></p>
<b>Modern facilities: general</b>	<p><i>Glangwili staff are brilliant, but the infrastructure is failing. Cardiac Unit handrails, toilets are not fit for purpose and modern medicine (Prince Phillip Hospital)</i></p> <p><i>The current buildings are getting more run down and it is not conducive to working (Aberaeron Integrated Care Centre)</i></p> <p><i>Once you agree the new hospital, what's happening to GGH? GGH is very old, parts are really bad (Llandovery hospital)</i></p>
<b>Modern facilities: recruitment</b>	<p><i>It will be good – new hospital. Attraction to staff to the new hospital ... (Llandovery hospital)</i></p> <p><i>If you build a hospital people will move to the area (Bronglais Hospital)</i></p>
<b>Impetus for infrastructure improvements</b>	<p><i>Infrastructure needed to be developed decades ago. New hospital may push that (Glangwili Hospital)</i></p>

### Services at the new hospital

- 4.21 Attendees asked many questions about the services that would be available at the new hospital. General surgery, oncology, mental health, orthopaedics, neurology (including stroke), cardiology, maternity, obstetrics and neonatal services, paediatrics, and rehabilitation services such as physiotherapy were all mentioned in this context. Questions were also asked about the number of beds (including palliative care beds) to be accommodated, and the type of equipment provided.

*Would like clear communication about specialisms going into the site (Cardigan Integrated Care Centre)*

- 4.22 On a related note, several attendees asked questions about the services which might return to the Hywel Dda University Health Board area that they and others must currently travel to Swansea for.

*We have cardiac patients that go to Morriston Hospital Swansea, having a hospital closer that provide patient with that service will be welcoming (Aberaeron Integrated Care Centre)*

- 4.23 Additional questions were asked about the Health Board's IT strategy (particularly around the plans for digital healthcare and how the different hospital and community site systems can 'talk to each other' better). Other issues and questions raised were around the potential for rising costs.

*Are the costs finalised? Will they go up? (Glangwili Hospital)*

*Three quarters of a million pounds is a lot of money. Does this include recent rising costs? (Partnership Forum)*

### Impact on other hospitals

- 4.24 Attendees were concerned about the impact the new hospital might have on existing hospitals and services. There was significant concern that Llandovery Hospital would be closed as a result of Glangwili's repurposing as a community hospital for example, and staff at several other facilities like Amman Valley and Tregaron Hospitals commented:

*My concern is if they close the community hospitals, it will have a massive impact (Tregaron Hospital)*

*We fear that the Health Board will close community hospitals. Community care hospitals need to be developed more (Amman Valley)*

*The need for adequate staffing in the community hospitals, there is little point in constructing new hospitals if there is not enough staff available to work at the sites (Local Medical Committee)*

- 4.25 Several attendees sought reassurance that services and staff would not be lost from Bronglais Hospital, and that the promised improvements there would be realised. Staff at Tregaron Hospital in particular were concerned that Ceredigion would 'lose out' to the south of the area.

*Is there a plan for Bronglais Hospital in the plans for the new hospital? (Bronglais Hospital)*

*Would the new hospital have an effect on services here at Bronglais? (Bronglais Hospital)*

*There is a lot of feelings that ... Everything happens down south, and the north of Ceredigion is left neglected (Tregaron Hospital)*

- 4.26 Furthermore, many sought clarification on the services that would be available in their local hospitals/integrated care centres, and at the repurposed Glangwili and Withybush sites – and suggested that there are misconceptions among residents that these two hospitals are to be permanently closed.

*From a community perspective, the three sites are less of a question. It's more about what happens to Glangwili and Withybush that impacts us (Aberaeron Integrated Care Centre)*

*What do they intend keeping in Glangwili? What are the plans? Local people think Glangwili is going to shut (Llandovery hospital)*

*Withybush will become a community hospital. What does that really mean? (Withybush Hospital)*

- 4.27 The general consensus was that as much as possible should be provided in the community to maximise healthcare accessibility for patients and lessen pressures on acute centres. In this context, the proposed network of community hubs was praised, with several attendees asking whether they - and the pathways between different settings - would be in place prior to the hospital opening.

*Service expansion in the community will ease pressure on the new hospital (Cardigan Integrated Care Centre)*

*Hubs around the area is great to bolster provision. Hubs is good for recruitment opportunities.*

*New hospital – good for recruitment drive (Glangwili Hospital)*

*... More community care will prevent admissions (Llandovery Hospital)*

*Probably exactly what you need ... it would free up beds, sort of like the old recuperation or rest units (Withybush Hospital)*

*Care closer to home needs a monetary shift away from 'BIG' buildings to smaller ones (Aberaeron Integrated Care Centre)*

*It's important to get the community sites and community centres situated first (Cardigan Integrated Care Centre)*

*Important to get pathways in place before the new hospital (Cardigan Integrated Care Centre)*

## The consultation and decision-making process

- 4.28 Some staff noted that the drop-in events had not been well advertised or promoted, and that many of their colleagues were unaware they were happening<sup>7</sup>. There were also many questions around how the travel data used in the consultation documentation had been calculated.

**Table 19: Summary of questions asked and comments made about the consultation process**

Sub-Theme	Example Comments
<b>Poor advertising of/publicity around consultation events</b>	<p><i>Did not realise that this event is going ahead today and neither do a lot of the staff. Staff do not read emails (Bronglais Hospital)</i></p> <p><i>Staff to date have not been consulted (Glangwili Hospital)</i></p> <p><i>Staff need to give their views on the three sites. Welsh Government will want to know how many have responded to the consultation (Partnership Forum)</i></p> <p><i>We didn't know about this consultation (South Pembrokeshire Hospital)</i></p> <p><i>Need to give enough time / notice for people [staff] to get involved in the consultation as clinics can be busy for staff to plan around (Tenby Hospital)</i></p>
<b>Will taking part make a difference?</b>	<p><i>We have let our workforce know in a number of ways about the consultation. There is a bit of a sense – does it matter that much? Turning up at an event, how will it influence the decision in a meaningful way? (Therapies and Health Services Forum)</i></p>
<b>Lack of understanding of travel data</b>	<p><i>The car travel distances don't make sense regarding the distances from Glangwili and Withybush hospitals. One is two minutes' longer and the other is six minutes' difference ... (South Pembrokeshire Hospital)</i></p>

<sup>7</sup> It should be noted that HDdUHB promoted these events via internal communications to staff (for example, global emails, posters, staff bulletins, team briefings, staff Facebook groups, intranet etc).

Sub-Theme	Example Comments
	<i>How have you calculated the travelling time data to the sites? (Llandovery Hospital)</i>

4.29 Several questions were asked around the decision-making process and ‘what happens next?’, particularly in relation to timescales for choosing a site and developing the hospital. One Withybush Hospital staff member also sought information on site ownership.

*Do the private owners have any links to Health Board, local authority, Welsh Government etc that can influence the decision? It is important to know, so no hidden bids (Withybush Hospital)*

4.30 Questions were also asked about what would happen if the Welsh Government funding being applied for does not materialise, or if the land for the preferred site is sold prior to the decision being made.

Table 20: Summary of questions asked and comments made about the consultation process

Sub-Theme	Example Comments
<b>Questions around the decision-making process/what happens next/timescales</b>	<i>How will you decide between the three sites? (South Pembrokeshire Hospital)</i> <i>Who will make the final decision? (Glangwili Hospital)</i> <i>Once it gets approved – how long will it take to build? Quite exciting when this happens (Llandovery hospital)</i> <i>What is the current timeline for the completion of the new hospital (Finance Team)</i> <i>How will a site be picked? (Withybush Hospital)</i>
<b>A plan B?</b>	<i>If funding isn’t accepted, what will be the next plan? (Withybush Hospital)</i> <i>What would happen if the land sells beforehand? (Withybush Hospital)</i>

Equalities issues

4.31 In considering equalities issues, many people were primarily concerned about how the need to travel to the new site could affect older people, those in rural isolation, and the economically disadvantaged (albeit, of course, those in these groups living closer to the hospital would see a positive impact).

*A lot of older people drive but only locally and would not be able to drive to Whitland or St Clears (South Pembrokeshire Hospital)*

*Access via public transport and whole environment and practicalities for older people particularly (South Pembrokeshire Hospital)*

*Rhandirmwyn area; no internet, big population, cut off, elderly population (Llandovery Hospital)*

*A lot of rural communities’ access to emergency care is a worry as it is 40 minutes, and this means extra travel time (Llandovery Hospital)*

*How will the lower paid staff get to the hospital e.g., porters, catering and cleaners? Need to consider affordability of public transport and cost of fuel (Partnership Forum)*

- 4.32 The impact of having to travel further on patients and visitors without private transport was also frequently raised.

*If someone is going for a planned operation and cannot drive, they will need extra support and access to public transport (Aberaeron Integrated Care Centre)*

## Staff interviews

### Introduction

- 4.33 To explore the consultation issues in more depth, ORS conducted five interviews with staff, two from Glangwili Hospital, two from Withybush Hospital, and one from the Pembrokeshire Community Team. Three participants were from staff bands 1 – 5, and two were from bands 6+.
- 4.34 The interviews, which were undertaken either on Microsoft Teams or by telephone, provided an opportunity to explore the extent to which each of the sites are acceptable or otherwise, and to understand in more detail the issues and arguments relating to them and other aspects of the Health Board's transformation programme. The feedback received provides valuable insights to be considered, alongside all other evidence, by those making decisions.

### Attendance and representation

- 4.35 The original intention was to hold eight staff focus groups: two in each of the main hospitals (Bronglais, Glangwili, Prince Philip, and Withybush). However, despite extensive promotion of the sessions, take up was low and so the decision was taken to cancel the focus group sessions and undertake in-depth interviews with those who had expressed an interest in attending, either by telephone or videoconference.
- 4.36 As regards why it was so difficult to recruit staff to participate in focus groups, participants cited not having time to engage because of pressures of work, and a lack of knowledge of the consultation and proposed plans among colleagues.

*It is a time constraint. I am doing this interview in my own time and a lot of people who work full-time have family and outside commitments. I have tried to encourage people to get involved but time is precious on the evenings and weekend ... it is easy for me in the community but when I worked on a frailty ward I had no time to even do training and had to do that in my own time (Staff, Pembrokeshire Community Team)*

*Even in the acute teams I work in, we have had brief conversations, but I don't know if it's that people have not had a lot of information? It has not been made very clear and the importance of it has not been stressed (Staff member, Glangwili Hospital)*

## Discussion agenda

- 4.37 ORS used HDdUHB’s consultation material to develop a suitable topic guide and informative stimulus material for the interviews, which covered the following themes:

A recap of the need for change.  
The options development process.  
The three site options (including the similarities and differences between the sites).
- 4.38 Participants were either shown the background information during the interview or sent it in advance, primarily to inform and stimulate discussion of the above issues.

## Main findings

### Views on the proposed location of the new hospital

#### Whitland: Spring Gardens

- 4.39 Even though participants identified some benefits to Whitland: Spring Gardens, no-one felt it would be the best site for a new urgent and planned care hospital.
- 4.40 That it is the cheapest site option was appreciated by a couple of participants, as was its equidistance from Glangwili and Withybush, and the potential for offsite renewable energy. Most also praised the existing access from the A40 and that the train station is situated nearby. However, the A40 was recognised as a congested and inadequate road to facilitate the inevitable increased volume of journeys to the site.

... On paper [the access by road] looks great but I know that the A40 can get blocked up really well, so having direct access is great, but ... the A40 is a road that frustrates people (Staff member, Glangwili Hospital)

- 4.41 There was also concern about the site being in multiple private ownership, meaning a potentially costly and complicated sale; and almost all participants said that the limited scope for future expansion was near-sighted in terms of futureproofing. Participants also raised the potential impacts of building a new hospital in the middle of a residential area and the impact that might have on the depreciation of the value of houses.
- 4.42 Furthermore, it was said that the site may not enable enough patients to access services there, potentially leading to clinical guidelines and standards not being met and proving unattractive to specialists seeking to maintain their competencies and improve skills.

You are not going to attract specialists in fields where they are not going to be able to keep up their CPD and everything (Staff member, Glangwili Hospital)



## Whitland: Tŷ Newydd

- 4.43 Of the two proposed sites in Whitland, the Tŷ Newydd site was far more preferred by participants. One of the main reasons for this was that the land is publicly owned, and thus less of a 'headache' and potentially cheaper to acquire. Furthermore, participants particularly liked the fact that Tŷ Newydd is the site with most potential for futureproofing in terms of future expansion.

*Because of the scope for expansion, it looks like the most positive site out of the three because you just don't know how advancements and technology is going to take us in the future. They have changed so much over the last 50 or so years (Staff member, Glangwili Hospital)*

- 4.44 The current inaccessibility of the site was not seen as particularly problematic by most as there was confidence that new roads would be built in advance of the hospital opening (although one Glangwili staff member was more sceptical, stating that "I can see that there are plans to improve the infrastructure, but ... I think that it is a bit dangerous to rely on outside organisations like the council in order to be able to improve something of theirs, for your thing to work efficiently"). The proximity of the train station to the site was considered a big positive, although it was felt that arriving at the site by train would not be something most people scheduled for surgery would choose to do.

*It is close to the train station, which is good, but a lot of people who come to the hospital struggle to walk so the closer the better. The road: I don't think these things are really big issues (Staff member, Withybush Hospital)*

- 4.45 The stated flood risk of this site was a concern for some, but the on-site potential for renewable energy was seen as a distinct positive. Moreover, even though it is the most expensive option, this was not seen as significant in the grand scheme of things.

*Although it costs more it has the possibility for longevity as well. It's a once in a lifetime opportunity – so just go for the biggest and the best. This is the one I would put my money on (Staff member, Withybush Hospital)*

- 4.46 There was a sense that a new hospital could be beneficial to Whitland's economy (a benefit that would apply equally to Spring Gardens), although its proximity to residential dwellings was seen as a negative because of the potential traffic and noise pollution. Furthermore, one participant felt that both Whitland sites could potentially put strain on other emergency services having to travel from the west (police officers having to accompany patients to A&E for example).

*Perhaps we might be causing ourselves extra financial restraint on services like the police ... I don't think anyone has thought about how it would affect the police, and the lifeguard RNLI, the air ambulance ... the additional cost to them (Staff, Pembrokeshire Community Team)*



## St Clears

- 4.47 Several positives were identified in relation the St Clears site. That it has no known flood risk was appreciated, as was the fact that it has only one private landowner (although one participant did not like the fact that one person could benefit so much financially). The off-site renewable energy and that it is the second cheapest option were also cited as positives.
- 4.48 It was considered very important that enough patients would access the site (rather than travel to Swansea), and that the provision of specialisms would be justifiable within national guidelines. In this regard, St Clears was preferable.
- 4.49 There was concern about the stated limited scope for expansion on this site.

*Limited scope for expansion is a worry – do you build a hospital you know is going to be too small in 20 years' time? Will they be looking for somewhere else to go again then? (Staff member, Glangwili Hospital)*

- 4.50 The accessibility of the St Clears site was discussed in detail. The lack of a nearby train station was generally seen as a negative, but the fact the site is closer to populated areas, and linked to those areas by a dual carriageway, was seen as beneficial. However, this view was not shared by those considering the population of west Pembrokeshire.

*Having it in St Clears means it is out of county really ... Withybush has been downgraded a lot and there is a lot of anger ... Having it further in St Clears would just have a negative value in people's opinion really (Staff, Withybush Hospital)*

- 4.51 It was acknowledged that the commute to A&E is a little bit faster, but also that, "there are only 6% with faster 999 access which is not even a majority. Again, that is not acting in the interests of our patients with the car travel" (Staff member, Glangwili Hospital)
- 4.52 There was concern that St Clears is already too congested to cope with increased traffic to and from the site, should a hospital be built there; while the town's existing infrastructure and amenities (like Greggs and McDonalds) were considered positive by some.

*St Clears seems more ready to go because it has already got a lot of things there. It has the different roads that meet at St Clears, so people from different areas can get in better (Staff member, Withybush Hospital)*

## A preferred site?

- 4.53 When asked which site they preferred, three preferred St Clears, one preferred Tŷ Newydd, and another was unable to decide between those two sites.

*Probably St Clears mostly because of the least risk to the patients and the number of them treated and the fact that it is accessible from two different A roads ... (Staff member, Glangwili Hospital)*

*My thought would be Tŷ Newydd, then St Clears and then Spring Gardens, primarily because of the land ownership (Staff, Withybush Hospital)*

*It's a tie. St Clears would be more preferable to people who go to Glangwili because it's not that much further and closer to Pembrokeshire (Staff member, Withybush Hospital)*

## Additional considerations

### General positivity

- 4.54 Overall, participants supported the development of a new urgent and planned care hospital for the south of Hywel Dda. They also acknowledged that the chosen location will not please everyone, and that as space is at a premium within the area's larger towns, it is only really feasible to site it in a more remote location.

*I do agree that the hospitals need to be improved and there is not really space in Carmarthen - you can't close it down in order to redo the hospital, so it's not like you can move this site and build it more efficiently, that is not possible (Staff Member, Glangwili Hospital)*

- 4.55 It was generally felt that a new, modern, state-of-the art facility would enhance everyone's experience of either using or providing services there and enable the provision of safe healthcare. The prospect of biophilic design was also praised.

*... If you go to Glangwili it is really dated and things built in the past are not as safe as new buildings ... I understand that it is important that we do something [and] if we can't get the specialists that we need because of how rural we are, in order to meet the demand, we need to change ..." (Staff member, Withybush Hospital)*

*There are lots of benefits; simply having a new building and a better environment ... I think it is important for wellbeing (Staff member, Withybush Hospital)*

- 4.56 Participants were also pleased with the proposed improvements to community services, and the prospect of patients being transferred to their local hospital for recovery after a short spell at the acute facility. This, it was felt, would be beneficial not only for patients, but also their visitors.

*... Hopefully, with this new proposal if there is a more community emphasis then that will draw in a more specialised service, and we can get the people that we need ... with the Healthier Mid and West Wales strategy it is definitely the way to go (Staff member, Withybush Hospital)*

*If the community hub works well, and patients are sent back to the hospital that is closest to their address ... then that will be great (Staff member, Glangwili Hospital)*

- 4.57 Given the significant changes that will be introduced through the new model of care, it was said to be vitally important to have clear patient pathways in place to ensure smooth and timely patient transfers from one facility to another.

## Travel and access issues

- 4.58 Despite the general support for the principle of a new hospital, there was significant concern about accessibility to the proposed sites (especially for those living in west Pembrokeshire and east Carmarthenshire) due to the area's poor road infrastructure, frequent roadworks and accidents on the A40, and traffic congestion during the summer months especially.

*Sometimes when you go from Withybush to Carmarthen it has taken two hours to [get] there, so I think I would be a bit nervous ... It would be lovely to have a brand-new hospital and to have everything all up to date, new and working properly, but that is always in the back of your mind (Staff member, Glangwili Hospital)*

*I do recognise it needs to be moved but the infrastructure needs to be improved before it is built, or you will get a scary situation where the ambulance can't get to the hospital (Staff member, Glangwili Hospital)*

## Recruitment and retention of staff

- 4.59 It was hoped that the provision of a modern, state-of-the-art, specialist hospital would encourage more specialists and staff to work there, despite the rurality of the area. Attractiveness would be enhanced, it was felt, through infrastructure improvements (housing and schools in particular) and the provision of local amenities.

*The benefits would be great technology-wise and there would be new equipment. It would help to recruit from there (Staff member, Pembrokeshire Community Team)*

*Everyone likes something new and shiny ... The staff will see the investment there and the opportunities for development which is good for their careers (Staff member, Withybush Hospital)*

*... If you are doing the ... more major procedures then you are going to draw the doctors who want to do those procedures. So, it could work that we are able to get more staff that are having more interesting cases ... (Staff members, Glangwili Hospital)*

- 4.60 All participants were concerned, though, that as the proposed locations are too far west, in a relatively remote area, they would not be sufficiently attractive to specialist staff.

*We find it difficult to recruit into Carmarthen, so going further west again means that recruitment and retention of staff is still going to be very difficult ... (Staff member, Glangwili Hospital)*

*... There aren't a lot of speciality areas in west Wales and if you think about your career then you are often attracted to more specialist areas. They tend to be in areas naturally closer to universities, but this is rural and that's not going to be solved by a new hospital (Staff member, Withybush Hospital)*

*In theory I like the idea, but my concern is that we are taking it west when we are already having trouble getting staff; and we are going further west where there are smaller populations who can't provide those staff (Staff member, Withybush Hospital)*

- 4.61 Furthermore, a couple of participants reported that they had heard colleagues say they would leave their current role rather than relocate to the new hospital because of the increase to their commute.

*... It makes a difference if you are coming from Milford Haven to Haverfordwest to work, and then you have to go another 20 to 30 minutes ... it's an hour you are looking at maybe. That's a big difference in your commute ... (Staff member, Withybush Hospital)*

*... A lot of my colleagues live in Llandysul or live 25 minutes in the opposite direction so going all the way to Whitland would be a long drive I can't imagine them doing (Staff member, Glangwili Hospital)*

## Views on equality and health inequality impacts

- 4.62 When asked about specific groups that might be particularly affected by the proposed siting of the new hospital, one participant highlighted that service users with learning difficulties can struggle to adapt to change and may thus disengage with services unless their needs are taken into consideration in the design process. It was also considered especially important that as much care is provided in the community as possible for this patient cohort.

*... I am hoping with this new opportunity there would be a developed area for them. Sometimes those who don't have the voice are forgotten about. Hopefully the community will pick up this need for care and they won't have to go to the urgent care centre, or if they do, the care will be there waiting for them (Staff member, Withybush Hospital)*

- 4.63 The proposed locations were also said to put people from rural areas and small villages at a disadvantage; in particular those who are reliant on public transport.

*People who don't drive perhaps. Public transport is not great around here anyway, so even if there is a train station, there are not loads of trains or buses ... (Staff member, Withybush Hospital)*

- 4.64 Furthermore, it was felt that people living near the chosen site would be negatively affected by the "construction and also the increased traffic that the patients and staff will bring to the area." (Staff member, Glangwili)

# 5. Stakeholder engagement

5.1 HDdUHB hosted or attended 12 meetings with stakeholders between February and May 2023. The type and distribution of events, the dates on which they were held, and the number of people engaged are presented in the table below.

Table 21: HDdUHB public, staff and community events/meetings

Event	Meeting type	Date (2023)	Number of people engaged
MEETINGS WITH STATUTORY STAKEHOLDERS			
Pembrokeshire Town and Community Councils	Online Q&A	Tuesday 28 February	Unknown
Ceredigion Town and Community Councils	Online Q&A	Monday 2 March	10
Ceredigion Public Services Board	Meeting	Monday 6 March	29
Carmarthenshire Town and Community Councils	Online Q&A	Tuesday 7 March	26
Ceredigion County Council	Online Q&A	Monday 13 March	24
Mid and West Wales Fire and Rescue Authority	Meeting	Wednesday 22 March	2
Pembrokeshire County Council	Online Q&A	Tuesday 4 April	31
Llanelli Town Council	Online Q&A	Wednesday 5 April	20
Carmarthenshire Public Service Board	Meeting	Tuesday 25 April	13
Pembrokeshire Public Service Board	Meeting	Tuesday 25 April	17
MEETING WITH COMMITTEE OF THE BOARD			
Stakeholder Reference Group (local authorities, local councillors, the third sector, and Llais)	Agenda item at existing meeting	Friday 5 May	18
MEETING WITH NON-STATUTORY STAKEHOLDERS			
Ysgol Tregroes School community meeting (local and county councillors, and residents)	Town hall style public meeting	Friday 19 May	35

5.2 The key questions and themes arising from these events are reported in this chapter.

## Key findings from stakeholder engagement

### Views on the proposed location of the new hospital

#### Whitland: Spring Gardens and Whitland: Tŷ Newydd

- 5.3 Both Whitland sites were considered together by some stakeholders. For example, Pembrokeshire County Councillors were concerned about ambulances having to navigate the town’s road infrastructure, and that the area’s history could lead to delays if archaeological discoveries are made before or during construction.

*The A-road takes you through Narberth, which would not be great for emergency transport. Alternatively, the B-roads through Red Roses, well you know what they are like. What considerations will be made if Whitland is chosen? (Pembrokeshire County Council)*

*Two sites are in Whitland which is an historic area. You may find archaeological issues there (Pembrokeshire County Council)*

- 5.4 Spring Gardens was not explicitly discussed in any stakeholder discussion, but the distinct advantage of the Tŷ Newydd site was considered to be its public ownership status. On the other hand, the risk of flooding ruled out the site for several stakeholders.

Table 22: Why is Whitland: Tŷ Newydd a ‘good’ choice for a new hospital?

Sub-Theme	Example Comments
In public ownership	<i>Would the one in public ownership be a huge saving regarding acquisition, which would make that site more favourable? (Pembrokeshire County Council)</i>

Table 23: Why is Whitland: Tŷ Newydd a ‘poor’ choice for a new hospital?

Sub-Theme	Example Comments
Flood risk	<i>Even if there is a low risk of flooding, is it wise to build on a site with any risk of flooding? (Ceredigion Public Service Board)</i> <i>It is worth noting that one of the sites is a flood risk. I also appreciate that you’ve considered some environmental factors and had done assessments (Pembrokeshire Public Service Board)</i> <i>... one of them should be excluded i.e., the Tŷ Newydd site is a flood risk. It’s between Spring Gardens and St Clears for me (Pembrokeshire Public Service Board; Pembrokeshire Town and Community Councils)</i> <i>Tŷ Newydd appears to be close to station but you won’t build there because of the flooding (Pembrokeshire County Council)</i>

## St Clears

- 5.5 The only comment made about the St Clears site was that: *It seems an unlikely ambition that St Clears station will be open by [the time the new hospital is operational]. (Pembrokeshire County Council)*

## Views on all three sites

- 5.6 A concern in relation to all three sites was that they are too restrictive in terms of future expansion potential.

*What scope is there for future expansion. If all three are limited with regard to expansion it could be a challenge. Is it a concern? (Pembrokeshire Town and Community Councils)*

- 5.7 The lack of supporting infrastructure was also a worry, with several stakeholders suggesting a need for facilities and amenities such as shops, cafes/restaurants and visitor accommodation, either on-site or nearby. Some of these provisions could also, it was felt, generate revenue for HDdUHB.

*The infrastructure is not supported for the site. Need to change the infrastructure to get patients and ambulances to the new hospital ... (Llanelli Town Council)*

*Last year, I was waiting in A&E at Withybush between 8pm and 8am. I was able to get refreshments from a nearby garage. What facilities will be available near the proposed sites for people to buy refreshments at night? (Pembrokeshire Town and Community Councils)*

*The Golden Jubilee Hospital in Clydebank has a 4/5-star hotel onsite that families can stay in at a subsidised rate, and a conference centre that the health board can use at subsidised rates. Both facilities are also available to the wider public as a revenue-generating opportunity. A hotel would help relatives from further reaches of the health board area (Pembrokeshire Town and Community Councils)*

- 5.8 Some comments were neutral concerning the location of the new hospital. Mid and West Wales Fire Authority, for example, said it had no concerns about any of the three sites, and others said they were unable to choose between them as they are in such close proximity.
- 5.9 Others just said that they had no preference of location, or that they would prefer to attend Morriston Hospital in Swansea as it is closer to them. This was a view frequently expressed by Llanelli stakeholders for example.

*... Can people go to Swansea? Patient choice: it's easier to go over the Lougher river. You are not going to force Llanelli people to go to the new hospital? ... (Carmarthenshire Town and Community Councils)*

*Llanelli is very close to Swansea, a distance away from Carmarthen, and will be further away to the new hospital site. Llanelli is closer to Morriston (Llanelli Town Council)*

*Concerns around life threatening situations. If you go further west you will have no chance of survival. Will emergency situations be treated at Morriston / Singleton? (Llanelli Town Council)*

- 5.10 In this context, it was strongly suggested that HDdUHB work closely with Swansea Bay University Health Board to establish protocols and pathways for patients in east Carmarthenshire.



*My nearest GP is in Swansea Health Board area. GPs are discouraged to refer to Swansea Bay; the referral bounces back. Will there be discussions around the restrictions of boundaries referrals of Hywel Dda to Swansea Bay? (Carmarthenshire Town and Community Councils)*

*Is there any danger emergency presentations will be turned away at Morriston? (Llanelli Town Council)*

- 5.11 In fact, some Town and Community Councillors argued for Llanelli to be incorporated into Swansea Bay.

*Have the Health Board thought of transferring the eastern area (Llanelli) to Swansea Bay? In 1974 Llanelli looked to Swansea for services. It worked really well ... the link to Swansea is geographically closer... (Carmarthenshire Town and Community Councils)*

*... It must be very challenging delivering rural health services. Llanelli is not a rural area. Would it be easier for you to lose Llanelli so Swansea Bay who can concentrate on delivering an urban health service (Llanelli Town Council)*

## Alternative site suggestions

- 5.12 Some attendees, unsatisfied with the site options under consideration, put forward their own suggestions for alternative locations for the new hospital, such as the United Counties Showground in Nantyci, Carmarthen, and Canaston Bridge in Pembrokeshire. Others said they would prefer HDdUHB to focus on improvements to existing hospitals.

*What did your risk assessment show about splitting the £1.3bn across the two current sites and specialise with things in different sites e.g., one thing in WGH and another in GGH rather than starting again at a new site? (Ysgol Tregroes)*

## Additional considerations

### Travel and access issues

- 5.13 The cost and convenience of public transport was raised by stakeholders, given that for many people the distance to the new hospital would be greater than at present. The need for significant investment in and improvements to public transport infrastructure was frequently highlighted, along with the need for safe access by foot and bicycle.

*Look at the transport network. There is a lack of buses, trains to the current sites. Alarming leap of faith for this to be resolved (Carmarthenshire Town and Community Councils)*

*... bus services are very limited in this area. Reaching GGH is very difficult on public transport, even with Bwcabus. What are you doing to support accessibility and public transport? (Ysgol Tregroes)*

*In terms of public transport, you need to be looking into the far-reaching areas and how this will affect them (Ceredigion County Council)*



*You need to demonstrate how people would walk or cycle there. Need to make distance from stations clear, not as crow flies (Pembrokeshire County Council)*

- 5.14 There was, though, some scepticism around whether this will be feasible.

*You are a little bit wishful thinking Welsh Government will pump more money in. If you can't improve bus services, the Business Case will be difficult to address ... (Carmarthenshire Town and Community Council)*

*... I don't buy the arguments you are putting forward regarding transport and connectivity to the new hospital. You won't have a public transport network to Whitland and St Clears in same way as there is to Haverfordwest. Not just for patients but for visitors too. I have not heard that this has been considered properly or will be (Pembrokeshire County Council)*

- 5.15 Stakeholders from the west, north, and east of the Hywel Dda area were particularly concerned about increased distances and travel times to the new hospital and questioned the travel time calculations in the consultation document.

*The roads and public network from North Pembrokeshire to any of these sites is not good. Both locations are in the hinterland and only accessible via narrow lanes ... (Pembrokeshire Town and Community Councils)*

*The journey time will be much longer from Ceredigion. There are currently no direct transport services. I think this is a big challenge and a big problem to address. I just want to emphasise the scale of transport challenges to these three sites (Ceredigion County Council)*

*We're looking at an hour plus to get to the hospital and doesn't take account of the holiday traffic. Sadly, we don't stand a chance ... (Ysgol Tregroes)*

*Concerns around people travelling from the Towy and Amman Valley area to the new hospital (Carmarthenshire Public Service Board)*

*Concerns around distance to Whitland from Llanelli. It's a good hour away on a good day (Llanelli Town Council)*

- 5.16 Transferring to the new hospital for some would, it was said, mean converting from public transport to car to gain access, thereby increasing their carbon footprint. The peak tourism months also present extra challenges, and consultees doubted that this had been considered in the travel time calculations.

*Road networks. There are frequent accidents on A40 and A477, the two roads into Pembrokeshire both converge on the access to new hospital sites. Traffic is extremely slow in the summer months and the population of Pembrokeshire rises to 2 million ... (Pembrokeshire County Council)*

*Distance for residents in Letterston is an extra 40 minutes and a real concern. They will need to use a car, not the train or public transport (Pembrokeshire County Council)*

*Need to reduce carbon footprint around the new hospital. Travel times for patients and staff will increase - not productive on the economy (Llanelli Town Council)*

- 5.17 There were real concerns over whether Welsh Government would invest in the road network to increase speed of access to the new hospital; how access would be possible when there are frequent roadworks or accidents leading to congestion on access roads (A40 and A477 in particular); and ambulance response times generally.

*I usually get told, "Well new roads will be built; new transport services will be provided" without any concrete plans (Ceredigion County Council)*

*Announcement from Welsh Government that road building throughout Wales will be put on hold ... no hope the A40 will be improved (Pembrokeshire County Council)*

*... How are you going to work with WAST. You will be tying up ambulances for longer reducing access to ambulances (Llanelli Town Council)*

- 5.18 Parking was also frequently mentioned as a concern, with attendees suggesting that there should be affordable on-site parking close to the hospital sufficient for the needs of a rural population of car drivers. Electric car chargers were also considered essential to meet future needs.

*I wonder if there is an opportunity to set up fast chargers for electric cars (Ceredigion Town and Community Councils)*

## Recruitment and retention of staff

- 5.19 Attendees were concerned about how and from where HDdUHB would be able to recruit staff for the new hospital bearing in mind current staffing shortages and over-reliance on agency staff. Questions were asked around whether staff and clinicians would be drawn from existing hospitals in the Hywel Dda area, including community hospitals, thereby depleting their capacity and services.

*What plans do you have for research facilities at the new hospital to attract top notch doctors into this area. How are you going to get those doctors here? ... Do the doctors really want to come to St Clears to spend their time here? (Ysgol Tregroes)*

*If you have a shortage of doctors and nurses, how will you keep the other hospitals [GGH/ WGH] open if you don't have enough already? (Ysgol Tregroes)*

*... Heard you may be taking staff to Whitland from PPH and GGH (Llanelli Town Council)*

- 5.20 People described a reluctance among NHS staff to relocate to the area for work and while some were of the view that the new hospital would be too far west to be attractive, others felt that the new facility being a teaching hospital would be advantageous for recruitment. So, too, would having staff accommodation on site or in the vicinity.

*Very confused where the staff are coming from? Nothing convinces me staff will travel further west (Carmarthenshire Town and Community Councils)*

*... Staff shortages are a big issue, so it's good it's a teaching hospital. Staff retention and training is critical ... (Pembrokeshire County Council)*

*The other issue ... is the lack of affordable housing and how that could impact staff. Will staff accommodation at the site be part of the plan? (Pembrokeshire County Councillors)*

- 5.21 The impact on lower paid workers was also raised as an issue, particularly in terms of their willingness and/or ability to move to a new site.

*What consideration has been given to how the change of site will affect staff, particularly lower paid staff (porters, healthcare support workers) who might be disproportionately impacted by moving to a different site? (Pembrokeshire Town and Community Councils)*

## Site design

- 5.22 Participants at several events stressed the need for HDdUHB to consider the environment and minimise its carbon footprint when designing and developing the new hospital. Incorporating a helipad into site design was also urged.

*I encourage a consideration on green spaces and other green infrastructure as part of the project (Pembrokeshire Public Service Board; Pembrokeshire Town and Community Councils)*

*If we at the Council can work together with the health board to reduce carbon footprint (Ceredigion Town and Community Councils)*

*Solar farm projects; need to think about this when planning/designing the new hospital (Carmarthenshire Public Service Board)*

## A Plan B?

- 5.23 It was acknowledged that Welsh Government is yet to commit to the funding for the transformation programme and, as such, questions were asked around whether there is a Plan B if it is refused.

*Welsh Government hasn't agreed the money yet ... How can we continue to plan without financial support from Welsh Government? Do you have a plan B if the money is refused? (Ysgol Tregroes)*

- 5.24 On a related note, some stakeholders questioned the stated cost of the transformation programme, suggesting that it may now be under-funded as a result of rising costs.

*... We have seen inflation effect our capital planning. Seen 20% increase on our builds. From a Welsh Government perspective this would put pressure on their budgets. Do Welsh Government have concerns around this? (Carmarthenshire Public Service Board)*

*When was the cost of the project produced? Because the costing of projects have gone up, how would that affect the overall project? (Pembrokeshire Public Services Board)*

## The future of Bronglais Hospital

- 5.25 Ceredigion-based stakeholders were pleased to see an emphasis on Bronglais Hospital within the proposed healthcare network, though some sought reassurance that the new hospital would not be a threat to it and more information about what will be provided there in future.

*I'm very glad that these plans emphasise the importance of Bronglais, and generally I do welcome these projects ... (Ceredigion County Councillors)*

*...What remains at Bronglais, has it changed as a result of this consultation? What will be maintained at Bronglais (Ceredigion Public Services Board)*

## Some positivity

- 5.26 Despite all the voiced concerns, many stakeholders were very positive about the prospect of a new hospital in the context of receiving better care in improved facilities, and the potential positive impact of some services being brought back into the Health Board area.

*I appreciate the idea and hope it will happen (Ceredigion Town and Community Councils)*

*At present people have to go to Morriston spending lots of money on transport/accommodation and a long time away from families, will we see an improvement in situations like this with the new hospital? (Ceredigion County Council)*

*You mention that new services such as cardiac catheterisation is closer. That's good. Is that now confirmed? Any other services e.g., maxillofacial? (Pembrokeshire County Council)*

- 5.27 Furthermore, the Pembrokeshire Public Service Board said it is "happy to see that you're considering a transport strategy and working with other partners to establish this in line with community transport."
- 5.28 A Pembrokeshire County Councillor highlighted that over the next 12 months, the Southwest Wales Corporate Joint Committee will progress a regional economic framework covering Pembrokeshire, Carmarthenshire, Neath Port Talbot, and Swansea, as well as the National Parks in these areas. This Committee will lead on regional transport, land use planning and the regional energy strategy, and will complement all four local authorities' economic development plans. Work has already started on economic development, regional transport planning and on the Strategic Development Plan, an intermediary regional land use plan that will sit between council's local development plans and the Welsh Government's national development framework. The Councillor feels that:

*The development of the new hospital is likely to align with this work (Pembrokeshire County Councils)*

- 5.29 The prospect of using local residents (possibly via apprenticeship schemes) on the construction of the hospital, and sourcing materials from those who can procure them locally and sustainably was also considered a potential benefit by the Carmarthenshire Public Service Board.

- 5.30 The plans for Integrated Care Centres and community hubs were greeted positively in terms of improving local access to care. Consultees enquired about the timescales for developing these facilities and sought assurance that they would be used for post-acute recovery.

*We need to be pressing on with the idea of Integrated Community Networks, the development of integrated health and wellbeing centres, and community preventions work through the hub and connectors and town and community councils and community buildings, etc. This is a necessary foundation to the development of the new hospital and is worth doing even if the new hospital does not happen (Pembrokeshire Public Service Board)*

*The cottage services (hospitals) serve the local areas better ... Use local facilities to decant people away from the hospitals (Ceredigion County Council)*

*... medicine is moving on and it would be great to see that people access services and move back closer to home sooner... (Ysgol Tregroes)*

### The consultation and decision-making process

- 5.31 Several questions were asked about the decision-making process moving forward, particularly in relation to the weight that will be given to public, staff and stakeholder preferences as expressed via this consultation and whether HDdUHB will have a first and second choice of site in the event of purchase difficulties.

*When will findings from the consultation be shared, what is the process going forward? (Stakeholder Reference Group)*

*I'm not clear about the interface between the logistical considerations and public preference. I understand that this is not a referendum, but what weight will public input have ... ? (Pembrokeshire Town and Community Councils)*

*If there is overwhelming public support for one option and the landowner was problematic, would you look at the second choice? If there was support for one option based on practicalities, would the Health Board decide? (Pembrokeshire Town and Community Councils)*

- 5.32 The ongoing provision of information and reassurance was considered essential throughout the decision-making and any future development process, particularly in relation to the provision of services locally where possible, and the potential benefits of telemedicine.

*About assurances to residents, the message has not been properly conveyed. You need to get that message across ... (Pembrokeshire County Council)*

*You need to demonstrate to people that services will be provided locally. The journey time is an issue (Ceredigion County Council)*

*I would have expected a lot more looking into how to promote digital services as part of the project (Pembrokeshire Public Services Board)*

*More information about how the health board will ensure access to 4g and 3g network to help telemedicine (Ceredigion Town and Community Council)*

- 5.33 Specifically, the Pembrokeshire Town and Community Councils highlighted local concern about the county losing its A&E department given the heavy industry in the area. They suggested that *“the Health Board needs to get across that the refineries and LNG plant already have their procedures in place to manage a major incident; triage casualties and send them to a trauma unit or centre. People need that reassurance...”*

### Views on equality and health inequality impacts

- 5.34 Concerns were raised around access to the hospital for older people and those who are economically disadvantaged and more likely to depend on public transport.

*Older population not able to drive, some have no cars or too old to drive. Single families rely on buses (Carmarthenshire Town and Community Councillors)*

# 6. Public engagement: drop-in events

## Introduction

6.1 HDdUHB hosted 17 public drop-in events throughout its area during March, April, and May 2023. These were attended by 682 people in total. The distribution of events, the dates on which they were held, and the number of people engaged are presented in the table below.

Table 24: HDdUHB public drop-in events

Event	Date (2023)	Number of people engaged
PUBLIC DROP-IN EVENTS		
Cardigan (Guildhall)	Friday 10 March	43
Online Event 1	Monday 13 March	20
Llanelli (Selwyn Samuel Centre)	Tuesday 14 March	29
Haverfordwest (Rugby Club)	Thursday 16 March	65
Carmarthen (Ivy Bush Hotel)	Tuesday 21 March	28
Online Event 2	Thursday 23 March	24
Saundersfoot (Regency Hall)	Friday 24 March	34
Llandybie (Public Memorial Hall)	Tuesday 28 March	20
Online Event 3	Friday 31 March	9
Whitland (Whitland Sport & Social Club)	Monday 17 April	98
Aberystwyth (Morlan Centre)	Friday 21 April	34
St Clears (Leisure Centre)	Monday 24 April	85
Goodwick (Phoenix Centre)	Friday 28 April	32
Milford Haven (Pill Social Centre)	Thursday 4 May	25
Llandovery (Castle Hotel)	Tuesday 9 May	98
Lampeter (Victoria Hall)	Thursday 11 May	43
Online Event 4	Tuesday 16 May	21

6.2 Several members of HDdUHB staff were available at each face-to-face drop-in session to answer people’s questions, capture feedback, and distribute consultation materials. Information about the three sites was

also displayed on information boards and via a video-based animation. At the online events, participants were given a presentation in advance of being asked to give their views on the consultation issues.

6.3 The key questions and themes arising from these events are reported in this chapter.

## Key findings from public drop-in events

### Views on the proposed location of the new hospital

#### Whitland: Spring Gardens

6.4 A few Pembrokeshire-based attendees considered Whitland: Spring Gardens to be the best option given that the town has a functioning train station, and one attendee at the St Clears event highlighted a “*large entrance possibility to the south ... between the houses*” (St Clears). There was also a sense that the hospital would benefit the local area, providing much needed employment opportunities.

Table 25: Why is Whitland: Spring Gardens a ‘good’ choice for a new hospital?

Sub-Theme	Example Comments
Good access by rail	<i>I think both the Whitland sites are closer to the train station. St Clears is a bit further away (Whitland)</i>
Could benefit the community	<i>Good to have hospital in Whitland to help regenerate the town (Whitland)</i>

6.5 Many attendees expressed concerns over access to the site; the fact that it is in multiple private ownership; its proximity to existing residential areas; the lack of space available for future expansion; and potential barriers to construction as a result of wildlife issues.

Table 26: Why is Whitland: Spring Gardens a ‘poor’ choice for a new hospital?

Sub-Theme	Example Comments
Site access	<i>If the road into Whitland is closed at Pwll Trap you can’t get through (St Clears)</i> <i>Spring Gardens site is constricted by the roads (Llandovery)</i>
Lack of space to expand	<i>Spring Gardens is limited. Does that mean you have to purchase more land if you want to expand in 10 to 20 years? (St Clears)</i>
Multiple private landowners	<i>Spring Gardens has multiple landowners. That’s going to be a problem (Carmarthen)</i>
Proximity to residential areas/negative impact on local community	<i>Visually, the Spring Garden site is more intrusive to the locals than the Tŷ Newydd site (St Clears)</i> <i>It’ll completely change Whitland, and I don’t like change ... (Whitland)</i>
Potential wildlife issues	<i>Tŷ Newydd is pasture, there’s not a lot of nature diversity – Spring Gardens is woodland, you’ll have badgers ... (Whitland)</i>



## Whitland: Tŷ Newydd

- 6.6 Of the two proposed sites in Whitland, Tŷ Newydd was generally preferred over Spring Gardens mainly owing to its size, and the potential for future expansion and plentiful parking. Other stated positives were the proximity of the site to the railway station, the fact that it is publicly owned, its potential to benefit the local community, and the possibility for onsite renewable energy.

**Table 27: Why is Whitland: Tŷ Newydd a 'good' choice for a new hospital?**

Sub-Theme	Example Comments
<b>Largest site for future expansion</b>	<i>Preferred would be Whitland, the largest site (Haverfordwest)</i> <i>Tŷ Newydd is the much bigger one ... In the long run, it will be the cheaper option (Carmarthen)</i> <i>In terms of size, the Tŷ Newydd site is more appealing (Goodwick)</i> <i>Wouldn't the logical conclusion be to go for the site that allows for further development and expansion? (Online Event 1)</i>
<b>Largest site for parking provision</b>	<i>Tŷ Newydd would be good – for plenty of parking (Carmarthen)</i>
<b>Good access by road and rail</b>	<i>The railway goes through the site ... The travel time could come down with new road coming in (Milford Haven)</i> <i>If you go by train you will go for Tŷ Newydd (Cardigan)</i> <i>Whitland site – less traffic than in St Clears site (St Clears)</i>
<b>In public ownership</b>	<i>The advantage of Tŷ Newydd is that it's council owned (St Clears)</i>
<b>Could benefit the community</b>	<i>Good to have hospital in Whitland to help regenerate the town (Whitland)</i> <i>Tŷ Newydd – more integrated with community (Carmarthen)</i>
<b>Potential for onsite renewable energy</b>	<i>With the Tŷ Newydd site, there is room for renewable energy (Whitland)</i>

- 6.7 Concerns about this site mainly centred on the flood risk; the existing road infrastructure (particularly in relation to poor access and potential congestion); and the proximity of new construction to existing residential properties in Whitland.

**Table 28: Why is Whitland: Tŷ Newydd a 'poor' choice for a new hospital?**

Sub-Theme	Example Comments
<b>Flood risk, which might worsen</b>	<i>Flood risk (for Tŷ Newydd) won't affect the whole site now, but with climate change it will (Llandovery)</i> <i>How much of Tŷ Newydd is usable [because of the flood plain]? (Lampeter)</i>
<b>No direct access to site, which will be costly and disruptive to provide</b>	<i>I don't think Whitland is accessible (St Clears)</i> <i>Access to Tŷ Newydd – no access! Crackers! Tŷ Newydd – definitely no goer! (St Clears)</i>

Sub-Theme	Example Comments
<b>Proximity to residential areas/negative impact on local community</b>	<p><i>Conscious of the fact that the community will be affected (Carmarthen)</i></p> <p><i>Bought my house for it being quiet. Going to be significant disruption. Going to spoil my view of that area (St Clears)</i></p> <p><i>It'll completely change Whitland, and I don't like change ... (Whitland)</i></p>

## St Clears

- 6.8 More attendees, regardless of area of residence, favoured the St Clears site over either of the Whitland sites. The main reasons given related its geographical centrality; its good accessibility by road; the area's existing infrastructure; and the fact the site is owned by just one private landowner. Again, the potential community benefits were stressed, as was the potential for less construction disruption for residents than at Whitland.

**Table 29: Why is St Clears a 'good' choice for a new hospital?**

Sub-Theme	Example Comments
<b>Geographical location and accessibility: general</b>	<p><i>In terms of the hospital, it has to be St Clears; centre of the population (Saundersfoot)</i></p> <p><i>... Whitland is longer in terms of travel and traveling time (Cardigan)</i></p> <p><i>St Clears layout and access is best – less disruption to houses. It also has public transport which is the future (St Clears)</i></p> <p><i>St Clears preferred option in terms of ease of access (Milford Haven)</i></p>
<b>More clinically sustainable</b>	<i>I'm worried about the national guidelines on minimum number of patients treated. If you don't meet the minimum number, will we lose those services? (St Clears)</i>
<b>Geographical location and accessibility: for staff</b>	<i>Staff coming from Swansea will find it easier, rather than going on to Whitland (Saundersfoot)</i>
<b>Existing infrastructure</b>	<i>There is already infrastructure in St Clears (St Clears)</i>
<b>Single private landowner</b>	<p><i>Dealing with one landowner has its advantages (Carmarthen)</i></p> <p><i>Prefer the St Clears site – owned by individual ... (Lampeter)</i></p>
<b>Could benefit the community</b>	<p><i>I think the hospital is good for the area, and from a patient's point of view this is good as it attracts expertise (St Clears)</i></p> <p><i>I would like it in St Clears. It would be good for the town (St Clears)</i></p>
<b>Less disruption/impact on local community</b>	<i>St Clears seems better because it's out of the town/more rural (St Clears)</i>

- 6.9 On the other hand, attendees expressed concerns about access to the site in terms of traffic congestion, the lack of public transport options, and inadequate parking; the site's topography and limitations on future expansion; and the proximity of the site to residential areas of St Clears.

- 6.10 There was also concern among Ceredigion and Pembrokeshire residents about the additional distance to St Clears, and about the impact on the local community among those from St Clears itself.

**Table 30: Why is St Clears a 'poor' choice for a new hospital?**

Sub-Theme	Example Comments
<b>Access to site by road/public transport</b>	<p><i>What if there is a problem on this road (A40). How do people access St Clears? (St Clears)</i></p> <p><i>The road to St Clears station isn't the best. Issues regarding buses accessing St Clears station (St Clears)</i></p> <p><i>Not enough availability for sustainable transport (Haverfordwest)</i></p>
<b>Limited room for expansion</b>	<p><i>Site too cramped between St Clears and busy motorway, not enough room for expansion (Haverfordwest)</i></p> <p><i>Are you looking at room for future expansion? It's too tight and might not be ideal (Saundersfoot)</i></p>
<b>Topography of site</b>	<p><i>St Clears is tricky because of road steepness (Haverfordwest)</i></p> <p><i>Site's on a slope. With a wheelchair, especially older couples, is really hard to move around (St Clears)</i></p> <p><i>There is a slope on the St Clears site, can you design around this? (St Clears)</i></p>
<b>Distance to train station, which may not reopen</b>	<p><i>Looking at the distance from the train station. Is it a realistic proposition to reinstate the station? (Llandovery)</i></p> <p><i>You're basing it on railway investment that might not happen (Haverfordwest)</i></p> <p><i>There is nothing for St Clears apart from a train station that's too far away for elderly/disabled people. So, the other two sites are the only option (Llanelli)</i></p>
<b>Distance from Pembrokeshire/Ceredigion</b>	<p><i>The one in St Clears is way off the beat ... It will take a lot longer; it will be a nightmare (Cardigan)</i></p> <p><i>I'm particularly against St Clears. East population which have best access to it already have other hospitals they can access (Haverfordwest)</i></p>
<b>Negative impact on local community</b>	<p><i>Don't want the hospital in St Clears site as we would feel overshadowed ... (St Clears)</i></p> <p><i>Are you looking at the height of the building? Will it be tiered, as there is an impact on the skyline (St Clears)</i></p> <p><i>We live in St Clears, and we're concerned about the noise and the dust that would be generated ... We are also concerned about the noise of ambulances and sirens. (St Clears)</i></p>

## General questions and comments relating to all three sites

### Travel and access issues

- 6.11 Attendees raised many concerns over patient and visitor accessibility to all sites as a result of poor road infrastructure and public transport provision across the area, traffic congestion (especially during the

summer months when the population of the area increases significantly as a result of tourism), and rurality. Indeed, those who live in more rural and ‘remote’ areas were especially concerned about accessibility, although people from all over the Hywel Dda area questioned whether their localities would benefit from a new hospital. In this context, although St Clears was preferred overall, many attendees simply preferred the site that is closest to them.

*Pembrokeshire people will naturally want the hospital site in Whitland, and Carmarthen people will want St Clears site as it is closer (Haverfordwest)*

- 6.12
- Pembrokeshire residents felt particularly strongly that none of the proposed sites would be easily accessible, albeit there was also strong concern from some of those in east Carmarthenshire and south Ceredigion. In light of this, many attendees objected to all three sites, suggesting others either further west or more towards Carmarthen.
- 6.13
- It should be noted that there was also some scepticism about the prospect of reaching the new hospital by means of active travel given that, *“it is difficult to visualise possible connections from any of the proposed sites to a wider active travel network which will provide staff etc with the option of cycling safely to the new hospital.” (Online Event 3)*
- 6.14
- Furthermore, in regard to the air ambulance, one attendee noted that, *“Within your travel planning you mention the Air Ambulance. This is a charity and can only operate with a reliance on voluntary funding. How would your travel plans be affected if the Air Ambulance is not able to function?” (Online Event 1)*

Table 31: Issues raised around travel and access

Sub-Theme	Example Comments
Accessibility of the sites by road	<i>Sites are not convenient. Not easily accessible to St Clears from Newcastle Emlyn (Cardigan)</i> <i>St Clears/Whitland is a long way on a horrendous road (Lampeter)</i> <i>I worry that its thirty miles to Glangwili and these sites are further (Llandybie)</i> <i>The most dangerous road is the A40, the area where you’ve got all the three sites. If there is an incident, it’s difficult to get through (Llandovery)</i> <i>A large number of road infrastructure projects are being shelved. I’m concerned that the priorities might not align. Political change might affect this (Haverfordwest)</i> <i>Poor roads means no matter where the hospital is, the distance and time will be an issue (Haverfordwest)</i> <i>The roads aren’t built for this with the ports and traffic, tractors and holiday makers (Milford Haven)</i>
Accessibility of the sites by public transport	<i>I wonder about location at these sites due to public transport (Llandybie)</i> <i>No preference between the three sites – my concern is transport and how people who don’t drive will get there (Llanelli)</i>

Sub-Theme	Example Comments
	<p><i>Unless you have your own car, you won't be able to get to any of these options (Llandovery)</i></p> <p><i>Best travel time to the proposed site in Google Maps is one hour. By public transport it is three hours, at best when there actually is any (Online Event 4)</i></p> <p><i>... Transport is key and has to be accessible. You need to make sure whatever site you choose, it must have access to a train station or bus (Haverfordwest)</i></p>
<b>Accessibility of the sites by ambulance</b>	<p><i>How much worse are ambulance times going to be? (Haverfordwest)</i></p> <p><i>Do not lose sight of the fact that the roads need to be right for the ambulances to get to patients on time. Road network needs to be part of the big picture (Haverfordwest)</i></p>
<b>Future access by air ambulance may be in doubt</b>	<p><i>Welsh air ambulance services may not be an option in future if they don't get enough funding/donations (Online event 1)</i></p>
<b>Accessibility of the sites to hospital visitors</b>	<p><i>It's a long way to go, will be lonely if people cannot get to visit (Goodwick)</i></p> <p><i>Having loved ones visit is vitally important for mental health and transport/length of journey won't help (Llandovery)</i></p>
<b>Accessibility of the sites during the 'tourist season'</b>	<p><i>You are placing a hospital in one of the most tourist centred areas where roads are already severely congested (Online Event 4)</i></p> <p><i>There is an increase in summer of population with tourism in Pembrokeshire and healthcare is moving away from this area (Saundersfoot)</i></p>
<b>Accessibility of the sites from Pembrokeshire</b>	<p><i>The three sites are outside Pembrokeshire, and you are making it longer to travel (Haverfordwest)</i></p> <p><i>St David's and Dale/Marloes areas of Pembrokeshire are severely disadvantaged in reaching any of these sites in peak tourist periods and are doubtful to reach locations in any major incident. As the county also has some of the most dangerous industries, i.e., agriculture, oil and gas refineries ... (Online Event 1)</i></p> <p><i>Hospital needs to be closer to Pembrokeshire (Milford Haven)</i></p>
<b>Accessibility of the sites from east Carmarthenshire</b>	<p><i>I don't have any problem about centralising, but looking at the map geographically, Carmarthen is central, so you should have chosen a site in Carmarthen area (Lampeter) (Whitland) (Llandovery) (Carmarthen)</i></p>
<b>Accessibility of the sites within 60 minutes</b>	<p><i>How are people from one area going to get to Whitland within the hour? (Llandybie)</i></p> <p><i>Lampeter is not within an hour of St Clears or Whitland (Lampeter)</i></p>

Sub-Theme	Example Comments
	<p><i>Whitland is closer but the roads are worse. St Clears is further and has a better road to get there but has more traffic. What about the Golden Hour? (Haverfordwest)</i></p> <p><i>We are going to be more at risk of dying because of delays and lack of transport. It will have a detrimental ongoing effect on our health (Haverfordwest) (Llandovery)</i></p> <p><i>If you have an accident in St David's it's going to be that much further. I'm worried about the golden hour (Haverfordwest)</i></p>

### Futureproofing and site design

- 6.15 Attendees questioned the futureproofing potential of all three sites, seeking reassurance that the hospital would not, in future, have the same problems as existing facilities: too few parking spaces; inadequate bed capacity; and a lack of space for new technology.
- 6.16 There was positivity about the prospect of biophilic design at the new hospital, as well as some suggestions around the facilities and amenities that should be sited alongside it. These included staff housing, accommodation (i.e., a reasonably priced hotel) for visitors, local shops and cafes, and a helipad.
- 6.17 Other issues and questions raised in relation to site design were around the height of the hospital buildings, the need for proper soundproofing (perhaps using trees), and the need for electric charging points for cars.

**Table 32: Issues raised around futureproofing and building design**

Sub-Theme	Example Comments
<b>Size of site: potential for expansion</b>	<p><i>Are all three sites big enough? (Milford Haven) (Haverfordwest) (St Clears)</i></p> <p><i>When you build make sure you allow for 25% extra for development. Have you done this for this site? (Whitland)</i></p> <p><i>The hospital they built in South Wales wasn't big enough. What capacity have you got on these three sites to accommodate a big hospital? (Saundersfoot)</i></p> <p><i>Room for expansion is needed. It has to be right ... avoid building a new hospital again (Haverfordwest) (Whitland)</i></p> <p><i>The sites for hospitals never seem to be big enough. No matter how many plots of land you started off with, you tend to always need more room in the future (Goodwick)</i></p>
<b>Size of site: parking provision</b>	<p><i>Parking is vital, so the land/site you choose should be realistic to accommodate a lot of parking (Carmarthen)</i></p> <p><i>Parking concerns – will there be enough parking at the site for visitors, staff and patients? (Milford Haven)</i></p> <p><i>Car parking – need to be enough and staff need to park – this is a big one. Need to make sure it's enough as living in a rural area people have cars so will use cars to get to hospital (Whitland)</i></p>
<b>Building design: biophilic design</b>	<p><i>Amazing opportunity to develop a more humane natural building. Huge responsibility to get it right (Carmarthen)</i></p>



Sub-Theme	Example Comments
	<i>It would be nice to have a green area outside. Most hospitals look like jails (St Clears)</i>
<b>Additional facilities/amenities needed</b>	<p><i>What arrangements are there for accommodation and housing on various sites? (Online Event 1)</i></p> <p><i>Need to think about surroundings. Think about helicopter pads, and housing (future development of housing) (Whitland)</i></p> <p><i>There should be proper local amenities like schools, shops, housing, etc, in any area considered for a new hospital. I don't think any of the three sites will pass this test as they are (Cardigan)</i></p> <p><i>Is there any provision for family members to stay if they are in long term? (Aberystwyth)</i></p> <p><i>From a patient and visitor view, there is a hotel there, shops, coffee (St Clears)</i></p> <p><i>If my wife was admitted to hospital and I had to go by public transport, I couldn't make it there and back in one day – there should be a Travelodge there – with reasonable prices for most to afford (Cardigan)</i></p>

## Staffing issues

- 6.18 Staffing concerns centred around recruitment. In particular, attendees questioned how feasible it would be to recruit the necessary staff to work in a hospital in a relatively remote area with few facilities and amenities. Retention was also a worry, with some suggestion that staff may leave for other health boards or leave the NHS entirely.
- 6.19 There was some disagreement around the Welsh language as a recruitment criterion. Some considered it essential for patients to be able to receive healthcare in their preferred language, whereas others considered it a barrier to recruitment.

**Table 33: Issues raised around staffing**

Sub-Theme	Example Comments
<b>General staffing concerns</b>	<p><i>Staffing may be a concern/how to staff new hospital with the current shortage of staff (Cardigan)</i></p> <p><i>You're planning to build a super hospital, but you don't have enough staff to staff the ones you already have (Llanelli)</i></p>
<b>Difficult to attract new and existing staff to remote sites</b>	<p><i>How does the board expect to attract health professionals to these sites as less facilities and amenities in these sites than Haverfordwest! (Online Event 2)</i></p> <p><i>Further west we move, people are moving further from civilisation (Carmarthen)</i></p> <p><i>Nurses will move. Cleaners/porters won't (Haverfordwest)</i></p> <p><i>Even the staff would hate to travel down there so it's going to affect them as well (Llanelli)</i></p>

Sub-Theme	Example Comments
	<p><i>Recruitment is your number one issue, how in hell are you going to attract clinicians down to the new hospital? (Llandovery) (Whitland) (Haverfordwest)</i></p> <p><i>Is it going to be more difficult to recruit the further west you go? As you go away from the population? (Llanelli) (Haverfordwest) (Llandovery)</i></p> <p><i>Staff living up here will not want to commute to a new site. (Lampeter)</i></p>
<b>Retention issues</b>	<p><i>Have the plans considered medical staff going to other health boards because the new sites are too rural compared to Cardiff or Swansea? (Aberystwyth)</i></p> <p><i>Some staff could walk to work now – this will all change for them (Llandovery)</i></p>
<b>Lack of infrastructure in St Clears/Whitland to cater for staff</b>	<p><i>The workforce does open a huge can of worms, where will they live and schools? (Milford Haven)</i></p> <p><i>You're asking them (staff) to work further away and there is nothing in Whitland (Milford Haven)</i></p> <p><i>Neither St Clears/Whitland are of sufficient size to cope with population (Haverfordwest)</i></p>
<b>Welsh language: essential as a recruitment criterion</b>	<p><i>Is there going to be any requirements to be a Welsh speaker? It's important for some patients that it's there if necessary (Carmarthen)</i></p> <p><i>We as Welsh people need Welsh speakers by their bed. It makes you so much more comfortable (Llandovery)</i></p>
<b>Welsh language: barrier to recruitment</b>	<p><i>The requirement as part of most job applications is speaking the Welsh language. A young doctor wanting to work here would be put off coming due to that (Goodwick)</i></p> <p><i>No-one past Carmarthen speaks Welsh and you'll make these staff speak it and that'll put them off moving (Milford Haven)</i></p> <p><i>Doctors are afraid to come here because they think they'll have to speak Welsh. (Llandovery)</i></p>

## Additional considerations

### Support for new urgent and planned care hospital

- <sup>6.20</sup> Many positive comments were made about the prospect of a new urgent and planned hospital for the south of the Hywel Dda area. Attendees were positive about the prospect of improved care and patient outcomes; modern, state-of-the-art facilities; and more employment not just in the immediate area but also beyond. There was also some feeling that a new, modern facility would help overcome at least some of the Health Board's current recruitment challenges.



Table 34: Positive comments about the new hospital

Sub-Theme	Example Comments
<b>General positivity</b>	<i>I'm in favour of the new hospital and the new hospital is the only way to serve the public (Haverfordwest)</i> <i>I am happy about the project, and I think it's a good thing (Saundersfoot)</i>
<b>Better care and outcomes</b>	<i>We will get better care in new hospital with new equipment (Aberystwyth)</i>
<b>Modern facilities: general</b>	<i>It's definitely needed; it's long overdue. There's only so much you can do with an old building (Cardigan)</i> <i>Hospitals are in need of capital investment Llandovery)</i> <i>As far as I'm concerned, the sooner the better really, because Withybush, for example, is not fit for purpose (Whitland)</i>
<b>Modern facilities: recruitment</b>	<i>With a bigger hospital, it will attract more specialists and other staff (Saundersfoot)</i> <i>Will attract staff – keeping Hubs as well (Haverfordwest)</i> <i>Anything we can do to bring more staff in has got to be positive. (Carmarthen)</i> <i>New facilities – flagship sites – will draw attention of people looking for work (Carmarthen)</i>
<b>Will bring employment to the area</b>	<i>Massive benefit for the area and jobs (St Clears)</i> <i>We've lost a lot of good jobs in our areas. This project should bring back some jobs and boost the area (Cardigan)</i>

### General questions and comments relating to the new hospital

- 6.21 Attendees asked many questions about the services that would be available at the new hospital. General surgery, oncology, mental health, gerontology, orthopaedics, neurodiversity services, neurology, renal and nephrology, cardiology, maternity and obstetrics, paediatrics, rehabilitation services such as physiotherapy, and palliative care were all mentioned in this context. Moreover, questions were asked about the number of beds (including palliative care beds) to be accommodated, and the type of equipment provided (i.e., CT scanners).
- 6.22 On a related note, several attendees questioned what services might return to the Hywel Dda University Health Board area that they and others must currently travel to, say, Swansea or Cardiff for.

*At the moment, we're going to Swansea to access some services. Would we then be going to the new hospital instead of Swansea? (Goodwick)*

*As a result of having one big hospital, what services would you be able to bring back locally to the Hywel Dda area? (St Clears)*

*Want full speciality and new services at the new hospital – or what is the point building the new hospital! Don't want to go to Swansea or Cardiff! (Cardigan)*

- 6.23 Questions were asked about the Health Board's IT strategy (particularly around the plans for digital healthcare and how the different hospital and community sites will "talk to each other"). Other issues raised were around the potential for the landowner of the chosen site to inflate the cost of the land; the potential for using one of the other two sites for 'overspill'; and possible delays as a result of issues with the land or archaeological finds and wildlife issues. Building on greenfield sites was also raised as a concern.

*Have environmental surveys been done for each site yet? Is there a Plan B if there are protected species on site that can't be disturbed? (Aberystwyth)*

*One of the frustrations people had waiting for the new Cardigan Integrated Care Centre to be built was that various land problems caused delays. How much of a problem might this be for the three sites selected? (Online Event 1)*

*All three sites are green field sites. Maybe we should be looking at other sites that are not green field from an environment point of view (Llandovery)*

- 6.24 Attendees were concerned about the impact the new hospital might have on existing hospitals and services. Indeed, many attendees sought clarification on the community services which would be available in their local areas, and whether the proposed community hubs (which were viewed positively and, it was felt, should be better promoted) will be operational prior to the hospital opening.

*It's what stays in the community is what is important (Milford Haven)*

*The model, having community hospitals and local hubs to transfer patients to and from the new hospital is the right model in my opinion (Llandovery)*

*It would do you well to promote the work you're doing with community hubs (Llandovery)*

*I'm intrigued to see what happens but I'm really excited to see the community hubs (Llandovery)*

*Bringing services to local health care centres would be an improvement (Goodwick)*

*My gut feeling is that the plan is good (for the new hospital), but we have to have the community hub up and working before the new hospital (Llandovery)*

- 6.25 Furthermore, several Aberystwyth attendees sought reassurance that services and staff would not be lost from Bronglais Hospital, and that the promised improvements there would be realised.

*People from here will not really have a concern on which site, but more what services will leave Bronglais (Aberystwyth)*

- 6.26 The impact of siting the hospital at either Whitland or St Clears on Morriston Hospital was raised as a concern, as was the possibility of Morriston being "overwhelmed" in a short time as people seek the best care, lengthening waiting times there for both emergency and planned care.

*Morriston Hospital is going to be inundated, so this authority is going to have to pay that authority. Biggest mistake to have a site in Whitland/St Clears (Llanelli)*

*People are going to overwhelm this new hospital A&E in no time, because even though Withybush will remain open, people will want to go where the best care is (Goodwick)*

*This hospital will be used for two counties, will the waiting lists be doubled? (Milford Haven)*

6.27 Finally, it must be noted that many attendees remained fundamentally opposed to the idea of a new hospital for the south of the Hywel Dda area, stressing their support for refurbishing the existing Glangwili Prince Philip and Withybush sites and retaining services, especially emergency care, there.

*What is the point of building a new hospital? Can't any of the old sites be developed? (Llandybie)*

*Why not further develop Glangwili, Prince Philip, Withybush instead of building the new hospital? (Llanelli) (Goodwick)*

*You're better off upgrading the current facilities in Withybush and Glangwili (Goodwick)*

*Closing two hospitals catering for a large population in Carmarthenshire and Pembrokeshire and opening a new one in the middle of nowhere is a recipe for disaster (Llandovery)*

*Instead of basing your calculation within the most populated areas and saying 98% of people can access A&E within an hour, why not have critical care locally where 100% of people can access A&E? You're discounting the remaining 2% as irrelevant (Cardigan)*

The consultation and decision-making process

- 6.28 Opinions varied on the consultation process. For some attendees, the drop-in events had been helpful and informative, and had helped in allaying their concerns. Others felt they had not been well advertised or promoted; that they had not been easily accessible; and that they were simply a ‘tick box exercise’ for the Health Board.
- 6.29 There were also comments around the transparency, accuracy, and accessibility of the information provided at the events, as well as the cost of the consultation more generally.

Table 35: Summary of questions asked and comments made about the consultation process

Sub-Theme	Example Comments
Consultation events have been helpful and informative, and have allayed concerns	<i>Coming here has changed the way I was thinking ... (Cardigan)</i> <i>We are somewhat reassured having come and spoken to you (Lampeter)</i> <i>... Thank you to all of you for answering all of our questions with sensible and realistic answers. I wish the Health Board huge success in getting this project moving forward and completed ... (Online Event 4)</i>
Importance of engaging with consultation	<i>We want to be involved as we're the ones who'll be using it (Whitland)</i> <i>I really came to give my support, because to me, there has been a lot of negativity around this that is uncalled for (Saundersfoot)</i>
Concerns around transparency/accuracy of information provided	<i>We as the public will have to put our trust in the health board, but there is sometimes no transparency (Llandovery)</i>

Sub-Theme	Example Comments
	<p><i>The figures are grossly misleading. It's irresponsible ... (Haverfordwest)</i></p> <p><i>Consultation documents suggest that direct access of A477 when this isn't actually the case, as there is no direct access (Whitland)</i></p>
<b>Who has been consulted (local councils; NHS staff; schools/young people; tourists)?</b>	<p><i>What role does the council play in this consultation? (St Clears)</i></p> <p><i>Have you engaged with school leavers about what they think as the future workforce? (Aberystwyth)</i></p> <p><i>Need to take into account the tourists who are huge influx in the area – how do you consult with them? (Haverfordwest)</i></p>
<b>Advertising of/publicity around consultation events has been poor; criticism of 'late' events in some areas</b>	<p><i>The public haven't got a clue what is going on (Cardigan)</i></p> <p><i>Facebook is the only source of intervention I have seen. There are a lot of people here who are not on Facebook ... (Llandovery)</i></p> <p><i>Why has it taken so long to have a meeting in Llandovery? (Llandovery)</i></p>
<b>Criticism of consultation events (inaccessibility, set-up, timing)</b>	<p><i>People have come into town just for this but can't walk here ... (Llanelli)</i></p> <p><i>This venue is a stupid way of doing it. Not easy to hear (Goodwick)</i></p> <p><i>A lot of events aren't convenient during work time (Carmarthen)</i></p>
<b>Criticism of the consultation documents (volume, accessibility, availability)</b>	<p><i>The consultation looks quite intimidating (Carmarthen)</i></p> <p><i>Information about the sites needs to be more accessible. You have to give the full story to have people on your side (Haverfordwest)</i></p> <p><i>The consultation documents and plans need to be in every community council/hall so that the public can access them, instead of doing online events. Online events aren't suitable for our generation (Goodwick)</i></p>
<b>Criticism of the consultation process (cost)</b>	<p><i>Concern on money being spent on consultations. We don't feel important and don't feel that views will be listened to (Goodwick)</i></p>

- <sup>6.30</sup> Many questions were asked around the decision-making process and 'what happens next?' and the importance of keeping people informed following the end of the consultation. In this context, some suggested that the estimated timeframe for the opening of the new hospital (2029) is somewhat optimistic – and that enthusiasm for the project might wane in the event of significant delays.

**Table 36: Summary of questions asked and comments made about the consultation process**

Sub-Theme	Example Comments
<b>Questions around the decision-making process/what happens next</b>	<p><i>... Once the consultation is closed, how long will it be before the news? When will the decision/recommendation be sent to Welsh Government? (Carmarthen)</i></p>

Sub-Theme	Example Comments
	<p><i>When will the consultation period finish? What happens after this? What is the next step after the decision on the land? (St Clears)</i></p> <p><i>What's Plan B if the funding doesn't come from Welsh Government? ... (Milford Haven)</i></p> <p><i>What is the process once the decision is made? I am feeling rather positive about this new hospital (Cardigan)</i></p>
<b>Importance of keeping people informed after the consultation ends</b>	<p><i>It's important to tell the people out there that this isn't going to happen tomorrow. People are genuinely worried about getting there when their kids have moved away (Carmarthen)</i></p> <p><i>We only found out about this on Facebook. I hope when the decision is made, we are told before it's been made public ... (St Clears)</i></p>
<b>Optimistic timeframe</b>	<p><i>Seven years is ambitious, isn't it? (Llandovery)</i></p> <p><i>I don't think it will be open and (up and running) in 2029. People could become less supportive the longer it takes (St Clears)</i></p> <p><i>My only concern is the whole thing is taking too long (Saundersfoot)</i></p>

## Equalities issues

- 6.31 In considering equalities issues, many people were primarily concerned about how the need to travel to the new site could affect older people, disabled people, and those who are economically disadvantaged.

*Think of elderly people going to see elderly relatives (Cardigan)*

*The importance of access for everyone, especially those with disabilities (Llandybie)*

*No equality between rich and poor – accessibility is not equal and is just getting worse (Llanelli)*

*Extra distance is very challenging for a low-income family (Goodwick)*

*Buses are inconvenient and you would have to change buses ... It's a big strain on poorer and older population (St Clears)*

- 6.32 The impact of having to travel further on patients and visitors without private transport was also frequently raised.

*If you don't drive and you've got someone to visit it's hard (Cardigan)*

*How are you meant to visit patients if you can't drive? Bus services are non-existent or finish after 5pm (Aberystwyth)*

- 6.33 The D/deaf community was also concerned over how they would access clinical care there, and the need to engage with asylum seekers was stressed.

*Accessibility for the D/deaf community (doesn't matter where the hospital is if no provision is made to allow deaf people to access healthcare) (Llanelli)*

*Syrian asylum seekers - Are there any links with the asylum leaders? (Carmarthen)*

# 7. Other community events/ meetings

- 7.1 HDdUHB either attended or visited 61 community events, meetings or settings to discuss the consultation issues with attendees and/or distribute consultation documents and questionnaires to be completed by those engaged at a later date. Approximately 967 people were engaged in this way.
- 7.2 The distribution of events, the dates on which they were held, and the number of people engaged are presented in the table below.

Table 37: HDdUHB public, staff and community events/meetings

Event	Date (2023)	Number of people engaged
OTHER COMMUNITY MEETINGS/EVENTS (NOTES PROVIDED) <sup>8</sup>		
Llanelli Deaf Club drop-in event	Tuesday 14 March	6
Milford Haven Mosque visit	Friday 31 March	30 (1 answered questions)
St Mike’s drop-in, Aberystwyth (vulnerable and socio-economically disadvantaged residents)	Monday 3 April	8
Wellbeing Walk, Saundersfoot	Wednesday 5 April	11, including 6 unpaid carers, and 5 disabled people
Drop-in session at the Morlan Centre, Aberystwyth (Syrian and Ukrainian refugees, and volunteers)	Wednesday 5 April	6 (2 answered questions)
Drop-in session at the Morlan Centre, Aberystwyth (homeless and vulnerably housed people)	Wednesday 5 April	8 (7 answered questions)
VC Gallery and Art session, Pembroke Dock (for patients, carers, and residents; including veterans and people with disabilities)	Wednesday 12 April	16
Milford Haven mosque visit (meeting specifically for Muslim women)	Friday 14 April	5

<sup>8</sup> Many of these meetings were information-giving sessions or visits during which HDdUHB explained the proposals to attendees and/or handed out consultation documents and questionnaires to be completed by those engaged at a later date. As such, there were no discussions to be reported in the following section.

Event	Date (2023)	Number of people engaged
Sign and Share Group meeting (people who are deaf/hard of hearing, BSL interpreters, and support workers)	Friday 14 April	15
Milford Haven mosque visit	Friday 14 April	37 (1 answered questions, Imam provided comments collected from 5 people)
Dunbia Factory visit (migrant workers)	Monday 17 April	250 (2 answered questions)
St Paul's Drop-in Café (socially and economically disadvantaged residents - homeless and housed)	Tuesday 25 April	14 (5 answered questions)
Activity group at the Castle Rooms, Aberystwyth (homeless and vulnerably housed people)	Tuesday 25 April	3
Mencap meeting	Tuesday 25 April	c.65
Student wellbeing engagement event at University of Wales Trinity St David, Lampeter	Wednesday 26 April	7, including 2 BAME students
St Paul's Drop-in Café (as above)	Thursday 27 April	25 (9 answered questions)
Lampeter mosque visit	Friday 28 April	14 (5 answered questions)
Student wellbeing engagement event at Coleg Ceredigion, Cardigan	Wednesday 3 May	20+ (4 answered questions)
Salvation Army drop-in event, Carmarthen	Thursday 4 May	16
Pembrokeshire People First meeting (at Milford Haven drop-in event)	Thursday 4 May	10
St Paul's Games Group (students, including LGBTQ+ and neurodiverse young people)	Friday 5 May	8 (3 answered questions)
Amman Valley League of Friends	Monday 15 May	15
Manse Monthly Group (transgender and neurodiverse students)	Monday 15 May	8
Adult Learning Wales ESOL Class visit (refugees)	Tuesday 16 May	6 (4 answered questions)



Event	Date (2023)	Number of people engaged
Pembrokeshire People First meeting	Thursday 18 May	28
<b>OTHER COMMUNITY MEETINGS/EVENTS/VISITS (NO NOTES PROVIDED)</b>		
Event at Giraldu Centre, Manorbier	Saturday 1 April	156, including 30 veterans, 6 BAME residents, 60 disabled people, and 60 unpaid carers
Drop-in café at The Well, Aberystwyth (homeless and vulnerably housed people)	Monday 3 April	20 (6 answered questions)
Drop-in session at the Morlan Centre, Aberystwyth (Afghan and Ukrainian refugees, and volunteers)	Wednesday 12 April	7
Visit to Waterloo Gypsy Site, Pembroke Dock	Wednesday 12 April	6, including 4 disabled people, and 3 unpaid carers
Visit to DDAS (substance misuse treatment centre) waiting room	Wednesday 12 April	1
Coffee morning at Giraldu Centre, Manorbier	Thursday 13 April	10, including 2 disabled people, and 3 unpaid carers
Visit to Tafarnscawen Farmhouse Gypsy Traveller Site, Plwmp	Thursday 13 April	2
Visit to Quay Foods, New Quay (Polish Community)	Thursday 13 April	1
Visit to Bro Preseli Well-being Hub	Monday 17 April	9, including 5 socially disadvantaged residents
Llanelli Multi Cultural Network meeting (Ukrainian and Polish Communities)	Tuesday 18 April	10
Adult Learning Wales ESOL Class visit (refugees)	Tuesday 18 April	6
Visit to Pen-y-Bryn Gypsy Traveller Site, Llanelli	Tuesday 18 April	6
Visit to Gipsy Lane Gypsy Traveller Site, Llanelli	Tuesday 18 April	6
Drop-in session at the Morlan Centre, Aberystwyth (Ukrainian refugees)	Wednesday 19 April	2

Event	Date (2023)	Number of people engaged
Drop-in session at the Morlan Centre, Aberystwyth (homeless and vulnerably housed people)	Wednesday 19 April	6
Visit to Skanda Vale Monastic Order	Thursday 20th April	2
Visit to Castle Quarry Gypsy Traveller Site	Friday 21 April	5
Visit to DDAS (substance misuse treatment centre) waiting room	Friday 21 April	5
Aberystwyth mosque visit	Friday 21 April	8
Aber Pride (LGBTQ+ Community)	Saturday 22 April	c.62
Visits to emergency accommodation units in Aberystwyth	Monday 24 April	10
Adult Learning Wales ESOL class for Ukrainian refugees (Coleg Ceredigion, Aberystwyth)	Tuesday 25 April	4
Coleg Ceredigion, Aberystwyth (Ukrainian Community)	Tuesday 25 April	4
Coffee morning at Giraldu Centre, Manorbier	Tuesday 25 April	5, including 2 disabled people and 3 unpaid carers
Kingsmoor Common Gypsy Traveller Site	Tuesday 25 April	4
Meeting at café, Lampeter (Syrian refugees)	Tuesday 2 May	2
Old Chapel Wellbeing Session, Tenby	Tuesday 2 May	c.15, including 2 disabled people, 4 unpaid carers, and 5 socially disadvantaged residents
Student Wellbeing Event	Wednesday 3 May	5
Salvation Army, Carmarthen (engagement with tea shop staff with mild learning difference)	Wednesday 3 May	4
Wellbeing Walk, Saundersfoot	Wednesday 3 May	15, including 5 disabled people, 3 unpaid carers, and 3 socially disadvantaged residents
Visit to Coleg Ceredigion, Cardigan	Thursday 4 May	10

Event	Date (2023)	Number of people engaged
Cardigan mosque visit	Friday 5 May	2
Event at Regency Hall, Saundersfoot (Ukrainian women)	Saturday 13 May	c.60
Multi-cultural drop-in, Aberystwyth (Syrian and Ukrainian refugees)	Wednesday 17 May	9
Homeless drop-in, Aberystwyth (Welsh-speaking members of local church)	Wednesday 17 May	
Kingsmoor Common Gypsy Traveller Site	Thursday 18 May	13

Key findings from other community events and meetings

Views on the proposed location of the new hospital

- 7.3
- Several attendees expressed a preference for a particular site simply because it is nearest to them. However, most were able to look at the three options more objectively and offered the positive and negative aspects reported below.

Whitland: Spring Gardens

- 7.4
- The comments made about each of the sites resonate with others from this consultation. The two Whitland sites were thought to be relatively accessible by road and it attendees said that a hospital at Whitland would benefit the town by stimulating growth and investment. The other identified advantages of the Spring Gardens site were that it would be cheaper to buy, that there is no danger of flooding, and that Whitland has more existing amenities than St Clears. However, distance from the train station was a concern, and whether the site is sufficiently large to allow for future expansion.

Table 38: Why is Whitland: Spring Gardens a ‘good’ choice for a new hospital?

Sub-Theme	Example Comments
Good access by road and rail	<i>This is a better choice if using a train (Milford Mosque)</i> <i>Good that it is close to A40 for people that drive (Mencap)</i> <i>From the perspective of Cardigan, Whitland is the best place for the new hospital. It is half an hour’s journey to reach the A40 from Cardigan so needs to be as close as possible to the A40 (Adult Learning Wales ESOL Class)</i>
No flood risk	<i>Good that it probably won’t flood as that is an increasing problem everywhere (Mencap)</i>
Cheapest option	<i>It’s cheaper than the other sites (Mencap)</i>
Existing infrastructure	<i>A better location as Whitland more built up than St Clears (St Paul’s Pay as You Will Café)</i>
Will contribute to growth of Whitland	<i>A good choice to build as good for developing town and community (Friday Prayers)</i>

Table 39: Why is Whitland: Spring Gardens a 'poor' choice for a new hospital?

Sub-Theme	Example Comments
<b>Poor accessibility by public transport</b>	<p><i>The train station isn't very close to walk but no information about whether there will be a bus to help you (Mencap)</i></p> <p><i>It is not the nearest to the train station and this group was very much in favour of using the train (Salvation Army, Carmarthen)</i></p> <p><i>Main concern was to do with transportation and the cost (Milford Mosque)</i></p>
<b>Limited room for expansion</b>	<p><i>Most hospitals need to add services, so it isn't the best for anything that needs to be built in the future (Salvation Army, Carmarthen)</i></p>

### Whitland: Tŷ Newydd

- 7.5 The distinct advantages of the Tŷ Newydd site were considered to be its size, and the fact that it is close to a railway station (though a participant at the Mencap event suggested that "the walk between Carmarthen train station and the bus station is too much, especially if you are not well. So, train travel might not be popular, so it won't matter that this site is closest to the station").
- 7.6 On the other hand, there were concerns about the need for improved road links and the cost of these.

Table 40: Why is Whitland: Tŷ Newydd a 'good' choice for a new hospital?

Sub-Theme	Example Comments
<b>Good access by road and rail</b>	<p><i>From perspective of Cardigan, Whitland is the best place for the new hospital. It is half an hour's journey to reach the A40 from Cardigan so needs to be as close as possible to the A40 (Adult Learning Wales ESOL class)</i></p> <p><i>This is a good choice if using train (Milford Mosque)</i></p> <p><i>It's closest to train station (Paul Ridd and Mencap)</i></p>
<b>Room for future expansion</b>	<p><i>When you look at the three different sites – A [Spring Gardens] looks quite small, B [Tŷ Newydd] looks big, and C [St Clears] looks small (Llanelli Deaf Club)</i></p>
<b>Will contribute to growth of Whitland</b>	<p><i>A good choice to build as good for developing town and community (Friday Prayers)</i></p>
<b>Existing infrastructure</b>	<p><i>A better location as Whitland more built up than St Clears (St Paul's Pay as You Will Café)</i></p>

Table 41: Why is Whitland: Tŷ Newydd a 'poor' choice for a new hospital?

Sub-Theme	Example Comments
<b>No direct access to site, which will be costly and disruptive to provide</b>	<p><i>The cost of a new road will likely increase by a lot as every other road/bridge scheme around the country seems to. It is already much more expensive than the other two sites (Mencap)</i></p>

Sub-Theme	Example Comments
	<i>A lot more money will need to be spent on roads and we all know how much extra they always cost ... There will be extra costs for roads that should be spent on the actual hospital (Salvation Army, Carmarthen)</i>

St Clears

- 7.7
- The main identified advantage of St Clears was its proximity to two major roads and, therefore, its relative accessibility from a range of communities. Also, the St Clears site has no risk of flooding. However, the question of access by rail was identified as a challenge, as was whether the town’s railway station will actually re-open.

Table 42: Why is St Clears a ‘good’ choice for a new hospital?

	Main Issues and Example Comments
<b>Good access by road and public transport</b>	<i>This may be the better option because of the motorway (Mencap)</i> <i>This is a good choice if using public transport or car (Milford Mosque)</i> <i>St Clears is more accessible, because you have two roads – from Tenby [A477] and from Haverfordwest [A40] (Sign and Share Deaf Group)</i> <i>The overall view is that St Clears is the best choice so long as transport links are improved (St Paul’s Games Group)</i>
<b>No flood risk</b>	<i>No flood risk – which is good (Milford Mosque)</i>

Table 43: Why is St Clears a ‘poor’ choice for a new hospital?

Sub-Theme	Main Issues and Example Comments
<b>The high cost of train station improvements and the likelihood of the station re-opening</b>	<i>The station might not get used a lot and will cost the taxpayer to reinstate it (Mencap)</i> <i>Not good if you want to travel on the train as 1000m is a long way for someone to walk if they are ill in some way (Salvation Army, Carmarthen)</i> <i>Must be good public transport for people who are poor or ill (St Mike’s Drop in, Aberystwyth)</i>

- 7.8
- There were insufficient comments gathered from these community consultations to identify a preferred site. Indeed, a relatively high number of comments were neutral concerning the location of the new hospital. People said they were unable to choose between them as the sites are in such close proximity and, therefore, either equally convenient or inconvenient in terms of access (depending on where people live); or that each site has its challenges, making it difficult to choose between them. Others just said that they had no preference of location, or that they would prefer to attend Morriston Hospital in Swansea as it is closer to them. This was a view frequently expressed by Llanelli residents for example.

*Why spend all this money on asking us where to put a hospital when they are so close together anyway? If you gave us choices of Ammanford, somewhere down west, and Whitland we would just choose the closest to us. Who wouldn't? We don't really care about the cost because they all seem close in cost anyway (Salvation Army, Carmarthen)*

*People more interested in what care will be offered (Mencap)*

*We would use Swansea if needed as it's closer (Gipsy Lane Traveller Site, Llanelli)*

- 7.9 Only a few participants explicitly stated that the St Clears site was preferred over the Whitland sites.

*St Clears is the site for the new hospital (Dunbia Factory Llandybydder)*

*Better than the other two (Mencap)*

*St Clears is probably the best site (Salvation Army, Carmarthen)*

### Alternative site suggestions

- 7.10 Some attendees, unsatisfied with the site options under consideration, put forward their own suggestions for alternative locations for the new hospital, such as the United Counties Showground in Nantyci, Carmarthen, and Penblewin near Narberth. Others said they would prefer HDdUHB to focus on improvements to existing hospitals.

*Why not upgrade the current hospitals? (Milford Mosque)*

### Additional considerations

#### Travel and access issues

- 7.11 For very many involved in the community meetings, travelling to the sites was the main issue, with access by public transport being a particular concern.

*[We are] not worried where the hospital was going to be built as long as there is free transport, like a shuttle bus, and if it is the one near the train station [we] would also need transport from the station to hospital (VC Gallery)*

- 7.12 The cost and convenience of public transport was raised, given that for many the distance to the new hospital would be greater than at present. The need for significant investment in community transport infrastructure was also highlighted.

*Community transport / country cars, these services have been cut down drastically (Pembrokeshire People First)*

- 7.13 There were real concerns over whether access would be possible when there are frequent roadworks or accidents leading to congestion on access roads (A40 and A477 in particular); how ambulances would be guaranteed speedy access to the site; the need to ensure infrastructure improvements are undertaken

before completion of the hospital build and the extent to which the Air Ambulance could be relied upon for emergency transportation given that it is not publicly funded.

*Road works on the A40. Over the Easter Bank holiday, it took one and a half hours to get to Carmarthen. How are people going to get there in time? (Pembrokeshire People First)*

*We've seen when ambulances cannot get through the traffic. We need a new road that takes you into the hospital (Llanelli Deaf Club)*

*Are you incorporating the Air Ambulance calculations in your time estimates? Because you shouldn't as they are privately funded (Pembrokeshire People First)*

- 7.14 Parking was also frequently mentioned as a concern, with attendees suggesting that there should be affordable or free on-site parking close to the hospital sufficient for the needs of a rural population of car drivers.

*We want to make sure there is going to be parking close to the hospital as it can take ages to find parking at Withybush (Castle Quarry Gypsy Traveller Site)*

*It would be nice if you received a numbered parking space with your appointment letter ... I've been late for appointments because I have not been able to park (Llanelli Deaf Club)*

## Recruitment and retention of staff

- 7.15 Participants at the Pembrokeshire People First meeting described a reluctance among NHS staff to relocate to the area for work; and attendees were concerned around whether staff and clinicians would be drawn from existing hospitals in the Hywel Dda area, including community hospitals, thereby depleting their capacity and services.

*The worry is people will choose to work at the new hospital instead of Withybush and slowly Withybush will close completely due to lack of staff (Pembrokeshire People First)*

*Doctors don't want to come down to this area to work (Pembrokeshire People First)*

## Some positivity

- 7.16 Despite the voiced concerns, many people in the community events were very positive about the prospect of a new hospital in the context of receiving better care in improved facilities.

*The money is going to the right place ... (Milford Mosque)*

*Looking forward to a new hospital wherever it is (Salvation Army, Carmarthen)*

*People are pleased that eventually Glangwili will be replaced as it is getting old (Mencap)*

*Had a terrible experience at Bronglais in an emergency situation. So very pleased there will be a new hospital (Refugee Drop In, Aberystwyth)*

## Views on equality and health inequality impacts

- 7.17 Attendees expressed concerns over access to and within the new hospital for vulnerable residents and those living with disabilities. They believed that these issues could be overcome by involving and engaging with a wide range of service users throughout the development process.

*If and when I need to go to the new hospital, I will need to have someone with me because it's unfamiliar and I get confused easily (Sign and Share Deaf Group)*

*What about staff talking to me? What happens if I don't understand them? ... I struggle to understand (Pembrokeshire People First)*

*Need help for neurodiverse people to manage anxiety ... Need services designed by and for neurodiverse people (Manse Monday Club)*

*Access and disability rights. Hoping the new hospital will be accessible. Have you considered speaking with people with disabilities on how accessible this new hospital will be? (Pembrokeshire People First)*

- 7.18 Specifically, attendees suggested that easy to read information, apps, and signs would be needed to aid access to and around the building for everyone, but particularly for people with learning disabilities and/or neurodiverse conditions.

*Could be a digital interactive map or a simple "you are here" map for getting around (Manse Monday Club)*

*We would need easy read information (Pembrokeshire People First)*

*Will signage at the hospital be bilingual with widgets? People need to understand a bit easier (Pembrokeshire People First)*

*It would be good if you could get an app to help people navigate the new hospital (Pembrokeshire People First)*

- 7.19 The need for staff to be aware of and sensitive to the needs of people with a diverse range of needs was also highlighted.

*Be aware of people with sensory needs: risk of over stimulation of too many people, bright lights, and loud noise (Manse Monday Club)*

- 7.20 A number of other suggestions were made to accommodate individual needs, such as providing a creche and childcare; offering a "multi faith room in the new hospital" (Milford Mosque); offering translation and interpretation services; and providing quiet spaces for those who need them.

- 7.21 Other concerns were raised around access to the hospital for disabled people and those who are economically disadvantaged and more likely to depend on public transport.

*... Families with children and adults with disabilities ... may find it harder to get to [the hospital] as if they have a wheelchair or scooter public transport may be hard (VC Gallery; Wellbeing Walk, Saundersfoot)*



*Economically disadvantaged people affected by travel costs. It is often the lower income people who get sick (St Mike's Drop in, Aberystwyth)*

# 8. Public engagement: focus groups with residents

## Introduction

- 8.1 To explore the consultation issues in more depth and gather informed feedback, ORS conducted seven two-hour focus groups with residents, one in each of HDDUHB’s seven locality areas. These sessions are best understood as ‘deliberative’<sup>9</sup> meetings in which the site options for a new urgent and planned care hospital in the south of the Hywel Dda area were tested against residents’ opinions.
- 8.2 This provided an opportunity to explore the extent to which each of the sites are acceptable or otherwise, and to understand in more detail the issues and arguments relating to them and other aspects of the Health Board’s transformation programme. The feedback received provides valuable insights to be considered, alongside all other evidence, by those making decisions.

## Attendance and representation

- 8.3 In total, there were **73** participants at the focus groups. The aim was to achieve between eight and 12 participants for each group, which was achieved in all but one case (north Ceredigion). The number of participants at each focus group varies due to unexpected ‘on the day’ dropouts, which is normal for sessions of this nature. The table below outlines brief details of each meeting.

Table 44: Resident focus group dates and attendance

Group	Date	Number of attendees
Amman Gwendraeth	Tuesday 28 March	10
Llanelli	Wednesday 29 March	11
Tywi Taf	Thursday 30th March	11
South Pembrokeshire	Tuesday 25 April	11
North Pembrokeshire	Wednesday 26 April	12
South Ceredigion	Wednesday 3 May	11
North Ceredigion	Thursday 4 May	7

- 8.4 Participants were recruited using quota-controlled recruitment in one of two ways. Some were accessed via random-digit telephone dialling from ORS’ Social Research Call Centre, which is an effective way of ensuring participants are independent and broadly representative of the wider community. Others were recruited by Acumen Field, a specialist recruitment agency, who initially sent out a screening

<sup>9</sup> Deliberative research gathers people’s views after they have been presented with the opportunity to ‘deliberate’ the issues under consideration. Moderators present a range of information and encourage differing points of view to be debated, before considered final decisions are sought.

questionnaire as an online survey to a database of contacts and, more widely, on social media platforms. They then collated the responses to establish a pool of potential recruits, which was ‘sifted’ to establish a contact list. People were then contacted by telephone, asked to complete a more detailed screening questionnaire and either recruited or not to match the required quotas. All those recruited were sent all the necessary details in a confirmation email and telephoned a day or two before the events to confirm their attendance.

- 8.5 In recruitment, care was taken to ensure that no potential participants were disqualified or disadvantaged by disabilities or cost of travel. As standard good practice, an incentive payment of £50 was paid to participants as a token of thanks and to cover childcare or travel costs. All focus group venues were accessible, and any special accessibility needs were considered during the recruitment and facilitation stages.
- 8.6 The recruitment process was monitored to ensure social diversity in terms of a wide range of criteria (including, for example: gender; age; ethnic group; working status; and disability/limiting illness). Overall, as shown in the table overleaf, participants represented a broad cross-section of residents across the Hywel Dda area.

GENDER	AGE	WORKING STATUS	ETHNIC GROUP	LIMITING ILLNESS OR DISABILITY
Male: 33 Female: 40	16-34: 19 35:54: 18 55-74: 26 75+: 10	Working full- or part-time: 51 Not working/retired: 22	White British: 71 BAME: 2	14

- 8.7 Although, like all other forms of qualitative engagement, deliberative focus groups cannot be certified as statistically representative samples of public opinion, the seven meetings reported here gave diverse members of the public the opportunity to participate actively. Because the meetings were inclusive, the outcomes are broadly indicative of how informed opinion would incline based on similar discussions.

### Discussion agenda

- 8.8 To ensure a properly deliberative approach, ORS used HDdUHB’s consultation material to develop a suitable agenda and informative stimulus material for the meeting, which covered the following themes:

A recap of the need for change;

The options development process;

The three site options (including the similarities and differences between the sites); and

Travel and transport issues.
- 8.9 The sessions were structured around a presentation devised primarily to inform and stimulate discussion of the above issues. In all groups, participants were encouraged to interject with queries or comments.
- 8.10 The topic guide has been included as Appendix IV.

## Main findings

### Views on the proposed location of the new hospital

- 8.11 Several participants in each group expressed a preference for a particular site simply because it is nearest to them. Most, though, were able to look at the three options more objectively and offered the positive and negative aspects reported below.

#### Whitland: Spring Gardens

- 8.12 Although participants liked the fact that Whitland: Spring Gardens has direct access from the A40 and that it is the cheapest of the three options, the fact that it has multiple private landowners was their primary concern. They also raised worries about the clinical and recruitment risks of siting a hospital further west, that the site has some flood risk and less space to expand, and that siting a large hospital in Whitland would destroy the character of the town.

Table 45: Why is Whitland: Spring Gardens a ‘good’ choice for a new hospital?

Sub-Theme	Main Issues and Example Comments
Direct access from A40	<i>It does have the direct access from the A40 and it’s the cheapest of the three options” (North Pembrokeshire)</i>
Cheapest option	

Table 46: Why is Whitland: Spring Gardens a ‘poor’ choice for a new hospital?

Sub-Theme	Main Issues and Example Comments
Multiple private landowners	<i>Multiple private landowners is going to cause chaos and it will be too expensive ... (Llanelli)</i> <i>Spring Gardens site has multiple owners, and it will take a long time to get agreement (South Pembrokeshire)</i>
Clinical risk	<i>Both Whitland sites are at risk of not catering for enough patients (North Pembrokeshire)</i> <i>I would be very concerned about either of the Whitland sites because they could lose their accreditation for neo-natal and paediatric services (South Ceredigion)</i>
Some flood risk	<i>We sided with St Clears ... due to the flooding in Whitland which will only get worse over time (South Pembrokeshire)</i> <i>The first thing [is] the fact that there was a flood risk on a couple of sites – it’s crazy really (South Ceredigion)</i>
Less space to expand	<i>There’s a lack of room to expand (North Pembrokeshire)</i>
Potential recruitment challenges	<i>They have had problems attracting people to Carmarthenshire because it’s too far west and so having a hospital in a rural place further west might not attract people either (Tywi Taf)</i>
Would destroy the character of the town	<i>I prefer St Clears and think it will destroy Whitland as an entity ... (Tywi Taf)</i>

Whitland: Tŷ Newydd

8.13 Those who preferred Whitland: Tŷ Newydd did so because the site is in public ownership, it is the largest site for futureproofing, the proximity of the train station to the site, and the potential for on-site renewable energy. However, there was concern about the potential flood risk and the lack of direct access to the site currently; and similar to Whitland: Spring Gardens, there were worries about the clinical and recruitment risks of siting a hospital further west, and that siting a large hospital in Whitland would destroy the character of the town.

Table 47: Why is Whitland: Tŷ Newydd a ‘good’ choice for a new hospital?

Sub-Theme	Main Issues and Example Comments
In public ownership	<i>The only thing that makes Tŷ Newydd attractive to me is the fact that it is in public ownership (North Ceredigion)</i> <i>Tŷ Newydd has got positives in terms of the ownership of the land because it is public ownership (Llanelli)</i> <i>Easier purchase with public ownership (North Pembrokeshire)</i> <i>With Tŷ Newydd in public ownership, in the long run that’s going to save you money ... (Amman Gwendraeth)</i>
Largest site for future expansion	<i>... It has opportunities for expansion in Tŷ Newydd ... If they could improve the road infrastructure that could be attractive though. It’s the biggest site (South Pembrokeshire)</i> <i>Tŷ Newydd is the biggest site which is good and might bring more employment to the surrounding area. And there might be more opportunities for more services on site (North Pembrokeshire)</i> <i>Tŷ Newydd has more scope for expansion in future. In 30, 40 years’ time when there’s more population and more services are required ... if it does need expanding, futureproofing is the thing (Amman Gwendraeth)</i>
Flood risk is minimal	<i>I don’t know just how high risk it is for flooding. If it was only on the small areas that wouldn’t be built on, then I would have thought Tŷ Newydd would be the preferable one (North Ceredigion)</i>
Shortest distance to train station	<i>If they could get a route to Tŷ Newydd that would be the best one because it has a train station ... (North Ceredigion)</i>
Potential for onsite renewables	<i>We did look at the Whitland: Tŷ Newydd site because of the onsite potential renewable energy rather than the offsite, so if you have an offsite renewable energy, obviously that is going to cost more for you to ship it in and ship it out, whereas if you have the onsite it is much more eco-friendly and there is also potential for income generation (Llanelli)</i>

Table 48: Why is Whitland: Tŷ Newydd a ‘poor’ choice for a new hospital?

Sub-Theme	Main Issues and Example Comments
Flood risk, which might worsen	<i>Will the flooding get worse in the next 10 years on Tŷ Newydd? (Tywi Taf)</i>

Sub-Theme	Main Issues and Example Comments
	<p><i>We sided with St Clears ... due to the flooding in Whitland which will only get worse over time (South Pembrokeshire)</i></p> <p><i>Once developed the flood plain/water table will change (North Pembrokeshire)</i></p> <p><i>With climate change, the flood risk on Tŷ Newydd could change and pose more of a risk (Amman Gwendraeth)</i></p>
<b>No direct access to site, which will be costly and disruptive to provide</b>	<p><i>Until roads improve there is no direct access [to the site] (Llanelli)</i></p> <p><i>Ambulances may struggle to get to Whitland (South Pembrokeshire)</i></p> <p><i>There's room for expansion, but huge road infrastructure needed. How is that going to work there? (North Pembrokeshire)</i></p> <p><i>Area is too built up. Unrealistic expense to address access and new roads (North Pembrokeshire)</i></p>
<b>Potential for anti-social parking</b>	<p><i>When you are talking about local roads, if you have more traffic, they do get busy very quickly and then you do get, potentially parking on the local roads ... when you go to the hospital (North Ceredigion)</i></p>
<b>Clinical risk</b>	<p><i>Both Whitland sites are at risk of not catering for enough patients (North Pembrokeshire)</i></p> <p><i>I would be very concerned about either of the Whitland sites because they could lose their accreditation for neo-natal and paediatric services (South Ceredigion)</i></p>
<b>Close to existing residential areas</b>	<p><i>Close to existing new residential houses which is a negative (South Pembrokeshire)</i></p>
<b>Would destroy the character of the town</b>	<p><i>I prefer St Clears and think it will destroy Whitland as an entity ... (Tywi Taf)</i></p>

## St Clears

- 8.14 Overall, the St Clears and Whitland: Tŷ Newydd sites were considered preferable to Spring Gardens, with more individuals ultimately choosing St Clears (some as the 'least worst option' due to their expressed preference for upgrading existing sites). This was predominately because, for many, the St Clears site is geographically the most accessible, is owned by one single landowner, and poses less clinical and no flood risk. Several people, though, stressed the importance of ensuring the train station is re-opened if this site is chosen.

**Table 49: Why is St Clears a 'good' choice for a new hospital?**

	Main Issues and Example Comments
<b>More accessible, especially by road</b>	<p><i>Generally speaking, it's the access (except for holiday traffic). Easy to get to and easy to find (North Ceredigion)</i></p> <p><i>We prefer St Clears by a short head. It's the A477 and exiting infrastructure (South Pembrokeshire)</i></p>

	Main Issues and Example Comments
	<p><i>The St Clears site is best ... both roads have access [and] more people perhaps will have better access (South Ceredigion)</i></p> <p><i>Ease for many rather than outliers; most central location. Better links to other hospitals ... (North Pembrokeshire)</i></p> <p><i>It's the direct access from the A40 and the A477. If you're going to try and sell this to people, you're going to have to sell it to people in north Pembrokeshire and south Ceredigion ... and St Clears is easier for them (Amman Gwendraeth)</i></p>
Less clinical risk	<p><i>All have some risk to meeting Government guidelines ... St Clears is most acceptable in this regard (North Pembrokeshire)</i></p> <p><i>You would get more cases here instead of Swansea [and] the more cases who come to the new hospital then the better the hospital becomes (South Pembrokeshire)</i></p> <p><i>If being too far west is going to drive people out of the area, I think it's super important to keep the specialist obstetricians and midwives in the Hywel Dda area (Amman Gwendraeth)</i></p>
Less additional travel time	<p><i>I would vote for St Clears because everything seemed to be better ... less travel time (North Ceredigion)</i></p> <p><i>The emergency travel time is nine mins longer [for both Whitland sites] and then six minutes longer for St Clears ... That is time in which you could save someone's life (Tywi Taf)</i></p> <p><i>Average time to get to St Clears is quicker than Whitland and if ambulances need to get there it's quicker ... The road is already quite good (South Pembrokeshire)</i></p>
Single private landowner	<p><i>If I am running this project, then I am going for the one private landowner option because it is a lot less work (North Ceredigion)</i></p> <p><i>St Clears only has one landowner which is good and with multiple private landowners people may want more money to sell ... (Tywi Taf)</i></p> <p><i>The advantage of a single private owner (South Pembrokeshire)</i></p>
No flood risk	<p><i>The lack of flood risk in St Clears is a big positive (South Ceredigion)</i></p>
Still within reasonable distance of a train station	<p><i>I don't think that 1km from a station to a hospital is a long way, but I understand not everyone can walk a kilometre and there will be limitations for some... (North Ceredigion)</i></p>
Easier to attract staff	<p><i>Closer for staff to the M4 for work (North Pembrokeshire)</i></p>
Already investing in infrastructure in St Clears	<p><i>... Already investing in different things in St Clears ... (North Pembrokeshire)</i></p>

Table 50: Why is St Clears a 'poor' choice for a new hospital?

Sub-Theme	Main Issues and Example Comments
Distance from train station (which is not yet open)	<p><i>... If you have people who are catching the train ... that is nearly a mile for them to travel which is a long way. So, it's good for the roads but not public transport and the patients who go to</i></p>

Sub-Theme	Main Issues and Example Comments
	<p><i>hospitals [on public transport] ... are on lower wages and so that is a concern (North Ceredigion)</i></p> <p><i>Train line not active yet and the distance from train station (North Pembrokeshire)</i></p>
<b>Limited room for expansion</b>	<p><i>How can you expand where there are things in the way? St Clears is trapped by the A40 and has a river. ... The statement that St Clears doesn't have room for expansion; it makes no sense to me... You need land to expand (Tywi Taf)</i></p>

### Issues relating to more than one site

- 8.15 In terms of issues relating to more than one site, significant concern was expressed that neither Whitland site would meet national guidelines on minimum number of patients treated within neo-natal and maternity departments. There were also worries about the prospect of futureproofing at all sites.

*... We have to look to the future; we can't be in this state again and we have to think 50 years ahead ... Wherever it goes, and the way modern science and technology is moving, a site has got to have room to grow, and the population is growing ... (Llanelli)*

*If you are going to spend £1.3 billion ... you need to know you are investing for the future. You need to know that if you are going to need to expand on that in 30 years' time, and in twenty years' time there is some wonderful medical breakthrough that you all need this treatment, then you actually have room to do it ... (Tywi Taf)*

- 8.16 Finally, it should be noted that there was considerable scepticism, especially at the North Pembrokeshire group, about the accuracy of the 'additional' travel time estimates by ambulance, and car, with many highlighting the difficulties involved in travelling around the Hywel Dda area, especially in the summer. Furthermore, participants in most groups expected significant cost inflation and timetable slippage as time passes.

*£1.3 billion sounds like a lot of money but that is an ambitious shopping list, and everything has gone up in price. For infrastructure projects like that then the hospital will be in the high hundreds of millions ... (South Pembrokeshire)*

*I'm certain that Hywel Dda will go back to Welsh Government sometime in the next four or five years to say, 'Everything's been delayed; can we have some money to upgrade Glangwili and Withybush to keep them safe in the meantime' (Amman Gwendraeth)*

- 8.17 In light of the latter point, the safety and sustainability of services in the interim period was a concern, with several participants across the groups questioning what would be done to ensure residents are able to access good quality healthcare while the new hospital is being built.

*Glangwili and Morriston don't work at the moment and it's a long time to wait 10 years for a new A&E (Tywi Taf)*



*... We won't have the healthcare we would like to have because we have this long lead time before the new hospital comes off (South Ceredigion)*

## Additional considerations

### Travel and access issues

- 8.18 Each group had concerns about the plans for a new urgent and planned care hospital for the south of the HDdUHB area, which were primarily based around geography and access, especially for those living on the extremities. Specific concerns were expressed in relation to poor road infrastructure, inadequate public transport links, and traffic congestion, especially in the summer months. Some of the many typical comments can be seen below.

*It is horrific in the summer holidays all around Carmarthen and that is the main road to Tenby ... How can they even conceive having a hospital that is bang in the middle of a ridiculously [busy area]? ... I don't mind travelling an hour, but ... they are going to be talking about an hour and a half easily for me to get across Carmarthen and over to St Clears during the summer season ... (North Ceredigion)*

*Those who live in Dale, St David's; if we move the A&E from Withybush to any of the other three, that adds half an hour/three quarters of an hour or maybe even an hour depending on traffic and small roads ... I am really worried for people right over in the West; they are going to have an awful lot more problems getting to A&E (South Pembrokeshire)*

*For us in the Llandeilo area, we have an appalling transport link even to Carmarthen at the moment so even to get an appointment in Llanelli or Carmarthen is impossible without a car ... They need to look at the wider public transport (Tywi Taf)*

*... From the public transport side of it. For us to get down to the sites from this area and with waiting times either side you're talking about three hours (Amman Gwendraeth)*

*We are two miles from a bus stop. How do we get there? ... We don't have very many buses where I live. I would somehow have to get a bus to Carmarthen and change ... And they probably don't start early enough to get you to wherever you are going (South Ceredigion)*

- 8.19 A couple of participants also worried that ambulances would be called out more often because of people's inability to transport themselves to an A&E, placing extra burdens on an already stretched service.

*The whole ambulance service may need to change because you will get a whole new group of people who need to get an ambulance because of the longer transport times (Tywi Taf)*

- 8.20 When asked what mitigations could be considered to counteract travel issues, regular, affordable, and timely transport (including community transport) was advocated for visitors, staff, and those with planned care appointments at the new hospital. It was also suggested that travel cards should be made available for those on lower incomes, and that shuttle buses from local train stations, or even more park and ride systems, could be considered.

- 8.21 Finally in terms of travel and access, the need to provide adequate parking at a new hospital was stressed by many participants, especially in light of the public transport difficulties reported earlier.

*I hope parking facilities both for staff and for patients have been taken into account. Parking in all hospitals is dreadful, especially if you don't have a Blue Badge. Even then you only occasionally can [park]. They need huge parking facilities.... Especially when everyone will be driving (South Pembrokeshire)*

### Recruitment and retention of staff

- 8.22 Regardless of how participants felt about the prospect of a new urgent and planned care hospital for the south of Hywel Dda, there was widespread concern about HDdUHB's ability to recruit enough staff (specialist staff in particular) to a relatively rural and geographically remote site.

*They have had problems attracting people to Carmarthenshire because it's too far west and so having a hospital in a rural place further west might not attract people either (Tywi Taf)*  
*... The specialist care is really attractive but are the specialist staff actually going to come there? Do you have the amount of specialists that we actually need? (North Ceredigion)*

- 8.23 Moreover, while the proposed network of community hubs was generally viewed positively (as discussed further below), participants frequently questioned the feasibility of staffing them in addition to the new hospital; and with specific regard to the repurposing of Glangwili and Withybush Hospitals as community hospitals, participants anticipated difficulties recruiting GPs to staff the proposed urgent care centres.

*A GP led urgent care centre is all very well, but where the hell are you going to get the GPs from? Now, they are overworked and have no time (North Pembrokeshire)*  
*... The community hubs, where they say there will be day care beds and x-ray. There are not enough radiographers at the moment so if you have multi-site x-ray machines then you haven't got any more people who can work there ... I love the idea but ... (North Ceredigion)*

- 8.24 The proposed locations for the new hospital might also, it was felt, be a barrier to recruiting ancillary staff such as porters, caterers, and cleaners. Others felt that the need to fill these roles could be a 'massive opportunity' for local residents.

*Whitland is a low wage economy in a relatively high unemployment area and so we need a range of jobs for our children to have choice without having to leave the area they grew up in and move to get a job (Tywi Taf)*

### Infrastructure issues

- 8.25 Related to the above is the ability of Whitland or St Clears to cope with the infrastructure requirements necessary to sustain a new hospital. The provision of affordable housing (or even key worker housing) was cited as the biggest need, as well as larger schools, improved public transport, and better roads. Some

participants considered this to be unrealistic and/or damaging to the character of whichever of the small towns is chosen.

*You would have to double the size of Whitland or St Clears to have capacity for staff and families ... this is going to be something absolutely devastating for the villages ... (Tywi Taf)*

*I don't know what numbers of staff they expect to be in a place this size ... but with their families, where on earth are these people going to live? (North Pembrokeshire)*

*... I would absolutely advocate for key worker housing ... for the first three years of your qualification or whatever, you get subsidised rent ... If you have got secure accommodation for a period of time, then you are unlikely to move and decide whether you want to stay there and if you want to rent (Tywi Taf)*

### The future of Bronglais Hospital

- 8.26 There was some concern in the north Ceredigion group that the development of a new urgent and planned care facility for the south of Hywel Dda would result in a loss of specialist staff and, consequently, services from Bronglais. Participants sought reassurance that this would not be the case and that the future of Bronglais as a district general hospital is assured.

*What are we going to lose from Bronglais? There will inevitably be slippage of staff from there and Bronglais will be downgraded to supply what is needed in terms of funding and personnel ... there is a scepticism [that Bronglais won't be affected] and that there will be a bright, shiny, new toy and everything else will get bugger all (North Ceredigion)*

### The impact on neighbouring health boards

- 8.27 Participants in the Amman Gwendraeth and Tywi Taf groups questioned whether Swansea Bay University Health Board had been consulted about and is comfortable with the “influx” of east Carmarthenshire residents that may wish to use its services rather than travel further to a hospital within their health board boundary.

*Have Morriston being consulted on this about the potential pressure this might put on them? ... There will be people a bit closer to Carmarthen that might have gone to Glangwili who would now go to Morriston (Amman Gwendraeth)*

- 8.28 There was some sense, though, that many people would prioritise quality over proximity, and would be prepared to travel further for a “centre of excellence”.

### Alternative suggestions

- 8.29 As a result of the worries reported above, at least some participants in all focus groups (and especially in South Ceredigion and North Pembrokeshire) felt that the funding planned for the proposed new hospital should be redirected into upgrading Glangwili and Withybush Hospitals.

*... we are very disappointed that they are not going back and thinking of upgrading the existing services (South Ceredigion)*

*The money that's available; use that to upgrade Carmarthen, Prince Philip, and Withybush instead of this white elephant (Amman Gwendraeth)*

- 8.30 However, there was also recognition that providing a modern, fit-for-purpose hospital of sufficient size would not be possible on the existing Glangwili and Withybush sites.

*... The buildings need to change ... and Glangwili and Withybush are very difficult geographically. They need to expand (North Ceredigion)*

## Some positivity

### Economic, health, and staffing benefits

- 8.31 There was positivity about the prospect of a new urgent and planned care hospital. Some participants argued that it would be beneficial for the area, both economically and in terms of improving health and wellbeing outcomes; would help overcome HDdUHB's staffing challenges and modernise the hospital estate; and enable the repatriation of some services to the area.

*It's brilliant news for either Whitland or St Clears. It really helps lift our economy, gives our children jobs and it means young people don't have to leave the area to get well paid jobs. And if it's planned properly and it is actually predicated to shift the balance between preventative health measures, it would be an absolute game changer across the three counties for our health, wellbeing and our economy. So, I am a huge fan (Tywi Taf)*

*... In Wales you can't have staff all over the place and if you have a new hospital where you can do the 24/7, it seems to me to be the logical thing to do. It's a shame and there are some downsides but there are some positives as well. The logical thing to do is not to have staff spread out so far ... (South Pembrokeshire)*

*... Instead of shipping you off to Cardiff, you go to this new hospital, and you are literally down the road ... I understand you might struggle to get [there], but surely it would be easier for you to get to the new hospital than to Liverpool, Birmingham, or Cardiff (Llanelli)*

### Infrastructure improvements

- 8.32 Specifically, it was suggested that establishing a hospital in the area proposed would be an impetus to infrastructure improvements there, especially in terms of roads, public transport, and schools.

*If the hospital emerged it would be very good for the primary school, and we would probably see an expansion of it ... It will be a good thing educationally for the area (Tywi Taf)*

*They would have to do something about a train station and how would buses get up those narrow roads from the train station? It's good that they are willing to make the roads wider or whatever for buses (Tywi Taf)*

## Staff recruitment, retention and wellbeing

- 8.33 The provision of a modern, fit-for-purpose working environment for staff was also considered essential in improving their wellbeing.

*It's positive; making it modern and moving with the times (Amman Gwendraeth)*

*Staff, patients, and visitors having a nicer environment is so important (Llanelli)*

*... A brand-new upgraded hospital will be great and it's not good for [staff's] mental health to be in a horrible hospital that's falling apart and smells, with nothing to do. I don't want that on a 12-hour shift, but if I am in this nice, new, modern hospital and I can just pop down the corridor with nice toilets and access to vending machines ... I know it's only little, but things like that ... (Llanelli)*

- 8.34 Furthermore, in contrast to the recruitment and retention concerns reported above, at least some participants in most of the focus groups thought that a new hospital with specialisms and up-to-date technology (coupled with the relative affordability of the area) would be attractive to prospective staff, particularly the younger generations – and even more so if it were to become a teaching hospital.

*... Having a new hospital with career-grade and modern facilities will attract people ... (South Pembrokeshire)*

*I've got a 19-year-old daughter who is training to be a nurse and she is being swayed by the newer facilities. We've been to visit Southmead in Bristol and places like that. She's erring towards those ... so I do think there is an argument for the doctors and nurses of tomorrow wanting to come and work somewhere new with the newer technology and the nicer environments (Amman Gwendraeth)*

*... Junior doctors and nurses want to be in a teaching hospital and want to ... move into specialisms ... People won't want to come unless it's a teaching hospital and so sexy and so wonderful. And it is absolutely the place to be (Tywi Taf)*

## Separation of planned and emergency care

- 8.35 The prospect of separating emergency/urgent care and planned care was welcomed in ensuring as few planned procedures are cancelled as possible. There was, though, was some scepticism that this would be feasible.

*The one thing that throws hospitals out ... It's that urgent care needs overtake and knock everything else out. So, if emergency care can't be planned and managed properly then everyone else waiting for procedures that aren't life-threatening ... they then get thrown under the bus again ... Urgent care and planned care being separated is a really important and huge thing (Tywi Taf)*

*.... This line down the middle of the hospital and that will be emergency and that will be planned care, that has never worked once in any hospital I have ever seen, because when emergencies arise, and beds get taken ... (South Ceredigion)*

## Support for improving community services

- 8.36 The prospect of a network of community hospital and hubs was welcomed by many participants, and there was some suggestion that this aspect of the transformation programme should be better promoted to mitigate residents' travel and access concerns (at least to some extent).

*My experience of hubs is that they work ... You need the hubs to do the triage and then deliver them to the hospital; you can't treat the big ones as a be all and end all (Tywi Taf)*

*The hubs are a brilliant idea. They're very positive ... and a lot of what we might travel to A&E for can be dealt with two minutes down the road (Amman Gwendraeth)*

*... You have your treatment in the new hospital and then [for] your recovery you are going back to one of the four hospitals and so you are not going to be there forever and a day (Llanelli)*

*... [There are] a lot of elderly people who are stuck in hospital and can't come home because of a lack of social care and this will have an impact on that .... You will have movement. [Patients] are desperate to come home but they can't ... So, at least ... you will get that kind of trickle care and they will be able to get home, will not be bed blocking, will have more access to services in the community that they should be having (Llanelli)*

- 8.37 Indeed, there was a strong sense that the community healthcare aspects of the HDdUHB plans should be given equal prominence to the urgent and planned care hospital given their critical importance in achieving positive healthcare outcomes.

*A question is will there be the balance of community services in place? If they are not given the opportunity to ensure, for example, mental health is better resourced then none of this works anyway. The impact would be that you have poured all this money in, and you haven't got better health outcomes for people. That would be such a shame (Carmarthen)*

## Views on equality and health inequality impacts

- 8.38 In terms of the specific groups that might be particularly affected by the proposed siting of the new hospital, older people were thought to be less likely to have a support network and oftentimes are more isolated. It was also said that many older people have existing disabilities, frailty, and/or mobility issues, so having to travel to either Whitland or St Clears could cause real issues with transport for the purpose of visiting or attending planned appointments.

*Our older generation will be affected regardless and that's something that needs to be built into the plan ... (Llanelli)*

- 8.39 Concerns were raised about the impact of changes on patients and visitors with disabilities, who might already find travelling to hospital challenging and expensive.

*... Disabled services are being withdrawn and they are limited severely by not being able to access public transport (North Pembrokeshire)*

- 8.40 The proposed locations were also said to put people from rural areas and small villages at a disadvantage, in particular those who are reliant on public transport, or isolated individuals without a support network of family and friends who are able and willing to drive them to appointments, and to visit them whilst in hospital.

*Non-drivers ... The last bus in Withybush left before the last visiting hours which is not good for patients ... Buses round here are useless (South Pembrokeshire)*

*It's people in poverty; people who can't drive ... deprivation is connected to transport and health care (North Pembrokeshire)*

- 8.41 Other groups mentioned were prospective homeowners wishing to live close to the chosen site, and those living in areas with poor internet connections who would be unable to access telemedicine and other digital healthcare opportunities.

*They are not going to be able to afford to buy houses round here. I don't think people who are struggling today will find it any easier with the hospital because house prices and the general price of things will go up (Tywi Taf)*

*... This new hospital will use a lot of online technology and interfacing with people so they can hopefully divert them to the right hospital and there will still be parts of this area of Wales who still aren't really connected (South Pembrokeshire)*



# 9. Written submissions

## Introduction

- 9.1 During the formal consultation process, 27 written submissions were received from:
  - » Llais
  - » Aberystwyth Town Council
  - » Individual Member of the Senedd
  - » Llanelli Town Council
  - » Ceredigion Public Service Board Respondent (two responses)
  - » 21 individual respondents
- 9.2 ORS has read all the written submissions and reported them in this chapter. Most have been reviewed in a thematic, summary format in order to identify the range of views and issues as well as common themes, though some that have presented unique or distinctive arguments, that refer to different evidence or were submitted on behalf of organisations and individuals representing groups of people, have been summarised individually for accessibility and to highlight their main arguments and any alternative proposals.

*It is important to note that the following section is a report of the views expressed by submission contributors. In some cases, views may not always be fully supported by the available evidence - and while ORS has not sought to highlight or correct incorrect statements or assumptions, this possibility should be borne in mind when considering the submissions.*

## Summary tables of themes from individual written submissions

- 9.3 Overleaf are summary tables of the main themes emerging from the shorter or less complex written submissions received from individual respondents.
- 9.4 Travel and access were again key themes arising from the written submissions. Respondents complained about access to all three proposed sites by road and public transport, particularly from the extremities of the Hywel Dda area. There was also concern that reliance on outside organisations would mean the necessary infrastructure improvements would not be realised.

Table 51: Summary of main themes raised in written submissions - travel and access

Sub-Theme	Example Comments
General accessibility of the sites	... We would be required to travel cross country on very rural often narrow and windy [roads] which would add extra travelling time ... There would be no public transport that we would be able to use as it is rural. We would be required to get a bus to Carmarthen and then try and get a link to the new site of hospital, at present we get a link bus to the nearest main



Sub-Theme	Example Comments
	<p><i>route for pick up by public service bus [ which is only every two hours] and that then takes us straight to the Hospital in Carmarthen ... (Individual respondent)</i></p> <p><i>A new hospital at either planned site will increase the mileage by some 20 miles thus using up the 'golden hour' so utterly vital in an emergency situation (Individual respondent)</i></p>
<b>Accessibility of the sites by public transport</b>	<p><i>The public transport network in Ceredigion is poor ... and definitely does not link directly to either St Clears or Whitland. It requires numerous changes and considerable cost and time. There is no Sunday service and the rail network between Aberystwyth and anywhere to its south is non-existent (Individual respondent)</i></p>
<b>Accessibility of the sites from the east of the Hywel Dda area</b>	<p><i>Living in Llandovery, the furthest point from where your proposed hospital, you [are] obviously not thinking about us more rural areas. It's far enough to travel to Glangwili hospital from here and now you're taking it even further ... Why don't you spend the money to improve Glangwili ...? (Individual respondent)</i></p> <p><i>I am absolutely disgusted that you are even thinking of building this hospital in Whitland/St Clears. Just think of the population living in Llandeilo/Llandovery area and see how far they have to travel even to Carmarthen (Individual respondent)</i></p>
<b>Accessibility of the sites from the north of the Hywel Dda area</b>	<p><i>No-one could doubt the overdue need for a new hospital in the Health Board's area, and the associated proposals to improve community healthcare are to be welcomed ... But the main issue raised at yesterday's meeting was the difficulty in accessing any of the proposed new sites from this part of Ceredigion ... It is, frankly, irrelevant to people in this area which site is chosen. They are all at least an hour's drive away, with no direct public transport ... It is obvious from even a cursory glance at the map that this concentrates acute and serious emergency hospital care in the southern part of the region, with the other acute hospital way up in the north, in Aberystwyth (Individual respondent)</i></p>
<b>Potential (or lack thereof) of transport infrastructure improvements</b>	<p><i>When questioned in detail about the discussions that were being held with Transport for Wales, County Councils and the transport minister, it became clear that the Health Board has no power to require improved public transport links, and can rely only on hope and lobbying (Individual respondent)</i></p>

- <sup>9.5</sup> One respondent suggested a “moratorium on any hospital new build before its new access roads have been completed, not just 'promised', so that all the community and other existing hospitals--promised to be developed--are no more than 30 minutes apart, by road.”

Recruitment and retention of staff

- 9.6 Recognising the existing workforce struggles within the NHS, a few respondents were sceptical that a new hospital further to the west of the area would attract the required specialist staff, or that the relative remoteness of the area would allow the recruitment and retention of ancillary workers. One respondent was worried that ongoing resourcing issues would result in the eventual closure of community facilities such as Glangwili and Withybush Hospitals.

Table 52: Summary of main themes raised in written submissions - staffing

Sub-Theme	Example Comments
Recruitment and retention of specialist staff	<p>... You are going to spend millions on this new hospital, and I really can't see you getting the staff ... I do not think that a new hospital will encourage new staff to apply to work there (Individual respondent)</p> <p>Have you thought where you are going to have staff for this hospital? You can't even fill places in Carmarthen which is more central. They can't get staff in the new Grange hospital in Cwmbran... (Individual respondent)</p> <p>Will medical personnel be available to adequately staff a new and vast complex? (Individual respondent)</p>
Recruitment and retention of ancillary staff	<p>Any large hospital development will rely on its ancillary staff to get it running ... and proximity to a largish town is essential to be able to recruit and keep these essential workers (Individual respondent)</p>
Potential for staffing issues to affect community facilities	<p>I don't believe that you will keep the other hospitals open ... You will gradually close them down as you will not have the staff and the money to run them ... (Individual respondent)</p>

- 9.7 In light of these potential issues, one respondent suggested that “the survey that Hywel Dda needs to do is a nationwide survey of physicians and surgeons in training, to find out their needs and aspirations, and what might tempt them to come to work, permanently, in this part of the world.”

The consultation process

- 9.8 Several submissions criticised the consultation process, particularly with respect to decisions having already been made and the public not feeling listened to (a feeling that has evidently arisen following previous consultations); and a lack of promotion and thus awareness of the consultation and site options.
- 9.9 There was, though, some praise for the way in which the public drop-in sessions were run, with one respondent even stating that, having attended one ,they had changed their mind about the prospect of a new hospital.

Table 53: Summary of main themes raised in written submissions - consultation process

Sub-Theme	Example Comments
<b>Decision already made/public not being listened to</b>	<p><i>We have had our say, and as usual you have NOT listened ... you will do what you want as you have always done ... (Individual respondent)</i></p> <p><i>This appears to be a fait accompli rather than an opportunity to express an opinion on maintaining a service in Withybush ... (Individual respondent)</i></p> <p><i>What is the point of wasting everyone's time by having a public consultation when you don't want to listen to the wishes of the people of Pembrokeshire and have no doubt made your minds up already ... (Individual respondent)</i></p> <p><i>I'm sure you are going to go ahead with this multimillion hospital the powers have decided no matter what objections you will get (Individual respondent)</i></p> <p><i>Residents in their hundreds have gathered on numerous occasions to seek the retention of all resources in an efficient and well-maintained Withybush General Hospital. People's views and wishes were subsequently ignored ... So, I hope you will please excuse my cynicism for harbouring serious doubts that no matter whatever heartfelt and practical views the public express during the 'consultation', plans will go ahead with a decision no doubt already agreed (Individual respondent)</i></p>
<b>Lack of awareness of consultation/options</b>	<p><i>... This was the first time I had become aware that plans for a new hospital were at this stage ... I appreciate that the consultation exercise may not be of sufficient importance to merit the national news ... but there are numerous community notice boards which surely could have been used to draw attention to the project. My husband and I have also visited our local doctors' surgery, Glangwili Hospital and Covid vaccination centres over the past year, without being made aware of it ... These would seem very easy targets for publicity, which were sadly overlooked (Individual respondent)</i></p>
<b>Lack of awareness of previous engagement/consultation</b>	<p><i>... I was astonished to see that all three sites under consideration are within only minutes' drive of each other, and all are in the Whitland/St Clears area. The consultation document indicates that in fact the last five shortlisted sites were all in this same area, and I am not aware of any other locations given serious consideration (Individual respondent)</i></p>
<b>Criticism of accessibility of consultation events</b>	<p><i>Pembrokeshire is home to some 125,000 residents; 17% are under 16 years of age and 25% are aged 65 years and over so it will be nigh impossible for very many to participate in the consultation due to the strictly limited number [of] "drop-in" events to be held at such inconvenient venues around the county ... (Individual resident)</i></p>

Sub-Theme	Example Comments
Praise for consultation events	<i>The consultation took place in a cordial atmosphere and the Board's representatives were approachable and sympathetic (Individual respondent)</i>
Opinion changed as a result of meeting with Health Board	<i>Travelling to the meeting earlier this evening I was inclined not to support the possibility of downgrading West Wales General Hospital and to build a new Hospital ... However, following tonight's – excellent – presentation I am pleased to add that, in principle, I support the "New Hospital Site" ambition ... I do have continuing concerns with regard to access to the proposed new sites ... However, on balance, I am pleased to confirm my support for this part of the consultation and I wish you every success as you, hopefully, develop this exciting initiative" (Individual respondent)</i>

9.10 In addition to the lengthy submission outlining concerns around obstetrics later in this section, other respondents also raised concerns around the impacts of additional travel to any of the three sites on expectant parents.

Table 54: Summary of main themes raised in written submissions – equalities issues

Sub-Theme	Example Comments
Impacts of additional travel on expectant parents	<i>Have you considered how far mothers in labour have to travel from here to even Carmarthen ... Expectant mothers will now have to travel even further (Individual respondent)</i>
Impacts of additional travel on specific groups (e.g., older people, disabled people, those on lower incomes)	<i>Should (or when) the planned hospital eventually come to fruition ... will there be a dedicated bus service available from Haverfordwest for people including disabled, elderly etc., who have no car or do not drive; for people who may be required to travel by rail will there be financial assistance available to cover expensive train - or dare I say taxi - fares? Further travel by patients and staff will also inevitably increase the carbon footprint (Individual respondent)</i>

Alternative site suggestions

9.11 As in several other consultation methods, some respondents made alternative site suggestions: these were not specific, but more generally around the Carmarthen area.

*The point was made several times yesterday that Carmarthen is far superior to the chosen sites in terms of population size (making the provision viable), housing potential for staff, public transport access (such as it is!) and drive time from here. This is borne out by your own maps in the technical documents indicating journey time, ambulance access and accident hotspots.*

### Other considerations

9.12 The other consideration raised in the written submissions was around clinical sustainability and the potential for those in the Llanelli area to access their healthcare in Swansea.

### Summaries of detailed submissions

9.13 As previously mentioned, some written submissions have been summarised in more detail to highlight their main arguments. Those reported here have been chosen either because they cite sources of evidence or raise ‘different’ issues to those repeated by a number of respondents, or because they represent the views of larger groups of people.

#### Llais<sup>10</sup>

Llais attended each of the public consultation drop-in and online events and has monitored social media comments where possible. It feels that the Health Board’s approach was generally very good, with *“welcoming events and helpful senior staff present to discuss the options and wider clinical model”*. In general, it says that the consultation was *“well-run and appropriate given the site selection focus.”*

#### Themes coming through the events: transport

Llais notes that public drop-in event attendees were concerned about the impact a new hospital in St Clears or Whitland would have on ambulance response times: *“An issue that was raised regularly during the consultation centred around transport and being able to access NHS services”*. Llais also highlights people’s concern that transport infrastructure is not currently sufficient to support the logistical challenges of many people accessing a new hospital.

For Llais itself, transport is a fundamental issue that is critical to the success of the Health Board’s proposals. In this context, Llais feels that, *“the Health Board must look at patient transport strategically and innovatively with a commitment to invest appropriately. It will be important that looking to the future, this model is based on a sound understanding of transport needs as service changes develop and that providers of transport services are put on a sound footing to meet those needs.”*

**Recommendation 1**  
*“We expect the Health Board to make a clear commitment to placing transport at the heart of its strategic plans with a willingness to innovate, a clear understanding of need, and appropriate funding to meet those needs. Transport providers including third sector providers need to be closely involved with planning”*

<sup>10</sup> The recommendations referred to in this submission were issued by the Community Health Council in response to the publishing of HDdUHB’s long term health and care strategy, ‘A Healthier Mid and West Wales’, in 2018. During 2023, the Community Health Councils transitioned over to form a new Citizens Voice Body for Health and Social Care in Wales, called ‘Llais’. Llais is an independent body established to give the people of Wales a voice in the planning and delivery of their health and social care services. It has a different role and remit to the Community Health Councils.

## Themes coming through the events: access, urgent care and emergencies

Llais notes concerns raised by members of the public about the limitations of local road infrastructure and the related impact for ambulances, especially given that the A40 experiences many road accidents and is sometimes gridlocked in the summer months.

Along with concerns around longer travel times, Llais highlights worries that people may find it difficult to access more distant services due to low income, and the cost of travel. Parking was also noted as another area of concern, and *“there was a clear expectation that parking capacity should be generous in the planning process.”*

### **Recommendation 2**

*“The Health Board will need to take an active role with stakeholders such as the County Councils in Pembrokeshire, Carmarthenshire, the Highways Agency regarding road infrastructure”*

Llais says that it was clear at many events that people were worried about emergency departments in Withybush and Glangwili becoming minor injuries services when the new hospital is built.

### **Recommendation 3**

*“The Health Board should engage with the public on planned changes to urgent care services at Glangwili and Withybush so that they feel equipped to make the right choices”*

## Themes coming through the events: staffing

Llais says that the public were clearly aware of workforce issues being at the heart of current challenges and the future solutions to those problems, while also expressing concern that the proposals assume clinicians would be attracted to work in the new system. As such, Llais feels that the Health Board must do more to develop public trust by demonstrating how it will develop and build the workforce necessary to make its proposals work.

### **Recommendation 4**

*“Continuous engagement with stakeholders and the public should highlight the progress that workforce plans are making”*

## Other recommendations

Finally, Llais notes the 18 recommendations made after the 2018 Transforming Clinical Services consultation and highlights the following, which it feels remain directly relevant to the overall transformation process.

### **Recommendation:**

*“For all services we expect the Health Board to ensure that no service change can take place which would lead to care that was less safe or of a lesser quality than existing services”*

### **Recommendation:**

*"We expect the Health Board to assure the public that no final decisions on removing specific services will be made until a fuller case is developed"*

**Recommendation:**

*"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"*

## Aberystwyth Town Council

Aberystwyth Town Councillors are of the unanimous view that the focus should be on upgrading Glangwili and Withybush Hospitals because of:

- » Accessibility: in terms of distance and the nature of the road network

*Many service users in the Bronglais catchment area visit Glangwili for specialist services. The proposed locations would make it even more difficult for patients from places such as Tywyn and Llanidloes*

- » Loss of services: *"services will be moved to the new hospitals without warning"*
- » Equalities: the cost of transport and availability

*There are good bus links with Carmarthen but not to the new hospital locations. There are many who physically cannot travel long distances and ambulance services are already stretched.*

- » Staffing: the attraction of a brand-new hospital for staff and the impact on staffing levels at the other hospitals
- » Financial implications: *"it represents a waste of money."*

## Member of the Senedd

The Member of the Senedd feels that the creation of a new hospital would severely undermine services at Withybush Hospital. As such, they do not support the Health Board's proposals and stress that many Pembrokeshire residents *"remain deeply concerned that plans to create a new hospital in west Wales will not only centralise services away from Withybush but also undermine the very future of the hospital."*

The Member of the Senedd states that the Welsh Government has created large, centralised hospital sites in other parts of Wales which have *"not led to improved outcomes for patients."* They also note HDdUHB's statement that its plans come at a time of austerity and feel that the Health Board should be *"investing in its current assets and ensuring that they can continue to serve their communities, rather than urging the Welsh Government to spend over a billion pounds on a new site"*.

The creation of a new hospital would, it is felt, result in longer transport times for patients - and the average times provided in the consultation documentation are said to not recognise the *"substandard transport infrastructure in west Wales"*, or the high levels of traffic on major roads in Pembrokeshire, particularly during the summer months. The Member of the Senedd also highlights that the Welsh Government has announced a freeze on new road building projects in Wales and that it is thus unlikely that the Health Board would be able to facilitate any changes to the road network to accommodate a new



hospital site. Furthermore, they feel that there *“has not been enough thought behind how the Health Board will be supporting people to make sustainable travel choices.”*

The Member of the Senedd is concerned that the Health Board will struggle to attract the required workforce, as the new hospital is not suitably supported by a robust public transport network and does not have a large population surrounding it. Indeed, as so many people are struggling with the increased cost of living, there aren't any plans that detail how the Health Board will ensure the site is fully staffed.

For these reasons, the Member of the Senedd asks HDdUHB to reconsider centralising services and instead invest in the Health Board's existing hospital infrastructure.

## Llanelli Town Council

Llanelli Town Council expresses concern at the proposals by HDdUHB to relocate its new Urgent Care hospital in a new location in either Whitland or St. Clears. It feels that the interests and needs of the people of Llanelli are not being met, and that serious consideration should be given to exploring the possibility of Llanelli district being removed from the HDdUHB area and instead forming part of Swansea Bay Health Board.

## Ceredigion Public Service Board respondent

The Ceredigion Public Service Board respondent says that policing within its region is impacted by the presence of urgent care and mental health-related facilities. To that end they would welcome the provision of facilities to house policing in the new development at any of the three possible sites, as well as opportunities to provide input into the design and development process.

## Individual respondent 1

The respondent strongly objects to the repurposing of Glangwili Hospital and feels that the proposal to relocate and centralise services in a new hospital at either St Clears or Whitland *“will have significant detrimental effects on the accessibility and quality of emergency care for residents in Carmarthenshire.”* Increased distances from home will, they believe, cause additional distress to patients and family members and disproportionately adversely affect the most vulnerable. Moreover, the respondent is concerned that the proposed concentration of services will exacerbate existing challenges in recruitment and retention of medical professionals, particularly specialists.

In covering the three counties of Carmarthenshire, Ceredigion and Pembrokeshire, the respondent fears that the Health Board is *“seeking to ‘rationalise’ service provision over too wide a geographical area with too poor infrastructure and availability of public transport”* and that *“rather than ‘optimising’, this risks ‘deterioration’ of service provision and poorer patient outcomes.”* Essentially, they feel a single hospital at St Clears or Whitland covers too vast a catchment area, substantially increasing travel distances and times, *“leading to delays to receipt of urgent medical attention”* and causing *“additional distress and difficulty to family members visiting loved ones at times of health emergency.”*

In proposing sites for the new hospital, the respondent says the Health Board has based its options on the determining factor of being ‘within an hour car journey for most populations in our area’. This, they feel, is a poor metric for decision making because it serves to significantly increase journey times for most residents; and it lacks evidence to provide assurance that it is an acceptable standard for individuals requiring immediate and life-saving medical attention.



The respondent also states that the Health Board's assessment appears to overlook the realities of the local road network and congestion during peak times, especially during the summer tourist season; and that it is disingenuous of the Health Board to suggest that the new hospital will lead to a reduced carbon footprint when increased journey times would result in higher emissions.

*Failing to consider these factors does not provide confidence to service users that the 'within an hour car journey for most' criterion is medically appropriate or a realistic measure of accessibility to emergency care.*

The respondent goes on to say that the 'within an hour car journey for most' rule of thumb *"fails to take into account the poor provision of local public transport and the impact on those reliant upon its use"*. By primarily focusing on car drivers and car owners, the Health Board is accused of exacerbating existing health inequalities by disproportionately adversely affecting individuals on lower incomes, the elderly, and those living with existing medical conditions who may not have access to private vehicles or find it challenging to navigate public transport.

Finally, the respondent disputes the Health Board's argument that the centralisation of planned and urgent care will make services less fragile given that it does not address the fundamental challenge faced in west Wales of attracting and retaining specialist medical professionals, *"who can be deterred by our rural location, relative lack of amenities and poor infrastructure."* They also worry that by concentrating emergency healthcare services at a single location risks overburdening the new hospital with a higher patient volume, resulting in *"increased pressure on medical staff, potential burnout and decreased retention rates – serving to impair the effectiveness and sustainability of emergency services in the region."*

## Individual respondent 2

The respondent feels that all three sites are unsuitable for two main reasons.

Firstly, they are thought to be too far west<sup>11</sup>, which may have an impact on service sustainability. The respondent states that the Narberth site was previously eliminated for this reason, and that the clinical appraisal group was concerned that being too far west may lead to a reduction in the number of people having their babies in Hywel Dda, posing a risk to the activity needed to maintain safe and sustainable services, the number of beds retained, and the Health Board maintaining trainee status.

The respondent says that historically, a very large percentage of people from the Llanelli, Gwendraeth and lower Amman Valley area would choose to have their obstetric care in West Glamorgan. They feel that the additional distance to the new proposed sites at St Clears and Whitland may lead to similar circumstances, with parents choosing to have their babies at Singleton Hospital in Swansea.

Furthermore, they say that a large percentage of births require obstetric input, and that complications can arise even during low-risk births. They anticipated that obstetric emergencies at Prince Philip Hospital would be taken to the closest emergency facility (Singleton Hospital), and that *"these kinds of decisions may impact emergency transfers in other areas of service such as medical or surgical emergencies."*

---

<sup>11</sup> In their submission, the respondent mistakenly says 'east' which, for the sake of accuracy, we have taken the liberty of correcting here.

Secondly, the respondent feels that the location is poorly served by public transport links while travelling from Ceredigion and areas of Powys. This, they say, is important because although Hywel Dda states it is aiming to deliver more community-based services, *“there are a number of specialist services which they are only able to provide in the acute hospital - again a maternity service issue.”*

The respondent highlights that Bronglais Hospital does not have a neonatal baby unit and only operates as a transitional care unit, meaning that women in premature labour (less than 34 weeks) are transferred to the hospital that is able to provide the level of care needed if the baby is born. Additionally, women with diabetes or diabetes of pregnancy are monitored in specialist dual obstetric and diabetic clinics during their pregnancy, presently at Glangwili Hospital. This means several journeys during pregnancy for antenatal care, and deliveries are also planned for the specialist obstetric unit. This, the respondent says, may also be the case for other conditions that require specialist monitoring in pregnancy, all of which are currently undertaken at Glangwili and would take place in the (more distant) new acute hospital in future. This, according to the respondent, will pose particular difficulties for patients who would ordinarily deliver at Bronglais Hospital, who *“live as far north as Tywyn in Gwynedd and as far east as Newtown and Rhayader in Powys.”*

### Individual respondent 3

One respondent seeks clarification on:

- » Which facility a patient with a medical need would go for testing, care or treatment and what medical expertise would be available at each site given that *“there would appear to be considerable duplication and overlap between the proposed new urgent and planned care hospital, the existing hospitals of Glangwili, Withybush, Bronglais and Prince Philip, and the new community facilities sited at 18 points around the LHB area”*;
- » How this multi-site structure is compatible with the suggested benefits of the new single site hospital, centralising facilities and expertise;
- » The role and operational scope of the repurposed Glangwili and Withybush hospitals; the plans for transporting patients to each centre; and the parking facilities proposed at each site;
- » Whether the costs for the new community facilities are included in the £1.3bn budget; and
- » Whether any of the proposed funding has been set aside to improve social care in the community.

# 10. Social media feedback

## Introduction

- 10.1 HDdUHB has collated all the comments made on its official Facebook and Twitter pages during the consultation period (see Appendix V for a list of posts by date, reach, and impressions). In total, the posts received 410 comments or replies; the vast majority were responses to Facebook posts (400).
- 10.2 ORS has read all the social media comments and collated and reported them in this chapter. Only a small number of comments referred to any of the three site options under consultation, and while we have covered these first in our reporting, it should be noted that most comments covered wider issues and concerns, which we cover in the latter section of this chapter. All have been reviewed in a thematic, summary format.

*It is important to note that the following section is a report of the views expressed by commenters on social media, usually commenting on posts publicising the consultation or an upcoming public drop-in session. In some cases, views may not always be fully supported by the available evidence - and while ORS has not sought to highlight or correct incorrect statements or assumptions, this possibility should be borne in mind when considering the points made.*

## Main findings

### Views on the proposed location of the new hospital

- 10.3 A small number of comments were received in relation to the hospital site options. Two were in support of the St Clears site, largely due to the current infrastructure in place.

*Infrastructure already in place. Train line running directly next to the site too. New station/platform could be incorporated into the scheme.*

- 10.4 Another two respondents in reference to the Whitland: Tŷ Newydd site, claimed that a hospital at this site has been in the pipeline for a long time (indeed, several comments implied that a site had already been selected, though without mentioning any one in particular). Two more general comments were given on Whitland as a preferred location, with one specifically stating that the rail infrastructure makes it the best choice, though they were concerned about the road network.

*What a waste of money - you already know where it is going - Whitland Old Creamery, which was the favoured site 30 years ago!! Looks good though.*

*I'm thinking it has to be Whitland if those are the choices, because at least you have the option of a train as an alternative mode of transport from Haverfordwest, Tenby, Pembroke Dock and Milford Haven ... but the road links from north Pembrokeshire and south Ceredigion to Whitland are not great...*

10.5 Several respondents questioned the suitability of all three sites, as summarised in the table below.

Table 55: Summary of main themes raised on social media – concerns about the site options

Sub-theme	Example comments
Distance from centres of population/certain areas	<p><i>None of these sites are acceptable. My parents live between Llandeilo and Lampeter and it already took hours to get my dad to a hospital when he had a heart attack.</i></p> <p><i>The most populated town needs a hospital! What a stupid idea to build a new hospital so far away. Leave Glangwili alone!</i></p> <p><i>Out of all these areas Llanelli has the largest population. Why isn't Prince Philip improved or the new hospital closer to Llanelli? This plan doesn't seem logical ...</i></p> <p><i>Don't build a new hospital so far away from the largest town. It's madness!</i></p> <p><i>Surely Cross Hands would be a better option taking into account southeastern Carmarthenshire has the highest population in the health board area.</i></p> <p><i>Always Carmarthenshire and not Pembrokeshire! They are grinding us into the ground and couldn't care less about us down here!</i></p>
A site further east is preferable	<p><i>The old showground west of Carmarthen is free, good road links plus a railway next to it, and staff in the area to fill it...</i></p>

### Additional considerations

#### Travel and transport

- 10.6 For many respondents, the additional distance and travel time to any one of the hospital sites was a particular worry. This was a concern in relation to patients, visitors, and staff. Moreover, concerns were expressed about the quality of the road infrastructure in the area of the proposed sites, which could further impact travel times, particularly at those times of year when there are high visitor numbers in the area.
- 10.7 Others highlighted that the area’s public transport system is insufficient, which could cause difficulty for patients and visitors, disabled people specifically. This, according to respondents, would need to improve as part of any development.

*Cannot access there. Connect it to the bus station so all public bus services can access the location for staff and patients and run it in time with public services trains and remember when appointments are there. There is no public service at night from certain locations. Not everyone can drive ...*

- 10.8 Some respondents noted that services will remain available at other hospitals and that there is access to current and prospective train services in the Whitland/St Clears area.

*The other hospitals aren't closing. Buses will stop at new sites, plus both Narberth and Whitland have closer access to train stations.*

Table 56: Summary of main themes raised on social media – travel and transport

Sub-theme	Example comments
<b>Additional travel time</b>	<p><i>A friend of mine mentioned that like many of her colleagues, she travels 25 minutes to get to Glangwili [staff]. If I was in her position once the new hospital has been built, I would consider finding a job in the Swansea direction for it would lead to less stress and frustration while travelling.</i></p> <p><i>We are already 45mins away to A&amp;E, so with a new location it's literally a matter of life and death for us by adding on the extra miles ...</i></p>
<b>Poor road infrastructure</b>	<p><i>The roads to Whitland and St Clears are dangerous at the best of times. Can you imagine travelling them in peak holiday times, especially the elderly!</i></p> <p><i>New hospital sites, old, congested roads, and repair services that no sooner dig and repair one hole, another service comes along and digs another, traffic lights major congestion, and not to mention holiday traffic.</i></p>
<b>Traffic congestion (especially during the summer months)</b>	<p><i>There will be loss of life when it's put out of Carmarthen towards St Clears or Whitland. The traffic on that road in half term and with tourists will cause so much harm. That road is either completely jammed or there is an accident blocking the road. Your travel/commute times on that consultation are laughable ... have they even been assessed during busy times on that road?</i></p> <p><i>Traffic and transport were my concerns. Road back from St Clears is already chaotic from Easter to September, let alone the number of accidents.</i></p>
<b>Lack of public transport</b>	<p><i>They say they've looked into transport links, but they are not taking into account the real-life situation people will find themselves in. Even if they were able to upgrade public transport which is highly unlikely, they're totally oblivious to the fact that a large proportion of people needing to get to this new hospital are not fit enough to use public transport.</i></p>
<b>Distance from the East of the Hywel Dda area</b>	<p><i>Those of us in the east of Carmarthenshire are not happy at the distance we would have to travel. Very poorly thought out!</i></p> <p><i>We definitely need something in this area. Travelling from the Ammanford area to Glangwili for an A&amp;E is bad enough never mind going further afield. The Cross Hands area is growing with houses springing up all over the place.</i></p>
<b>Distance from the West of the Hywel Dda area</b>	<p><i>The road from Haverfordwest and St clears is a joke, few places for [an] ambulance to overtake.</i></p> <p><i>Absolute uncaring lunacy to be building a new hospital so far away from a large chunk of the population of Pembrokeshire. Many of us in the west of the county will be 50 minutes by road from the proposed sites. No credible Public Transport options.</i></p> <p><i>The roads from Pembrokeshire are awful ... I'm afraid few would reach it within the golden hour.</i></p> <p><i>Traffic is crazy up towards Whitland and during the summer it's going to be worse. Keep the hospitals that are open and do them up and get the surgeons to work there. It's stupid what you're doing and putting people's life's at risk.</i></p>
<b>Distance from the North of</b>	<p><i>Think of how it will be for people living in Lampeter. More central you say!</i></p> <p><i>People are already dying being unable to access services in South Wales from Ceredigion. None of your options are less than two hours away from north Ceredigion, never mind one ...</i></p>

Sub-theme	Example comments
the Hywel Dda area	
Impacts on disabled people	<p>Many people are not able to drive and are unfit to travel on public transport [and] once you're stuck in hospital so far away, no-one will come and visit you which is very upsetting.</p> <p>I am also disabled and find it difficult ... What do they think we are going to do? Our last bus is at 5.30 pm then only a couple of buses a day.</p> <p>As for the disabled chronically ill patients like myself that don't drive, how on earth am I to afford taxis that far? Patient transport is not an option, no one wants to be out of the house for a full day for one appointment.</p>

Feasibility concerns

- 10.9 Outside travel and transport issues, other feasibility concerns were raised in relation to building a new urgent and planned hospital. Most commonly, respondents questioned how a new hospital would be staffed when there are existing recruitment and retention issues across the Health Board; and several were sceptical that existing and prospective staff (clinical and non-clinical) would be attracted to a facility in the proposed area.
- 10.10 Other comments and questions were around potential pressures on the air ambulance service, the use of technology in healthcare (specifically in relation to digital coverage in many rural areas), and the possibility of HDdUHB not receiving the required funding for a new hospital from Welsh Government.

Table 57: Summary of main themes raised on social media – feasibility concerns

Sub-theme	Example comments
Staffing	<p>You can't staff the hospitals you've got already.</p> <p>A new hospital would need front line staff. Where are you getting them from when opening another hospital. All our hospitals are extremely short staffed.</p> <p>New, urgent, and planned yet the hospitals we have are often running on reduced services. How is a new facility going to help when our current ones are barely functioning?</p> <p>How will you attract staff? I worked in Glangwili for nearly two years and one of the reasons was the relatively good transport from Carmarthen to everywhere else. Take that away and [the] Trust will be very unattractive for loads of new doctors.</p> <p>Never mind the doctors, how will the many, many lower paid workers on whom every hospital depends, afford to travel such distances. Just because it will be a "super hospital" doesn't guarantee they'll be able to staff it at any level!</p>
Transfer to hospital	<p>I was told in a major incident they would immediately be airlifted out - how many helicopters do we have and how can they guarantee they'll be available when needed? They can't.</p>
Use of technology	<p>New technology won't function in much of Ceredigion due to lack of signal. 3G is being switched off from next month and most of Ceredigion isn't capable of accessing 4G/5G.</p>

Sub-theme	Example comments
<b>Welsh Government funding</b>	<i>And doesn't any decision depend upon funding being awarded to the chosen area? My understanding is that other areas in Wales are in contention for the same pot of money.</i>

### Upgrading or keeping current infrastructure

<sup>10.11</sup> Another prominent theme in the comments was the desire to upgrade current facilities instead of building a new hospital. Many said they would prefer to see the money spent on improving existing sites and services, including parking provision at Glangwili especially.

Table 58: Summary of main themes raised on social media – upgrading current infrastructure

Sub-theme	Example comments
<b>Preference for upgrading existing sites/services</b>	<p><i>Maybe you could actually provide more services in Bronglais seeing as we have to travel 60+ miles for anything neurological, for babies that are high risk etc ... seems the Aberystwyth area gets forgotten.</i></p> <p><i>As Llanelli is the most densely populated area, why not expand the service already at PPH? Trauma services are needed badly, along with more mental health services including CAMHS.</i></p> <p><i>We don't need a new hospital; we need better services at the hospitals we do have. Definitely isn't right. They need to concentrate on working on what we already have. Not building a massive hospital elsewhere. It will be disastrous.</i></p> <p><i>Improve services at the current hospitals rather than paying out on an expensive new build.</i></p> <p><i>Spend the money on the current sites and restore all services to each one not one site and skeleton satellite sites. Consider those who are older or those that can't use public transport to get to the hospitals where they are now, also insist that consultants are based cross sites not make patients travel to where it's convenient for consultants. Make the service fit the demographic instead of putting the patients out for consultants, doctors and other specialisms who don't want to travel between the four sites. For once put the patients first.</i></p> <p><i>Total waste of money building new. Upgrade what you already have is more cost effective and far safer, especially in the summer when our population grows beyond the capacity available currently!</i></p> <p><i>Leave it in Glangwili, too many lives will be at risk taking it too far down towards St Clears.</i></p> <p><i>Well maybe just spend the money on Worthybush doing it up instead of a brand-new hospital.</i></p>
<b>Improve parking provision at Glangwili</b>	<p><i>Why not improve what we have in Glangwili and put a multi-storey car park near A&amp;E with a helipad on top so direct access to A&amp;E. Or build a multi storey car park in a field nearby and utilise the car parks.</i></p> <p><i>Best to improve the parking (maybe a park and ride from Llandeilo end, or a multi storey car park) in Glangwili and leave it there!</i></p>



## Wider issues

- <sup>10.12</sup> The table below gives an overview of the remaining issues and concerns raised in the social media comments. They contain more general support for or opposition to a new hospital, the timeliness of development, as well as specific concerns about the gradual loss of services at Withybush hospital.
- <sup>10.13</sup> Some also commented on the 'tick-box' nature of the consultation process, and the lack of advertising and promotion of the HDdUHB public drop-in sessions. There was, though, some praise for the openness of the staff at the drop-in events and their willingness to engage with attendees.

**Table 59: Summary of main themes raised on social media – more general issues**

Sub-theme	Example comments
<b>Positivity about the prospect of investment/a new hospital</b>	<p><i>I can't see why people are so scared about a new hospital for the three counties ... it's not like we'll be losing the cottage hospitals or the GP surgeries we have dotted around or have people simply forgot we have those too?</i></p> <p><i>It's more central. Pretty excited about it. Saves going to Carmarthen...</i></p> <p><i>... Healthcare in West Wales needs investment. Things can't stay as they are. Will our current hospitals be fit for purpose in 20/30/50 years' time? Any investment and new facilities should be welcomed.</i></p>
<b>Negativity around cost/wastage</b>	<p><i>Another waste of money. We don't need a new hospital.</i></p>
<b>Timeliness of the developments</b>	<p><i>You have been talking about it since 2005. Now is the time for action and stop messing around with people's lives. New hospital should have been built before services were moved.</i></p> <p><i>Can't see a new hospital in Pembrokeshire or Carmarthen for the next 10 years. Meanwhile local hospitals are being downgraded, lack of staff, reduced beds ...</i></p>
<b>Further loss of services at Withybush</b>	<p><i>The reason for Glangwili being overcrowded is because they have moved things from Withybush to Glangwili. They should have left it as was and there would not be a problem, which they have created.</i></p> <p><i>I just don't see how you can take services away from Withybush and people who especially need emergency care will be put into a life-threatening situation, having to travel so far to get towards Carmarthenshire! Such a shame many services were taken from Withybush for all the Pembrokeshire people really!</i></p>
<b>The consultation process</b>	<p><i>Simply a box ticking exercise. You've already decided on the area you wish to build this hospital.</i></p> <p><i>The health board don't listen anyway, it's a done deal.</i></p> <p><i>Disgraceful lack of advertising for this meeting. Only put this out on the day, and halfway through at that. Perhaps done with the view that it would prevent the vast majority of us attending to air our valid views ...</i></p> <p><i>I called in to the event today and found the staff very willing to discuss anything I asked (I asked a lot). They were all very open.</i></p>



# Appendix I: Table of figures

Figure 1: Map showing distribution of responses (for questionnaire responses where a postcode was provided) (darker red colours indicate a higher number of respondents) .....	36
Figure 2: To what extent is Whitland: Spring Gardens (formerly site 12) a good or poor location for the new Hospital? (individual questionnaire respondents only) .....	38
Figure 3: To what extent is Whitland: Spring Gardens (formerly site 12) a good or poor location for the new Hospital? BY NEAREST GENERAL HOSPITAL (individual respondents only, where postcodes were provided).....	39
Figure 4: To what extent is Whitland: Spring Gardens (formerly site 12) a good or poor location for the new Hospital? BY COUNTY (individual questionnaire respondents only) .....	39
Figure 5: To what extent is Whitland: Spring Gardens (formerly site 12) a good or poor location for the new Hospital? BY INDICES OF MULTIPLE DEPRIVATION (IMD) (individual respondents living in Carmarthenshire, Ceredigion and Pembrokeshire only, where postcodes are provided) .....	40
Figure 6: To what extent is Whitland: Spring Gardens (formerly site 12) a good or poor location for the new Hospital? BY KEY DEMOGRAPHICS (individual questionnaire respondents only) .....	41
Figure 7: If you think Whitland: Spring Gardens (formerly site 12) is a good choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question).....	42
Figure 8: If you think Whitland: Spring Gardens (formerly site 12) is neither a good nor poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question).....	44
Figure 9: If you think Whitland: Spring Gardens (formerly site 12) is a poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question).....	46
Figure 10: To what extent is Whitland: Tŷ Newydd (formerly site C) a good or poor location for the new Hospital? (individual questionnaire respondents only) .....	48
Figure 11: To what extent is Whitland: Tŷ Newydd (formerly site C) a good or poor location for the new Hospital? BY NEAREST GENERAL HOSPITAL (individual respondents only, where postcodes were provided) .....	49
Figure 12: To what extent is Whitland: Tŷ Newydd (formerly site C) a good or poor location for the new Hospital? BY COUNTY (individual questionnaire respondents only) .....	49
Figure 13: To what extent is Whitland: Tŷ Newydd (formerly site C) a good or poor location for the new Hospital? BY INDICES OF MULTIPLE DEPRIVATION (IMD) (individual respondents living in Carmarthenshire, Ceredigion and Pembrokeshire only, where postcodes are provided) .....	50
Figure 14: To what extent is Whitland: Tŷ Newydd (formerly site C) a good or poor location for the new Hospital? BY KEY DEMOGRAPHICS (individual questionnaire respondents only) .....	51
Figure 15: To what extent is Whitland: Tŷ Newydd (formerly site C) a good or poor location for the new Hospital? BY AGE AND BY PROXIMITY TO WITHYBUSH HOSPITAL (individual respondents only, where postcodes were provided).....	52
Figure 16: If you think Whitland: Tŷ Newydd (formerly site C) is a good choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question).....	53
Figure 17: If you think Whitland: Tŷ Newydd (formerly site C) is neither a good nor poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question).....	55

Figure 18: If you think Whitland: Tŷ Newydd (formerly site C) is a poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question) .....	57
Figure 19: To what extent is St Clears (formerly site 17) a good or poor location for the new Hospital? (individual questionnaire respondents only) .....	60
Figure 20: To what extent is St Clears (formerly site 17) a good or poor location for the new Hospital? BY NEAREST GENERAL HOSPITAL (individual respondents only, where postcodes were provided) .....	61
Figure 21: To what extent is St Clears (formerly site 17) a good or poor location for the new Hospital? BY COUNTY (individual questionnaire respondents only) .....	61
Figure 22: To what extent is St Clears (formerly site 17) a good or poor location for the new Hospital? BY INDICES OF MULTIPLE DEPRIVATION (IMD) (individual respondents living in Carmarthenshire, Ceredigion and Pembrokeshire only, where postcodes are provided) .....	62
Figure 23: To what extent is St Clears (formerly site 17) a good or poor location for the new Hospital? BY KEY DEMOGRAPHICS (individual questionnaire respondents only) .....	63
Figure 24: To what extent is St Clears (formerly site 17) a good or poor location for the new Hospital? BY HOUSEHOLD INCOME AND BY PROXIMITY TO WITHYBUSH HOSPITAL (individual respondents only, where postcodes were provided) .....	64
Figure 25: If you think St Clears (formerly site 17) is a good choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question) .....	65
Figure 26: If you think St Clears (formerly site 17) is neither a good nor poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question) .....	67
Figure 27: If you think St Clears (formerly site 17) is a poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question) .....	69
Figure 28: If you have any further comments about any of the sites, please explain (individual questionnaire respondents only) (Percentages are of those providing a comment to this question) .....	72
Figure 29: Are there any particular groups of people that you believe might be positively or negatively affected by any of the sites being considered? If so, what groups are these? (individual questionnaire respondents only) (Because respondents could provide detailed feedback, some comments cover more than one point/group and, therefore, the total percentages may sum to greater than 100%) (Percentages are of all individual respondents excluding don't know) .....	77
Figure 30: Types of impacts suggested by respondents in response to the same question (individual questionnaire respondents only) (Because respondents could provide detailed feedback, some comments cover more than one point and therefore the total percentages may sum to greater than 100%) (Percentages are of those providing a comment to this question, excluding those saying no groups would be impacted) .....	80

# Appendix II: Tables of coded questionnaire text comments

The tables below provide a more detailed account of text comments by individuals responding to the open-ended questions in the consultation questionnaire and discussed in chapter three of this report. Note that respondents could provide detailed comments which covered more than one code; therefore, the percentages sum to more than 100%. An asterisk (\*) denotes any value greater than zero, but less than half of one per cent.

## Views on Whitland: Spring Gardens – Explanations Why

**Table 60: If you think Whitland: Spring Gardens (formerly site 12) is a good choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**

Summary of comments		No. of respondents	%
<b>Agreement</b>	<b>Agreement: Generally (non-specific):</b> Agree: Generally agree (non-specific)	9	6%
<b>Positive Points</b>	<b>Positive: Access/location (non-specific):</b> Positive: Easily accessible (non-specific)	30	21%
	<b>Positive: Access/location (non-specific):</b> Positive: Good location (non-specific)	25	18%
	<b>Positive: Access, roads and infrastructure (inc traffic):</b> Positive: Good road links/infrastructure	23	16%
	<b>Positive: Access, roads and infrastructure (inc traffic):</b> Positive: Less risk of traffic problems/roadworks	10	7%
	<b>Positive: Good access via A40:</b> Positive: Good access via A40	54	38%
	<b>Positive: Good public transport provision:</b> Positive: Good public transport provision	30	21%
	<b>Positive: Less travelling for Pembrokeshire residents/close to Pembrokeshire:</b> Positive: Less travelling for Pembrokeshire residents/close to Pembrokeshire	35	25%
	<b>Positive: Good site for development/cheaper/less risks:</b> Positive: Cheaper to develop	23	16%
	<b>Positive: Good site for development/cheaper/less risks:</b> Positive: Site is large/good potential for expansion incl. future-proofed site	11	8%
	<b>Positive: Good site for development/cheaper/less risks:</b> Positive: Limited risk of flooding	7	5%
	<b>Positive: Other positive benefits:</b> Positive: Close to shops and amenities	6	4%
	<b>Positive: Other positive benefits:</b> Positive: Benefit to local area incl. businesses	3	2%
<b>Negative Points</b>	<b>Negative points raised:</b> Negative: Multiple private landowners/complications with purchasing	10	7%
	<b>Negative points raised:</b> Negative: Site too small/poor scope for expansion incl. not future-proofed	8	6%
	<b>Negative points raised:</b> Negative: Increased traffic/road accidents incl. on A40/B4328	5	4%
	<b>Negative points raised:</b> Negative: Risk to patient outcomes	4	3%
	<b>Negative points raised:</b> Negative: Lack of parking space	3	2%
<b>Other</b>	<b>Suggestion: Improve public transport:</b> Suggestion: Improve public transport	3	2%
	<b>Criticism of consultation:</b> Criticism of consultation: More information needed	3	2%
	<b>Criticism of consultation:</b> Criticism of consultation: Misleading information	3	2%
	<b>Criticism of consultation:</b> Criticism of consultation: Other criticism	1	1%
	<b>Other:</b> Other	17	12%

**Base: Individual respondents thinking Whitland: Spring Gardens (formerly site 12) is a good choice for the new hospital (142), Points raised (323)**

**Table 61: If you think Whitland: Spring Gardens (formerly site 12) is neither a good nor poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**

Summary of comments		No. of respondents	%
Neutral	Neutral: No preference: Neutral: No preference	2	2%
Agreement	Agree: Generally agree (non-specific): Agree: Generally agree (non-specific)	5	6%
Disagreement	Disagree: Generally disagree (non-specific): Disagree: Generally disagree (non-specific)	3	4%
	Disagree: Another proposed site is preferable (non-specific): Disagree: Another proposed site is preferable (non-specific)	3	4%
	Disagree: St. Clears is a better option: Disagree: St. Clears is a better option	4	5%
Positive Points	Positive points raised: Positive: Easily accessible (non-specific)	8	9%
	Positive points raised: Positive: Low flood risk	4	5%
Negative Points	Negative: Access/cost of travel (non-specific): Negative: Poor accessibility incl. longer travel times/cost of travel (non-specific)	18	21%
	Negative: Access, roads and infrastructure including parking & traffic (incl A40): Negative: Increased traffic/road accidents/roadworks incl. on A40	8	9%
	Negative: Access, roads and infrastructure including parking & traffic (incl A40): Negative: Poor road links/infrastructure	7	8%
	Negative: Access, roads and infrastructure including parking & traffic (incl A40): Negative: Lack of parking space	2	2%
	Negative: Poor public transport provision: Negative: Poor public transport provision	4	5%
	Negative: Too far/difficulties travelling from Pembrokeshire: Negative: Too far/difficulties travelling from Pembrokeshire	11	13%
	Negative: Too far/difficulties travelling from Carmarthenshire: Negative: Too far/difficulties travelling from Carmarthenshire	7	8%
	Negative: Too far/difficulties travelling from Ceredigion: Negative: Too far/difficulties travelling from Ceredigion	5	6%
	Negative: Poor site for development: Negative: Site too small/poor scope for expansion incl. not future-proofed	14	16%
	Negative: Multiple private landowners/complications with purchasing: Negative: Multiple private landowners/complications with purchasing	11	13%
	Negative: Other negative points: Negative: Risk to patient outcomes	7	8%
	Negative: Other negative points: Negative: Impact on staff incl. more travelling/recruitment and retention	7	8%
	Negative: Other negative points: Negative: Will put more strain on surrounding services	4	5%
	Negative impact: Equalities impact: Negative impact: Those without a car/unable to drive	2	2%
	Negative impact: Equalities impact: Negative impact: Rural areas and village	1	1%
Other	Suggestion: Hospital should be built in alternative location: Suggestion: Hospital should be built in alternative location	2	2%
	Suggestion: Invest in/improve existing hospitals: Suggestion: Invest in/improve existing hospitals	2	2%
	Criticism of consultation: Criticism of consultation: More information needed	2	2%
	Criticism of consultation: Criticism of consultation: Misleading information	2	2%
	Other: Other	13	15%

Base: Individual respondents thinking Whitland: Spring Gardens (formerly site 12) is neither a good nor poor choice for the new hospital (85), Points raised (158)

**Table 62: If you think Whitland: Spring Gardens (formerly site 12) is a poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**

Summary of comments		No. of respondents	%
Disagreement	<b>Disagree: Generally disagree (non-specific):</b> Disagree: Generally disagree (non-specific)	16	4%
	<b>Disagree: St. Clears is a better option:</b> Disagree: St. Clears is a better option	4	1%
	<b>Disagree: Proposal is a waste of money:</b> Disagree: Proposal is a waste of money	5	1%
Negative Points	<b>Negative: Access, cost of travel (non-specific):</b> Negative: Poor accessibility incl. longer travel times/cost of travel (non-specific)	98	26%
	<b>Negative: Access, roads and infrastructure including parking &amp; traffic:</b> Negative: Poor road links/infrastructure	48	13%
	<b>Negative: Access, roads and infrastructure including parking &amp; traffic:</b> Negative: Increased traffic/road accidents	35	9%
	<b>Negative: Access, roads and infrastructure including parking &amp; traffic:</b> Negative: Lack of parking space	9	2%
	<b>Negative: Poor location/not central:</b> Negative: Poor location/not central	28	7%
	<b>Negative: Poor public transport provision:</b> Negative: Poor public transport provision	31	8%
	<b>Negative: Too far/difficulties travelling from Pembrokeshire:</b> Negative: Too far/difficulties travelling from Pembrokeshire	51	13%
	<b>Negative: Too far/difficulties travelling from Carmarthenshire:</b> Negative: Too far/difficulties travelling from Carmarthenshire	83	22%
	<b>Negative: Too far/difficulties travelling from Ceredigion:</b> Negative: Too far/difficulties travelling from Ceredigion	25	7%
	<b>Negative: Poor site for development/greater risks:</b> Negative: Site too small/poor scope for expansion incl. not future-proofed	39	10%
	<b>Negative: Poor site for development/greater risks:</b> Negative: Risk of flooding	15	4%
	<b>Negative: Poor scope for energy production incl. renewables/Impact on environment e.g. higher carbon emissions/pollution:</b> Negative: Poor scope for energy production incl. renewables	8	2%
	<b>Negative: Poor scope for energy production incl. renewables/Impact on environment e.g. higher carbon emissions/pollution:</b> Negative: Impact on environment e.g. higher carbon emissions/pollution	7	2%
	<b>Negative: Multiple private landowners/complications with purchasing:</b> Negative: Multiple private landowners/complications with purchasing	28	7%
	<b>Negative: Seasonal impact of tourists on roads and hospital services:</b> Negative: Seasonal impact of tourists on roads and hospital services	26	7%
	<b>Negative: Risk to patient outcomes:</b> Negative: Risk to patient outcomes	49	13%
	<b>Negative: Impact on staff recruitment/retention/travelling time/lack of accommodation:</b> Negative: Impact on staff recruitment/retention	20	5%
	<b>Negative: Impact on staff recruitment/retention/travelling time/lack of accommodation:</b> Negative: Impact on staff e.g. travelling time/lack of accommodation	19	5%
	<b>Negative: Other negative points:</b> Negative: Increased strain on emergency services incl. increased response times	17	4%
	<b>Negative: Other negative points:</b> Negative: No consideration for high/growing population	9	2%
	<b>Negative: Other negative points:</b> Negative: Increased demand on surrounding hospitals	9	2%
	<b>Negative: Other negative points:</b> Negative: Impact on local area/residents	8	2%
	<b>Negative impact: Equalities impact:</b> Negative impact: Elderly	14	4%
	<b>Negative impact: Equalities impact:</b> Negative impact: Those without a car/unable to drive	13	3%
	<b>Negative impact: Equalities impact:</b> Negative impact: Visiting friends/family	7	2%
	<b>Negative impact: Equalities impact:</b> Negative impact: Rural areas	6	2%
Other	<b>Suggestion: Improve public transport:</b> Suggestion: Improve public transport	2	1%
	<b>Suggestion: Improve road infrastructure:</b> Suggestion: Improve road infrastructure	3	1%
	<b>Suggestion: Invest in existing services/keep local:</b> Suggestion: Invest in existing services/keep local	15	4%
	<b>Suggestion: Improve/invest in Withybush hospital:</b> Suggestion: Improve/invest in Withybush hospital	17	4%

	<b>Suggestion: Improve/invest in Glangwili hospital incl. better location:</b> Suggestion: Improve/invest in Glangwili hospital incl. better location	7	2%
	<b>Suggestion: Hospital should be built in alternative location:</b> Suggestion: Hospital should be built in alternative location	10	3%
	<b>Criticism of consultation:</b> Criticism of consultation: More information needed	6	2%
	<b>Criticism of consultation:</b> Criticism of consultation: Misleading information	17	4%
	<b>Criticism of consultation:</b> Criticism of consultation: Other criticism	1	*%
	<b>Other:</b> Other	21	6%

Base: Individual respondents thinking Whitland: Spring Gardens (formerly site 12) is a poor choice for the new hospital (378), Points raised (826)

## Views on Whitland: Tŷ Newydd – Explanations Why

Table 63: If you think Whitland: Tŷ Newydd (formerly site C) is a good choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)

Summary of comments		No. of respondents	%
<b>Neutral</b>	<b>Neutral: No preference:</b> Neutral: No preference	1	1%
<b>Positive Points</b>	<b>Positive: Access/location (non-specific):</b> Positive: Easily accessible (non-specific)	40	30%
	<b>Positive: Access/location (non-specific):</b> Positive: Good location (non-specific)	38	28%
	<b>Positive: Access, roads and infrastructure (inc traffic):</b> Positive: Less risk of traffic problems/roadworks	5	4%
	<b>Positive: Good public transport provision:</b> Positive: Good public transport provision	57	43%
	<b>Positive: Good site for development:</b> Positive: Site is large/good potential for expansion incl. future-proofed site	73	54%
	<b>Positive: Good potential for energy production incl. renewables:</b> Positive: Good potential for energy production incl. renewables	30	22%
	<b>Positive: Land is in public ownership:</b> Positive: Land is in public ownership	32	24%
	<b>Positive: Other positive benefits:</b> Positive: Close to shops and amenities	13	10%
	<b>Positive: Other positive benefits:</b> Positive: Benefit to local area incl. businesses	8	6%
	<b>Positive: Other positive benefits:</b> Positive: Improved quality of care/patient outcomes	4	3%
	<b>Positive: Other positive benefits:</b> Positive: Impact on staff incl. travelling time/recruitment and retention	4	3%
<b>Negative Points</b>	<b>Negative points raised:</b> Negative: Poor accessibility incl. longer travel times/cost of travel (non-specific)	13	10%
	<b>Negative points raised:</b> Negative: Poor road links/infrastructure	11	8%
	<b>Negative points raised:</b> Negative: Risk of flooding	10	7%
	<b>Negative points raised:</b> Negative: More expensive to develop	10	7%
	<b>Negative points raised:</b> Negative: Site too small/poor scope for expansion incl. not future-proofed	3	2%
	<b>Negative points raised:</b> Negative: Impact on local area/residents	3	2%
	<b>Negative points raised:</b> Negative: Risk to patient outcomes	3	2%
<b>Other</b>	<b>Suggestion: Improve public transport:</b> Suggestion: Improve public transport	3	2%
	<b>Suggestion: Build on-site accommodation for visitors:</b> Suggestion: Build on-site accommodation for visitors	2	1%
	<b>Criticism of consultation:</b> Criticism of consultation: More information needed	4	3%
	<b>Criticism of consultation:</b> Criticism of consultation: Other criticism	1	1%
	<b>Other:</b> Other	17	13%

Base: Individual respondents thinking Whitland: Tŷ Newydd (formerly site C) is a good choice for the new hospital (134), Points raised (386)

**Table 64: If you think Whitland: Tŷ Newydd (formerly site C) is neither a good nor poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**

Summary of comments		No. of respondents	%
Neutral	Neutral: No preference: Neutral: No preference	3	3%
Disagreement	Disagree: Another site is preferable (non-specific): Disagree: Another site is preferable (non-specific)	6	7%
	Disagree: Spring Gardens is a better option: Disagree: Spring Gardens is a better option	1	1%
	Disagree: St. Clears is a better option: Disagree: St. Clears is a better option	3	3%
Positive Points	Positive points raised: Positive: Good public transport provision	9	10%
	Positive points raised: Positive: Site is large/good potential for expansion incl. future-proofed site	7	8%
	Positive points raised: Positive: Land is in public ownership	6	7%
	Positive points raised: Positive: Easily accessible (non-specific)	5	6%
	Positive points raised: Positive: Good potential for energy production incl. renewables	4	4%
	Positive points raised: Positive: Low flood risk	3	3%
	Positive points raised: Positive: Good location (non-specific)	2	2%
	Positive points raised: Positive: Close to shops and amenities	1	1%
Negative Points	Negative: Access/cost of travel (non-specific): Negative: Poor accessibility incl. longer travel times/cost of travel (non-specific)	27	30%
	Negative: Access, roads and infrastructure including traffic (incl B4328 and A40): Negative: Poor road links/infrastructure	24	27%
	Negative: Access, roads and infrastructure including traffic (incl B4328 and A40): Negative: Increased traffic/road accidents incl. on B4328 and A40	5	6%
	Negative: Poor public transport provision: Negative: Poor public transport provision	5	6%
	Negative: Too far/difficulties travelling from Pembrokeshire: Negative: Too far/difficulties travelling from Pembrokeshire	10	11%
	Negative: Too far/difficulties travelling from Carmarthenshire: Negative: Too far/difficulties travelling from Carmarthenshire	4	4%
	Negative: Poor site for development/more expensive/greater risks: Negative: Expensive to develop	16	18%
	Negative: Poor site for development/more expensive/greater risks: Negative: Risk of flooding	14	16%
	Negative: Poor site for development/more expensive/greater risks: Negative: Site too small/poor scope for expansion incl. not future-proofed	3	3%
	Negative: Other negative points: Negative: Impact on local area/residents	9	10%
	Negative: Other negative points: Negative: Impact on staff e.g., travelling time	6	7%
	Negative: Other negative points: Negative: Risk to patient outcomes	3	3%
	Negative: Other negative points: Negative: Impact on staff recruitment/retention	3	3%
Other	Suggestion: Pembrokeshire needs its own hospital: Suggestion: Pembrokeshire needs its own hospital	1	1%
	Suggestion: Invest in the ambulance service: Suggestion: Invest in the ambulance service	1	1%
	Criticism of consultation: Criticism of consultation: Misleading information	1	1%
	Criticism of consultation: Criticism of consultation: Other criticism	1	1%
	Other: Other	12	13%

Base: Individual respondents thinking Whitland: Tŷ Newydd (formerly site C) is neither a good nor poor choice for the new hospital (89), Points raised (195)



**Table 65: If you think Whitland: Tŷ Newydd (formerly site C) is a poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**

Summary of comments		No. of respondents	%
<b>Agreement</b>	<b>Agree: Generally agree (non-specific):</b> Agree: Generally agree (non-specific)	3	1%
<b>Disagreement</b>	<b>Disagree: Generally disagree (non-specific):</b> Disagree: Generally disagree (non-specific)	14	4%
	<b>Disagree: St. Clears is a better option:</b> Disagree: St. Clears is a better option	6	2%
<b>Negative Points</b>	<b>Negative: Access, cost of travel (non-specific):</b> Negative: Poor accessibility incl. longer travel times (non-specific)	100	27%
	<b>Negative: Access, roads and infrastructure including parking &amp; traffic (inc. A40):</b> Negative: Poor road links/infrastructure	51	14%
	<b>Negative: Access, roads and infrastructure including parking &amp; traffic (inc. A40):</b> Negative: Increased traffic/roadworks incl. on A40	38	10%
	<b>Negative: Access, roads and infrastructure including parking &amp; traffic (inc. A40):</b> Negative: Lack of parking space	7	2%
	<b>Negative: Poor location/not central:</b> Negative: Poor location/not central	21	6%
	<b>Negative: Poor public transport provision:</b> Negative: Poor public transport provision	24	7%
	<b>Negative: Increased cost of travelling further e.g., fuel/public transport:</b> Negative: Increased cost of travelling further e.g., fuel/public transport	4	1%
	<b>Negative: Too far/difficulties travelling from Pembrokeshire:</b> Negative: Too far/difficulties travelling from Pembrokeshire	45	12%
	<b>Negative: Too far/difficulties travelling from Carmarthenshire:</b> Negative: Too far/difficulties travelling from Carmarthenshire	78	21%
	<b>Negative: Too far/difficulties travelling from Ceredigion:</b> Negative: Too far/difficulties travelling from Ceredigion	23	6%
	<b>Negative: Poor site for development/greater risks:</b> Negative: Risk of flooding	48	13%
	<b>Negative: Poor site for development/greater risks:</b> Negative: Site too small/poor scope for expansion incl. not future-proofed	17	5%
	<b>Negative: Expensive to develop:</b> Negative: Expensive to develop	45	12%
	<b>Negative: Seasonal impact of tourists on roads and hospital services:</b> Negative: Seasonal impact of tourists on roads and hospital services	24	7%
	<b>Negative: Risk to patient outcomes:</b> Negative: Risk to patient outcomes	43	12%
	<b>Negative: Impact on staff recruitment/retention/travelling time/loss of expertise:</b> Negative: Impact on staff recruitment/retention	14	4%
	<b>Negative: Impact on staff recruitment/retention/travelling time/loss of expertise:</b> Negative: Impact on staff e.g., travelling time/loss of expertise	14	4%
	<b>Negative: Other negative points:</b> Negative: Increased strain on emergency services incl. increased response times	18	5%
	<b>Negative: Other negative points:</b> Negative: Impact on local area/residents	18	5%
	<b>Negative: Other negative points:</b> Negative: Increased demand on surrounding hospitals	7	2%
	<b>Negative: Other negative points:</b> Negative: Impact on environment e.g., higher carbon emissions/pollution	7	2%
	<b>Negative: Other negative points:</b> Negative: No consideration for ageing population	3	1%
	<b>Negative impact: Equalities impact:</b> Negative impact: Elderly	9	2%
	<b>Negative impact: Equalities impact:</b> Negative impact: Those without transport/unable to drive	9	2%
	<b>Negative impact: Equalities impact:</b> Negative impact: Visiting friends and family	4	1%
	<b>Negative impact: Equalities impact:</b> Negative impact: Rural areas and villages	4	1%
	<b>Negative impact: Equalities impact:</b> Negative impact: Deprivation/low income	2	1%
<b>Other</b>	<b>Suggestion: Run a shuttlebus service to/between hospitals:</b> Suggestion: Run a shuttlebus service to/between hospitals	3	1%
	<b>Suggestion: Improve road infrastructure:</b> Suggestion: Improve road infrastructure	11	3%
	<b>Suggestion: Invest in existing services/keep local:</b> Suggestion: Invest in existing services/keep local	15	4%
	<b>Suggestion: Keep services at Withybush General Hospital:</b> Suggestion: Keep services at Withybush General Hospital	19	5%
	<b>Suggestion: Keep services at Glangwili General Hospital:</b> Suggestion: Keep services at Glangwili General Hospital	5	1%



	Criticism of consultation: Criticism of consultation: Misleading information	14	4%
	Criticism of consultation: Criticism of consultation: More information needed	3	1%
	Criticism of consultation: Criticism of consultation: Minds already made up	3	1%
	Criticism of consultation: Criticism of consultation: Other criticism	3	1%
	Other: Other	23	6%

Base: Individual respondents thinking Whitland: Tŷ Newydd (formerly site C) is a poor choice for the new hospital (369),  
Points raised (799)

## Views on St Clears – Explanations Why

**Table 66: If you think St Clears (formerly site 17) is a good choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**

Summary of comments		No. of respondents	%
<b>Agreement</b>	<b>Agree: Generally agree (non-specific):</b> Agree: Generally agree (non-specific)	36	15%
<b>Disagreement</b>	<b>Disagree: Glangwili is a better option:</b> Disagree: Glangwili is a better option	7	3%
<b>Positive Points</b>	<b>Positive: Access/location (non-specific):</b> Positive: Easily accessible (non-specific)	57	23%
	<b>Positive: Access/location (non-specific):</b> Positive: Good location (non-specific)	51	21%
	<b>Positive: Access, roads and infrastructure (inc traffic):</b> Positive: Good road links/infrastructure	70	28%
	<b>Positive: Access, roads and infrastructure (inc traffic):</b> Positive: Less risk of traffic problems/roadworks	4	2%
	<b>Positive: Good access via A40/A477:</b> Positive: Good access via A40/A477	36	15%
	<b>Positive: Good public transport provision:</b> Positive: Good public transport provision	16	7%
	<b>Positive: Less travelling for Pembrokeshire residents/close to Pembrokeshire:</b> Positive: Less travelling for Pembrokeshire residents/close to Pembrokeshire	23	9%
	<b>Positive: Less travelling for Carmarthenshire residents/close to Carmarthenshire:</b> Positive: Less travelling for Carmarthenshire residents/close to Carmarthenshire	40	16%
	<b>Positive: Good site for development/cheaper/less risks/good potential for energy production:</b> Positive: Limited risk of flooding	33	13%
	<b>Positive: Good site for development/cheaper/less risks/good potential for energy production:</b> Positive: Cheaper to develop	21	9%
	<b>Positive: Good site for development/cheaper/less risks/good potential for energy production:</b> Positive: Site is large/good potential for expansion incl. future-proofed site	10	4%
	<b>Positive: Good site for development/cheaper/less risks/good potential for energy production:</b> Positive: Good potential for energy production incl. renewables	3	1%
	<b>Positive: Only one landowner:</b> Positive: Only one landowner	27	11%
	<b>Positive: Other positive benefits:</b> Positive: Close to shops and amenities	16	7%
	<b>Positive: Other positive benefits:</b> Positive: Improved quality of care/patient outcomes	16	7%
	<b>Positive: Other positive benefits:</b> Positive: Impact on staff incl. travelling time/recruitment and retention	12	5%
	<b>Positive: Other positive benefits:</b> Positive: Low/no impact on local area	9	4%
	<b>Positive: Other positive benefits:</b> Positive: Quicker emergency vehicle response	9	4%
<b>Negative Points</b>	<b>Negative points raised:</b> Negative: Poor public transport provision	13	5%
	<b>Negative points raised:</b> Negative: Too far/difficulties travelling from Pembrokeshire	12	5%
	<b>Negative points raised:</b> Negative: Site too small/poor scope for expansion incl. not future-proofed	12	5%
	<b>Negative points raised:</b> Negative: Poor accessibility incl. longer travel times/cost of travel (non-specific)	10	4%
	<b>Negative points raised:</b> Negative: Increased traffic/road accidents incl. during summer months	7	3%
	<b>Negative points raised:</b> Negative: Expensive to develop	3	1%
	<b>Negative points raised:</b> Negative: Risk to patient outcomes	3	1%
	<b>Negative points raised:</b> Negative: Poor scope for energy production incl. renewables	2	1%
	<b>Negative points raised:</b> Negative: Too far/difficulties travelling from rural areas	1	0%
<b>Other</b>	<b>Suggestion: Improve public transport, provide a shuttlebus/improve hospital transport:</b> Suggestion: Improve public transport	5	2%
	<b>Suggestion: Improve public transport, provide a shuttlebus/improve hospital transport:</b> Suggestion: Provide a shuttlebus/improve hospital transport	5	2%
	<b>Suggestion: Improve parking:</b> Suggestion: Improve parking	4	2%
	<b>Suggestion: Invest in existing services/keep local:</b> Suggestion: Invest in existing services/keep local	2	1%
	<b>Criticism of consultation:</b> Criticism of consultation: More information needed	5	2%
	<b>Criticism of consultation:</b> Criticism of consultation: Minds already made up	2	1%

Other: Other	28	11%
--------------	----	-----

Base: Individual respondents thinking St Clears (formerly site 17) is a good choice for the new hospital (246), Points raised (610)

Table 67: If you think St Clears (formerly site 17) is neither a good nor poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)

Summary of comments		No. of respondents	%
Disagreement	<b>Disagree: Generally disagree (non-specific):</b> Disagree: Generally disagree (non-specific)	2	2%
	<b>Disagree: Whitland is a better option:</b> Disagree: Whitland is a better option	1	1%
	<b>Disagree: Should be located in Carmarthen:</b> Disagree: Should be located in Carmarthen	3	3%
Positive Points	<b>Positive points raised:</b> Positive: Good location (non-specific)	10	11%
	<b>Positive points raised:</b> Positive: Good road links/infrastructure	10	11%
	<b>Positive points raised:</b> Positive: Easily accessible (non-specific)	7	8%
	<b>Positive points raised:</b> Positive: Close to shops and amenities	3	3%
	<b>Positive points raised:</b> Positive: Improved patient outcomes	2	2%
	<b>Positive points raised:</b> Positive: Site is large/good potential for expansion incl. future-proofed site	1	1%
Negative Points	<b>Negative: Access/location/cost of travel (non-specific):</b> Negative: Poor accessibility incl. longer travel times/cost of travel (non-specific)	19	21%
	<b>Negative: Access/location/cost of travel (non-specific):</b> Negative: Poor location (non-specific)	5	5%
	<b>Negative: Access, roads and infrastructure including traffic:</b> Negative: Increased traffic/road accidents	18	20%
	<b>Negative: Access, roads and infrastructure including traffic:</b> Negative: Poor road links/infrastructure	9	10%
	<b>Negative: Poor public transport provision:</b> Negative: Poor public transport provision	19	21%
	<b>Negative: Too far/difficulties travelling from Pembrokeshire:</b> Negative: Too far/difficulties travelling from Pembrokeshire	19	21%
	<b>Negative: Too far/difficulties travelling from Carmarthenshire:</b> Negative: Too far/difficulties travelling from Carmarthenshire	13	14%
	<b>Negative: Too far/difficulties travelling from Ceredigion:</b> Negative: Too far/difficulties travelling from Ceredigion	8	9%
	<b>Negative: Poor site for development/poor scope for energy production:</b> Negative: Site too small/poor scope for expansion incl. not future-proofed	15	16%
	<b>Negative: Poor site for development/poor scope for energy production:</b> Negative: Poor scope for energy production incl. renewables	3	3%
	<b>Negative impact: Equalities impact:</b> Negative impact: People without access to a car	5	5%
	<b>Negative impact: Equalities impact:</b> Negative impact: Elderly	2	2%
	<b>Negative impact: Equalities impact:</b> Negative impact: Disabled	1	1%
	<b>Negative impact: Equalities impact:</b> Negative impact: Low-income households	1	1%
	<b>Negative impact: Equalities impact:</b> Negative impact: Visiting friends and family	1	1%
	<b>Negative impact: Equalities impact:</b> Negative impact: Rural residents	1	1%
	<b>Negative: Other negative points:</b> Negative: Risk to patient outcomes	7	8%
	<b>Negative: Other negative points:</b> Negative: Impact on staff e.g., travelling time	5	5%
	<b>Negative: Other negative points:</b> Negative: Impact on local area/residents	4	4%
	<b>Negative: Other negative points:</b> Negative: Increased strain on emergency services incl. increased response times	3	3%
	<b>Negative: Other negative points:</b> Negative: Impact on staff recruitment/retention	3	3%
	<b>Negative: Other negative points:</b> Negative: Privately owned land	1	1%
Other	<b>Suggestion: Improve public transport:</b> Suggestion: Improve public transport	4	4%
	<b>Suggestion: Improve road infrastructure:</b> Suggestion: Improve road infrastructure	1	1%
	<b>Suggestion: Invest in existing services/keep local:</b> Suggestion: Invest in existing services/keep local	2	2%

<b>Suggestion: Improve/invest in Withybush Hospital:</b> Suggestion: Improve/invest in Withybush Hospital	3	3%
<b>Suggestion: Improve/invest in Glangwili Hospital:</b> Suggestion: Improve/invest in Glangwili Hospital	4	4%
<b>Criticism of consultation:</b> Criticism of consultation: Misleading information	3	3%
<b>Criticism of consultation:</b> Criticism of consultation: More information needed	1	1%
<b>Other:</b> Other	13	14%

Base: Individual respondents thinking St Clears (formerly site 17) is neither a good nor poor choice for the new hospital (92), Points raised (233)

Table 68: If you think St Clears (formerly site 17) is a poor choice for the new hospital, then please explain why (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)

Summary of comments		No. of respondents	%
<b>Agreement</b>	<b>Agree: Generally agree (non-specific):</b> Agree: Generally agree (non-specific)	12	4%
<b>Disagreement</b>	<b>Disagree: Generally disagree (non-specific):</b> Disagree: Generally disagree (non-specific)	14	5%
	<b>Disagree: Should be in a different location:</b> Disagree: Should be in a different location	30	10%
<b>Positive Points</b>	<b>Positive points raised:</b> Positive: Less travelling for Carmarthenshire residents/close to Carmarthenshire	12	4%
	<b>Positive points raised:</b> Positive: Limited risk of flooding	1	*%
<b>Negative Points</b>	<b>Negative: Access, cost of travel (non-specific):</b> Negative: Poor accessibility incl. longer travel times/cost of travel (non-specific)	73	25%
	<b>Negative: Access, roads and infrastructure including parking &amp; traffic (inc. A40):</b> Negative: Increased traffic/road accidents/roadworks incl. on A40	60	21%
	<b>Negative: Access, roads and infrastructure including parking &amp; traffic (inc. A40):</b> Negative: Poor road links/infrastructure	31	11%
	<b>Negative: Access, roads and infrastructure including parking &amp; traffic (inc. A40):</b> Negative: Lack of parking space	12	4%
	<b>Negative: Poor location/not central:</b> Negative: Poor location/not central	23	8%
	<b>Negative: Poor public transport provision:</b> Negative: Poor public transport provision	54	19%
	<b>Negative: Too far/poor road infrastructure from Pembrokeshire:</b> Negative: Too far/poor road infrastructure from Pembrokeshire	67	23%
	<b>Negative: Too far/poor road infrastructure from Carmarthenshire:</b> Negative: Too far/poor road infrastructure from Carmarthenshire	45	16%
	<b>Negative: Too far/poor road infrastructure from Ceredigion:</b> Negative: Too far/poor road infrastructure from Ceredigion	10	3%
	<b>Negative: Poor site for development/Impact on environment e.g., higher carbon emissions/pollution:</b> Negative: Site too small/poor scope for expansion incl. not future-proofed	34	12%
	<b>Negative: Poor site for development/Impact on environment e.g., higher carbon emissions/pollution:</b> Negative: Impact on environment e.g., higher carbon emissions/pollution	5	2%
	<b>Negative: Seasonal impact of tourists on roads and hospital services:</b> Negative: Seasonal impact of tourists on roads and hospital services	32	11%
	<b>Negative: Risk to patient outcomes:</b> Negative: Risk to patient outcomes	50	17%
	<b>Negative: Impact on staff recruitment/retention/travelling time/lack of accommodation:</b> Negative: Impact on staff e.g., travelling time/lack of accommodation	13	4%
	<b>Negative: Impact on staff recruitment/retention/travelling time/lack of accommodation:</b> Negative: Impact on staff recruitment/retention	11	4%
	<b>Negative: Other negative points:</b> Negative: Increased strain on emergency services incl. increased response times	19	7%
	<b>Negative: Other negative points:</b> Negative: Impact on local area/residents	7	2%
	<b>Negative: Other negative points:</b> Negative: Increased demand on surrounding hospitals	4	1%
	<b>Negative impact: Equalities impact:</b> Negative impact: Elderly/vulnerable	13	4%
	<b>Negative impact: Equalities impact:</b> Negative impact: Rural areas and villages	13	4%
	<b>Negative impact: Equalities impact:</b> Negative impact: Those without a car/unable to drive	11	4%
	<b>Negative impact: Equalities impact:</b> Negative impact: Visiting friends and family	6	2%

Other	Negative impact: Equalities impact: Negative impact: Disabled	3	1%
	Negative impact: Equalities impact: Negative impact: Deprivation/low income	2	1%
	Suggestion: Improve public transport: Suggestion: Improve public transport	5	2%
	Suggestion: Invest in existing services/keep local: Suggestion: Invest in existing services/keep local	15	5%
	Suggestion: Improve/invest in Withybush General Hospital: Suggestion: Improve/invest in Withybush General Hospital	17	6%
	Suggestion: Improve/invest in Glangwili General Hospital: Suggestion: Improve/invest in Glangwili General Hospital	6	2%
	Suggestion: Invest in/Keep things as they are at Prince Philip Hospital: Suggestion: Invest in/Keep things as they are at Prince Philip Hospital	3	1%
	Criticism of consultation: Criticism of consultation: More information needed	4	1%
	Criticism of consultation: Criticism of consultation: Misleading information	16	6%
	Criticism of consultation: Criticism of consultation: Minds already made up	2	1%
	Criticism of consultation: Criticism of consultation: Other criticism	3	1%
	Other: Other	30	10%

Base Individual respondents thinking St Clears (formerly site 17) is a poor choice for the new hospital (290), Points raised (771)

## Additional considerations

**Table 69: If you have any further comments about any of the sites, please explain (individual questionnaire respondents only) (Percentages are of those providing a comment to this question)**

Summary of comments		No. of respondents	%
Positive Points	<b>Positive: General/location non-specific:</b> Positive: General/location non-specific: Generally agree (non-spec)	20	4%
	<b>Positive: General/location non-specific:</b> Positive: General/location non-specific: Will help to attract and retain staff	5	1%
	<b>Positive: Whitland Spring Gardens:</b> Positive: Whitland Spring Gardens: General	1	*%
	<b>Positive: Whitland Spring Gardens:</b> Positive: Whitland Spring Gardens: Easily accessible (non-specific)	7	1%
	<b>Positive: Whitland Spring Gardens:</b> Positive: Whitland Spring Gardens: Good/better public transport provision	8	2%
	<b>Positive: Whitland Spring Gardens:</b> Positive: Whitland Spring Gardens: Good/better local shops and facilities	8	2%
	<b>Positive: Whitland Spring Gardens:</b> Positive: Whitland Spring Gardens: Accommodation incl. affordable local housing	3	1%
	<b>Positive: Whitland Spring Gardens:</b> Positive: Whitland Spring Gardens: Good/better for staff	1	*%
	<b>Positive: Whitland Spring Gardens:</b> Positive: Whitland Spring Gardens: Room for expansion	2	*%
	<b>Positive: Whitland Spring Gardens:</b> Positive: Whitland Spring Gardens: Good for local residents/economy	2	*%
	<b>Positive: Whitland Spring Gardens:</b> Positive: Whitland Spring Gardens: Other reason	3	1%
	<b>Positive: Whitland Ty Newydd:</b> Positive: Whitland Ty Newydd: General	4	1%
	<b>Positive: Whitland Ty Newydd:</b> Positive: Whitland Ty Newydd: Easily accessible (non-specific)	6	1%
	<b>Positive: Whitland Ty Newydd:</b> Positive: Whitland Ty Newydd: Good/better public transport provision	10	2%
	<b>Positive: Whitland Ty Newydd:</b> Positive: Whitland Ty Newydd: Good/better local shops and facilities	7	1%
	<b>Positive: Whitland Ty Newydd:</b> Positive: Whitland Ty Newydd: Accommodation incl. affordable local housing	3	1%
	<b>Positive: Whitland Ty Newydd:</b> Positive: Whitland Ty Newydd: Good/better for staff	2	*%
	<b>Positive: Whitland Ty Newydd:</b> Positive: Whitland Ty Newydd: Room for expansion	5	1%
	<b>Positive: Whitland Ty Newydd:</b> Positive: Whitland Ty Newydd: Good for local residents/economy	5	1%
	<b>Positive: Whitland Ty Newydd:</b> Positive: Whitland Ty Newydd: Other reason	3	1%
	<b>Positive: St Clears:</b> Positive: St Clears: General	7	1%
	<b>Positive: St Clears:</b> Positive: St Clears: Easily accessible (non-specific)	11	2%
	<b>Positive: St Clears:</b> Positive: St Clears: Good/better public transport provision	5	1%
	<b>Positive: St Clears:</b> Positive: St Clears: Good/better local shops and facilities	6	1%
	<b>Positive: St Clears:</b> Positive: St Clears: Good/better road infrastructure	5	1%
	<b>Positive: St Clears:</b> Positive: St Clears: Good/better for staff	3	1%
	<b>Positive: St Clears:</b> Positive: St Clears: Brownfield site	1	*%
	<b>Positive: St Clears:</b> Positive: St Clears: Other reason	7	1%
Negative Points	<b>Negative: Whitland Spring Gardens:</b> Negative: Whitland Spring Gardens: General	3	1%
	<b>Negative: Whitland Spring Gardens:</b> Negative: Whitland Spring Gardens: Lack of local facilities and amenities	4	1%
	<b>Negative: Whitland Spring Gardens:</b> Negative: Whitland Spring Gardens: Poor accessibility incl. longer travel times	15	3%
	<b>Negative: Whitland Spring Gardens:</b> Negative: Whitland Spring Gardens: Poor public transport provision	9	2%
	<b>Negative: Whitland Spring Gardens:</b> Negative: Whitland Spring Gardens: Poor road infrastructure incl. traffic, roadworks, accidents	10	2%
	<b>Negative: Whitland Spring Gardens:</b> Negative: Whitland Spring Gardens: Impact on local residents	9	2%

<b>Negative: Whitland Spring Gardens:</b> Negative: Whitland Spring Gardens: Lack of appropriate accommodation	2	*%
<b>Negative: Whitland Spring Gardens:</b> Negative: Whitland Spring Gardens: Lack of room for expansion	2	*%
<b>Negative: Whitland Spring Gardens:</b> Negative: Whitland Spring Gardens: Other reason	5	1%
<b>Negative: Whitland Ty Newydd:</b> Negative: Whitland Ty Newydd: General	3	1%
<b>Negative: Whitland Ty Newydd:</b> Negative: Whitland Ty Newydd: Lack of local facilities and amenities	4	1%
<b>Negative: Whitland Ty Newydd:</b> Negative: Whitland Ty Newydd: Poor accessibility incl. longer travel times	16	3%
<b>Negative: Whitland Ty Newydd:</b> Negative: Whitland Ty Newydd: Poor public transport provision	9	2%
<b>Negative: Whitland Ty Newydd:</b> Negative: Whitland Ty Newydd: Poor road infrastructure incl. traffic, roadworks, accidents	11	2%
<b>Negative: Whitland Ty Newydd:</b> Negative: Whitland Ty Newydd: Impact on local residents	8	2%
<b>Negative: Whitland Ty Newydd:</b> Negative: Whitland Ty Newydd: Lack of appropriate accommodation	2	*%
<b>Negative: Whitland Ty Newydd:</b> Negative: Whitland Ty Newydd: Lack of room for expansion	1	*%
<b>Negative: Whitland Ty Newydd:</b> Negative: Whitland Ty Newydd: Flood risk	2	*%
<b>Negative: Whitland Ty Newydd:</b> Negative: Whitland Ty Newydd: Other reason	3	1%
<b>Negative: St Clears:</b> Negative: St Clears: General	4	1%
<b>Negative: St Clears:</b> Negative: St Clears: Lack of local facilities and amenities	5	1%
<b>Negative: St Clears:</b> Negative: St Clears: Poor accessibility incl. longer travel times	15	3%
<b>Negative: St Clears:</b> Negative: St Clears: Poor public transport provision	10	2%
<b>Negative: St Clears:</b> Negative: St Clears: Poor road infrastructure incl. traffic, roadworks, accidents	15	3%
<b>Negative: St Clears:</b> Negative: St Clears: Impact on local residents	5	1%
<b>Negative: St Clears:</b> Negative: St Clears: Lack of appropriate accommodation	4	1%
<b>Negative: St Clears:</b> Negative: St Clears: Lack of room for expansion	4	1%
<b>Negative: St Clears:</b> Negative: St Clears: Other reason	7	1%
<b>Negative: General/location non-specific: Generally disagree incl. none of the sites are suitable</b> Negative: General/location non-specific: Generally disagree incl. none of the sites are suitable	50	10%
<b>Negative: General/location non-specific: Poor accessibility incl. longer travel times/ensure ease of access:</b> Negative: General/location non-specific: Poor accessibility incl. longer travel times	130	26%
<b>Negative: General/location non-specific: Poor accessibility incl. longer travel times/ensure ease of access:</b> Suggestion: Ensure ease of access (non-specific)	24	5%
<b>Negative: General/location non-specific: Road infrastructure incl. traffic, roadworks, accidents/Improve road infrastructure:</b> Negative: General/location non-specific: Road infrastructure incl. traffic, roadworks, accidents	71	14%
<b>Negative: General/location non-specific: Road infrastructure incl. traffic, roadworks, accidents/Improve road infrastructure:</b> Suggestion: Improve road infrastructure	14	3%
<b>Negative: General/location non-specific: Poor public transport provision/Improve public transport provision (including hospital buses):</b> Negative: General/location non-specific: Poor public transport provision	76	15%
<b>Negative: General/location non-specific: Poor public transport provision/Improve public transport provision (including hospital buses):</b> Suggestion: Improve public transport provision incl. hospital buses	67	13%
<b>Concern: Increased cost of transport/Increased cost to the NHS of transporting/transferring patients:</b> Concern: Increased cost of transport	27	5%
<b>Concern: Increased cost of transport/Increased cost to the NHS of transporting/transferring patients:</b> Concern: Increased cost to the NHS of transporting/transferring patients	5	1%
<b>Concern: Lack of parking incl. at existing hospital sites/ensure adequate parking:</b> Concern: Lack of parking incl. at existing hospital sites	18	4%
<b>Concern: Lack of parking incl. at existing hospital sites/ensure adequate parking:</b> Ensure adequate parking facilities	40	8%
<b>Environmental Concern: Impact on the environment incl. from more travelling/Ensure the new hospital is environmentally sustainable:</b> Concern: Impact on the environment incl. from more travelling	18	4%
<b>Environmental Concern: Impact on the environment incl. from more travelling/Ensure the new hospital is environmentally sustainable:</b> Suggestion: Ensure the new hospital is environmentally sustainable	17	3%



	<b>Negative: General/location non-specific: Lack of appropriate accommodation/lack of room for expansion:</b> Negative: General/location non-specific: Lack of appropriate accommodation	15	3%
	<b>Negative: General/location non-specific: Lack of appropriate accommodation/lack of room for expansion:</b> Negative: General/location non-specific: Lack of room for expansion	5	1%
	<b>Concern: Impact on staff incl. recruitment, retention and commuting:</b> Concern: Impact on staff incl. recruitment, retention and commuting	84	17%
	<b>Concern: Risk to patient care/outcomes:</b> Concern: Risk to patient care/outcomes	83	17%
	<b>Concern: Impact on ambulance service incl. worse response to patients:</b> Concern: Impact on ambulance service incl. worse response to patients	52	10%
	<b>Concerns with capacity, including growing population, seasonal impact of tourists:</b> Concern: Seasonal impact of tourists on roads and hospital services	52	10%
	<b>Concerns with capacity, including growing population, seasonal impact of tourists:</b> Concern: Growing population	13	3%
	<b>Other Concerns:</b> Concern: Access for visiting friends and family	43	9%
	<b>Other Concerns:</b> Concern: Not cost effective/waste of money	33	7%
	<b>Other Concerns:</b> Concern: Elderly/aging population	13	3%
	<b>Other Concerns:</b> Concern: Will put more pressure on other hospitals	7	1%
	<b>Negative impacts on particular groups:</b> Negative impact: People without a car/unable to drive	39	8%
	<b>Negative impacts on particular groups:</b> Negative impact: Elderly	27	5%
	<b>Negative impacts on particular groups:</b> Negative impact: Rural	26	5%
	<b>Negative impacts on particular groups:</b> Negative impact: People with disabilities incl. lowermobility	17	3%
	<b>Negative impacts on particular groups:</b> Negative impact: Parents and carers	2	*%
	<b>Negative impacts on people living in particular counties:</b> Negative impact: Pembrokeshire residents	61	12%
	<b>Negative impacts on people living in particular counties:</b> Negative impact: Carmarthenshire residents	50	10%
	<b>Negative impacts on people living in particular counties:</b> Negative impact: Ceredigion residents	24	5%
Other	<b>Suggestion: Improve staff training incl. building training facilities/Focus on/incentivise staff for recruitment and retention incl. subsidised housing:</b> Suggestion: Improve staff training incl. building training facilities	7	1%
	<b>Suggestion: Improve staff training incl. building training facilities/Focus on/incentivise staff for recruitment and retention incl. subsidised housing:</b> Suggestion: Focus on/incentivise staff for recruitment and retention incl. subsidised housing	32	6%
	<b>Suggestion: Have local and decentralised services incl. for rehabilitation/ Keep/improve existing local services (non-specific):</b> Suggestion: Have local and decentralised services incl. for rehabilitation	13	3%
	<b>Suggestion: Have local and decentralised services incl. for rehabilitation/ Keep/improve existing local services (non-specific):</b> Suggestion: Keep/improve existing local services (non-specific)	61	12%
	<b>Suggestion: Keep/improve Withybush Hospital:</b> Suggestion: Keep/improve Withybush Hospital	35	7%
	<b>Suggestion: Keep/improve Glangwili Hospital:</b> Suggestion: Keep/improve Glangwili Hospital	31	6%
	<b>Suggestion: Build the hospital in an alternative location:</b> Suggestion: Build the hospital in an alternative location	33	7%
	<b>Suggestion: Ensure onsite facilities for physical exercise and patient wellbeing:</b> Suggestion: Ensure onsite facilities for physical exercise and patient wellbeing	13	3%
	<b>Suggestion: Ensure the hospital/service is future-proofed:</b> Suggestion: Ensure the hospital/service is future-proofed	21	4%
	<b>Criticism of consultation:</b> Criticism of consultation: More information needed	31	6%
	<b>Criticism of consultation:</b> Criticism of consultation: Misleading information	23	5%
	<b>Criticism of consultation:</b> Criticism of consultation: Minds already made up	7	1%
	<b>Criticism of consultation:</b> Other criticism	9	2%
	<b>Other:</b> Other	64	13%

Base: Individual respondents (503), Points raised (1,923)



## Groups of people who might be positively or negatively affected by any of the sites being considered

**Table 70: Are there any particular groups of people that you believe might be positively or negatively affected by any of the sites being considered? If so, what groups are these? (individual questionnaire respondents only) (Because respondents could provide detailed feedback, some comments cover more than one point/group and therefore the total percentages may sum to greater than 100%) (Percentages are of all individual respondents excluding don't know)**

Summary of comments made		No. of respondents	%
Groups: Elderly/Vulnerable People	Groups: Elderly/Vulnerable People: Elderly/vulnerable: No specific reason	65	8%
	Groups: Elderly/Vulnerable People: Elderly/vulnerable: Distance will be too far to travel	65	8%
	Groups: Elderly/Vulnerable People: Elderly/vulnerable: Inaccessible/expensive parking	4	*%
	Groups: Elderly/Vulnerable People: Elderly/vulnerable: Cost of transport	9	1%
	Groups: Elderly/Vulnerable People: Elderly/vulnerable: Poor public transport links	33	4%
	Groups: Elderly/Vulnerable People: Elderly/vulnerable: Traffic issues incl. poor road infrastructure	7	1%
	Groups: Elderly/Vulnerable People: Elderly/vulnerable: Increased risk/lower quality of care	18	2%
	Groups: Elderly/Vulnerable People: Elderly/vulnerable: Other Reason	12	1%
Groups: People without a car/can't drive	Groups: People without a car/can't drive: People without a car/can't drive: No specific reason	49	6%
	Groups: People without a car/can't drive: People without a car/can't drive: Distance will be too far to travel	15	2%
	Groups: People without a car/can't drive: People without a car/can't drive: Cost of transport	5	1%
	Groups: People without a car/can't drive: People without a car/can't drive: Poor public transport links	43	5%
	Groups: People without a car/can't drive: People without a car/can't drive: Traffic issues incl. poor road infrastructure	3	*%
	Groups: People without a car/can't drive: People without a car/can't drive: Increased risk/lower quality of care	4	*%
	Groups: People without a car/can't drive: People without a car/can't drive: Other reason	3	*%
Groups: Rural/located further from the proposed sites	Groups: Rural/located further from the proposed sites: Rural/located further from the proposed sites: No specific reason	31	4%
	Groups: Rural/located further from the proposed sites: Rural/located further from the proposed sites: Distance will be too far to travel	38	5%
	Groups: Rural/located further from the proposed sites: Rural/located further from the proposed sites: Inaccessible/expensive parking	1	*%
	Groups: Rural/located further from the proposed sites: Rural/located further from the proposed sites: Cost of transport	1	*%
	Groups: Rural/located further from the proposed sites: Rural/located further from the proposed sites: Poor public transport links	12	1%
	Groups: Rural/located further from the proposed sites: Rural/located further from the proposed sites: Traffic issues incl. poor road infrastructure	6	1%
	Groups: Rural/located further from the proposed sites: Rural/located further from the proposed sites: Other reason	17	2%
Groups: General/patients	Groups: General/patients: General/patients: No specific reason	26	3%
	Groups: General/patients: General/patients: Distance will be too far to travel	31	4%
	Groups: General/patients: General/patients Inaccessible/expensive parking	3	*%
	Groups: General/patients: General/patients: Cost of transport	6	1%
	Groups: General/patients: General/patients: Poor public transport links	15	2%
	Groups: General/patients: General/patients: Traffic issues incl. poor road infrastructure	8	1%
	Groups: General/patients: General/patients: Increased risk/lower quality of care	14	2%

	<b>Groups: General/patients:</b> General/patients: Concern about increased ambulance response times	10	1%
	<b>Groups: General/patients:</b> General/patients: Other Reason	4	*%
<b>Groups: Disabled</b>	<b>Groups: Disabled:</b> Disabled: No specific reason	24	3%
	<b>Groups: Disabled:</b> Disabled: Distance will be too far to travel	25	3%
	<b>Groups: Disabled:</b> Disabled: Inaccessible/expensive parking	2	*%
	<b>Groups: Disabled:</b> Disabled: Cost of transport	2	*%
	<b>Groups: Disabled:</b> Disabled: Poor public transport links	28	3%
	<b>Groups: Disabled:</b> Disabled: Traffic issues incl. poor road infrastructure	2	*%
	<b>Groups: Disabled:</b> Disabled: Increased risk/lower quality of care	5	1%
	<b>Groups: Disabled:</b> Disabled: Other reason	6	1%
<b>Groups: Single parent/young families</b>	<b>Groups: Single parent/young families:</b> Single parent/young families: No specific reason	17	2%
	<b>Groups: Single parent/young families:</b> Single parent/young families: Distance will be too far to travel	25	3%
	<b>Groups: Single parent/young families:</b> Single parent/young families: Inaccessible/expensive parking	1	*%
	<b>Groups: Single parent/young families:</b> Single parent/young families: Poor public transport links	7	1%
	<b>Groups: Single parent/young families:</b> Single parent/young families: Traffic issues incl. poor road infrastructure	1	*%
	<b>Groups: Single parent/young families:</b> Single parent/young families: Increased risk/lower quality of care	9	1%
	<b>Groups: Single parent/young families:</b> Single parent/young families: Other reason	6	1%
<b>Groups: Low income</b>	<b>Groups: Low income:</b> Low income: No specific reason	17	2%
	<b>Groups: Low income:</b> Low income: Distance will be too far to travel	6	1%
	<b>Groups: Low income:</b> Low income: Cost of transport	6	1%
	<b>Groups: Low income:</b> Low income: Poor public transport links	7	1%
	<b>Groups: Low income:</b> Low income: Increased risk/lower quality of care	1	*%
	<b>Groups: Low income:</b> Low income: Other reason	1	*%
<b>Groups: Visiting friends and family</b>	<b>Groups: Visiting friends and family:</b> Visiting friends and family: No specific reason	9	1%
	<b>Groups: Visiting friends and family:</b> Visiting friends and family: Distance will be too far to travel	17	2%
	<b>Groups: Visiting friends and family:</b> Visiting friends and family: Inaccessible/expensive parking	1	*%
	<b>Groups: Visiting friends and family:</b> Visiting friends and family: Cost of transport	2	*%
	<b>Groups: Visiting friends and family:</b> Visiting friends and family: Poor public transport links	1	*%
	<b>Groups: Visiting friends and family:</b> Visiting friends and family: Traffic issues incl. poor road infrastructure	1	*%
	<b>Groups: Visiting friends and family:</b> Visiting friends and family: Increased risk/lower quality of care	1	*%
<b>Groups: Mental illness/learning difficulty/autism</b>	<b>Groups: Mental illness/learning difficulty/autism:</b> Mental illness/learning difficulty/autism: No specific reason	7	1%
	<b>Groups: Mental illness/learning difficulty/autism:</b> Mental illness/learning difficulty/autism: Distance will be too far to travel	10	1%
	<b>Groups: Mental illness/learning difficulty/autism:</b> Mental illness/learning difficulty/autism: Poor public transport links	4	*%
	<b>Groups: Mental illness/learning difficulty/autism:</b> Mental illness/learning difficulty/autism: Traffic issues incl. poor road infrastructure	1	*%
	<b>Groups: Mental illness/learning difficulty/autism:</b> Mental illness/learning difficulty/autism: Increased risk/lower quality of care	2	*%
	<b>Groups: Mental illness/learning difficulty/autism:</b> Mental illness/learning difficulty/autism: Other reason	4	*%
<b>Groups: Staff</b>	<b>Groups: Staff:</b> Staff: No specific reason	3	*%
	<b>Groups: Staff:</b> Staff: Distance will be too far to travel	10	1%
	<b>Groups: Staff:</b> Staff: Inaccessible/expensive parking	2	*%
	<b>Groups: Staff:</b> Staff: Cost of transport	1	*%
	<b>Groups: Staff:</b> Staff: Poor public transport links	6	1%
	<b>Groups: Staff:</b> Staff: Other reason	3	*%

<b>Positive Comments:</b> General, about locations, about quality of care	<b>Positive Comments:</b> Positive: Generally agree with building a new hospital (location non-specific)	8	1%
	<b>Positive Comments:</b> Positive: Good opinion of St Clears location incl. better accessibility	5	1%
	<b>Positive Comments:</b> Positive: Good opinion of Whitland Ty Newydd location incl. better accessibility	4	*%
	<b>Positive Comments:</b> Positive: Good opinion of Whitland Spring Gardens location incl. better accessibility	2	*%
	<b>Positive Comments:</b> Positive: Better quality of care (location non-specific)	3	*%
	<b>Positive Comments:</b> Positive: Will improve the local area/economy	3	*%
<b>Negative Comments:</b> General, about locations, about environment	<b>Negative Comments:</b> Negative: Generally disagree with all proposed locations/building a new hospital	28	3%
	<b>Negative Comments:</b> Negative: Poor opinion of St Clears location	6	1%
	<b>Negative Comments:</b> Negative: Poor opinion of Whitland Ty Newydd location	3	*%
	<b>Negative Comments:</b> Negative: Poor opinion of Whitland Spring Gardens location	3	*%
	<b>Negative Comments:</b> Negative: Impact on local residents of the chosen site	5	1%
	<b>Negative Comments:</b> Negative: Impact on the environment	4	*%
	<b>Negative Comments:</b> Negative: Proposals are a waste of money	8	1%
<b>Other Suggestions:</b> Hospital location, facilities, transport and infrastructure, staff related issues and visitors		80	10%
<b>Criticism of Consultation/Question Misunderstood</b>	<b>Criticism of Consultation/Question Misunderstood:</b> Question misunderstood: Treat everyone equally	10	1%
	<b>Criticism of Consultation/Question Misunderstood:</b> Criticism of consultation: More information needed	7	1%
	<b>Criticism of Consultation/Question Misunderstood:</b> Criticism of consultation: Misleading information	5	1%
	<b>Criticism of Consultation/Question Misunderstood:</b> Other criticism	5	1%
<b>Other Comments:</b> Other		49	6%
<b>No/Nothing stated:</b> No/nothing stated		403	49%

Base: Individual respondents (826), Points made (1,482)

# Appendix III: Demographics of attendees at HDdUHB-run events

- 1.1 The profiles of those who attended HDdUHB-run events and meetings and completed equality monitoring forms are presented in the tables that follow.

## Demographic profile of event participants (667 responses, English and Welsh)

Table 71: Total number of attendees who completed equality monitoring forms, by event

		Number of attendees	%
<b>PUBLIC DROP-IN EVENTS</b>			
<b>BY EVENT</b>	Online engagement events	18	3
	Cardigan	27	4
	Carmarthen	15	2
	Goodwick	17	3
	Haverfordwest	57	9
	Lampeter	40	6
	Llandovery	68	10
	Llandybie	14	2
	Llanelli	16	2
	Milford Haven	20	3
	Aberystwyth	25	4
	Saundersfoot	24	4
	St Clears	54	8
	Whitland	77	12
<b>STAFF DROP-IN EVENTS</b>			
<b>BY EVENT</b>	Aberaeron Integrated Care Centre	8	1
	Amman Valley Hospital	4	1
	Bronglais Hospital	3	*
	Cardigan Integrated Care Centre	15	2
	Glangwili Hospital	21	3
	Llandovery Hospital	11	2
	Prince Phillip Hospital	3	*
	South Pembrokeshire Hospital	17	3
	Tenby Hospital	1	*
	Tregaron Hospital	5	1
	Withybush Hospital	23	3
<b>OTHER COMMUNITY EVENTS/MEETINGS</b>			
<b>BY EVENT</b>	Coffee morning at Giraldu Centre, Manorbier	4	1
	Milford Haven Mosque	5	1
	Mencap meeting	3	*

	Pembrokeshire Councillors	4	1
	ESOL Class (Cardigan)	31	5
	VC Gallery and Art Session	14	2
	Wellbeing Walk, Saundersfoot	13	2
	Ysgol Tregroes School	3	*
	Other Consultation Events	5	1
	<b>Total valid responses</b>	<b>667</b>	<b>100%</b>

Table 72: Key demographic response profile for attendees those who provided this information.

Characteristic		Participants	
		Number of attendees	%
BY AGE	18 to 24	19	3
	25 to 34	31	5
	35 to 44	69	11
	45 to 54	97	15
	55 to 64	142	22
	65 to 74	184	28
	75 or over	113	17
	<b>Total valid responses</b>	<b>655</b>	<b>100%</b>
	<i>Prefer not to say</i>	<i>12</i>	-
BY GENDER	Male	253	39
	Female	400	61
	Non-binary	2	*
	I use another term	2	*
	<b>Total valid responses</b>	<b>657</b>	<b>100%</b>
	<i>Prefer not to say</i>	<i>10</i>	-
BY ETHNIC GROUP	White British	531	85
	White other (incl Gypsies, Roma and Travellers)	70	11
	Other ethnic group	25	4
	<b>Total valid responses</b>	<b>626</b>	<b>100%</b>
	<i>Prefer not to say</i>	<i>41</i>	-
BY WHETHER RESPONDENT PROVIDES HELP / SUPPORT TO OTHERS <sup>12</sup>	Yes	133	22
	No	467	78
	<b>Total valid responses</b>	<b>600</b>	<b>100%</b>
	<i>Prefer not to say</i>	<i>67</i>	-
	Yes	554	95
	No	29	5

<sup>12</sup> Defined as providing unpaid care by looking after someone (a family member, friend or neighbour) who is older, disabled or seriously ill.

Characteristic		Participants	
		Number of attendees	%
BY WHETHER GENDER IS THE SAME AS ASSIGNED AT BIRTH	Total valid responses	583	100%
	<i>Prefer not to say</i>	84	-
BY DISABILITY	Has a disability	119	19
	No disability	520	81
	Total valid responses	639	100%
	<i>Prefer not to say</i>	28	-

Table 73: Participants with disabilities, by type of disability, for those who provided this information (note that respondents could choose more than one option and therefore the percentages may sum to greater than 100%)

Characteristic		Disabled Participants	
		Number of attendees	%
BY TYPE OF DISABILITY	Long-standing illness or health condition e.g., cancer, HIV, diabetes, chronic heart disease, epilepsy	44	42
	A mental health difficulty	22	21
	A physical impairment or mobility issues	45	43
	A social/communication impairment e.g., speech and language impairment or Asperger's syndrome/other autistic spectrum disorder	9	9
	A specific learning difficulty e.g., dyslexia, dyspraxia or AD(H)D	20	19
	Blind or have a visual impairment uncorrected by glasses	6	6
	Deaf or have a hearing impairment	10	10
	Other impairment, health condition or learning difference not listed above	7	7
	Total valid responses	105	100%
	<i>Prefer not to say</i>	14	-
	<i>Not asked</i>	548	-

Table 74: Attendees who provide unpaid care, by who they care for, for those who provided this information (note that respondents could choose more than one option and therefore the percentages may sum to greater than 100%)

Characteristic		Participants	
		Number of attendees	%
BY WHO CARE IS PROVIDED FOR	Primary Carer of a disabled child or children	7	6
	Primary Carer or assistant for a disabled adult or adults (aged 18+)	25	21
	Primary Carer or assistant for an older person/people (aged 65+)	59	50
	Secondary Carer (another person carries out main caring role)	34	29
	Total valid responses	117	100%
	<i>Prefer not to say</i>	16	-
	<i>Not asked</i>	534	-

Table 75: Other demographic response profile for attendees for those who provided this information.

Characteristic		Participants	
		Number of attendees	%
BY SEXUAL ORIENTATION	Asexual	13	2
	Bisexual	5	1
	Gay man	3	1
	Gay woman or lesbian	5	1
	Heterosexual or straight	544	95
	Other	1	*
	<b>Total valid responses</b>	<b>571</b>	<b>100%</b>
	<i>Prefer not to say</i>	96	-
BY MARITAL STATUS	Married or in a Civil Partnership	431	71%
	Not Married or in a Civil Partnership	173	29%
	<b>Total valid responses</b>	<b>604</b>	<b>100%</b>
	<i>Prefer not to say</i>	63	-
BY ARMED FORCES COMMUNITY (Veteran, Reservist, Cadet Force Adult Volunteer (CFAV) or a family member of someone in the Armed Forces)	In Armed Forces Community	29	
	Not in Armed Forces Community	575	
	<b>Total valid responses</b>	<b>604</b>	<b>100%</b>
	<i>Prefer not to say</i>	63	-
BY PREGNANT/GIVEN BIRTH WITHIN LAST YEAR	Yes	9	1
	No	611	99
	<b>Total valid responses</b>	<b>620</b>	<b>100%</b>
	<i>Prefer not to say</i>	47	-
BY RELIGION	Buddhist	1	*
	Christian	391	68
	Hindu	9	2
	Jewish	1	*
	Muslim	11	2
	No religion	146	25
	Any other religion	14	2
	<b>Total valid responses</b>	<b>573</b>	<b>100%</b>
	<i>Prefer not to say</i>	94	-
BY HOUSEHOLD INCOME	Below £10,000	34	8
	£10,001 - £20,000	59	14
	£20,001 - £30,000	101	25
	£30,001 - £40,000	71	17
	Over £40,000	146	36

Characteristic		Participants	
		Number of attendees	%
	Total valid responses	411	100%
	Prefer not to say	256	-
BY MAIN LANGUAGE SPOKEN/USED AT HOME	English	509	79
	Welsh	145	23
	Other	16	2
	Total valid responses	644	*13
	Prefer not to say	23	-

<sup>13</sup> Some respondents picked multiple answers and hence percentages don't sum to 100%



# Appendix IV: Focus group topic guide and presentation

## Hywel Dda Site Consultation Topic Guide

### Introduction [10 minutes]

---

Thank for coming and make introductions...

- Xxx and xxx from Opinion Research Services (ORS) – introduce ORS as independent organisation specialising in statutory consultation
- Here to gather views on proposed sites for a new Urgent and Planned Care Hospital in the south of Hywel Dda
  - Which of three potential sites are the best location for a new hospital and why
  - Concerns you may have about any of the three potential sites
  - Anything else you think needs to be considered

Practicalities...

- Can everyone see/hear ok?
- Alarms planned
- Mobiles – off/on silent
- Refreshments/toilets
- Finish by 8:00pm
- Forms

Conduct of meeting...

- Consultative – to listen to your views
- Deliberative meeting
  - Look at evidence, arguments
  - No right or wrong answers
- Anger - stated not demonstrated
- Respect for others' views
  - Listen and don't talk over people

Data protection

- Everything said in this room is confidential

- We produce a report, but no-one is identified
- Recording session - but only to help write report
- Recordings kept (securely) and then disposed of in accordance with current Data Protection legislation no later than 1 year after any decision taken

Introductions - your name, where you live; how long you've lived there and, just for our interest, why you agreed to take part tonight?

### The need for change [15 minutes]

#### FACILITATOR INSTRUCTIONS

**Facilitator: show slides 8-12...**

*Slide 8 – current healthcare situation in HDdUHB*

*Slide 9 – HDdUHB's current challenges*

*Slides 10 and 11 – proposed 'network' of facilities and services*

*Slide 12 – perceived benefits of change*

**Facilitator: ask for any questions/comments around the need for change**

### The journey so far [15 minutes]

#### FACILITATOR INSTRUCTIONS

**Facilitator: run through slides 15-17**

*Slide 15: Programme Business Case to WG*

*Slides 16 and 17: Options Appraisal Process*

**Facilitator: ask for any questions/comments around the journey so far**

### Three site options [60 minutes]

#### FACILITATOR INSTRUCTIONS

**Facilitator: run through slides 19 - 23**

*Slide 19: Consultation scope*

*Slide 20: The three site options*

*Slide 21 and 22: Similarities and differences between the sites*

*Slide 23: Travel and transport issues*

**Facilitator: split group into pairs/threes and (using worksheets) ask them to discuss the 'good' and 'poor' aspects of each site for 10 minutes.**

**In plenary session, take each site in turn and ask:**

- **What makes the sites a good or poor choice for a new hospital?**
- **What are the most important things to consider when making the decision on where to site a new hospital?**  
[PROBES: meeting quality/safety guidelines; travel times/access; Ease of purchase (i.e., land ownership); site risks (i.e. flood risk); scope for expansion; Environmental impacts/opportunities; costs; any other factors]
- **Do you have any site preferences?**
- **What, if anything, else does HDdUHB need to consider in relation to the site options?**

## Equalities impacts [15 minutes]

### FACILITATOR INSTRUCTIONS

#### Facilitator: ask...

- **Are there any particular groups of people that might be positively or negatively affected by any of the three sites?**
- **What, if any, mitigations are there for negative impacts?**

### ANYTHING TO ADD? [5 MINUTES]

### THANK AND CLOSE



## Site selection for an urgent and planned care hospital in the south of Hywel Dda

Public Focus Groups  
March/April 2023



## Who are we?

---



Independent social research company

UK-wide reputation – mainly work for public sector

Specialise in sensitive, often controversial issues

Here to gather views on proposed sites for a new Urgent and Planned Care Hospital in the south of Hywel Dda

## Practicalities

---

**Can everyone see/hear ok?**

**Alarms planned – none**

**Mobiles – off/on silent**

**Refreshments/toilets**

**Finish by 8:00pm**

**Forms**



## Conduct of the meeting

---

- **Consultative – to listen to your views**
- **Deliberative meeting**
  - Look at evidence, arguments
  - No right or wrong answers
- **Anger - stated not demonstrated**
- **Respect for others' views**
  - Listen
  - Don't talk over people
- **Everything said in this room is confidential**
  - We produce a report, but no one is identified
  - Recording session - but only to help write report
  - Recordings kept (securely) and then disposed of in accordance with current Data Protection legislation no later than 1 year after any decision taken



## Agenda

---

### Purpose of the meeting- to hear your views on:



- Which of three potential sites are the best location for a new hospital and why
- Concerns you may have about any of the three potential sites
- Anything else you think needs to be considered

### Let's introduce ourselves...

---

#### Briefly round the room...

Name?  
Where do you live?  
How long have you live there?  
What made you want to come along tonight?




Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

### The need for change?



### Current situation




**4 main hospitals**

Bronglais, Glangwili and Withybush currently have Emergency Departments (A&E)

Prince Philip has a GP-led Minor Injury Unit and Acute Medical Admissions Unit

**5 community hospitals**→ Amman Valley, Llandovery, South Pembrokeshire Health & Social Care Resource Centre, Tenby/Tregaron


**2 care centres**→ Aberaeron, Cardigan




48 General Practices (GPs)




49 Dental Practices




98 Community Pharmacies



44 General Practitioner Practices (including mental health and out of hours services)







38 Specialist and Generalist Community Services



Care within rural and urban areas

Highly specialised services e.g., some major trauma, cardiac (heart) care, and complex burns outside area (Swansea/Cardiff)


### The need for change

Number of challenges facing the health board, including...	
Community Health	 Growing/ageing population People need more support to stay well and independent, especially in older age
Fragile services	 Care duplicated/staff stretched across 4 main hospitals→ fragile services Difficult to develop some specialist services in the area, meaning people travel further for them
Workforce	 Fewer staff than needed + doctors covering more shifts than elsewhere = difficult keeping/recruiting staff Over-reliance on expensive agency staff→ unfamiliar with local guidance/procedures/other team members risks, which risks poorer quality of care
Digital	 HDdHB does not fully use digital opportunities, especially for those who must travel for services Using latest technologies will help attract best workforce
Buildings & Facilities	 Hospital buildings (most of Glangwili/some of Withybush) are old; they need a lot of maintenance and they don't support delivering modern healthcare
Environment	 Older buildings and other issues (backlog maintenance, poor insulation/heating systems/using oil as principal fuel source) = some of least energy efficient sites across Wales


### The need for change

Following consultation in 2018, decision taken to develop a new hospital for urgent and planned care in the south, providing specialist child, adult, and mental health services...


- 24/7 GP-led urgent care centres
- Facilities for day case procedures
- "Step-up beds" for less critical needs
- "Step-down beds" → discharge most patients from new hospital within 72 hours
- Diagnostics (x-ray, ultrasound etc.) and outpatient/other clinics



Bronglais Hospital will still provide urgent, emergency, and planned care services.



Prince Philip Hospital will still provide minor injury care and adult medical care.



Glangwili and Withybush hospitals will become community hospitals.

More specialist cases transferred to new hospital, and other regional sites for more critical care, as happens now

206/234

206

## The need for change

HDDUHB also developing plans for 'community hubs' where patients can receive tests, care and treatment and appointments

Some will have overnight beds→

Amman Valley and Llandovery in Carmarthenshire

Tregaron in Ceredigion

South Pembrokeshire (Pembroke Dock)

Some without overnight beds→

Aberaeron and Cardigan (already delivered) and Lampeter in Ceredigion

Carmarthen, Cross Hands, Llandysul, Pentre Awel (Llanelli) in Carmarthenshire

Fishguard, Haverfordwest, Milford Haven, Narberth, Neyland and Tenby in Pembrokeshire

Range of services will vary to meet local needs, but could include some or all of the following



Outpatient clinics supported by diagnostic tests and scans, including x-rays



Treatment for minor illness and minor injury



Planned and preventative care for people living with long term conditions



Overnight stay for patients unable to remain at home but not requiring a hospital care (step-up care), rehabilitation after a stay in hospital (step-down care) and assisted living



Mental health advice and support

## The benefits of change



New purpose-built hospital will meet modern healthcare standards and improve patient/staff experience

More services offered from new hospital, within Hywel Dda boundaries



Experience elsewhere→ staff want to work in new hospitals with latest facilities/technologies, and that provide for their wellbeing



More attractive "rotas" (e.g., fewer unsociable hours) for medical staff/trainees  
Health education, academic, research, and innovation facilities on site



Reducing duplication of services across sites will offer better care e.g., access to senior clinical staff quickly – and 24/7



Delivering care differently, and having modern/efficient buildings, will help reduce carbon footprint



Separating planned + emergency care at new hospital → avoid emergency activity affecting planned care (cancelled operations)

## Questions/comments



## The journey so far



### What has happened so far?

---

February 2022: Programme Business Case (PBC) to Welsh Government → secure support and c.£1.3billion funding for programme of investment, including...

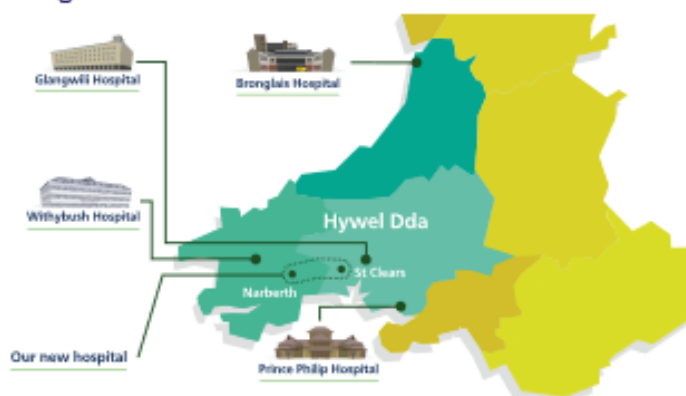
- Building/developing community facilities
- Repurposing Withybush and Glangwili Hospitals
- Refurbishing Bronglais and Prince Philip Hospitals
- Building new Urgent and Planned Care Hospital

If successful, could still take several years to secure ultimate investment needed

### What has happened so far?

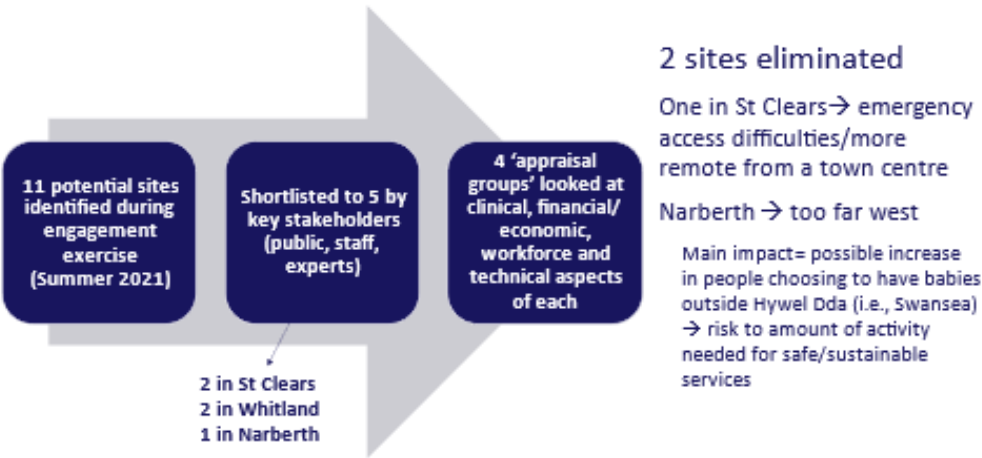
---

Already decided that new hospital should be in zone between and including Narberth and St. Clears → within 60 minute car journey for most people using it





What has happened so far?



Questions/comments



Three site options



Three site options

Whitland Spring Gardens: agricultural land to the north -east of the town centre, between the A40 to the north, Whitland rugby pitch to the east, and Spring Garden homes to the south

Whitland Tŷ Newydd: to the east of the old Whitland creamery site and the town centre; A40 is less than one mile to the north

St Clears - land at old Bryncaerau fields, next to junction of A40 and A477 in St Clears. A4066 (Tenby Road) to the south, village of Pwll Trap to the north, and A40 to the west

Similarities between site options

3 sites are identical/similar in many ways...

They are all big enough and suitable for development

They would all benefit the local economy and help growth

They would all cost around the same amount of money to build (about £736 bn)

They are all close to small towns with similar local amenities such as shops, schools, housing etc

They are all close to bus routes that connect to Haverfordwest and Carmarthen

They are all within the original zone (between and including Narberth and St Clears)

All of them would need more bus services, running more times a day that connect to smaller communities for staff, patients and visitors

None of them have any significant planning issues

All of them have gas, electricity, and water available to the site

All of them would need improvements to local roads and traffic management

Summaries of differences between sites

Issues to think about:	Whitland: Spring Gardens	Whitland: Tŷ Newydd	St Clears
Guidelines	There is some risk that national guidelines on minimum number of patients treated may not be met. This could affect quality and safety, and staff.		Least risk to guidelines on minimum numbers of patients treated.
A&E/Emergency Dept. travel time (average compared to now)	9 minutes longer 7% of people would have faster 999 access to an Emergency Department	9 minutes longer 7% of people would have faster 999 access to an Emergency Department	6 minutes longer 6% of people would have faster 999 access to an Emergency Department
Car travel: instead of Glangwili (for areas with 1,000+ residents)	13 minutes longer (on average)	13 minutes longer (on average)	7 minutes longer (on average)
Car travel: instead of Withybush (for areas with 1,000+ residents)	12 minutes longer (on average)	12 minutes longer (on average)	14 minutes longer (on average)
Access by road	Direct access from A40	No direct access, until local roads improve or new link to A40	Direct from A40 and A477
Distance from train station	750m	250m	1000m (once station is opened again)
Land ownership	Multiple private landowners	Public ownership	One private landowner
Flood risk	Low	Yes, on small areas that wouldn't be built on	No
Scope for future expansion	Limited scope	Some scope	Limited scope
Scope for renewable energy	Potential for offtake	Potential on-site	Potential for offtake
Potential additional costs	£19.9m	£28.2m	£20.7m

## Travel and transport



### Timely access in an emergency

With new hospital, Bronglais and Morriston (Swansea) → 93% of residents within one hour travel time by car to an emergency department

Some emergencies responded to by clinicians coming to the scene by road/Air Ambulance (Emergency Medical Retrieval and Transfer Service)

New hospital → more senior, specialist doctors ‘at the front door’ for quick access

### Non-emergency transport/travel

HDdHB will work to...

Make it as easy as possible to walk/cycle to new hospital

Improve public transport to hospital site (with partners)

Ensure enough parking is available for patients, staff, and visitors who need to travel by car

## Discussion...



### Your views on...

Key question: **WHY** do you feel that way?

1

- ... what makes each of the three sites a good or poor choice for a new hospital?
- ... the most important things to consider when making the decision e.g.,
- Meeting quality/safety guidelines
  - Travel times/access
    - For patients, carers/family members, staff
    - By ambulance, car, public transport
  - Ease of purchase (i.e., land ownership)
  - Site risks (i.e. flood risk)
  - Scope for expansion
  - Environmental impacts/opportunities
  - Costs
- ... any site preferences

2

- ... whether any particular groups of people might be positively or negatively affected by any of the three sites – and any mitigations for negative impacts

## Any final thoughts...



Thank you for coming,  
have a safe journey home

# Appendix IV: Social media reach

## Consultation Post Overview / Analytics – Facebook

Page	Date Posted	Post	Reach	Impressions
Safle Ysbyty Newydd Hywel Dda New Hospital Site	24/02/23	Introductory new hospital site animation (Welsh) <a href="https://www.facebook.com/watch/?v=864986684786860">https://www.facebook.com/watch/?v=864986684786860</a>	772	Reactions: 3 Comments: 0 Shares: 6
Safle Ysbyty Newydd Hywel Dda New Hospital Site	24/02/23	Introductory new hospital site animation (English) <a href="https://www.facebook.com/watch/?v=957442148767488">https://www.facebook.com/watch/?v=957442148767488</a>	6136	Reactions: 35 Comments: 4 Shares: 56
Hywel Dda Health Board	24/02/23	Introductory new hospital site animation <a href="#">(2) Facebook</a>	2063	Reactions: 1 Comments: 3 Shares: 16
Bwrdd Iechyd Hywel Dda	24/02/23	Introductory new hospital site animation <a href="#">(3) Facebook</a>	61	Reactions: 1 Comments: 0 Shares: 0
Staff Only Group	27/02/23	Llandovery staff drop-in <a href="#">(2) Hywel Dda Staff Only   Mae digwyddiadau staff yfory (28/02) yn Ysbyty Llanymddyfri ac Ysbyty Bronglais – dewch draw unrhyw bryd rhwng 10:30yb a 3yp i ddarganfod mwy a dw eu...   Facebook</a>	2304	Reactions: 0 Comments: 0 Shares: 0
Staff Only Group	28/02/23	Bronglais / Llandovery Hospital staff drop-in <a href="#">(2) Hywel Dda Staff Only   Rydym ym Mronglais a Llanymddyfri heddiw - i glywed barn ein staff am y safle gorau ar gyfer ein Ysbyty Gofal Brys a Gofal wedi'i Gynllunio newydd   Facebook</a>	1472	Reactions: 4 Comments: 0 Shares: 0
Staff Only Group	02/03/23	Amman Valley staff drop-in	1580	Reactions: 2 Comments: 1

		<a href="#">(2) Hywel Dda Staff Only   Come along to our staff drop in event today at Amman Valley Hospital   Facebook</a>		Shares: 0
Staff Only Group	03/03/23	Prince Philip / Cardigan ICC staff drop-in <a href="#">Hywel Dda Staff Only   Rydym yn Ysbyty'r Tywysog Philip a Chanolfan Gofal Integredig Aberteifi heddiw - i glywed barn ein staff am y safle gorau ar gyfer ein Hysbyty Gofal B...   Facebook</a>	929	Reactions: 0 Comments: 0 Shares: 0
Staff Only Group	03/03/23	Prince Philip staff drop-in <a href="#">Hywel Dda Staff Only   Come along to our staff drop in event today at Prince Philip Hospital, outside the canteen   Facebook</a>	3324	Reactions: 11 Comments: 2 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	09/03/23	Informal Drop-in Event – Cardigan (English) <a href="#">(2) Facebook</a>	1704	Reactions: 4 Comments: 0 Shares: 11
Safle Ysbyty Newydd Hywel Dda New Hospital Site	09/03/23	Informal Drop-in Event – Cardigan (Welsh) <a href="#">(2) Facebook</a>	524	Reactions: 0 Comments: 0 Shares: 1
Safle Ysbyty Newydd Hywel Dda New Hospital Site	10/03/23	Online Event – 13 March (Welsh) <a href="#">(2) Facebook</a>	443	Reactions: 0 Comments: 0 Shares: 4
Safle Ysbyty Newydd Hywel Dda New Hospital Site	10/03/23	Online Event – 13 March (English) <a href="#">(2) Facebook</a>	10775	Reactions: 9 Comments: 1 Shares: 25
Hywel Dda Health Board	10/03/23	Online Event – 13 March <a href="#">Facebook</a>	5322	Reactions: 3 Comments: 3 Shares: 9
Bwrdd Iechyd Hywel Dda	10/03/23	Online Event – 13 March <a href="#">(3) Facebook</a>	153	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	12/03/23	Informal Drop-in Event – Llanelli (Welsh) <a href="#">(2) Facebook</a>	607	Reactions: 4 Comments: 0 Shares: 7

Safle Ysbyty Newydd Hywel Dda New Hospital Site	12/03/23	Informal Drop-in Event – Llanelli (English) <a href="#">(2) Facebook</a>	5318	Reactions: 10 Comments: 3 Shares: 17
Hywel Dda Health Board	12/03/23	Informal Drop-in Event – Llanelli <a href="#">Facebook</a>	3975	Reactions: 0 Comments: 2 Shares: 2
Bwrdd Iechyd Hywel Dda	12/03/23	Informal Drop-in Event – Llanelli <a href="#">(3) Facebook</a>	237	Reactions: 1 Comments: 0 Shares: 1
Hywel Dda Health Board	13/03/23	Online Event Reminder – 13 March <a href="#">(1) Facebook</a>	6663	Reactions: 1 Comments: 4 Shares: 7
Bwrdd Iechyd Hywel Dda	13/03/23	Online Event Reminder – 13 March	206	Reactions: 0 Comments: 0 Shares: 1
Safle Ysbyty Newydd Hywel Dda New Hospital Site	14/03/23	Informal Drop-in Event – Haverfordwest (Welsh) <a href="#">(2) Facebook</a>	142	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	14/03/23	Informal Drop-in Event – Haverfordwest (English) <a href="#">(2) Facebook</a>	140	Reactions: 0 Comments: 3 Shares: 0
Hywel Dda Health Board	14/03/23	Llanelli event reminder <a href="#">(1) Facebook</a>	2757	Reactions: 2 Comments: 0 Shares: 5
Bwrdd Iechyd Hywel Dda	14/03/23	Llanelli event reminder <a href="#">(4) Facebook</a>	116	Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	16/03/23	Overall event reminder <a href="#">(1) Facebook</a>	3240	Reactions: 1 Comments: 3 Shares: 4
Bwrdd Iechyd Hywel Dda	16/03/23	Overall event reminder <a href="#">(4) Facebook</a>	104	Reactions: 0 Comments: 0

				Shares: 0
Hywel Dda Health Board	16/03/23	Haverfordwest event reminder <a href="#">(1) Facebook</a>	10099	Reactions: 14 Comments: 6 Shares: 1
Bwrdd Iechyd Hywel Dda	16/03/23	Haverfordwest event reminder <a href="#">(4) Facebook</a>	163	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	17/03/23	Informal Drop-in Event – Carmarthen (Welsh) <a href="#">(2) Facebook</a>	363	Reactions: 0 Comments: 0 Shares: 2
Safle Ysbyty Newydd Hywel Dda New Hospital Site	17/03/23	Informal Drop-in Event – Carmarthen (English) <a href="#">(2) Facebook</a>	2090	Reactions: 1 Comments: 2 Shares: 5
Safle Ysbyty Newydd Hywel Dda New Hospital Site	20/03/23	Online Event – 23 March (Welsh) <a href="#">(2) Facebook</a>	1930	Reactions: 5 Comments: 0 Shares: 11
Safle Ysbyty Newydd Hywel Dda New Hospital Site	20/03/23	Online Event – 23 March (English) <a href="#">(2) Facebook</a>	4588	Reactions: 4 Comments: 6 Shares: 11
Hywel Dda Health Board	20/03/23	Carmarthen event reminder <a href="#">(2) Facebook</a>	1693	Reactions: 0 Comments: 0 Shares: 1
Bwrdd Iechyd Hywel Dda	20/03/23	Carmarthen event reminder <a href="#">(5) Facebook</a>	232	Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	21/03/23	Carmarthen event reminder <a href="#">(2) Facebook</a>	34940	Reactions: 78 Comments: 160 Shares: 31
Bwrdd Iechyd Hywel Dda	21/03/23	Carmarthen event reminder <a href="#">Facebook</a>	248	Reactions: 0 Comments: 0 Shares: 1

Safle Ysbyty Newydd Hywel Dda New Hospital Site	22/03/23	Informal Drop-in Event – Saundersfoot (Welsh) <a href="#">(2) Facebook</a>	393	Reactions: 1 Comments: 0 Shares: 3
Safle Ysbyty Newydd Hywel Dda New Hospital Site	22/03/23	Informal Drop-in Event – Saundersfoot (English) <a href="#">(2) Facebook</a>	6940	Reactions: 13 Comments: 16 Shares: 24
Hywel Dda Health Board	22/03/23	Online Event Reminder – 23 March <a href="#">(2) Facebook</a>	3113	Reactions: 0 Comments: 0 Shares: 2
Bwrdd Iechyd Hywel Dda	22/03/23	Online Event Reminder – 23 March <a href="#">Facebook</a>	159	Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	22/03/23	Saundersfoot event reminder <a href="#">(2) Facebook</a>	4046	Reactions: 3 Comments: 3 Shares: 12
Bwrdd Iechyd Hywel Dda	22/03/23	Saundersfoot event reminder <a href="#">Facebook</a>	210	Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	23/03/23	Saundersfoot event reminder <a href="#">(2) Facebook</a>	1326	Reactions: 0 Comments: 0 Shares: 0
Bwrdd Iechyd Hywel Dda	23/03/23	Saundersfoot event reminder <a href="#">Facebook</a>	151	Reactions: 1 Comments: 0 Shares: 0
Hywel Dda Health Board	23/03/23	Online event reminder – 23 March <a href="#">(2) Facebook</a>	3010	Reactions: 0 Comments: 0 Shares: 2
Bwrdd Iechyd Hywel Dda	23/03/23	Online event reminder – 23 March <a href="#">(1) Facebook</a>	141	Reactions: 0 Comments: 0 Shares: 0



Safle Ysbyty Newydd Hywel Dda New Hospital Site	24/03/23	Informal Drop-in Event – Llandybie (Welsh) <a href="#">(2) Facebook</a>	326	Reactions: 0 Comments: 0 Shares: 1
Safle Ysbyty Newydd Hywel Dda New Hospital Site	24/03/23	Informal Drop-in Event – Llandybie (English) <a href="#">(2) Facebook</a>	2559	Reactions: 3 Comments: 1 Shares: 7
Hywel Dda Health Board	24/03/23	Saundersfoot event reminder <a href="#">(2) Facebook</a>	14038	Reactions: 16 Comments: 13 Shares: 5
Bwrdd Iechyd Hywel Dda	24/03/23	Saundersfoot event reminder <a href="#">(2) Facebook</a>	324	Reactions: 0 Comments: 0 Shares: 2
Hywel Dda Health Board	24/03/23	Llandybie event reminder <a href="#">(3) Facebook</a>	2284	Reactions: 0 Comments: 0 Shares: 3
Bwrdd Iechyd Hywel Dda	24/03/23	Llandybie event reminder <a href="#">(2) Facebook</a>	209	Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	27/03/23	Llandybie event reminder <a href="#">(3) Facebook</a>	1765	Reactions: 0 Comments: 0 Shares: 8
Bwrdd Iechyd Hywel Dda	27/03/23	Llandybie event reminder <a href="#">(2) Facebook</a>	154	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	28/03/23	Online event reminder – 31 March (Welsh) <a href="#">(3) Os na allwch... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	155	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	28/03/23	Online event reminder – 31 March (English) <a href="#">(3) If you are... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	7767	Reactions: 0 Comments: 0 Shares: 25

Safle Ysbyty Newydd Hywel Dda New Hospital Site	28/03/23	Llandybie event round up / event reminder (Welsh) <a href="#">(5) Mae'n digwyddiad... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	181	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	28/03/23	Llandybie event round up / event reminder (English) <a href="#">(5) We're just... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	169	Reactions: 0 Comments: 0 Shares: 0
<b>*Insights on shared posts unavailable from this date forward*</b>				
Hywel Dda Health Board	28/03/23	Online Event Reminder <a href="#">(12) If you are unable to attend any of our... - Hywel Dda Health Board   Facebook</a>		Reactions: 0 Comments: 0 Shares: 6
Bwrdd Iechyd Hywel Dda	28/03/23	Online Event Reminder <a href="#">(10) Os na allwch ddod i unrhyw un o'n... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 1 Comments: 0 Shares: 10
Safle Ysbyty Newydd Hywel Dda New Hospital Site	30/03/23	Online Event Reminder (English) <a href="#">(5) *Reminder* Our... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	138	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	30/03/23	Online Event Reminder (Welsh) <a href="#">(5) *Cofiwch* Mae... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	149	Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	30/03/23	Online Event Reminder <a href="#">(13) *Reminder* Our next online event is... - Hywel Dda Health Board   Facebook</a>	2411	Reactions: 0 Comments: 0 Shares: 4
Hywel Dda Health Boards	30/03/23	Online Event Reminder (Welsh) <a href="#">(20+) *Cofiwch* Mae ein digwyddiad ar-lein... - Hywel Dda Health Board   Facebook</a>	3255	Reactions: 2 Comments: 0 Shares: 2
Hywel Dda Health Board	31/03/23	Eventbrite Link <a href="#">(20+) Hywel Dda Health Board   Facebook</a>	2066	Reactions: 0 Comments: 0 Shares: 7
Bwrdd Iechyd Hywel Dda	31/03/23	Online Event Reminder <a href="#">(10) Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 0

Hywel Dda Health Board	11/04/23	Extra Dates Added PR <a href="#">(20+) Extra dates added to Hywel Dda... - Hywel Dda Health Board   Facebook</a>	3255	Reactions: 2 Comments: 0 Shares: 15
Bwrdd Iechyd Hywel Dda	11/04/23	Extra Dates Added PR <a href="#">(10) Dyddiadau ychwanegol ar gyfer... - Bwrdd Iechyd Hywel Dda   Facebook</a>	150	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	12/04/23	Whitland Event Reminder (Welsh) <a href="#">(5) Ar ddydd Llun... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	461	Reactions: 0 Comments: 0 Shares: 2
Safle Ysbyty Newydd Hywel Dda New Hospital Site	12/04/23	Whitland Event Reminder (English) <a href="#">(5) On Monday, 17... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	11241	Reactions: 0 Comments: 0 Shares: 20
Safle Ysbyty Newydd Hywel Dda New Hospital Site	14/04/23	Additional dates added (English) <a href="#">(5) We have a number... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	408	Reactions: 0 Comments: 1 Shares: 2
Safle Ysbyty Newydd Hywel Dda New Hospital Site	14/04/23	Additional dates added (Welsh) <a href="#">(5) Mae gennym nifer... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	237	Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	14/04/23	Whitland Event Reminder <a href="#">(20+) *Reminder* Our next event in Whitland... - Hywel Dda Health Board   Facebook</a>		Reactions: 4 Comments: 10 Shares: 6
Bwrdd Iechyd Hywel Dda	14/04/23	Whitland Event Reminder <a href="#">(10) *Atgoffa* Mae ein digwyddiad nesaf yn... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 1 Comments: 0 Shares: 1
Hywel Dda Health Board	14/04/23	Additional dates added reminder <a href="#">(20+) We have a number of upcoming events... - Hywel Dda Health Board   Facebook</a>	5311	Reactions: 3 Comments: 7 Shares: 14
Bwrdd Iechyd Hywel Dda	14/04/23	Additional dates added reminder <a href="#">(10) Mae gennym nifer o ddigwyddiadau wedi'u... - Bwrdd Iechyd Hywel Dda   Facebook</a>	177	Reactions: 0 Comments: 0 Shares: 1

Safle Ysbyty Newydd Hywel Dda New Hospital Site	17/04/23	Aberystwyth Event Reminder (English) <a href="#">(4) We will be in... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	8954	Reactions: 0 Comments: 2 Shares: 18
Safle Ysbyty Newydd Hywel Dda New Hospital Site	17/04/23	Aberystwyth Event Reminder (Welsh) <a href="#">(4) Byddwn yng... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	4523	Reactions: 1 Comments: 0 Shares: 14
Hywel Dda Health Board	17/04/23	Whitland Event Reminder <a href="#">(20+) *Reminder* Today the latest consultation... - Hywel Dda Health Board   Facebook</a>	6759	Reactions: 2 Comments: 0 Shares: 2
Bwrdd Iechyd Hywel Dda	17/04/23	Whitland Event Reminder <a href="#">(10) *Cofiwch* Heddiw mae'r digwyddiad... - Bwrdd Iechyd Hywel Dda   Facebook</a>	195	Reactions: 0 Comments: 0 Shares: 1
Safle Ysbyty Newydd Hywel Dda New Hospital Site	18/04/23	BSL Documents (English) <a href="#">(4) Did you know we... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	5038	Reactions: 0 Comments: 0 Shares: 6
Safle Ysbyty Newydd Hywel Dda New Hospital Site	18/04/23	BSL Documents (Welsh) <a href="#">(5) Oeddech chi'n... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	448	Reactions: 0 Comments: 0 Shares: 6
Hywel Dda Health Board	18/04/23	BSL Documents Reminder <a href="#">(20+) Did you know we have a range of documents... - Hywel Dda Health Board   Facebook</a>		Reactions: 2 Comments: 0 Shares: 5
Bwrdd Iechyd Hywel Dda	18/04/23	BSL Documents Reminder <a href="#">(10) Oeddech chi'n gwybod bod gennym ni... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	19/04/23	St Clears Event Reminder (English) <a href="#">(5) If you live in... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	10149	Reactions: 0 Comments: 0 Shares: 47
Safle Ysbyty Newydd Hywel Dda New Hospital Site	19/04/23	St Clears Event Reminder (Welsh) <a href="#">(6) Os ydych yn byw... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	1626	Reactions: 0 Comments: 0 Shares: 7
Hywel Dda Health Board	19/04/23	Aberystwyth Event Reminder <a href="#">(20+) *Reminder* Our next event in Aberystwyth... - Hywel Dda Health Board   Facebook</a>		Reactions: 5 Comments: 0

				Shares: 2
Bwrdd Iechyd Hywel Dda	19/04/23	Aberystwyth Event Reminder <a href="#">(10) *Atgoffa* Mae ein digwyddiad nesaf yn... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	19/04/23	St Clears Event Reminder <a href="#">(20+) *Reminder* Our next event in St Clears... - Hywel Dda Health Board   Facebook</a>		Reactions: 6 Comments: 2 Shares: 35
Bwrdd Iechyd Hywel Dda	19/04/23	St Clears Event Reminder <a href="#">(10) *Atgoffa* Mae ein digwyddiad nesaf yn... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 4
Safle Ysbyty Newydd Hywel Dda New Hospital Site	20/04/23	Goodwick Event Reminder (Welsh) <a href="#">(6) *Ychwanegu... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	483	Reactions: 0 Comments: 0 Shares: 3
Safle Ysbyty Newydd Hywel Dda New Hospital Site	20/04/23	Goodwick Event Reminder (English) <a href="#">(6) *Additional... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	5790	Reactions: 1 Comments: 0 Shares: 10
Hywel Dda Health Board	20/04/23	Goodwick Event Reminder <a href="#">(20+) *Reminder* Our next event in Goodwick is... - Hywel Dda Health Board   Facebook</a>		Reactions: 0 Comments: 0 Shares: 3
Bwrdd Iechyd Hywel Dda	20/04/23	Goodwick Event Reminder <a href="#">(10) *Atgoffa* Mae ein digwyddiad nesaf yn... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: Comments: Shares:
Hywel Dda Health Board	21/04/23	Aberystwyth Event Reminder <a href="#">(20+) *Reminder* Our next event in Aberystwyth... - Hywel Dda Health Board   Facebook</a>		Reactions: 2 Comments: 1 Shares: 0
Bwrdd Iechyd Hywel Dda	21/04/23	Aberystwyth Event Reminder <a href="#">(10) *Atgoffa* Mae ein digwyddiad nesaf yn... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 1
Hywel Dda Health Board	21/04/23	Aberystwyth Event Reminder <a href="#">(20+) *Reminder* Today the latest consultation... - Hywel Dda Health Board   Facebook</a>	7017	Reactions: 3 Comments: 0 Shares: 0

Bwrdd Iechyd Hywel Dda	21/04/23	Aberystwyth Event Reminder <a href="#">(10) *Cofiwch* Heddiw mae'r digwyddiad... - Bwrdd Iechyd Hywel Dda   Facebook</a>	160	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	24/04/23	Alternative languages available (English) <a href="#">(6) We want to hear... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	3259	Reactions: 0 Comments: 7 Shares: 2
Safle Ysbyty Newydd Hywel Dda New Hospital Site	24/04/23	Alternative languages available (Welsh) <a href="#">(20+) Rydym am glywed... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	389	Reactions: 0 Comments: 0 Shares: 1
Hywel Dda Health Board	24/04/23	St Clears Event Reminder <a href="#">(20+) *Reminder* Our next event in St Clears... - Hywel Dda Health Board   Facebook</a>		Reactions: 2 Comments: 3 Shares: 2
Bwrdd Iechyd Hywel Dda	24/04/23	St Clears Event Reminder <a href="#">(10) *Atgoffa* Mae ein digwyddiad nesaf yn... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	24/04/23	St Clears Event Reminder <a href="#">(20+) *Reminder* Today the latest consultation... - Hywel Dda Health Board   Facebook</a>	19972	Reactions: 19 Comments: 47 Shares: 6
Bwrdd Iechyd Hywel Dda	24/04/23	St Clears Event Reminder <a href="#">(10) *Cofiwch* Heddiw mae'r digwyddiad... - Bwrdd Iechyd Hywel Dda   Facebook</a>	122	Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	25/04/23	Alternative Language Documents <a href="#">(20+) We want to hear your views about our... - Hywel Dda Health Board   Facebook</a>		Reactions: 0 Comments: 3 Shares: 1
Bwrdd Iechyd Hywel Dda	25/04/23	Alternative Language Documents <a href="#">(10) Rydym am glywed eich barn am ein Hysbyty... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	26/04/23	Milford Haven Event Reminder (English) <a href="#">(6) *Additional... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	9270	Reactions: 0 Comments: 1 Shares: 28

Safle Ysbyty Newydd Hywel Dda New Hospital Site	26/04/23	Milford Haven Event Reminder (Welsh) <a href="#">(6) *Ychwanegu... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	418	Reactions: 0 Comments: 0 Shares: 3
Hywel Dda Health Board	26/04/23	Milford Haven Event Reminder <a href="#">(20+) *Reminder* Our next event in Milford... - Hywel Dda Health Board   Facebook</a>		Reactions: 6 Comments: 2 Shares: 9
Bwrdd Iechyd Hywel Dda	26/04/23	Milford Haven Event Reminder <a href="#">(10) *Atgoffa* Mae ein digwyddiad nesaf yn... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	27/04/23	Milford Haven Event Reminder <a href="#">(20+) Hywel Dda Health Board   Facebook</a>		Reactions: 2 Comments: 1 Shares: 2
Safle Ysbyty Newydd Hywel Dda New Hospital Site	28/04/23	Questionnaire reminder (Welsh) <a href="#">(6) Os hoffech chi... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	173	Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	28/04/23	Goodwick Event Reminder <a href="#">(20+) *Reminder* Our next event in Goodwick is... - Hywel Dda Health Board   Facebook</a>		Reactions: 1 Comments: 1 Shares: 2
Bwrdd Iechyd Hywel Dda	28/04/23	Goodwick Event Reminder <a href="#">(10) *Atgoffa* Mae ein digwyddiad nesaf yn... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 1
Hywel Dda Health Board	28/04/23	Goodwick Event Reminder <a href="#">(20+) *Reminder* Today the latest consultation... - Hywel Dda Health Board   Facebook</a>	13835	Reactions: 12 Comments: 30 Shares: 1
Bwrdd Iechyd Hywel Dda	28/04/23	Goodwick Event Reminder <a href="#">(10) *Cofiwch* Heddiw mae'r digwyddiad... - Bwrdd Iechyd Hywel Dda   Facebook</a>	180	Reactions: 1 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	01/05/23	Llandovery Event Reminder (Welsh) <a href="#">(6) *Ychwanegu... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	593	Reactions: 1 Comments: 0 Shares: 4

Safle Ysbyty Newydd Hywel Dda New Hospital Site	01/05/23	Llandovery Event Reminder (English) <a href="#">(6) *Additional... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	5797	Reactions: 0 Comments: 0 Shares: 9
Hywel Dda Health Board	02/05/23	Llandovery Event Reminder <a href="#">(20+) *Reminder* Our next event in Llandovery... - Hywel Dda Health Board   Facebook</a>		Reactions: 0 Comments: 0 Shares: 1
Bwrdd Iechyd Hywel Dda	02/05/23	Llandovery Event Reminder <a href="#">(10) *Atgoffa* Mae ein digwyddiad nesaf yn... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	03/05/23	Lampeter Event Reminder (English) <a href="#">(6) *Additional... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	4891	Reactions: 1 Comments: 0 Shares: 14
Safle Ysbyty Newydd Hywel Dda New Hospital Site	03/05/23	Lampeter Event Reminder (Welsh) <a href="#">(6) *Ychwanegu... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	667	Reactions: 0 Comments: 0 Shares: 3
Hywel Dda Health Board	03/05/23	Milford Haven Event Reminder <a href="#">(20+) Our next event in Milford Haven is coming... - Hywel Dda Health Board   Facebook</a>		Reactions: 0 Comments: 0 Shares: 1
Bwrdd Iechyd Hywel Dda	03/05/23	Milford Haven Event Reminder <a href="#">(10) Mae ein digwyddiad nesaf yn... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 1
Safle Ysbyty Newydd Hywel Dda New Hospital Site	04/05/23	Online Event Reminder (Welsh) <a href="#">(6) Ar 16 Mai,... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	581	Reactions: 0 Comments: 0 Shares: 8
Safle Ysbyty Newydd Hywel Dda New Hospital Site	04/05/23	Online Event Reminder (English) <a href="#">(6) On May 16, we... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	12940	Reactions: 2 Comments: 0 Shares: 35
Hywel Dda Health Board	04/05/23	Milford Haven Event Reminder <a href="#">(20+) *Reminder* Today the latest consultation... - Hywel Dda Health Board   Facebook</a>	4203	Reactions: 1 Comments: 0 Shares: 3
Bwrdd Iechyd Hywel Dda	04/05/23	Milford Haven Event Reminder <a href="#">(10) *Cofiwch* Heddiw mae'r digwyddiad... - Bwrdd Iechyd Hywel Dda   Facebook</a>	98	Reactions: 1 Comments: 0



				Shares: 0
Hywel Dda Health Board	09/05/23	Llandovery Event Reminder <a href="#">(20+) *Reminder* Our next event in Llandovery... - Hywel Dda Health Board   Facebook</a>		Reactions: 0 Comments: 1 Shares: 1
Bwrdd Iechyd Hywel Dda	09/05/23	Llandovery Event Reminder <a href="#">(10) *Atgoffa* Mae ein digwyddiad nesaf yn... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 1 Comments: 0 Shares: 1
Hywel Dda Health Board	10/05/23	Lampeter Event Reminder <a href="#">(20+) *Reminder* Our next event in Lampeter is... - Hywel Dda Health Board   Facebook</a>		Reactions: 0 Comments: 0 Shares: 2
Bwrdd Iechyd Hywel Dda	10/05/23	Lampeter Event Reminder <a href="#">(10) *Atgoffa* Mae ein digwyddiad nesaf yn... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	11/05/23	Lampeter Event Reminder <a href="#">(20+) *Reminder* Today the latest consultation... - Hywel Dda Health Board   Facebook</a>	4075	Reactions: 2 Comments: 3 Shares: 1
Bwrdd Iechyd Hywel Dda	11/05/23	Lampeter Event Reminder <a href="#">(10) *Cofiwch* Heddiw mae'r digwyddiad... - Bwrdd Iechyd Hywel Dda   Facebook</a>	1578	Reactions: 2 Comments: 0 Shares: 4
Hywel Dda Health Board	12/05/23	Online Event Reminder <a href="#">(20+) On May 16, we will be hosting an online... - Hywel Dda Health Board   Facebook</a>		Reactions: 7 Comments: 12 Shares: 5
Bwrdd Iechyd Hywel Dda	12/05/23	Online Event Reminder <a href="#">(10) Ar 16 Mai, byddwn yn cynnal sesiwn Zoom... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 1
Hywel Dda Health Board	15/05/23	Online Event Reminder <a href="#">(20+) *REMINDER* On May 16, we will be... - Hywel Dda Health Board   Facebook</a>		Reactions: 1 Comments: 1 Shares: 14
Bwrdd Iechyd Hywel Dda	15/05/23	Online Event Reminder <a href="#">(10) *COFIWCH* Ar 16 Mai, byddwn yn cynnal... - Bwrdd Iechyd Hywel Dda   Facebook</a>		Reactions: 0 Comments: 0 Shares: 1

Safle Ysbyty Newydd Hywel Dda New Hospital Site	16/05/23	4 Days Left / Questionnaire (Welsh) <a href="#">*4 Diwrnod i... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	87	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	16/05/23	4 Days Left / Questionnaire (English) <a href="#">*4 Days... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	218	Reactions: 0 Comments: 0 Shares: 1
Hywel Dda Health Board	16/05/23	4 Days Left / Questionnaire Reminder <a href="#">(20+) *4 Days Remaining* There are only a few... - Hywel Dda Health Board   Facebook</a>	9560	Reactions: 6 Comments: 21 Shares: 24
Bwrdd Iechyd Hywel Dda	16/05/23	4 Days Left / Questionnaire Reminder <a href="#">(10) *4 Diwrnod i fynd* Dim ond ychydig... - Bwrdd Iechyd Hywel Dda   Facebook</a>	118	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	17/05/23	3 Days Left / Questionnaire (Welsh) <a href="#">*3 Diwrnod i... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	100	Reactions: 0 Comments: 0 Shares: 1
Safle Ysbyty Newydd Hywel Dda New Hospital Site	17/05/23	3 Days Left / Questionnaire (English) <a href="#">*3 Days... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	76	Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	17/05/23	3 Days Left / Questionnaire Reminder <a href="#">(20+) *3 Days Remaining* There are only a few... - Hywel Dda Health Board   Facebook</a>	1855	Reactions: 2 Comments: 5 Shares: 3
Bwrdd Iechyd Hywel Dda	17/05/23	3 Days Left / Questionnaire Reminder <a href="#">(10) *3 Diwrnod i fynd* Dim ond ychydig... - Bwrdd Iechyd Hywel Dda   Facebook</a>	79	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	18/05/23	2 Days Left / Questionnaire (Welsh) <a href="#">(20+) *2 Ddiwrnod i... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	77	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	18/05/23	2 Days Left / Questionnaire (English) <a href="#">(20+) 2 Days Remaining... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	61	Reactions: 0 Comments: 1 Shares: 0
Hywel Dda Health Board	18/05/23	2 Days Left / Questionnaire Reminder <a href="#">(20+) *2 Days Remaining* There are only a few... - Hywel Dda Health Board   Facebook</a>	3345	Reactions: 2 Comments: 1

				Shares: 3
Bwrdd Iechyd Hywel Dda	18/05/23	2 Days Left / Questionnaire Reminder <a href="#">(10) *2 Ddiwrnod i fynd* Dim ond ychydig... - Bwrdd Iechyd Hywel Dda   Facebook</a>	87	Reactions: 1 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	19/05/23	Last day questionnaire reminder (Welsh) <a href="#">(3) Heddiw yw'r... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	58	Reactions: 0 Comments: 0 Shares: 0
Safle Ysbyty Newydd Hywel Dda New Hospital Site	19/05/23	Last day questionnaire reminder (English) <a href="#">(3) Today is the... - Safle Ysbyty Newydd Hywel Dda New Hospital Site   Facebook</a>	57	Reactions: 0 Comments: 0 Shares: 0
Hywel Dda Health Board	19/05/23	Last day questionnaire reminder <a href="#">(20+) Today is the last day for you to have... - Hywel Dda Health Board   Facebook</a>	1444	Reactions: 0 Comments: 2 Shares: 2
Bwrdd Iechyd Hywel Dda	19/05/23	Last day questionnaire reminder <a href="#">(10) Heddiw yw'r diwrnod olaf i chi gael dweud... - Bwrdd Iechyd Hywel Dda   Facebook</a>	94	Reactions: 0 Comments: 0 Shares: 1
Hywel Dda Health Board	19/05/23	Questionnaire ORS Error <a href="#">(20+) *New Hospital Site Consultation*... - Hywel Dda Health Board   Facebook</a>	927	Reactions: 1 Comments: 0 Shares: 8
Bwrdd Iechyd Hywel Dda	19/05/23	Questionnaire ORS Error <a href="#">(10) *Ymgynghoriad Safle Ysbyty Newydd*... - Bwrdd Iechyd Hywel Dda   Facebook</a>	38	Reactions: 0 Comments: 0 Shares:

## Twitter – @HywelDdaUHB

Date Posted	Post	Reach	Impressions
23/02/23	Introduction to New Hospital Site Consultation <a href="#">(18) Hywel Dda UHB on Twitter: "Between 23 February and 19 May this year, we will be consulting members of our communities about three potential sites for a new planned and urgent care hospital as part of our wider strategy to improve health and care in the region." / Twitter</a>	4119	Like: 12 Retweet: 14 Reply: 2
14/03/23	Llanelli event reminder <a href="#">(19) Hywel Dda UHB on Twitter: "Today our team is at the Selwyn Samuel Centre in Llanelli. We want to hear your views about the best location for our new Urgent and Planned Care Hospital. Come and see us! You can find out more online here: https://t.co/q7V7bOiye9 #consultations #nhs #yourview #Llanelli https://t.co/kZ0slKiqQN" / Twitter</a>	539	Like: 2 Retweet: 0 Reply: 0
21/03/23	Carmarthen event reminder <a href="#">(19) Hywel Dda UHB on Twitter: "Today our team is at the Ivy Bush, Carmarthen. We want to hear your views about the best location for our new Urgent and Planned Care Hospital. Come and see us! You can find out more online here: https://t.co/q7V7bOiye9 https://t.co/Gjg3XKAwCO" / Twitter</a>	1292	Like: 2 Retweet: 2 Reply: 2
28/03/23	Online event reminder <a href="#">(19) Hywel Dda UHB on Twitter: "If you are unable to attend any of our in-person events for our New Hospital Site consultation, we will be holding an online Zoom session this Friday (31/03). Please register to this event here: https://t.co/TskeBQCadY https://t.co/rcdz0lxn5j" / Twitter</a>	675	Like: 0 Retweet: 1 Reply: 0
11/04/23	Extra dates added PR <a href="#">(19) Hywel Dda UHB on Twitter: "Extra dates added to Hywel Dda consultation on new planned and urgent care hospital. Read more here: https://t.co/6CNyZukTLI https://t.co/XgZa0z8jLf" / Twitter</a>	1753	Like: 2 Retweet: 8 Reply: 0
17/04/23	Whitland event reminder <a href="#">(19) Hywel Dda UHB on Twitter: "*Reminder* Today the latest consultation event for the New Hospital Site is in Whitland. Join us in Whitland Sports and Social Club, we're here until 7pm tonight. #HywelDdaHospitalSite https://t.co/0eoTdnfj3m" / Twitter</a>	762	Like: 2 Retweet: 2 Reply: 0
18/04/23	BSL documents <a href="#">(19) Hywel Dda UHB on Twitter: "If you would like to see a summary of our consultation around the proposed three sites in BSL, you can watch below: https://t.co/UlFbQ1d3v5 We would like everyone to provide their feedback, and our questionnaire is also available in BSL here: https://t.co/C7pNelhdIS" / Twitter</a>	801	Like: 2 Retweet: 4 Reply: 1
19/04/23	St Clears Event Reminder	882	Like: 0

	<a href="#">(19) Hywel Dda UHB on Twitter: "If you live in the St Clears area, come along next Monday, 24 April to St Clears Leisure Centre and share your views on the three potential sites for our new Urgent and Planned Care Hospital. More information about this consultation can be found here: <a href="https://t.co/KhywZfgUDF">https://t.co/KhywZfgUDF</a> <a href="https://t.co/babkLNOIUc">https://t.co/babkLNOIUc</a>" / Twitter</a>		Retweet: 6 Reply: 0
20/04/23	Goodwick Event Reminder <a href="#">(19) Hywel Dda UHB on Twitter: "We will be at the Phoenix Community Centre, Goodwick on April 28 (2-7pm) to hear your views, and get your feedback on the three potential sites for our new Urgent and Planned Care Hospital. More information about this consultation can be found here: <a href="https://t.co/q7V7bOj63H">https://t.co/q7V7bOj63H</a> <a href="https://t.co/LITVXGQGHg">https://t.co/LITVXGQGHg</a>" / Twitter</a>	793	Like: 2 Retweet: 5 Reply: 0
21/04/23	Aberystwyth Event Reminder <a href="#">(19) Hywel Dda UHB on Twitter: "*Reminder* Today the latest consultation event for Hywel Dda New Hospital Site is in Aberystwyth. Join us in the Morlan Centre, we're here until 7pm tonight. #HywelDdaHospitalSite <a href="https://t.co/bpfjtgIsIO">https://t.co/bpfjtgIsIO</a>" / Twitter</a>	691	Like: 0 Retweet: 1 Reply: 0
24/04/23	Alternative language documents <a href="#">(19) Hywel Dda UHB on Twitter: "We want to hear your views about our proposed Urgent and Planned Care Hospital. If you or someone you know would benefit from reading more information about the potential sites in Arabic, Russian, Polish or Ukrainian, please click here: <a href="https://t.co/hPtMzmK4fy">https://t.co/hPtMzmK4fy</a> <a href="https://t.co/eLRDEBgRmu">https://t.co/eLRDEBgRmu</a>" / Twitter</a>	867	Like: 3 Retweet: 3 Reply: 1
24/04/23	St Clears Event Reminder <a href="#">(19) Hywel Dda UHB on Twitter: "*Reminder* Today the latest consultation event for Hywel Dda New Hospital Site is in St Clears. Join us in the St Clears Leisure Centre, we're here until 7pm tonight. #HywelDdaHospitalSite <a href="https://t.co/mkIKvapLYP">https://t.co/mkIKvapLYP</a>" / Twitter</a>	668	Like: 2 Retweet: 4 Reply: 0
26/04/23	Milford Haven Event Reminder <a href="#">(19) Hywel Dda UHB on Twitter: "On Thursday, 4 May (2-7pm), our team will be at the Pill Social Centre in Milford Haven. Please come along if you are able and share your views and provide feedback on the three potential sites for our new Urgent and Planned Care Hospital. <a href="https://t.co/q7V7bOj63H">https://t.co/q7V7bOj63H</a> <a href="https://t.co/ddpt5PeCaZ">https://t.co/ddpt5PeCaZ</a>" / Twitter</a>	528	Like: 1 Retweet: 2 Reply: 0
28/04/23	Goodwick event reminder <a href="#">(19) Hywel Dda UHB on Twitter: "*Reminder* Today the latest consultation event for Hywel Dda New Hospital Site is in Goodwick. Join us in Phoenix Community Centre, we're here until 7pm tonight. #HywelDdaHospitalSite <a href="https://t.co/ydu4c8sBWD">https://t.co/ydu4c8sBWD</a>" / Twitter</a>	510	Like: 1 Retweet: 1 Reply: 0
28/04/23	Questionnaire reminder <a href="#">(19) Hywel Dda UHB on Twitter: "If you would like to share your feedback and opinions on the proposed sites for the new Urgent and Planned Care Hospital, please remember to fill in our questionnaire. You can fill it out electronically through this link: <a href="https://t.co/tDG6d90ZB8">https://t.co/tDG6d90ZB8</a> <a href="https://t.co/zA3h5Vi1kv">https://t.co/zA3h5Vi1kv</a>" / Twitter</a>	1418	Like: 1 Retweet: 2 Reply: 0
01/05/23	Llandovery Event Reminder	1517	Like: 2

	(21) Hywel Dda UHB on Twitter: "If you live in the Llandovery area, come along to our next event at The Castle Hotel on May 9 (2-7pm). We want to hear your views on the potential sites for our future Urgent and Planned Care Hospital More info about this consultation can be found here: <a href="https://t.co/KhywZfgUDF">https://t.co/KhywZfgUDF</a> <a href="https://t.co/IYVX8eNPbe">https://t.co/IYVX8eNPbe</a> " / Twitter		Retweet: 4 Reply: 2
03/05/23	Lampeter Event Reminder (21) Hywel Dda UHB on Twitter: "Come along to our drop-in event on Thursday, 11 May at Victoria Hall, Lampeter (2-7pm). We would like to get your feedback on the three proposed sites for our new Urgent & Planned Care hospital. To find out more about this consultation, visit our website: <a href="https://t.co/KhywZfgmO7">https://t.co/KhywZfgmO7</a> <a href="https://t.co/105HAI0AiD">https://t.co/105HAI0AiD</a> " / Twitter	742	Like: 1 Retweet: 4 Reply: 0
04/05/23	Online Event Reminder (21) Hywel Dda UHB on Twitter: "On May 16, we will be hosting an online Zoom session to hear your views on the three potential sites for our new Urgent and Planned Care Hospital. Register for the event here: <a href="https://t.co/zm3XRJIHDn">https://t.co/zm3XRJIHDn</a> <a href="https://t.co/sTbxedYHDQ">https://t.co/sTbxedYHDQ</a> " / Twitter	876	Like: 1 Retweet: 3 Reply: 0
04/05/23	Milford Haven Event Reminder (21) Hywel Dda UHB on Twitter: "*Reminder* Today the latest consultation event for Hywel Dda New Hospital Site is in Milford Haven. Join us in Pill Social Centre, we're here until 7pm tonight. #HywelDdaHospitalSite <a href="https://t.co/ZxKewdgqfm">https://t.co/ZxKewdgqfm</a> " / Twitter	504	Like: 2 Retweet: 1 Reply: 0
11/05/23	Lampeter event reminder (21) Hywel Dda UHB on Twitter: "*Reminder* Today the latest consultation event for Hywel Dda New Hospital Site is in Lampeter. Join us in Victoria Hall, we're here until 7pm tonight. #HywelDdaHospitalSite <a href="https://t.co/5x4tZrvO7N">https://t.co/5x4tZrvO7N</a> " / Twitter	879	Like: 2 Retweet: 3 Reply: 0
16/05/23	Questionnaire reminder (21) Hywel Dda UHB on Twitter: "*4 Days Remaining* There are only a few days left to have your say on the three potential sites for our new Urgent and Planned Care Hospital. Find out all the details here: <a href="https://t.co/WXaGHKxJ5I">https://t.co/WXaGHKxJ5I</a> You can complete the questionnaire here: <a href="https://t.co/HmQc36ql2e">https://t.co/HmQc36ql2e</a> <a href="https://t.co/tPSRIZFXOI">https://t.co/tPSRIZFXOI</a> " / Twitter	1028	Like: 0 Retweet: 2 Reply: 0
17/05/23	Questionnaire reminder (21) Hywel Dda UHB on Twitter: "*3 Days Remaining* There are only a few days left to have your say on the three potential sites for our new Urgent and Planned Care Hospital. Find out all the details here: <a href="https://t.co/WXaGHKyGVg">https://t.co/WXaGHKyGVg</a> You can complete the questionnaire here: <a href="https://t.co/HmQc36qSRM">https://t.co/HmQc36qSRM</a> <a href="https://t.co/boXuic5LoX">https://t.co/boXuic5LoX</a> " / Twitter	852	Like: 2 Retweet: 2 Reply: 0
18/05/23	Questionnaire reminder (21) Hywel Dda UHB on Twitter: "*2 Days Remaining* There are only a few days left to have your say on the three potential sites for our new Urgent and Planned Care Hospital. Find out all the details here: <a href="https://t.co/WXaGHKyGVg">https://t.co/WXaGHKyGVg</a> You can complete the questionnaire here: <a href="https://t.co/HmQc36qSRM">https://t.co/HmQc36qSRM</a> <a href="https://t.co/86YUcR9Oam">https://t.co/86YUcR9Oam</a> " / Twitter	529	Like: 0 Retweet: 0 Reply: 0
19/05/23	Last day / questionnaire reminder	1612	Like: 5 Retweet: 6

	<a href="#">(21) Hywel Dda UHB on Twitter: "Today is the last day for you to have your say on the three potential sites for our new Urgent and Planned Care Hospital. Find out all the details on the proposed three sites here: <a href="https://t.co/WXaGHKxJ5I">https://t.co/WXaGHKxJ5I</a> You can complete the questionnaire here: <a href="https://t.co/HmQc36ql2e">https://t.co/HmQc36ql2e</a> <a href="https://t.co/2jwrn537R6">https://t.co/2jwrn537R6</a>" / Twitter</a>		Reply: 2
19/05/23	Questionnaire ORS glitch <a href="#">(21) Hywel Dda UHB on Twitter: "*New Hospital Site Consultation* Apologies for any errors people may have had trying to access our consultation questionnaire this morning. We can confirm it is back online and will be closing tonight at 11:59pm. You can complete the questionnaire here: <a href="https://t.co/HmQc36ql2e">https://t.co/HmQc36ql2e</a>" / Twitter</a>	385	Like: 0 Retweet: 0 Reply: 0

## Twitter – @HywelDdaUHB

Date Posted	Post	Reach	Impressions
23/03/23	Introduction to New Hospital Site Consultation <a href="#">BIP Hywel Dda on Twitter: "Rhwyng 23 Chwefror a 19 Mai eleni, byddwn yn ymgynghori ag aelodau o'n cymunedau ynghylch tri safle posibl ar gyfer ysbyty gofal brys a gofal wedi'i gynllunio newydd fel rhan o'n strategaeth ehangach i wella iechyd a gofal yn y rhanbarth." / Twitter</a>	126	Like: 0 Retweet: 0 Reply: 0 Bookmark: 1
14/03/23	Llanelli event reminder <a href="#">BIP Hywel Dda on Twitter: "Heddiw mae ein tîm yng Nghanolfan Selwyn Samuel yn Llanelli. Rydym am glywed eich barn am y lleoliad gorau ar gyfer ein Hysbyty Gofal Brys a Gofal wedi'i Gynllunio newydd. Dewch i'n gweld! Gallwch ddarganfod mwy ar-lein yma: <a href="https://t.co/og15fA0V19">https://t.co/og15fA0V19</a> #ymgynghoriad #GIG #Llanelli <a href="https://t.co/onTV5948Pn">https://t.co/onTV5948Pn</a>" / Twitter</a>	38	Like: 0 Retweet: 0 Reply: 0
21/03/23	Carmarthen event reminder <a href="#">BIP Hywel Dda on Twitter: "Heddiw mae ein tîm yng Ngwesty Llwyn Iorwg Caerfyrddin. Rydym am glywed eich barn am y lleoliad gorau ar gyfer ein Hysbyty Gofal Brys a Gofal wedi'i Gynllunio newydd. Dewch i'n gweld! Gallwch ddarganfod mwy ar-lein yma: <a href="https://t.co/YLe9Xl7z54">https://t.co/YLe9Xl7z54</a> <a href="https://t.co/zPiugW3PgV">https://t.co/zPiugW3PgV</a>" / Twitter</a>	42	Like: 0 Retweet: 0 Reply: 0
28/03/23	Online event reminder <a href="#">BIP Hywel Dda on Twitter: "Os na allwch ddod i unrhyw un o'n digwyddiadau mewn person, byddwn yn cynnal sesiwn Zoom ar-lein ddydd Gwener yma (31/03). Gallwch gofrestru ar gyfer y digwyddiad hwn yma: <a href="https://t.co/K85NcrZdVZ">https://t.co/K85NcrZdVZ</a> <a href="https://t.co/gZNMCTdg1">https://t.co/gZNMCTdg1</a>" / Twitter</a>	33	Like: 0 Retweet: 0 Reply: 0
11/04/23	Additional dates added PR <a href="#">BIP Hywel Dda on Twitter: "Dyddiadau ychwanegol ar gyfer ymgynghoriad Hywel Dda ar ysbyty gofal brys a gofal wedi'i gynllunio newydd. Darllen mwy yma: <a href="https://t.co/wB8rmUoL8M">https://t.co/wB8rmUoL8M</a> <a href="https://t.co/j0ISrrHndn">https://t.co/j0ISrrHndn</a>" / Twitter</a>	92	Like: 0 Retweet: 2 Reply: 0

17/04/23	Whitland Event reminder <a href="#">BIP Hywel Dda on Twitter: "*Cofiwch* Heddiw mae'r digwyddiad ymgynghoriad diweddaraf am y Safle Ysbyty Newydd yn Hendy-gwyn ar daf. Ymunwch â ni yn Nghlwb Chwaraeon a Chymdeithasol Hendy-gwyn ar Daf. Rydym ni yma tan 7yh. #SafleYsbytyHywelDda https://t.co/hPGv7FKGUh" / Twitter</a>	38	Like: 1 Retweet: 0 Reply: 0
18/04/23	BSL Documents <a href="#">BIP Hywel Dda on Twitter: "Os hoffech weld crynodeb o'n hymgyngoriad ynghylch y tri safle arfaethedig yn BSL, gallwch wyllo isod: https://t.co/PtRGKqeJG Hoffem i bawb roi eu hadborth, ac mae ein holiadur hefyd ar gael yn BSL yma: https://t.co/nKlcYWjJf" / Twitter</a>	32	Like: 0 Retweet: 0 Reply: 0
19/04/23	St Clears Event Reminder <a href="#">BIP Hywel Dda on Twitter: "Os ydych yn byw yn ardal Sanclêr, dewch draw ddydd Llun nesaf, 24 Ebrill i Ganolfan Hamdden Sanclêr a rhannu eich barn ar y tri safle posibl ar gyfer ein Hysbyty Gofal Brys a Gofal wedi'i Gynllunio newydd Mae mwy o wybodaeth ar yr ymgynghoriad ar gael yma https://t.co/eQbs4boqzY https://t.co/fSDJ3sbETd" / Twitter</a>	74	Like: 0 Retweet: 2 Reply: 0
20/04/23	Goodwick event reminder <a href="#">BIP Hywel Dda on Twitter: "Byddwn yng Nghanolfan Gymunedol Phoenix, Wdig ar Ebrill 28 (2-7pm) i glywed eich barn, a chael eich adborth ar y tri safle posibl ar gyfer ein Hysbyty Gofal Brys a Gofal wedi'i Gynllunio newydd. Mae rhagor o wybodaeth am yr ymgynghoriad hwn ar gael yma https://t.co/YLe9XI86UC https://t.co/cpCl15Z03I" / Twitter</a>	29	Like: 0 Retweet: 0 Reply: 0
21/04/23	Aberystwyth event reminder <a href="#">BIP Hywel Dda on Twitter: "*Cofiwch* Heddiw mae'r digwyddiad ymgynghoriad diweddaraf am y Safle Ysbyty Newydd Hywel Dda yn Aberystwyth. Ymunwch â ni yn Canolfan Morlan. Rydym ni yma tan 7yh. #SafleYsbytyHywelDda https://t.co/6kwED6lWtS" / Twitter</a>	41	Like: 0 Retweet: 0 Reply: 0
24/04/23	Alternative language documents <a href="#">BIP Hywel Dda on Twitter: "Rydym am glywed eich barn am ein Hysbyty Gofal Brys a Gofal wedi'i Gynllunio arfaethedig. Os byddech chi neu rywun rydych chi'n ei adnabod yn elwa o ddarllen mwy o wybodaeth am y safleoedd posibl mewn Arabeg, Rwsieg, Pwyleg neu Wcreineg, cliciwch yma: https://t.co/6FUgrTL1DI https://t.co/kb8fMdeTs2" / Twitter</a>	27	Like: 0 Retweet: 0 Reply: 0
24/04/23	St Clears Event Reminder <a href="#">BIP Hywel Dda on Twitter: "*Cofiwch* Heddiw mae'r digwyddiad ymgynghoriad diweddaraf am y Safle Ysbyty Newydd Hywel Dda yn Sanclêr. Ymunwch â ni yn Canolfan Hamdden Sanclêr. Rydym ni yma tan 7yh. #SafleYsbytyHywelDda https://t.co/JVmGci3zKv" / Twitter</a>	33	Like: 0 Retweet: 0 Reply: 0
26/04/23	Milford Haven event reminder <a href="#">BIP Hywel Dda on Twitter: "Ddydd Iau, 4 Mai (2-7pm), bydd ein tîm yng Nghanolfan Gymdeithasol Pill yn Aberdaugleddau. Dewch draw i rannu eich barn a rhoi adborth ar y tri safle posibl ar gyfer ein Hysbyty Gofal Brys a Gofal wedi'i Gynllunio newydd. https://t.co/fvpUFq6qPM" / Twitter</a>	59	Like: 0 Retweet: 0 Reply: 0



28/04/23	Goodwick event reminder <a href="#">BIP Hywel Dda on Twitter: "*Cofiwch* Heddiw mae'r digwyddiad ymgynghoriad diweddaraf am y Safle Ysbyty Newydd Hywel Dda yn Wdig. Ymunwch â ni yn Canolfan Gymunedol Phoenix. Rydym ni yma tan 7yh. #SafleYsbytyHywelDda https://t.co/cLOZiWiXnB" / Twitter</a>	40	Like: 0 Retweet: 0 Reply: 0
28/04/23	Questionnaire reminder <a href="#">BIP Hywel Dda on Twitter: "Os hoffech chi rannu eich adborth a'ch barn ar y safleoedd arfaethedig ar gyfer yr Ysbyty Gofal Brys a Gofal wedi'i Gynllunio newydd, cofiwch lenwi ein holiadur. Gallwch ei llenwi'n electronig drwy'r ddolen hon: https://t.co/Z6DPcVLISf https://t.co/B3N8oovMg3" / Twitter</a>	45	Like: 0 Retweet: 1 Reply: 0
01/05/23	Llandovery event reminder <a href="#">BIP Hywel Dda on Twitter: "Os ydych yn byw yn ardal Llanymddyfri, dewch draw i'n digwyddiad nesaf yng Ngwesty'r Castell ar y 9fed o Fai (2-7pm). Rydym am glywed eich barn ar y tri safle posibl ar gyfer ein Hysbyty Gofal Brys a Gofal wedi'i Gynllunio yn y dyfodol. https://t.co/YLe9XI7z54 https://t.co/DQ7vWVIL6L" / Twitter</a>	66	Like: 0 Retweet: 1 Reply: 0
03/05/23	Lampeter event reminder <a href="#">BIP Hywel Dda on Twitter: "Dewch i'n digwyddiad galw heibio ddydd Iau, 11 Mai yn Neuadd Fictoria, Llanbedr Pont Steffan o 2-7pm. Hoffem glywed gennych a chael eich adborth ar y tri safle arfaethedig ar gyfer ein hysbyty Gofal Brys a Gofal wedi'i Gynllunio newydd. https://t.co/YLe9XI86UC https://t.co/imsiniXaDL" / Twitter</a>	267	Like: 2 Retweet: 3 Reply: 0 Bookmark: 1
04/05/23	Online event reminder <a href="#">BIP Hywel Dda on Twitter: "Ar 16 Mai, byddwn yn cynnal sesiwn Zoom ar-lein i glywed eich barn ar y tri safle posibl ar gyfer ein Hysbyty Gofal Brys a Gofal wedi'i Gynllunio newydd. Dewch draw i ddweud eich dweud. Gallwch gofrestru ar gyfer y digwyddiad yma: https://t.co/1ADXE3Fie https://t.co/WHC52ZbMNx" / Twitter</a>	87	Like: 0 Retweet: 1 Reply: 0
04/05/23	Milford Haven Event reminder <a href="#">BIP Hywel Dda on Twitter: "*Cofiwch* Heddiw mae'r digwyddiad ymgynghoriad diweddaraf am y Safle Ysbyty Newydd Hywel Dda yn Aberdaugleddau. Ymunwch â ni yn Canolfan Gymdeithasol Pill. Rydym ni yma tan 7yh. #SafleYsbytyHywelDda https://t.co/cuJZBunjiH" / Twitter</a>	44	Like: 0 Retweet: 0 Reply: 0
11/05/23	Lampeter event reminder <a href="#">BIP Hywel Dda on Twitter: "*Cofiwch* Heddiw mae'r digwyddiad ymgynghoriad diweddaraf am y Safle Ysbyty Newydd Hywel Dda New yn Llanbedr Pont Steffan. Ymunwch â ni yn Neuadd Fictoria. Rydym ni yma tan 7yh. #SafleYsbytyHywelDda https://t.co/AE4VYCnrXO" / Twitter</a>	313	Like: 3 Retweet: 4 Reply: 0
16/05/23	Questionnaire reminder <a href="#">BIP Hywel Dda on Twitter: "*4 Diwrnod i fynd* Dim ond ychydig ddyddiau sydd ar ôl i ddweud eich dweud ar y tri safle posibl ar gyfer ein Hysbyty Gofal Brys a Gofal wedi'i Gynllunio newydd. Dysgwch mwy ar-lein yma: https://t.co/Z54QrqvJQB Gallwch lenwi'r holiadur yma: https://t.co/V3ax0E4bZX https://t.co/Ws7JlTH6Xq" / Twitter</a>	85	Like: 0 Retweet: 1 Reply: 0

17/05/23	<p>Questionnaire reminder</p> <p><a href="#">BIP Hywel Dda on Twitter: "*3 Diwrnod i fynd* Dim ond ychydig ddyddiau sydd ar ôl i ddweud eich dweud ar y tri safle posibl ar gyfer ein Hysbyty Gofal Brys a Gofal wedi'i Gynllunio newydd. Dysgwch mwy ar-lein yma: <a href="https://t.co/Z54QrqvJQB">https://t.co/Z54QrqvJQB</a> Gallwch lenwi'r holiadur yma: <a href="https://t.co/V3ax0E4bZX">https://t.co/V3ax0E4bZX</a> <a href="https://t.co/T9DSayX1F7">https://t.co/T9DSayX1F7</a>" / Twitter</a></p>	87	<p>Like: 1</p> <p>Retweet: 1</p> <p>Reply: 0</p>
18/05/23	<p>Questionnaire reminder</p> <p><a href="#">BIP Hywel Dda on Twitter: "*2 Ddiwrnod i fynd* Dim ond ychydig ddyddiau sydd ar ôl i ddweud eich dweud ar y tri safle posibl ar gyfer ein Hysbyty Gofal Brys a Gofal wedi'i Gynllunio newydd. Dysgwch mwy ar-lein yma: <a href="https://t.co/Z54QrqvJQB">https://t.co/Z54QrqvJQB</a> Gallwch lenwi'r holiadur yma: <a href="https://t.co/V3ax0E4bZX">https://t.co/V3ax0E4bZX</a> <a href="https://t.co/4HuVOEes67">https://t.co/4HuVOEes67</a>" / Twitter</a></p>	21	<p>Like: 0</p> <p>Retweet: 0</p> <p>Reply: 0</p>
19/05/23	<p>Last day / questionnaire reminder</p> <p><a href="#">BIP Hywel Dda on Twitter: "Heddiw yw'r diwrnod olaf i chi gael dweud eich dweud ar y tri safle posibl ar gyfer ein Hysbyty Gofal Brys a Gofal wedi'i Gynllunio newydd. Darganfyddwch yr holl fanylion am y tri safle arfaethedig yma: <a href="https://t.co/Z54QrqvJQB">https://t.co/Z54QrqvJQB</a> Gallwch lenwi'r holiadur yma: <a href="https://t.co/V3ax0E4bZX">https://t.co/V3ax0E4bZX</a> <a href="https://t.co/dz2cM34cl6">https://t.co/dz2cM34cl6</a>" / Twitter</a></p>	18	<p>Like: 0</p> <p>Retweet: 0</p> <p>Reply: 0</p>
19/05/23	<p>Questionnaire ORS glitch</p> <p><a href="#">BIP Hywel Dda on Twitter: "Ymddiheuriadau am unrhyw wall-neges y gallai pobl fod wedi'u cael wrth geisio cyrchu ein holiadur ymgynghori y bore yma. Gallwn gadarnhau ei fod bellach yn ôl ar-lein a bydd yn cau heno am 11:59pm. Gallwch lenwi'r holiadur yma: <a href="https://t.co/V3ax0E4bZX">https://t.co/V3ax0E4bZX</a>" / Twitter</a></p>	17	<p>Like: 0</p> <p>Retweet: 0</p> <p>Reply: 0</p>