



## CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	14 September 2023
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Consideration of the Land Consultation Findings Report and Further Reducing the Number of Shortlisted Sites for the New Urgent and Planned Care Hospital
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Lee Davies, Executive Director of Strategy and Planning
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Paul Williams, Assistant Director of Strategic Planning

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

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

Ar Gyfer Penderfyniad/For Decision

### ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

This report sets out the work undertaken to progress consideration of the shortlist of three sites for the new urgent and planned care hospital, in order that the Board can consider reduction of the shortlist from three sites to two. The three sites are as follows:

- Whitland Spring Gardens (formerly site 12)
- Whitland Tŷ Newydd (formerly site C)
- St Clears (formerly site 17)

The report is presented in six parts as follows:

- Part 1 – Outcome of the Land Consultation
- Part 2 – Equality and Health Impact Assessment (EHIA)
- Part 3 – Technical appraisal
- Part 4 – Commercial appraisal
- Part 5 – Financial appraisal
- Part 6 – Clinical and Workforce appraisal

The report is supported by the following appendices:

- Appendix 1 – Agenda Item Powerpoint Presentation
- Appendix 2 – Land Consultation Final Report, August 2023
- Appendix 2a – Written Responses to Land Consultation
- Appendix 3 – Land Consultation Findings Powerpoint Presentation
- Appendix 4 – Board Conscientious Consideration
- Appendix 5 – Equality and Health Impact Assessment (EHIA)
- Appendix 6 – Consultation Quality Assurance
- Appendix 7 – Technical Report
- Appendix 8 – Technical Risk Assessment
- Appendix 9 – Biophilic Appraisal

Appendix 10 – Commercial Report with Risk Assessment  
Appendix 11 – Town Planning Consenting Strategy  
Appendix 12 – Financial Report

The Board is asked to consider the following in order to decide on the two sites to be taken forward for further consideration:

- The key themes from the land consultation closing report
- Feedback from the stakeholders as part of the conscientious consideration process
- The technical and commercial information
- The financial, clinical and workforce appraisals
- The continuing development of the Equality and Health Impact Assessment (EHIA)

### Cefndir / Background

Following comprehensive public engagement and consultation concluding in 2018, the Health Board has made a long-term commitment to transform to meet the requirements of a social model for health and wellbeing, adopting a new health and care strategy: A Healthier Mid and West Wales - our Future Generations Living Well. This included the need for a new Urgent and Planned Care Hospital serving primarily the south of the Health Board area in an identified zone between Narberth and St Clears. The 2018 consultation did not identify any specific potential locations within the identified zone.

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

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

The Health and Care Strategy was the subject of a Programme Business Case (PBC) endorsed by the Board at its meeting in January 2022 which was subsequently submitted to Welsh Government for scrutiny.

The Health Board met with WG in October 2022 where it was agreed that:

- a clinical strategy review be completed as a condition of the WG endorsement for the PBC and
- a Strategic Outline Case (SOC) be prepared to cover the new urgent and planned care hospital build, Glangwili Hospital and Withybush Hospital.

Board has been regularly appraised of the progress with these two actions and a further update will be provided at the 28 September 2023 Public Board meeting.

Since submission of the PBC, the Health Board has continued to explore possible new hospital sites.

### **Exploring possible new hospital sites**

The overall geographical zone for the new hospital – between Narberth and St Clears – was agreed because it is the area that would mean most of our population is within an hour of an

emergency department (either at this hospital, Bronglais Hospital in Aberystwyth, or Morriston Hospital in Swansea).

The public and partner organisations were asked for site nominations within the zone during an engagement exercise in summer 2021, called Building a Healthier Future After COVID-19.

This, along with our own desktop exercise, helped identify an initial list of 11 potential sites. As part of that engagement the public were also asked what was important for us to consider when shortlisting sites.

Representatives of key stakeholders including the public, staff, and experts have helped us at various stages to undertake the land appraisal process and evaluate each of our potential sites.

A workshop was held in October 2021 to review the long list of 11 sites, made up of public nominations (which included County Councils) and the results of desktop surveys. The result of the workshop was that five sites would be included on the short list.

The five shortlisted sites at the time were called site C Whitland, site J St Clears, site 12 Whitland, site 17 St Clears and site 7 Narberth.

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.

The Board ensured that public stakeholders were in the majority as part of the technical scoring process. In line with best practice, at the two technical appraisal workshops (for the weighting and scoring of the selected criteria), a 52% weighting was placed on the public scores. Attendees were drawn from across the region, including participants with protected characteristics under the Equality Act 2010. The remaining 48% were Health Board invited participants (staff) and other stakeholders. Attendees reviewed each of the sites, before scoring them based on an agreed set of technical criteria. More information on the process can be found at the following link [Board agenda and papers 4th August 2022 - Hywel Dda University Health Board \(nhs.wales\)](#)

At a Public Board Meeting on 4 August 2022, Health Board members assessed all the outputs from the land appraisal groups (see link [Board agenda and papers 4th August 2022 – Hywel Dda University Health Board \(nhs.wales\)](#)) and eliminated two of the five sites for the following reasons:

**St Clears (site J)** – This site had the highest risk score based on the characteristics of the site such as difficulties with emergency access to the site and being more remote from a town centre. It also scored significantly 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 and the potential risk to service viability. In particular there was concern that this site may lead to a reduction in the number of people choosing to have their babies in Hywel Dda, with more opting to access Swansea Bay. This could pose a risk to the critical amount of activity needed to keep services safe and sustainable, including neonatal and paediatric care. It could also have a negative impact on maintaining trainee status and the Health Board's ability to train doctors, nurses, and midwives.

The Board concluded that 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.

Since August 2022 work has continued to progress to provide more technical and commercial details to inform on further decision making in relation to the sites and their suitability for the new hospital.

Following the Board decision, the Public Consultation on the three sites was launched on 23 February 2023, with the key findings provided in this paper and the closing report provided in Appendix 2.

## **Key supporting information**

### **Quality Assurance of the Health Board processes**

The Consultation Institute have been commissioned to undertake Quality Assurance Certification of both the land appraisal process up to August Board 2022 and the public consultation process up to August Board 2023. The Quality Assurance processes involved an assessment against the criteria and principles set out in the Consultation Institute's Consultation Charter and has resulted in:

- Best practice recognition for the land appraisal process
- Best practice for the public consultation process. As the most recent quality assurance certification, this has been included as Appendix 6

### **Presentation and appendices**

The paper is supported by a presentation slide pack which will be utilised to help navigate through the considerable supporting information provided for Board consideration and the appendices as outlined above which include the land consultation closing reports produced by Opinion Research Services and technical and commercial information.

## **Asesiad / Assessment**

### **Part 1 – Outcome of the Land Consultation**

Opinion Research Services (ORS) were appointed to produce the consultation final report (Appendix 2) and advise on and independently manage some aspects of the consultation programme. This included focus groups with residents, interviews with staff, review of written submissions and social media feedback.

The Consultation Institute provided advice, guidance and quality assurance of the consultation process, and on 18 August 2023, following a comprehensive review of all documentation, their conclusion has been the award of best practice recognition. Certificates can be seen in Appendix 6.

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:

- 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 (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 (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.

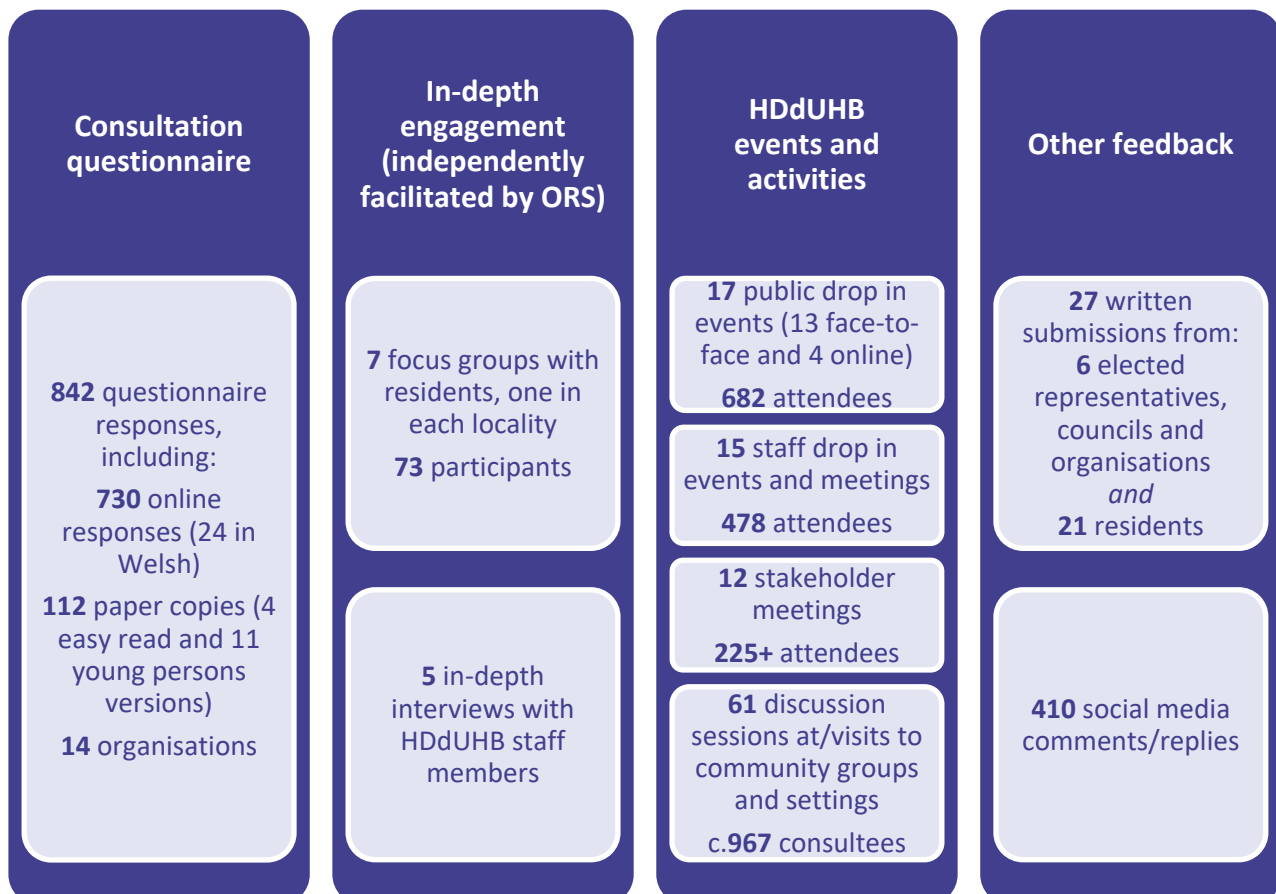
The public consultation asked for views on:

- Which of the three potential sites is the best location for a new hospital and why
- Concerns about any of the three potential sites
- Anything else that should be considered

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. The public were informed that, in this 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 part of the consultation or ongoing technical and commercial work.

Throughout the consultation, stakeholders were directed to the dedicated consultation website where a range of information and resources was available, including technical documents such as reports from the site appraisal process, a transport analysis, and the equality and health impact assessment (EHIA). Paper copies of documentation and the consultation questionnaire were also available, including accessible versions.

The consultation response from the different consultation strands is summarised below.



There were 27 written responses (emails/letters). These are provided in Appendix 2a.

### **Key findings from the land consultation undertaken from 23 February - 19 May 2023**

A presentation of the consultation findings is also provided as part of this paper (Appendix 3) and will be the subject of presentation to Board by ORS.

Views on the site options for the new hospital are provided below and are drawn from the Executive Summary of the land consultation closing report produced by ORS.

#### **Whitland: Spring Gardens**

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.

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.

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**

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.

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.

Once again, some said that siting a large hospital in Whitland could destroy the character of the town, but there were also opinions that a new hospital could be beneficial to Whitland's economy.

#### **St Clears**

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.

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.

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.

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.

### **Views on location by Area**

The full ORS report demonstrates 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.

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. 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.

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.

### **Additional considerations**

#### **Travel and access issues**

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.

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.

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 might be the only viable option for many.

### **Recruitment and retention of staff**

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.

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.

The proposed network of community hubs was generally viewed positively 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.

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**

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.

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**

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**

There was some concern that the development of a new urgent and planned care for the south of Hywel Dda could 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**

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**

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.

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**

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.

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.

Alternative sites suggested during the process are noted later in the report.

### **Views on consultation process**

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.

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.

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**

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.

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)

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.

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.

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.

### **The 'Conscientious Consideration' process in reviewing the land consultation key findings**

The Board met on 24 August 2023 to receive the consultation findings from Opinion Research Services (ORS) and the feedback from the conscientious consideration undertaken by stakeholders. The consultation findings were presented by Opinion Research Services (ORS) chaired by an associate of the Consultation Institute.

During the session the Board considered the individual feedback on individual sites, cross cutting themes and the alternative site suggestions provided. The other alternative locations for the new hospital suggested included:

- The United Counties Showground in Nantyci, Carmarthen
- Canaston Bridge in Pembrokeshire
- Penblewin near Narberth

Two of the alternative sites proposed were previously considered during the 2018 Consultation and were rejected on the grounds of being outside the agreed zone. The location of Penblewin near Narberth was rejected on the grounds of it being too far West in the agreed geographical zone.

It is recommended that the Board formally considers and rejects these site suggestions based on the rationale set out below.

Alternative Site	Previously Considered	Outcome
United Counties Showground in Nantyci, Carmarthen	Yes, during the 2018 Consultation	<p>The new build zone was arrived at following demand, capacity, patient flow and travel time modelling and analysis. This means that multiple potential locations were tested but the proposed 'zone' between Narberth and St Clears was seen to be the best option for patient flows and travel times.</p> <p>This site is outside the agreed zone.</p>
Canaston Bridge in Pembrokeshire	Yes, during the 2018 Consultation	<p>The new build zone was arrived at following demand, capacity, patient flow and travel time modelling and analysis. This means that multiple potential locations were tested but the proposed 'zone' between Narberth and St Clears was seen to be the best option for patient flows and travel times.</p> <p>This site is outside the agreed zone.</p> <p>This rationale has been further reinforced through the clinical appraisal which has determined potential negative impact relating to sites identified at the western end of the agreed zone.</p>
Penblewin near Narberth	Sites in this locality were considered in the 2022 shortlisting process and were discounted on the basis of the clinical appraisal work.	A nominated site in Narberth was discounted by the Board in August 2022 due to the clinical appraisal work undertaken and the concerns that the location would impact on the sustainability of the service. They were concerned that a site may lead to a reduction in the number of people choosing to have their babies in Hywel Dda which could affect neonatal and paediatric care. This could pose a risk to the critical amount of activity

		needed to keep services safe and sustainable. It could also have a negative impact on the number of beds kept and keeping trainee status, which is our ability to train doctors, nurses and midwives.
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The feedback from stakeholders during the conscientious consideration process and the key themes from the Board Conscientious Consideration session on 24 August 2023 is provided in Appendix 4.

The key themes raised and the risk considerations will form part of the programme's risk register which will be reviewed to ensure inclusion of new risks.

### **Part 2 – Equality and Health Impact Assessment**

The Equality and Health Impact (EHIA) is a live document that is updated as part of the ongoing A Healthier Mid and West Wales Programme. The Equality and Health Impact Assessment (EHIA) has been reviewed and updated to reflect feedback from the land consultation.

Key themes from the land consultation are similar to those identified during the public consultation in 2018 and engagement exercise 'Building a Healthier Future after COVID-19' from 10 May to 21 June 2021:

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

The land consultation key themes has been reflected in the revised EHIA provided as an appendix to this report (Appendix 5). The EHIA will remain a live document and will be further updated following Board discussion.

### **Part 3 - Technical Appraisal**

The technical team consisting of Mace, BDP, WSP, Savills and Gleeds was appointed by Hywel Dda University Health Board (HDdUHB) in Autumn 2020 to provide technical advisory support and to form part of the land selection and acquisition team to identify land suitable for the proposed new urgent and planned care hospital as part of the Healthier Mid & West Wales Strategy.

Since August 2022 and the Health Board's decision to reduce the shortlist of sites from five to three, the team has undertaken further technical design activities and studies to support the risk analysis across these three sites.

Technical due diligence work included utility capacity, ecology surveys, highway appraisals, including active travel, drainage assessments, liaisons with the Local Planning Authority as well as topographical surveys. A summary of the technical work undertaken can be seen in Appendix 7 and the detailed work evidencing the summary report is available on request.

The purpose of these technical due diligence activities was primarily to inform the land required in addition to the nominated site areas along with informing an update of the site development costs (is included within the Programme Business Case) and the technical risk analysis of each site.

In the table below, we have shown the outcome of the technical risk analysis of the three shortlisted sites.

The assessment is wholly based upon the opinions of the technical team as a result of a review of the information developed since August 2022.

The assessment is not intended as a definitive or detailed assessment of the risks but is provided with the aim of assisting decision makers understand the level of risk associated with developing each of the sites.

	<u>Whitland Spring Gardens (formerly Site 12)</u>	<u>Whitland Tŷ Newydd (formerly Site C)</u>	<u>St Clears (formerly Site 17)</u>
Risk Score	213	191	230

The key differentiators between sites are the risks associated with the following.

<b>Risk</b>	<b>Whitland Spring Gardens</b>	<b>Whitland Tŷ Newydd</b>	<b>St. Clears</b>
Impact on new development of archaeological remains	✓		
Requirement for land outside red line boundary for drainage attenuation	✓		✓
Capability of site to accommodate future expansion	✓		✓
Existence of 'ransom' strips	✓		
Diversions of existing utilities supplies – delays to programme	✓	✓	
St Clears train station not reopened			✓
St Clears train station location			✓
Mineral rights risk			✓

The detailed risk report is available in Appendix 8.

The technical risk assessment for the sites is a dynamic assessment and will be reviewed as further technical information becomes available. Risks were flagged in the documentation shared during the consultation process and formed part of the discussions during the consultation process.

It should be noted that at this stage nothing material has been identified from a technical perspective that would prevent the development of a new hospital on any of the three shortlisted sites.

## Town Planning Consenting Strategy

Technical town planning and environmental experts have worked with the Health Board to support the works completed to date for the new Urgent and Planned Care Hospital. A multi-disciplinary team provided input into the reports prepared for the Board at its August 2022 meeting. As part of this process pre-application advice was sought from the local planning authorities.

Since August 2022, the Health Board has commissioned the specific input of a Town Planner and the following work has been undertaken:

- Development of a Planning Performance Agreement (PPA) agreed and signed by HDdUHB and CCC. This PPA covers the pre-application period covering the submission of the three Environmental Impact Assessment (EIA) Scoping Opinions and any pre-application discussions which take place between the two parties. The PPA also sets out that this Planning Strategy will be agreed between HDdUHB and CCC.
- Development of a clear strategy for the preparation of a planning application and achieving consent for the Proposed Development. This will set out next steps, including information requirements, further environmental reporting and any secondary consents that may be required. It also includes a review of relevant National and Local planning policy and other legislation that will need to be considered for any future planning application. This is attached for information in Appendix 11 of this report.

It should be noted that at this stage nothing material has been identified to further differentiate between the three shortlisted sites from the town planning perspective.

## Biophilic Assessment

As part of the technical work, a Biophilic Assessment of each site has been undertaken by Professor Geoff Proffitt from Swansea University on behalf of the Health Board. As part of this review, site visits have been conducted. A detailed report is attached as Appendix 9. The key findings of this review concludes that the Tŷ Newydd site provides:

- the least impact upon the existing biodiversity
- the greatest opportunity to improve biodiversity
- would be the best site into which a biophilic designed development might fit

## Part 4 – Commercial Appraisal

In summary the commercial risks associated with each land site is RAG scored and summarised in the table below:

Area of Risk	Whitland Spring Gardens	Whitland Tŷ Newydd	St. Clears
Landowners willingness to treat	Yellow	Green	Yellow
Risk of losing site due to Health Boards timings	Red	Green	Red
Ability to agree terms and price by negotiation on appropriate terms	Red	Green	Yellow

Extent of legal title issues	Red	Green	Green
Extent of essential third party land requirements	Yellow	Yellow	Green
Perceived difficulties in acquiring essential third party rights	Red	Yellow	Green
Extent of suitable expansion land available	Yellow	Green	Red

The Board will further consider commercially-sensitive information which is not in the public domain at the In-Committee Board meeting on 14 September 2023. This information will cover:

- the status of discussions with landowners
- the quantum of current financial offers
- title review and commercial risks

The summary commercial report is available as Appendix 10.

### **Part 5 – Financial Appraisal**

The site comparator additional costs have been developed over the last 12 months and been updated to reflect the technical work that has been undertaken. This information is attached as Appendix 12.

The information provided In-Committee includes the commercially-sensitive land purchase costs, a summary of this is provided in the financial information for Public Board.

A summary of the site development costs is show in the table below

Site	Cost £m	% Differential
Whitland, Spring Gardens	23.960	0%
Whitland, Tŷ Newydd	32.291	34.8%
St Clears	26.522	10.7%

There is a difference between the capital costs associated with the land selection for the sites. However, when these costs are considered with the potential total cost of the New Urgent and Planned Care Hospital, the differences are much less significant, as a percentage of the overall estimated build costs, of the range is £580.0m - £588.3m, or less than 1.5% and is not a strong enough indicator to favour one site over the other.

### **Part 6 – Clinical and Workforce Appraisal**

#### **Summary of the Clinical Appraisal Workstream as reported to Board in August 2022**

The clinical appraisal undertook an objective assessment of the clinical implications of siting the new hospital at the east, west and central locations. The service areas considered to be at risk were the following:

- Paediatric, obstetric and neonatal care services
- Stroke services

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

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

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

The general findings for stroke services were:

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

The conclusions drawn from the evidence and discussions in the decision-making process in August 2022 remain unchanged.

Workforce issues raised during the consultation process are reflected in Part 1 of this report.

### **Summary of Workforce Appraisal as reported to Board in August 2022**

A comprehensive workplan was developed to undertake the workforce appraisal.

This included:

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

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

Impact on staff was noted based on those who traditionally are able to work locally to their homes and those who reasonably expect to travel linked to their professions. Different strategies to mitigate risk will be adopted as work progresses. The workforce appraisal has found it inconclusive to say that a site further east or west in the zone would have a greater impact to secure a sustainable workforce.

The conclusions drawn from the evidence and discussions in the decision-making process in August 2022 remain unchanged

Workforce issues raised during the consultation process are reflected in Part 1 of this report.

### **Risk Considerations**

From all the information received the programme risk register will be reviewed to ensure inclusion of new risks e.g., Welsh Ambulance Services NHS Trust (WAST) have highlighted the



need to consider the Non-Emergency Patient Transport Service (NEPTS) as part of the programme of work.

### **Moving forward with The Healthier Mid and West Wales Programme**

An update on the programme will be provided to Public Board on 28 September 2023 which will include an update on:

- The clinical strategy review undertaken by the Nuffield Trust
- Verbal update on the outcome of the meeting with the WG Infrastructure Investment Board scheduled for 21 September and an update on the process for Ministerial endorsement of the Programme Business Case.

### **Argymhelliad / Recommendation**

The Board is asked to:

- **NOTE** the 'Best Practice' Quality Assurance certification achieved from the Consultation Institute
- **CONSIDER** the key findings from the Land Consultation closing report and following the Board's period of conscientious consideration.
- **DECIDE** to reject the three alternative site suggestions based on the rationale provided.
- **NOTE** the ongoing development of the Equality and Health Impact Assessment (EHIA)
- **CONSIDER** the evidence presented in relation to technical and commercial risks
- **CONSIDER** the impact of the finance report
- **CONSIDER** reduction of short list of sites for the urgent and planned care hospital from three sites to two sites and **DECIDE** which two sites to take forward

<b>Amcanion: (rhaid cwblhau)</b>	
<b>Objectives: (must be completed)</b>	
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Risk 1196 - Insufficient investment in facilities/equipment/digital infrastructure (risk score 16)
Parthau Ansawdd: Domains of Quality <a href="#">Quality and Engagement Act (sharepoint.com)</a>	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: <a href="#">Quality and Engagement Act (sharepoint.com)</a>	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	5. Safe sustainable, accessible and kind care
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply

Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a>	9. All HDdUHB Well-being Objectives apply
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<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Contained in the body of the report
Rhestr Termiau: Glossary of Terms:	Contained in the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Contained in the body of the report

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