

GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Abertawe Bro Morgannwg  
University Health Board

Our Ref: HL/lmf

Date: 21<sup>st</sup> February 2013

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Mr William Powell AM  
Chair, Petitions Committee  
National Assembly for Wales  
Cardiff Bay  
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Dear Mr Powell

Thank you for asking us to respond to a petition from Ian Spiller regarding possible changes to service at Princess of Wales Hospital Bridgend.

You have asked us:

- 1. Our views on the petition**
- 2. What consultation has been undertaken and how this consultation will inform the development of plans; and**
- 3. When a final decision is likely to be made on services in Bridgend**

1. In **Together for Health**, Welsh Government required every Health Board to produce plans to ensure that its services would be safe and sustainable in the future, in the face of unprecedented challenges and with the objective of creating services which are comparable with the very best. In ABMU we responded to that requirement by establishing a comprehensive year long review of all of our services involving over 340 people, both from within ABMU and also wider stakeholders and partners. This programme, lead by clinicians is called **Changing for the Better**.

At the outset we, and other Health Boards in South Wales, recognised that there are some services that could not be planned within a single Health Board's boundaries or resources because of the particular challenges that they face. These services are: Neonatal Critical Care, In-patient Paediatric Care, Emergency Medicine (A&E), Obstetrics and also the Emergency Ambulance Service. A collaborative programme

of work with an independent chairman was established between Health Boards in South Wales to consider these: the “**South Wales Programme**”. Over 300 clinicians from across South Wales including from ABMU have taken part in a review of those services, reflecting Royal College and other standards, manpower predictions and best practice from our own and other healthcare systems. We also reflected on the evidence in the “Case for Change” which Professor Marcus Longley published in the summer of 2012.

In discussion with our Community Health Council (CHC), the ideas and proposals from Changing for the Better and the South Wales Programme have been subject to a period of 12 weeks pre-consultation engagement which started on 26<sup>th</sup> September and ended on 19<sup>th</sup> December 2012. The results of that are now being evaluated and further work conducted. Our CHC’s will advise us on which aspects of these ideas and proposals should be taken forward into formal consultation later this year.

In our engagement documentation (“Why your local NHS needs to change – have your say!”) we set out a case for providing the small number of services considered by the South Wales Programme in fewer hospitals than happens now and that because of co-dependencies these should be grouped together into four or five regional centres. This would have implications for Princess of Wales Hospital which could expand its role to become a regional centre for a wider geographical catchment than now. Alternatively the regional centre role for the Bridgend population could be provided from another centre: the Royal Glamorgan Hospital, Llantrisant and/or Prince Charles Hospital, Merthyr Tydfil. No decision has been made on the number or location of the regional centres at this stage. The majority of patients would continue to access services in the existing hospitals in South Wales, whatever the outcome of the location of the regional centres.

Therefore the petitioners are incorrect to state that we have “announced changes”, nor is it likely that the population of Bridgend would have to travel to Swansea for those services even if Princess of Wales was not designated as a regional centre. It is the overwhelming professional view that it is essential that changes are made in how these services are provided in South Wales if we are to be able to staff them properly in the future and to comply with the best standards of care. One of the main drivers for change is medical manpower availability which cannot be addressed by additional funding – the changes that have been taking place over recent years in workforce demographics mean that posts cannot be filled with high quality substantive appointments despite the posts being fully funded.

The proposals under discussion seek to make these services safer and of higher quality than now: careful consideration is being given to balancing local access against the opportunities to deliver services that meet best practice standards, provide greater senior decision making and are not dependent on large numbers of temporary staff to remain open.

We welcome the interest of the petitioners and encourage them to continue to engage with us as we and the other Health Boards in South Wales bring forward plans for consultation later this year. We do not believe that the status quo is an acceptable or safe option however we have not reached any decision on the future role of Princess of Wales, Royal Glamorgan or Prince Charles Hospitals.

2. There has been no consultation at this stage because we wished to engage with citizens and staff on the ideas and possible proposals before we developed specific plans. This is to ensure that we have identified the best ideas and solutions to the challenges that we face and so that we are confident that we understand the views of citizens, service users and stakeholders. This is considered best practice by Welsh Government and the process we have adopted for this in ABMU was endorsed by the Consultation Institute and the Welsh Audit Office.

Engagement was facilitated by the publication of a booklet "Why Your Local NHS Needs to Change: Have Your Say" and a shorter signposting leaflet which were distributed widely in English and Welsh and made available in English and Welsh Braille, online, easy read and large text. Short videos with and without bilingual subtitling were also published and also a British Sign Language Version. Nineteen all day public information events were held across the ABMU area during the engagement period offering public and staff the opportunity to speak face to face with us about the ideas under discussion. A special event was held for the three Youth Councils in our area and also for Maternity Service users. Over 50 staff information events ensured a dialogue with our workforce. Meetings with our Partnership Forum, Local Negotiating Committee of the BMA, Health Professions Forum and GP and Practice Managers we also held. Internet and intranet sites supported this engagement and print, radio and social media were used to promote awareness.

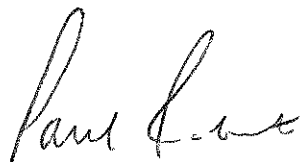
Mr Spillar held a public meeting of his own in Bridgend and we ensured that ABMU clinicians and managers attended that, to assist the discussion.

All citizens and staff were encouraged to submit their views using a questionnaire that could be completed online or in paper and we invited email, written and verbal contributions. All of these are being analysed and the results will be shared with our Boards, the South Wales Programme Board and the CHCs in the next few weeks. The themes and views we have captured through engagement are being considered by the Changing for the Better work streams (who developed the ideas) and also by the South Wales Programme, and these will shape the final proposals that will emerge and also help identify the information that will be required to explain and support these decisions.

3. We anticipate that the proposals from the South Wales Programme and some of the proposals from Changing for the Better will be subject to formal consultation: however this decision has not been made by the CHC's who will determine this. They have indicated that any consultation should run for 8 weeks. The final timetable

for this is dependent on a number of factors. Further work in the South Wales Programme and Changing for the Better is carrying on, not least to reflect what has been heard in engagement. A final conclusion therefore is not likely until later in the current calendar year. ABMU will publish the timetable for any consultation and encourage participation as soon as the details for any consultation have been agreed with CHC's.

Yours sincerely



**PAUL ROBERTS**  
**CHIEF EXECUTIVE**